

Mental Health &  
Recovery Services  
Board of  
Allen, Auglaize and  
Hardin Counties  
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United Way  
of Greater Lima

# 2017 ALLEN COUNTY

Allen County Health Risk and  
Community Needs Assessment



# FOREWORD

We are pleased to present the 2017 Allen County Community Needs Assessment.

Since the late 1980s, a variety of Allen County agencies have prepared and administered individual needs assessments and community health assessments. This report marks the fourth community assessment undertaken by a broad group of community agencies, with the first being completed in 2002. Over the years, these assessments have shown that **individual health is closely linked to community health** – the health of the community and environment in which individuals live, work, and play. Likewise, the community is profoundly affected by the collective behaviors, attitudes, and beliefs of the people who live there. This assessment was designed to identify the **community issues, behavioral health issues, and physical health issues** that residents of Allen County currently face and to track the progress from previous assessments, where applicable. As was the case in 2009 and 2014, this assessment also includes data from an Allen County youth survey. These youth will be our young adults for the next community needs assessment. Needs assessments are generally time and money consuming projects and so, are only completed periodically. Consider this report a “snapshot” of where the county stands in 2017 on the identified issues.

We invite individuals, agencies and communities to take an active role in creating a better Allen County.

<b>Individuals</b> can and must do more to <b>promote their own health:</b>	Individuals can also <b>get involved</b> in their <b>community:</b>
• maintain an active lifestyle	• volunteering for/attending neighborhood events
• choose healthy foods	• volunteering for/attending community events
• avoid tobacco, alcohol and drugs	• volunteering for/attending church events
• spend time with family and children	
• be a good role model in the community	

**Community agencies** can use this data to:

- develop action plans,
- seek funding to address the issues identified, and
- measure their impact on the community.

This report would not have been possible without the assistance of a number of community leaders and organizations. We thank them for their support in making this health assessment a reality. We especially thank the residents of Allen County who responded to our community survey.

Through individual and group efforts, as well as partnerships, we can continue to make Allen County a better, healthier place to live. Let’s expand on achievements in the community, address the concerns identified, and reverse unfavorable trends. Community support is critical both now and in the future as we address the issues in this report, and long-term, as we evaluate our progress through future needs assessments.

Sincerely,

The Allen County Health Risk and Community Needs Assessment Committee

# ACKNOWLEDGEMENTS

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Allen County Public Health  
Lima Memorial Health System  
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## **This report has been commissioned by The Allen County Community Needs Assessment Steering Committee:**

### **Activate Allen County**

Kayla Monfort  
Josh Unterbrink

### **Allen County Public Health**

Kathy Luhn  
Monica Harnish  
Jeanetta Francy

### **Health Partners of Western Ohio**

Gina Goodin

### **Lima Memorial Health System**

Jeff Utz

### **Mental Health and Recovery Services Board**

Mike Schoenhofer  
Kelly Monroe

### **The Ohio State University, Lima Campus**

Dr. John Snyder

### **St. Rita's Health Partners**

Amy Marcum

### **United Way of Greater Lima**

Carol Braden-Clarke

### **West Ohio Community Action Partnership**

Jackie Fox

## **Contact Information:**

### **Monica Harnish**

Director of Health Planning  
Allen County Public Health  
219 E. Market St.  
Lima, OH 45801  
(419) 228-4457

## **Project Management, Secondary Data, Data Collection, and Report Development Hospital Council of Northwest Ohio**

### **Britney L. Ward, MPH**

Director of Community Health Improvement

### **Selena Coley, MPH**

Community Health Improvement Coordinator

### **Tessa Elliott, MPH, CHES**

Community Health Improvement Coordinator

### **Rachel Hoerchel**

Graduate Assistant

### **Carolynn McCartney**

Undergraduate Assistant

### **Margaret Wielinski, MPH**

Assistant Director of Community Health Improvement

### **Emily A. Golias, MPH, CHES**

Community Health Improvement Coordinator

### **Emily Stearns, MPH, CHES**

Community Health Improvement Coordinator

### **Broghan Gasser**

Undergraduate Assistant

## **Data Collection & Analysis**

### **Joseph A. Dake, Ph.D., MPH**

Professor and Chair  
School of Population Health  
University of Toledo

### **Samantha Schroeder, MPA**

Consultant

### **Aaron J Diehr, PhD, CHES**

Consultant

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

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

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

Allen County Public Health

<http://www.allencountypublichealth.org>

Hospital Council of Northwest Ohio

<http://www.hcno.org/community/reports.html>

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# EXECUTIVE SUMMARY

This executive summary provides an overview of health-related data for Allen County adults (19 years of age and older) and youth (ages 12-18) who participated in a county-wide health assessment survey during January-March 2017. The findings are based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS) and Youth Risk Behavior Surveillance System (YRBSS). The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

