

2011 GEAUGA COUNTY

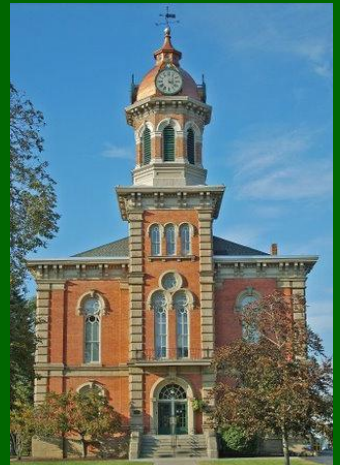
Community Health Assessment



Geauga County Health District



United Way Services
of Geauga County



Foreword

The *Partnership for a Healthy GEAUGA* is pleased to present the 2011 Geauga County Community Health Assessment. This report provides a snapshot of the health of our community that was collected in three separate surveys, including children 0 to 11-years, youth 12 to 18-years, and adults 18-years and older. Wherever possible, local findings have been compared to other local, regional, state, and national data.

The basis for these surveys was the Centers for Disease Control and Prevention's (CDC) National Survey of Children's Health (NSCH), Youth Risk Behavior Surveillance System (YRBSS), and Behavioral Risk Factor Surveillance Survey (BRFSS). In addition to these CDC surveys, planning partners identified local health indicators that were included in the questionnaires.

The statistics contained in this report provide valid and reliable measures of the collective health of Geauga County residents. This document will guide the *Partnership for a Healthy GEAUGA* over the next few years to strengthen the local public health system, and provide programs and services that will improve the health and well-being of Geauga County residents.

Over the next few months, planning partners will use the assessment to identify priorities for Geauga County to be used in strategic planning and the creation of a health improvement plan. These strategies will focus on the quality of life, wellness, access to care, and unmet health needs of residents in Geauga County.

This report would not exist without the financial support of many public and private agencies, as well as the dedicated work of planning partners who took the time to carefully plan and carry out the assessment. Special thanks are given to Britney Ward of the Hospital Council of Northwest Ohio for guiding us through the health assessment process. We would also like to thank local school officials who assisted in the planning process and set aside time valuable time that allowed 6th to 12th grade students to participate in this important project.

While this effort represents the first primary data collection of many health indicators in Geauga County, it is our intent to periodically repeat this process in an effort to measure improvements and identify emerging issues in population health. It is also our hope that this assessment will stimulate new collaborations among public and private agencies during economically challenging times.

Sincerely,

The Partnership for a Healthy GEAUGA

Acknowledgements

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Center for Health Affairs representing University Hospitals Geauga Medical Center
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Gauga Family First Council
Gauga County Board of Mental Health & Recovery Services
Gauga County Job and Family Services
Gauga County Board of Health
Ohio Department of Health
Townships: Auburn, Burton, Chardon Chester, Claridon, Hambden, Middlefield, Montville,
Munson, Russell, Thompson, and Troy
Village of Burton
City of Chardon

Commissioned by: The Partnership for a Healthy GEAUGA

Geauga County Board of Developmental Disabilities	Chagrin Falls Park Community Center
Geauga County Board of Health	Chardon Community Action Team
Geauga County Board of Mental Health & Recovery Services	Chardon Local School District
Geauga County Clerk of Courts	Family Planning Association of NE Ohio, Inc.
Geauga County Commissioners	Kent State University Geauga
Geauga County Department on Aging	Kent State University College of Public Health
Geauga County Educational Service Center	Kenston Local School District
Geauga County Health District	Lake-Geauga Head Start
Geauga County Health District Advisory Council	Ledgemont Local School District
Geauga County Job and Family Services	Mental Health Association
Geauga Park District	NAMI Geauga
Geauga County Public Library System	Ravenwood Mental Health Center
Geauga County Sheriff	Geauga County Residents
Geauga County Township Association	Siracki Realty
Arthritis Foundation of NE Ohio	Starting Point
Berkshire Local School District	Teen Institute
Big Brothers Big Sisters	United Way Services of Geauga
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Geauga County Community Assessment

Executive Summary

This executive summary provides an overview of health-related data for Geauga County adults (19 years of age and older), youth (ages 12 through 18), and children (ages 0-11) who participated in a county-wide health assessment survey during 2011. 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) and the *National Survey of Children's Health* (NSCH) developed by the Child and Adolescent Health Measurement Initiative. 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, adolescents, and parents within Geauga 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

Four survey instruments were designed and pilot tested for this study: one for adults, one for adolescents, one for parents of children ages 0-5, and one for parents of child ages 6-11. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of NW Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the BRFSS. The majority of the survey items for the adolescent survey were derived from the YRBSS. The majority of the survey items for the parents of children 0-11 were derived from the NSCH. This decision was based on being able to compare local data with state and national data.

The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Geauga County. During these meetings, banks of potential survey questions from the BRFSS, YRBSS, and NSCH surveys were reviewed and discussed. Based on input from the Geauga County planning committee, the Project Coordinator composed drafts of surveys containing 115 items for the adult survey, 67 items for the adolescent survey, 73 items for the 0-5 survey, and 73 items for the 6-11 survey. The drafts were reviewed and approved by health education researchers at the University of Toledo.

Sampling

Adult Survey

Adults ages 19 and over living in Geauga County were used as the sampling frame for the adult survey. Since U.S. Census Bureau age categories do not correspond exactly to this age parameter, the

Primary Data Collection Methods

investigators calculated the population of those 18 years and over living in Geauga County. There were 69,152 persons ages 18 and over living in Geauga County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding confidence interval 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 382 responding adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Geauga County was obtained from American Clearinghouse in Louisville, KY.

Children 0-5 and 6-11 Surveys

Children ages 0-11 residing in Geauga County were used as the sampling frames for the surveys. Using U.S. Census Bureau data on the population of children ages 0-11, living in Geauga County, it was determined that 6,482 children ages 0-5 and 8,372 children ages 6-11 reside in Geauga County. The investigators conducted a power analysis based on a post-hoc distribution of variation in responses (70/30 split) to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error). Because many of the items were identical between the 0-5 and 6-11 surveys, these items were combined to analyze data for children 0-11. The sample size required to generalize to children ages 0-11 was 369.

The random sample of mailing addresses of parents from Geauga County was obtained from Hugo Dunhill Mailing Lists, Inc. in New Rochelle, NY. They select a pool of adults based off of a number of sources which includes, birth records, education records, direct response data, etc.

Procedure

Adult Survey

Prior to mailing the survey to adults, an advance letter was mailed to 800 adults in Geauga County. This advance letter was personalized, printed on Partnerships for a Healthy Geauga stationery and was signed by Robert Wiesdack, Health Commissioner, Geauga County Health District. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents’ confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Two weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Partnerships for a Health Geauga stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately two weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent two weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent. The response rate for the mailing was 53% (n=405). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

Primary Data Collection Methods

Adolescent Survey

Schools and grades were randomly selected. Each student in that grade had to have an equal chance of being in the class that was selected, such as a general English or health class. Classrooms were chosen by the school principal. Passive permission slips were mailed home to parents of any student whose class was selected to participate. The response rate was 97% (n=433). The survey contained 67 questions and had a multiple choice response format.

Children 0-5 and 6-11

Prior to mailing the survey to parents of 0-11 year olds, an advance letter was mailed to 1600 parents in Geauga County. This advance letter was personalized, printed on Partnerships for a Healthy Geauga stationery and was signed by Robert Wiesdack, Health Commissioner, Geauga County Health District. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

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

Because much of the output combines identical items from the 0-5 and the 6-11 surveys, the number of returned surveys needed for power of the combined population (n=14,854) was 369 and this was exceeded by having a combined 507 surveys.

Data Analysis

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

Limitations

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Geauga County adult assessment had a high response rate (53%). 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 Geauga County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

Primary Data Collection Methods

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

Third, this was the first time that parents of children ages 0-11 were surveyed in Geauga County. Being a new instrument, there may have been questions that would be worded differently or additional items that would be asked the next time this assessment is completed.

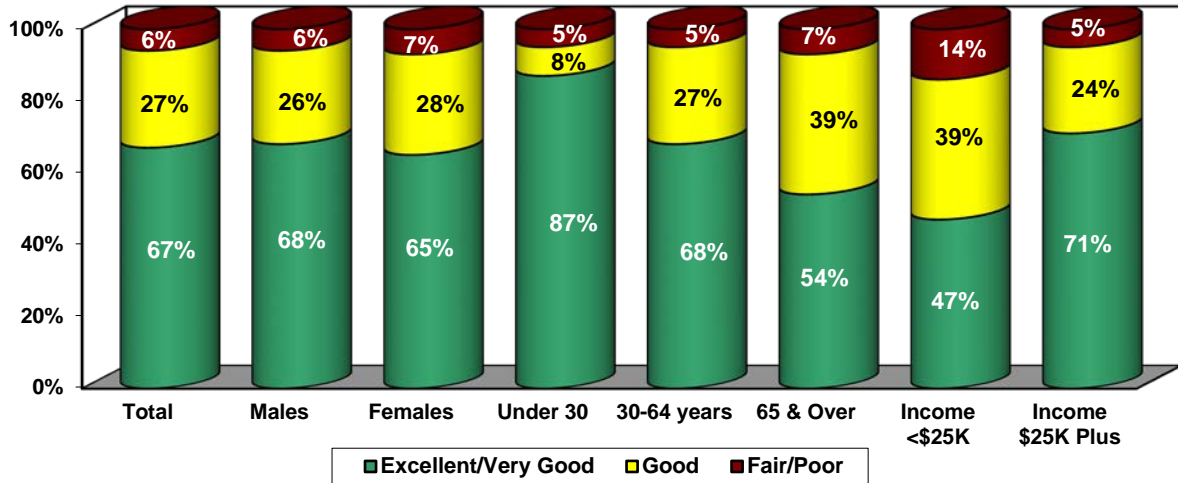
Finally, this survey asked parents questions regarding their young children. Should enough parents feel compelled to respond in a socially desirable manner which is not consistent with reality, this would represent a threat to the internal validity of the results.

Data Summary

Health Perceptions

In 2011, two-thirds (67%) of the Geauga County adults rated their health status as excellent or very good. Conversely, 6% of the adults, increasing to 14% of those with incomes less than \$25,000, described their health as fair or poor.

Geauga County Adult Health Perceptions*

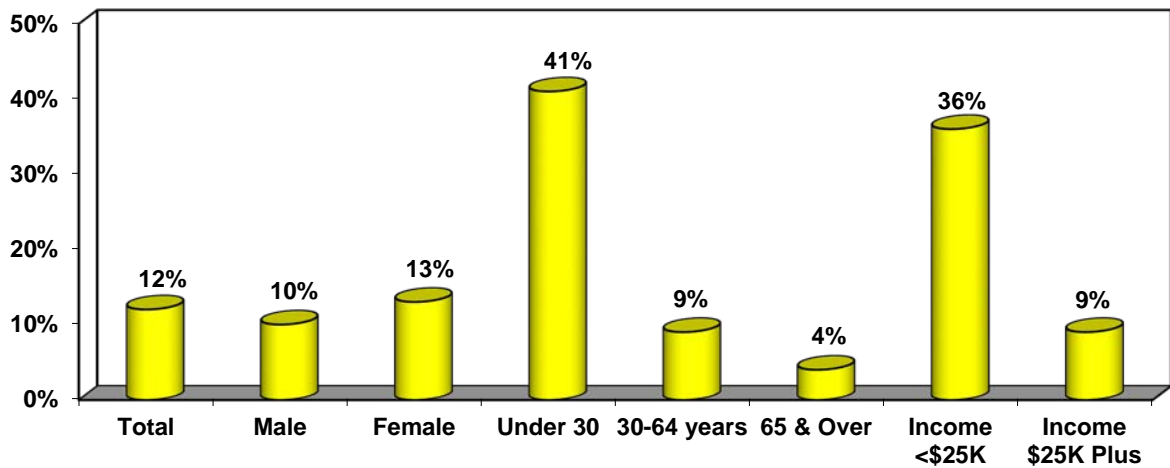


*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"

Health Care Coverage

The 2011 health assessment data has identified that 12% of Geauga County adults were without health care coverage. Those most likely to be uninsured were adults under age 30 and those with an income level under \$25,000. In Geauga County, 7.6% of residents live below the poverty level. (Source U.S. Census, American Community Survey 5 Year Estimates, 2006-2010)

Uninsured Geauga County Adults



Data Summary

Health Care Access

The 2011 health assessment project identified that 12% of Geauga County adults could not access the health care they needed at some time in the past year because of the cost. 57% reported they had visited a doctor for a routine checkup within the last year.

Cardiovascular Health

Heart disease (26%) and stroke (5%) accounted for 31% of all Geauga County adult deaths from 2006-2008 (Source: ODH Information Warehouse). The 2011 Geauga County health assessment found that 2% of adults had a heart attack and 2% had a stroke at some time in their life. 30% of Geauga County adults have been diagnosed with high blood pressure, 36% have high blood cholesterol, and 22% were obese, three known risk factors for heart disease and stroke.

Cancer

Ohio Department of Health statistics indicate that from 2000-2008, a total of 1,586 Geauga County residents died from cancer, the leading cause of death in the county. 12% of Geauga County adults were diagnosed with cancer in 2011. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

Diabetes

In 2011, 6% of Geauga County adults had been diagnosed with diabetes.

Arthritis

According to the Geauga County survey data, 34% of Geauga County adults were diagnosed with arthritis. According to the 2009 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they have arthritis.

Asthma

According to the Geauga County survey data, 12% of Geauga County adults and 20% of Geauga County youth had been diagnosed with asthma.

Geauga County Leading Types of Death 2006-2008

Total Deaths: 2,151

1. Cancers (27% of all deaths)
2. Heart Disease (26%)
3. Chronic Lower Respiratory Diseases (5%)
4. Stroke (5%)
5. Alzheimer's Disease (4%)

(Source: ODH Information Warehouse, updated 4-15-10)

Geauga County Incidence of Cancer, 2007 All Types: 458 cases

- ❖ Prostate: 92 cases (20%)
- ❖ Breast: 71 cases (16%)
- ❖ Lung and Bronchus: 46 cases (10%)
- ❖ Colon and Rectum: 39 cases (9%)
- ❖ Melanoma of skin: 17 cases (4%)

From 2006-2008, there were 580 cancer deaths in Geauga County.

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse)

Diabetes Facts

- ❖ Diabetes was the 6th leading cause of death in Geauga County from 2006-2008.
- ❖ Diabetes was the 7th leading cause of death in Ohio from 2006-2008.
- ❖ From 2006-2008, the Geauga County age-adjusted mortality rate per 100,000 for diabetes was 29.3 deaths for males (34.4 Ohio) and 15.8 (24.3 Ohio) deaths for females.

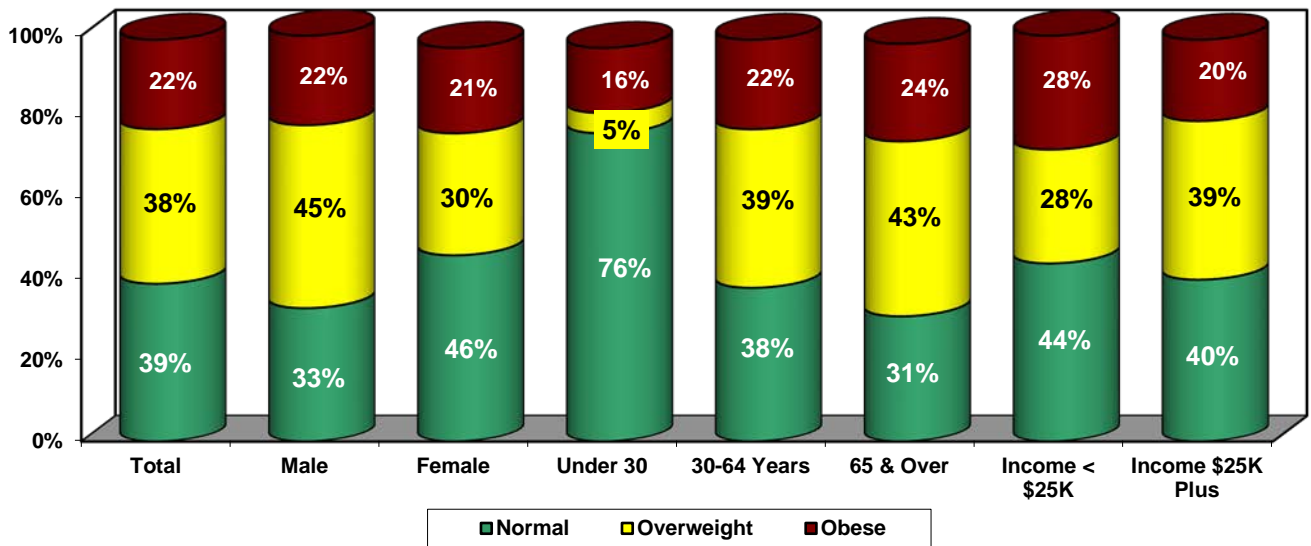
(Source: ODH, Information Warehouse, updated 4-15-10)

Data Summary

Adult Weight Status

The 2011 Health Assessment project identified that 60% of Geauga County adults were overweight or obese based on BMI. The 2010 BRFSS indicates that 30% of Ohio and 28% of U.S. adults were obese by BMI. Just over one-fifth (22%) of Geauga County adults were obese. More than two-fifths (44%) of adults were trying to lose weight. 22% of adults had not been participating in any physical activities or exercise in the past month.

Gauga County Adult BMI Classifications



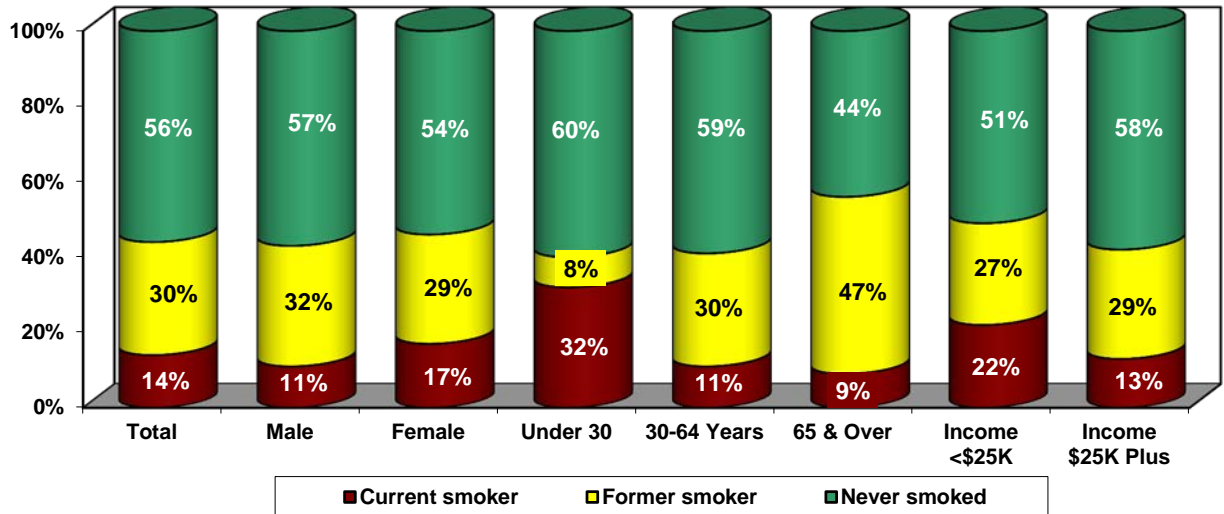
(Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight)

Adult Tobacco Use

In 2011, 14% of Geauga County adults were current smokers and 30% were considered former smokers. In 2011, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of disease and early death in the world, accounting for approximately 5.4 million premature deaths each year. ACS estimated that tobacco use would be linked to approximately one in five deaths in the U.S. *(Source: Cancer Facts & Figures, American Cancer Society, 2011)*

Data Summary

Geauga County Adult Smoking Behaviors

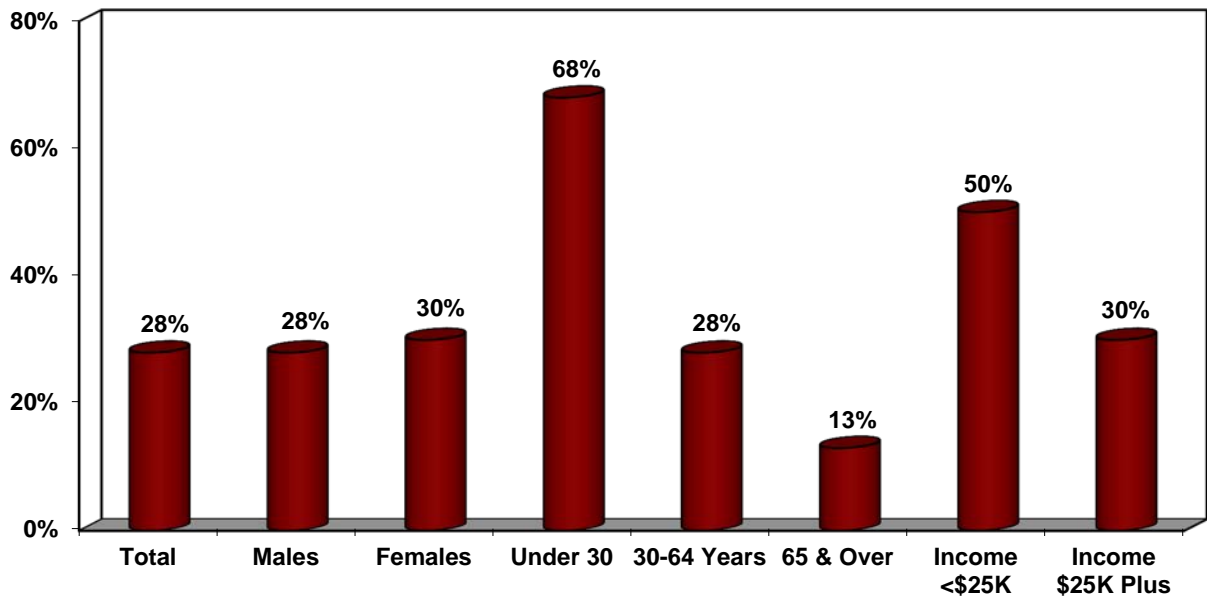


*Respondents were asked:
 "Have you smoked at least 100 cigarettes in your entire life?
 If yes, do you now smoke cigarettes everyday, some days or not at all?"*

Adult Alcohol Consumption

In 2011, the health assessment indicated that 21% of Geauga County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 28% of adults who drank had five or more drinks on one occasion (binge drinking) in the past month. Six percent of adult drinkers drove after having perhaps too much to drink.

Geauga County Adult Drinkers Who Binge Drank in Past Month*



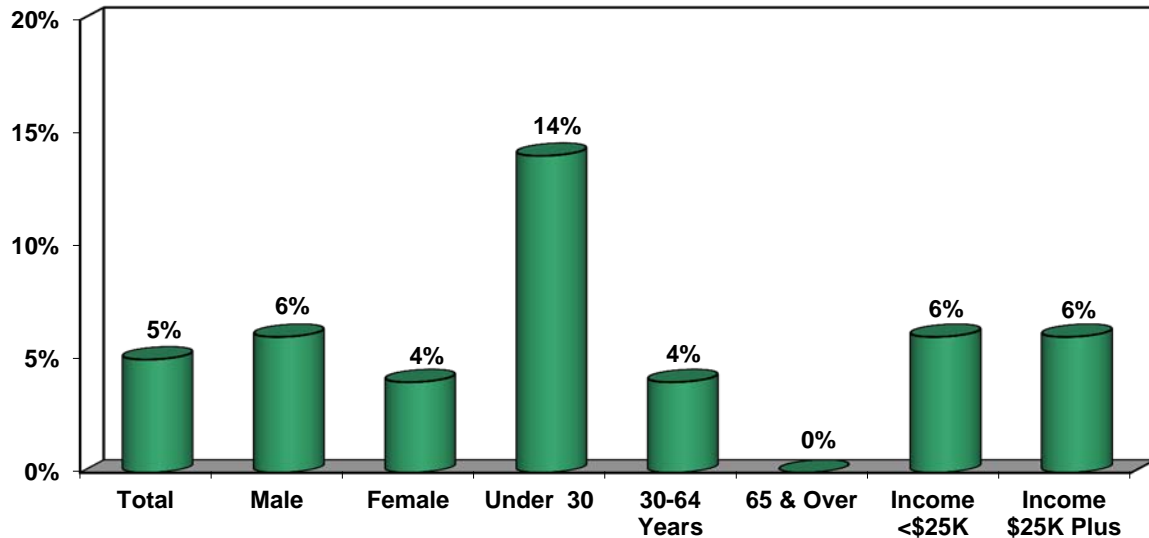
**Based on adults who have drunk alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion.*

Data Summary

Adult Marijuana and Other Drug Use

In 2011, 5% of Geauga County adults had used marijuana during the past 6 months. 1% of adults used other recreational drugs. 5% of adults misused medications.

Geauga County Adult Marijuana Use in Past 6 Months

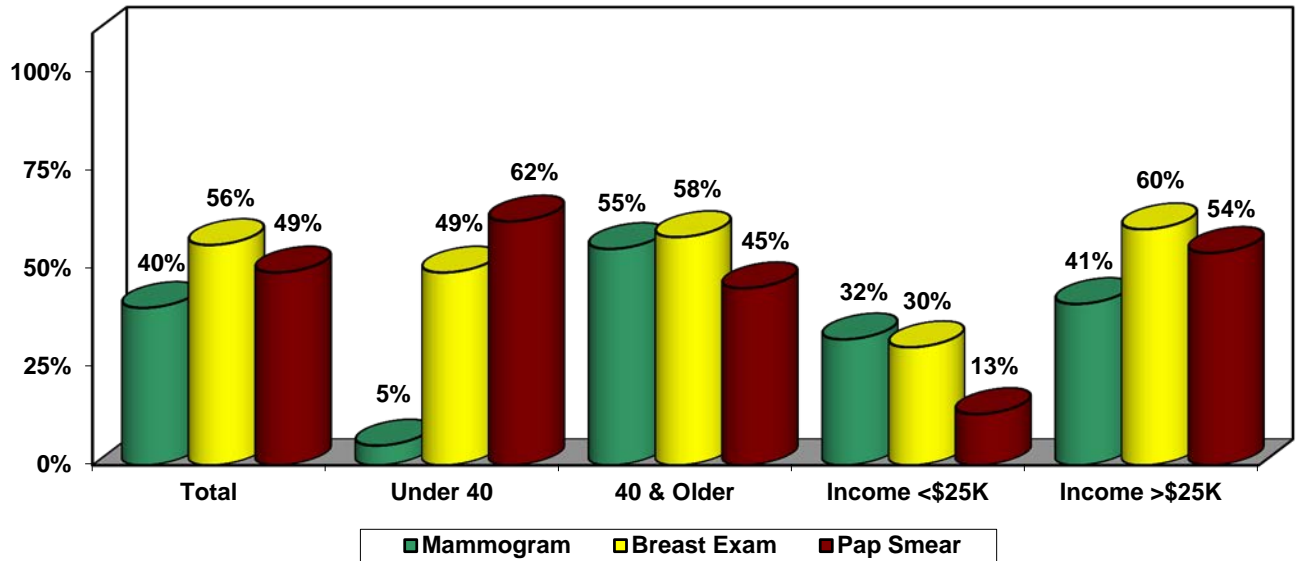


Women's Health

In 2011, more than half (55%) of Geauga County women over the age of 40 reported having a mammogram in the past year. 94% of Geauga County women have had a clinical breast exam and 96% have had a Pap smear to detect cancer of the cervix in the past year. The health assessment determined that 2% of women had a heart attack, and 1% had a stroke at some time in their life. More than one-quarter (26%) had high blood pressure, 32% had high blood cholesterol, 21% were obese, and 17% were identified as smokers, known risk factors for cardiovascular diseases.

Data Summary

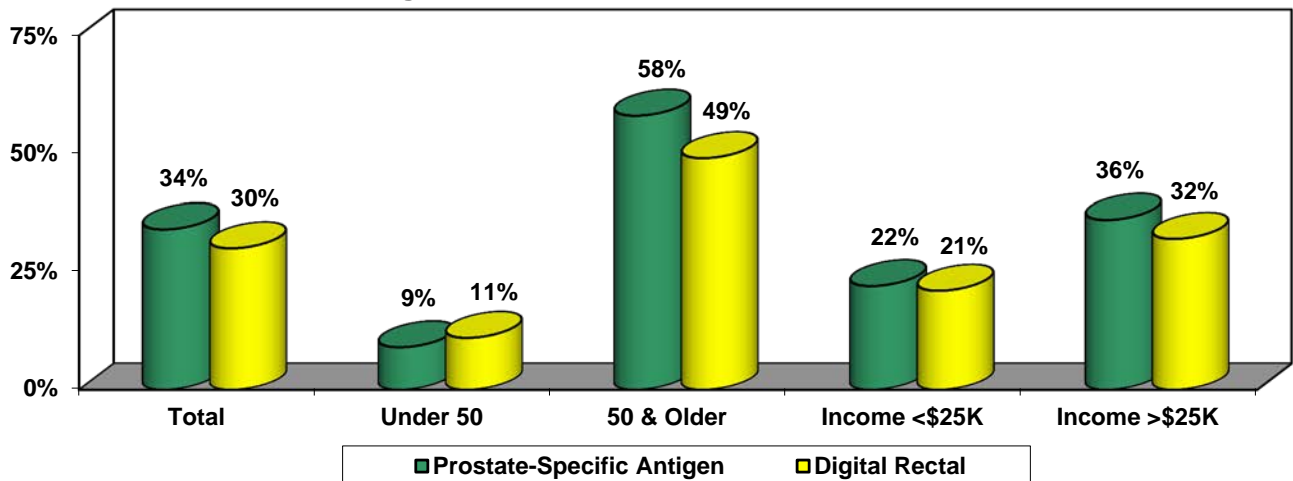
Geauga Women's Health Exams Within the Past Year



Men's Health

In 2011, more than half (58%) of Geauga County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. Nearly half (49%) of males over the age of 50 had a digital rectal exam in the past year. Major cardiovascular diseases (heart disease and stroke) accounted for 32% and cancers accounted for 28% of all male deaths in Geauga County from 2006-2008. The health assessment determined that 3% of men had a heart attack, and 2% had a stroke at some time in their life. Almost one-third (32%) of men had been diagnosed with high blood pressure, 41% had high blood cholesterol, and 11% were identified as smokers, which, along with obesity (22%), are known risk factors for cardiovascular diseases.

Geauga Men's Health Exams Within the Past Year



Data Summary

Preventive Medicine and Health Screenings

More than two-fifths (41%) of adults had a flu shot during the past 12 months. 67% of adults 50 or older had received a colonoscopy or sigmoidoscopy in the past 5 years.

Environmental Health

Insects and mold were the two most important perceived environmental health issues that threatened Geauga County adults' health in the past year.

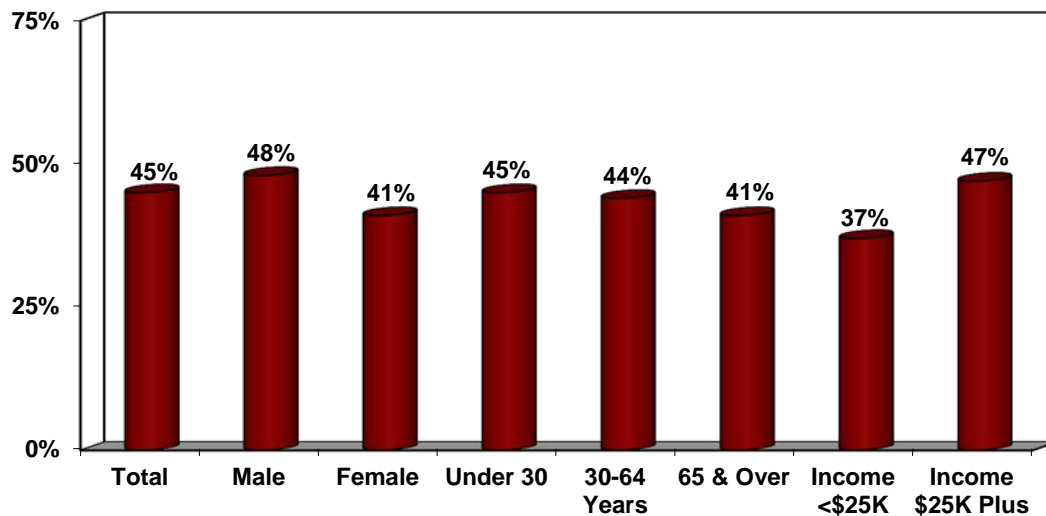
Adult Sexual Behavior & Pregnancy Outcomes

In 2011, almost three-fourths (72%) of Geauga County adults had sexual intercourse. Five percent of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs (*Source: CDC, STDs in Adolescents and Young Adults, 2009 STD Surveillance*).

Social Context and Safety

The health assessment identified that 45% of Geauga County adults kept a firearm in or around their home. Four percent of adults were threatened and 5% were abused in the past year.

Geauga County Adults With a Firearm in the Home



Data Summary

Quality of Life

One-fifth (20%) Geauga County adults in 2011 reported they were limited in some way because of a physical, mental or emotional problem.

Adult Mental Health and Suicide

In 2011, 2% of Geauga County adults considered attempting suicide. 8% of adults felt so sad or hopeless almost every day for two or more weeks that they stopped doing usual activities.

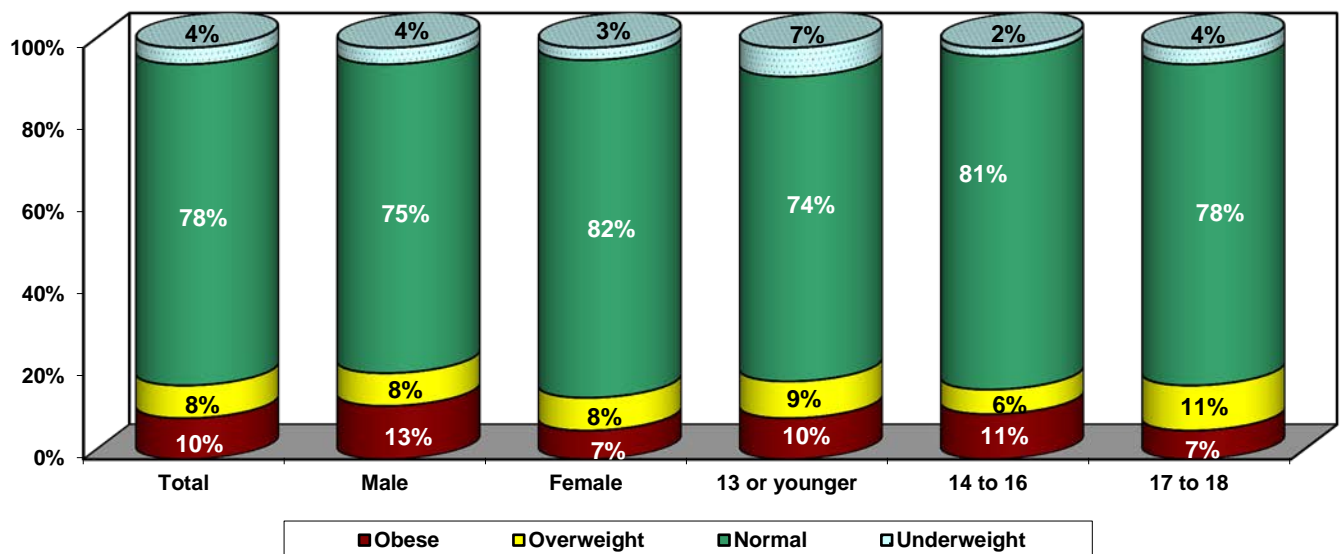
Oral Health

The 2011 health assessment project has determined that more than two-thirds (68%) of Geauga County adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months. More than three-fourths (76%) of Geauga youth had visited the dentist for a check-up, exam, teeth cleaning, or other dental work in the past year.

Youth Weight Status

The 2011 Health Assessment identified that 10% of Geauga County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 23% of Geauga County youth reported that they were overweight. 75% of youth were exercising for 60 minutes on 3 or more days per week.

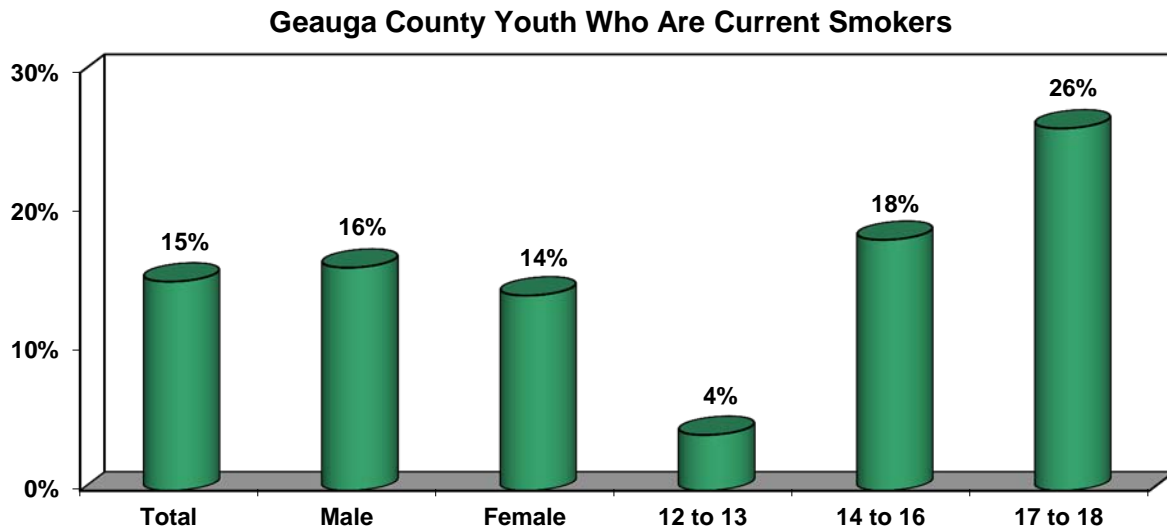
Geauga County Youth BMI Classifications



Data Summary

Youth Tobacco Use

The 2011 health assessment identified that 15% of Geauga County youth (ages 12-18) were smokers, increasing to 26% of those who were 17-18 years old. Overall, 11% of Geauga County youth indicated they had used chewing tobacco in the past year.



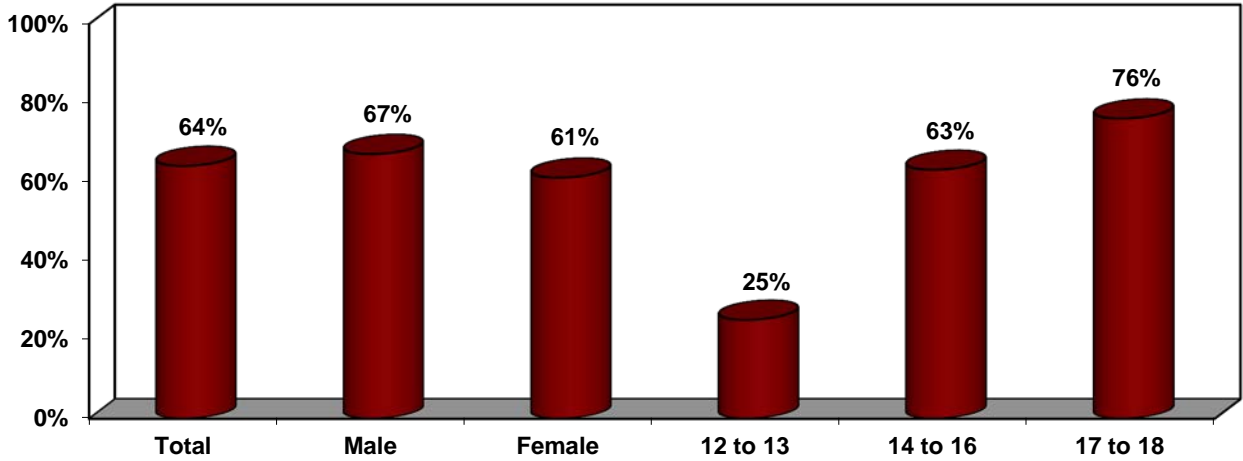
Current smokers are those who have smoked at any time during the past 30 days.

Youth Alcohol Consumption

In 2011, the health assessment results indicated that 51% of Geauga County youth had drunk at least one drink of alcohol in their life, increasing to 71% of youth over the age of 17. 31% of those who drank took their first drink by the age of 12. Nearly one-third (32%) of all Geauga County youth and 52% of those 17-18 years had at least one drink in the past 30 days. Almost two-thirds (64%) of the youth who reported drinking in the past 30 days had at least one episode of binge drinking. 14% of all youth drivers had driven a car in the past month after they had been drinking alcohol.

Data Summary

Geauga County Youth Current Drinkers Binge Drinking in Past Month*

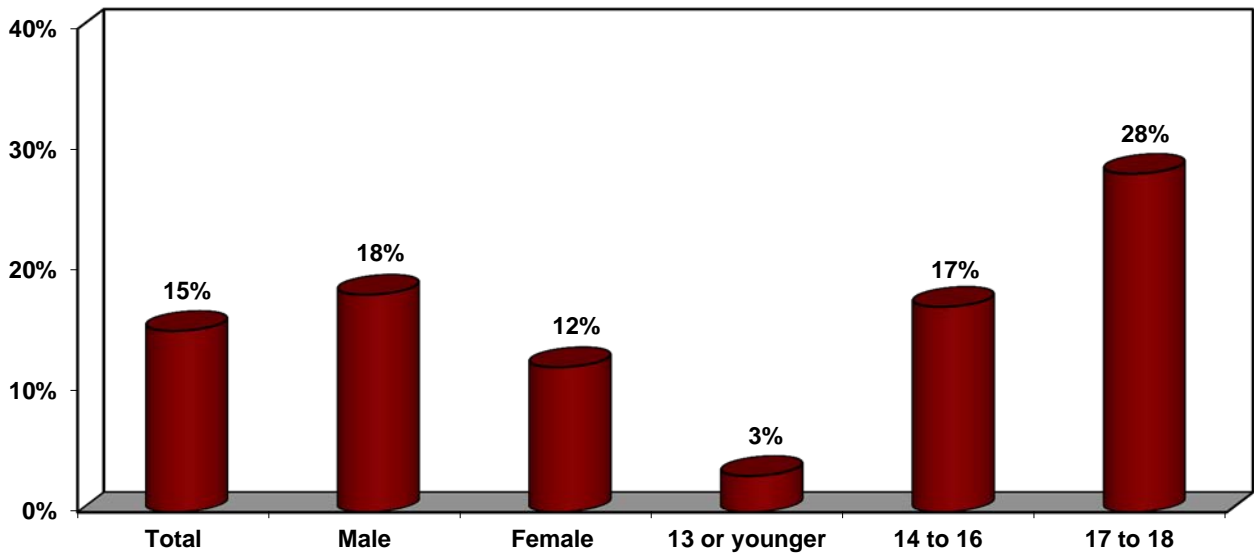


*Based on all current drinkers. Binge drinking is defined as having five or more drinks on an occasion.

Youth Marijuana and Other Drug Use

In 2011, 15% of Geauga County youth had used marijuana at least once in the past 30 days, increasing to 28% of those over the age of 17. During the past 12 months, 13% of Geauga County youth had someone offer, sell, or give them an illegal drug on school property.

Geauga County Youth Who Used Marijuana in the Past Month

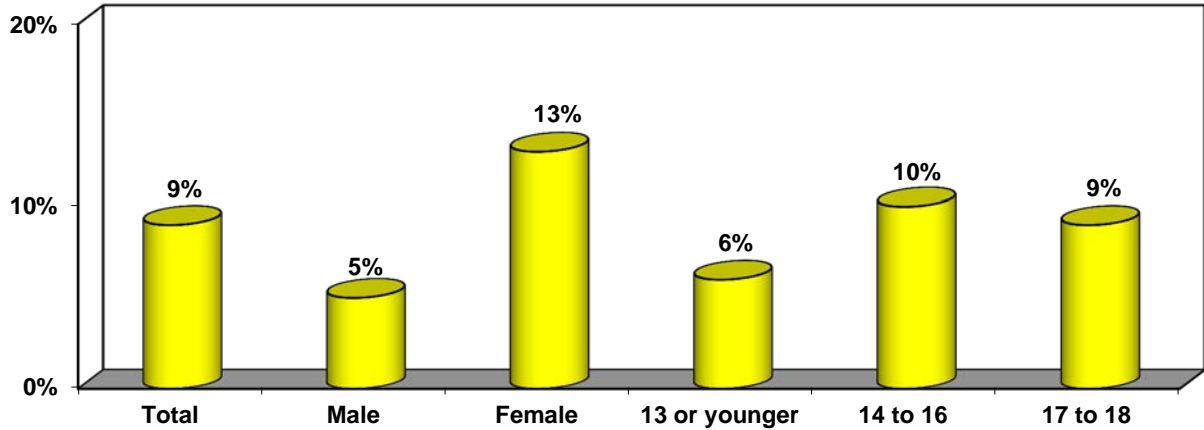


Data Summary

Youth Mental Health and Suicide

The health assessment indicated that 9% of Geauga County youth had seriously contemplated suicide in the past year and 5% admitted actually attempting suicide in the past year.

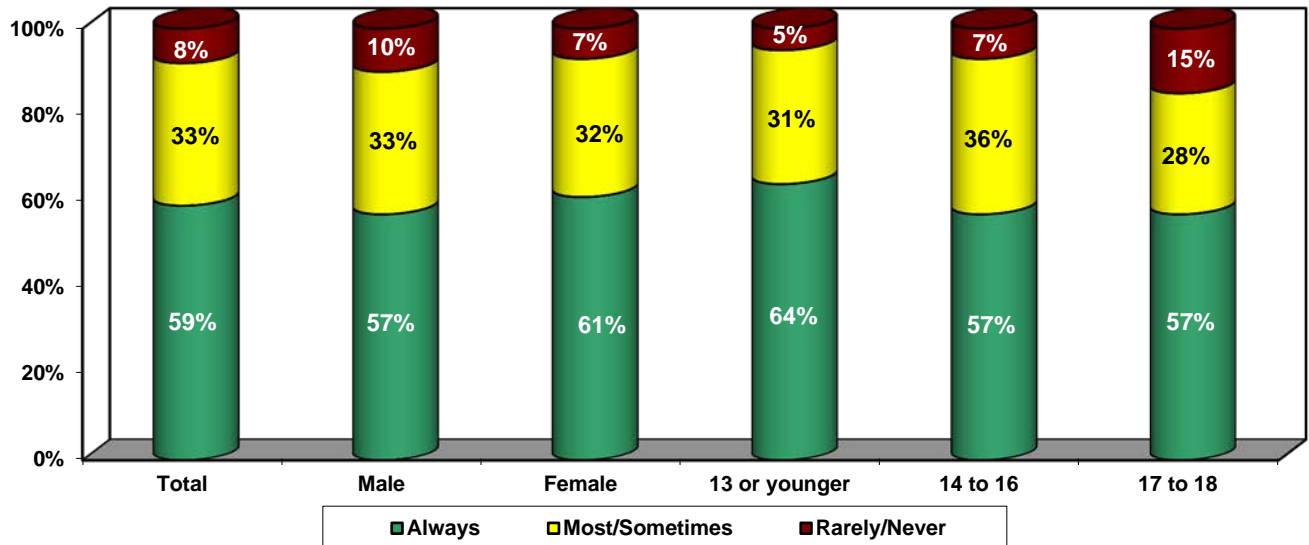
Gauga County Youth Who Contemplated Suicide in Past 12 Months



Youth Safety

In 2011, almost three-fifths (59%) of Geauga County youth self-reported that they always wore a seatbelt when riding in a car driven by someone else. 58% of youth drivers texted while driving.

Gauga County Youth Seatbelt Use in the Past Month

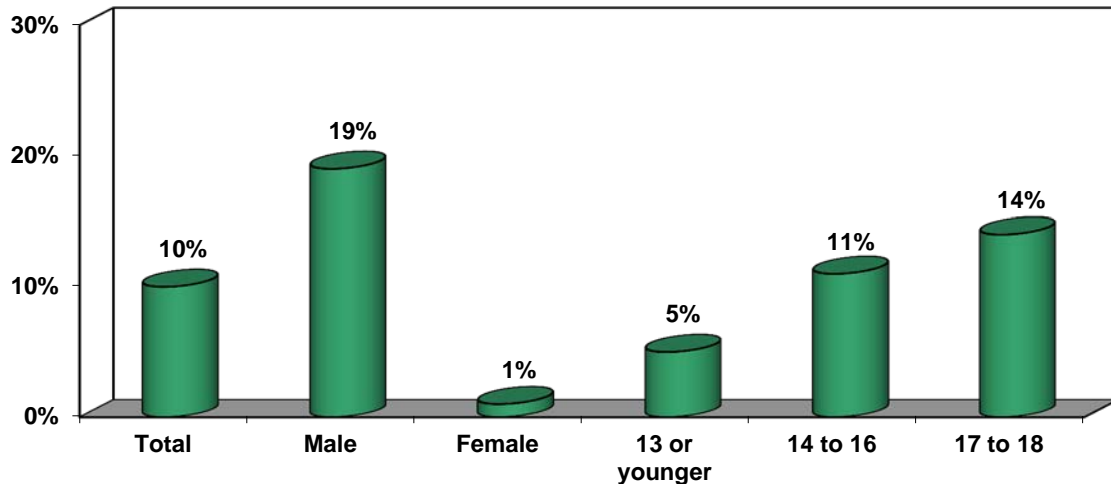


Data Summary

Youth Violence

In Geauga County, 10% of the youth had carried a weapon in the past month. 6% of youth had been threatened or injured by a weapon on school property in the past year. 43% of youth were bullied in the past year. 18% of youth had purposefully hurt themselves at some time in their life.

Geauga County Youth Carrying a Weapon during the Past 30 Days



Children's Health & Functional Status

In 2011, 14% of children were classified as obese, and 16% were overweight. 66% of Geauga County parents had taken their child ages 0-11 to the dentist in the past year. 5% of parents reported their child had an asthma attack in the past year. 7% of parents reported their child had ADD/ADHD. 32% of parents reported their child had spent four or more hours per day doing physical activities.

Children's Health Insurance, Access, Utilization, & Medical Home

In 2011, 22% of Geauga County parents reported their child did not have health insurance. 3% of parents reported they received benefits from the WIC program and 4% from the SNAP/food program. 17% of parents reported they had taken their child to the hospital emergency room in the past year.

Early Childhood (Ages 0-5)

The following information was reported by parents of 0-5 year olds. In 2011, 89% of mothers got prenatal care within the first three months during their last pregnancy. 5% of mothers smoked during their last pregnancy. 35% of parents read to their child every day.

Data Summary

Middle Childhood (Ages 6-11)

The following information was reported by Geauga County parents of 6-11 year olds. In 2011, 34% of parents reported their child was bullied at some time in the past year. 76% of parents reported their child participated in extracurricular activities. 14% of parents reported their child had an email, MySpace, Facebook, Twitter, or another social networking account.

Family Functioning & Neighborhood Characteristics

In 2011, 39% of Geauga County parents reported they read to their child every day or almost every day. 99% of parents reported their neighborhood was always or usually safe.

Parent Health

In 2011, 29% of Geauga County parents were overweight and 26% were obese. Parents missed work an average of 1.4 days per year due to their child being ill or injured.