## Primary Data Collection Methods

### DESIGN

This community health assessment was cross-sectional in nature and included a written survey of adults and adolescents within Allen County. From the beginning, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

### INSTRUMENT DEVELOPMENT

Two survey instruments were designed and pilot tested for this study: one for adults and one for adolescents in grades 6-12. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of Northwest Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the BRFSS. The majority of the survey items for the adolescent survey were derived from the YRBSS. This decision was based on being able to compare local data with state and national data.

The project coordinator from the Hospital Council of Northwest Ohio conducted a series of meetings with the Allen County Community Health Assessment Committee. During these meetings, banks of potential survey questions from the BRFSS and YRBSS were reviewed and discussed. Based on input from the Allen County Community Health Assessment Committee, the project coordinator composed drafts of surveys containing 117 items for the adult survey and 75 items for the adolescent survey. Health education researchers from the University of Toledo reviewed and approved the drafts.

### SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and over living in Allen County. There were an estimated 79,189 persons ages 19 and over living in Allen County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error of the survey findings). A sample size of at least 382 adults was needed to ensure this level of confidence for the general population. The investigators also calculated the population of African American adults living in Allen County. According to the 2015 American Community Survey 5-year estimate data, approximately 8,970 African American adults 19 years and over lived in Allen County. A sample size of at least 368 African American adults were needed to ensure a 95% confidence level for the African American population. The random sample of mailing addresses of adults from Allen County was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.



## **SAMPLING | Adolescent Survey**

Youth in grades 6-12 in Allen County public school districts were used as a sample for the adolescent survey. For more information on participating districts and schools, see Appendix IV. Using the U.S. Census Bureau data, it was determined that approximately 10,337 youth ages 12-18 years old live in Allen County. A sample size of 370 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error. Students were randomly selected and surveyed in the schools.

## **PROCEDURE | Adult Survey**

Prior to mailing the survey, an advance letter was mailed to 2,400 adults in Allen County: 1,200 to the general population and an additional 1,200 to the African American population. This advance letter was personalized, printed on Allen County Community Health Assessment Committee stationery, and signed by Kathy Luhn, Health Commissioner of the Allen County Health Department. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

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

The response rate for the general population was 41% ( $n=456$ ;  $CI=\pm 4.58$ ). This return rate and sample size means that the responses in the health assessment should be representative of the entire county. The response rate for the African American mailing was 12% ( $n=119$ ;  $CI=\pm 8.9$ ). Only 119 African Americans responded to the survey. As a result, there is a greater margin of error when generalizing to the entire population. Caution should be taken when generalizing the results of this assessment to the African American community.

## **PROCEDURE | Adolescent Survey**

The survey was approved by participating superintendents. Schools and grades were randomly selected. Each student in that grade had to have an equal chance of being in the class that was selected, such as a home room 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 95% ( $n=420$ ;  $CI=\pm 4.68$ ).

## **DATA ANALYSIS**

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using SPSS 23.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Allen County, the adult data collected was weighted by age, gender, race, and income using 2015 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 Allen County adult assessment had a high response rate for the general population. 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 Allen County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

Second, the response rate for African Americans in Allen County was very low (12%), even with a specialized mailing list being purchased specifically to recruit African Americans. Though the African American response rate was low, Allen County yielded a higher response than the 2015 Ohio BRFSS rate of 11.5%. While a typical response rate would yield enough surveys ( $n=368$ ) to be 95% confident in our findings with a 5% margin of error, the low response rate yielded only 119 African Americans which brings the margin of error to 8.9%.

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

## 2016 Ohio State Health Assessment (SHA)

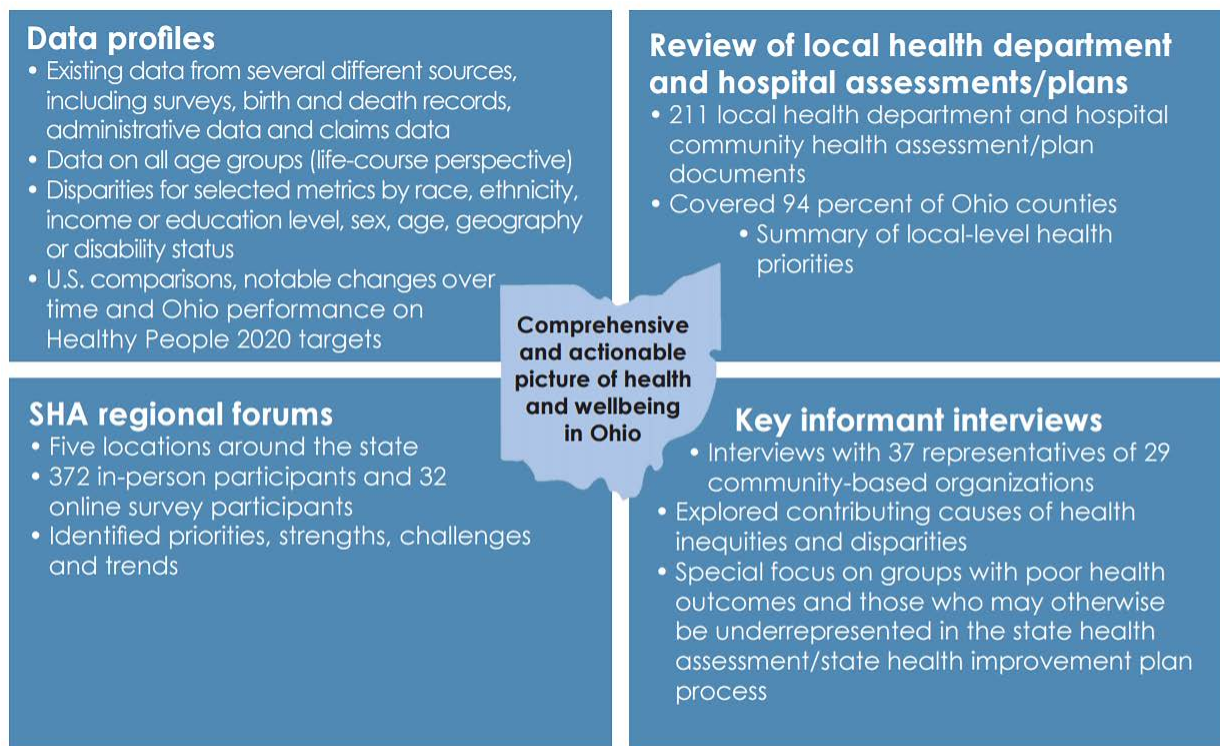
The 2016 Ohio State Health Assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, a review of local health department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

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

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

To view the full 2016 Ohio State Health Assessment, please visit: [http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/chss/ship/SHA\\_FullReport\\_08042016.pdf?la=en](http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/chss/ship/SHA_FullReport_08042016.pdf?la=en)

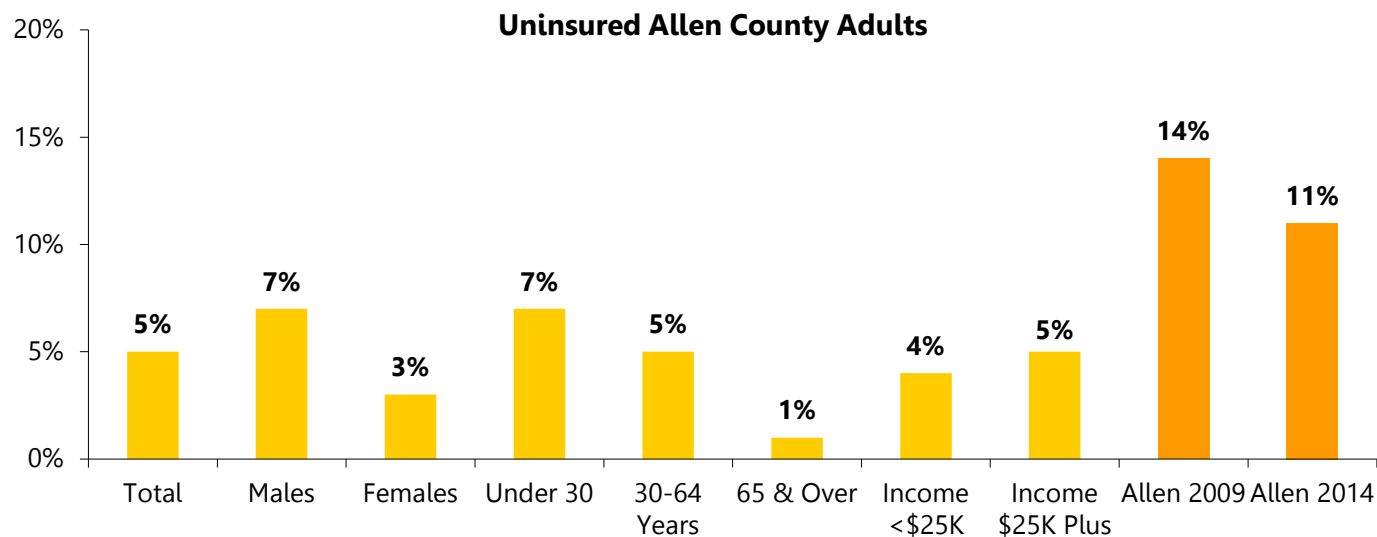
**FIGURE 1.1 | State Health Assessment (SHA) Sources of Information**