Geauga County Trend Summary

Youth Variables	Geauga County 2011 (6-12 grade)	Geauga County 2011 (9-12 grade)	Ohio 2007 (9-12 grade)	U.S. 2009 (9-12 grade)
Injury-Related Behavior				
Rode with a driver who had been drinking in past 30 days	18%	20%	23%	28%
Carried a weapon in past 30 days	10%	11%	17%	18%
Involved in a physical fight in past 12 months	22%	18%	30%	32%
Threatened or injured with a weapon on school property in past 12 months	6%	6%	8%	8%
Seriously considered suicide in past 12 months	9%	11%	13%	14%
Attempted suicide in past 12 months	5%	5%	7%	6%
Alcohol Use				
Ever had at least one drink of alcohol in lifetime	51%	62%	76%	73%
Used alcohol during past 30 days	32%	42%	46%	42%
Binged during past 30 days (5 or more drinks in a couple of hours on an occasion)	20%	29%	29%	24%
Tobacco Use				
Lifetime cigarette use (ever tried cigarette smoking, even 1 or 2 puffs)	28%	38%	51%	46%
Used cigarettes on one or more of the past 30 days	1%	21%	22%	20%
Used smokeless tobacco in past 30 days	11%	14%	10%	9%
Drug Use				
Used marijuana in the past 30 days	15%	20%	18%	21%
Used cocaine in their lifetime	3%	4%	8%	6%
Used heroin in their lifetime	2%	1%	4%	3%
Used methamphetamines in their lifetime	2%	1%	6%	4%
Used steroids in their lifetime	3%	4%	5%	3%
Used prescription medication in order to get high or feel good	10%	12%	N/A	N/A
Used inhalants in order to get high in their lifetime	7%	6%	12%**	12%
Offered, sold or given an illegal drug on school property during the past 12 months	13%	15%	27%	23%

N/A= not available

*Data for 9th – 12th grade youth

**2005 YRBS Data

Geauga County Trend Summary

Adult Variables	Geauga County 2011	Ohio 2010	U.S. 2010
Alcohol Consumption			
Had at least one alcoholic beverage in past month	65%	53%	55%
Binged in past month (5 or more drinks in a couple of hours on an occasion)	18%	17%	15%
Tobacco Use			
Current smoker (currently smoke some or all days)	14%	23%	17%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	30%	25%	25%
Arthritis, Asthma, & Diabetes			
Has been diagnosed with arthritis	34%	31%*	26%*
Has been diagnosed with asthma	12%	14%	14%
Has been diagnosed with diabetes	6%	11%	10%
Hypertension & Cholesterol Awareness			
Has been diagnosed with high blood pressure	30%	32%*	29%*
Has been diagnosed with high blood cholesterol	36%	40%*	38%*
Health Status & Coverage			
Rated general health as fair or poor	6%	16%	15%
Uninsured	12%	13%	15%
Preventive Health			
Dental visit within past year	68%	72%	70%
Women age 40 & over had a mammogram in past 2 years	77%	74%	76%
Weight Status			
Obese	22%	30%	28%
Overweight	38%	36%	36%

N/A= not available

**2009 BRFSS Data*

Geauga County Trend Summary

Child Comparisons	Geauga County 2011 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Geauga County 2011 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
Health and Functional Status						
Rated health as excellent or very good	96%	91%	87%	96%	84%	84%
Diagnosed with asthma	6%	9%	9%	11%	21%	16%
Diagnosed with ADHD/ADD	1%	2%	1%	10%	9%	9%
Diagnosed with behavioral or conduct problems	4%	N/A	1%	4%	N/A	5%
Diagnosed with developmental delay or physical impairment	8%	2%	3%	6%	8%	6%
Diagnosed with anxiety problems	1%	N/A	1%	4%	N/A	3%
Diagnosed with hearing problems	3%	2%	2%	5%	4%	3%
No physical activity	2%	N/A	N/A	<1%	6%	7%
Health Insurance, Access and Utilization						
Had public insurance	8%	32%	35%	8%	26%	28%
Dental care visit in past year	45%	51%	54%	77%	92%	90%
2 or more visits to the ER	4%	8%*	8%*	3%	6%*	4%*
Received all the medical care they needed	88%	99%*	99%*	86%	98%*	98%*
Have a personal doctor or nurse	79%	95%	94%	81%	95%	92%
Family Functioning & Neighborhood Characteristics						
Family eat a meal together every day of the week	38%	55%	58%	15%	40%	47%

* 2003 national and state data

Health Status Perceptions

Key Findings

In 2011, two-thirds (67%) of the Geauga County adults rated their health status as excellent or very good. Conversely, 6% of the adults, increasing to 14% of those with incomes less than \$25,000, described their health as fair or poor.

Adults Who Rated General Health Status Excellent or Very Good

- ❖ Geauga County 67% (2011)
- ❖ Ohio 53% (2010)
- ❖ U.S. 55% (2010)

(Source: BRFSS 2010 for Ohio and U.S.)

General Health Status

- ◆ In 2011, two-thirds (67%) of Geauga County adults rated their health as excellent or very good. Geauga County adults with higher incomes (71%) were most likely to rate their health as excellent or very good, compared to 47% of those with incomes less than \$25,000.
- ◆ 6% of adults rated their health as fair or poor. The 2010 BRFSS has identified that 16% of Ohio and 15% of U.S. adults self-reported their health as fair or poor. Geauga County adults were most likely to rate their health as fair or poor if they:
 - Had high blood pressure (17%) or high blood cholesterol (12%)
 - Had an annual household income under \$25,000 (14%)
 - Were 65 years of age or older (7%)

Physical Health Status

- ◆ In 2011, 16% of Geauga County adults rated their physical health as not good on four days or more in the previous month, increasing to 25% of those with incomes less than \$25,000.

Mental Health Status

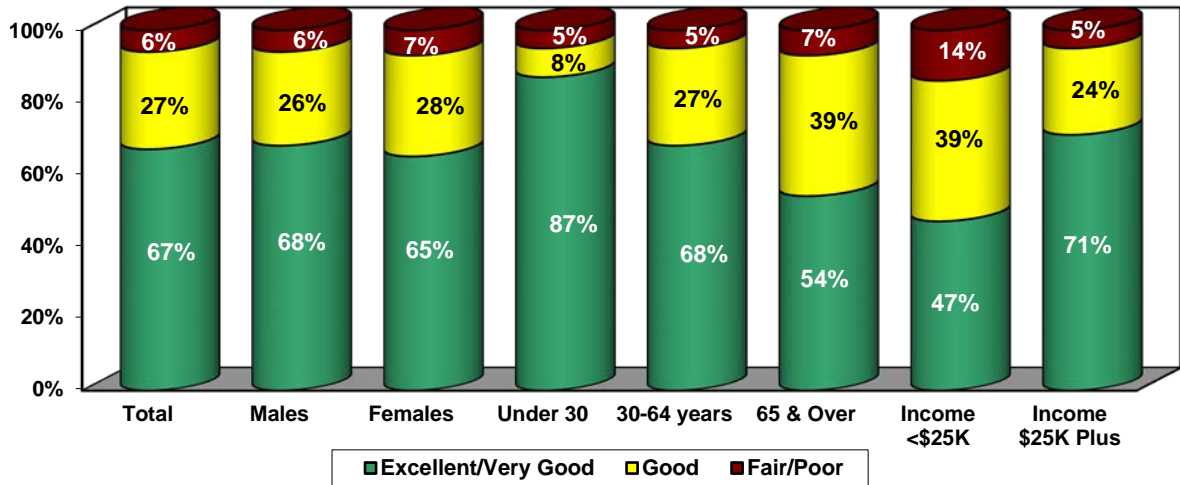
- ◆ In 2011, 18% of Geauga County adults rated their mental health as not good on four days or more in the previous month, increasing to 24% of those with an annual income of less than \$25,000.
- ◆ Nearly one in five (18%) adults reported that poor mental or physical health kept them from doing usual activities, such as self-care, work, or recreation, increasing to 31% of those with incomes less than \$25,000.

2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Rated health as excellent or very good	67%	53%	55%
Rated health as fair or poor	6%	16%	15%

Health Status Perceptions

The following graph shows the percentage of Geauga County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 67% of all Geauga County adults, 87% of those under age 30, and 54% of those ages 65 and older rated their health as excellent or very good. The table shows the percentage of adults with poor physical and mental health in the past 30 days.

Geauga 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	74%	11%	5%	1%	7%
Females	61%	15%	9%	2%	9%
Total	68%	13%	7%	1%	8%
Mental Health Not Good in Past 30 Days*					
Males	68%	10%	5%	0%	11%
Females	59%	15%	9%	1%	10%
Total	64%	13%	7%	1%	11%

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

Health Care Coverage

Key Findings

The 2011 health assessment data has identified that 12% of Geauga County adults were without health care coverage. Those most likely to be uninsured were adults under age 30 and those with an income level under \$25,000. In Geauga County, 7.6% of residents live below the poverty level. (Source U.S. Census, American Community Survey 5 Year Estimates, 2006-2010)

General Health Coverage

- ◆ In 2011, most (88%) Geauga County adults had health care coverage, leaving 12% who were uninsured. The 2010 BRFSS reports uninsured prevalence rates for Ohio (13%) and the U.S. (15%).
- ◆ In the past year, 12% of adults were without healthcare coverage, increasing to 41% of those under the age of 30 and 36% of those with incomes less than \$25,000.
- ◆ 16% of adults with children did not have healthcare coverage, compared to 9% of those who did not have children living in their household.
- ◆ The following types of health care coverage were used: employer (50%), someone else's employer (19%), Medicare (13%), self-paid plan (8%), multiple-including private sources (5%), multiple-including government sources (2%), Medicaid or medical assistance (1%), military/VA (1%), and other (1%).
- ◆ Geauga County adult health care coverage included the following: medical (99%), prescription coverage (91%), preventive health (81%), immunizations (81%), Geauga County physicians (79%), their spouse (76%), mental health (73%), dental (65%), their children (62%), vision (58%), alcohol or substance abuse treatment (50%), home care (32%), skilled nursing (31%), and hospice (26%).
- ◆ 91% of Geauga County adults have health care coverage that also covers prescription coverage.
- ◆ The top three reasons uninsured adults gave for being without health care coverage were:
 1. They lost their job or changed employers (34%)
 2. They could not afford to pay the insurance premiums (28%)
 3. Their employer does not offer or stopped offering coverage (10%)

Geauga County and Ohio Medicaid Statistics

	Residents Enrolled in Medicaid	Annual Medicaid Expenditures*
Geauga County SFY 2009	7,259	\$42,260,344
State of Ohio SFY 2009	2,407,572	\$13,162,469,167
Geauga County SFY 2008	4,915	\$40,258,101
State of Ohio SFY 2008	1,789,934	\$11,962,683,659

*Payments made directly to providers as well as capitation payments to HMOs) SFY is State Fiscal Year. (Source: Ohio Job & Family Services, Geauga County Profile, <http://jfs.ohio.gov/County/cntypro/pdf07/Geauga.pdf> & <http://jfs.ohio.gov/County/cntypro/Geauga.pdf>)

2010 Ohio Family Health Survey Results

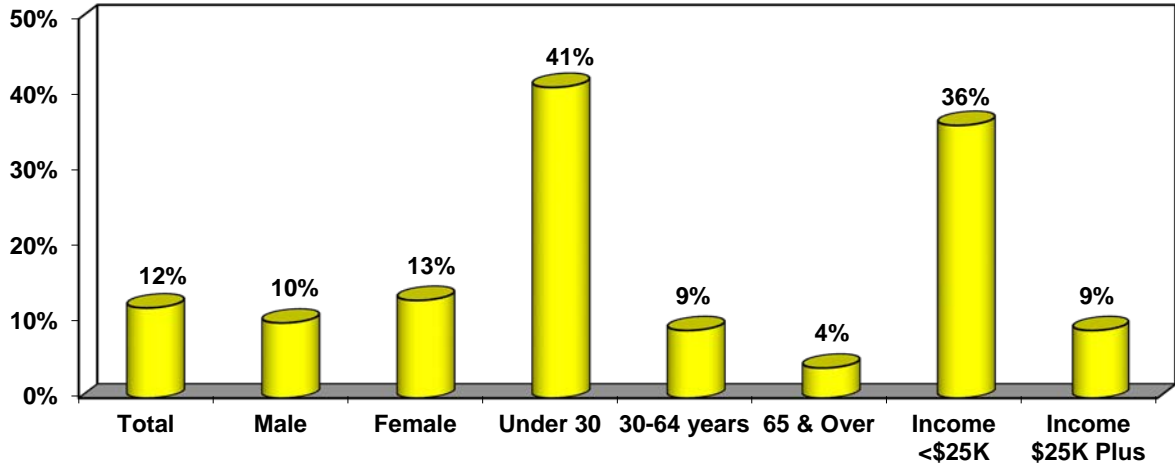
- ◆ In Ohio, 19% of adults 18-64 years old and 5% of children were uninsured in 2010, compared respectively to 17% and 4% in 2008.
- ◆ In Geauga County, 11% of adults 18-64 years old were described as being uninsured in 2008.
- ◆ Most of the uninsured children in Ohio are in families with incomes within 200% of the poverty level, making them eligible for Medicaid/SCHIP.
- ◆ In 2010, uninsured children had an 11.7 times higher rate of **not** having a usual source of care than insured children. Uninsured children had an almost 3 times higher rate of **not** having a usual source of coverage than uninsured adults.
- ◆ Among working age adults in Ohio, uninsured rates increased for all race and ethnic categories from the 2003/2004 OFHS through the 2010 OFHS. The largest uninsured rate increase since 2003/04 OFHS was for working age Latinos and Asian Americans (6.2 percent increase).
- ◆ In Ohio, uninsured individuals reported greater issues with access to care, unmet needs, and paying for care than the insured.

(Source: 2010 Ohio Family Health Survey Results, 03-08-2011)

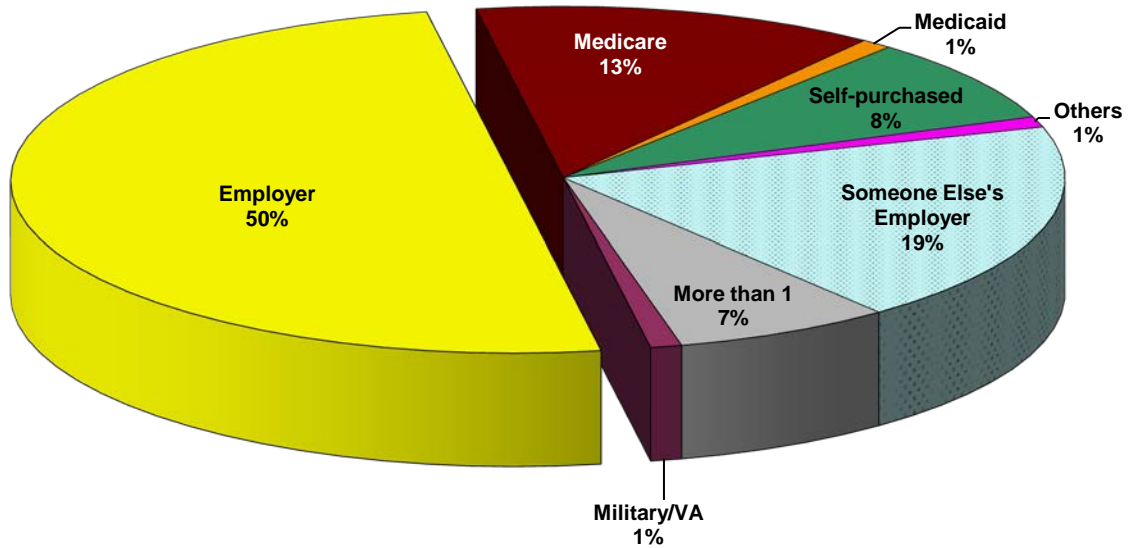
Health Care Coverage

The following graph shows the percentages of Geauga County adults who were uninsured by demographic characteristics. Examples of how to interpret the information in the first graph include: 12% of all Geauga County adults were uninsured, 36% of adults with an income less than \$25,000 reported being uninsured and 41% of those under age 30 lacked health care coverage. The pie chart shows sources of Geauga County adults' health care coverage.

Uninsured Geauga County Adults



Source of Health Coverage for Geauga County Adults



2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Uninsured	12%	13%	15%

Health Care Coverage

Geauga County Medicaid and Medicare Enrollees

In 2007, there were approximately 2,893 adults and 3,624 children enrolled in Medicaid in Geauga County. Of those adults enrolled, 2,099 were under the age of 65 and 794 were age 65 and older. Of the children enrolled, 1,017 were under the age of 5 and 2,607 were ages 5 to 19. As of July 2010, there were approximately 13,711 people enrolled in Medicare in Geauga County. Of these enrollees, 12,573 were 65 years of age or older and 1,138 were disabled.

(Source: Ohio Department of Job and Family Services, Ohio Medicaid Report, SFY 2007; Center for Medicare & Medicaid Services, Medicare County Enrollment, July 1, 2010)

Medicaid Recipients by Aid Category 2007	Geauga County	Ohio
Healthy Families		
Fee for Service	3,018	758,341
Managed Care	2,301	1,144,556
Healthy Start		
CHIP I (Uninsured children whose countable family income is below 150% of Federal Poverty Level)		
Fee for Service	601	98,803
Managed Care	456	145,044
CHIP II (Uninsured children whose countable family income is between 150% and 200% of Federal Poverty Level)		
Fee for Service	404	54,176
Managed Care	314	78,866
Other Healthy Start		
Fee for Service	1,316	238,278
Managed Care	924	321,608
Aged, Blind, & Disabled (ABD)		
Fee for Service	675	271,889
Managed Care	200	107,241
Dual Eligible* (Individuals entitled to Medicare Part A and/or Part B and eligible for some form of Medicaid benefit)		
Fee for Service	1,114	289,884
Managed Care	2	1,756
Other**		
Fee for Service	212	59,237
Managed Care	0	519
TOTAL	11,537	2,170,311

*Dual eligible also includes Specified Low-Income Medicare Beneficiary (SLMB) and Qualified Medicare Beneficiary (QMB) premium assistance categories

**Other also includes non-state plan assistance programs (Source: Ohio Department of Job and Family Services, Ohio Medicaid Report, 2007)

Health Care Access

Key Findings

The 2011 health assessment project identified that 12% of Geauga County adults could not access the health care they needed at some time in the past year because of the cost. 57% reported they had visited a doctor for a routine checkup within the last year.

Health Care Access

- ◆ In 2011, 12% of adults could not see a doctor when needed at some time in the past year due to cost, increasing to 30% of those with incomes less than \$25,000.
- ◆ 57% of Geauga County adults had visited their doctor for a routine checkup within the past year, 73% have visited their doctor within the past two years, 83% have visited their doctor within the past 5 years, and 4% have never visited their doctor for a routine checkup.
- ◆ When adults were sick or needed advice about their health, they usually went to the following: a doctor's office (75%), multiple places-including a doctor's office (9%), no usual place (5%), urgent care center (4%), hospital emergency room (1%), public health clinic or community health center (1%), store clinic (1%), multiple places- not including a doctor's office (1%), and some other place (2%).
- ◆ 51% of Geauga County adults reported they had one particular doctor or healthcare professional they go to for routine medical care, decreasing to 48% of those with incomes less than \$25,000. 35% of adults had more than one particular doctor or healthcare professional they go to for routine medical care, and 13% did not have one at all.
- ◆ 79% of adults went outside of Geauga County for the following health care services in the past year: primary care (38%), dental services (38%), specialty care (30%), obstetrics/gynecology (12%), orthopedic care (8%), pediatric care (8%), cardiac care (6%), mental health care (6%), cancer care (4%), developmental disability services (1%), and other services (9%).
- ◆ Geauga County adults did not receive the following major care or preventive care due to cost: medications (7%), colonoscopy (7%), mammogram (5%), pap smear (4%), surgery (3%), and PSA test (1%).
- ◆ During the past year, Geauga adults did not get a prescription from their doctor filled because: they did not think they needed it (8%), they could not afford to pay the out-of-pocket expenses (7%), they had no insurance (4%), their co-pays were too high (3%), there was no generic equivalent of what was prescribed (3%), their deductibles were too high (2%), their premiums were too high (1%), they opted out of prescription coverage because they could not afford it (1%), they had a high health savings account (HSA) deductible (1%), and they were taking too many medications (1%).
- ◆ About one in five (21%) adults have used a program to help with depression, anxiety, or emotional problems for either themselves or a loved one. 13% of adults needed a program but gave the following reasons for not using such a program: had not thought of it (3%), could not afford it (2%), high copay/deductible (1%), stigma of seeking mental health services (1%), did not know how to find a program (1%), other priorities (1%), did not feel the services they had received were good (<1%), and other reasons (1%).
- ◆ The following would prevent Geauga County adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (30%), hours not convenient (11%), difficult to get an appointment (11%), no insurance (9%), worried they might find something wrong (7%), could not get time off work (7%), difficult to find/no transportation (4%), frightened of the procedure or doctor (3%), do not trust or believe doctors (2%), and some other reason (3%).
- ◆ Geauga County adults had the following transportation problems when they needed health care: no car (6%), no driver's license (4%), could not afford gas (2%), disabled (1%), and other car issues/expenses (2%).
- ◆ Of those adults eligible for Medicare (over age 65), they understood the following options available to them: Medicare (79%), Medicare Part D drug program (45%), and Medicare Advantage plan (37%).

Predictors of Access to Health Care

Adults are more likely to have access to medical care if they:

- ◆ Earn a higher income
- ◆ Have a regular primary care provider
- ◆ Have health insurance
- ◆ Utilize preventive services in a clinic setting
- ◆ Have a college education
- ◆ Work for a large company

(Source: Healthy People 2020 and CDC)

Health Care Access

Healthy People 2020 Access to Quality Health Services

Objective	Healthy People 2020 Target	Geauga County 2011	Ohio 2010	U.S. 2010
AHS-1.1: Persons under age of 65 years with health care insurance	100%	45% age 20-24 76% age 25-34 95% age 35-44 86% age 45-54 97% age 55-64 (2011)	69% age 18-24 85% age 25-34 87% age 35-44 87% age 45-54 98% age 55-64 (2010)	74% age 18-24 80% age 25-34 85% age 35-44 87% age 45-54 89% age 55-64 (2010)
AHS-5.1: Persons who report a usual primary care provider	95%	51% (2011)	N/A	76%* (2007)

*U.S. baseline is age-adjusted to the 2000 population standard
(Sources: Health People 2020 Objectives, BRFSS, ODH Information Warehouse, 1-7-10, 2011 Assessment)

Geauga County Health Care Statistics

- ❖ In 2009, 45.1% of all hospital visits occurred outside the county.
- ❖ In 2009, 7.7% of all Geauga County residents were enrolled in Medicaid.
- ❖ 17.0% of all Geauga County children were enrolled in Medicaid in 2009.
- ❖ 11.4% of all Geauga County births were paid by Medicaid in 2007.

Source: Job and Family Services- Geauga County Job and Family Services Profile: <http://jfs.ohio.gov/County/entyp/Geauga.pdf>

Cardiovascular Health

Key Findings

Heart disease (26%) and stroke (5%) accounted for 31% of all Geauga County adult deaths from 2006-2008 (Source: ODH Information Warehouse). The 2011 Geauga County health assessment found that 2% of adults had a heart attack and 2% had a stroke at some time in their life. 30% of Geauga County adults have been diagnosed with high blood pressure, 36% have high blood cholesterol, and 22% were obese, three known risk factors for heart disease and stroke.

Heart Disease and Stroke

- ◆ In 2011, 2% of Geauga County adults reported they had a heart attack or myocardial infarction, increasing to 7% of those over the age of 65.
- ◆ All adults who had a heart attack or myocardial infarction reported taking medication (including aspirin) for it.
- ◆ 2% of Geauga County adults reported having had a stroke, increasing to 5% of those over the age of 65.
- ◆ 50% of adults who had a stroke reported taking medication for it.

High Blood Pressure (Hypertension)

- ◆ 30% of Geauga County adults had been diagnosed with high blood pressure. The 2009 BRFSS reports hypertension prevalence rates of 32% for Ohio and 29% for the U.S.
- ◆ 69% of Geauga County adults have had their blood pressure taken by a doctor, nurse, or other health professional within the past six months. 85% have had their blood pressure taken within the past year and 92% have had their blood pressure taken within the past two years.
- ◆ 68% of adults with high blood pressure reported taking medication for it.
- ◆ Geauga County adults diagnosed with high blood pressure were more likely to:
 - Have been age 65 years or older (53%)
 - Have been classified as obese (53%)
 - Have incomes less than \$25,000 (45%)

High Blood Cholesterol

- ◆ More than one-third (36%) of adults had been diagnosed with high blood cholesterol. The 2009 BRFSS reported that 40% of Ohio adults and 38% of U.S. adults have been told they have high blood cholesterol.
- ◆ Three-fifths (60%) of adults had their blood cholesterol checked in the past year.
- ◆ 45% of adults with high blood cholesterol reported taking medication for it.
- ◆ Geauga County adults with high blood cholesterol were more likely to:
 - Have been age 65 years and older (58%)
 - Have been classified as obese (58%)

Gauga County Leading Types of Death 2006-2008

Total Deaths: 2,151

1. Cancers (27% of all deaths)
2. Heart Disease (26%)
3. Chronic Lower Respiratory Diseases (5%)
4. Stroke (5%)
5. Alzheimer's Disease (4%)

(Source: ODH Information Warehouse, updated 4-15-10)

Ohio Leading Types of Death 2006-2008

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

(Source: ODH Information Warehouse, updated 4-15-10)

2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Had a heart attack	2%	4%	4%
Had a stroke	2%	3%	3%
Had high blood pressure	30%	32%*	29%*
Had high blood cholesterol	36%	40%*	38%*

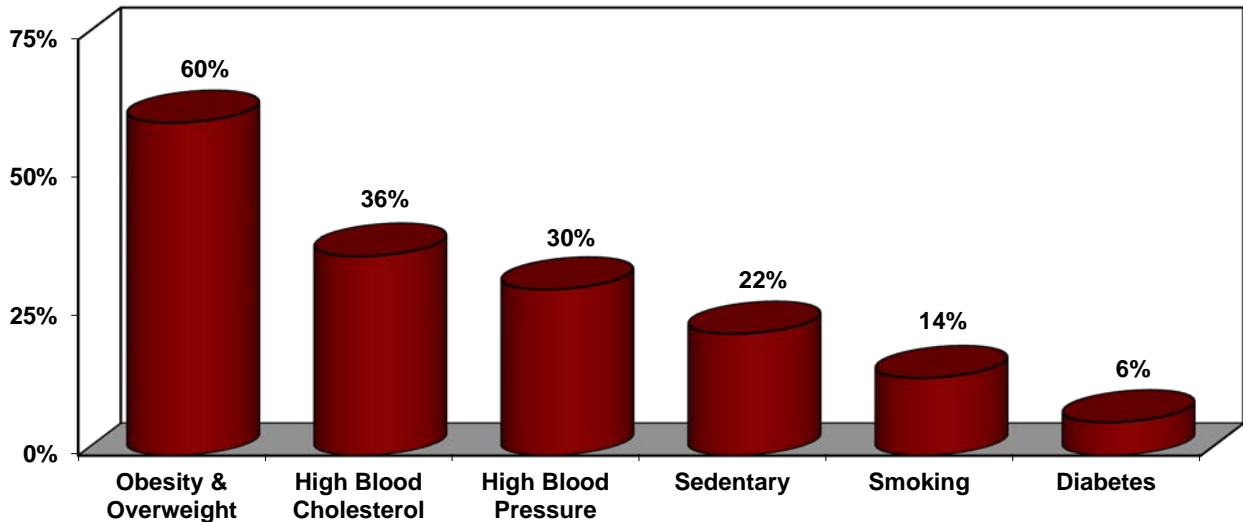
N/A – Not asked

*2009 BRFSS Data

Cardiovascular Health

The following graph demonstrates the percentage of Geauga County adults who had major risk factors for developing cardiovascular disease (CVD). (Source: 2011 Geauga County Health Assessment)

Gauga County Adults with CVD Risk Factors



Risk Factors for Cardiovascular Disease That Can Be Modified or Treated:

Cholesterol – As blood cholesterol rises, so does risk of coronary heart disease. When other risk factors (such as high blood pressure and tobacco smoke) are present, this risk increases even more. A person's cholesterol level is also affected by age, sex, heredity and diet.

High Blood Pressure – High blood pressure increases the heart's workload, causing the heart to thicken and become stiffer and causes the heart not to work properly. It also increases your risk of stroke, heart attack, kidney failure and congestive heart failure. When high blood pressure exists with obesity, smoking, high blood cholesterol levels or diabetes, the risk of heart attack or stroke increases several times.

Obesity and Overweight – People who have excess body fat — especially at the waist — are more likely to develop heart disease and stroke even if they have no other risk factors. Excess weight increases the heart's work. It also raises blood pressure and blood cholesterol and triglyceride levels, and lowers HDL ("good") cholesterol levels. Many obese and overweight people may have difficulty losing weight. But by losing even as few as 10 pounds, you can lower your heart disease risk.

Smoking – Smokers' risk of developing coronary heart disease is 2-4 times that of nonsmokers. People who smoke a pack of cigarettes a day have more than twice the risk of heart attack than people who've never smoked. People who smoke cigars or pipes seem to have a higher risk of death from coronary heart disease (and possibly stroke) but their risk isn't as great as cigarette smokers. Exposure to other people's smoke increases the risk of heart disease even for nonsmokers.

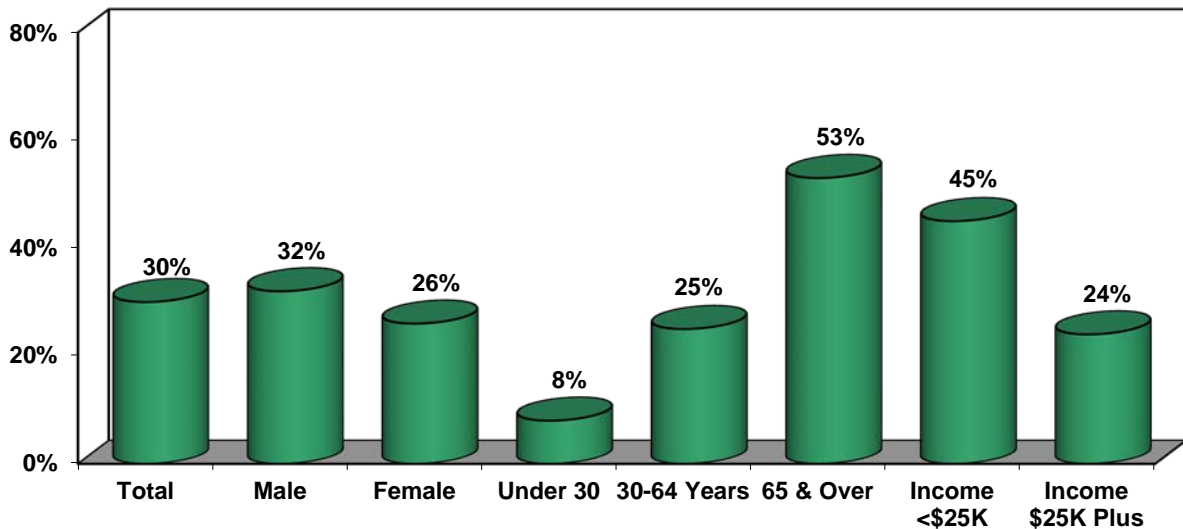
Physical Inactivity – An inactive lifestyle is a risk factor for coronary heart disease. Regular, moderate-to-vigorous physical activity helps prevent heart and blood vessel disease. However, even moderate-intensity activities help if done regularly and long term. Physical activity can help control blood cholesterol, diabetes and obesity, as well as help lower blood pressure in some people.

Diabetes Mellitus – Diabetes seriously increases your risk of developing cardiovascular disease. Even when glucose levels are under control, diabetes increases the risk of heart disease and stroke, but the risks are even greater if blood sugar is not well controlled. At least 65% of people with diabetes die of some form of heart or blood vessel disease. (Source: American Heart Association, Risk Factors for Coronary Heart Disease, 6-20-11)

Cardiovascular Health

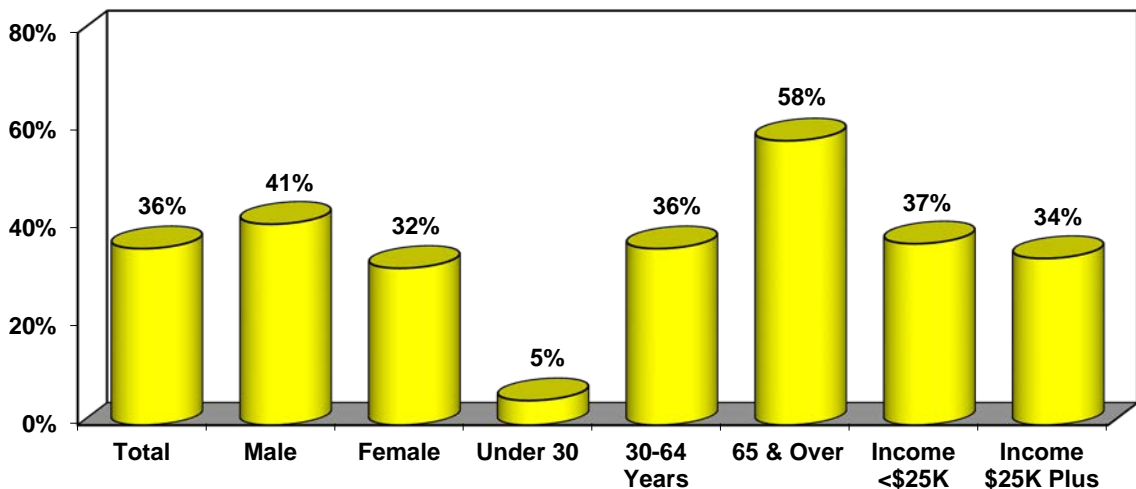
The following graphs show the number of Geauga County adults who have been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 30% of all Geauga County adults have been diagnosed with high blood pressure, 32% of all Geauga County males, 26% of all females, and 53% 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

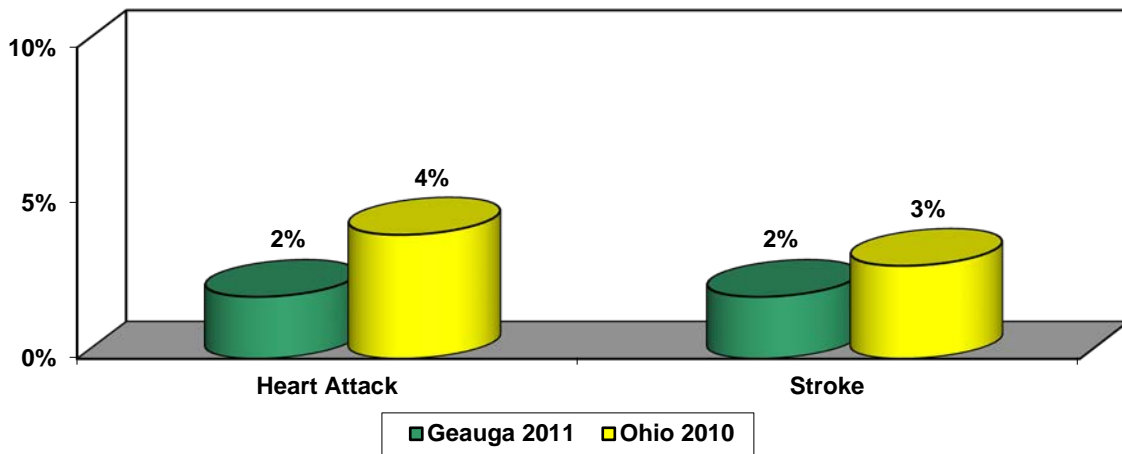


Cardiovascular Health

The following graphs show the Geauga County and Ohio age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender and race/ethnicity.

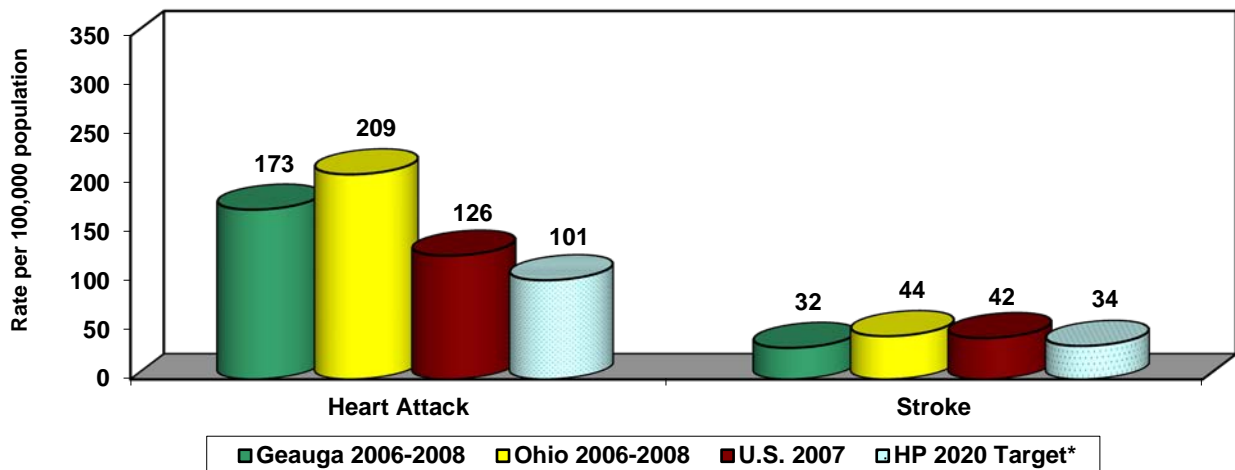
- The 2011 assessment shows that heart attacks are equally as prevalent as strokes in Geauga County.
- When age differences are accounted for, the statistics indicate that from 2006-2008 the Geauga County heart disease mortality rate was lower than the figure for the state, but higher than the U.S. figure and the Healthy People 2020 target.
- The Geauga County age-adjusted stroke mortality rate for 2006-2008 was lower than the Ohio, U.S., and Healthy People 2020 rates.
- Disparities exist for heart disease mortality rates by gender in Geauga County.

Cardiovascular Disease Prevalence



(Source: 2011 Geauga Health Assessment and BRFSS)

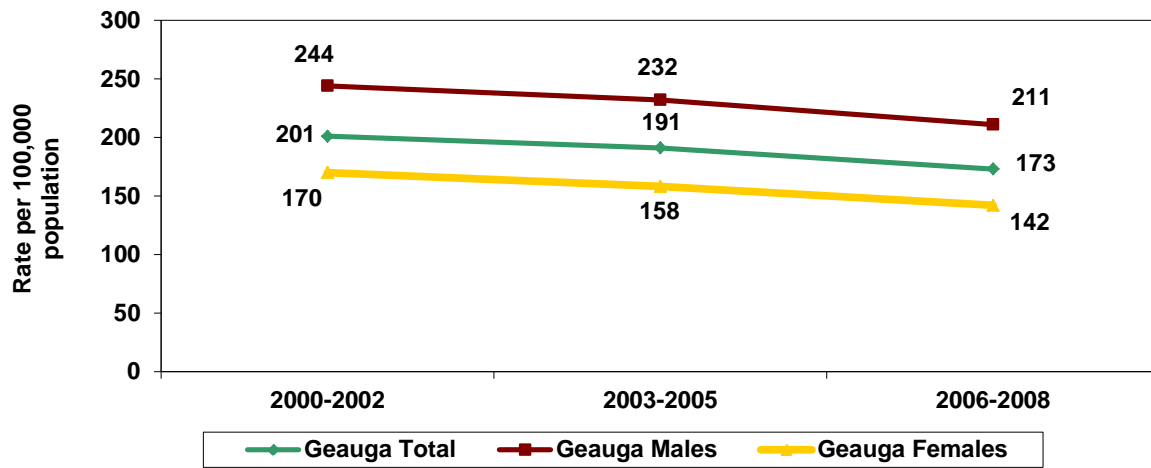
Age-Adjusted Heart Disease and Stroke Mortality Rates



**The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality.
(Source: ODH Information Warehouse, updated 4-15-10, Healthy People 2020)*

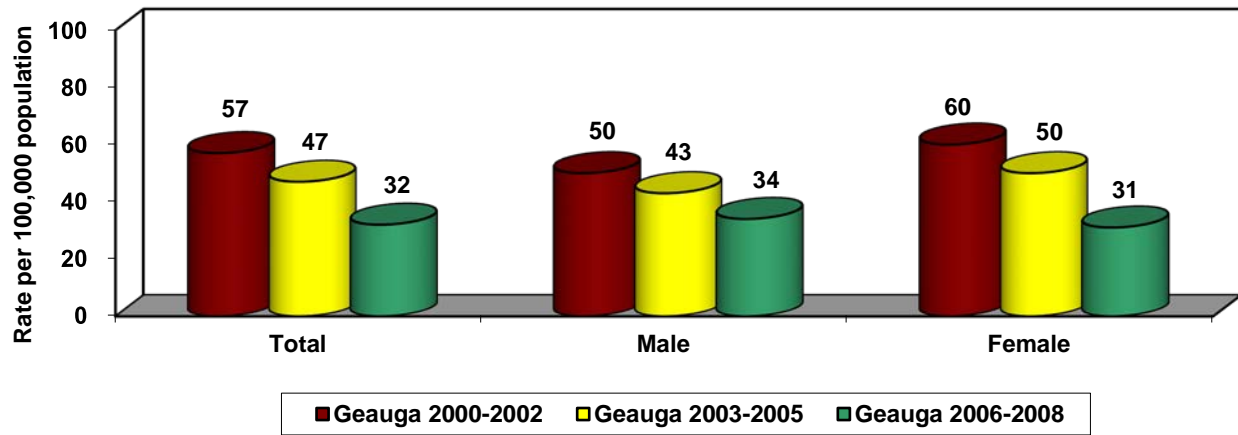
Cardiovascular Health

Age-Adjusted Heart Disease Mortality Rates by Gender



(Source: ODH Information Warehouse, updated 4-15-10)

Age-Adjusted Stroke Mortality Rates by Gender



(Source: ODH Information Warehouse, updated 4-15-10)

Cardiovascular Health

Healthy People 2020 Objectives

High Blood Pressure

Objective	Target	U.S. Baseline*	Geauga Survey Population Baseline (2011)
HDS-4 Increase the portion of adults who have had their blood pressure measured within the preceding 2 years and can state whether it was normal or high	93%	91% Adults age 18 and up (2008)	92%
HDS-5: Reduce proportion of adults with hypertension	27%	30% Adults age 18 and up (2005-2008)	30%

**All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2020)*

Blood Cholesterol

Objective	Target	U.S. Baseline*	Geauga Survey Population Baseline (2011)
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	14%	15% Adults age 2- & up with TBC > 240 mg/dl (2005-2008)	36%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	82%	75% Adults age 18 & up (2008)	77%

**All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2020)*

Cancer

Key Findings

Ohio Department of Health statistics indicate that from 2000-2008, a total of 1,586 Geauga County residents died from cancer, the leading cause of death in the county. 12% of Geauga County adults were diagnosed with cancer in 2011. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

Cancer Facts

- ◆ About one in eight (12%) adults had been diagnosed with cancer at some time in their life. The top three reported cancers were: skin cancers (4%), breast (female- 4%), and prostate (male- 3%).
- ◆ The Ohio Department of Health (ODH) vital statistics indicate that from 2000-2008, cancers caused 23% (1,586 of 6,281 total deaths) of all Geauga County resident deaths. The largest percent (25%) of cancer deaths were from lung and bronchus cancer. (Source: ODH Information Warehouse)
- ◆ Age-adjusted cancer mortality rates (calculated by ODH per 100,000 population) have decreased for Geauga County from 179.4 for 2000-2002 to 173.7 for 2006-2008. The Ohio cancer mortality rate shows a downward trend from 208.3 for 2000-2002 to 195.9 for 2006-2008. (Source: ODH Information Warehouse)
- ◆ The American Cancer Society reports that smoking tobacco is associated with cancers of the mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with cancers of the stomach, pancreas, kidney, bladder, uterine cervix, and acute myeloid leukemia. The 2011 health assessment project has determined that 22% of Geauga County adults are current smokers and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer.

Lung Cancer

- ◆ The Ohio Department of Health reports that lung cancer (n=228) was the leading cause of male cancer deaths from 2000-2008 in Geauga County. Prostate cancer caused 82 deaths and colon cancer caused 76 deaths during the same time period. In Geauga County, 11% of male adults are current smokers¹ and 31% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2011 Geauga County Health Assessment)
- ◆ ODH reports that lung cancer was the leading cause of female cancer deaths (n=163) in Geauga County from 2000-2008 followed by breast (n=118) and colon & rectum (n=88) cancers. Approximately 17% of female adults in the county are current smokers¹ and 53% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2011 Geauga County Health Assessment)
- ◆ According to the American Cancer Society, smoking causes 87% of lung cancer deaths in the U.S. In addition, individuals living with smokers have a 30% greater risk of developing lung cancer than those who do not have smokers living in their household. Working in an environment with tobacco smoke also increases the risk of lung cancer.

Breast Cancer

- ◆ In 2011, 56% of Geauga County females reported having had a clinical breast examination in the past year.
- ◆ 55% of Geauga County females over the age of 40 had a mammogram in the past year.
- ◆ If detected early, the 5-year survival rate for breast cancer is 93%. (Source: American Cancer Society Facts & Figures 2011)
- ◆ 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. (Source: American Cancer Society Facts & Figures 2011)

Geauga County Incidence of Cancer, 2007 All Types: 458 cases

- ◆ Prostate: 92 cases (20%)
- ◆ Breast: 71 cases (16%)
- ◆ Lung and Bronchus: 46 cases (10%)
- ◆ Colon and Rectum: 39 cases (9%)
- ◆ Melanoma of skin: 17 cases (4%)

From 2006-2008, there were 580 cancer deaths in Geauga County.

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse)

¹Have smoked over 100 cigarettes in lifetime and currently smoke some or all days.

Cancer

Colon and Rectum Cancer

- ◆ The American Cancer Society recognizes any cancer involving the esophagus, stomach, small intestine, colon, liver, gallbladder or pancreas as a digestive cancer. Digestive cancers accounted for 23% of all cancer deaths in Geauga County from 2000-2008. *(Source: ODH Information Warehouse)*
- ◆ 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; alcohol use; a high-fat or low-fiber diet lacking an appropriate amount of fruits and vegetables; physical inactivity; obesity; diabetes; and smoking.
- ◆ In the U.S., most cases of colon cancer occur in individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings. In 2011, 67% of Geauga County adults over the age of 50 reported having been screened for colorectal cancers within the past 5 years.

Prostate Cancer

- ◆ 58% of Geauga County males over the age of 50 had a PSA test in the past year.
- ◆ The Ohio Department of Health statistics indicate that prostate cancer deaths accounted for 5% of all male cancer deaths from 2000-2008 in Geauga County.
- ◆ African American men are twice as likely as white American men to develop prostate cancer and are more likely to die of prostate cancer. In addition, about 62% of prostate cancers occur in men over the age of 65. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. Prostate cancer is more common in North America and Northwestern Europe than in Asia and South America. *(Source: Cancer Facts & Figures 2011, The American Cancer Society)*

2011 Cancer Estimations

- ❖ In 2011, about 171,600 cancer deaths are expected to be caused by tobacco use.
- ❖ One-third of the 571,950 cancer deaths are expected to be related to overweight, obesity, physical activity and poor nutrition.
- ❖ About 78% of all cancers are diagnosed in people 55 years or older.
- ❖ About 1,596,670 new cancer cases are expected to be diagnosed in 2011, not including non-invasive cancers of any site except urinary bladder and does not include basal and squamous cell skin cancer.
- ❖ Approximately 571,950 people were expected to die of cancer, more than 1,500 people per day in 2011.

(Source: American Cancer Society, Facts and Figures 2011)

Cancer

Geauga County Cancer Deaths 2000-2008

Type of Cancer	Number of Cancer Deaths	Percent of Total Cancer Deaths
Trachea, Lung and Bronchus	391	25%
Other/Unspecified	182	11%
Colon, Rectum & Anus	164	10%
Breast	121	8%
Pancreas	102	6%
Prostate	82	5%
Non-Hodgkins Lymphoma	79	5%
Leukemia	72	5%
Brain and CNS	53	3%
Esophagus	52	3%
Bladder	39	2%
Ovary	36	2%
Kidney and Renal Pelvis	36	2%
Liver and Bile Ducts	35	2%
Melanoma of Skin	31	2%
Multiple Myeloma	29	2%
Cancer of Corpus Uteri	24	2%
Stomach	24	2%
Lip, Oral Cavity & Pharynx	21	1%
Cancer of Cervix Uteri	5	< 1%
Hodgkins Disease	4	< 1%
Larynx	3	< 1%
Total	1,585	100%

(Source: ODH Information Warehouse, updated 4-15-10)

Geauga County Number of Cancer Cases, 2000-2007

Year	All Sites	Breast	Colon & Rectum	Lung	Prostate
2000	443	79	44	53	71
2001	450	73	41	59	80
2002	468	78	42	62	73
2003	463	66	50	63	77
2004	456	79	54	48	76
2005	497	76	43	71	78
2006	498	77	48	65	84
2007	458	71	39	46	92

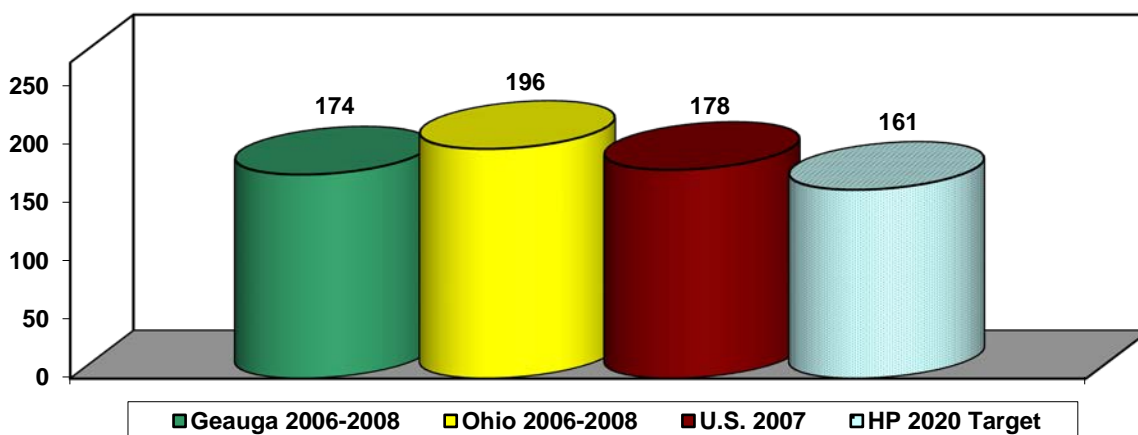
(Source: Ohio Cancer Incidence Surveillance System)

Cancer

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

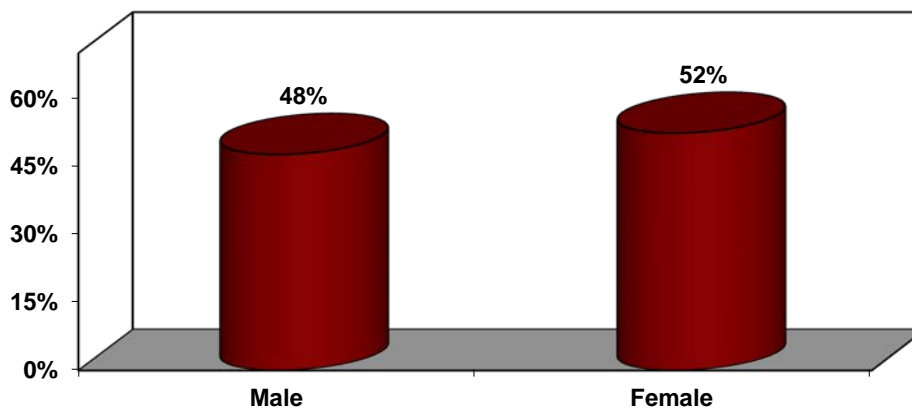
- ◆ When age differences are accounted for, Geauga County had a lower cancer mortality rate than the Ohio and the national rate, but the Geauga rate exceeded the Healthy People 2020 target objective.
- ◆ The percentage of Geauga County males who died from all cancers is lower than the percentage of Geauga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

**Healthy People 2020 Objective
and Age-Adjusted Mortality Rates for All Cancers***



**Age-adjusted rates/ 100,000 population, 2000 standard
(Source: ODH Information Warehouse, updated 4-15-10; Healthy People 2020)*

**Cancer As Percent of Total Deaths in Geauga County
by Gender, 2000-2008**



(Source: ODH Information Warehouse, updated 4-15-10)

Diabetes

Key Findings

In 2011, 6% of Geauga County adults had been diagnosed with diabetes.