## Data Summary

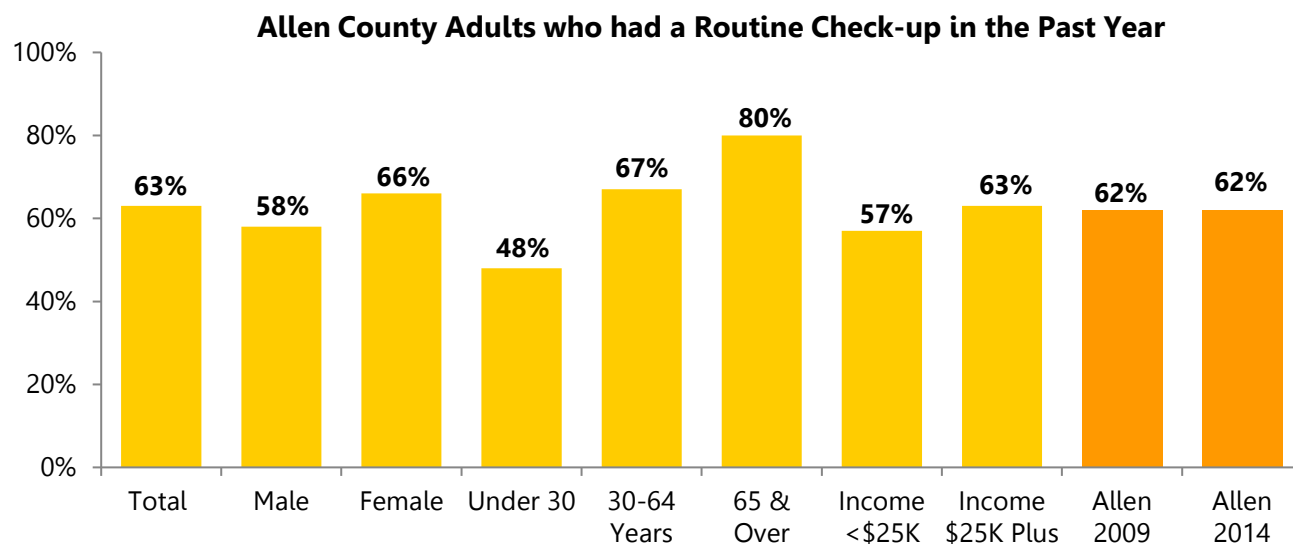
### HEALTHCARE COVERAGE

The health assessment identified that 5% of Allen County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30 and African Americans. In Allen County, 17.5% of residents live below the poverty level *(Source: U.S. Census, American Community Survey 5 Year Estimate, 2011-2015.)*



### ACCESS AND UTILIZATION

The 2017 health assessment identified that 63% of Allen County adults had visited a doctor for a routine checkup in the past year. Thirty-two percent (32%) of adults went outside of Allen County for health care services in the past year.