Diabetes

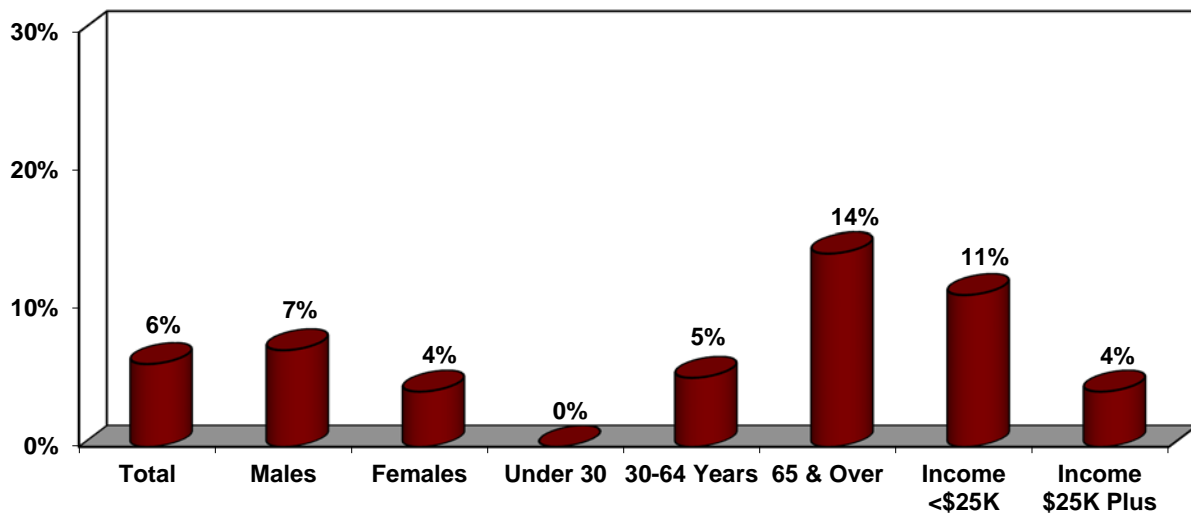
- ◆ The 2011 health assessment project has identified that 6% of Geauga County adults had been diagnosed with diabetes, increasing to 14% of those over the age of 65. The 2010 BRFSS reports an Ohio prevalence of 11% and 10% for the U.S.
- ◆ The average age of onset (diagnoses) for diabetes was 48.1 years old.
- ◆ Those with diabetes reported using the following to treat it: diet control (58%), diabetes pills (54%), and insulin (33%).
- ◆ Geauga County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 86% were obese or overweight
 - 86% had been diagnosed with high blood cholesterol
 - 71% had been diagnosed with high blood pressure

Diabetes Facts

- ❖ Diabetes was the 6th leading cause of death in Geauga County from 2006-2008.
- ❖ Diabetes was the 7th leading cause of death in Ohio from 2006-2008.
- ❖ From 2006-2008, the Geauga County age-adjusted mortality rate per 100,000 for diabetes was 29.3 deaths for males (34.4 Ohio) and 15.8 (24.3 Ohio) deaths for females.

(Source: ODH, Information Warehouse, updated 4-15-10)

Geauga County Adults Diagnosed with Diabetes



2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Diagnosed with diabetes	6%	11%	10%

Diabetes

Diabetes Complications

The complications associated with type 2 diabetes are numerous and serious including:

- ❖ **Heart disease and stroke** – 2 of 3 people with diabetes die from heart disease or stroke;
- ❖ **Kidney disease** caused by uncontrolled high blood pressure, uncontrolled blood sugar, and/or genetics;
- ❖ **Glaucoma** – diabetics are 40% more likely to suffer from glaucoma, which can develop into blindness;
- ❖ **Cataracts** – diabetics are 60% more likely to develop cataracts; cataracts can also lead to the development of glaucoma;
- ❖ **Retinopathy** – nonproliferative retinopathy does not cause loss of sight but can develop into proliferative retinopathy which causes loss of vision. Those with type 1 diabetes almost always develop nonproliferative retinopathy as do most people with type 2 diabetes; proliferative retinopathy is rare;
- ❖ **Neuropathy** is nerve damage to the feet that results in loss of feeling. It is one of the most common complications of diabetes. Poor blood flow or changes in the shape of feet and toes may also cause problems. There are many forms of neuropathy but it is important to know that it can be very painful and disabling; however, for early neuropathy, symptoms can disappear with tight control of blood sugar, weight loss toward an ideal weight, and regular exercise;
- ❖ Various **foot complications** are experienced more commonly with people who have diabetes. Some of these foot complications include **neuropathy**, extremely **dry skin**, **calluses** that can develop into **foot ulcers** that do not heal quickly, **poor circulation**, and **amputation**. Amputation of the foot or leg is more common, usually as a result of decreased circulation, neuropathy, and/or slowly healing wounds;
- ❖ **Skin Complications** – Some of the many skin complications that diabetics are more likely to experience are **fungal infections**, **bacterial infections**, **atherosclerosis** (thickening of the arteries), **diabetic dermopathy** (harmless patches of light brown, scaly skin), **necrobiosis lipoidica diabetorum** (NLD – red skin patches that can be itchy and painful that can break open into sores and need treatment), etc.; and,
- ❖ **Gastroparesis** occurs as a result of neuropathy where the nerves to the stomach are damaged and stop working. Multiple complications can result from the stomach taking too long to empty its contents ranging from uncontrolled blood sugar to complete blockage from the stomach to the small intestine.
- ❖ Well controlled diabetes can greatly reduce the complications of diabetes, but diabetics will still have a shortened life span.

(Source: American Diabetes Association, *All about Diabetes, Type 2 Diabetes, Complications*)

Diabetes

Adult Diabetes Screening Standards

Type 1 diabetes is usually diagnosed in children and young adults, and was previously known as juvenile diabetes. In type 1 diabetes, the body does not produce insulin. Type 2 diabetes is the most common form of diabetes. In type 2 diabetes, either the body does not produce enough insulin or the cells ignore the insulin, most likely because the insulin is defective.

The American Diabetes Association maintains that community screening is not recommended since there is not sufficient evidence that community screening for type 2 diabetes is cost-effective, as well as the potential harm caused by lack of continuous care following diagnosis; therefore, screening should be based upon clinical judgment and patient preference. Health care provider type 2 diabetes **screening standards for adults** are as follows:

- ❖ Every three years for those age 45 and over, especially for those with a Body Mass Index (BMI) of 25 or greater;
- ❖ Testing can be done more frequently for those at younger ages who are overweight and have one or more of the risk factors listed in the box on page 1;
- ❖ Patients who experience one or more of the known symptoms for diabetes (e.g. frequent urination, excessive thirst, extreme hunger, unusual weight loss, increased fatigue, irritability, blurry vision, etc.);
- ❖ Patients who have a family history of type 2 diabetes;
- ❖ Patients who belong to certain race/ethnic groups (specifically, African American, American Indian, Pacific Islander, or Hispanic American/Latino);
- ❖ Patients who have signs of or conditions associated with insulin resistance (e.g., high blood pressure, abnormal cholesterol, polycystic ovary syndrome, etc.); and,
- ❖ As deemed necessary by the health care professional.

Youth Diabetes Screening Standards

The incidence of type 2 diabetes in children and adolescents has been shown to be increasing. Consistent with screening recommendations for adults, only children and youth at substantial risk for the presence or the development of type 2 diabetes should be tested. The American Diabetes Association recommends that overweight youths (defined as BMI greater than 85th percentile for age and sex, weight for height greater than 85th percentile, or weight greater than 120% of ideal for height) with any two of the risk factors listed below be screened:

- ❖ Have a family history of type 2 diabetes in first- and second-degree relatives;
- ❖ Belong to a certain race/ethnic group (Native Americans, African-Americans, Hispanic Americans, Asians/South Pacific Islanders);
- ❖ Have signs of insulin resistance or conditions associated with insulin resistance (acanthosis nigricans, hypertension, dyslipidemia, polycystic ovary syndrome).

Testing should be done every 2 years starting at age 10 years or at the onset of puberty if it occurs at a younger age.

For more information about diabetes, please visit the American Diabetes Association's website at www.diabetes.org.

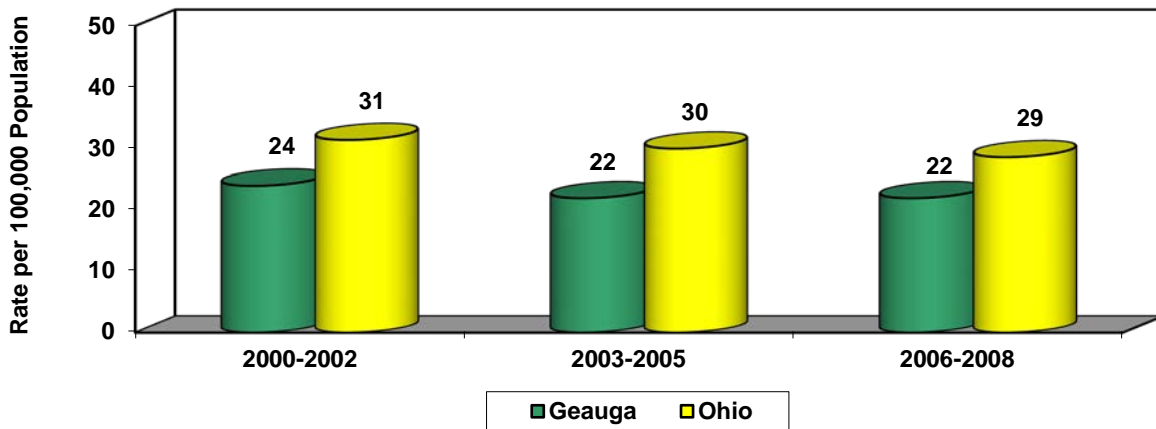
(Source: American Diabetes Association, Diabetes Care, Screening for Type 2 Diabetes, 2011)

Diabetes

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

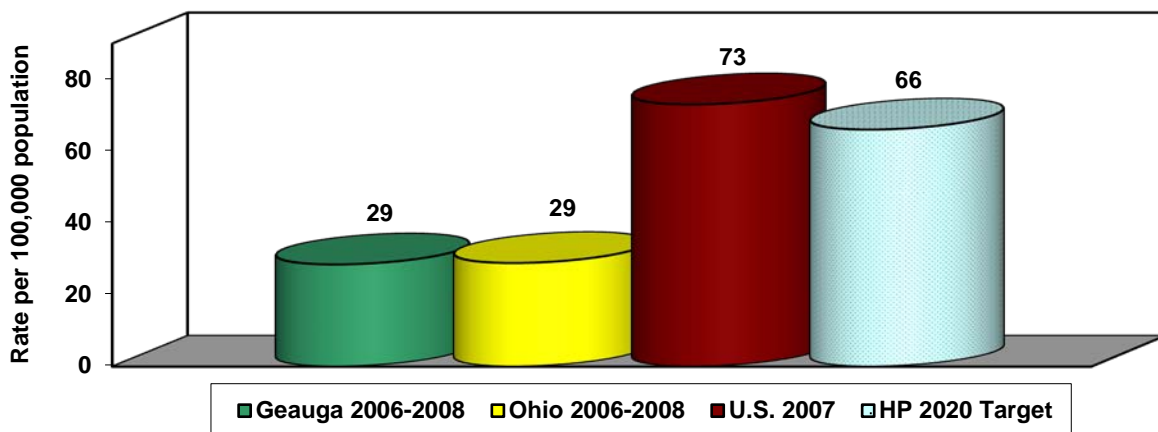
- ◆ Geauga County's age-adjusted diabetes mortality rate decreased from 2000 to 2003 and remained the same from 2003-2008.
- ◆ From 2006 to 2008, both Geauga County and Ohio's age-adjusted diabetes mortality rates were less than half of the national rate and both met the Healthy People 2020 target objective.

Diabetes Age-Adjusted Mortality Rates



(Source: ODH Information Warehouse, updated 4-15-10)

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



(Source: ODH Information Warehouse, updated 4-15-10 and Healthy People 2020, CDC)

Arthritis

Key Findings

According to the Geauga County survey data, 34% of Geauga County adults were diagnosed with arthritis. According to the 2009 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they have arthritis.

Arthritis

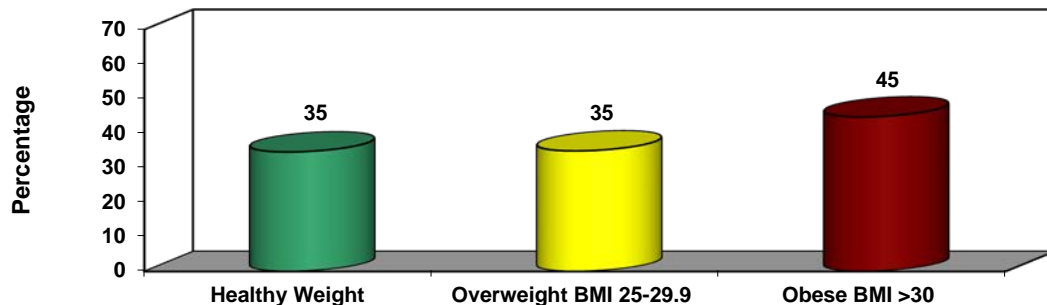
- ◆ Just over one-third (34%) of Geauga County adults were told by a health professional that they had some form of arthritis.
- ◆ 55% of those over the age of 65 were diagnosed with arthritis.
- ◆ 26% of adults with arthritis were being treated for it. 15% were not getting treatment and thought they should, and 59% were not getting treatment and thought they did not need it.
- ◆ Other reasons for not getting treatment include: could not afford it (7%), had not thought of it (2%), transportation (1%), could not get into the office/clinic (1%), did not know how to find treatment (1%), did not want to miss work (1%), and other reasons (19%).
- ◆ According to the 2009 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they have arthritis.
- ◆ About 1 in 5 U.S. adults have doctor diagnosed arthritis. Approximately 1 in 20 of working age adults reported that arthritis limited their work. (Source: CDC Arthritis at a Glance 2011)
- ◆ 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)

What Can Be Done to Address Arthritis?

- ❖ Self-management education programs can reduce pain and costs. The Arthritis Foundation holds classes called the Self-Help Program that teaches people how to manage arthritis and lessen its effects.
- ❖ Physical activity can have significant benefits for people with arthritis. The benefits include improvements in physical function, mental health, quality of life, and reductions in pain.
- ❖ Weight management and injury prevention are two ways to lower a person's risk for developing osteoarthritis.
- ❖ Early diagnosis and proper management can decrease or avoid the amount of pain that a person may experience or disability that accompanies arthritis.

(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Arthritis at a Glance 2011)

Arthritis-Attributable Activity Limitations Increase with Weight



Source for graph: Arthritis at a Glance 2011, Morbidity and Mortality Weekly Report 2010; 59(39):999-1003.

2011 Adult Comparisons	Gauga County 2011	Ohio 2009	U.S. 2009
Diagnosed with arthritis	34%	31%	26%

Asthma & Other Respiratory Disease

Key Findings

According to the Geauga County survey data, 12% of Geauga County adults and 20% of Geauga County youth had been diagnosed with asthma.

Asthma & Other Respiratory Disease

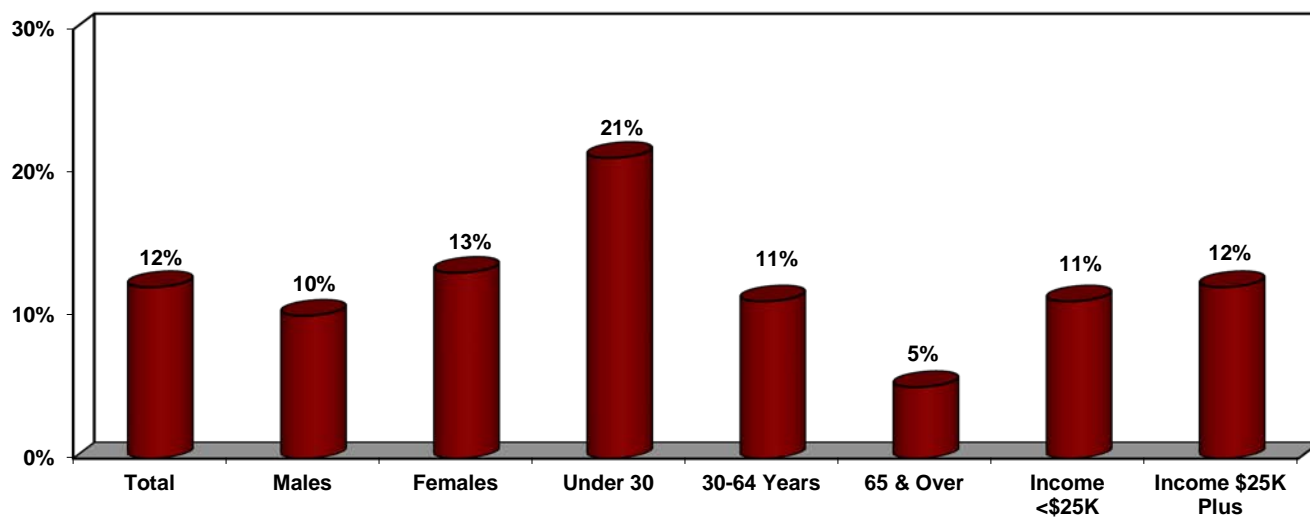
- ◆ In 2011, 12% of Geauga County adults had been diagnosed with asthma, increasing to 21% of those under the age of 30.
- ◆ 14% of Ohio and U.S. adults have ever been diagnosed with asthma. *(Source: 2010 BRFSS)*
- ◆ There are several important factors that may trigger an asthma attack. Some of these triggers are secondhand smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, infections linked to the flu, colds, and respiratory viruses. *(Source: CDC- National Center for Environmental Health, 2011)*
- ◆ Chronic lower respiratory disease was the 3rd leading cause of death in Geauga County and Ohio from 2006-2008. *(Source: ODH, Information Warehouse)*
- ◆ In 2011, 20% of Geauga County youth had been diagnosed with asthma.

Chronic Respiratory Conditions

- ◆ Asthma is a chronic lung disease that inflames and narrows airways. It can cause recurring periods of wheezing, chest tightness, shortness of breath and coughing.
- ◆ Chronic bronchitis is a condition where the bronchial tubes (the tubes that carry air to your lungs) become inflamed. Bronchitis can cause wheezing, chest pain or discomfort, a low fever, shortness of breath and a cough that brings up mucus. Smoking is the main cause of chronic bronchitis.
- ◆ Chronic Obstructive Pulmonary Disorder (COPD) is a disease that over time makes it harder to breathe. COPD can cause large amounts of mucus, wheezing, shortness of breath, chest tightness, and other symptoms. Smoking is the main cause of COPD.

(Source: National Heart, Lung, Blood Institute, 2011)

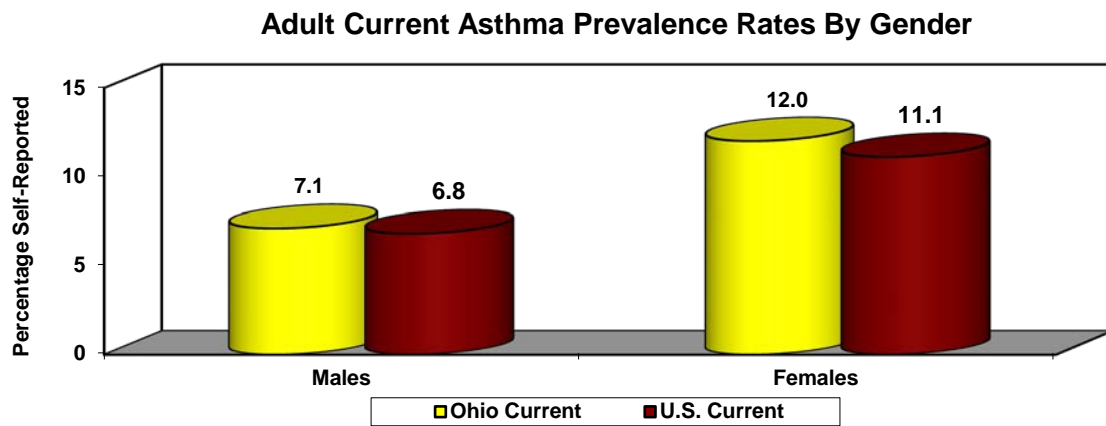
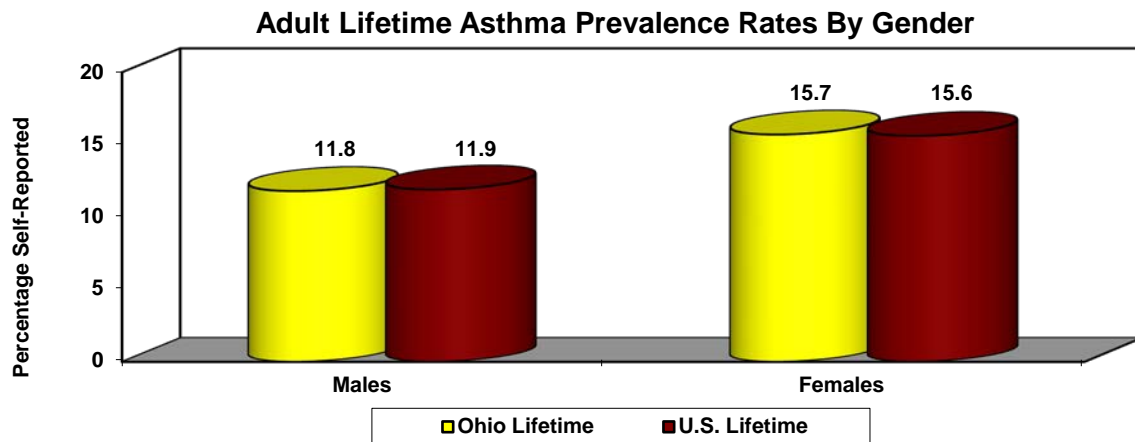
Gauga County Adults Diagnosed with Asthma



2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Diagnosed with asthma	12%	14%	14%

Asthma & Other Respiratory Disease

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



(Source: 2010 BRFSS)

Asthma Control

Recommendations from the CDC's National Asthma Control Program include:

- Tracking: routinely collect and analyze asthma data to determine who is most affected in Geauga County.
- Interventions: assure that research-based public health practices and programs are implemented to reduce the burden of asthma within the county.
- Partnerships: make sure that all stakeholders have the opportunity to be involved in developing, implementing and evaluating the local asthma control programs.

For youth, the CDC has published *Strategies for Addressing Asthma within a Coordinated School Health Program*, revised 2006. The six strategies identified include:

- Establishing management and support systems for asthma-friendly schools.
- Providing appropriate school health and mental health services for students with asthma.
- Providing asthma education and awareness programs for students and school staff.
- Providing a safe and healthy school environment to reduce asthma triggers.
- Providing safe, enjoyable physical education and activity opportunities for students with asthma.
- Coordinating school, family and community efforts to better manage asthma symptoms and reduce school absences among students with asthma.

Adult Weight Status

Key Findings

The 2011 Health Assessment project identified that 60% of Geauga County adults were overweight or obese based on BMI. The 2010 BRFSS indicates that 30% of Ohio and 28% of U.S. adults were obese by BMI. Just over one-fifth (22%) of Geauga County adults were obese. More than two-fifths (44%) of adults were trying to lose weight. 22% of adults had not been participating in any physical activities or exercise in the past month.

Adult Weight Status

- ◆ In 2011, the health assessment indicated that three-fifths (60%) of Geauga County adults were either overweight (38%) or obese (22%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases (see below).
- ◆ More than two-fifths (44%) of adults were trying to lose weight, 37% were trying to maintain their current weight or keep from gaining weight and 2% were trying to gain weight.
- ◆ Geauga County adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (53%), exercised (52%), ate a low-carb diet (14%), used a weight loss program (3%), participated in a prescribed dietary or fitness program (2%), smoked cigarettes (2%), went without eating 24 or more hours (2%), took diet pills, powders or liquids without a doctor's advice (1%), and took prescribed medications (1%).

Physical Activity

- ◆ In Geauga County, 56% of adults were engaging in physical activity for at least 30 minutes 3 or more days per week. 30% of adults were exercising 5 or more days per week. Nearly one-quarter (22%) of adults were not participating in any physical activity in the past week, including those who were unable to exercise.
- ◆ 88% of adults had participated in the following physical activities or exercise in the past year: walking (63%), strength training (26%), exercise machines (25%), running/jogging (19%), cycling (17%), swimming (9%), and other types of physical activities (22%).
- ◆ Geauga County adults gave the following reasons for not exercising: time (28%), weather (17%), pain/discomfort (11%), could not afford a gym membership (7%), did not have child care (4%), no gym available (3%), did not know what activity to do (3%), no walking or biking trails (2%), safety (1%), doctor advised them not to exercise (1%), and other reasons (11%).
- ◆ On an average day, adults spent time doing the following: 3.9 hours watching television, 2.6 hours on the computer outside of work, 2.5 hours on their cell phone, and 1.2 hours playing video games.
- ◆ The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, CDC also recommends muscle-strengthening activities that work all major muscle groups on 2 or more days per week (Source: CDC, *Physical Activity for Everyone*)

Nutrition

- ◆ In 2011, 9% of Geauga County adults ate 5 or more servings of fruits and vegetables per day. 88% ate 1 to 4 servings per day. The American Cancer Society recommends that adults eat 5-9 servings 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.
- ◆ Geauga County adults get their fruits and vegetables from the following places: large grocery store (77%), Farmer's Market (39%), local grocery store (36%), restaurants (4%), food pantry (1%), and other places (6%).
- ◆ 72% of adults read food labels or consider nutritional content when choosing the foods they eat.
- ◆ Adults ate out in a restaurant or brought home take-out food an average of 1.9 times per week.
- ◆ 68% of adults reported taking vitamin pills or supplements.

Defining the Terms

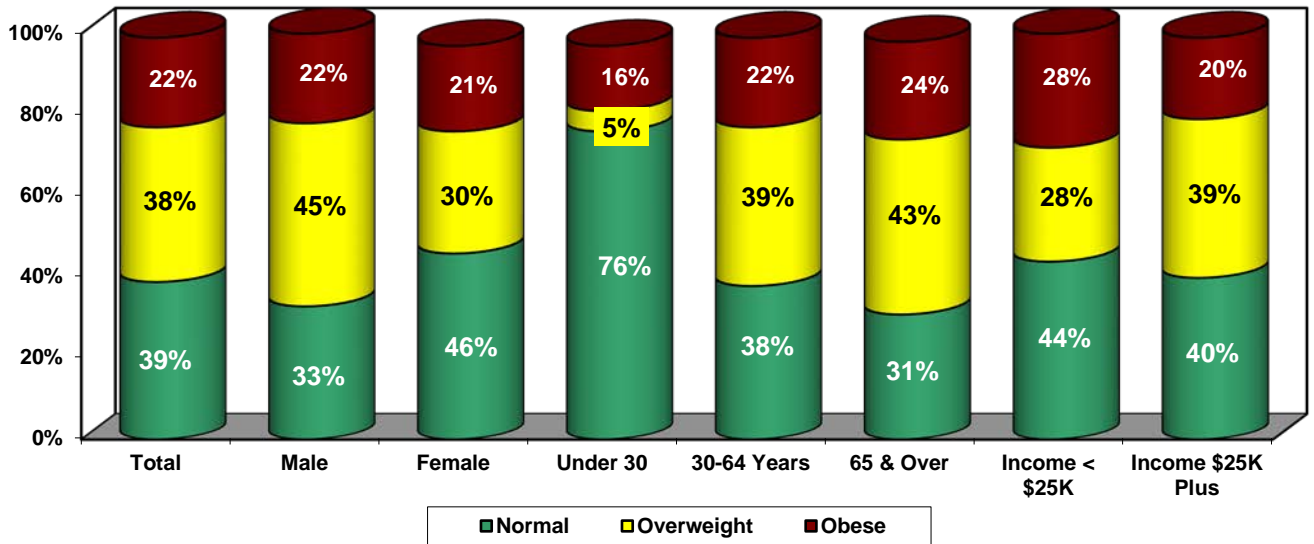
- ◆ Obesity: An excessively high amount of body fat compared to lean body mass.
- ◆ Body Mass Index (BMI): The contrasting measurement/relationship of weight to height. CDC uses this measurement to determine overweight and obesity.
- ◆ Underweight: Adults with a BMI less than 18.5.
- ◆ Normal: Adults with a BMI of 18.5 to 24.9.
- ◆ Overweight: Adults with a BMI of 25 to 29.9.
- ◆ Obese: Adults with a BMI of 30 or greater.

(Source: CDC 2010)

Adult Weight Status

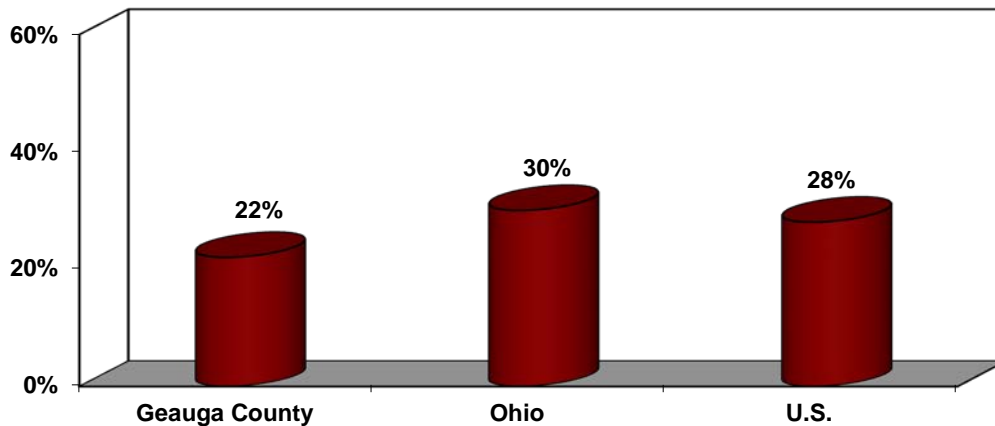
The following graphs show the percentage of Geauga County adults who were overweight or obese by Body Mass Index (BMI) and the percentage of Geauga County adults who were obese compared to Ohio and U.S. Examples of how to interpret the information include: 39% of all Geauga County adults were classified as normal weight, 38% overweight, and 22% obese.

Gauga County Adult BMI Classifications



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

Obesity in Geauga County, Ohio, and U.S. Adults



(Source: 2011 Geauga County Health Assessment and 2010 BRFSS)

2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Obese	22%	30%	28%
Overweight	38%	36%	36%

Adult Tobacco Use

Key Findings

In 2011, 14% of Geauga County adults were current smokers and 30% were considered former smokers. In 2011, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of disease and early death in the world, accounting for approximately 5.4 million premature deaths each year. ACS estimated that tobacco use would be linked to approximately one in five deaths in the U.S. (Source: Cancer Facts & Figures, American Cancer Society, 2011)

Adult Tobacco Use Behaviors

- ◆ The 2011 health assessment identified that one in seven (14%) Geauga County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days). The 2010 BRFSS reported current smoker prevalence rates of 23% for Ohio and 17% for the U.S. 30% of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2010 BRFSS reported former smoker prevalence rates of 25% for Ohio and the U.S.
- ◆ Geauga County adult smokers were more likely to:
 - Have rated their general health as fair or poor (48%)
 - Have been separated (40%)
 - Have been under the age of 30 (32%)
 - Have incomes less than \$25,000 (22%)
- ◆ 42% of the current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- ◆ Geauga County adults used the following tobacco products: flavored cigarettes (8%), cigars (6%), chewing tobacco (3%), snuff (2%), swishers (2%), black and milds (1%), hookah (1%), e-cigarettes (1%), little cigars (1%), and snus (1%).
- ◆ One-quarter (25%) of adults used some form of tobacco including cigarettes or other tobacco products in the past year.
- ◆ 91% of adults believe that secondhand smoke is harmful to their or their family's health.

Tobacco Use and Health

- ◆ Tobacco use is the most preventable cause of death in the U.S. and in the world
- ◆ 87% of all lung cancers deaths and at least 30% of all cancer deaths in the U.S. can be attributed to smoking.
- ◆ When compared to non-smokers, the risk of developing lung cancer is 23 times higher in male smokers and 13 times higher in female smokers.
- ◆ Tobacco use is also associated with at least 20 types of cancer such as cervical, mouth, pharyngeal, esophageal, pancreatic, kidney and bladder.
- ◆ Tobacco use contributes to heart disease, stroke, bronchitis, emphysema, COPD, chronic sinusitis, severity of colds, pneumonia and low birth weight in infants.

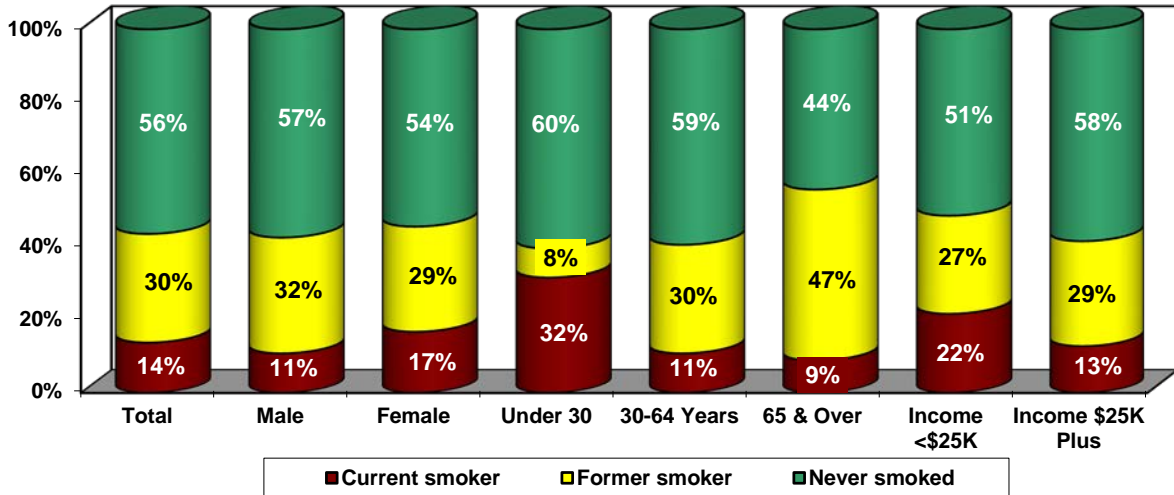
(Source: Cancer Facts & Figures, American Cancer Society, 2011)

2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Current smoker	14%	23%	17%
Former smoker	30%	25%	25%

Adult Tobacco Use

The following graph shows the percentage of Geauga County adults who used tobacco. Examples of how to interpret the information include: 14% of all Geauga County adults were current smokers, 30% of all adults were former smokers, and 56% had never smoked.

Gauga County Adult Cigarette Smoking Behaviors



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

Costs of Tobacco Use

- ❖ If a pack-a-day smoker spent \$4/pack, they would spend: \$28/week, \$112/month, or \$1,456/year.
- ❖ 14% of Geauga County adults indicated they were smokers. That is approximately 13,075 adults.
- ❖ If 3,725 adults spent \$1,456/year, then \$19,037,200 is spent a year on cigarettes in Geauga County.

Smoking and Tobacco Facts

- ❖ Tobacco use is the most preventable cause of death in the U.S.
- ❖ Approximately 49,000 deaths per year in the U.S. are from secondhand smoke exposure.
- ❖ Typically, smokers die 13 to 14 years earlier than non-smokers.
- ❖ In 2009, cigarette smoking was highest in prevalence in adults among American Indians/Native Americans (23%), followed by whites (22.1%), African Americans (21.3%), Hispanics (14.5%), and Asians (12.0%).
- ❖ Smoking costs over \$193 billion in lost productivity (\$97 billion) and health care expenses (\$96 billion) per year.
- ❖ In 2006, the cigarette industry spent more than \$34 million per day on advertising and promotional expenses.

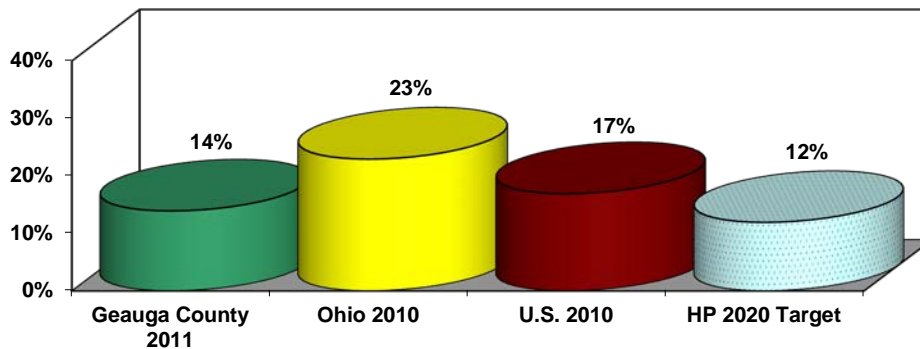
(Source: CDC: Fast Facts on Smoking and Tobacco Use, accessed from http://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm)

Adult Tobacco Use

The following graphs show Geauga County, Ohio, and U.S. adult cigarette smoking rates and age-adjusted mortality rates per 100,000 population for chronic lower respiratory diseases (formerly COPD) and trachea, bronchus and lung cancers in comparison with the Healthy People 2020 objectives. The BRFSS rates shown for Ohio and the U.S. were for adults 18 years and older. These graphs show:

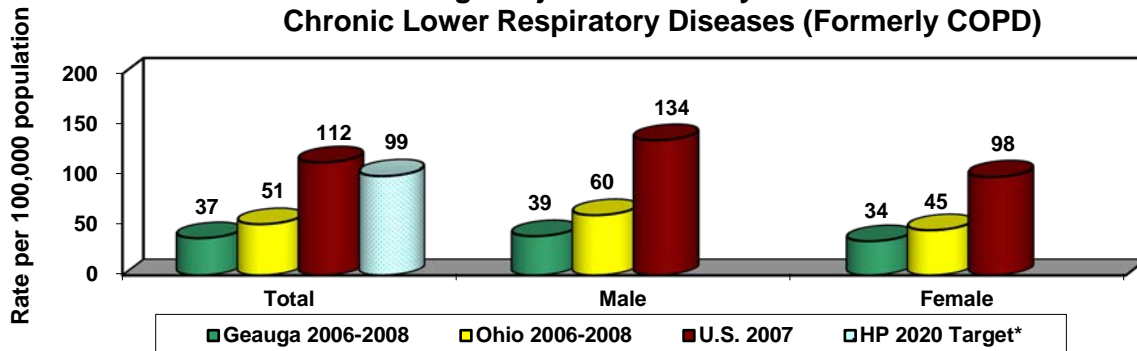
- ◆ Geauga County adult cigarette smoking rate was lower than the rate for Ohio and the U.S., and higher than the Healthy People 2020 Goal.
- ◆ From 2006-2008, Geauga County’s age-adjusted mortality rate for Chronic Lower Respiratory Disease was lower than the Ohio rate, the U.S. rate, and the Healthy People 2020 target objective.
- ◆ From 2004-2008 the percentage of mothers who smoked during pregnancy in Geauga County fluctuated slightly from year to year, but was consistently lower than the Ohio rate.
- ◆ Disparities existed by gender for Geauga County chronic lower respiratory disease mortality rates, as well as trachea, bronchus, and lung cancer age-adjusted mortality rates. The 2006-2008 Geauga male rates were higher than the Geauga female rates in both cases.

Healthy People 2020 Objectives & Cigarette Smoking Rates



(Source: 2011 Assessment, BRFSS and HP2020)

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

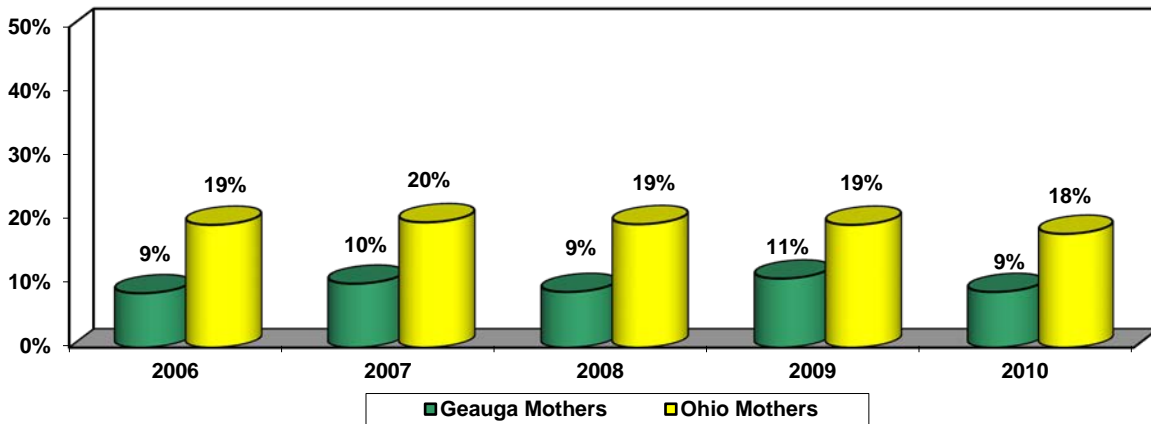


(Source: ODH Information Warehouse and HP2020)

**HP2020 does not report different goals by gender. The target rate is calculated for adults 45 years and older.*

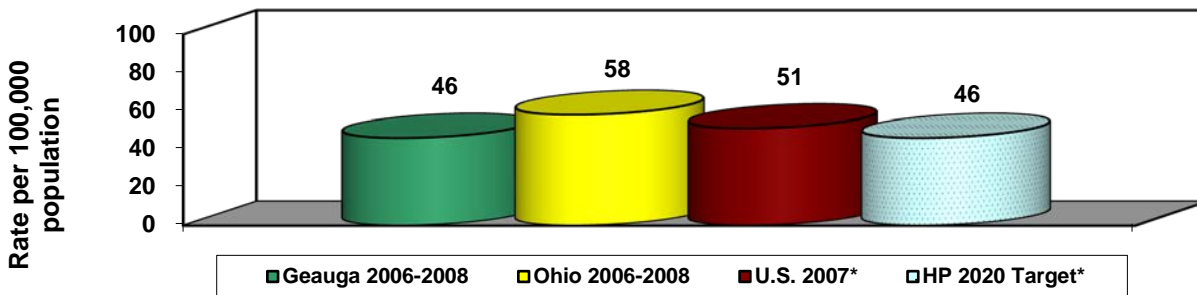
Adult Tobacco Use

Births to Mothers Who Smoked During Pregnancy



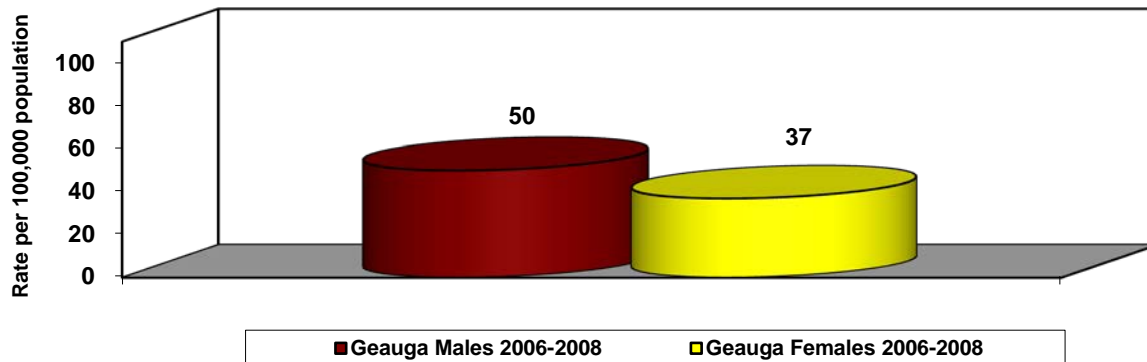
(Source: ODH Births, Vital Statistics Annual Birth Summaries by Year, 2006-2010)

Age-Adjusted Mortality Rates for Trachea, Bronchus & Lung Cancer



*Healthy People 2020 Target and U.S. 2007 data are for lung cancer only
(Source: Healthy People 2020, ODH Information Warehouse, updated 4-15-10)

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



(Source: ODH Information Warehouse, updated 4-15-10)

Adult Alcohol Consumption

Key Findings

In 2011, the health assessment indicated that 21% of Geauga County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 28% of adults who drank had five or more drinks on one occasion (binge drinking) in the past month. Six percent of adult drinkers drove after having perhaps too much to drink.

Geauga County Adult Alcohol Consumption

- ◆ In 2011, nearly two-thirds (65%) of the Geauga County adults had at least one alcoholic drink in the past month, increasing to 71% of those ages 30-64. The 2010 BRFSS reported current drinker prevalence rates of 53% for Ohio and 55% for the U.S.
- ◆ More than one-fifth (21%) of adults were considered frequent drinkers (drank on an average of three or more days per week).
- ◆ Of those who drank, Geauga County adults drank 2.0 drinks on average, increasing to 3.7 drinks for those under the age of 30.
- ◆ Of all adults, 18% were considered binge drinkers. The 2010 BRFSS reported binge drinking rates of 17% for Ohio and 15% for the U.S.
- ◆ 28% of those who drank alcohol in the past month reported they had five or more alcoholic drinks (for males) or four or more alcoholic drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition, increasing to 68% of those under the age of 30. (See box above)
- ◆ 6% of adult drinkers reported driving after having perhaps too much to drink.
- ◆ Geauga County adults approved of the following: drinking alcohol (71%), binge drinking (7%), riding in a vehicle with some who had been drinking alcohol (6%), drinking alcohol and driving (3%), parents allowing or giving alcohol to minors in their home (3%), and consuming alcohol and driving a child (2%).
- ◆ 4% of Geauga County adults have used a program or service to help with alcohol or other drug problems for either themselves or a loved one. 2% of adults needed a program but gave the following reasons for not using such a program: had not thought of it (1%), transportation (<1%), fear (<1%), and other reasons (1%).

Binge Drinking Dangers

- ◆ Binge drinking is defined as five or more drinks on one occasion or in a short period of time for men, and four or more drinks for women.
- ◆ About 92% of U.S. adults who drink excessively reported binge drinking in the past month.
- ◆ The prevalence of males binge drinking is higher than the prevalence of females binge drinking.
- ◆ Approximately 75% of the alcohol consumed in the U.S. is in the form of binge drinks.
- ◆ The highest proportion age group to binge drink is in the 18-20 year old group at 51%.
- ◆ Most people who binge drink are not alcohol dependent.
- ◆ Unintentional injuries, violence, alcohol poisoning, hypertension, sexually transmitted diseases, cardiovascular diseases, sexual dysfunction and unintentional pregnancy are a few of the adverse health effects of binge drinking.

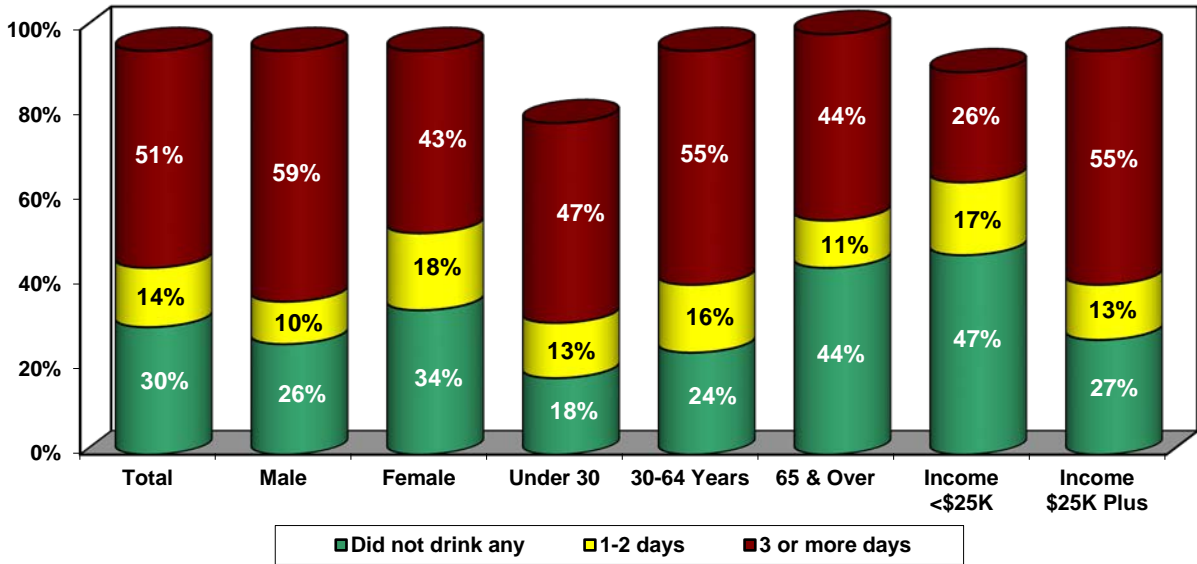
(Source: CDC, Binge Drinking Facts Sheet, 10-17-2010)

2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Drank alcohol at least once in past month	65%	53%	55%
Binge drinker (drank 5 or more drinks on occasion)	18%	17%	15%

Adult Alcohol Consumption

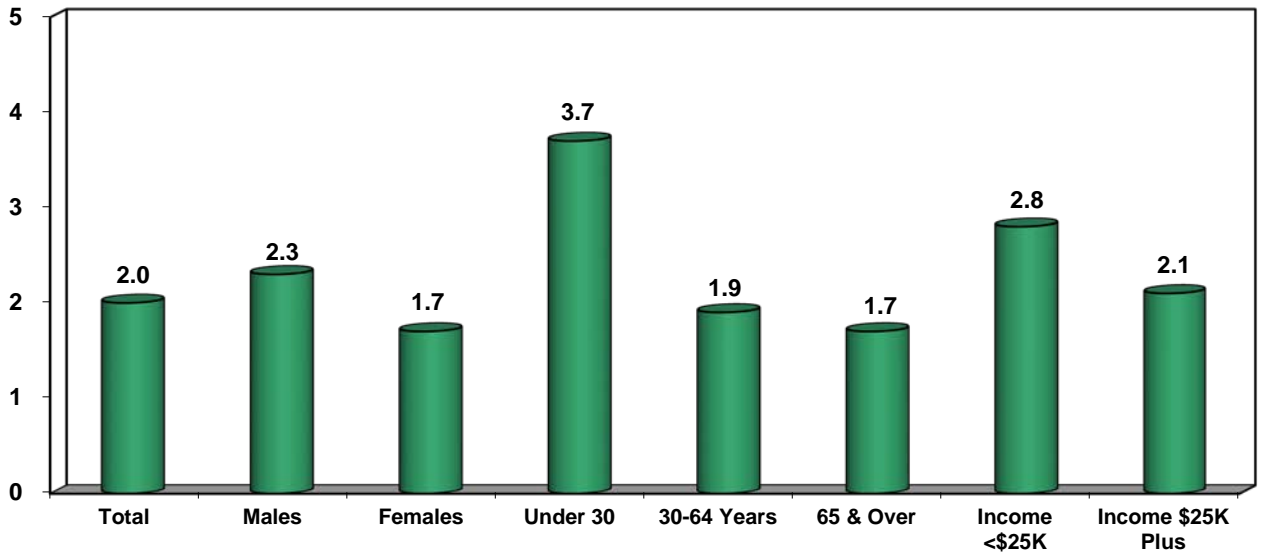
The following graphs show the percentage of Geauga County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 30% of all Geauga County adults did not drink alcohol, 26% of Geauga County males did not drink and 34% of adult females reported they did not drink.

Average Number of Days Drinking Alcohol in the Past Month



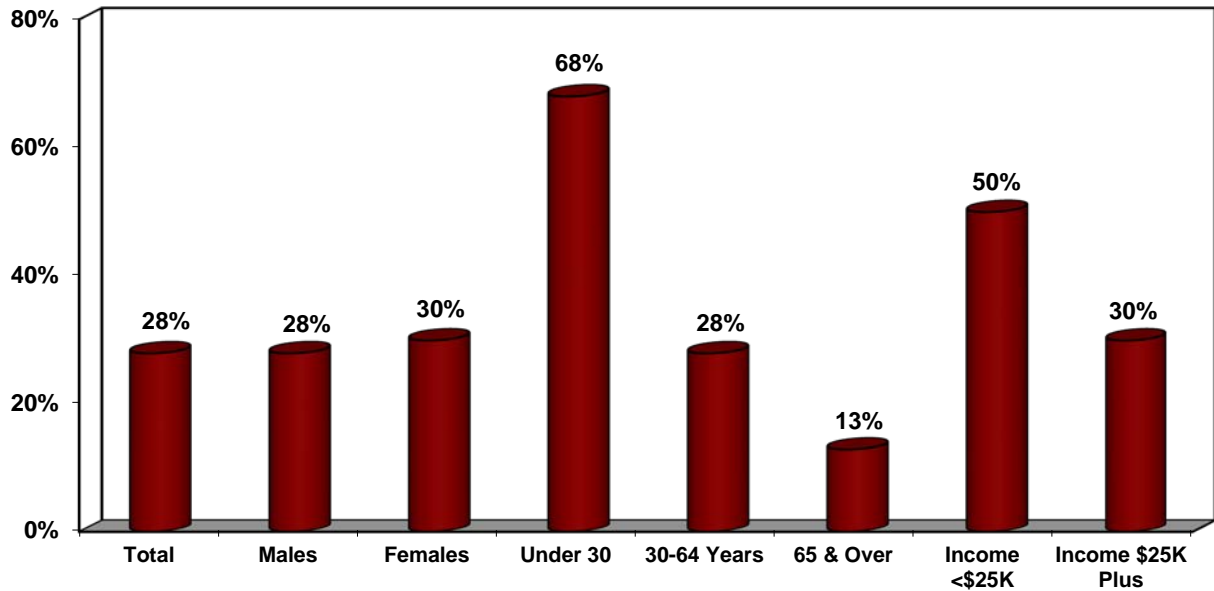
Percentages may not equal 100% as some respondents answered "don't know"

Adults Average Number of Drinks Consumed Per Occasion



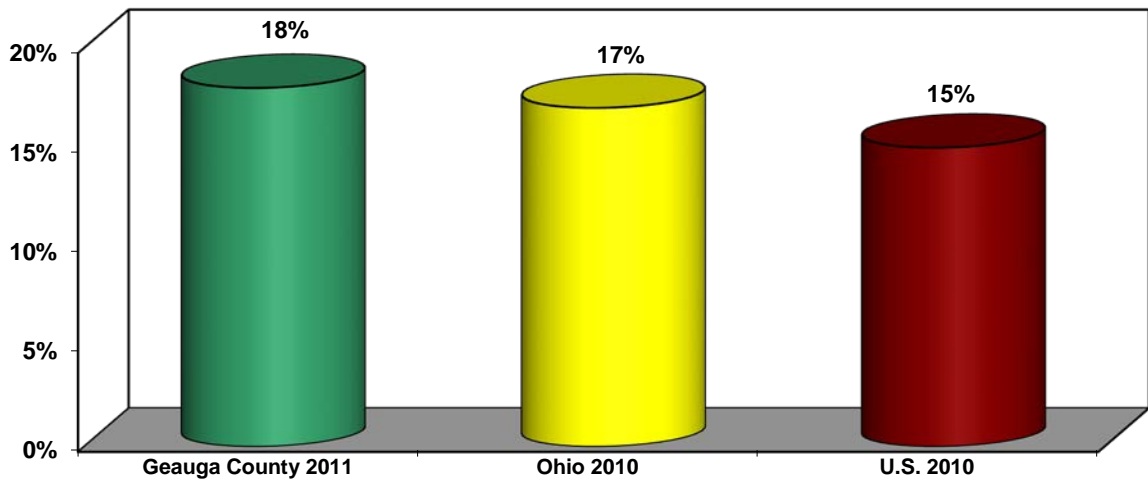
Adult Alcohol Consumption

Geauga County Adult Drinkers Who Binge Drank in Past Month*



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

Adult Binge Drinkers



(Source: 2010 BRFSS, 2011 Geauga County Health Assessment)

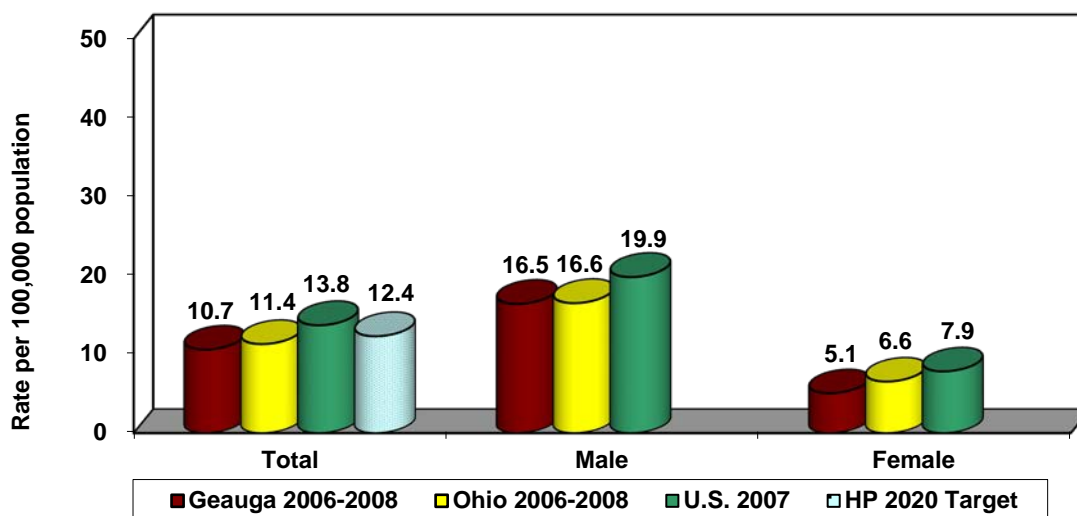
**Based on all adults. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion.*

Motor Vehicle Accidents

The following graphs show Geauga County and Ohio age-adjusted motor vehicle accident mortality rates per 100,000 population with comparison to Healthy People 2020 Objective. The graphs show:

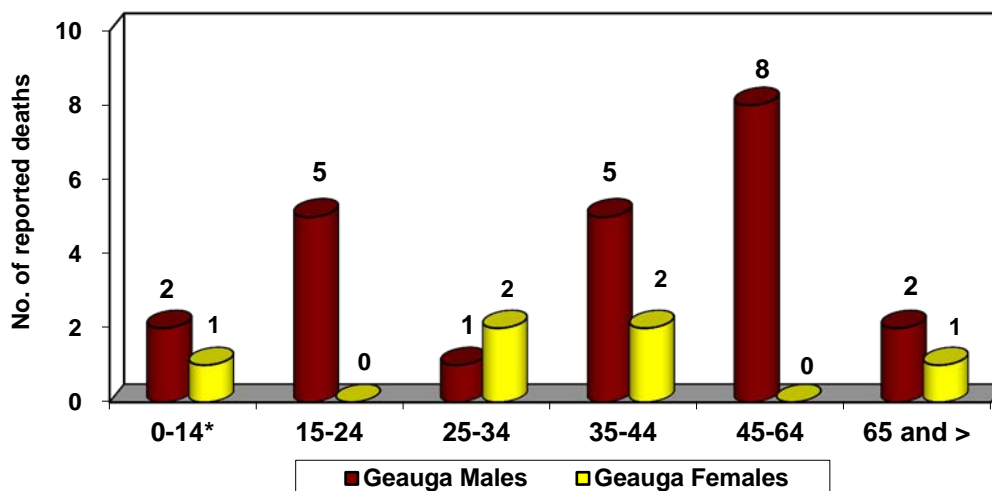
- ◆ From 2006-2008, the Geauga County motor vehicle age-adjusted mortality rate of 10.7 deaths per 100,000 population was lower than the state rate, the national rate and the Healthy People 2020 Objective.
- ◆ The 2006-2008, Geauga County age-adjusted motor vehicle accident mortality rate for males was higher than the female rate.
- ◆ 23 Geauga County males died of motor vehicle accidents from 2006-2008 while 6 Geauga County females died of motor vehicle accidents during the same period.

Healthy People 2020 Objective and Age-Adjusted Mortality Rates for Motor Vehicle Accidents



(Source: ODH Information Warehouse, updated 4-15-10 and Healthy People 2020)

Gauga County Number of Motor Vehicle Deaths By Age and Gender, 2006-2008
N=29*



**Zero motor vehicle accident deaths were reported for ages 1 to 4, and ODH Information Warehouse found records for 1 death for ages 5 to 14
(Source: ODH Information Warehouse, updated 4-15-10)*

Geauga County Crash Statistics

	City of Chardon 2010	Geauga County 2010	Ohio 2010
Total Crashes	170	1,951	300,164
Alcohol-Related Total Crashes	2	109	13,037
Fatal Crashes	0	9	984
Alcohol-Related Fatal Crashes	0	1	393
Alcohol Impaired Drivers in Crashes	2	109	13,037
Injury Crashes	37	508	74,427
Alcohol-Related Injury Crashes	0	61	5,456
Property Damage Only	133	1,428	221,597
Alcohol-Related Property Damage Only	2	47	7,094
Deaths	0	9	1,080
Alcohol-Related Deaths	0	1	431
Total Non-Fatal Injuries	42	727	108,758
Alcohol-Related Injuries	0	84	7,714

(Source: Ohio Department of Public Safety, Crash Reports, 2010 Traffic Crash Facts)

Adult Marijuana and Other Drug Use

Key Findings

In 2011, 5% of Geauga County adults had used marijuana during the past 6 months. 1% of adults used other recreational drugs. 5% of adults misused medications.

Adult Drug Use

- ◆ Five percent (5%) of Geauga County adults had used marijuana in the past 6 months.
- ◆ 1% of Geauga County adults reported using other recreational drugs such as cocaine, methamphetamines, heroin, LSD, inhalants, or Ecstasy.
- ◆ When asked about their frequency of drug use in the past six months, 6% of Geauga County adults who used recreational drugs did so every day, and 39% did so less than once a month.
- ◆ 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.
- ◆ When asked about their frequency of medication misuse in the past six months, 41% of Geauga County adults who used these drugs did so every day and 18% did so less than once per month.
- ◆ Geauga County adults did the following with their unused prescription medications:
 - Throw them in the trash (42%)
 - Keep them (26%)
 - Flush them down the toilet (21%)
 - Take them to the Medication Collection program (11%)
 - Give them away (2%)
 - Sell them (<1%)

Drug-Related Emergency Department Visits

- ❖ In the U.S. in 2009, there were nearly 4.6 million drug-related emergency department (ED) visits. Almost one half (2.1 million) were attributed to drug misuse or abuse.
- ❖ The misuse or abuse of pharmaceuticals resulting in ED visits occurred at a rate of 405.4 visits per 100,000 population, compared with a rate of 317.1 per 100,000 population for illicit drugs.
- ❖ Alcohol was a factor in the drug misuse or abuse accounting for less than one third (31.8%) or 650,000 visits.

(Source: SAMHSA, Drug Abuse Warning Network Report, December 28, 2010, <http://oas.samhsa.gov/2k10/D.AWN034/EDHighlightsHTML.pdf>)

Prescription Painkiller Overdoses in the U.S. Facts

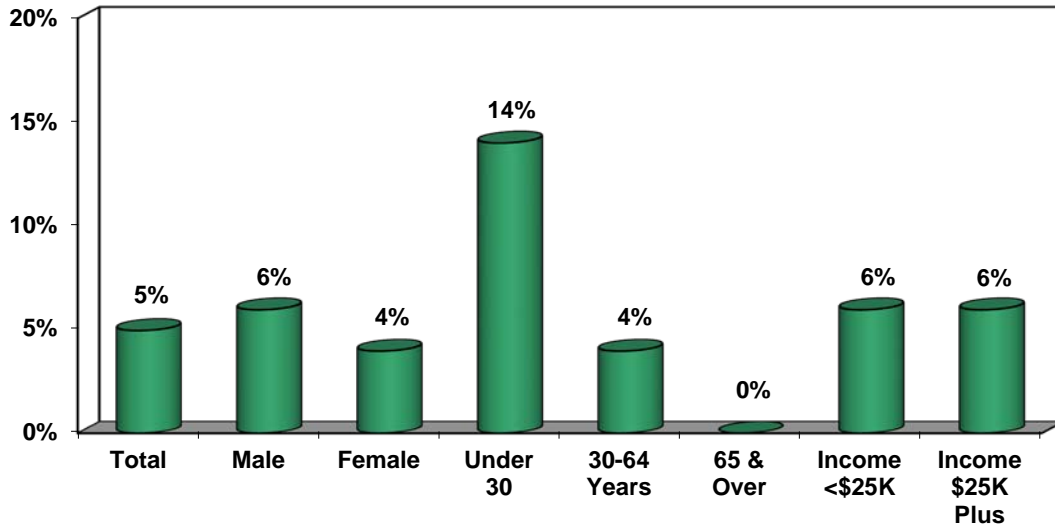
- ❖ Approximately 12 million Americans (ages 12 and older) reported a non-medical use of prescription painkillers in the past year in 2010.
- ❖ Almost half of all ER visits in 2009 were due to people misusing or abusing prescription painkillers.
- ❖ There were enough prescription painkillers that were prescribed in 2010 to medicate every American adult around the clock for a month.
- ❖ The number of prescription painkiller overdoses deaths is greater than the deaths from heroin and cocaine combined.
- ❖ Nonmedical use of prescription painkillers costs health insurers up to \$72.5 billion annually in direct medical costs.

(Source: CDC, National Center for Injury Prevention and Control, Prescription Painkiller Overdoses in the U.S., obtained from: <http://www.cdc.gov/VitalSigns/pdf/2011-11-vitalsigns.pdf>)

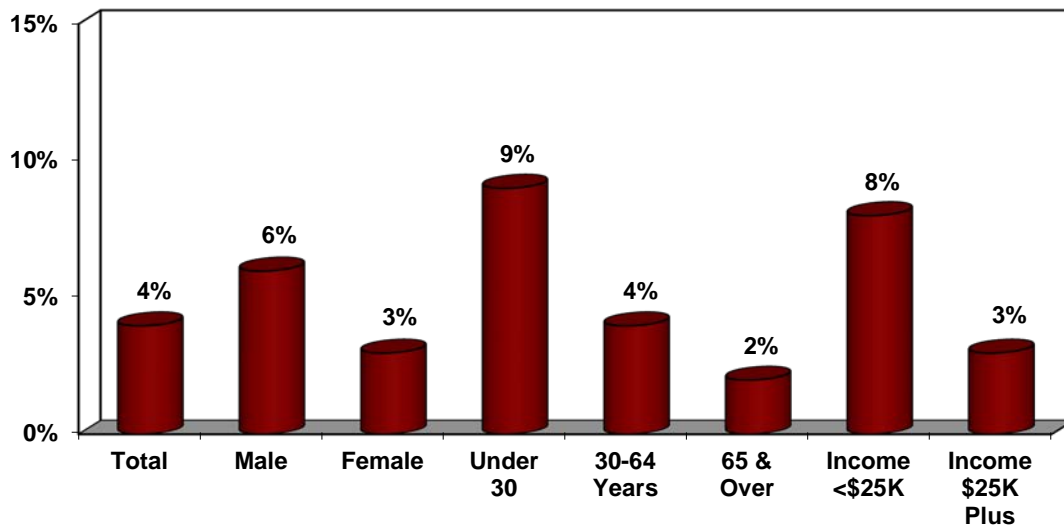
Adult Marijuana and Other Drug Use

The following graphs are data from the 2011 Geauga County Health Assessment indicating adult marijuana use and medication misuse in the past six months. Examples of how to interpret the information include: 5% of all Geauga County adults used marijuana in the past six months, 14% of adults under the age of 30 were current users and 6% of adults with incomes more than \$25,000 were current users.

Geauga County Adult Marijuana Use in Past 6 Months



Geauga County Adult Medication Misuse in Past 6 Months



Women's Health

Key Findings

In 2011, more than half (55%) of Geauga County women over the age of 40 reported having a mammogram in the past year. 94% of Geauga County women have had a clinical breast exam and 96% have had a Pap smear to detect cancer of the cervix in the past year. The health assessment determined that 2% of women had a heart attack, and 1% had a stroke at some time in their life. More than one-quarter (26%) had high blood pressure, 32% had high blood cholesterol, 21% were obese, and 17% were identified as smokers, known risk factors for cardiovascular diseases.

Women's Health Screenings

- ◆ In 2011, 70% of women had a mammogram at some time and two-fifths (40%) had this screening in the past year.
- ◆ More than half (55%) of women ages 40 and over had a mammogram in the past year and 77% had one in the past two years. The 2010 BRFSS reported that 76% of women 40 and over in the U.S. and 74% in Ohio, had a mammogram in the past two years.
- ◆ Most (94%) Geauga County women have had a clinical breast exam at some time in their life and 56% had one within the past year.
- ◆ This assessment has identified that 96% of Geauga County women have had a Pap smear and 49% reported having had the exam in the past year. 73% of women had a pap smear in the past two years.

Pregnancy

- ◆ Thinking back to their last pregnancy: 57% of women wanted to be pregnant then, 11% wanted to be pregnant sooner, 9% wanted to be pregnant later, 4% did not want to be pregnant then or any time in the future, and 18% of women did not recall.
- ◆ During their last pregnancy, Geauga County women: took a multi-vitamin (82%), got a prenatal appointment in the first 3 months (74%), experienced perinatal depression (18%), smoked cigarettes (8%), and used alcohol (3%).

Women's Health Concerns

- ◆ Women used the following as their usual source of services for female health concerns: private gynecologist (67%), general or family physician (23%), no usual place (6%), family planning clinic (1%), community health center (1%), health department clinic (1%), and some other place (1%).
- ◆ Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Geauga County the 2011 health assessment has identified that:
 - 51% were overweight or obese (57% U.S., 59% Ohio, 2010 BRFSS)
 - 45% were exercising less than three days per week (includes 3% who were unable to exercise)
 - 32% were diagnosed with high blood cholesterol (36% U.S., 37% Ohio, 2009 BRFSS)
 - 26% were diagnosed with high blood pressure (28% U.S. and 30% Ohio, 2009 BRFSS)
 - 17% of all women were current smokers (16% U.S., 22% Ohio, 2010 BRFSS)
 - 4% have been diagnosed with diabetes (10% U.S., 11% Ohio, 2010 BRFSS)

Geauga County Female

Leading Types of Death, 2006 - 2008

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

(Source: ODH Information Warehouse, updated 4-15-10)

Ohio Female

Leading Types of Death, 2006 - 2008

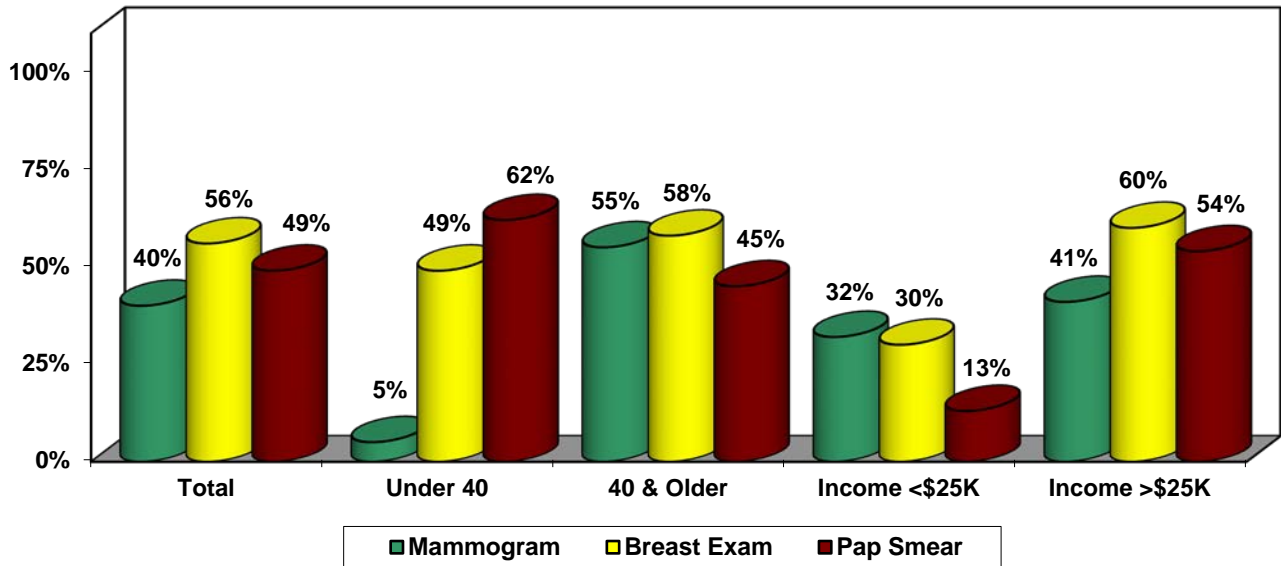
1. Heart Diseases (25% of all deaths)
2. Cancers (22%)
3. Stroke (6%)
4. Chronic Lower Respiratory Diseases (6%)
5. Alzheimer's disease (5%)

(Source: ODH Information Warehouse, updated 4-15-10)

Women's Health

The following graph shows the percentage of Geauga County female adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 40% of Geauga County females have had a mammogram within the past year, 56% have had a clinical breast exam, and 49% have had a Pap smear.

Geauga Women's Health Exams Within the Past Year



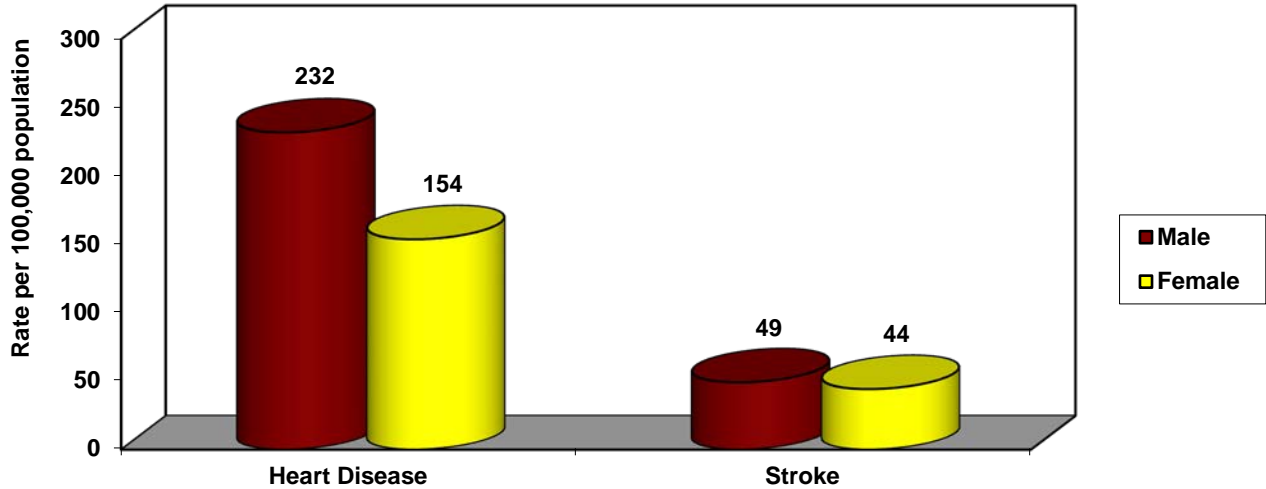
2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Age 40 and over having had a mammogram in the past 2 years	77%	74%	76%
Women diagnosed with diabetes	4%	11%	10%
Women who were overweight or obese	51%	59%	57%

Women's Health

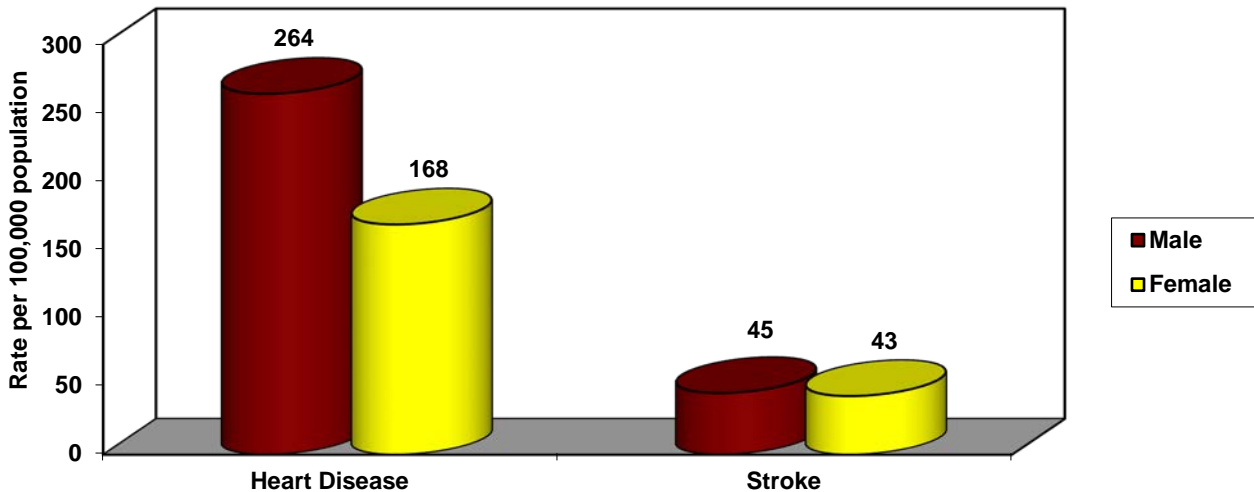
The following graphs show the Geauga County and Ohio age-adjusted mortality rates per 100,000 population for cardiovascular diseases. The graphs show:

- ◆ From 2006-2008, the Geauga County and Ohio female age-adjusted mortality rate was lower than the male rate for both heart disease and stroke.
- ◆ The Geauga County female heart disease mortality rate was lower than the Ohio female rate.

Gauga County Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008



Ohio Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008



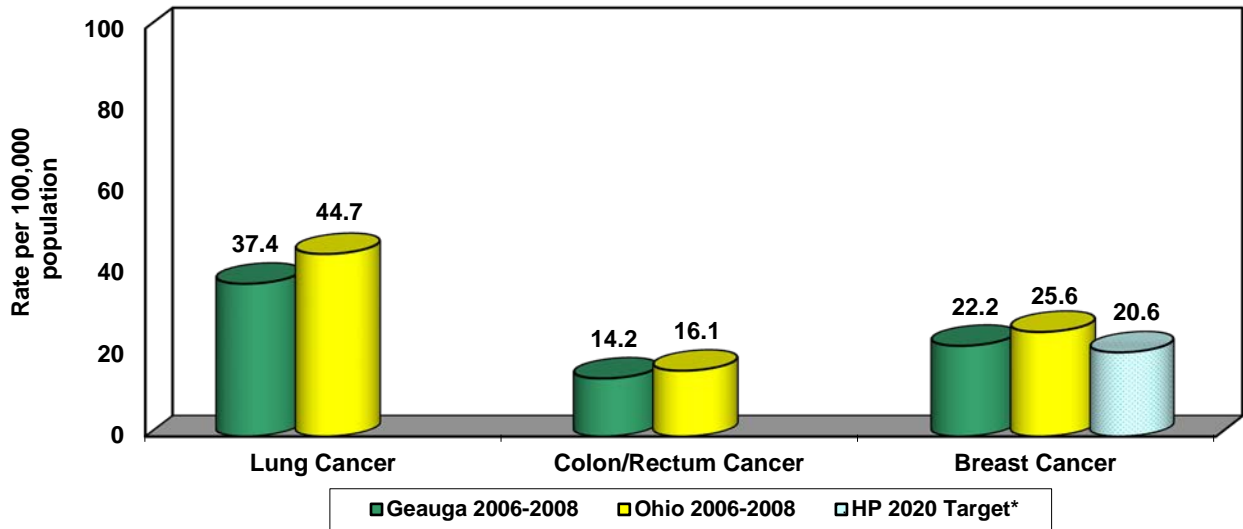
(Source for graphs: ODH Information Warehouse, updated 4-15-10)

Women's Health

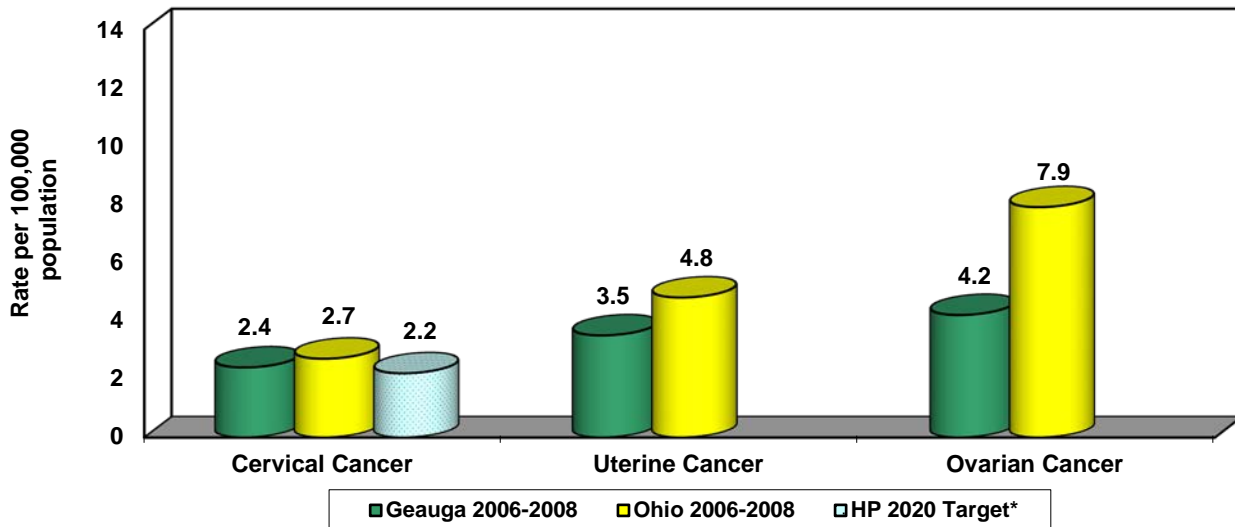
The following graphs show the Geauga County age-adjusted mortality rates per 100,000 population for women's health with comparison to Healthy People 2020 objectives when available. The graphs show:

- ◆ From 2006-2008, the Geauga County age-adjusted mortality rate for female lung cancer was less than the Ohio rate.
- ◆ From 2006-2008, the Geauga County age-adjusted breast cancer mortality rate was lower than the Ohio rate and higher than the Healthy People 2020 target objective.
- ◆ The Geauga County age-adjusted uterine and ovarian cancer mortality rates for 2006-2008 were all lower than the state rates.

Geauga County Female Age-Adjusted Cancer Mortality Rates



Geauga County Female Age-Adjusted Cancer Mortality Rates



**Note: Healthy People 2020 target rates are not gender specific; Healthy People 2020 Targets may not be available for all diseases. (Source: ODH Information Warehouse, updated 4-15-10, and Healthy People 2020)*

Men's Health

Key Findings

In 2011, more than half (58%) of Geauga County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. Nearly half of the population (49%) of males over the age of 50 had a digital rectal exam in the past year. Major cardiovascular diseases (heart disease and stroke) accounted for 32% and cancers accounted for 28% of all male deaths in Geauga County from 2006-2008. The health assessment determined that 3% of men had a heart attack, and 2% had a stroke at some time in their life. Almost one-third (32%) of men had been diagnosed with high blood pressure, 41% had high blood cholesterol, and 11% were identified as smokers, which, along with obesity (22%), are known risk factors for cardiovascular diseases.

Men's Health Screenings

- ◆ Almost half (47%) of Geauga County males had a Prostate-Specific Antigen (PSA) test at some time in their life and 34% had one in the past year.
- ◆ Nearly two-thirds (63%) of men had a digital rectal exam in their lifetime and 30% had one in the past year.
- ◆ 76% of males age 50 and over had a PSA test at some time in their life, and 58% had one in the past year.
- ◆ 86% of males age 50 and over had a digital rectal exam at some time in their life, and 49% had one in the past year.

Men's Health Concerns

- ◆ From 2006-2008, major cardiovascular diseases (heart disease and stroke) accounted for 30% of all male deaths in Geauga County (Source: ODH Information Warehouse).
- ◆ 17% of Geauga County men reported that the following men in their family had been diagnosed with prostate cancer: father (11%), uncle (5%), grandfather (3%), and brother (1%).
- ◆ In 2011, the health assessment determined that 3% 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 Geauga County the 2011 health assessment has identified that:
 - 67% were overweight or obese (71% U.S., 73% Ohio, 2010 BRFSS)
 - 45% were exercising less than three days per week (includes 2% who were unable to exercise) 41% were diagnosed with high blood cholesterol (40% U.S., 43% Ohio, 2009 BRFSS)
 - 32% were diagnosed with high blood pressure (30% U.S., 33% Ohio, 2009 BRFSS)
 - 11% of all men were current smokers (19% U.S., 23% Ohio, 2010 BRFSS)
 - 7% have been diagnosed with diabetes (9% U.S., 10% Ohio, 2010 BRFSS)
- ◆ From 2006-2008, the leading cancer deaths for Geauga County and Ohio males were lung, prostate, pancreas, and colorectal cancers (Source: ODH Information Warehouse).

Gauga County Male Leading Types of Death, 2006 - 2008

1. Cancers (28%)
2. Heart Diseases (27% of all deaths)
3. Chronic Lower Respiratory Diseases (5%)
4. Accidents, Unintentional Injuries (5%)
5. Stroke (4%)

(Source: ODH Information Warehouse, updated 4-15-10)

Ohio Male Leading Types of Death, 2006 - 2008

1. Heart Diseases (26% of all deaths)
2. Cancers (25%)
3. Chronic Lower Respiratory Diseases (6%)
4. Accidents, Unintentional Injuries (6%)
5. Stroke (4%)

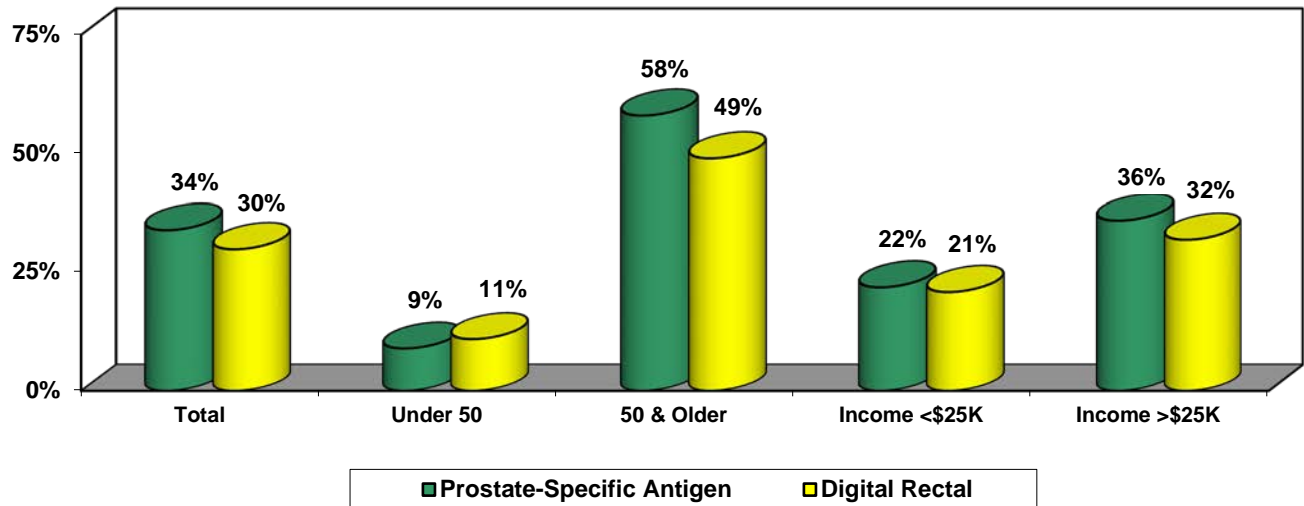
(Source: ODH Information Warehouse, updated 4-15-10)

2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Had a PSA test within the past year	34%	N/A	N/A
Men diagnosed with high blood cholesterol	41%	43%	40%
Men who were current smokers	11%	23%	19%

Men's Health

The following graph shows the percentage of Geauga County males surveyed that have had the listed health exams in the past year. Examples of how to interpret the information shown on the graph include: 34% of Geauga County males have had a PSA test within the past year and 30% have had a digital rectal exam.

Gauga Men's Health Exams Within the Past Year



Men's Health Data

- ❖ Approximately 12% of adult males aged 18 years or older reported fair or poor health.
- ❖ 22% of adult males in the U.S. currently smoke.
- ❖ Of the adult males in the U.S., 31.5% had 5 or more drinks in 1 day at least once in the past year.
- ❖ Only 52% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- ❖ There are 20% of males under the age of 65 without health care coverage.
- ❖ The leading causes of death for males in the United States are heart disease, cancer and accidents (unintentional injuries).

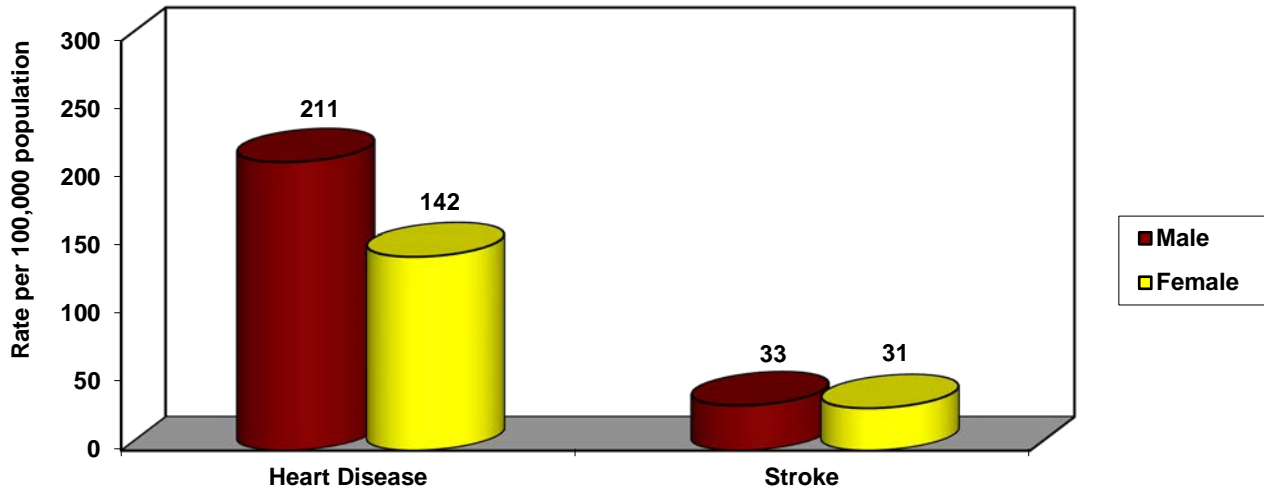
(Source: CDC, National Center for Health Statistics, Men's Health, Fast Stats, 2/18/2011 from http://www.cdc.gov/nchs/fastats/mens_health.htm)

Men's Health

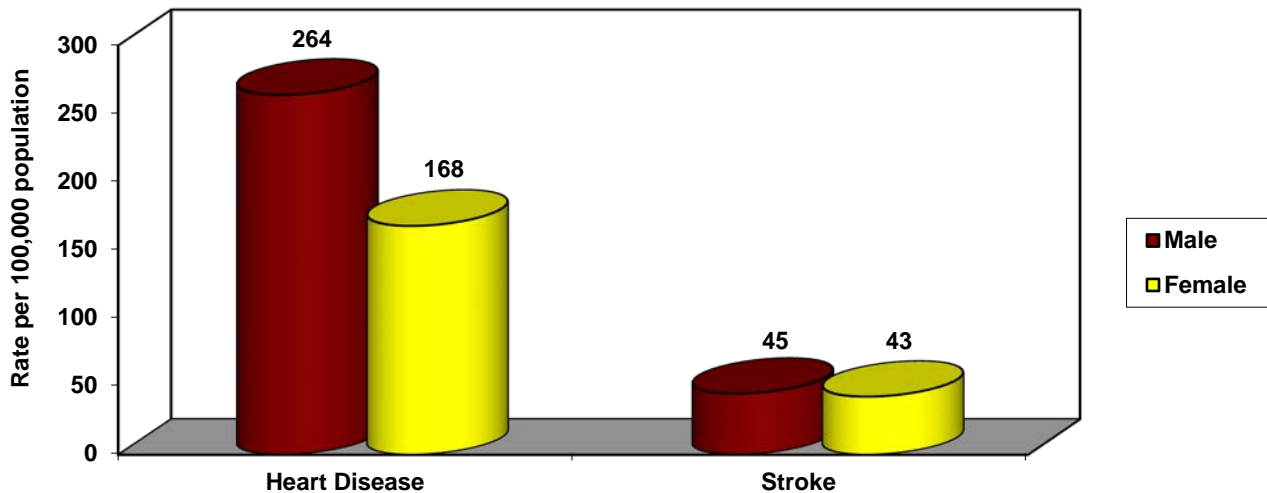
The following graphs show the Geauga County and Ohio age-adjusted mortality rates per 100,000 population for men's cardiovascular diseases. The graphs show:

- ◆ From 2006-2008, the Geauga County and Ohio male age-adjusted mortality rate was higher than the female rate for both heart disease and stroke.
- ◆ The Geauga County male age-adjusted heart disease mortality rate was lower than the Ohio male rate.
- ◆ The Geauga County male age-adjusted stroke mortality rate was lower than the Ohio male rate.

Gauga County Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008



Ohio Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008



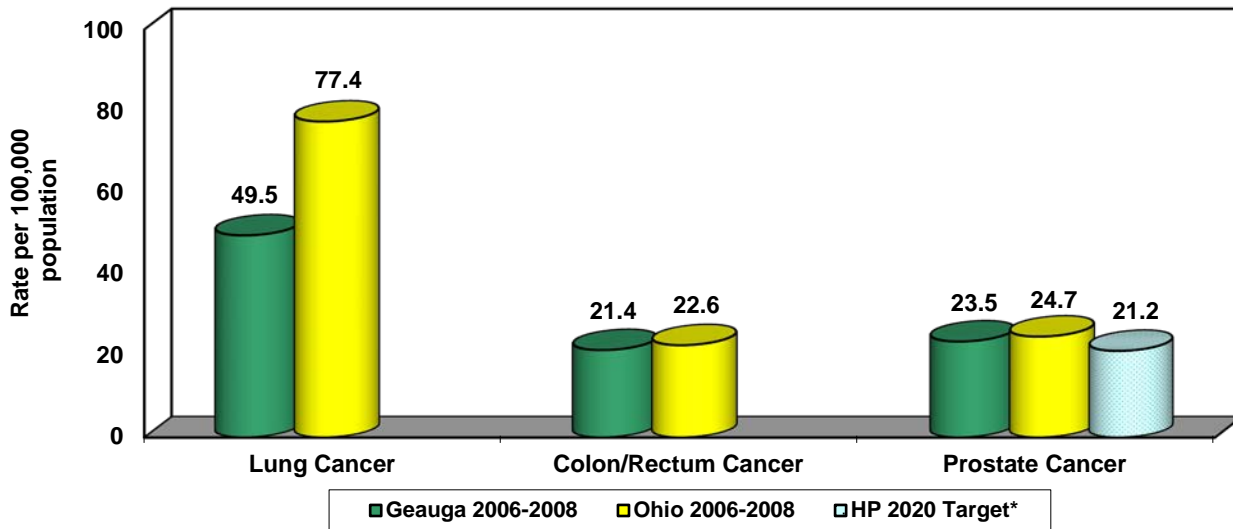
(Source for graphs: ODH Information Warehouse, updated 4-15-10)

Men's Health

The following graph shows the Geauga County age-adjusted mortality rates per 100,000 population for men's health with comparison to Healthy People 2020 objectives. The graph shows:

- ◆ From 2006-2008, the Geauga County age-adjusted mortality rate for male lung cancer was less than the Ohio rate.
- ◆ The age-adjusted prostate cancer mortality rate in Geauga County for 2006-2008 was lower than the Ohio rate, but higher than the Healthy People 2020 objective.

Geauga County Male Age-Adjusted Cancer Mortality Rates



**Note: the Healthy People 2020 target rates are not gender specific.
(Source: ODH Information Warehouse and Healthy People 2020)*

Adult Preventive Medicine and Health Screenings

Key Findings

More than two-fifths (41%) of adults had a flu shot during the past 12 months. 67% of adults 50 or older had received a colonoscopy or sigmoidoscopy in the past 5 years.

Preventive Medicine

- ◆ More than two-fifths (41%) of Geauga County adults had a flu vaccine during the past 12 months.
- ◆ Those who had the flu vaccine received it from the following places: a doctor’s office or health maintenance organization (42%), their workplace (27%), a store (18%), another type of clinic or health center (4%), a health department (3%), a hospital or emergency room (3%), a senior/recreation/community center (1%), and some other place (1%).

Ways to Prevent the Seasonal Flu

1. Get vaccinated each year.
2. Avoid close contact with people who are sick.
3. Stay home when you are sick.
4. Cover your mouth and nose.
5. Wash your hands.
6. Avoid touching eyes, nose, or mouth.
7. Practice other good health habits, such as get plenty of sleep, exercise routinely, drink plenty of fluids, eat a nutritious diet.

(Source: CDC, Preventing the Flu: Good Health Habits can Help Stop Germs 11-8-2010)

Preventive Health Screenings and Exams

- ◆ 32% of adults had a colonoscopy or sigmoidoscopy in the past five years, increasing to 67% of those over the age of 50.
- ◆ 70% of adults have had their vision checked in the past two years, and 20% have had their hearing checked in the past two years.
- ◆ 57% of adults had been to the doctor for a routine visit in the past year.
- ◆ In the past year, 55% of Geauga County women ages 40 and over have had a mammogram.
- ◆ In the past year, 58% of men ages 50 and over had a Prostate-Specific Antigen (PSA) test.
- ◆ See the Women and Men’s Health Section for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Geauga County adults.

Preventive Counseling Services

- ◆ Geauga County adults indicated that their doctor or other health professional had discussed the following topics with them within the past year: physical activity or exercise (45%), diet or eating habits (38%), significance of family history (24%), depression/anxiety/emotional problems (17%), alcohol use (11%), quitting smoking (7%), injury prevention (7%), alcohol use when taking prescription drugs (6%), sexual practices (5%), domestic violence (3%), and illicit drug use (3%).

Gauga County Adult Health Screening Results

GENERAL SCREENING RESULTS	Total Sample
Diagnosed with High Blood Pressure	30%
Diagnosed with High Blood Cholesterol	36%
Diagnosed with Diabetes	6%
Diagnosed with a Heart Attack	2%
Diagnosed with a Stroke	2%

(Percentages based on all Geauga County adults surveyed)

Environmental Health/Disaster Preparedness

Key Findings

Insects and mold were the two most important perceived environmental health issues that threatened Geauga County adults' health in the past year.

Environmental Health

- ◆ Geauga County adults thought the following threatened their health in the past year:
 - Insects (13%)
 - Mold (7%)
 - Rodents or mice (6%)
 - Plumbing problems (3%)
 - Temperature regulation (2%)
 - Unsafe water supply (2%)
 - Sewage/waste water problems (1%)
 - Bed bugs (1%)
 - Radiation (1%)
 - Chemicals found in household products (1%)
 - Safety hazards (<1%)
 - Radon (<1%)
 - Excess medications in the home (<1%)

Potential Health Effects of Mold

- ❖ Mold does not always cause health problems indoors.
- ❖ People who are sensitive to mold may experience nasal stuffiness, eye irritation, wheezing, or skin irritation when exposed to mold.
- ❖ Severe reactions include a fever and shortness of breath.
- ❖ Increased risk for infections that may develop into fungal infections is more likely in people with chronic lung diseases like COPD and immune-compromised people.

(Source: CDC, National Center for Environmental Health, Facts about *Stachybotrys chartarum* and Other Molds, Obtained from: <http://www.cdc.gov/mold/stachy.htm>)

Disaster Preparedness

- ◆ Geauga County households had the following disaster preparedness supplies: cell phone (91%), working flashlight and working batteries (91%), working battery operated radio and working batteries (52%), 3-day supply of nonperishable food for everyone who lives there (68%), 3-day supply of prescription medication for each person who takes prescribed medicines (60%), and 3-day supply of water for everyone in the household (1 gallon of water per person per day) (37%).
- ◆ 98% of households had at least one of the above disaster preparedness supplies.

Additional Items to Consider Adding to Basic Emergency Supply Kit

- | | |
|--|-------------------------------------|
| ○ Prescription medications and glasses | ○ Cash or traveler's checks |
| ○ Sleeping bag or warm blanket for each person | ○ Fire extinguisher |
| ○ Additional clothing including a long sleeved shirt, pants and sturdy shoes | ○ Matches in a waterproof container |
| ○ Household unscented chlorine bleach and medicine dropper | ○ Paper and pencil |
| ○ Feminine supplies and personal hygiene items | ○ Infant formula and diapers |
| ○ Mess kits, paper cups, plates and plastic utensils, paper towels | |
| ○ Books, games, puzzles or other activities for children | |
| ○ Family documents such as copies of insurance policies & bank account records in a waterproof, portable container | |

Source: Federal Emergency Management Agency (FEMA), Ready: Prepare. Plan. Stay Informed., Emergency Supply List, Obtained from: http://www.ready.gov/america/_downloads/checklist3.pdf

Adult Sexual Behavior and Pregnancy Outcomes

Key Findings

In 2011, almost three-fourths (72%) of Geauga County adults had sexual intercourse. Five percent of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs (Source: CDC, STDs in Adolescents and Young Adults, 2009 STD Surveillance).

Adult Sexual Behavior

- ◆ Nearly three-fourths (72%) of Geauga County adults had sexual intercourse in the past year.
- ◆ 5% of adults reported they had intercourse with more than one partner in the past year, increasing to 17% of those under the age of 30.
- ◆ Geauga County adults used the following methods of birth control: abstinence (24%), vasectomy (17%), hysterectomy (11%), tubes tied (11%), condoms (10%), birth control pill (10%), withdrawal (3%), rhythm method (3%), diaphragm (1%), and IUD (1%).
- ◆ 16% of Geauga County adults were not using any method of birth control.
- ◆ Geauga County adults did not use birth control for the following reasons:
 - They or their partner had a hysterectomy/vasectomy/tubes tied (28%)
 - They or their partner is too old (22%)
 - They did not think they or their partner could get pregnant (6%)
 - They did not think they were going to have sex (no regular partner) (5%)
 - They wanted to get pregnant (3%)
 - They did not want to use birth control (3%)
 - Religious preferences (3%)
 - Their partner is currently pregnant (2%)
 - They do not care if they or their partner gets pregnant (2%)
 - Their partner did not want to use birth control (1%)
 - They had a same-sex partner (1%)
 - They or their partner did not like birth control/had a fear of side effects (1%)
 - They cannot pay for birth control (1%)
 - They had a lapse in use of a method (1%)
- ◆ 26% of adults have had an HIV test.
- ◆ Geauga County adults were diagnosed with the following sexually transmitted diseases (STDs) in the past 5 years: human papilloma virus (HPV) (3%), genital herpes (2%), and gonorrhea (<1%).
- ◆ Geauga County adults have made the following sexual behavior changes based on what they know about HIV and STDs: had sexual intercourse with the same partner (36%), always use condoms for protection (10%), and decreased their number of sexual partners (8%). 47% did not make any changes.

Ways to Have Safer Sex

- ❖ Be honest with your partner.
- ❖ Protect yourself and your partner from body fluids.
- ❖ Sexual play without intercourse can be enjoyable and safer than intercourse.
- ❖ Ask questions about partner's history (drugs, sexual partners, and whether or not they've been tested).
- ❖ Get the correct treatment if you become infected.
- ❖ Getting tested regularly for HIV/AIDS and other sexually transmitted diseases.

(Source: Planned Parenthood: Preventing STIs/STDs, <http://www.plannedparenthood.org/sexual-health/std/preventing-stis-stds.htm>)

Risk Factors for Contracting Sexually Transmitted Infections

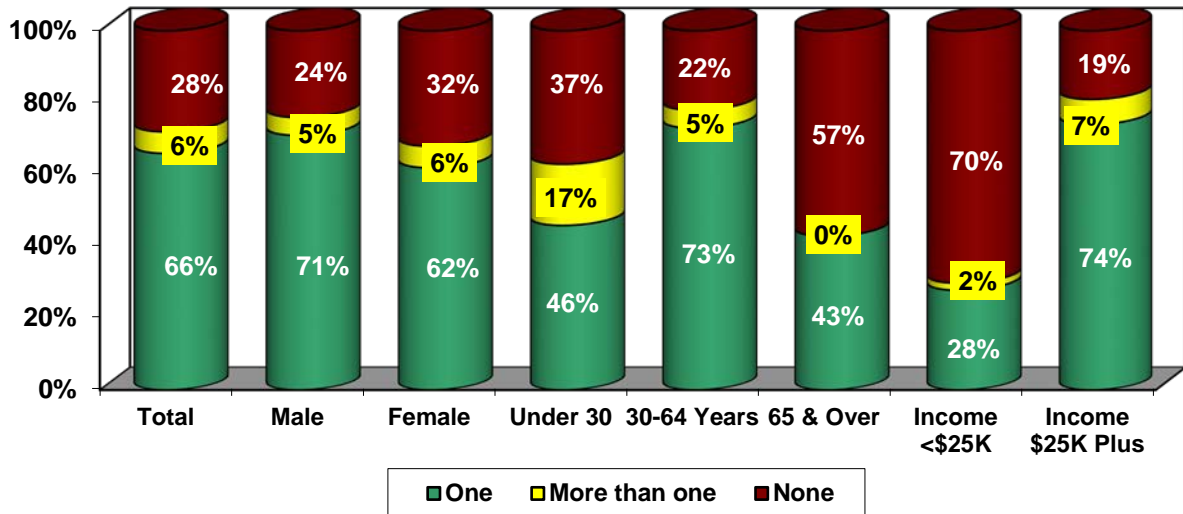
- ❖ Having unprotected sex
- ❖ Having multiple sex partners
- ❖ Having a history of one or more STIs
- ❖ Transmission from mother to infant
- ❖ Injecting drugs
- ❖ Abusing alcohol or using recreational drug

(Source: Mayo Foundation for Medical Education and Research, 2-24-2011)

Adult Sexual Behavior and Pregnancy Outcomes

The following graph shows the sexual activity of the Geauga County adults. Examples of how to interpret the information in graph one include: 66% of all Geauga County adults had one sexual partner in the last 12 months and 6% had more than one, and 71% 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?"

Types of Contraception

Sterilization: For females, this is also known as having their "tubes tied". Female sterilization involves the surgical closing of the fallopian tubes which carry the eggs from the ovaries to the uterus. For males, sterilization is referred to as a vasectomy. This procedure involves the surgical closing of tubes that carry sperm.

Abstinence: The voluntary refraining from sexual activity. **Abstinence is the only contraceptive method that is 100% effective in the prevention of both pregnancy and the transmission of sexually transmitted diseases.**

Barrier Methods (Condoms): The male condom is a tube of thin material (latex rubber) that is rolled over the erect penis prior to contact with the vagina. This is the most commonly used barrier method. The female condom is a seven-inch long pouch of polyurethane with two flexible rings and is inserted into the vagina prior to intercourse.

Hormonal Methods: Whether administered as a pill, patch, shot, ring or implant, hormone medications contain manufactured forms of the hormones estrogen and/or progesterone. They work by either preventing a woman's ovary from releasing an egg, thickening cervical mucus, making it harder for sperm to reach the egg, or by thinning the lining of the uterus making it harder for a fertilized egg to implant in the uterine wall.

Intrauterine Device (IUD): a small plastic device containing copper or hormones and is inserted into the uterus by a medical professional.

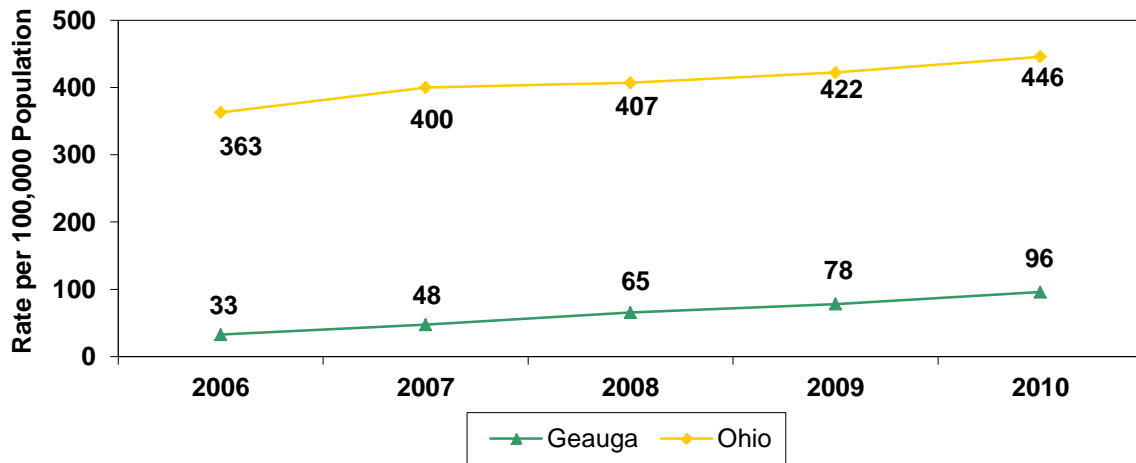
(Source: The American Pregnancy Association; Overview: Birth Control Methods, <http://www.americanpregnancy.org/preventingpregnancy/overviewtypesbirthcontrol.html>)

Adult Sexual Behavior and Pregnancy Outcomes

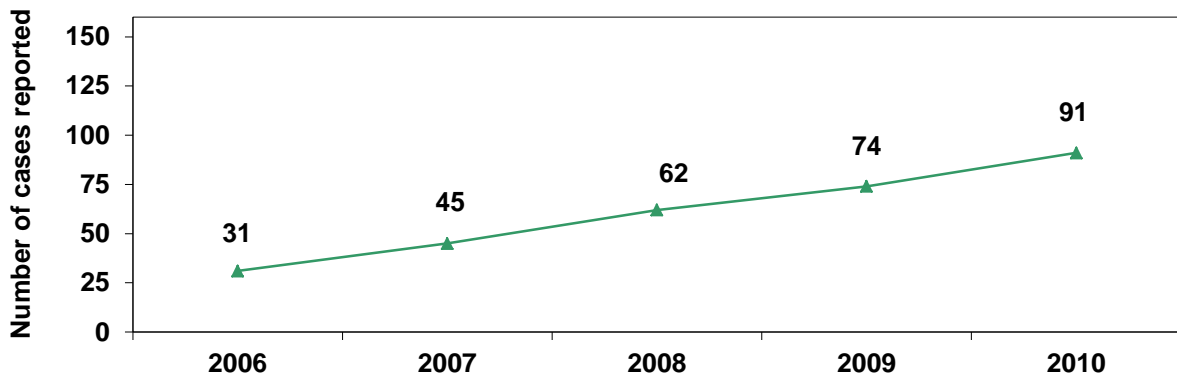
The following graphs show Geauga County Chlamydia and Gonorrhea disease rates per 100,000 population updated March 5, 2011 by the Ohio Department of Health. The graphs show:

- ◆ Geauga County Chlamydia rates increased from 2006 to 2010. These rates remained well below Ohio rates.
- ◆ In 2010, the U.S. rate for new Chlamydia cases was 426.0 per 100,000 population. *(Source: CDC, Sexually Transmitted Diseases Surveillance, 2010)*

Chlamydia Annualized Disease Rates for Geauga County and Ohio



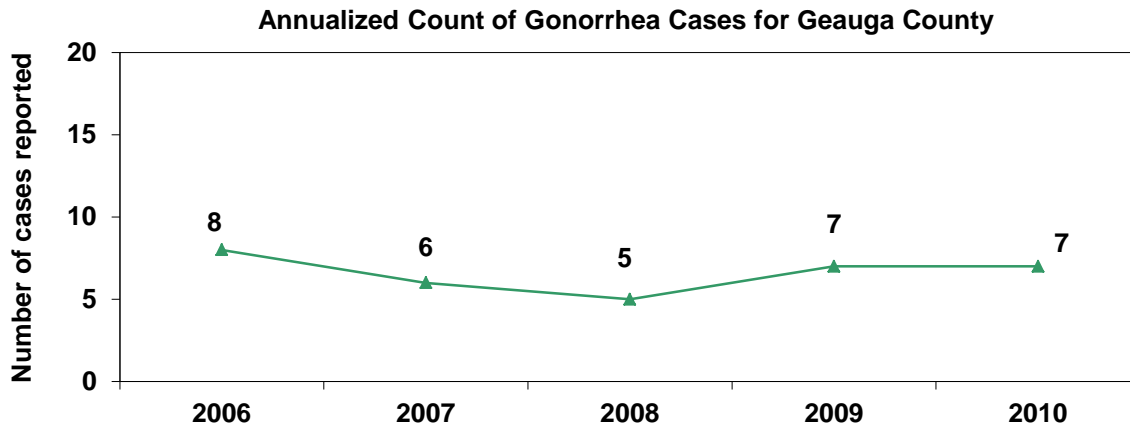
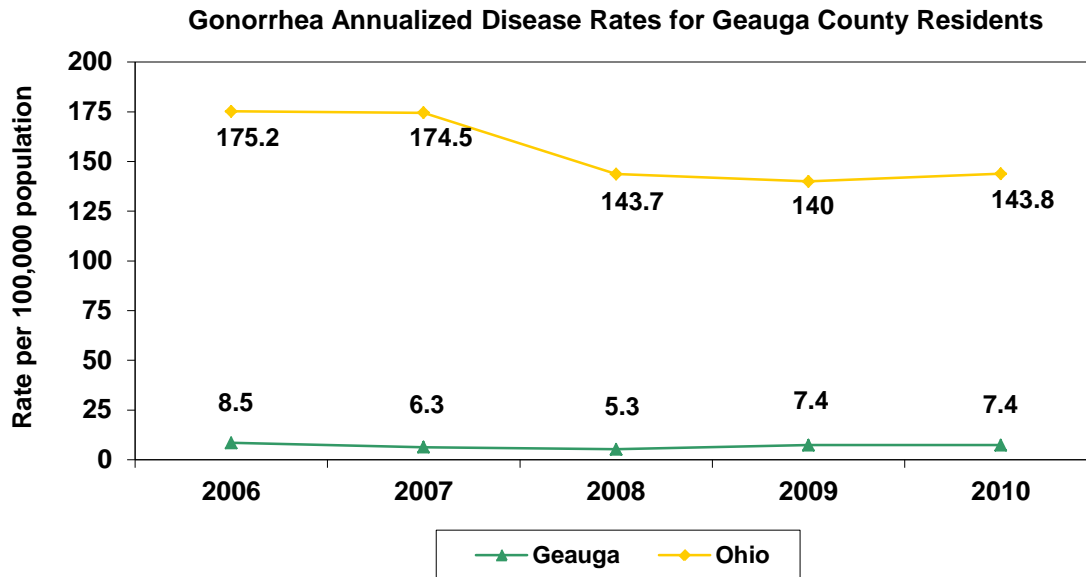
Annualized Count of Chlamydia Cases for Geauga County



(Source for graphs: ODH, STD Surveillance, data reported through 3-5-2011)

Adult Sexual Behavior and Pregnancy Outcomes

- ◆ The Geauga County Gonorrhea rate fluctuated from 2006 to 2010.
- ◆ The Ohio Gonorrhea rate decreased from 2006 to 2010.
- ◆ In 2010, the U.S. rate for new Gonorrhea cases for the total population was 100.8 per 100,000 population. *(Source: CDC, Sexually Transmitted Diseases Surveillance, 2010)*
- ◆ The Healthy People 2020 Objective for Gonorrhea is 257 new female and 198 new male cases per 100,000 population.



(Source for graphs: ODH, STD Surveillance, data reported through 3-5-2011)

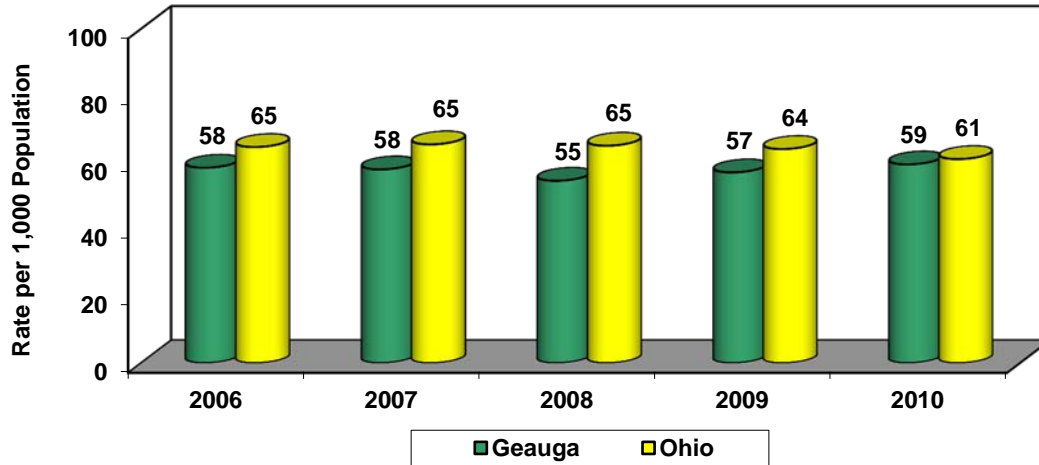
Adult Sexual Behavior and Pregnancy Outcomes

Pregnancy Outcomes

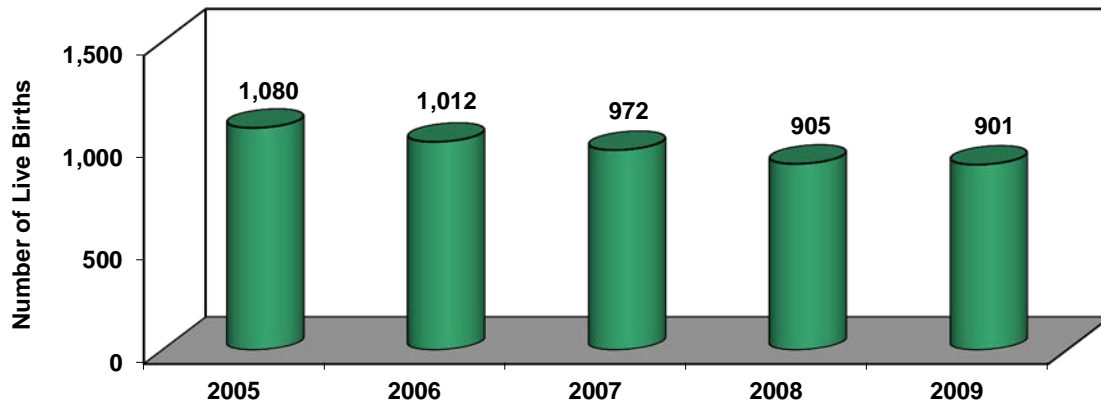
**Please note that the pregnancy outcomes data includes all births to adults and adolescents.*

- ◆ From 2006-2010, there was an average of 974 live births per year in Geauga County.
- ◆ In 2010, the U.S. fertility rate was 64.7 per 1,000 women ages 15-44 (*Source: National Center for Health Statistics, CDC, 2010*).

Geauga County and Ohio Fertility Rates



Geauga County Total Live Births



(Source for graphs: ODH Information Warehouse Updated 1-13-12)

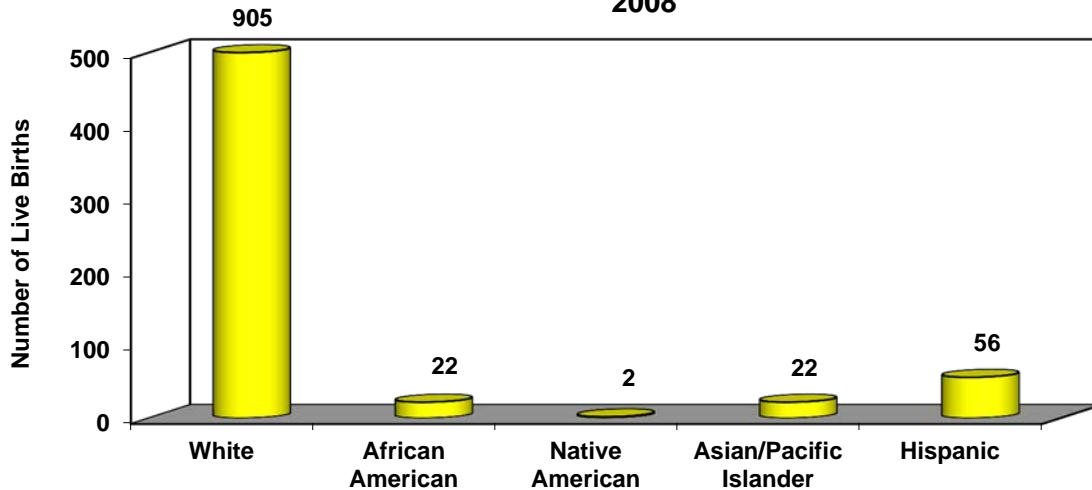
Adult Sexual Behavior and Pregnancy Outcomes

Pregnancy Outcomes

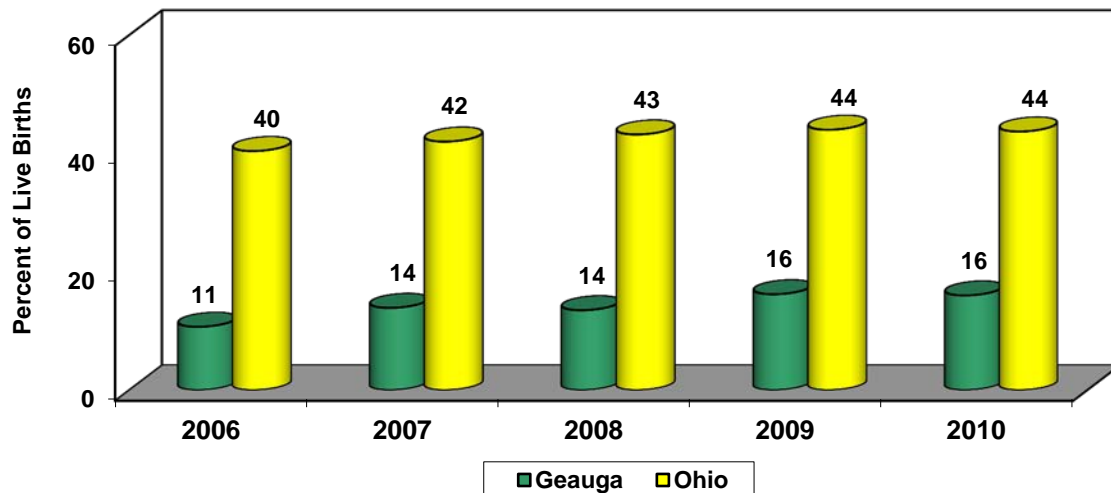
**Please note that the pregnancy outcomes data includes all births to adults and adolescents.*

- ◆ The percentage of births to unwed mothers in Geauga was below the Ohio percentage each year from 2006 to 2010, but increased overall during the five year period.
- ◆ In 2009, 41% of U.S. births were to unwed mothers. *(Source: National Center for Health Statistics 2009)*

**Geauga County Total Live Births By Race/Ethnicity
2008**



Geauga County Unwed Births



(Source for graphs: ODH Information Warehouse Updated 1-13-12)

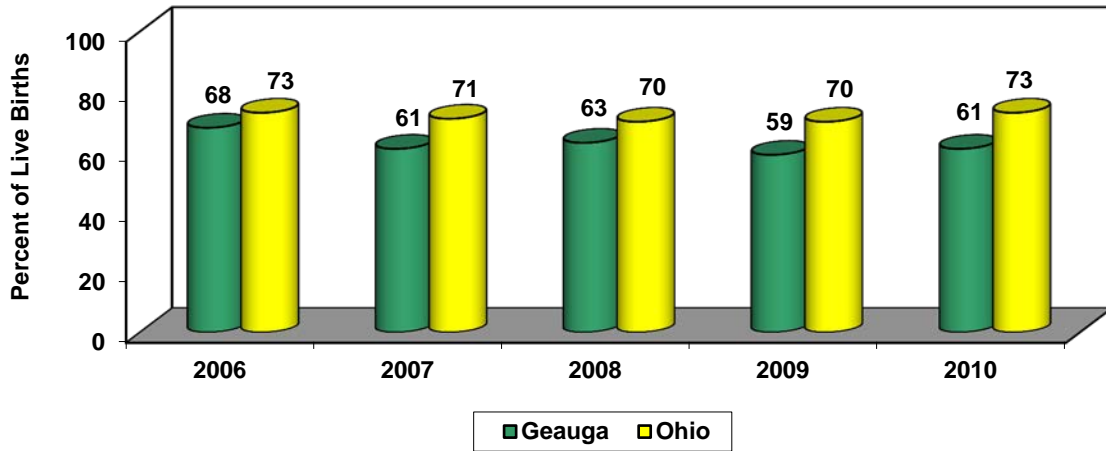
Adult Sexual Behavior and Pregnancy Outcomes

Pregnancy Outcomes

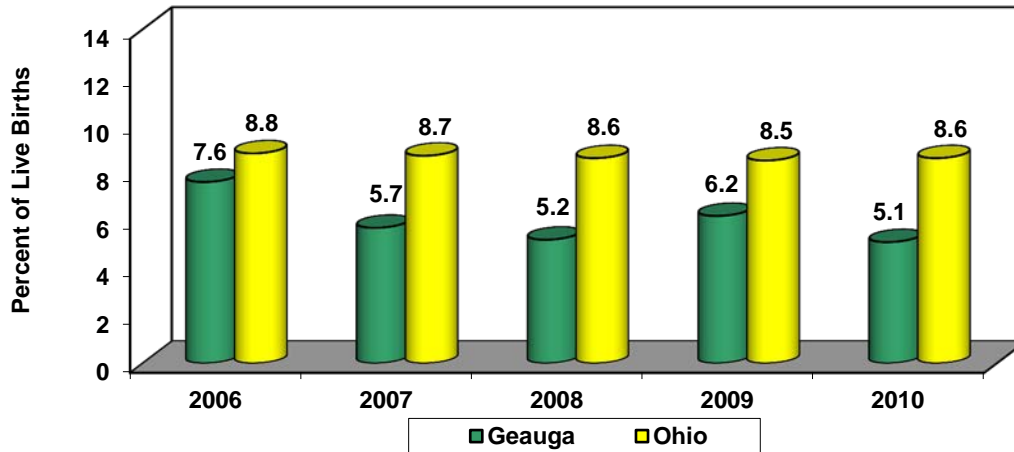
**Please note that the pregnancy outcomes data includes all births to adults and adolescents*

- ◆ In 2010, 73% of Ohio mothers received prenatal care during the first trimester. *(ODH, Birth Statistics, 2010)*
- ◆ In 2009, 8.2% of all U.S. live births were low birth weight births. *(Source: National Center for Health Statistics 2009)*

Geauga County Births with First Trimester Prenatal Care



Geauga County Low Birth Weight Births*



**Low Birth Weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces.
(Source for graphs: ODH Information Warehouse Updated 1-13-12)*

Social Context and Safety

Key Findings

The health assessment identified that 45% of Geauga County adults kept a firearm in or around their home. Four percent of adults were threatened and 5% were abused the past year.

Safety

- ◆ Almost half (45%) of Geauga County adults kept a firearm in or around their home. 4% of adults reported they were unlocked and loaded.
- ◆ 82% of adults reported always wearing their seatbelt while driving or riding in a car. An additional 9% reported wearing their seatbelt most of the time.
- ◆ 4% of adults were threatened the past year. Of those who were threatened, 43% were threatened by their spouse or partner, 21% by someone outside their home, 14% by a child, 7% by a parent, and 21% were threatened by someone else.
- ◆ In the past year, 5% of adults were abused, decreasing to 2% of those ages 65 and over. They were abused in the following ways: verbally (4%), emotionally (4%), financially (2%), through electronic methods (1%), physically (1%), and sexually (<1%).
- ◆ Of those who were abused, 45% were abused by someone outside their home, 35% by their spouse or partner, 5% by a child, 5% by a parent, 5% by another family member living in their household, and 10% were abused by someone else.

Social Context

- ◆ 8% of adults needed help meeting their general daily needs such as food, clothing, shelter, or paying utility bills in the past 30 days, increasing to 23% of those under the age of 30.
- ◆ In the past 30 days, 5% of adults were concerned about having enough food for them or their family.
- ◆ 16% of adults attempted to contact a social service agency for assistance. Of those adults who looked for assistance, they received it from the following: a friend or family member (48%), Geauga County Job & Family Services (45%), a church (20%), Ravenwood (20%), Geauga County Health Department (12%), 2-1-1 (12%), Mental Health Agency (8%), Help Me Grow (5%), Geauga County Board of Developmental Disabilities (3%), and WomenSafe (3%).
- ◆ In the past year, Geauga County adults sought assistance with the following: utilities (4%), rent/mortgage (3%), food (3%), transportation (3%), free tax preparation (2%), credit counseling (1%), emergency shelter (1%), legal aid services, clothing (<1%)
- ◆ In the past year, Geauga County adults experienced the following stressors: a close family member going into the hospital (35%), the death of a family member or close friend (29%), having bills they could not pay (15%), someone in their household losing their job (8%), someone close to them having an alcohol or drug problem (7%), someone in their household having their work hours reduced (6%), moving to a new address (5%), becoming separated or divorced (1%), having someone homeless living with them (1%), being involved in a physical fight (1%), being hit or slapped by their spouse or partner (1%), and someone in their household going to jail (<1%).
- ◆ Geauga County adults indicated they would have problems obtaining the following assistance if they needed it: someone to help pay for their medical expenses (9%), someone to loan them \$50 (7%), someone to help if they were sick and needed to be in bed (7%), someone to take them to a clinic or doctor's office if they needed a ride (5%), someone to talk about their problems (5%), someone to accompany them to their doctor's appointments (3%), back-up childcare (3%), and someone to explain directions from their doctor (2%).

Food Security in the United States

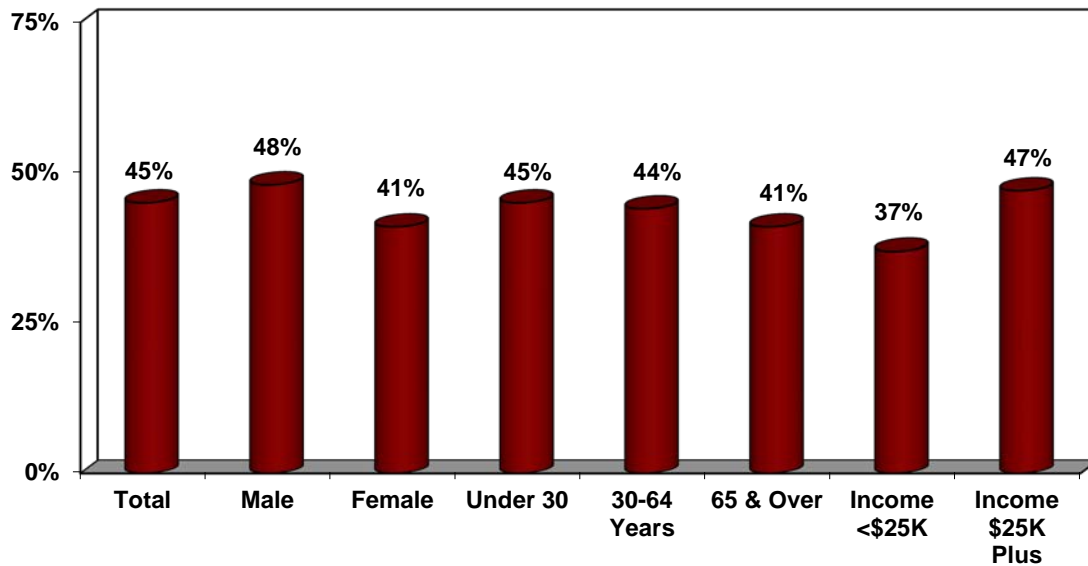
- ◆ At some point in 2010, 14.5% of households were uncertain of having, or unable to acquire, enough food to meet the needs of all of their members because they had insufficient money or other resources for food (food insecure).
- ◆ Approximately 9.1% (10.9 million) of U.S. households experienced low food security in 2010.

(Source: U.S. Department of Agriculture, *Food Security in the United States: Statistics and Graphics, 2010*)

Social Context and Safety

The following graph shows the percentage of Geauga County adults that had a firearm in the home. Examples of how to interpret the information shown on the first graph include: 45% of all Geauga County adults kept a firearm in their home, 48% of males, and 45% of those under 30 kept a firearm in their home.

Gauga County Adults With a Firearm in the Home



Firearm Injury Prevention

According to The American College of Emergency Physicians (ACEP), the improper use of firearms results in death and injury. Below are some of the College supported efforts to prevent firearm-related injuries and deaths:

- ❖ Aggressively enforce current laws against illegal possession, purchase, sale, or use of firearms;
- ❖ Encourage the creation and evaluation of community and school-based education programs targeting the prevention of firearm injuries;
- ❖ Educate the public about the risks of improperly stored firearms, especially in the home;
- ❖ Increase funding for the development, evaluation, and implementation of evidence-based programs and policies to reduce firearm-related injury and death
- ❖ Work with stakeholders to develop comprehensive strategies to prevent firearm injury and death

(Source: Firearm Injury Prevention, Annals of Emergency Medicine, v. 57 issue 6, 2011, p. 691)

Quality of Life

Key Findings

One-fifth (20%) Geauga County adults in 2011 reported they were limited in some way because of a physical, mental or emotional problem.

Impairments and Health Problems

- ◆ One-fifth (20%) Geauga County adults are limited in some way because of a physical, mental or emotional problem (22% Ohio, 21% U.S., 2010 BRFSS), increasing to 37% of those with incomes less than \$25,000.
- ◆ Geauga County adults reported the following as the most limiting health problems: back or neck problems (18%), arthritis/rheumatism (14%), walking problems (7%), depression/anxiety/emotional problems (7%), and obesity (7%).
- ◆ As a result of impairments or health problems, Geauga County adults needed help with the following: household chores (3%), shopping (2%), getting around for other purposes (1%), doing necessary business (1%), dressing (<1%), getting around the house (<1%), and eating (<1%).
- ◆ Geauga County adults were told by a health professional they had the following: gout (4%), rheumatoid arthritis (4%), fibromyalgia (2%), and lupus (1%).

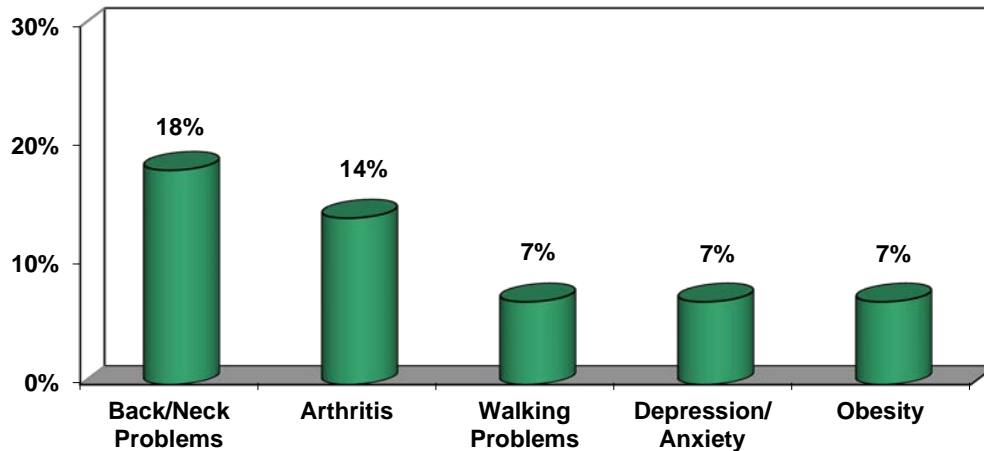
Back Pain Prevention

The best things you can do to prevent back pain are:

- ◆ Exercise often and keep your back muscles strong.
- ◆ Maintain a healthy weight or lose weight if you weigh too much.
- ◆ Make sure you are getting enough calcium and vitamin D every day. This is very important to keep bones strong.
- ◆ Try to stand up straight and avoid heavy lifting when you can. If you do lift something heavy, bend your legs and keep your back straight.

Source: National Institutes of Health, National Institute of Arthritis and Musculoskeletal and Skin Diseases.
http://www.niams.nih.gov/Health_Info/Back_Pain/back_pain_ff.asp, updated 9/09

Geauga County Most Limiting Health Problems



2011 Adult Comparisons	Gauga County 2011	Ohio 2010	U.S. 2010
Limited in some way due to physical, emotional, or mental problems	20%	22%	21%

Mental Health and Suicide

Key Findings

In 2011, 2% of Geauga County adults considered attempting suicide. 8% of adults felt so sad or hopeless almost every day for two or more weeks that they stopped doing usual activities.

Adult Mental Health

- ◆ 2% of Geauga County adults considered attempting suicide in the past year.
- ◆ 1% of adults attempted suicide.
- ◆ 8% of adults felt so sad or hopeless nearly every day for two or more weeks in a row that they stopped doing usual activities, increasing to 10% of females.
- ◆ When feeling sad, blue, or depressed, Geauga County adults also had a period of two or more weeks when they experienced the following: felt fatigued/had no energy (24%), had trouble sleeping/slept too much (22%), woke up before they wanted (15%), had trouble thinking or concentrating (14%), had a weight/appetite change (10%), lost interest in most things (9%), felt worthless or hopeless (9%), felt extremely restless or slowed down (6%), and thought about death or suicide (3%).
- ◆ 18% of adults indicated they had a high or very high stress level on a typical day, increasing to 23% of those under 30. 31% had a low or very low stress level, and 51% had a moderate stress level.
- ◆ 39% of adults indicated they were very satisfied with their life. 50% were satisfied, 7% were dissatisfied, and 1% were very dissatisfied.
- ◆ In the past year, Geauga County adults were diagnosed with or treated for the following mental health issues: a mood disorder (8%), an anxiety disorder (7%), a psychotic disorder (1%), and some other mental health disorder (2%). 9% indicated they had taken medication for one or more mental health issue.

Stigma of Mental Illness

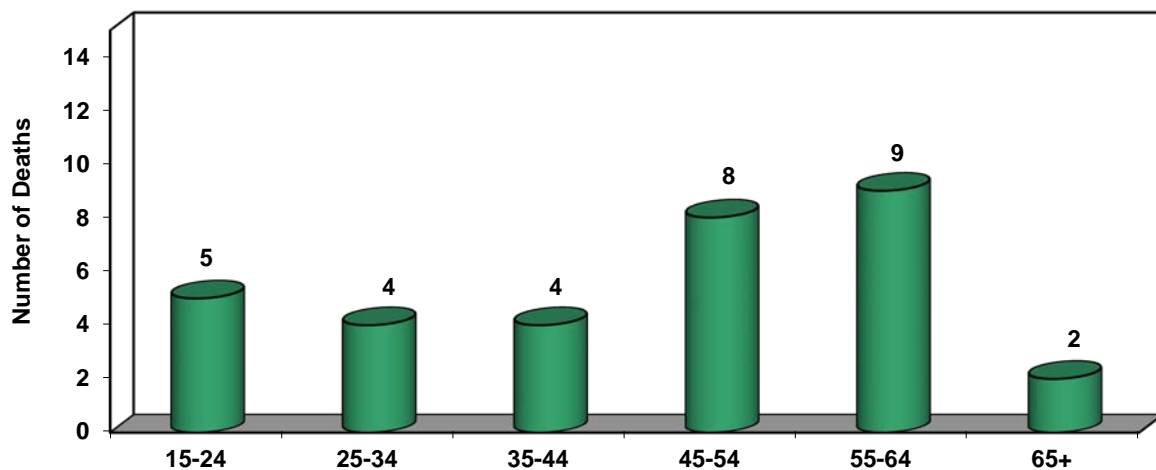
(Based on 2007 BRFSS data)

- ◆ Most adult with mental health symptoms (78%) and without mental health symptoms agreed that treatment can help persons with mental illness lead normal lives.
- ◆ 57% of adults believed that people care and are sympathetic to persons with mental illness.
- ◆ Only 25% of adults with mental health symptoms believed that people are caring and sympathetic to persons with mental illness.

(Sources: CDC, National Center for Chronic Disease Prevention and Health Promotion, *Stigma of Mental Illness*, July 2011, http://www.cdc.gov/mentalhealth/data_stats/mental-illness.htm)

Geauga County Number of Suicide Deaths By Age Group 2006-2008

Total Deaths = 32

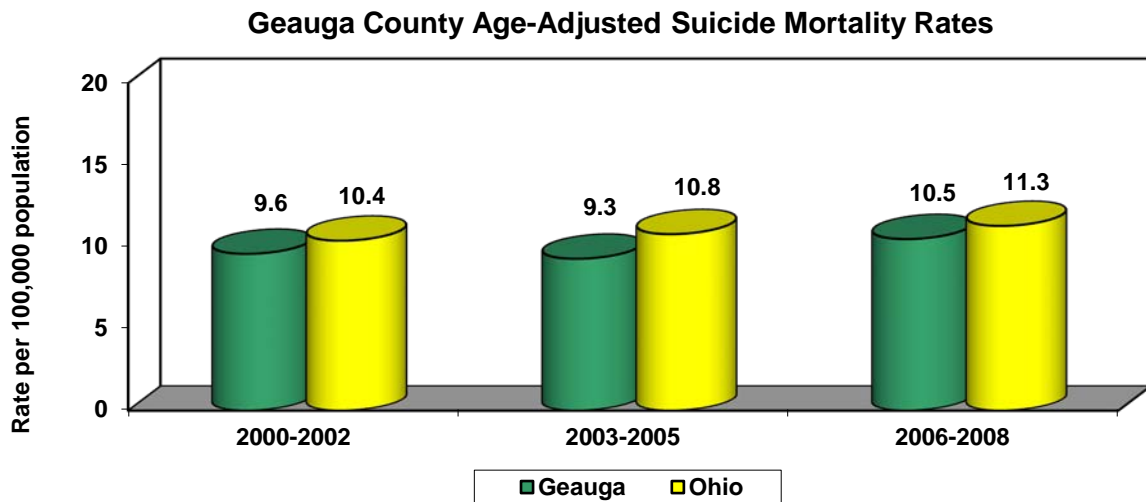


(Source: ODH Information Warehouse, updated 4-15-10)

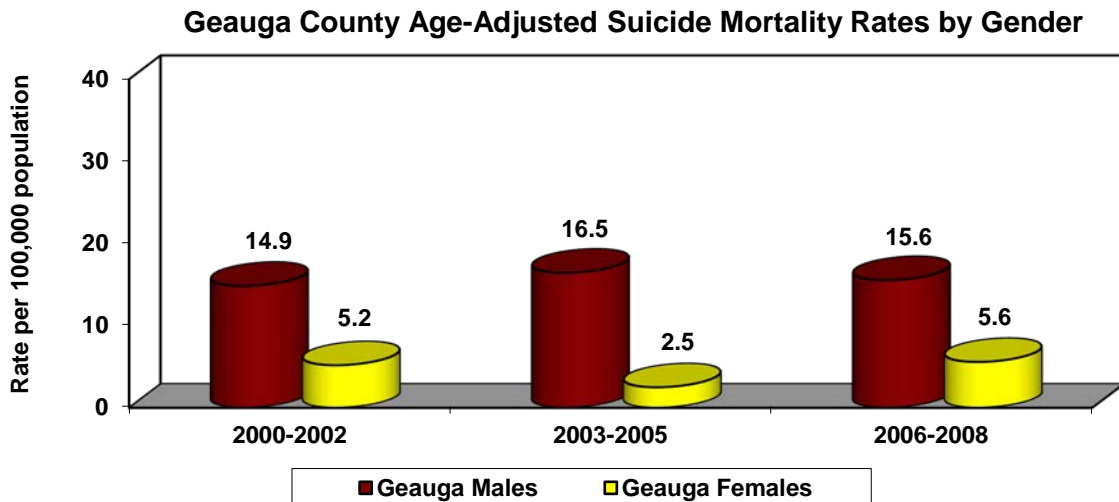
Mental Health and Suicide

The following graphs show the Ohio and Geauga County age-adjusted suicide mortality rates per 100,000 population and the number of suicide deaths by age group for the county. The graphs show:

- ◆ The 2000-2008 Geauga County age-adjusted suicide mortality rate fluctuated overall, but remained below the Ohio rate.
- ◆ The Geauga County male age-adjusted suicide rate consistently exceeded the female rate from 2000 to 2008.
- ◆ From 2006-2008, 28% of all Geauga County suicide deaths occurred to those ages 55-64 years old.



(Source: ODH Information Warehouse, updated 4-15-10)



(Source: ODH Information Warehouse, updated 4-15-10)

Oral Health

Key Findings

The 2011 health assessment project has determined that more than two-thirds (68%) of Geauga County adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months. More than three-fourths (76%) of Geauga youth had visited the dentist for a check-up, exam, teeth cleaning, or other dental work in the past year.

Gauga County Dental Care Resources - 2010

- ❖ Number of licensed dentists- 44
- ❖ Number of primary care dentists- 38
- ❖ Ratio of population per dentist- 2,251:1
- ❖ Number of dentists who treat Medicaid patients- 7
- ❖ Ratio of Medicaid population per dentist who treats Medicaid patients- 974:1

(Source: ODH Ohio Oral Health Surveillance System, 2010)

Access to Dental Care

- ◆ In the past year, 68% of Geauga County adults had visited a dentist or dental clinic, decreasing to 50% of adults with annual household incomes less than \$25,000, and 32% of those under the age of 30.
- ◆ When asked how long it had been since their last visit to a dentist or dental clinic, 12% of Geauga County adults reported that it had been more than one year but less than two years, 8% reported that it had been more than two years but less than five years, and 10% responded it had been five or more years ago.
- ◆ When asked the main reason for not visiting a dentist in the last year, more than one-fifth (22%) said they had no reason to go, 20% said they did not have insurance, 17% said cost, 14% said fear, apprehension, nervousness, pain, and dislike going, 6% said they had not thought of it, 5% had other priorities, and 4% said they did not have/know a dentist.
- ◆ In the past year, 76% of Geauga County youth had visited the dentist for a check-up, exam, teeth cleaning, or other dental work. 9% responded more than one year but less than 2 years, and 2% responded more than 2 years ago.

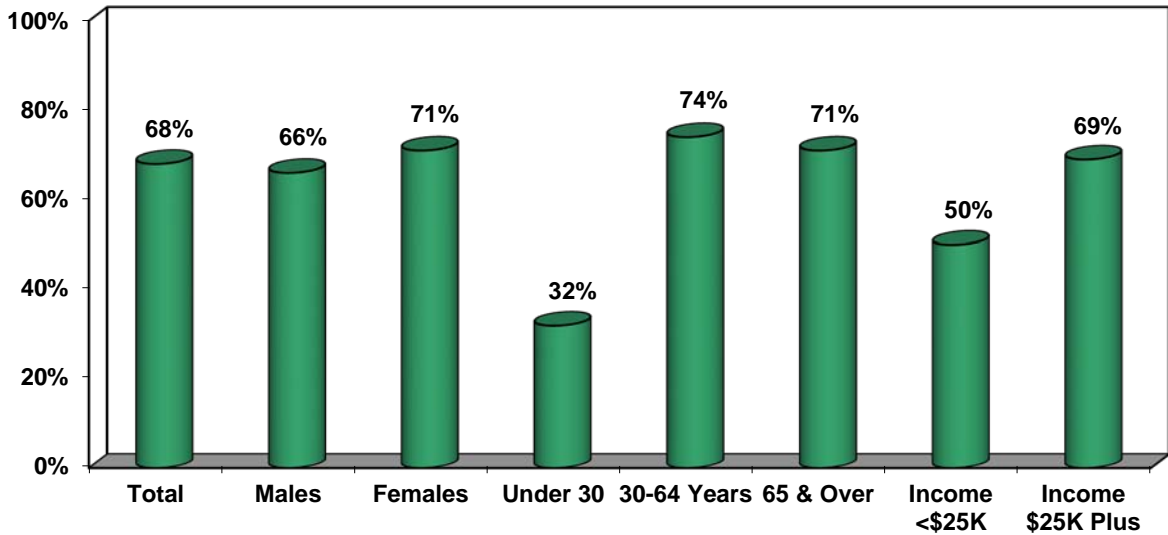
Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	66%	12%	7%	13%	1%
Females	71%	13%	8%	8%	0%
Total	68%	12%	8%	10%	<1%

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

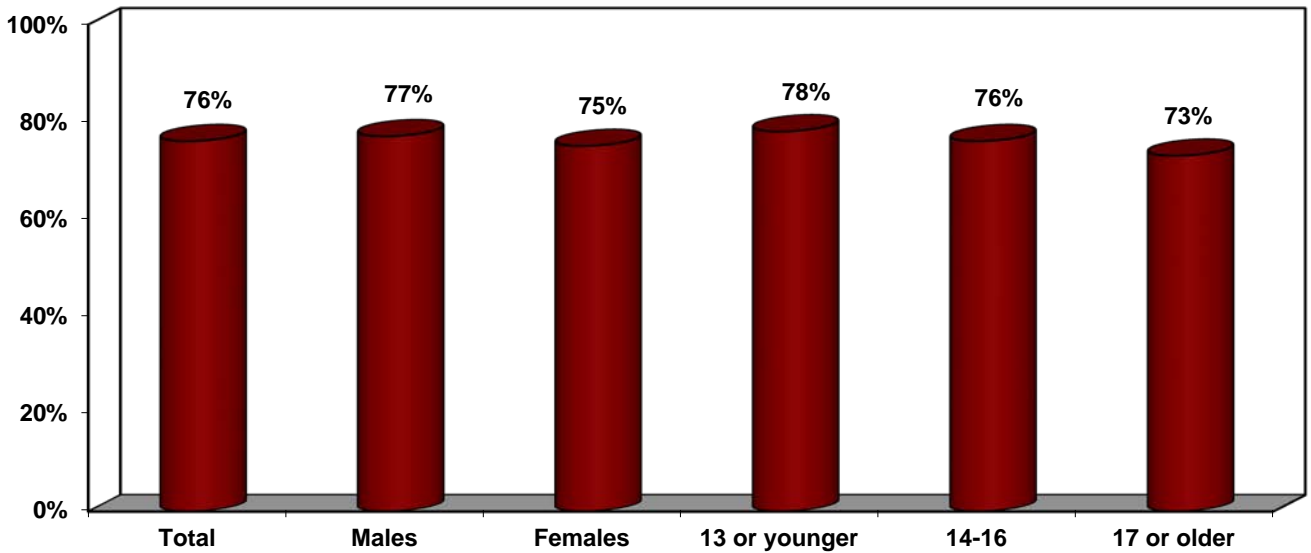
Oral Health

The following graphs provide information about the frequency of Geauga County adult and youth dental visits. Examples of how to interpret the information on the first graph include: 68% of all Geauga County adults had been to the dentist in the past year, 32% of those under the age of 30 and 50% of those with incomes less than \$25,000.

Geauga County Adults Visiting a Dentist in the Past Year



Geauga County Youth Visiting a Dentist in the Past Year



Youth Weight Status

Key Findings

The 2011 Health Assessment identified that 10% of Geauga County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 23% of Geauga County youth reported that they were overweight. 75% of youth were exercising for 60 minutes on 3 or more days per week.

Youth Weight Status

- ◆ BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific as children's body fatness changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- ◆ In 2011, 10% of youth were classified as obese by Body Mass Index (BMI) calculations (2007 YRBS reported 12% for Ohio, 2009 YRBS reported 12% for the U.S.). 8% of youth were classified as overweight, 78% were normal weight, and 4% were underweight.
- ◆ 23% of youth described themselves as being either slightly or very overweight (2007 YRBS reported 30% for Ohio, 2009 YRBS reported 28% for the U.S.)
- ◆ 39% of all youth were trying to lose weight (2007 YRBS reported 47% for Ohio and 45% for the U.S.), increasing to 51% of Geauga County female youth (compared to 27% of males).
- ◆ In the past 30 days, 4% of all Geauga County youth (2007 YRBS reported 11% for Ohio, 2009 YRBS reported 11% for the U.S.) reported going without eating for 24 hours or more to lose weight or keep from gaining weight. 3% smoked cigarettes, 2% vomited or took laxatives, and 2% took diet pills, powders, or liquids without a doctor's advice.
- ◆ 51% of youth exercised to try to lose weight or keep from gaining weight in the past month, and 28% of youth ate less food, fewer calories, or foods lower in fat to try to lose weight or keep from gaining weight.

Nutrition

- ◆ 14% of Geauga County youth ate 5 or more servings of fruits and vegetables per day. 79% ate 1 to 4 servings of fruits and vegetables per day.
- ◆ Geauga County youth consumed the following sources of calcium daily: milk (86%), other dairy products (42%), yogurt (36%), calcium-fortified juice (13%), calcium supplements (8%), and other calcium sources (12%).
- ◆ 41% of Geauga County youth drank energy drinks. They did so for the following reasons: to stay awake (23%), to get pumped up (11%), to mix with alcohol (7%), to drink before games or practice (5%), to help them perform (4%), and for some other reason (18%).

Physical Activity

- ◆ 75% of Geauga County youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. 54% did so on 5 or more days in the past week and 24% did so every day in the past week. 11% of youth did not participate in any physical activity in the past week.
- ◆ Geauga County youth spent an average of 3.0 hours on their cell phone, 2.1 hours watching TV, 1.7 hours on the computer, and 1.2 hours playing video games on an average day of the week.
- ◆ 91% of youth participated in extracurricular activities. They participated in the following: sports or intramural programs (56%), school club or social organization (38%), church or religious organization (24%), church youth group (23%), part-time job (22%), babysitting for other kids (21%), volunteering in the community (21%), taking care of siblings after school (19%), or some other organized activity (13%).
- ◆ Youth gave the following reasons for not participating in extracurricular activities: transportation (11%), they had a job (10%), could not afford it (8%), they watched younger siblings (7%), activities did not exist (6%), and their parents would not take them to the activities (2%).

Soft Drinks & Adolescent Weight

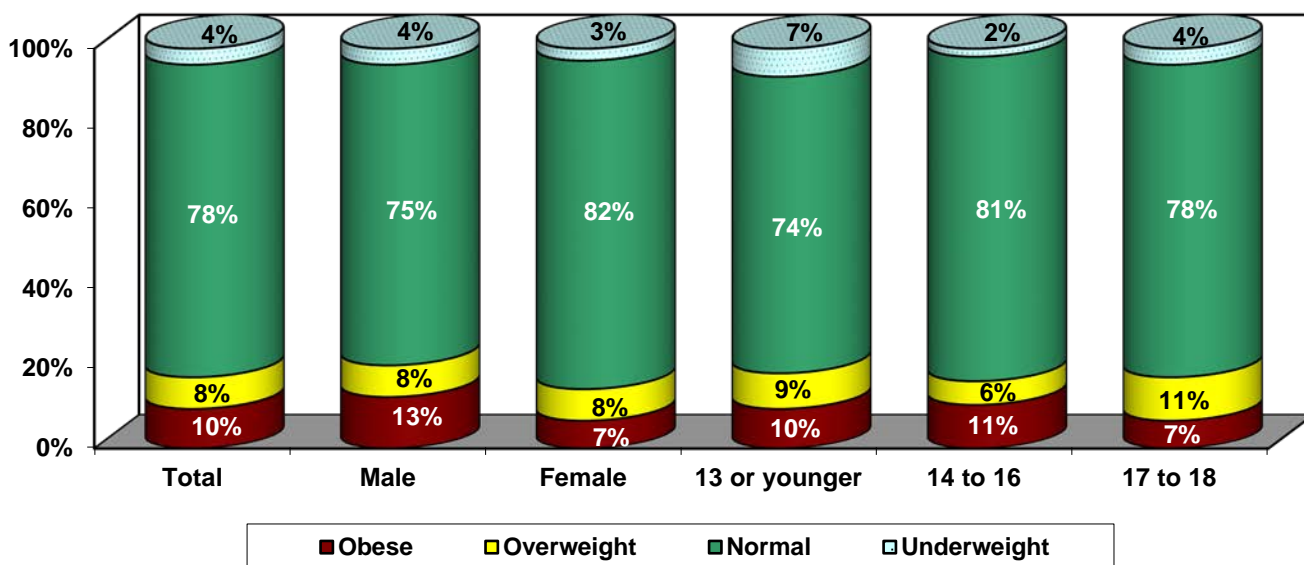
- ◆ Empty calories from added sugars and solid fats contribute to 40% of daily calories for children and adolescents aged 2–18 years, affecting the overall quality of their diets.
- ◆ Approximately half of these empty calories come from six sources: soda, fruit drinks, dairy desserts, grain desserts, pizza, and whole milk.
- ◆ Adolescents drink more full-calorie soda per day than milk.

(Source: CDC, Adolescent and School Health, <http://www.cdc.gov/healthyyouth/nutrition/facts.htm>, 9-15-11)

Youth Weight Status

The following graph shows the percentage of Geauga County youth who were classified as obese, overweight, normal, or underweight by Body Mass Index (BMI). The table shows the ways youth lost weight. Examples of how to interpret the information in the first graph include: 78% of all Geauga County youth were classified as normal weight, 10% were obese, 8% were overweight, and 4% were calculated to be underweight for their age and gender.

Geauga County Youth BMI Classifications



Geauga County Youth did the following to lose weight in the past 30 days:	Percent
Exercised	51%
Ate less food, fewer calories, or foods lower in fat	28%
Went without eating for 24 hours	4%
Vomited or took laxatives	2%
Took diet pills, powders, or liquids without a doctor's advice	2%
Smoked	3%

2011 Youth Comparisons	Gauga County 2011 (6 th -12 th)	Gauga County 2011 (9 th -12 th)	Ohio 2007 (9 th -12 th)	U.S. 2009 (9 th -12 th)
Obese	10%	10%	12%	12%
Went without eating for 24 hours or more	4%	5%	11%	11%
Trying to lose weight	39%	38%	47%	45%*

*2007 YRBS Data
N/A – Not available

Youth Tobacco Use

Key Findings

The 2011 health assessment identified that 15% of Geauga County youth (ages 12-18) were smokers, increasing to 26% of those who were 17-18 years old. Overall, 11% of Geauga County youth indicated they had used chewing tobacco in the past year.

Youth Tobacco Use Behaviors

- ◆ The 2007 YRBS reports that 51% of youth in Ohio had tried cigarette smoking (2009 YRBS reports 46% of U.S. youth) and the 2011 health assessment indicated that 28% of Geauga County youth had done the same.
- ◆ 11% of those who have smoked a whole cigarette had done so by the age of 10, and 24% had done so by the age of 12. The average age of onset for smoking was 14.0 years old.
- ◆ In 2011, 15% of Geauga County youth were current smokers, having smoked at some time in the past 30 days (2007 YRBS reported 22% for Ohio and 2009 YRBS reported 20% for the U.S). 26% of 17-18 year olds were current smokers, compared to 4% of 13-year-olds and younger and 18% of 14-16 year olds.
- ◆ Almost one-third (32%) of current smokers smoked cigarettes daily.
- ◆ More than three-fourths (77%) of the Geauga County youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.
- ◆ 31% of youth smokers asked someone else to buy them cigarettes, 28% borrowed cigarettes from someone else, 25% bought cigarettes from a store or gas station, 19% said a person over the age of 18 gave them the cigarettes, 14% took cigarettes from a store or family member, and 13% said they got cigarettes some other way.
- ◆ Geauga County youth used the following forms of tobacco the most in the past year: cigarettes (21%), black and milds (14%), chewing tobacco or snuff (11%), cigars (11%), hookah (8%), swishers (8%), flavored cigarettes (6%), cigarillos (6%), snus (5%), little cigars (4%), and bidis (<1%).
- ◆ In the past year, 11% of Geauga County youth used chewing tobacco or snuff, increasing to 18% of males.

2008 Ohio Youth Tobacco Survey

- ◆ In 2008, 57.2% of Ohio high school students had used some form of tobacco during their lifetime.
- ◆ 6% of high school students and 4.8% of middle school students had started smoking by age 11.
- ◆ 11% of middle school and 20.8% of high school students reported using smokeless tobacco in their lifetime.
- ◆ According to the survey results, 19.1% of middle school students and 20.6% of high school students had never smoked a cigarette.

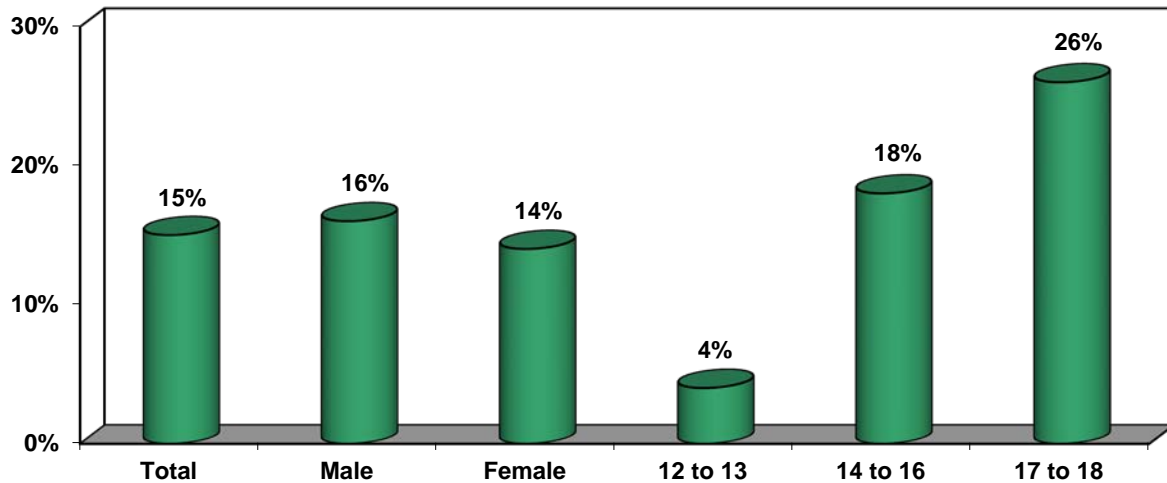
(Source: Ohio Youth Tobacco Survey, 2008, Office of Healthy Ohio, Tobacco Use Prevention and Cessation Program)

2011 Youth Comparisons	Gauga County 2011 (6 th – 12 th)	Gauga County 2011 (9 th – 12 th)	Ohio 2007 (9 th – 12 th)	U.S. 2009 (9 th – 12 th)
Ever tried cigarettes	28%	38%	51%	46%
Current smokers	15%	21%	22%	20%

Youth Tobacco Use

The following graph shows the percentage of Geauga County youth who smoked cigarettes. Examples of how to interpret the information include: 15% of all Geauga County youth were current smokers, 16% of males smoked, and 14% of females were current smokers. The table shows differences in specific risk behaviors between current smokers and non-current smokers (nonsmokers).

Geauga County Youth Who Are Current Smokers



Current smokers are those who have smoked at any time during the past 30 days.

Behaviors of Geauga Youth

Current Smokers vs. Non-Current Smokers

Youth Behaviors	Current Smoker	Non-Current Smoker
Attempted suicide in the past 12 months	16%	3%
Have had at least one drink of alcohol in the past 30 days	77%	24%
Have used marijuana in the past 30 days	65%	6%
Participated in extracurricular activities	80%	93%

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

Tobacco Sales and Promoting to Youth

- ❖ All states have laws making it illegal to sell cigarettes to anyone under the age of 18, yet 14% of students under the age of 18 who currently smoke cigarettes reported they usually obtained their own cigarettes by buying them in a store or gas station during the 30 days before the survey.
- ❖ Cigarette companies spent more than \$15.2 billion in 2003 to promote their products.
- ❖ Children and teenagers constitute the majority of all new smokers, and the industry’s advertising and promotion campaigns often have special appeal to these young people.
- ❖ Eighty-three percent of young smokers (aged 12-17) choose the three most heavily advertised brands.

(Source: CDC, Healthy Youth! Tobacco Use by Young People, <http://www.cdc.gov/healthyyouth/tobacco/facts.htm>, retrieved 11-3-11)

Youth Alcohol Consumption

Key Findings

In 2011, the health assessment results indicated that 51% of Geauga County youth had drunk at least one drink of alcohol in their life, increasing to 71% of youth over the age of 17. 31% of those who drank took their first drink by the age of 12. Nearly one-third (32%) of all Geauga County youth and 52% of those 17-18 years had at least one drink in the past 30 days. Almost two-thirds (64%) of the youth who reported drinking in the past 30 days had at least one episode of binge drinking. 14% of all youth drivers had driven a car in the past month after they had been drinking alcohol.

Youth Alcohol Consumption

- ◆ In 2011, the health assessment results indicate that about (51%) of all Geauga County youth (ages 12 to 18) have had at least one drink of alcohol in their life, increasing to 71% of 17-18 year olds (2007 YRBS reports 76% for Ohio and 2009 YRBS reports 73% for the U.S.).
- ◆ Nearly one-third (32%) of the youth had at least one drink in the past 30 days, increasing to 52% of 17-18 year olds (2007 YRBS reports 46% for Ohio and 2009 YRBS reports 42% for the U.S.).
- ◆ Of those who drank, 64% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers by definition.
- ◆ Based on all youth surveyed, 20% were defined as binge drinkers (2007 YRBS reports 29% for Ohio and 2009 YRBS reports 24% for the U.S.).
- ◆ 11% of youth who reported drinking in the past 30 days, drank on at least 10 or more days during the month.
- ◆ Almost one-third (31%) of Geauga County youth who reported drinking at some time in their life had their first drink by the age of 12, 37% took their first drink between the ages of 13 and 14, and 32% drank between the ages of 15 and 18. The average age of onset was 13.1 years old.
- ◆ Geauga County youth drinkers reported they got their alcohol from the following: someone gave it to them (46%), took it from a store or family member (18%), a parent gave it to them (11%), their friend's parents gave it to them (7%), bought in a store (4%), bought it at a restaurant/bar/club (3%), bought it at a public event (2%), and some other way (27%).
- ◆ 9% of youth drinkers reported being under the influence of alcohol on school property at least one day during the past month.
- ◆ During the past month 18% of all Geauga County youth had ridden in a car driven by someone who had been drinking alcohol (2007 YRBS reports 23% for Ohio and 2009 YRBS reports 28% for the U.S.).
- ◆ 14% of all youth drivers had driven a car in the past month after they had been drinking alcohol, increasing to 19% of those over the age of 17. (2007 YRBS reports 10% for Ohio and 2009 YRBS reports 10% for the U.S.)

National Institute of Health Facts about Underage Drinking

- ◆ Alcohol is the drug of choice among America's adolescents, used by more young people than tobacco or illicit drugs.
- ◆ The 2008 National Survey on Drug Use and Health estimates there are 10.1 million underage drinkers in the United States. According to the 2008 Monitoring the Future Study (<http://monitoringthefuture.org/>), 39% of current 8th graders, 58% of 10th graders, 72% of 12th graders, and 85% of college students have tried alcohol.
- ◆ Underage drinkers consume, on average, 4 to 5 drinks per occasion about 5 times a month. By comparison, drinkers age 26 and older consume 2 to 3 drinks per occasion, about 9 times a month.
- ◆ Underage drinking is a leading contributor to death from injuries, which are the main cause of death for people under age 21. Each year, approximately 5,000 persons under the age of 21 die from causes related to underage drinking. These deaths include about 1,600 homicides and 300 suicides.

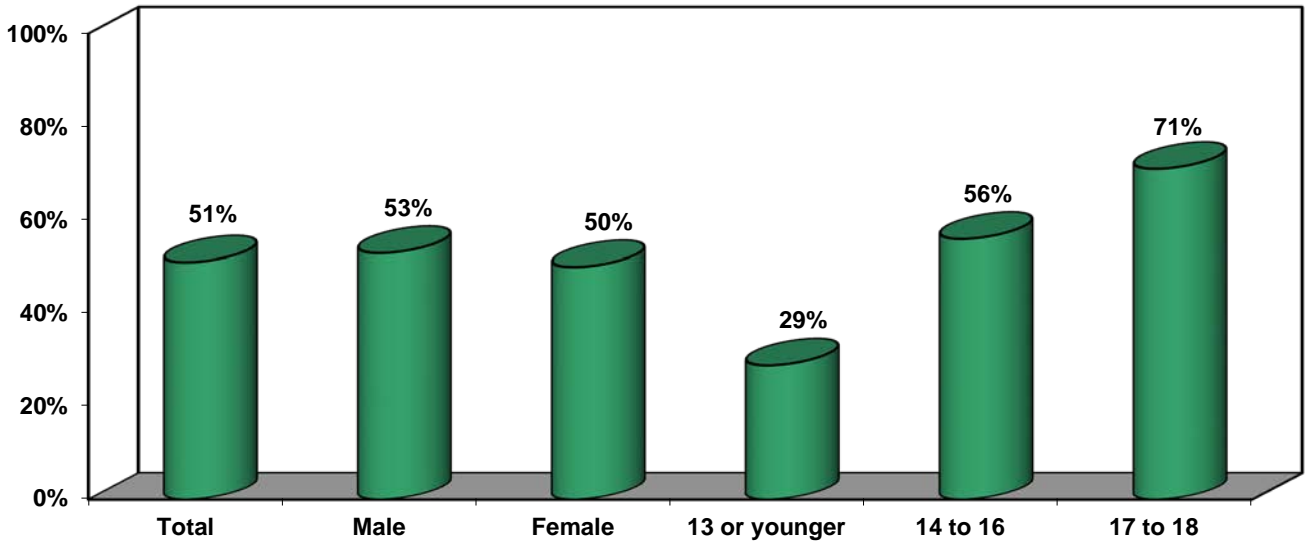
(Source: National Institute of Health, Facts about Underage Drinking, <http://report.nih.gov/NIH/factsheets/ViewFactSheet.aspx?csid=21&key=U#U>; Updated 2/14/11)

2011 Youth Comparisons	Gauga County 2011 (6 th – 12 th)	Gauga County 2011 (9 th – 12 th)	Ohio 2007 (9 th – 12 th)	U.S. 2009 (9 th – 12 th)
Ever tried alcohol	51%	62%	76%	73%
Current drinker	32%	42%	46%	42%
Binge drinker	20%	29%	29%	24%
Rode with someone who was drinking	18%	20%	23%	28%
Drank and drove	14%	13%	10%	10%

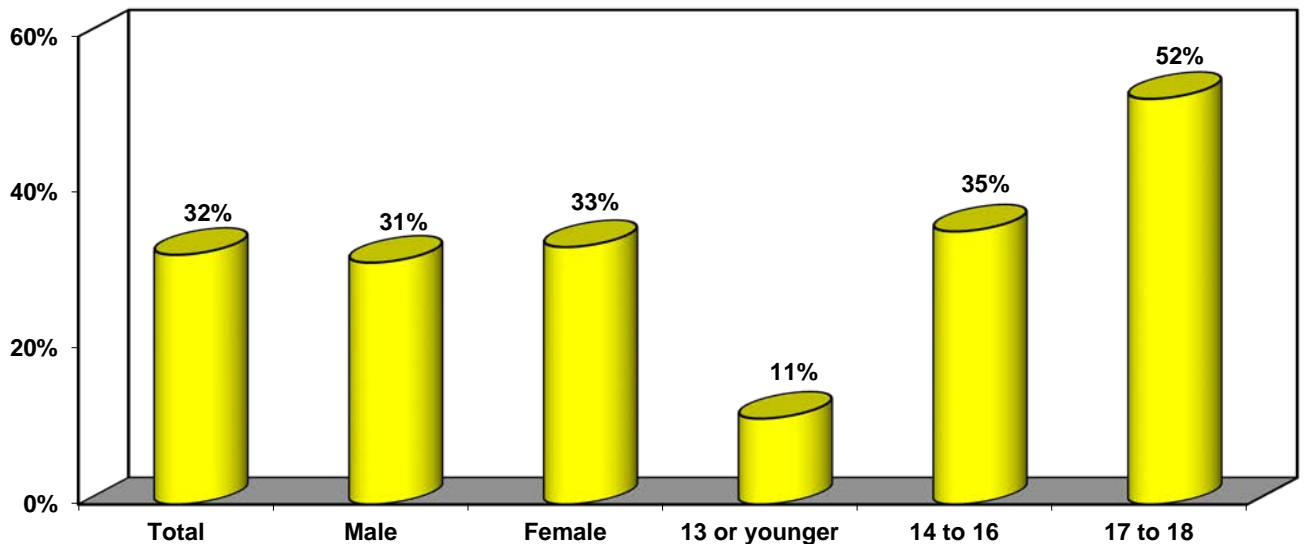
Youth Alcohol Consumption

The following graphs show the percentage of Geauga County youth who have drunk in their lifetime and those who are current drinkers. Examples of how to interpret the information include: 51% of all Geauga County youth have drunk at some time in their life, 53% of males, and 50% of females had drank.

Gauga County Youth Who Had At Least One Drink In Their Lifetime

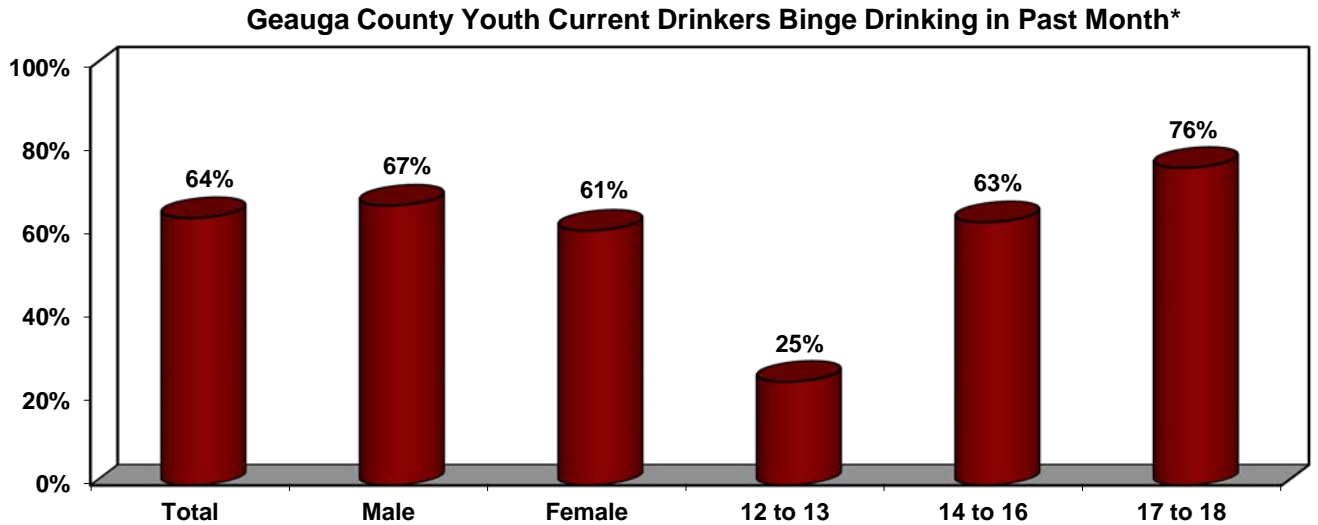


Gauga County Youth Who Were Current Drinkers



Youth Alcohol Consumption

The following graph shows the percentage of Geauga County youth who were binge drinkers. Examples of how to interpret the information include: 64% of current drinkers binge drank in the past month, 67% of males, and 61% of females had binge drank. The table shows differences in specific risk behaviors between current drinkers and non-current drinkers.



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

Behaviors of Geauga Youth

Current Drinkers vs. Non-Current Drinkers

Youth Behaviors	Current Drinker	Non-Current Drinker
Considered attempting suicide in the past 12 months	18%	4%
Have smoked in the past 30 days	37%	5%
Have used marijuana in the past 30 days	39%	4%
Participated in extracurricular activities	90%	92%

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

Youth Marijuana and Other Drug Use

Key Findings

In 2011, 15% of Geauga County youth had used marijuana at least once in the past 30 days, increasing to 28% of those over the age of 17. During the past 12 months, 13% of Geauga County youth had someone offer, sell, or give them an illegal drug on school property.

Youth Drug Use

- ◆ In 2011, 15% of all Geauga County youth had used marijuana at least once in the past 30 days, increasing to 28% of those over the age of 17 and 20% of high school youth. The 2007 YRBS found a prevalence of 18% for Ohio youth and the 2009 YRBS found a prevalence of 21% for U.S. youth who had used marijuana one or more times during the past 30 days.
- ◆ 10% of youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at sometime in their lives, increasing to 15% of those ages 17-18.
- ◆ Youth who misused prescription medications got them in the following ways: a friend gave it to them (45%), they took it from a friend or family member (31%), bought it from a friend (22%), bought it from someone else (22%), their parents gave it to them (6%), and another family member gave them it to them (6%).
- ◆ 2% of Geauga County youth have reported using a needle to inject illegal drugs into their body.
- ◆ 7% of youth used inhalants, 3% used cocaine, 2% used steroids, 2% used methamphetamines, and 2% used heroin.
- ◆ 8% of youth have misused over-the-counter medications (such as cold medicine, allergy medicine and pain reliever) sometime in their life. Of those who misused these medications, 39% used them once or twice, and 19% used them 40 or more times.
- ◆ During the past 12 months, 13% of all Geauga County youth reported that someone had offered, sold, or given them an illegal drug on school property, increasing to 15% of high school youth (2007 YRBS reports 27% for Ohio and 2009 YRBS reports 23% for the U.S.).

Ohio Drug and Drug Abuse Facts

- ❖ Marijuana is the most abused drug in Ohio.
- ❖ The number of treatment center admissions for 2006 for cocaine in Ohio was 11,600 as reported by the Ohio Department of Alcohol and Drug Addiction Services (ODADAS).
- ❖ According to ODADAS, youth abusers of OxyContin have begun abusing heroin since they can no longer obtain or afford OxyContin.
- ❖ In regards to prescription drugs, benzodiazepines (such as Valium or Xanax) and alprazolam were reported as the most commonly abused and diverted prescriptions in Ohio.

(Source: U.S. Department of Justice : DEA Briefs & Background, Drugs and Drug Abuse)

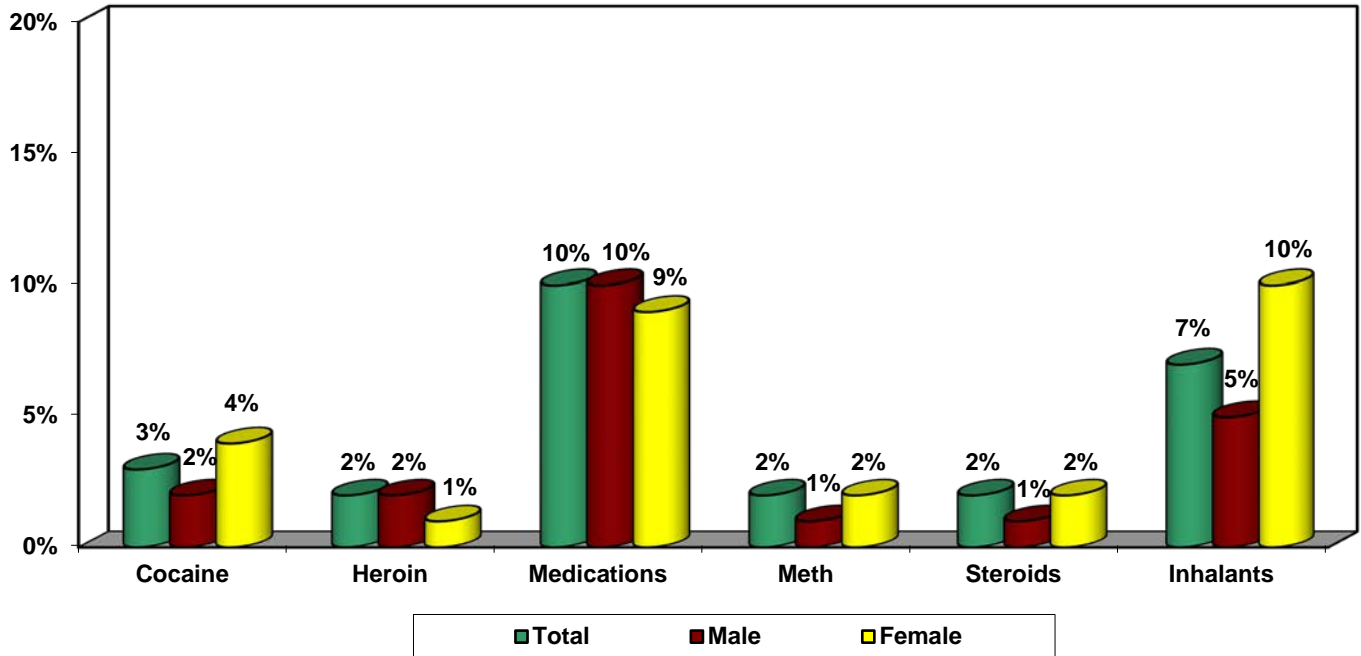
2011 Youth Comparisons	Gauga County 2011 (6 th - 12 th)	Gauga County 2011 (9 th - 12 th)	Ohio 2007 (9 th - 12 th)	U.S. 2009 (9 th - 12 th)
Youth who used marijuana in the past 30 days	15%	20%	18%	21%
Ever used methamphetamines	2%	1%	6%	4%
Ever used cocaine	3%	4%	8%	6%
Ever used heroin	2%	1%	4%	3%
Ever used steroids	2%	1%	5%	3%
Ever used inhalants	7%	6%	12%*	12%
Ever misused medications	10%	12%	N/A	N/A
Youth who reported that someone offered, sold, or gave them an illegal drug on school property	13%	15%	27%	23%

*2005 YRBS Data

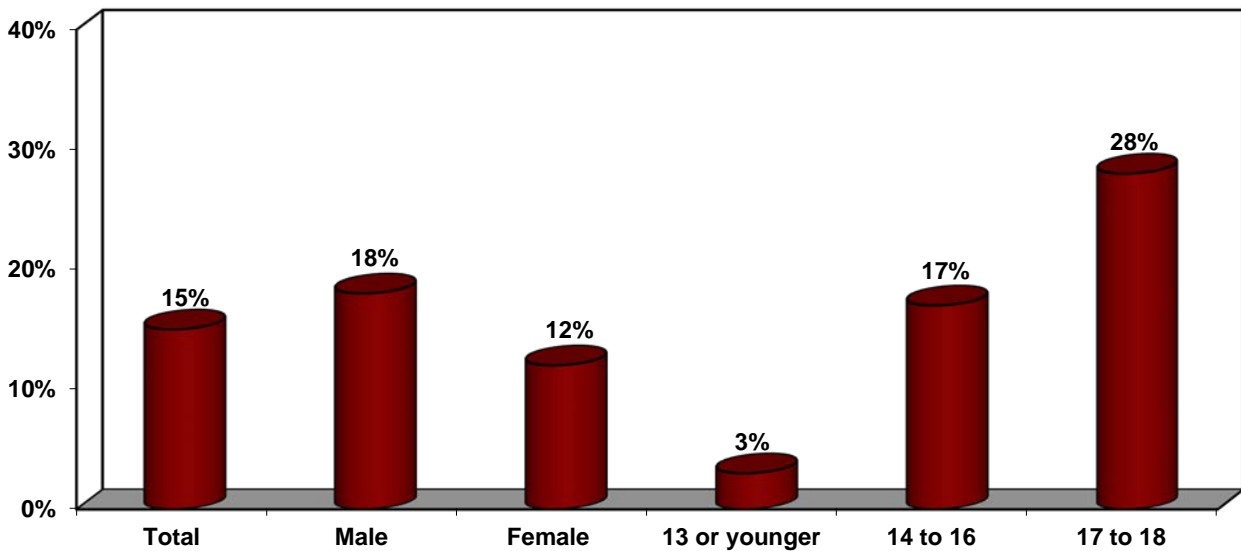
Youth Marijuana and Other Drug Use

The following graphs are data from the 2011 Geauga County Health Assessment indicating youth lifetime drug use, marijuana use in the past 30 days, and the percent of youth who had been offered, sold, or given an illegal drug on school property in the past month. Examples of how to interpret the information include: 3% of all youth had used cocaine, 10% had used medications, and 7% had used inhalants.

Geauga County Youth Lifetime Drug Use

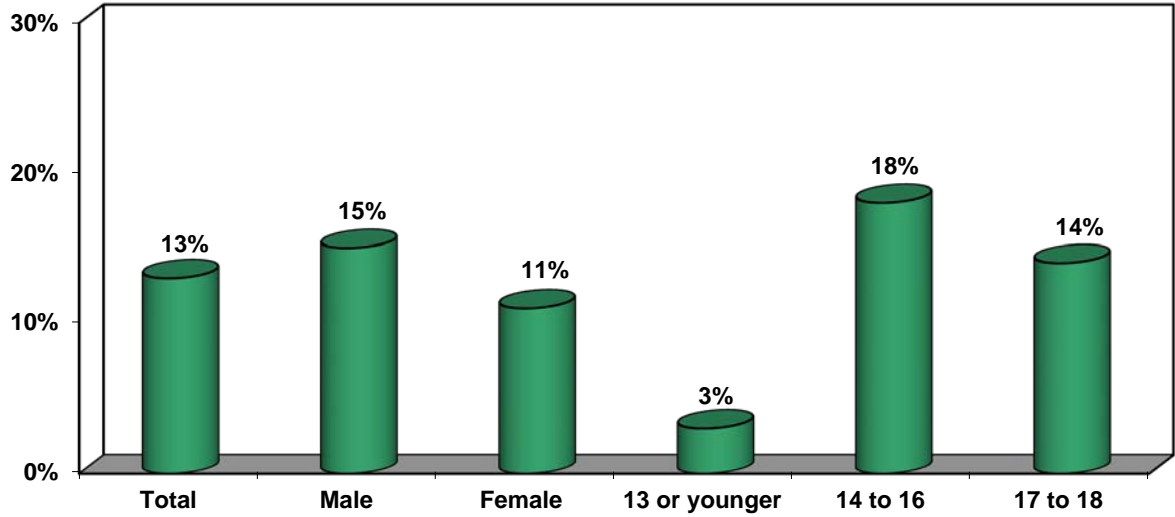


Geauga County Youth Who Used Marijuana in the Past Month



Youth Marijuana and Other Drug Use

Geauga County Youth Offered, Sold, or Given Illegal Drugs by Someone on School Property in the Past 12 Months



Youth Mental Health and Suicide

Key Findings

In 2011, 9% of Geauga County youth had seriously contemplated suicide in the past year and 5% admitted actually attempting suicide in the past year.

Youth Mental Health

- ◆ In 2011, 9% of Geauga County youth reported seriously considering attempting suicide in the past twelve months compared to the 2007 YRBS rate of 13% for Ohio youth and 2009 YRBS rate of 14% for U.S. youth.
- ◆ In the past year, 5% of Geauga County youth had attempted suicide and 2% had made more than one attempt. The 2007 YRBS reported a suicide attempt prevalence rate of 7% for Ohio youth and the 2009 YRBS reported a 6% rate for U.S. youth.
- ◆ Geauga County youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (47%), talking to someone (38%), hobbies (28%), exercising (27%), eating (19%), writing in a journal (10%), shopping (10%), smoking/using tobacco (9%), breaking something (8%), using illegal drugs (8%), drinking alcohol (7%), self-harm (6%), using prescribed medication (4%), using un-prescribed medication (2%), vandalism/violent behavior (1%), and gambling (1%).
- ◆ Geauga County youth reported the following causes of stress: academic success (44%), fighting with friends (29%), sports (27%), fighting at home (24%), dating relationship (21%), breakup (16%), peer pressure (15%), poverty/no money (11%), parent lost their job (7%), family member in the military (2%), and other stress at home (33%). *(Percentages may equal more than 100% as they were allowed to choose more than one answer.)*
- ◆ Almost one-fifth (19%) of youth reported they felt sad or hopeless almost every day for two weeks or more in a row that stopped them from doing some usual activities (2007 YRBS reported 25% for Ohio and 2009 YRBS reported 26% for the U.S.).

Risk Factors of Suicide

- ◆ Mental Health disorder, especially depression
- ◆ Substance abuse
- ◆ Stressful life events
- ◆ Prior suicide attempt
- ◆ Has experienced violence
- ◆ Feeling socially isolated
- ◆ Experiences poor parent/child communication
- ◆ Has medical condition
- ◆ Served jail/prison time
- ◆ Has access to lethal suicide methods (for instance, firearms)

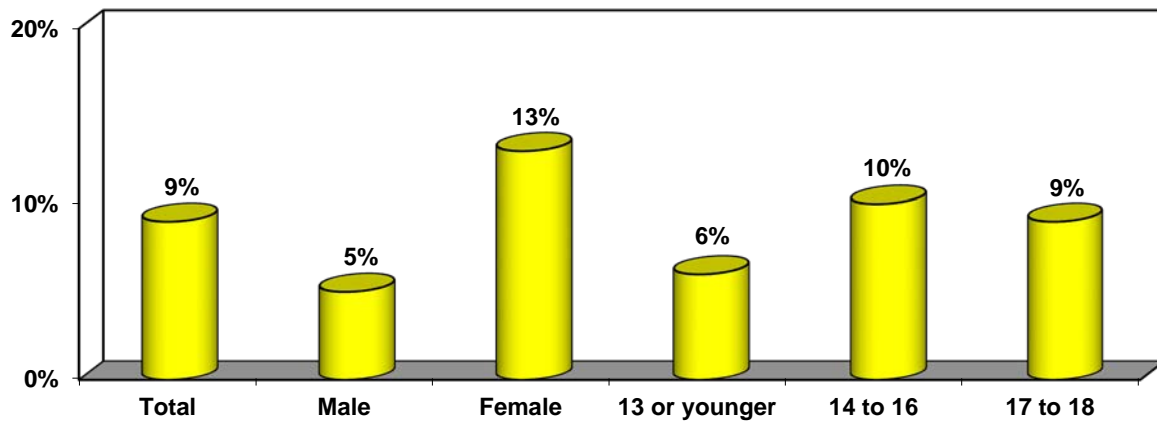
(Source: CDC, National Depressive and Manic Depression Association)

2011 Youth Comparisons	Gauga 2011 (6 th -12 th)	Gauga 2011 (9 th -12 th)	Ohio 2007 (9 th -12 th)	U.S. 2009 (9 th -12 th)
Youth who had seriously considered suicide	9%	11%	13%	14%
Youth who had attempted suicide	5%	5%	7%	6%

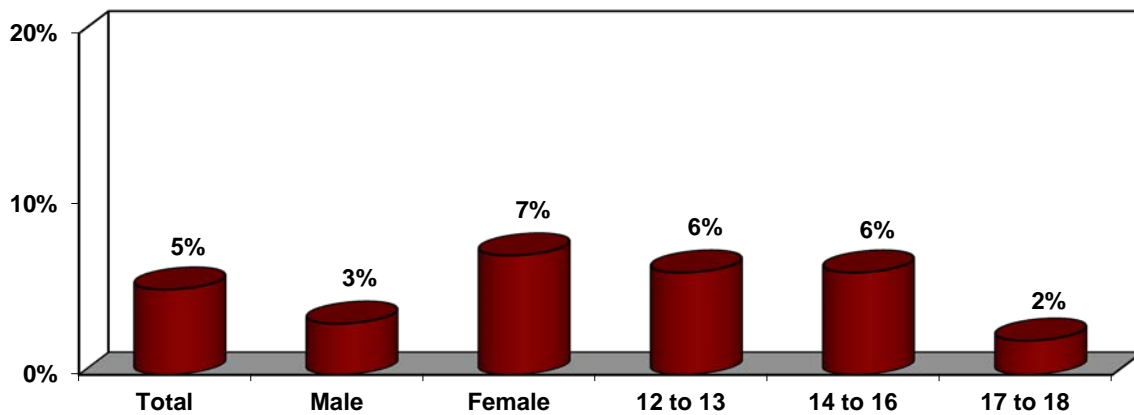
Mental Health and Suicide

The following graphs show the percentage of Geauga County youth who contemplated and/or attempted suicide in the past 12 months (i.e., the first graph shows that 9% of all youth had contemplated suicide, 5% of males and 13% of females).

Geauga County Youth Who Contemplated Suicide in Past 12 Months



Geauga County Youth Who Attempted Suicide in Past 12 Months



Mental Health and Suicide

Teen Suicide Signals

The strongest risk factors for attempted suicide in teens are:

- ❖ Depression
- ❖ Alcohol abuse
- ❖ Aggressive or disruptive behaviors

In 2011, the *American Psychiatric Association* advises one should consult a mental health professional, parent, or school counselor if several of the following symptoms, experiences, or behaviors are present:

- ❖ Depressed mood
- ❖ Substance abuse
- ❖ Difficulties in dealing with sexual orientation
- ❖ Family loss or instability; significant problems with parents
- ❖ Unplanned pregnancy
- ❖ Frequent episodes of running away or being incarcerated
- ❖ Withdrawal from family and friends
- ❖ Expressions of suicidal thoughts, or talk of death or the afterlife during moments of sadness or boredom
- ❖ Loss of interest in or enjoyment in activities that were once pleasurable
- ❖ Impulsive, aggressive behavior, frequent expressions of rage

Suicide Risk Factors

A risk factor is anything that increases the likelihood that persons will harm themselves including:

- ❖ Previous suicide attempt(s)
- ❖ History of mental disorders, particularly depression
- ❖ History of alcohol and substance abuse
- ❖ Family history of suicide
- ❖ Family history of child maltreatment
- ❖ Feelings of hopelessness
- ❖ Impulsive or aggressive tendencies
- ❖ Physical illness
- ❖ Feeling socially isolated
- ❖ Barriers to accessing mental health treatment
- ❖ Loss (relational, social, work, or financial)
- ❖ Has easy access to lethal suicide methods (for instance, firearms)
- ❖ Unwillingness to seek help because of the stigma attached to mental health and substance abuse disorders or suicidal thoughts
- ❖ Cultural and religious beliefs (i.e., the belief that suicide is not a resolution of a personal dilemma)
- ❖ Local epidemics of suicide

(Source: CDC, National Center for Injury Prevention and Control, Risk and Protective Factors, <http://www.cdc.gov/ViolencePrevention/suicide/riskprotectivefactors.html>)

Suicide Protective Factors

Protective factors defend people from the risks associated with suicide and include:

- ❖ Effective clinical care for mental, physical, and substance abuse disorders
- ❖ Easy access to a variety of clinical interventions and support for those seeking help
- ❖ Family and community support
- ❖ Support from ongoing medical and mental health care relationships
- ❖ Skills in problem solving, conflict resolution, and nonviolent handling of disputes
- ❖ Cultural and religious beliefs that discourage suicide and support self-preservation instincts

(Source: CDC, National Center for Injury Prevention and Control, Suicide: Risk and Protective Factors, <http://www.cdc.gov/ViolencePrevention/suicide/riskprotectivefactors.html>)

Warning Signs of Suicide

Recognizing Warning Signs of Suicide in Others

- ❖ Withdrawal
- ❖ Unexpected rage or anger
- ❖ Pessimism
- ❖ Taking care of business-preparing for the family's welfare
- ❖ Unrelenting low mood
- ❖ Sleep problems
- ❖ Hopelessness
- ❖ Drug or alcohol abuse
- ❖ Desperation
- ❖ Recent impulsiveness and taking unnecessary risks
- ❖ Anxiety, psychic pain and inner tension risks
- ❖ Threatening suicide or expressing a strong wish to die
- ❖ Making a plan: giving away prized possessions, sudden or impulsive purchase of a firearm, or obtaining other means of killing oneself such as poisons or medications

(Source: American Foundation for Suicide Prevention, 2011)

Youth Safety

Key Findings

In 2011, almost three-fifths (59%) of Geauga County youth self-reported that they always wore a seatbelt when riding in a car driven by someone else. 58% of youth drivers texted while driving.

Personal Safety

- ◆ Nearly three-fifths (59%) of youth always wore a seatbelt when riding in a car driven by someone else, increasing to 64% of those 13 and younger.
- ◆ More than three-fourths (76%) of youth had been to the doctor for a routine check-up in the past year.
- ◆ In the past 30 days, 18% of youth had ridden in a car driven by someone who had been drinking alcohol and 14% had driven a car themselves after drinking alcohol.
- ◆ Geauga County youth drivers did the following while driving: wore a seatbelt (85%), talked on their cell phone (68%), texted (58%), ate (54%), used cell phone for other things (13%), used the internet on their cell phone (12%), used Facebook on their cell phone (11%), applied makeup (7%), and read (4%).
- ◆ 4% of youth played the choking game.
- ◆ Over three-fourths (77%) of youth had a MySpace, facebook or other social networking account. Of those who had an account, they reported the following: their account was currently checked private (69%), they knew all of “my friends” (63%), their parents had their password (26%), their friends had their password (10%), they had been asked to meet someone they met online (9%), they had problems as a result of their account (6%), and they had participated in sexual activity with someone they met online (4%).
- ◆ 28% of youth reported caring for children under the age of 18 on an average school night.

Gauga County Youth Leading Causes of Death 2006-2008

Total Deaths: 16

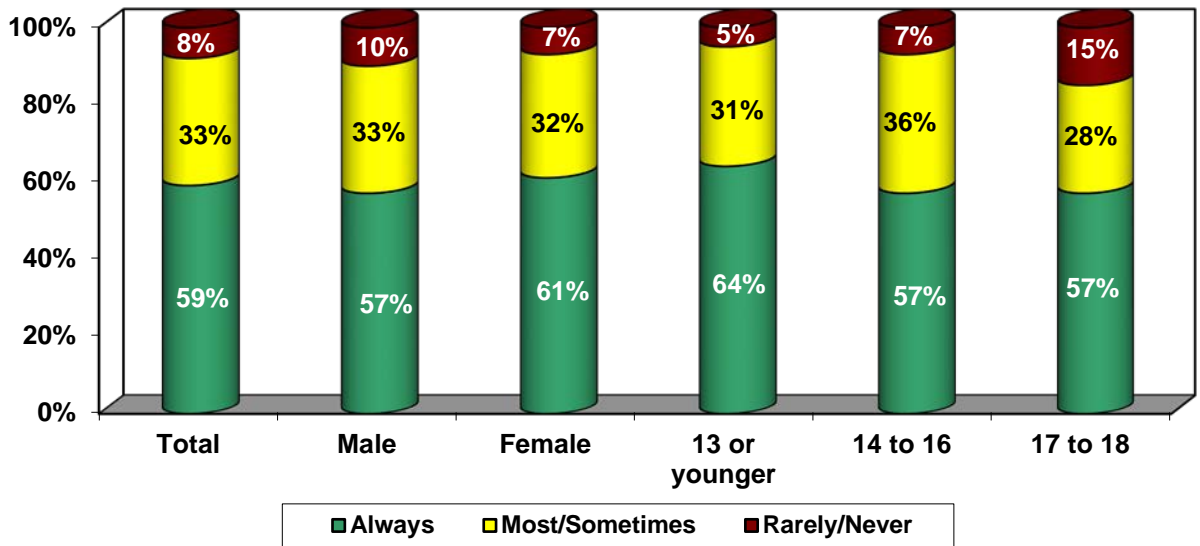
- ❖ Accidents, Unintentional Injuries
- ❖ Cancers
- ❖ Diabetes

(Source: ODH Information Warehouse, updated 4-15-10)

2011 Youth Comparisons	Gauga County 2011 (6 th -12 th)	Gauga County 2011 (9 th -12 th)	Ohio 2007 (9 th -12 th)	U.S. 2009 (9 th -12 th)
Always wore a seatbelt	59%	59%	N/A	N/A
Ridden in a car driven by someone who had been drinking alcohol in past month	18%	20%	N/A	N/A

Youth Safety

Geauga County Youth Seatbelt Use in the Past Month



Youth Violence Issues

Key Findings

In Geauga County, 10% of the youth had carried a weapon in the past month. 6% of youth had been threatened or injured by a weapon on school property in the past year. 43% of youth were bullied in the past year. 18% of youth had purposefully hurt themselves at some time in their life.

Violence-Related Behaviors

- ◆ In 2011, 10% of Geauga County youth had carried a weapon (such as a gun, knife or club) in the past 30 days, increasing to 19% of males (2007 YRBS reported 17% for Ohio, 2009 YRBS reported 18% for the U.S.).
- ◆ In the past 30 days, 1% of Geauga County youth had carried a weapon such as a gun, knife, or club on school property, increasing to 3% of those 17 and older.
- ◆ During the past 12 months, 6% of Geauga County youth were threatened or injured with a weapon such as a gun, knife, or club on school property.
- ◆ 2% 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 (2007 YRBS reported 4% for Ohio, 2009 YRBS reported 5% for the U.S.).
- ◆ 18% of youth had purposefully hurt themselves at some time in their lives. They did so in the following ways: cutting (11%), scratching (8%), hitting (6%), biting (5%), and burning (5%).
- ◆ 43% of youth had been bullied in the past year. The following types of bullying were reported:
 - 35% were verbally bullied (teased, taunted or called you harmful names)
 - 25% were indirectly bullied (spread mean rumors about you or kept you out of a “group”)
 - 10% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
 - 9% were physically bullied (you were hit, kicked, punched or people took your belongings)
- ◆ In the past year, 22% of youth were in a physical fight, 10% on more than one occasion. The 2007 YRBS reports 30% of Ohio youth had been in a physical fight, while the 2009 YRBS reports that 32% of U.S. youth had been in a physical fight.
- ◆ 8% of youth reported being in a fight on school property in the past year, increasing to 12% of males.
- ◆ 12% of youth reported an adult or caregiver hit, slapped, or physically hurt them on purpose in the past year.
- ◆ 14% of youth had witnessed adults in their house hitting or threatening, where they felt afraid; 7% on more than one occasion.
- ◆ 7% of youth reported a boyfriend or girlfriend hit, slapped, or physically hurt them on purpose in the past 12 months, increasing to 11% of those over the age of 17.
- ◆ 7% of youth were physically forced to have sexual intercourse when they did not want to, compared to 10% of Ohio youth in 2007 and 7% of U.S. youth in 2009 (Source: 2007, 2009 YRBS).

Facts Concerning Youth Violence

- ◆ Youth violence is defined by the CDC as “harmful behaviors that can start early and continue into young adulthood.”
- ◆ In 2007, 5,764 youth ages 10-24 were murdered, averaging 16 per day.
- ◆ Emergency rooms treated in excess of 656,000 youth ages 10-24 for violence-related injuries in 2008.
- ◆ Approximately 20% of high school students reported being bullied on school property in 2009.

(Source: CDC, Understanding Youth Violence Fact Sheet, 2010)

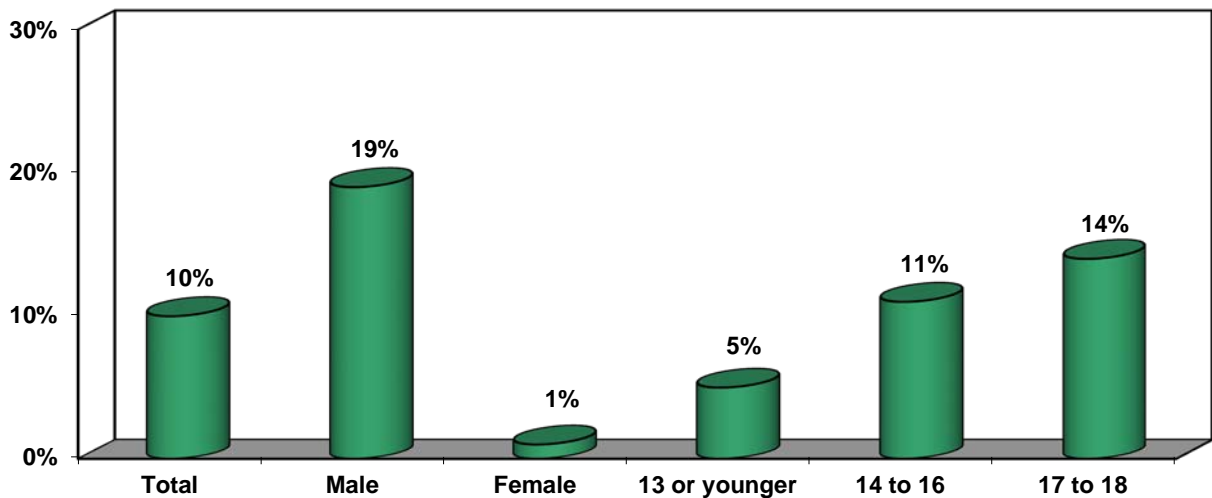
2011 Youth Comparisons	Gauga County 2011 (6 th -12 th)	Gauga County 2011 (9 th -12 th)	Ohio 2007 (9 th -12 th)	U.S. 2009 (9 th -12 th)
Carried a weapon in past month	10%	11%	17%	18%
Did not go to school because felt unsafe	2%	2%	4%	5%
Physically hurt by a boyfriend/girlfriend	7%	8%	N/A	10%
Forced to have sexual intercourse	7%	8%	10%	7%

*N/A – Not available

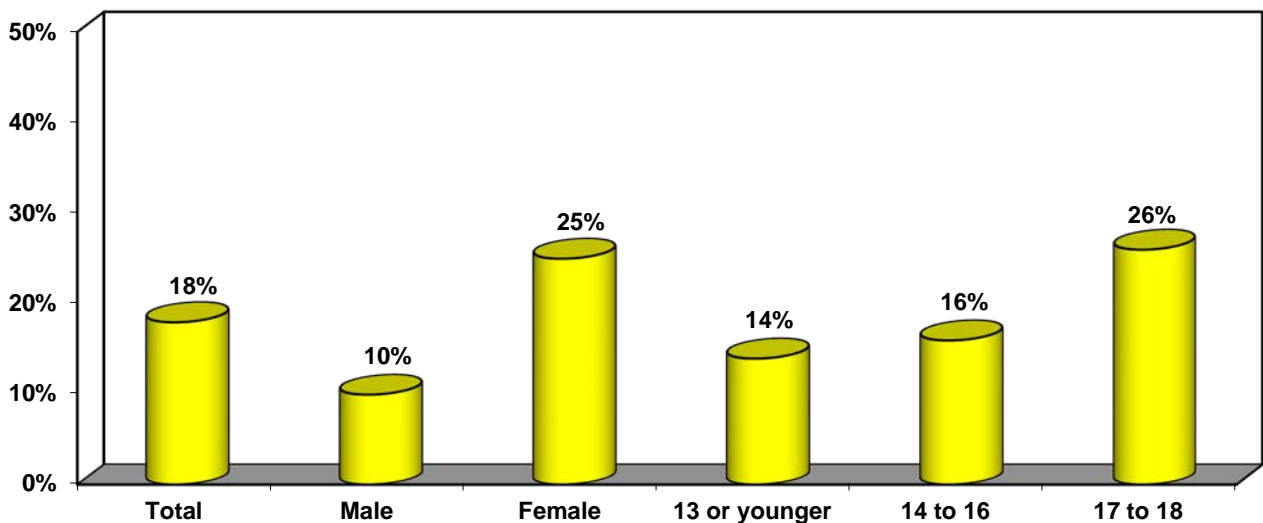
Youth Violence Issues

The following graphs show Geauga County youth carrying a weapon in the past 30 days and those who purposefully hurt themselves. The graphs show the number of youth in each segment giving each answer (i.e., the first graph shows that 10% of all youth carried a weapon in the past 30 days, 19% of males and 1% of females).

Geauga County Youth Carrying a Weapon during the Past 30 Days



Geauga County Youth Who Purposefully Hurt Themselves During Their Life



Youth Violence Issues

Types of Bullying Geauga County Youth Experienced in Past Year

Youth Behaviors	Total	Male	Female	13 or younger	14-16 Years old	17 to 18
Physically Bullied	9%	13%	6%	13%	8%	8%
Verbally Bullied	35%	32%	37%	39%	34%	28%
Indirectly Bullied	25%	20%	31%	24%	28%	21%
Cyber Bullied	10%	7%	14%	9%	13%	7%

Health Risk Behaviors by Bullied vs. Not Bullied Students

Youth Behaviors	Bullied	Not Bullied
Were depressed (felt sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities)	29%	12%
Contemplated suicide in the past 12 months	14%	5%
Attempted suicide in the past 12 months	8%	3%
Have had at least one drink of alcohol in the past 30 days	34%	29%
Have smoked in the past 30 days	19%	12%

Children's Health and Functional Status

Key Findings

In 2011, 14% of children were classified as obese, and 16% were overweight. 66% of Geauga County parents had taken their child ages 0-11 to the dentist in the past year. 5% of parents reported their child had an asthma attack in the past year. 7% of parents reported their child had ADD/ADHD. 32% of parents reported their child had spent four or more hours per day doing physical activities.

Health of Children ages 0-11

- ◆ In 2011, 14% of children were classified as obese by Body Mass Index (BMI) calculations. 16% of children were classified as overweight, 57% were normal weight, and 13% were underweight.
- ◆ Three-fifths (60%) of Geauga County parents of 0-11 year olds rated their child's health as excellent. No parents rated their child's health as poor.
- ◆ 66% of children had been to the dentist in the past year, increasing to 77% of 6-11 year olds. 8% of 6-11 year olds had never been to the dentist.
- ◆ Parents gave the following reasons for not getting dental care for their child: child is not old enough to go to the dentist (16%), costs too much (11%), no insurance (4%), no referral (4%), treatment is ongoing (2%), health plan problem (1%), could not find a dentist who accepts their insurance (1%), inconvenient times/could not get an appointment (1%), dentist did not know how to treat or provide care (1%), dissatisfaction with dentist (1%), did not know where to go for treatment (<1%), child refused to go (<1%), transportation problems (<1%), and other (4%).
- ◆ Parents reported their child had the following allergies:
 - Pollen (7%)
 - Ragweed (6%)
 - Grasses (5%)
 - Mold (5%)
 - House dust mites (4%)
 - Milk (4%)
 - Cats (3%)
 - Dogs (2%)
 - Peanuts (1%)
 - Shellfish (1%)
 - Fungi (1%)
 - Fish (1%)
 - Wheat (1%)
 - Gluten (1%)
 - Bees (1%)
 - Horses (1%)
 - Eggs (1%)
 - Soy (1%)
 - Tree nuts (<1%)
 - Other (9%)
- ◆ 3% of children had an epi-pen for their allergy.
- ◆ A doctor told Geauga County parents their 0-11 year old child had the following at some time:
 - Asthma (10%)
 - ADD/ADHD (7%)
 - Developmental delay or physical impairment (7%)
 - Pneumonia (5%)
 - Urinary tract infections (4%)
 - Birth defect (4%)
 - Behavioral or conduct problems (4%)
 - Hearing problems (4%)
 - Learning disability (4%)
 - Anxiety problems (3%)
 - Vision problems that cannot be corrected by glasses or contact lenses (2%)
 - Head injury (3%)
 - Bone, joint, muscle problems (2%)
 - Depression (6-11 year olds) (2%)
 - Genetic diseases (2%)
 - Cancer (1%)
 - Appendicitis (1%)
 - Digestive tract infections (1%)
 - Epilepsy (1%)
 - Autism (1%)
 - Diabetes (1%)

National Survey of Children's Health, 2007

- ◆ 9% of Ohio children ages 0-5 were diagnosed with asthma, increasing to 21% of 6-11 year olds.
- ◆ 2% of Ohio children ages 0-5 were diagnosed with ADD/ADHD, increasing to 9% of 6-11 year olds.
- ◆ 8% of Ohio and 10% of U.S. children ages 0-5 had an injury that required medical attention.

*(Source: National Survey of Children's Health, 2007
<http://nschdata.org>)*

Children's Health and Functional Status

- ◆ 10% of parents reported their child currently had asthma. 50% of those parents reported their child had an asthma attack in the past twelve months.
- ◆ Geauga County parents thought that their child had difficulties with one or more of the following: concentration (15%), emotions (10%), behavior (9%), and being able to get along with people (3%).
- ◆ Those parents described these difficulties as: minor (57%), moderate (36%), or severe (6%).
- ◆ The above difficulties were being managed in the following ways: family and friends take care of it (46%), professional help (36%), school or day care (26%), and do not need help (26%).
- ◆ Geauga County children usually ate the following for breakfast: cereal (85%), milk (67%), toast (50%), eggs (40%), fruit/fruit juice (37%), oatmeal (31%), yogurt (29%), bacon/sausage/ham (23%), pop tart/donut/pastry (19%), at a school breakfast program (3%), pizza (1%), and other foods (10%). 2% of parents reported that their child rarely ate breakfast, and <1% reported their child ate nothing for breakfast.
- ◆ 9% of parents reported that their child ate 5 or more servings of fruits and vegetables per day. 87% ate one to four servings per day.
- ◆ 32% of Geauga County children spent 4 or more hours on an average day of the week doing physical activities. 11% spent four or more hours watching TV, 2% spent four or more hours playing non-active video games, and 2% spent four or more hours on the computer.
- ◆ Children spent an average of 3.2 hours doing physical activities, 1.6 hour watching TV, 0.6 hours playing video games, and 0.5 hours on the computer.

Child Comparisons	Gauga County 2011 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Gauga County 2011 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
Rated health as excellent or very good	96%	91%	87%	96%	84%	84%
Diagnosed with asthma	6%	9%	9%	11%	21%	16%
Diagnosed with ADHD/ADD	1%	2%	1%	10%	9%	9%
Diagnosed with behavioral or conduct problems	4%	N/A	1%	4%	N/A	5%
Diagnosed with developmental delay or physical impairment	8%	2%	3%	6%	8%	6%
Diagnosed with anxiety problems	1%	N/A	1%	4%	N/A	3%
Diagnosed with vision problems that cannot be corrected	3%	N/A	1%	2%	N/A	2%
Diagnosed with bone, joint, or muscle problems	2%	1%	2%	2%	3%	3%
Diagnosed with hearing problems	3%	2%	2%	5%	4%	3%
Diagnosed with epilepsy	2%	N/A	<1%	1%	N/A	1%
Diagnosed with a head injury	2%	N/A	<1%	3%	N/A	2%
Diagnosed with autism	1%	N/A	1%	2%	N/A	1%
Diagnosed with diabetes	1%	N/A	<1%	<1%	N/A	<1%
Diagnosed with depression	1%	1%	1%	2%	5%	2%
No physical activity	2%	N/A	N/A	<1%	6%	7%

Children's Health and Functional Status

Children's Dental Health

- ❖ Dental care is the number one unmet health care need for children of all family incomes across Ohio as well as for all races and ethnicities.
- ❖ Severe dental problems can result in poor performance or absence from school.
- ❖ Of Ohio children ages 0-17, 17% do not have insurance for dental care.
- ❖ 13% of Ohio children ages 0-17 have had a recent toothache.
- ❖ For Ohio Medicaid consumers ages 0-3, 12% had a dental visit in 2008. For Ohio Medicaid consumers ages 3-18, 42% had a dental visit in 2008.
- ❖ In 2011, <1% of Geauga County 6-11 year olds had never been to the dentist.
- ❖ Even though low-income children ages 0-18 in Ohio had higher rates of dental coverage, they were less likely to have a dental visit in the past year. 68% of low-income children ages 0-18 (200% FPL or less) had a dental visit in the past year, 82% of higher-income children had a dental visit within the past year.

(Source: ODH)

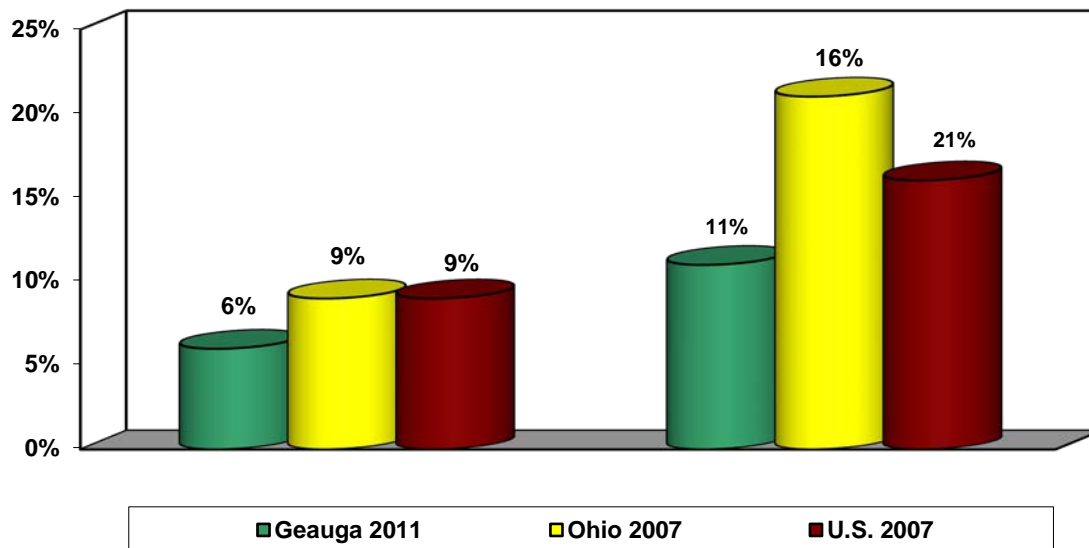
Asthma

- ◆ In 2007, 29% of children with food allergy also had reported asthma compared with 12% of children without food allergy.
- ◆ 8% of U.S. children ages 0-4 have asthma, while 14% of children ages 5-14 have asthma.

(Source: CDC, National Center for Health Statistics Data Brief October 2008)

The following graph shows that Geauga County has a smaller percentage of children ages 0-5 who are diagnosed with asthma than both Ohio and the U.S. For children ages 6-11, Geauga County also has a smaller percentage who are diagnosed with asthma than both Ohio and the U.S.

Diagnosed with Asthma



Children's Health and Functional Status

Children's Health

- ❖ About 30 to 50 percent of students with ADHD will also have a learning disability.
- ❖ If a child has cortex-based disorders, emotional regulatory disorders, or chronic motor and/or vocal tic disorder the child has up to a 50% chance that he or she will have at least one of the others as well. Cortex-based disorders are learning, language, and/or motor disabilities. Emotional regulatory disorders are anxiety disorders, which may include panic attacks, depression, anger-control disorders, and obsessive-compulsive disorder.
- ❖ About 1 out of every 33 babies is born with a major birth defect.
- ❖ The causes of about 70% of birth defects are unknown.
- ❖ Most birth defects happen during early pregnancy; before the woman knows she is pregnant.
- ❖ Parents who have a child with an Autism Spectrum Disorder (ASD) have a 2 to 8% chance of having a second child with an ASD.
- ❖ About 40% of children with an ASD do not talk at all. Another 25 to 30% have some words at 12 to 18 months of age and lose them. Others may speak, but not until later in childhood.
- ❖ ASD is reported to occur in all racial, ethnic, and socioeconomic groups, yet are on average 4 to 5 times more likely to occur in boys rather than in girls.

(Source: CDC, Learning Disabilities Association of America, National Birth Defects Prevention Network)

Children's Nutrition

- ❖ Healthy eating contributes to overall healthy growth and development, including healthy bones, skin, and energy levels; and a lowered risk of dental caries, eating disorders, constipation, malnutrition, and iron deficiency anemia.
- ❖ Hunger and food insufficiency in children are associated with poor behavioral and academic functioning.
- ❖ 39% of children ages 2-17 meet the USDA's dietary recommendations for fiber.
- ❖ Less than 40% of U.S. children and adolescents meet the U.S. dietary guidelines for saturated fat.
- ❖ Of U.S. children ages 2-5 100% get the total recommended amount of fruit, grains, and milk. While 73% get the total recommended amount of meat and beans, only 44% get the total recommended amount of vegetables. Of U.S. children ages 6-11 100% get the total recommended amount of grains. 58% get the total recommended amount of fruit, 46% get the total recommended amount of vegetables, 87% get the total recommended amount of milk, and 78% get the total recommended amount of meat and beans.
- ❖ Overweight and obesity, influenced by poor diet and inactivity, are significantly associated with an increased risk of diabetes, high blood pressure, high cholesterol, asthma, joint problems, and poor health status. The prevalence of obesity among children ages 6-11 has more than doubled in the past 20 years. Overweight children and adolescents are more likely to become overweight or obese adults. One study has shown that children who became obese by the age of eight were more severely obese as adults.
- ❖ Research suggests that not having breakfast can affect children's intellectual performance. 98% of Geauga County children ages 0-11 eat breakfast, 92% of U.S. children ages 6-11 eat breakfast, and 77% of U.S. adolescents ages 12-19 eat breakfast.

(Source: CDC, childstats.gov)

Children's Health and Functional Status

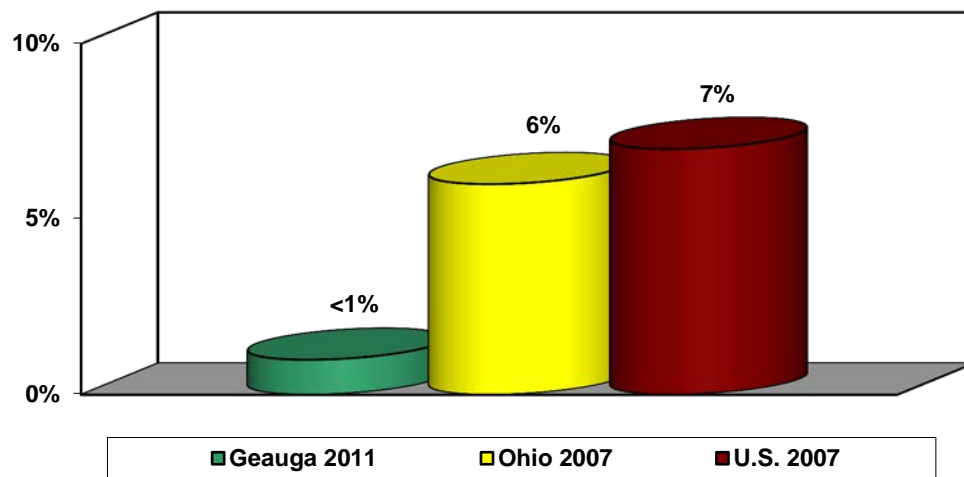
Physical Activity

- ◆ 10% of Ohio children ages 6-11 have not participated in physical activity for at least 30 minutes in the past week. During the past week, 15% of Ohio children ages 6-11 have participated in physical activity for at least 20 minutes 1 to 3 days, 37% have participated in physical activity for at least 20 minutes 4 to 6 days, and 42% have participated in physical activity for at least 20 minutes every day.

(Source: National Survey of Children's Health, Data Resource Center)

The following graph shows that Geauga County children ages 6-11 participate in some type of physical activity more than both Ohio and the U.S. children. Although the percent of Ohio children who do not participate in any physical activity is close to the percent of children in the U.S., Geauga County has a lower percent of children ages 6-11 who participate in no physical activity.

Children 6-11 with No Physical Activity



TV, Video Games, and Computer Usage

- ❖ The average time Geauga County children ages 0-11 spend watching TV is 1.6 hours, and the average time playing video games is 0.6 hours.
- ❖ For parents of Ohio children ages 6-11, 94% of parents of Ohio children ages 6-11 have rules about what programs their children can watch.
- ❖ Geauga County children ages 0-11 use a computer for an average of 0.6 hours on an average day. Ohio children ages 6-11 use a computer on an average weekday for purposes other than school work for the following: no time (24%), less than an hour (39%), 1-3 hours (27%), and more than 3 hours (2%). 8% of Ohio children ages 6-11 do not own a computer.

(Source: National Survey of Children's Health, Data Resource Center)

Children's Health Insurance, Access, Utilization, & Medical Home

Key Findings

In 2011, 22% of Geauga County parents reported their child did not have health insurance. 3% of parents reported they received benefits from the WIC program and 4% from the SNAP/food program. 17% of parents reported they had taken their child to the hospital emergency room in the past year.

Health Insurance (Ages 0-11)

- ◆ 22% of parents reported that their child did not have health insurance.
- ◆ Geauga County children had the following types of health insurance: parent's employer (53%), someone else's employer (11%), Medicaid or State Children's Health Insurance Program (6%), self-pay (6%), Medicare (2%), and some other type (8%).
- ◆ Parents reported their child's health insurance covered the following: hospital stays (82%), immunizations (80%), doctor visits (79%), prescription coverage (76%), well visits (76%), dental (66%), mental health (64%), and vision (53%).

National Survey of Children's Health, 2007

- ❖ 12% of 0-5 year old and 11% of 6-11 year old Ohio children were without insurance at some time in the past year.
- ❖ 32% of 0-5 year old and 26% of 6-11 year old Ohio children had public insurance.
- ❖ 96% of 0-5 year old and 87% of 6-11 year old Ohio children had been to the doctor for preventive care in the past year.

(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)

Access and Utilization

- ◆ In the past year, parents reported that someone in their household received the following: benefits from free or reduced breakfast or lunch (9%), mental health/substance abuse treatment (5%), Help Me Grow (5%), SNAP/food stamps (4%), WIC program (3%), cash assistance from a welfare program (3%), and subsidized child care through JFS (2%).
- ◆ 13% of parents reported their child did not get all of the medical care they needed in the past year. They gave the following reasons: costs too much (5%), no referral (4%), no insurance (3%), treatment is ongoing (2%), inconvenient times/could not get appointment (2%), could not find a doctor who accepted child's insurance (1%), transportation problems (1%), did not like the doctor (1%), and doctor didn't know how to treat or provide care (1%), vaccine shortage (1%), child refused to go (1%), health plan problem (<1%), did not know where to go for treatment (<1%), and other reasons (2%).
- ◆ 10% of parents reported their child did not get all of the prescription medications they needed in the past year. They gave the following reasons: costs too much (3%), no referral (3%), no insurance (2%), treatment is ongoing (1%), health plan problem (1%), inconvenient times/could not get an appointment (1%), transportation problems (1%), could not find a doctor who accepted child's insurance (<1%), doctor did not know how to treat or provide care (<1%), dissatisfaction with doctor (<1%), did not know where to go for treatment (<1%), and other reasons (1%).
- ◆ About one in six (17%) parents took their child to the hospital emergency room for health care in the past year. 3% of children had been to the ER two or more times in the past year.

Medical Home

- ◆ 81% of parents reported they had one or more people they think of as their child's personal doctor, decreasing to 70% of those with incomes less than \$25,000.
- ◆ The Healthy People 2020 objective for children who have access to a medical home is 63%.

Children's Health Insurance, Access, Utilization, & Medical Home

- ◆ Geauga County parents reported the following as the place they usually go if their child is sick or they need advice about their child's health: doctor's office (91%), multiple places-including a doctor's office (6%), urgent care center (1%), public health clinic or community health center (1%), in-store health center (1%), no usual place (1%), hospital emergency room (<1%), and some other place (<1%).
- ◆ Geauga County parents were referred to any of the following specialists for their child: ear, nose, and throat (27%), heart doctor (8%), psychiatrist (6%), geneticist (3%), endocrinologist (1%), oncologist (1%), and other (22%).
- ◆ 13% of children needed special services, equipment, or other care in the past year (such as physical therapy, wheelchairs, special education services, or counseling). Those services most needed were speech therapy (8%), counseling (4%), special education (3%), and occupational therapy (2%).

Child Comparisons	Gauga County 2011 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Gauga County 2011 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
Had public insurance	8%	32%	35%	8%	26%	28%
Dental care visit in past year	45%	51%	54%	77%	92%	90%
2 or more visits to the ER	4%	8%*	8%*	3%	6%*	4%*
Received all the medical care they needed	88%	99%*	99%*	86%	98%*	98%*
Have a personal doctor or nurse	79%	95%	94%	81%	95%	92%

* 2003 national and state data

Usual Place of Health Care

- ◆ 95% of U.S. children have a usual place of health care. 98% of children with private health insurance, 96% of children with Medicaid or other public insurance, and 73% of uninsured children have a usual place of health care.
- ◆ 74% used a doctor's office, 24% used a clinic, 1% used a hospital outpatient clinic, and 1% used an emergency room as their usual place of health care. 85% of children with private insurance used a doctor's office, while only 60% of children with Medicaid or other public insurance used a doctor's office. 3% of uninsured children used an emergency room as their usual place of health care.
- ◆ 41% of children with poor families used a clinic as their usual place of health care, while only 16% of children with non-poor families used a clinic.
- ◆ 62% of children with private health insurance were in excellent health, while 45% of children with Medicaid or other public insurance were in excellent health. Children in fair or poor health were more likely to use a clinic as their usual place of health care (36%) than children in excellent or very good health (23%).

(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)

Preventive Care

- ◆ 90% of Ohio children and 89% of U.S. children had a preventive medical visit in the past year. While 79% of Ohio children and 78% of U.S. children had a preventive dental visit in the past year.
- ◆ 21% of Ohio children ages 10 months-5 years and 20% of U.S. children ages 10 months-5 years received a standardized screening for developmental or behavioral problems.
- ◆ 66% of Ohio children ages 2-17 and 60% of U.S. children ages 2-17 with problems requiring counseling who received mental health care in the past year.
- ◆ 66% of Ohio children received care within a medical home in the past year, while 56% of U.S. children received care within a medical home in the past year.

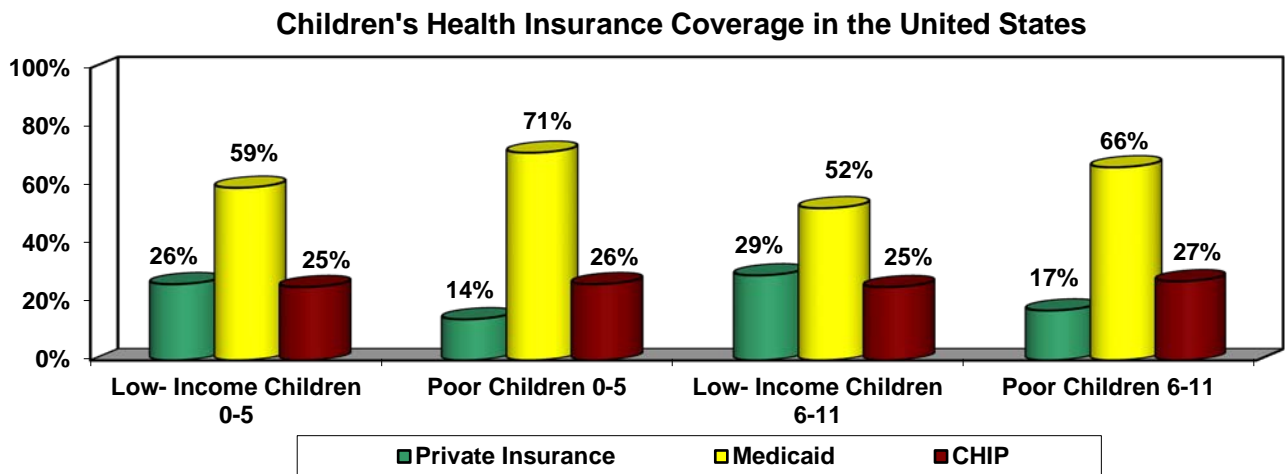
(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)

Children's Health Insurance, Access, Utilization, & Medical Home

Low-Income Families and Health Insurance

- ◆ As children get older they are more likely to become uninsured.
- ◆ In the United States, 14% of low-income family children ages 0-5 are uninsured; also 14% of poor family children ages 0-5 are uninsured. 16% of low-income children ages 6-11 are uninsured, and 17% of poor family children ages 6-11 are uninsured. For children ages 12-17, 19% of those of low-income families, and 20% of those of poor families are uninsured. *(Source: National Center for Children in Poverty), Basic Facts About Low-income Children, 2009, Released October 2010)*

The following graph shows the percent of low-income children that have different types of health insurance or no health insurance. The graph also shows the percent of poor children that have different types of health insurance or no health insurance. The types of health insurance include uninsured, private insurance, Medicaid, or Children Health Insurance Program (CHIP). Low-income is 100-200% of the Federal Poverty Level (FPL), while poor is 0-99% of the FPL. Children that have more than one type of health insurance are included in both percents. Children that are in poor families are more likely to be uninsured or on Medicaid than those of low-income families. Children of low-income families are more likely than those of poor families to have private insurance. Children of low-income families are just as likely as those of poor families to be covered by CHIP.



(Source: National Center for Children in Poverty, Basic Facts About Low-income Children, 2009, Released October 2010)

Health Insurance

- ❖ In the United States every 39 seconds a child is born uninsured.
- ❖ 11% of U.S. children are uninsured; while in Ohio 8% of children are uninsured.
- ❖ U.S. children are 50% of total Medicaid enrollment, Ohio children are also 50% of total Medicaid enrollment.
- ❖ In 2007, parents reported that 11% of Ohio children and 15% of U.S. children did not have consistent coverage in the past year.
- ❖ In 2008, 4% of Central Ohio children, 3% of Northeast Ohio children, 4% of Northwest Ohio children, 5% of Southeast Ohio children, 4% of Southwest Ohio children, 5% of West Central Ohio children, and 4% of East Central Ohio children were without health insurance.
- ❖ In 2008, more Ohio children were covered by job-based insurance than any other type of insurance.
- ❖ 45% of Ohio children with special health care needs are covered by Medicaid/Children Health Insurance Program (CHIP), while only 33% of all Ohio children were covered by Medicaid/CHIP.

(Source: Children's Defense Fund, National Survey of Children's Health, Ohio Family Health Survey, Ohio Chartbook)

Children's Health Insurance, Access, Utilization, & Medical Home

Unmet Medical Needs

- ❖ Children in near-poor families were more likely to have unmet medical needs and to have delayed medical care than children in poor families or children in families that are not poor.
- ❖ 3% of children were unable to get needed medical care because the family could not afford it, and 5% of children had medical care delayed because of worry about the cost.
- ❖ Children in single-mother families were more likely to have been unable to get medical care compared with children in two-parent families or in single-father families.
- ❖ 15% of uninsured children had not had contact with a doctor or other health professional in more than two years (including those that had never had contact) compared with only 2% of children with private insurance.

(Source: National Health Interview Survey, 2008)

Prescriptions

- ❖ 13% of U.S. children had a health problem in 2008 for which prescription medication had been taken regularly for at least three months. 16% of children ages 12-17, 14% of children ages 5-11, and 7% of children ages 0-5 were on regular prescription medication.
- ❖ 13% of white children, 12% of black children, and 8% of Asian children were on regular prescription medication.
- ❖ 15% of children with Medicaid or other public health insurance, 13% of children with private insurance, and 6% of uninsured children have been on regular prescription medication for at least three months.

(Source: National Health Interview Survey, 2008)

Emergency Room Visits

- ❖ In 2008, 14% of U.S. children had an emergency room visit in the past year. 7% of U.S. children had two or more emergency room visits in the past year.
- ❖ 12% of children in single-mother families had two or more visits to an emergency room in the past year, while only 6% of children in two-parent families had two or more visits to an emergency room in the past year.
- ❖ 11% of children with Medicaid or other public insurance had two or more emergency room visits in the past year. 6% of uninsured children had two or more emergency room visits in the past year. 5% of children with private health insurance had two or more emergency room visits in the past year.

(Source: National Health Interview Survey, 2008)

Early Childhood (0-5 year olds)

Key Findings

The following information was reported by parents of 0-5 year olds. In 2011, 89% of mothers got prenatal care within the first three months during their last pregnancy. 5% of mothers smoked during their last pregnancy. 35% of parents read to their child every day.

Early Childhood

- ◆ The following information was reported by Geauga County parents of 0-5 year olds:
- ◆ Thinking back to their last pregnancy: 57% of women wanted to be pregnant then, 16% wanted to be pregnant sooner, 10% wanted to be pregnant later, 4% did not want to be pregnant then or any time in the future, and 13% did not recall.
- ◆ During their last pregnancy, mothers did the following: got prenatal care within the first 3 months (89%), took a multi-vitamin (85%), wore a seatbelt properly (77%), took folic acid (57%), experienced mild postpartum depression (21%), smoked cigarettes (5%), experienced severe postpartum depression (2%), experienced perinatal depression (1%), and experienced domestic violence (1%).
- ◆ Parents reported their child regularly attended the following in the past month: nursery school, pre-school, or kindergarten (46%), child care in their home provided by a relative (33%), child care outside of their home provided by a relative (30%), family-based child care outside of their home (18%), a child care center (17%), elementary school (4%), child care in their home provided by a babysitter (20%), and head start or early start program (2%).
- ◆ About half (48%) of parents reported they had a childcare provider: Those parents reported that their childcare provider: addresses health and hygiene issues (69%), makes sick kids stay home (51%), and isolates sick children (31%).
- ◆ Parents were very concerned about the following: having enough time for their child (9%), relationship with child (4%), child talking (4%), child's academic achievement (3%), how child copes with stress (3%), child's anxiety (3%), learning difficulties (2%), child's self-esteem (1%), cell phone and technology use (1%), violence in home, school, or neighborhood (1%), child crawling/walking/running (1%), eating disorders (1%), Internet use (1%), child getting along with others (1%), and depression (1%).
- ◆ Parents reported using the following for their children: health department immunization clinics (46%), story time at the library (44%), Park District (40%), newborn home visit (37%), bible school/VBS/Sunday school (30%), Parent Talk newsletter (30%), breastfeeding counseling (26%), Help Me Grow (20%), kindergarten readiness programs (18%), a car seat technician (15%), Devereaux Early Childhood Assessment (8%), Very Important Kids (8%), Kidsfest (6%), Head Start (4%), Dinoschool (3%), Incredible Years (2%), and Starting Point (1%).

National Survey of Children's Health, 2007

- ❖ 50% of Ohio and 48% of U.S. parents of 0-5 year olds read to their child every day.
- ❖ 17% of Ohio and 13% of U.S. parents of 0-5 year olds reported their child watched 4 or more hours of TV each day.
- ❖ 34% of Ohio and 25% of U.S. parents of 0-5 year olds never breastfed their child.

(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)

Child Comparisons	Gauga County 2011 0-5 years	Ohio 2007 0-5 years	U.S. 2007 0-5 years
Parent reads to child every day	35%	50%	48%
Spent 4 or more hours watching TV	10%	17%	13%

Early Childhood (0-5 years old)

Sleep and SIDS

- ❖ Babies should be placed on his/her back with face and head clear of blankets and other soft items. Doctors have not found an increase in choking or other problems in infants who sleep on their backs.
- ❖ Sudden Infant Death Syndrome (SIDS) is the leading cause of death in children between one month and one year. SIDS is most likely to occur between two and three months, it also occurs more often in males than females. Native American infants are three times more likely than Caucasians to die of SIDS and African-Americans are two to three times more likely than Caucasians to die of SIDS.
- ❖ SIDS is likely to occur if an infant is sleeping on his/her stomach, using a soft or unsafe bed, has loose bedding materials like blankets and pillows, overheating due to clothing, blankets or room temperature, mother's age is younger than 20 years, mother smoked during pregnancy, mother received late or no prenatal care, child was born with a premature or low birth weight, or the baby is exposed to secondhand smoke.
- ❖ Putting infants to sleep on their side is not as safe as placing them on their back. Infants who sleep on their sides can roll onto their stomachs; which puts them at a greater risk for SIDS.
- ❖ Studies show that pacifiers may protect against SIDS. Pacifiers are recommended from one month for breast-fed infants to one year. The pacifier should be used when placing the baby down to sleep, but should not be reinserted once the infant falls asleep. If the infant refuses the pacifier, he/she should not be forced to take it. Pacifiers should be cleaned regularly and should not be coated with sweet substances.

(Sources: National Sleep Foundation)

Car Seats and Booster Seats

- ❖ For children ages 0-8, child restraint use has increased from 15% in 1999 to 73% in 2005.
- ❖ In a study observing the misuse of 3,442 child restraint systems in six states, about 73% showed at least one critical misuse. 84% of infant seats showed critical misuse, and 41% of booster seats showed critical misuse. The most common form of misuse included loose vehicle seat belt attachment to the child restraint systems and loose harness straps securing the child to the child restraint systems.
- ❖ Children ages 2-5 using safety belts prematurely are four times more likely to suffer a serious head injury in a crash than those restrained in child safety seats or booster seats.
- ❖ Child safety seats reduce fatal injury in passenger cars by 71% for infants less than 1 year old and by 54% for children ages 1-4.
- ❖ For children under the age of 5, 451 lives were saved in 2004 due to child restraint use. Of these 451 lives saved, the use of child safety seats was responsible for 413 and the use of safety belts saved 38.

(Sources: Safe Kids USA)

Child Care

- ❖ Children ages 0-5 from single-mother households are more likely to have a parent who cut back or quit working in the past year due to child care issues (19%), than children in two-parent households (11%).
- ❖ Of children ages 0-5 who needed child care, 67% have parents who made different arrangements for care at the last minute due to circumstances beyond their control.

(Sources: childhealthdata.gov, Data Resource Center for Child & Adolescent Health)

Middle Childhood (6-11 years old)

Key Findings

The following information was reported by Geauga County parents of 6-11 year olds. In 2011, 34% of parents reported their child was bullied at some time in the past year. 76% of parents reported their child participated in extracurricular activities. 14% of parents reported their child had an email, MySpace, Facebook, Twitter, or another social networking account.

Middle Childhood

- ◆ The following information was reported by Geauga County parents of 6-11 year olds.
- ◆ 79% of parents reported they felt their child was always safe at school. 19% reported usually and 1% reported sometimes.
- ◆ 34% of parents reported their child was bullied in the past year. The following types of bullying were reported:
 - 22% were verbally bullied (teased, taunted or called you harmful names)
 - 7% were indirectly bullied (spread mean rumors about you or kept you out of a “group”)
 - 6% were physically bullied (you were hit, kicked, punched or people took your belongings)
 - <1% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
- ◆ Children were enrolled in the following types of schools: public (61%), private (33%), home-schooled (2%), charter (1%), and out-of-county school (<1%).
- ◆ 11% of parents reported their child spent 4 or more hours watching TV on an average day after school, and 3% spent 4 or more hours playing video games.
- ◆ One in seven (14%) parents reported their child had an email, MySpace, Facebook, Twitter, or another social networking account. Of those who had an account, they reported the following: they had their child’s password (94%), they knew all of the people in their child’s “my friends” (62%), and their child’s account was checked private (40%). No parents reported that their child’s friends had their passwords or that their child had a problem as a result of their account.
- ◆ Parents reported their child had the following unsupervised time after school on an average school day: less than one hour (92%), 1-2 hours (7%), and 4 or more hours (1%).
- ◆ Parents were very concerned about the following: having enough time for their child (11%), child’s academic achievement (10%), relationship with child (7%), learning difficulties (6%), how child copes with stress (6%), anxiety (5%), bullying (4%), child getting along with others (4%), child’s self-esteem (3%), cell phone and technology use (3%), child talking (3%), child crawling/walking/running (2%), depression (2%), Internet use (2%), risky behaviors (2%), violence in home, school, or neighborhood (1%), substance abuse (1%), and eating disorders (1%).
- ◆ Parents discussed the following topics with their child in the past year: eating habits (64%), tobacco (54%), screen time (51%), alcohol (48%), body image (40%), refusal skills (38%), marijuana and other drugs (30%), dating and relationships (16%), abstinence and how to refuse sex (8%), condoms/safer sex/STD prevention (1%), and birth control (1%).
- ◆ Geauga County children participated in the following activities in the past year: sports team/sports lessons (58%), religious group (30%), club or organization (23%), library program (12%), 4H (4%), Latchkey (1%), and some other organized activity (24%).

National Survey of Children’s Health, 2007

- ❖ 8% of Ohio and 5% of U.S. parents of 6-11 year olds reported their child missed 11 or more days of school due to an illness or injury.
- ❖ 14% of Ohio and 9% of U.S. parents of 6-11 year olds reported their child watched 4 or more hours of TV or playing video games each day.
- ❖ 15% of Ohio and 9% of U.S. parents of 6-11 year olds reported their child spent time home alone without an adult.

(Source: National Survey of Children’s Health, 2007 <http://nchsdata.org>)

Middle Childhood (6-11 years old)

- ◆ 9% of parents have contacted the following agencies to help with problems they had with their child: child's school (7%), mental health (3%), faith-based agency (1%), and children's services (1%).
- ◆ Parents believed that reproductive system education should be covered in the following grades: K-2 (1%), 3-5 (39%), 6-8 (42%), and 9-12 (8%). 11% said it should not be covered at all.
- ◆ Parents believed that abstinence and refusal skills education should be covered in the following grades: K-2 (5%), 3-5 (12%), 6-8 (58%), and 9-12 (13%). 11% said it should not be covered at all.
- ◆ Parents believed that birth control and condom use education should be covered in the following grades: K-2 (0%), 3-5 (5%), 6-8 (39%), and 9-12 (33%). 23% said it should not be covered at all.

Child Comparisons	Geauga County 2011 6-11 Years	Ohio 2007 6-11 Years	U.S. 2007 6-11 Years
Child participated in 1 or more activities	76%	85%	79%
Child spent 4 or more hours watching TV, playing non-active video games, or time on the computer	11%	14%	9%
Child spent some time home alone without an adult	8%	15%	9%
Parent felt child was usually/always safe at school	98%	95%	92%

Children's Safety in Cars

- ❖ Children are more likely to be properly restrained when the driver is properly restrained.
- ❖ 81% of children ages 8-15 use a safety belt, but only 68% of all occupants use a safety belt in the back seat.
- ❖ Safety belts are not designed for children under 4'9". Some children may need a booster seat past the age of 8, even though it isn't required.
- ❖ Over 400 children ages 4-8 are killed in traffic crashes every year and roughly 70,000 more are injured. Research has shown that booster seats reduce injury risk by 59% for children ages 4-8 compared to safety belts alone.
- ❖ A booster seat raises the child so the safety belt fits properly. The lap belt should rest on the hip or pelvis and the shoulder belt should cross the chest.
- ❖ All children under 13 should sit in the back seat.
- ❖ Ohio law states that children under 8 years old must ride in a booster seat or other appropriate child safety seat unless they are 4'9" or taller. Children from 8 to 15 years old who are not secured in a car seat must be secured in the vehicle's seat belt.

(Sources: Safe Kids USA, ODH, Ohio Booster Seat Coalition)

Helmet Safety

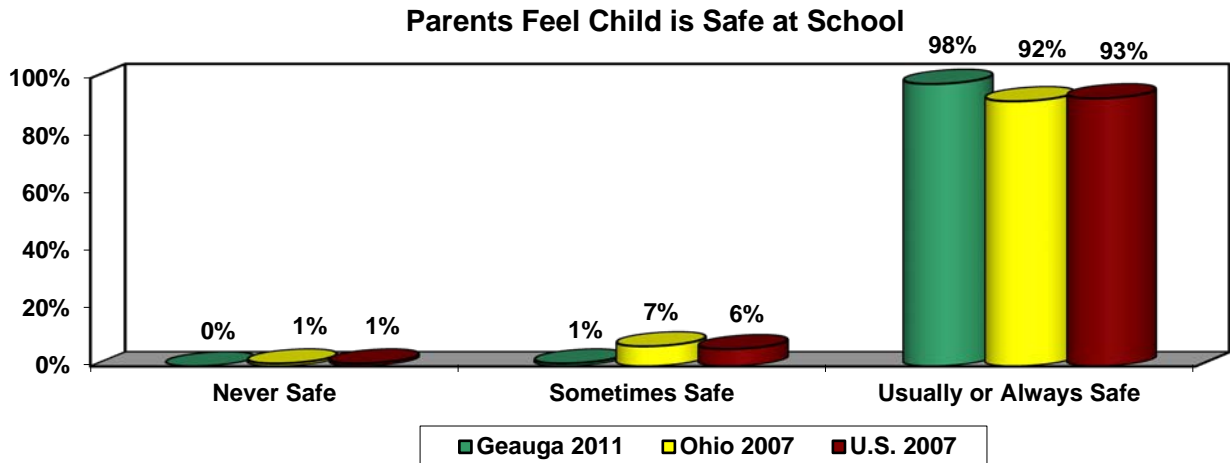
- ❖ More than 70% of children ages 5-14 regularly ride a bicycle.
- ❖ Each year, approximately 140 children are killed as bicyclists, and sustain more than 275,000 nonfatal bicycle injuries. An estimated 75% of fatal head injuries could have been prevented with a helmet.
- ❖ National usage of bicycle helmets ranges from 15 to 25%.
- ❖ More children ages 5-14 are seen in hospital ERs for injuries related to biking than any other sport.
- ❖ For motor vehicle-related bicycle crashes, 69% of deaths occur between May and October, 58% of deaths occur at non-intersection locations, and 70% of deaths occur between 2 and 8 pm.

(Source: Safe Kids USA)

Middle Childhood (6-11 years old)

Safe Schools

The following graph shows whether Geauga parents, Ohio parents, and U.S. parents feel their child's school is never, sometimes, or usually/always safe. Geauga County has the highest percent for usually or always, and the lowest percent for sometimes and never safe.



(Source: National Survey Children's Health, Data Resource Center)

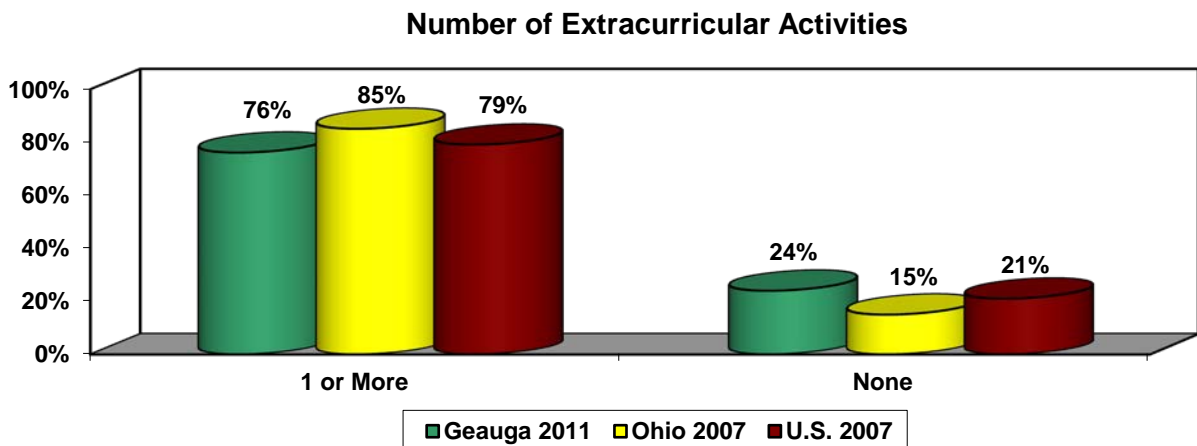
Unhappy, Sad, and Depressed Children

- ❖ U.S. parents reported their child being unhappy, sad, or depressed. 52% reported never, 31% reported rarely, 16% reported sometimes, and 2% reported usually/always. Ohio parents also reported their child being unhappy, sad, or depressed. 46% reported never, 32% reported rarely, 19% reported sometimes, and 3% reported usually/always.

(Source: National Survey of Children's Health, Data Resource Center)

Extracurricular Activities

The following graph shows the percent of children in Geauga County, Ohio, and U.S. children that participate in at least one or more extracurricular activities and those that do not participate in any. Geauga County has fewer participants than the U.S. and Ohio.



(Source: Nation Survey of Children's Health, Data Resource Center)

Middle Childhood (6-11 years old)

MySpace and Facebook

- ❖ 55% of teens have profiles on a social networking website. Of 10-17 years old with social profiles, 34% posted their real names, telephone numbers, home addresses, or the names of their schools. 45% had posted their date of birth or ages, and 18% had posted pictures of themselves.
- ❖ When signing up for MySpace, you are asked for your date of birth, if you are not over the age of 13 it will come up and say “We’re sorry. Based on the information you have submitted to us, you are ineligible to register on MySpace.” Also, when you click “signup free” you are agreeing to the Terms of Use, which under the first section states “By using the MySpace Services, you represent and warrant that ... you are 13 years of age or older... Your profile may be deleted and your Membership may be terminated without warning, if we believe that you are under 13 years of age...”
- ❖ Facebook will also asks for your date of birth, if you are not over the age of 13 it will come up and say “Sorry, you are ineligible to sign up for Facebook.” Also when you click “sign up” you are agreeing that you have read and agree to the Terms of Use, which under section 4 states “You will not use Facebook if you are under 13.”

(Source: U.S. Department of Education, Facebook, MySpace)

Family Functioning, Neighborhood & Community Characteristics

Key Findings

In 2011, 39% of Geauga County parents reported they read to their child every day or almost every day. 99% of parents reported their neighborhood was always or usually safe.

Family Functioning

- ◆ 6% of parents reported that they were very concerned about the relationship with their child and 81% reported they were not concerned at all.
- ◆ Geauga County parents reported they were coping with the following day-to-day demands of parenthood: demands of multiple children (47%), financial burdens (26%), loss of freedom (7%), being a single parent (6%), child has special needs (6%), difficulty with lifestyle changes (4%), postpartum depression (<1%), alcohol and/or drug abuse (<1%), and other (10%).
- ◆ Parents felt they were coping with the day-to-day demands of parenthood: very well (56%), somewhat well (42%), and not very well (2%).
- ◆ Parents reported they read to their child: every day (20%), almost every day (19%), a few times a week (20%), a few times a month (8%) and a few times a year (1%). 28% reported their child reads to him/herself.
- ◆ 2% of parents reported their child went to bed hungry at least one day per week because they did not have enough food. 2% also reported their child went to bed hungry every night.
- ◆ 37% of parents reported that every family member that lived in their household ate a meal together every day of the week. The average number of meals eaten together per week was 5.4.
- ◆ Parents reported the average number of times their child attended religious services was 2.7 times per month. 49% of parents reported their child attended religious service at least once per month and 29% reported at least once per week. 22% reported their child has never attended a religious service.
- ◆ Parents or family members take their children on any kind of outing, such as to the park, library, zoo, shopping, church, restaurants, or family gatherings an average of 3.3 times per week.
- ◆ Parents reported they felt their child did things that really bothered them a lot during the past month: always or usually (2%), sometimes (54%), and never (41%).
- ◆ Parents reported they felt their child was much harder to care for than most children his/her age during the past month: always or usually (4%), sometimes (20%), and never (76%).
- ◆ Parents used the following forms of discipline with their child: took away privileges (73%), time out (55%), yelling (38%), spanking (29%), grounding (24%), washing mouth out (3%), and other (9%). 3% reported their child had never been disciplined.
- ◆ Parents reported the average time their child woke up was 7:00 a.m. and the average time they went to bed was 8:44 p.m. The average child slept 10.2 hours at night. 2007 NSCH results showed 71% of Ohio and 72% of U.S. children ages 6-11 got enough sleep in the past week.

National Survey of Children's Health, 2007

- ◆ 55% of Ohio and 58% of U.S. parents of 0-5 year olds reported their family ate a meal together every night of the week.
- ◆ 37% of 0-5 year old and 34% of 6-11 year old Ohio children lived in a household with someone who smokes.

(Source: National Survey of Children's Health, 2007 <http://nscbdata.org>)

Neighborhood and Community Characteristics

- ◆ Parents reported their neighborhood was: always safe (66%), usually safe (33%), sometimes safe (1%) and never safe (1%). 52% of those with incomes less than \$25,000 reported their neighborhood as always safe, as compared to 67% of those with higher incomes.

Family Functioning, Neighborhood & Community Characteristics

- ◆ Parents reported there are people in their neighborhood who might be a bad influence on their child because of: loud/disrespectful noise levels (4%), drugs/alcohol activity (2%), bullying (2%), crime (1%), and other reasons (6%).
- ◆ 58% of parents have talked to their child about what to do if he/she finds a gun. 22% said they had not talked to their child but planned to, and 19% said they had not talked to their child because he/she is not old enough.
- ◆ Geauga County parents had the following rules about smoking in their home: no one is allowed to smoke inside their home at any time (82%), smoking is not allowed when children are present (9%), smoking is allowed in some rooms only (7%), and smoking is allowed anywhere (4%).
- ◆ Geauga County parents had the following rules about smoking in their car: no one is allowed to smoke inside their car at any time (63%), smoking is not allowed when children are present (6%), smoking is allowed as long as a window is open (2%) and smoking is allowed anywhere (<1%).
- ◆ Parents reported getting their drinking water from the following: well water (63%), bottled water and well water (15%), bottled water (12%), city water (6%), bottled and city water (3%), and a cistern (1%).
- ◆ 81% of parents reported the primary language spoken in their home was English and <1% reported Spanish. 10% reported German, and 6% reported another language.

Child Comparisons	Gauga County 2011 0-5 Years	Ohio 2007 0-5 Years	U.S. 2007 0-5 Years	Gauga County 2011 6-11 Years	Ohio 2007 6-11 Years	U.S. 2007 6-11 Years
Family eat a meal together every day of the week	38%	55%	58%	15%	40%	47%
Child never attends religious services	27%	35%	32%	18%	14%	15%
Neighborhood is usually or always safe	99%	88%	85%	98%	84%	86%

Child and Parent Relationships

- ❖ 70% of U.S. children ages 6-17 have parents with whom they can share ideas very well or talk with them about things that matter.
- ❖ 60% of U.S. parents of children ages 0-17 are coping very well with the demands of parenting.
- ❖ 87% of U.S. parents of children ages 0-17 have someone to go to for emotional help with parenting.
- ❖ 10 % of U.S. children live with parents who experience high levels of stress from parenting. High stress is reported more often by the parents of children living in single-mother households. Also, children with special health care needs have parents who are twice as likely to report high levels of stress.

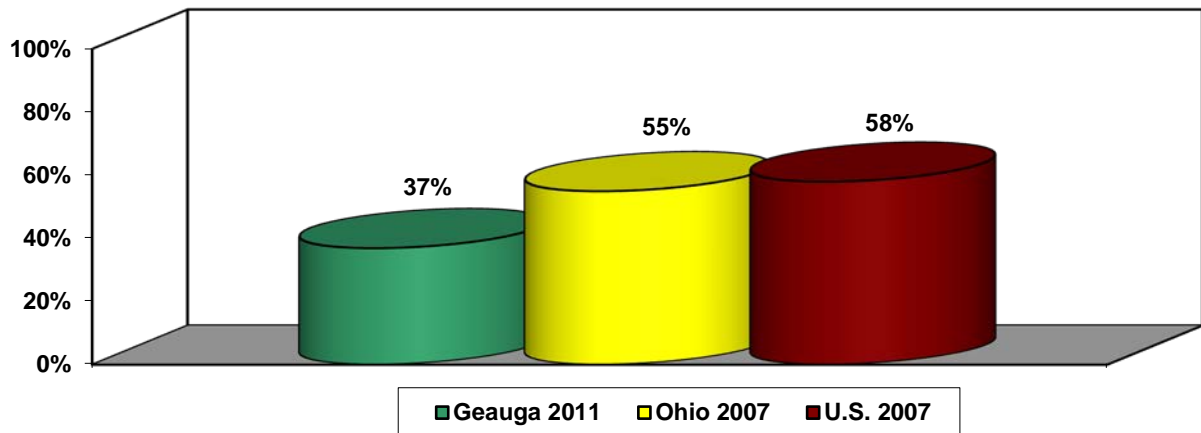
(Source: childhealthdata.org, Data Resource Center for Child & Adolescent Health)

Family Functioning, Neighborhood & Community Characteristics

Family Dinners

The following graph shows the percent of Geauga County families that eat a meal together everyday of the week along with the percent of Ohio families and the percent of U.S. families. U.S. families as a whole have the largest percent, followed closely by Ohio families. Geauga County families have the lowest percent for eating a meal together everyday of the week.

Families that Eat Together Every Day of the Week



(Source: National Survey of Children's Health, Data Resource Center)

Families that Read to Children Everyday

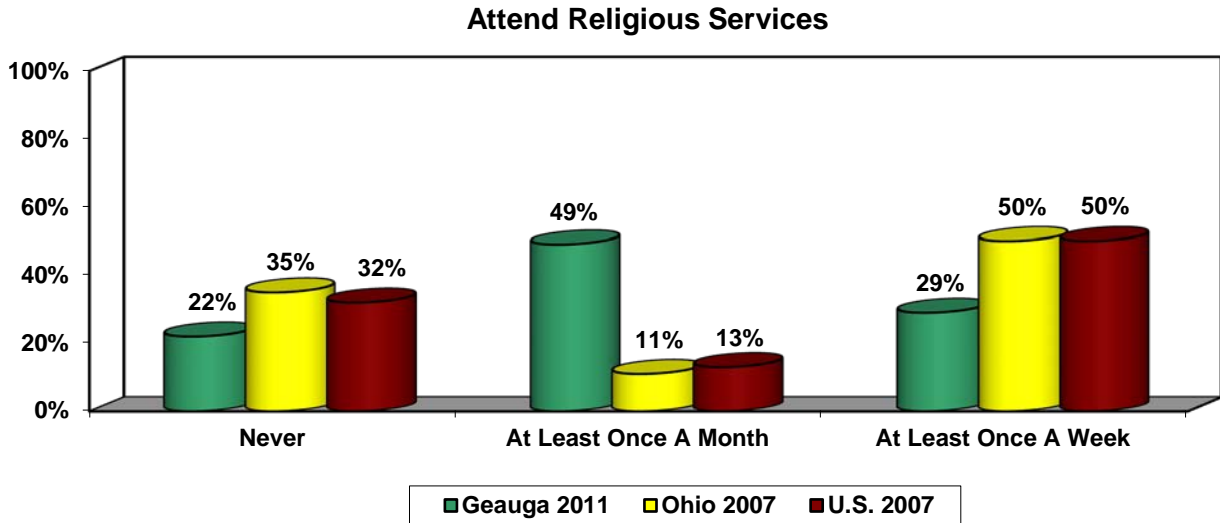
- ❖ 55% of children ages 3-5 in the United States get read to everyday by a family member.
- ❖ Race affects the percent that read to their child everyday: 67% for White, non-Hispanic, 60% for Asian and Pacific Islander, non-Hispanic, 37% for Hispanic and 35% for Black, non-Hispanic.
- ❖ The parents' marital status also has a large effect. Two parent families that are married have 61.9%, while two parent families that are unmarried is 24%. One parent families have 43%.
- ❖ Mothers that have a bachelor's degree or higher are more likely to read to their children than mothers with any other amount of education.
- ❖ Children that have mothers that work less than 35 hours a week are the most likely to get read to everyday (63%). While mothers that are not in the labor force are the next with 58%. 51% of mothers that work more than 35 hours per week, and mothers that are looking for work have the lowest percentage for reading to their children everyday with only 40%.

(Source: Forum on Child and Family Statistics <http://childstats.gov>)

Family Functioning, Neighborhood & Community Characteristics

Religious Service Attendance

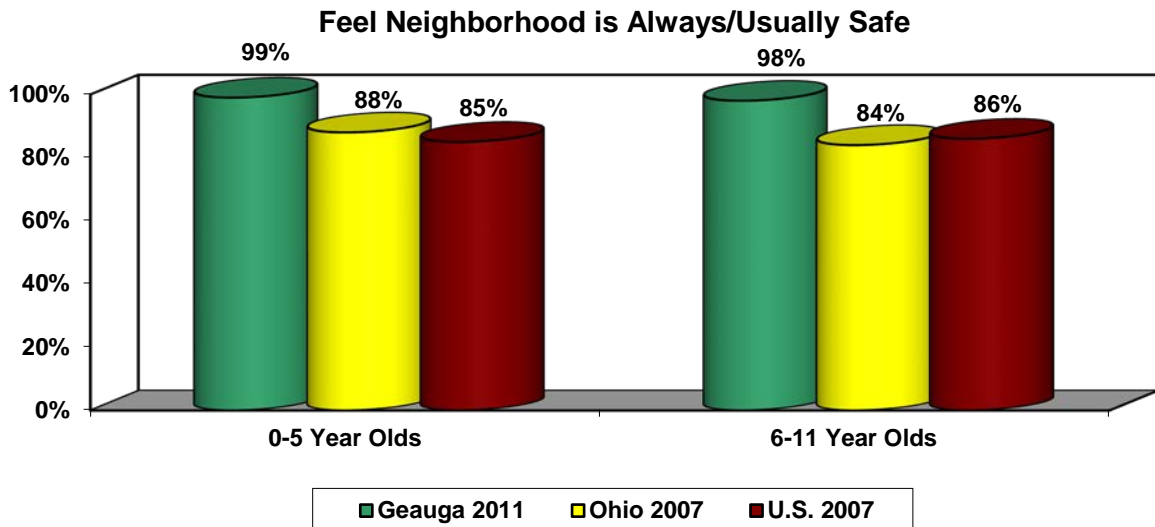
The following chart shows the percent of Geauga County, Ohio, and U.S. children that attend religious services at least once a week, once a month, and those that have never attended a religious service or do not attend religious services. Geauga County has a much larger percent that attends religious services at least once a month than both Ohio and the U.S., and a smaller percent that attends religious services at least once a week.



(Source: National Survey of Children's Health, Data Resource Center)

Neighborhood Safety

The following graph shows the percent of Geauga County, Ohio, and U.S. parents that feel their neighborhood is always or usually safe. Geauga County had a larger portion of parents of children ages 0-5 and 6-11 that feel their neighborhood is always/usually safe, as compared to Ohio and U.S. Ohio has a larger percent of parents who feel their neighborhood is always/usually safe for children ages 0-5 than all parents in the U.S., but a smaller percent of Ohio parents feel their neighborhood is always/usually safe for children ages 6-11 than U.S. parents of children ages 6-11.



(Source: National Survey of Children's Health, Data Resource Center)

Family Functioning, Neighborhood & Community Characteristics

Smoke Alarms

- ❖ 96% of American homes have at least one smoke alarm; however, no smoke alarms were present or non-operated in 41% of the reported fires between 2003 and 2006.
- ❖ In fires considered large enough to activate the alarm, hardwired smoke alarms operated 91% of the time, while battery-powered smoke alarms operated in 75%.
- ❖ Over half of the reasons that a smoke alarm failed to go off for fires between 2003 and 2006 was because the battery was disconnected or missing. 22% failed because the battery was dead, and only 8% failed because the hardwired power failed, shut-off or was disconnected.

(Source: National Fire Protection Association www.nfpa.org)

Firearm Safety

- ❖ In 2004, 2% of children that died as a result of a home injury were killed by unintentional shootings in the home. 75% of these children were between the ages 5 and 14.

(Source: Safe Kids USA www.safekids.org)

Children and Smoking

- ❖ 63% of Ohio children ages 0-5 do not have anyone that smokes in their household. 27% has someone in their household that smokes, but does not smoke inside the child's house. 10% have someone that smokes in their household and smokes inside the child's house.
- ❖ 66% of Ohio children ages 6-11 do not have anyone that smokes in their household. 18% have someone that smokes in their household, but doesn't smoke inside the child's home. 16% have someone that smokes in the household, and smokes inside the home of the child.
- ❖ For U.S. children ages 0-5, 74% have no one that smokes in their household. 21% have someone that smokes in their household, but does not smoke inside the house. 5% have someone that smokes in the household, and smokes inside the child's home
- ❖ For U.S. children ages 6-11, 75% have no one that smokes in their household. 18% have someone that smokes in their household, but does not smoke inside the house. 8% have someone that smokes in the household, and smokes inside the child's house.

(Source: National Survey of Children's Health, Data Resource Center)

Smoking Rules

- ❖ 30% of people that live in households with no smoking rules have smoked at some point in their lives. While for people that have some smoking rules in their household 24% have smoked at some point in their lives. For people that live in houses where no smoking was allowed at all only 12% have smoked at some point.
- ❖ 27% of people that live in households without smoking rules currently smoke. 19% of people that live in houses with some smoking rules currently smoke. While only 9% of people that live in houses where smoking is not allowed currently smoke.

*(Source: CDC, *Impact of Home Smoking Rules on Smoking Patterns Among Adolescents and Young Adult*, http://www.cdc.gov/pcd/issues/2006/apr/05_0028.htm)*

Parent Health

Key Findings

In 2011, 29% of Geauga County parents were overweight and 26% were obese. Parents missed work an average of 1.4 days per year due to their child being ill or injured.

Parent Health

- ◆ Those filling out the survey had the following relationship to the child: mother (80%), father (19%), grandparent (<1%) and other family member (<1%).
- ◆ More than four-fifths (81%) of parents rated their health as excellent or very good, decreasing to 61% of parents with incomes less than \$25,000. 3% of parents had rated their health as fair or poor.
- ◆ 73% of parents rated their mental and emotional health as excellent or very good.
- ◆ 5% of parents of 0-5 year olds rated their mental and emotional health as fair or poor. 4% of parents of 6-11 year olds rated their mental and emotional health as fair or poor.
- ◆ 10% of parents were physically active for at least 30 minutes every day of the week. 59% were physically active 3 or more days a week, and 25% were not physically active at all, including 2% who were unable to exercise.
- ◆ 55% of parents were either overweight (29%) or obese (26%). 43% were normal weight, and 2% were underweight.
- ◆ Parents missed work an average of 1.4 days per year due to their child being ill or injured, 0.7 days per year due to their child's medical appointments, 0.1 days per year due to their child's behavioral or emotional problems, and 0.1 days due to child's asthma.

National Survey of Children's Health, 2007

- ◆ 22% of mothers of 0-5 year olds and 15% of mothers of 6-11 year olds in Ohio were sedentary (not exercising in the past week).
- ◆ 22% of fathers of 0-5 year olds and 13% of fathers of 6-11 year olds in Ohio were sedentary (not exercising in the past week).

(Source: National Survey of Children's Health, 2007 [http:// nschdata.org](http://nschdata.org))

Child Comparisons	Gauga County 2011 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Gauga County 2011 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
Mother's mental or emotional health is fair/poor	2%	5%	6%	5%	8%	8%
Father's mental or emotional health is fair/poor	13%	5%	4%	2%	5%	5%

Parent Health

Parent's Health

- ❖ 57% of children have mothers who are in excellent or very good physical and mental health (of children with a living mother in their household). Children with special health care needs are less likely to have mothers who are in excellent or very good health (48% vs. 59% for children without special health care needs).
- ❖ 63% of children have fathers who are in excellent or very good physical and mental health (of children with a living father in their household). Children with special health care needs are less likely to have fathers who are in excellent or very good health (58% vs. 64% for children without special health care needs).
- ❖ A child who lives with a mother or father who exercises for at least 20 minutes on four or more days per week is more likely to also exercise at least four days per week. Of children who live with their mothers, 33% have mothers who exercise four or more days per week. Of children who live with their fathers, 45% have fathers who exercise four or more days per week.
- ❖ Higher household income increases the likelihood that a child will exercise regularly. For children living with their mother that does not exercise four or more days a week and that are between 0-99% FPL, 46% exercise regularly, while for children living with their mother that does no exercise four or more days a week and are 400% FPL, 66% exercise regularly. For children between 0-99% FPL and have mothers that exercise regularly 69% also exercise regularly, and for children at 400% FPL and have mothers that exercise regularly 80% also exercise regularly.

(Source: childhealthdata.org, Data Resource Center for Child & Adolescent Health)

Kent State University- Geauga Campus Data

Key Findings

In 2011, 147 students at Kent State University (KSU) - Geauga Campus were surveyed on campus using a convenience sample. Data should be used with caution as data is not generalizable to all KSU students. 15% of students were uninsured. 43% were overweight or obese. 15% of students had driven after having perhaps too much to drink in the past month. 32% of students were current smokers. 26% had used illegal drugs in the past month and 19% misused medications. 31% of students had multiple sex partners in the past year. 7% of students considered attempting suicide and 1% attempted suicide. 28% of students needed help meeting their general daily needs.

College Age Students' Mental Health

- ❖ In the spring of 2011, 21% of U.S. college students felt that things were hopeless in the past year and 9% indicated in the past month.
- ❖ 19% of college students reported feeling overwhelmed by all they had to do in the past year and 51% felt that way in the past two weeks.
- ❖ College students reported the following feelings in the past year: very sad (25%), overwhelming anxiety (20%), overwhelming anger (18%), and exhausted (not from physical activity) (16%).

(Source: American College Health Association, National College Health Assessment Reference Group Report, spring 2011, Obtained from: http://www.acha-ncha.org/docs/ACHA-NCHA-II_ReferenceGroup_DataReport_Spring2011.pdf)

KSU Students' Health Care Access, Coverage, and Utilization

- ◆ In 2011, 147 students at Kent State University (KSU) - Geauga Campus were surveyed on campus using a convenience sample. Data should be used with caution as data is not generalizable to all KSU students.
- ◆ 70% of students rated their health as excellent or very good. 9% rated their health as fair or poor.
- ◆ 23% of students reported their physical health was not good on four or more days in the past month and 39% rated their mental health as not good on four or more days in the past month.
- ◆ 51% of students had one person they think of as their personal doctor or healthcare provider.
- ◆ 40% of students reported cost would prevent them from seeing a doctor if they were sick, injured or needed advice about health. 22% said the hours were not convenient.
- ◆ 84% of students did not have any transportation issues when they needed health care services. 11% of students reported they could not afford gas.
- ◆ 63% of students stayed in Geauga County for their health care services.
- ◆ 15% of students were uninsured. 13% of students used Medicaid or Medical Assistance.
- ◆ 25% of students reported there was a time in the past year when they needed to see a doctor but could not because of cost.
- ◆ 70% of students had all of their prescriptions filled in the past year.
- ◆ When they were sick or needed advice about health, 61% of students went to a doctor's office, 7% used an urgent care center, 3% used a public health or community health clinic, and 1% used the hospital ER.
- ◆ 70% of students visited a dentist or dental clinic in the past year.

KSU Students' Chronic Disease & Prevention

- ◆ In 2011, Students had been told by a doctor or other health professional that they had the following: asthma (15%), arthritis (14%), high blood pressure (7%), high blood cholesterol (7%), diabetes (6%), fibromyalgia (5%), angina or coronary heart disease (1%), and a heart attack (1%).
- ◆ 71% of students had their vision checked in the past two years and 30% had their hearing checked.
- ◆ 38% of student had a flu shot in the past year.
- ◆ 6% of students had been diagnosed with cancer at some time in their life.
- ◆ 54% of female students had a clinical breast exam and 46% had a Pap smear in the past year.
- ◆ 66% of female students went to a private gynecologist for their female health concerns. 18% went to a general or family physician.

Kent State University- Geauga Campus Data

KSU Students' Chronic Disease & Prevention (cont'd)

- ◆ 43% of students were overweight (21%) or obese (22%).
- ◆ 55% of students were trying to lose weight. 55% of students were eating better, 50% were eating a low-carb diet, 10% vomited or used laxatives, 6% exercised, 3% smoked cigarettes, 3% went without eating for 24 or more hours, 2% used a weight loss program, and 1% took diet pills to try to lose weight.
- ◆ 42% of students exercised for 30 minutes on 3 or more days in the past week. 29% of students did not exercise at all in the past week.
- ◆ On an average day, students spend 3.9 hours on the computer outside of work, 3.4 hours watching TV, and 1.8 hours playing video games.
- ◆ Students ate out in a restaurant or brought takeout food home an average of 2.2 times per week.
- ◆ 46% of students took vitamin pills or supplements.
- ◆ 71% of students read food labels or consider nutritional content when choosing foods they eat.
- ◆ 9% of students eat 5 or more fruits and vegetables per day. 86% ate 1-4 servings per day.

KSU Students' Risky Behaviors

- ◆ In 2011, 73% of students had at least one drink of alcohol. 6% drank on three or more days per week.
- ◆ Students drank an average of 3.4 drinks per occasion.
- ◆ 49% of those who had drunk, had at least one episode of binge drinking in the past month.
- ◆ 15% of students had driven after perhaps having too much to drink in the past month.
- ◆ 6% of students had used a program or service to help with alcohol and other drug problems.
- ◆ 32% of students were current smokers.
- ◆ Of those who smoked, 59% had tried to quit smoking in the past year.
- ◆ Students reported using the following tobacco products: flavored cigarettes (26%), hookah (15%), black and milds (13%), e-cigarettes (10%), cigars (10%), swishers (9%), cigarillos (6%), chewing tobacco (5%), little cigars (4%), snus (4%), snuff (1%).
- ◆ 26% of students had used illegal drugs in the past six months. Students used the following: marijuana or hashish (25%), LSD (5%), ecstasy (3%), methamphetamines (3%), cocaine (1%), and heroin (1%).
- ◆ 19% of students misused prescription medication in the past six months. Students used the following: Vicodin (8%), tranquilizers (8%), Ritalin (6%), Oxycontin (3%), Codeine (2%), and Suboxone (1%).
- ◆ 88% of students had sexual intercourse in the past year. 31% had two or more partners.
- ◆ 38% of students had been tested for HIV at some time in their life.
- ◆ Due to what they know about HIV and STDs, students made the following sexual behavior changes: have sex with only one partner (41%), always use condoms (30%), and decreased the number of sexual partners or became abstinent (19%).
- ◆ Students were diagnosed with the following: HPV (6%), Chlamydia (3%), and Genital Herpes (1%).

Tobacco Use among College Students

- ◆ Tobacco use is common among college students nationwide and is not limited to cigarettes.
- ◆ The most common reasons college students reported for smoking were stress, less supervision, having more free time, and the number of friends who smoke.
- ◆ College students (full-time or part-time) were less likely to be regular cigarette smokers than their peers not enrolled in school.

(Source: Substance Abuse and Mental Health Services Administration, Office of Applied Studies, "Tobacco Use in America", obtained from: <http://www.oas.samhsa.gov/NHSDA/tobacco/chapter6.htm>)

Kent State University- Geauga Campus Data

KSU Students' Quality of Life

- ◆ In 2011, 22% of students reported they felt sad or hopeless almost every day two weeks or more in a row that they stopped doing usual activities.
- ◆ 7% of students had considered attempting suicide. 1% had attempted suicide.
- ◆ 84% of students reported they were satisfied or very satisfied with their life.
- ◆ 27% of students rated their stress level as high or very high.
- ◆ Students had been diagnosed or treated for the following: an anxiety disorder (10%), a mood disorder (9%), and other mental health disorder (3%).
- ◆ 16% of students were limited in some way because of a physical, mental, or emotional problem.
- ◆ Students would have a problem getting the following if they needed it today: someone to help pay for medical expenses (18%), back-up child care (11%), someone to loan them \$50 (12%), someone to talk to about problems (7%), someone to help them if they were sick (6%), and someone to take them to the doctor (3%).
- ◆ 55% of students had firearms in or around their home. 5% reported it was unlocked and loaded.
- ◆ 28% of students have needed help meeting their general daily needs such as food, clothing, shelter, or paying utility bills.
- ◆ 16% of students were concerned about having enough food for themselves or their family.
- ◆ 76% of students always wear a seatbelt when in a car.
- ◆ 12% of students had been threatened to be abused in the past year and 16% of students reported they had been abused in the past year.
- ◆ In the past year, students had sought assistance for: food (19%), utilities (15%), rent/mortgage (13%), transportation (4%), free tax preparation (2%), clothing (1%), and credit counseling (1%).
- ◆ Students had the following disaster preparedness supplies: a cell phone (88%), a working flashlight and working batteries (81%), a working battery operated radio and batteries (49%), a 3-day supply of non-perishable food (46%), a 3-day supply of prescription medication for each person who takes prescribed medications (30%), a 3-day supply of water for everyone who lives there (1 gallon per person per day) (29%).

Annual High-Risk College Drinking Consequences in the U.S.

- ❖ 1,825 college students (aged 18-24) die each year from alcohol-related unintentional injuries, such as motor vehicle crashes.
- ❖ 3,360,000 college students drive under the influence of alcohol each year.
- ❖ 599,000 students (aged 18-24) were unintentionally injured under the influence of alcohol in the past year.
- ❖ 696,000 students are assaulted by another student who has been drinking alcohol.
- ❖ 97,000 students are victims of alcohol-related sexual assault or date rape.
- ❖ There were 400,000 students that reported having unprotected sex while under the influence of alcohol and 100,000 reported having been too intoxicated to know if they consented to having sex.
- ❖ One quarter of college students reported academic consequences from their drinking, such as missing class, falling behind, doing poorly on exams or papers, and receiving lower grades overall.
- ❖ Drinking or drug use attributed between 1.2% and 1.5% of the college students who reported attempting suicide in the past year.
- ❖ 5% of four year college students are involved with the police or campus security as a result of their drinking and 110,000 students are arrested for alcohol-related violations, for example, public intoxication or driving under the influence.
- ❖ In the past year, 31% of college students met criteria for a diagnosis of alcohol abuse and 6% for a diagnosis of alcohol dependence.

(Source: National Institute on Alcohol Abuse and Alcoholism, "A Snapshot of Annual High-Risk College Drinking Consequences", Obtained from: <http://www.collegedrinkingprevention.gov/StatsSummaries/snapshot.aspx>)

Geauga County Health Assessment Information Sources

Source	Data Used	Website
American Cancer Society, Cancer Facts and Figures 2011. Atlanta: ACS, 2011	<ul style="list-style-type: none"> ◆ 2011 Cancer facts, figures, and estimates ◆ 2009 Cancer rates ◆ ACS cancer detection guidelines ◆ Cancer risk factors ◆ Nutrition recommendations ◆ Screening recommendations ◆ Tobacco Use and Health 	www.cancer.org
American College Health Association, National College Health Assessment Reference Group Report Spring 2011	<ul style="list-style-type: none"> ◆ College Age Mental Health Statistics 	http://www.achancha.org/docs/ACHA-NCHA-II_ReferenceGroup_DataReport_Spring2011.pdf
American Diabetes Association	<ul style="list-style-type: none"> ◆ All about Diabetes: Type 2 Diabetes ◆ Diabetes Complications ◆ Diabetes Care: Screening Standards ◆ Risk factors for diabetes 	www.diabetes.org
American Foundation for Suicide Prevention, 2011	<ul style="list-style-type: none"> ◆ Warning Signs of Suicide 	http://www.afsp.org/index.cfm?page_id=0519EC1A-D73A-8D90-7D2E9E2456182D66
American Heart Association. <i>Risk Factors for Coronary Heart Disease, 2011.</i>	<ul style="list-style-type: none"> ◆ Risk Factors for Cardiovascular Disease That Can Be Modified or Treated 	www.americanheart.org
American Pregnancy Association, Overview: Birth Control Methods	<ul style="list-style-type: none"> ◆ Types of Contraception 	http://www.americanpregnancy.org/preventingpregnancy/overviewtypesbirthcontrol.html
American Psychiatric Association Let's Talk Facts About Teen Suicide	<ul style="list-style-type: none"> ◆ Teen suicide signals 	www.psych.org/public_info/teen.cfm
Annals of Emergency Medicine, v. 57, issue 6, 2011, p. 691	<ul style="list-style-type: none"> ◆ Firearm Injury Prevention 	http://journals.ohiolink.edu/ejc/pdf.cgi/EJC_Article.pdf?issn=01960644&issue=v57i0006&article=691_fip
<i>Arthritis at a Glance, 2011</i> , Centers for Disease Control & Prevention, <i>Morbidity and Mortality Weekly Report 2010; 59(39):999-1003</i>	<ul style="list-style-type: none"> ◆ What Can Be Done to Target Arthritis? ◆ Arthritis statistics 	http://www.cdc.gov/chronicdisease/resources/publications/AAG/arthritis.htm
Behavioral Risk Factor Surveillance System (BRFSS), National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	<ul style="list-style-type: none"> ◆ 2009 - 2010 adult Ohio and U.S. correlating statistics 	www.cdc.gov
CDC, Healthy Communities Program, 2011	<ul style="list-style-type: none"> ◆ Tools for Community Action 	http://www.cdc.gov/healthycommunitiesprogram/tools/index.htm
CDC, National Center for Environmental Health	<ul style="list-style-type: none"> ◆ Facts about <i>Stachybotrys chartarum</i> and Other Molds 	http://www.cdc.gov/mold/stachy.htm

Geauga County Health Assessment Information Sources

Source	Data Used	Website
CDC, National Center for Injury Prevention and Control, 2011	◆ Suicide Risk and Protective Factors	http://www.cdc.gov/ViolencePrevention/suicide/riskprotectivefactors.html
CDC, Physical Activity for Everyone	◆ Physical activity recommendations	http://www.cdc.gov/physicalactivity/everyone/guidelines/adults.html
CDC, Preventing Chronic Disease, Impact of Home Smoking Patterns Among Adolescents and Young Adults	◆ Smoking Rules	http://www.cdc.gov/pd/issues/2006/apr/05_0028.htm
CDC, Sexually Transmitted Diseases Surveillance, 2010	◆ U.S. Chlamydia and Gonorrhea rates	http://www.cdc.gov/std/stats09/adol.htm#foot1
CDC, Stigma of Mental Illness, 2011	◆ Stigma of mental illness, based on 2007 BRFSS data	http://www.cdc.gov/mentalhealth/data_stats/mental-illness.htm
CDC, Youth Violence & Suicide Prevention	◆ Youth Violence Fact Sheet, 2010	http://www.cdc.gov/nccipc/dvp/dvp.htm
Data Resource Center for Child & Adolescent Health	◆ Child and parent relationships	childhealthdata.org
FASTATS A to Z, U.S. Department of Health & Human Services, Centers for Disease Control & Prevention, National Center for Health Statistics, Division of Data Services	◆ U.S. mortality statistics ◆ U.S. predictors of access to health care ◆ U.S. birth rates	www.cdc.gov/nchs/fastats
Federal Emergency Management Agency, (FEMA), Ready: Prepare. Plan. Stay Informed.	◆ Emergency Supply List	http://www.ready.gov/america/_downloads/checklist3.pdf
Forum on Child and Family Statistics	◆ Families that read to children everyday	http://childstats.gov
Healthy People 2020: Data 2020, U.S. Department of Health & Human Services	◆ All Healthy People 2020 target data points ◆ Some U.S. baseline statistics	www.health.gov/healthypeople
Mayo Foundation for Medical Education and Research, 2011	◆ Risk Factors for Contracting Sexually Transmitted Diseases/Infections	http://www.mayoclinic.com/health/sexually-transmitted-diseases-stds/DS01123
National Asthma Control Program, CDC, <i>Strategies for Addressing Asthma within a Coordinated School Health Program, 2006</i>	◆ Asthma Control	http://www.cdc.gov/asthma/default.htm
The National Campaign	◆ Facts about “Sexting”	http://www.thenationalcampaign.org/sextech/PDF/SexTech_PressReleaseFIN.pdf , 2011

Geauga County Health Assessment Information Sources

Source	Data Used	Website
National Center for Chronic Disease Prevention and Health Promotion, CDC	<ul style="list-style-type: none"> ◆ Alcohol and public health ◆ Arthritis ◆ BMI definition ◆ Binge Drinking Dangers ◆ Facts on Smoking and Tobacco Use ◆ Men's and Women's Health ◆ Nutrition and physical activity ◆ Preventing seasonal flu ◆ Type 2 diabetes ◆ US alcohol-related motor vehicle crashes and intentional injury stats ◆ Ways to have safer sex 	http://www.cdc.gov/
National Center for Environmental Health, CDC, 2011	<ul style="list-style-type: none"> ◆ Asthma Triggers 	http://www.cdc.gov/nceh/
National Fire Protection Association	<ul style="list-style-type: none"> ◆ Smoke alarms 	www.nfpa.org
National Heart, Lung, and Blood Institute, 2011	<ul style="list-style-type: none"> ◆ Chronic respiratory conditions 	http://www.nhlbi.nih.gov/
National Highway Traffic and Safety Administration	<ul style="list-style-type: none"> ◆ Fatal crashes involving cell phones 	nhtsa.gov
National Institute on Alcohol Abuse and Alcoholism	<ul style="list-style-type: none"> ◆ Annual High-Risk College Drinking Consequences 	http://www.collegedrinkingprevention.gov/StatsSummaries/snapshot.aspx
National Institute on Drug Abuse	<ul style="list-style-type: none"> ◆ Commonly Abused Prescription Drugs 	www.nida.nih.gov
National Institutes of Health	<ul style="list-style-type: none"> ◆ Facts about Underage Drinking 	http://report.nih.gov/NIHfactsheets/ViewFactSheet.aspx?csid=21&key=U#U; Updated 2/14/11
National Institutes of Health, National Institute of Arthritis and Musculoskeletal and Skin Diseases	<ul style="list-style-type: none"> ◆ Preventing Back Pain 	http://www.niams.nih.gov/Health_Info/Back_Pain/back_pain_ff.asp
National Osteoporosis Foundation	<ul style="list-style-type: none"> ◆ Risk factors for osteoporosis 	http://www.nof.org/
National Safety Council	<ul style="list-style-type: none"> ◆ Distracted Driving ◆ Texting while Driving 	http://www.nsc.org/safety_road/Distracted_Driving/Pages/distracted_driving.aspx
National Survey of Children's Health, 2007	<ul style="list-style-type: none"> ◆ Neighborhood Characteristics ◆ Religious Services ◆ Family Functioning ◆ Children and smoking 	http://nschdata.org

Geauga County Health Assessment Information Sources

Source	Data Used	Website
Ohio Department of Health, Information Warehouse	<ul style="list-style-type: none"> ◆ Geauga County and Ohio birth statistics ◆ Geauga County diabetes facts ◆ Geauga County and Ohio mortality statistics ◆ Geauga County and Ohio sexually transmitted diseases ◆ Birth Statistics ◆ Statistics for access to health services 	www.odh.state.oh.us
Ohio Department of Health, Ohio Cancer Incidence Surveillance System	<ul style="list-style-type: none"> ◆ Geauga County and Ohio cancer mortality ◆ Geauga County and Ohio cancer incidence 	http://www.odh.ohio.gov/healthstats/ociss/s/newrpts1.aspx
Ohio Department of Health, Office of Healthy Ohio, Tobacco Use Prevention and Cessation Program	<ul style="list-style-type: none"> ◆ 2008 Ohio Youth Tobacco Survey 	http://www.odh.ohio.gov/ASSETS/9FD3BA6D31C14EA4AFD0E0A55E5B0F68/yts08w.pdf
Ohio Department of Health, Ohio Oral Health Surveillance System	<ul style="list-style-type: none"> ◆ Geauga County oral health resources 	http://publicapps.odh.ohio.gov/oralhealth/default.aspx
Ohio Department of Health, STD Surveillance	<ul style="list-style-type: none"> ◆ Ohio and Geauga County Chlamydia and Gonorrhea rates 	http://www.odh.ohio.gov/healthStats/disease/std/std1.aspx
Ohio Department of Job & Family Services	<ul style="list-style-type: none"> ◆ Poverty statistics ◆ Geauga County and Ohio Medicaid statistics, SFY 2007-2009 ◆ Geauga County health care statistics 	http://jfs.ohio.gov/
Ohio Department of Job & Family Services	<ul style="list-style-type: none"> ◆ Geauga Labor Market Information 	http://ohiolmi.com/
Ohio Department of Public Safety	<ul style="list-style-type: none"> ◆ 2010 Traffic Crash Facts ◆ Geauga County and Ohio crash facts 	www.state.oh.us/odps
Ohio Family Health Survey Results, 2010	<ul style="list-style-type: none"> ◆ Ohio and Geauga uninsured statistics 	http://grc.osu.edu/ofhs/reports/ofhsmaspofohio/index.cfm
Safe Kids USA	<ul style="list-style-type: none"> ◆ Firearm safety 	www.safekids.org
U. S. Department of Agriculture	<ul style="list-style-type: none"> ◆ Food Security in the U.S., 2010 	http://www.usda.gov/wps/portal/usdahome
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> ◆ American Community Survey, 5 year poverty estimates. 2006-2010 ◆ Federal Poverty Thresholds ◆ Ohio and U.S. health insurance sources ◆ Small Area Income and Poverty Estimates 	www.census.gov
U. S. Department of Health and Human Services, SAMHSA, NSDUH	<ul style="list-style-type: none"> ◆ National Survey on Drug Use and Health ◆ U.S Youth Perception of Risk ◆ Tobacco Use among College Students 	http://www.oas.samhsa.gov/NSDUH/2k7NSDUH/2k7results.cfm

List of Acronyms and Terms

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.
Binge drinking	Consumption of five alcoholic beverages or more on one occasion (for males) or four alcoholic beverages or more for females.
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.
Crude Mortality Rates	Number of deaths/estimated mid-year population times 100,000.
HCF	Healthy Communities Foundation of the Hospital Council of Northwest Ohio.
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
KSU	Kent State University-Geauga Campus
N/A	Data not available.
ODH	Ohio Department of Health

List of Acronyms and Terms

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 2000 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported, “White alone” or “Black alone”, means the respondents reported only one race.
Weapon	Defined in the YRBSS as “a weapon such as a gun, knife, or club”
Youth	Defined as 12 through 18 years of age
YPLL/65	Years of Potential Life Lost before age 65. Indicator of premature death.
Youth BMI Classifications	Underweight is defined as BMI-for-age $\leq 5^{\text{th}}$ percentile. Overweight is defined as BMI-for-age 85^{th} percentile to $< 95^{\text{th}}$ percentile. Obese is defined as $\geq 95^{\text{th}}$ percentile.
YRBSS	Youth Risk Behavior Surveillance System , a youth survey conducted by the CDC

Methods for Weighting the 2011 Geauga County 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 2011 Geauga County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Geauga 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 (7 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Geauga 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 2011 Geauga County Survey and 2010 Geauga County Census.

<u>Sex</u>	<u>2011 Geauga Survey</u>		<u>2010 Geauga Census</u>		<u>Weight</u>
	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	192	50.000000%	45,902	49.151399%	0.983028
Female	192	50.000000%	47,487	50.848601%	1.016972

In this example, it shows that there was a slightly larger portion of males in the sample compared to the actual portion in Geauga County. The weighting for males was calculated by taking the percent of males in Geauga County (based on Census information) (49.151399%) and dividing that by the percent found in the 2011 Geauga County sample (50.000000%) [$49.151399/50.000000 =$ weighting of 0.983028 for males]. The same was done for females [$50.848601/50.000000 =$ weighting of 1.016972 for females]. Thus males' responses are weighted less by a factor of 0.983028 and females' responses weighted heavier by a factor of 1.016972.

Methods for Weighting the 2011 Geauga County Assessment Data

This same thing was done for each of the 18 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 1.294004 [1.016972 (weight for females) x 1.019667 (weight for White) x 1.1222049 (weight for age 35-44) x 1.111978 (weight for income \$50-\$75k)]. Thus, each individual in the 2011 Geauga 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 14.0) 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.

Methods for Weighting the 2011 Geauga County Assessment Data

Category	Geauga Sample	%	2010 Geauga County*	%	Weighting Value
Sex:					
Male	192	50.000000%	45,902	49.151399%	0.983028
Female	192	50.000000%	47,487	50.848601%	1.016972
Age:					
20-24	23	6.005222%	4,027	6.009640%	1.000736
25-34	26	6.788512%	7,199	10.743333%	1.582576
35-44	59	15.404700%	11,584	17.287230%	1.122205
45-54	90	23.498695%	16,161	24.117656%	1.026340
55-59	46	12.010444%	7,355	10.976138%	0.913883
60-64	49	12.793734%	6,209	9.265920%	0.724255
65-74	71	18.537859%	8,008	11.950633%	0.644661
75-84	19	4.960836%	4,494	6.706562%	1.351902
85+	0	0.000000%	1,972	2.942888%	NA
Race:					
White	365	95.052083%	90,514	96.921479%	1.019667
Other	19	4.947917%	2,875	3.078521%	0.622185
Household Income					
Less than \$10,000	6	1.617251%	1,262	3.680910%	2.276029
\$10k-\$15k	18	4.851752%	1,206	3.517573%	0.725011
\$15k-\$25k	38	10.242588%	2,651	7.732244%	0.754911
\$25k-\$35k	44	11.859838%	2,659	7.755578%	0.653936
\$35k-\$50	60	16.172507%	4,605	13.431530%	0.830516
\$50k-\$75k	71	19.137466%	7,296	21.280443%	1.111978
\$75k or more	134	36.118598%	14,606	42.601721%	1.179495
<p>Note: The weighting ratios are calculated by taking the ratio of the proportion of the population of Geauga County in each subcategory by the proportion of the sample in the Geauga County survey for that same category.</p> <p>* Geauga County population figures taken from the 2010 Geauga County Census.</p>					

Geauga County Schools

The following schools were randomly chosen and agreed to participate in the 2011 Geauga County Health Assessment:

Berkshire Local

Berkshire High School

Cardinal Local

Cardinal High School
Cardinal Middle School

Chardon Local

Chardon High School
Chardon Middle School

Kenston Local

Kenston High School
Kenston Middle School

Ledgemont Local

Ledgemont High School

West Geauga Local

West Geauga High School
West Geauga Middle School

Geauga County Sample Demographic Profile*

Variable	2011 Survey Sample	Geauga County Census 2010	Ohio Census 2010
Age			
20-29	8.8%	8.0%	12.8%
30-39	13.2%	9.2%	12.2%
40-49	23.4%	15.4%	14.0%
50-59	24.4%	16.9%	14.5%
60 plus	25.2%	22.1%	19.9%
Race / Ethnicity			
White	92.2%	96.9%	82.7%
Black or African American	0.6%	1.3%	12.2%
American Indian and Alaska Native	0.6%	0.1%	0.2%
Asian	0%	0.6%	1.7%
Other	2.0%	0.3%	1.1%
Hispanic Origin (may be of any race)	0.7%	1.1%	3.1%
Marital Status†			
Married Couple	66.4%	60.2%	48.9%
Never been married/member of an unmarried couple	10.9%	26.9%	30.6%
Divorced/Separated	12.9%	9.8%	13.8%
Widowed	5.8%	2.3%	6.6%
Education†			
Less than High School Diploma	10.6%	10.3%	11.9%
High School Diploma	14.8%	28.2%	35.2%
Some college/ College graduate	70.3%	61.6%	52.9%
Income (Families)			
\$14,999 and less	6.7%	3.8%	14.7%
\$15,000 to \$24,999	7.1%	3.7%	12.7%
\$25,000 to \$49,999	19.9%	8.0%	27.0%
\$50,000 to \$74,999	19.3%	24.5%	18.8%
\$75,000 or more	39.4%	45.5%	26.8%

* 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 Geauga 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.

Demographics

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

Category	Total	Males	Females
Geauga County	93,408	46,235	47,173
0-4 years	5,211	2,680	2,531
1-4 years	4,269	2,200	2,069
< 1 year	942	480	462
1-2 years	1,946	1,020	926
3-4 years	2,323	1,180	1,143
5-9 years	6,760	3,463	3,297
5-6 years	2,588	1,343	1,245
7-9 years	4,172	2,120	2,052
10-14 years	7,457	3,847	3,610
10-12 years	4,327	2,254	2,073
13-14 years	3,130	1,593	1,537
12-18 years	10,673	5,502	5,171
15-19 years	6,952	3,600	3,352
15-17 years	4,809	2,475	2,334
18-19 years	2,143	1,125	1,018
20-24 years	4,027	2,093	1,934
25-29 years	3,488	1,759	1,729
30-34 years	3,711	1,777	1,934
35-39 years	4,884	2,382	2,502
40-44 years	6,700	3,204	3,496
45-49 years	7,708	3,716	3,992
50-54 years	8,453	4,189	4,264
55-59 years	7,355	3,693	3,662
60-64 years	6,209	3,082	3,127
65-69 years	4,751	2,300	2,451
70-74 years	3,257	1,586	1,671
75-79 years	2,515	1,123	1,392
80-84 years	1,979	783	1,196
85-89 years	1,256	444	812
90-94 years	523	139	384
95-99 years	180	40	140
100-104 years	12	2	10
105-109 years	1	0	1
110 years & over	0	0	0
Total 85 years and over	1,972	625	1,347
Total 65 years and over	14,474	6,417	8,057
Total 19 years and over	67,862	32,766	35,096

Geauga County Profile

General Demographic Characteristics

(Source: U.S. Census Bureau 2010)

Total Population

2010 Total Population	93,408
2000 Total Population	91,209
Population, Percent Change, 2000-2010	2.4%

Largest City-Chardon

2010 Total Population	5,148	100%
2000 Total Population	5,156	100%

Population By Race/Ethnicity

Total Population	93,389	100%
White Alone	90,514	96.9%
Hispanic or Latino (of any race)	1,001	1.1%
Two or more races	788	0.8%
Asian	557	0.6%
African American	1,198	1.3%
Other	246	0.3%
American Indian and Alaska Native	75	0.1%

Population By Age

Under 5 years	5,255	5.6%
5 to 17 years	19,026	20.3%
18 to 24 years	6,170	6.6%
25 to 44 years	19,140	20.5%
45 to 64 years	29,338	31.4%
65 years and more	14,275	15.3%
Median age (years)	43.2	

Household By Type

Total Households	34,400	100%
Family Households (families)	25,513	74.2%
With own children <18 years	12,214	35.5%
Married-Couple Family Households	21,091	61.3%
With own children <18 years	10,236	29.8%
Female Householder, No Husband Present	2,868	8.3%
With own children <18 years	1,370	4.0%
Non-family Households	8,887	25.8%
Householder living alone	7,458	21.7%
Householder 65 years and >	2,871	8.3%

Households With Individuals < 18 years	12,803	37.2%
Households With Individuals 65 years and >	8,920	25.9%

Average Household Size	2.67 people
Average Family Size	3.13 people

Geauga County Profile

General Demographic Characteristics, Continued

(Source: U.S. Census Bureau, American Community Survey 2010 – ACS 1 Year Estimates)

Median Value of Owner-Occupied Units	\$226,300
Median Monthly Owner Costs (With Mortgage)	\$1,669
Median Monthly Owner Costs (Not Mortgaged)	\$580
Median Gross Rent for Renter-Occupied Units	\$739
Median Rooms Per Housing Unit	7.1

Selected Social Characteristics

(Source: U.S. Census Bureau, American Community Survey 2010 – ACS 1 Year Estimates)

School Enrollment

Population 3 Years and Over Enrolled In School	23,002	100%
Nursery & Preschool	1,325	5.8%
Kindergarten	967	4.2%
Elementary School (Grades 1-8)	11,213	48.7%
High School (Grades 9-12)	5,368	23.3%
College or Graduate School	4,129	18.0%

Educational Attainment

Population 25 Years and Over	62,753	100%
< 9 th Grade Education	3,627	5.8%
9 th to 12 th Grade, No Diploma	2,809	4.5%
High School Graduate (Includes Equivalency)	17,681	28.2%
Some College, No Degree	11,382	18.1%
Associate Degree	5,573	8.9%
Bachelor's Degree	12,968	20.7%
Graduate Or Professional Degree	8,713	13.9%
Percent High School Graduate or Higher		89.7%
Percent Bachelor's Degree or Higher		34.5%

Geauga County Profile

Selected Social Characteristics, Continued

(Source: U.S. Census Bureau, American Community Survey 2010 – ACS 1 Year Estimates)

Marital Status

Population 15 Years and Over	35,931	100%
Never Married	9,652	26.9%
Now Married, Excluding Separated	21,624	60.2%
Separated	281	0.8%
Widowed	843	2.3%
Female	3,867	10.2%
Divorced	3,531	9.8%
Female	4,666	12.3%

Veteran Status

Civilian Veterans 18 years and over	6,492	9.4%
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Disability Status of the Civilian Non-institutionalized Population

Total Civilian Noninstitutionalized Population	91,716	100%
With a Disability	9,969	10.9%
Under 18 years	24,281	100%
With a Disability	1,668	6.9%
18 to 64 years	54,659	100%
With a Disability	4,933	9.0%
65 Years and Over	12,776	100%

Selected Economic Characteristics

(Source: U.S. Census Bureau, American Community Survey 2010 – ACS 1 Year Estimates)

Employment Status

Population 16 Years and Over	72,182	100%
In Labor Force	47,788	66.2%
Not In Labor Force	24,394	33.8%
Females 16 Years and Over	37,046	100%
In Labor Force	21,714	58.6%
Population Living With Own Children <6 Years	6,578	100%
All Parents In Family In Labor Force	3,207	48.8%

Geauga County Profile

Selected Economic Characteristics, Continued

(Source: U.S. Census Bureau, American Community Survey 2010 – ACS 1 Year Estimates)

Occupations

Employed Civilian Population 16 Years and Over	44,238	100%
Management, Professional, and Related Occupations	16,862	38.1%
Sales and Office Occupations	12,020	27.2%
Service Occupations	6,077	13.7%
Natural Resources, Construction, and Maintenance Occupations	5,214	11.8%
Production, Transportation, and Material Moving Occupation	4,065	9.2%

Leading Industries

Employed Civilian Population 16 Years and Over	44,238	100%
Educational services and health care and social assistance	6,964	19.2%
Manufacturing	7,751	17.5%
Trade (retail and wholesale)	5,781	13.1%
Professional, scientific, management, administrative, and waste management services	4,128	9.3%
Construction	3,951	8.9%
Arts, entertainment, recreation, accommodation, and food services	3,727	8.4%
Finance, insurance, real estate and rental and leasing	3,297	7.5%
Other services (except public administration)	2,665	6.0%
Transportation and warehousing, and utilities	1,530	3.5%
Public administration	1,163	2.6%
Agriculture, forestry, fishing and hunting, and mining	115	0.3%
Information	434	1.0%

Class of Worker

Employed Civilian Population 16 Years and Over	44,238	100%
Private Wage and Salary Workers	35,656	80.6%
Government Workers	4,973	11.2%
Self-Employed Workers in Own Not Incorporated Business	3,560	8.0%
Unpaid Family Workers	49	0.1%

Median Earnings

Male, Full-time, Year-Round Workers	\$56,676
Female, Full-time, Year-Round Workers	\$39,035

Geauga County Profile

Selected Economic Characteristics, Continued

(Source: U.S. Census Bureau, American Community Survey 2010 – ACS 1 Year Estimates)

Income In 2010 (Inflation-Adjusted Dollars)

Households	34,400	100%
< \$10,000	1,143	3.3%
\$10,000 to \$14,999	1,009	2.9%
\$15,000 to \$24,999	2,682	7.8%
\$25,000 to \$34,999	3,836	11.2%
\$35,000 to \$49,999	5,287	15.4%
\$50,000 to \$74,999	7,614	22.1%
\$75,000 to \$99,999	4,286	12.5%
\$100,000 to \$149,999	4,237	12.3%
\$150,000 or \$199,999	1,932	5.6%
\$200,000 or more	2,374	6.9%

Median Household Income

\$61,236

Income In 2010 (Inflation-Adjusted Dollars)

Families	25,513	100%
< \$10,000	449	1.8%
\$10,000 to \$14,999	520	2.0%
\$15,000 to \$24,999	954	3.7%
\$25,000 to \$34,999	2,044	8.0%
\$35,000 to \$49,999	3,680	14.4%
\$50,000 to \$74,999	6,245	24.5%
\$75,000 to \$99,999	3,646	14.3%
\$100,000 to \$149,999	4,316	16.9%
\$150,000 or \$199,999	1,789	7.0%
\$200,000 or more	1,870	7.3%

Median Household Income

\$70,407

Per Capita Income In 2010

\$31,434

Poverty Status in 2010

<i>Families</i>	<i>% Below Poverty Level</i>
Families	4.8%
Individuals	7.7%

Geauga County Profile

(Source: U.S. Bureau of Economic Analysis)

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

	Income	Rank of Ohio counties
BEA Per Capita Personal Income 2009	\$44,400	2 nd of 88 counties
BEA Per Capita Personal Income 2008	\$46,286	2 nd of 88 counties
BEA Per Capita Personal Income 2007	\$45,546	2 nd of 88 counties
BEA Per Capita Personal Income 2000	\$37,896	2 nd of 88 counties
BEA Per Capita Personal Income 1999	\$36,726	2 nd of 88 counties

(BEA PCPI figures are greater than Census figures for comparable years due to deductions for retirement, Medicaid, Medicare payments, and the value of food stamps, among other things)

Employment Statistics

Category	Geauga	Ohio
Labor Force	50,500	5,792,000
Employed	47,700	5,359,000
Unemployed	2,800	433,000
Unemployment Rate* in November 2011	5.5	7.5
Unemployment Rate* in October 2011	5.3	8.0
Unemployment Rate* in November 2010	7.0	9.1

*Rate equals unemployment divided by labor force.

(Source: Ohio Department of Job and Family Services, November 2011)

Geauga County Profile

Estimated Poverty Status in 2010

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
Geauga County				
All ages in poverty	7,207	5,893 to 8,521	7.8%	6.4 to 9.2
Ages 0-17 in poverty	2,894	2,282 to 3,506	12.1%	9.5 to 14.7
Ages 5-17 in families in poverty	1,987	1,556 to 2,418	10.6%	8.3 to 12.9
Median household income	\$63,172	59,317 to 67,027		
Ohio				
All ages in poverty	1,771,404	1,746,640 to 1,796,168	15.8%	15.6 to 16.0
Ages 0-17 in poverty	619,354	604,905 to 633,803	23.1%	22.6 to 23.6
Ages 5-17 in families in poverty	407,567	394,584 to 420,550	20.8%	20.1 to 21.5
Median household income	\$45,151	44,860 to 44,860		
United States				
All ages in poverty	42,215,956	45,975,650 to 46,456,262	15.3%	15.2 to 15.4
Ages 0-17 in poverty	15,749,129	15,621,395 to 15,876,863	21.6%	21.4 to 21.8
Ages 5-17 in families in poverty	10,484,513	10,394,015 to 10,575,011	19.8%	19.6 to 20.0
Median household income	\$50,046	49,982 to 50,110		

(Source: U.S. Census Bureau, *Small Area Income and Poverty Estimates*, <http://www.census.gov/hhes/www/saipe/county.html>)

Federal Poverty Thresholds in 2010 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	\$11,344					
1 Person 65 and >	\$10,458					
2 people Householder < 65 years	\$14,602	\$15,030				
2 People Householder 65 and >	\$13,180	\$14,973				
3 People	\$17,057	\$17,552	\$17,568			
4 People	\$22,491	\$22,859	\$22,113	\$22,190		
5 People	\$27,123	\$27,518	\$26,675	\$26,023	\$25,625	
6 People	\$31,197	\$31,320	\$30,675	\$30,056	\$29,137	\$28,591
7 People	\$35,896	\$36,120	\$35,347	\$34,809	\$33,805	\$32,635
8 People	\$40,146	\$40,501	\$39,772	\$39,133	\$38,227	\$37,076
9 People or >	\$48,293	\$48,527	\$47,882	\$47,340	\$46,451	\$45,227

(Source: U. S. Census Bureau, *Poverty Thresholds 2010*, <http://www.census.gov/hhes/www/poverty/data/incpovhlth/2010/tables.html>)