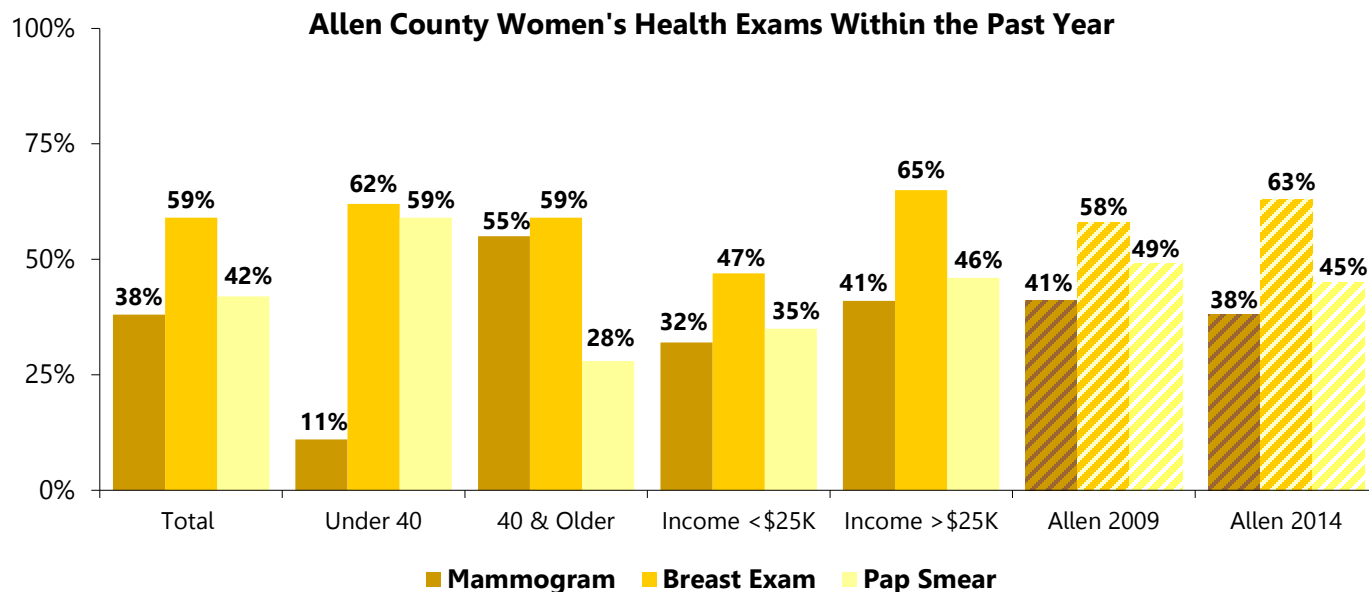


### PREVENTIVE MEDICINE

Almost three-quarters (73%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Nearly three-fifths (59%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.

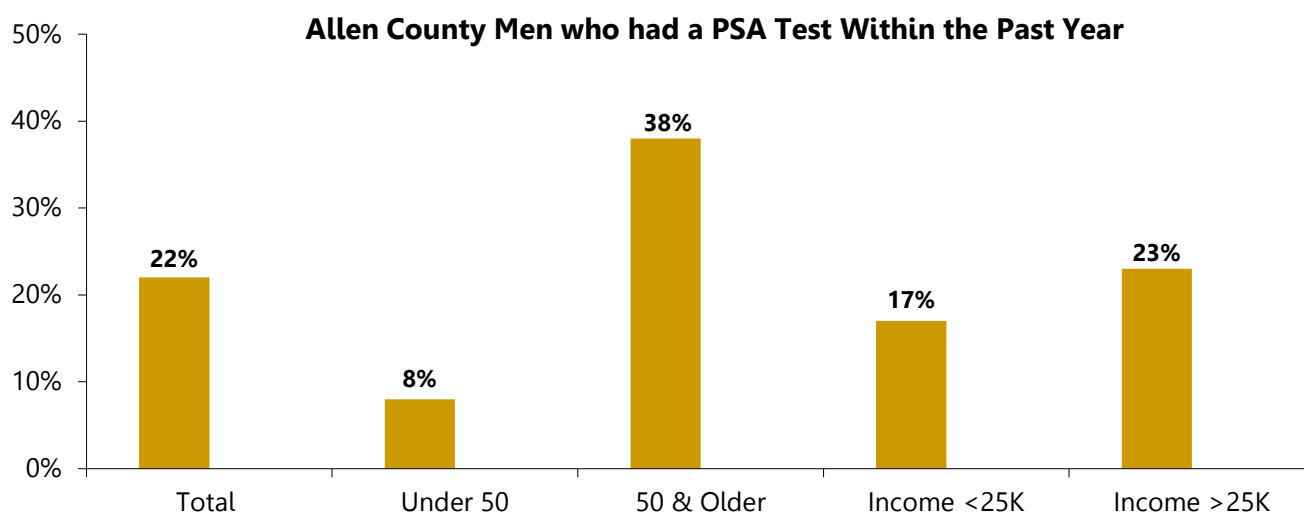
## WOMEN'S HEALTH

In 2017, more than half (55%) of Allen County women over the age of 40 reported having a mammogram in the past year. Fifty-nine percent (59%) of Allen County women ages 19 and over had a clinical breast exam and 42% had a Pap smear to detect cancer of the cervix in the past year. Nearly two-fifths (39%) were obese, 32% had high blood pressure, 31% had high blood cholesterol, and 17% were identified as smokers, known risk factors for cardiovascular diseases.



## MEN'S HEALTH

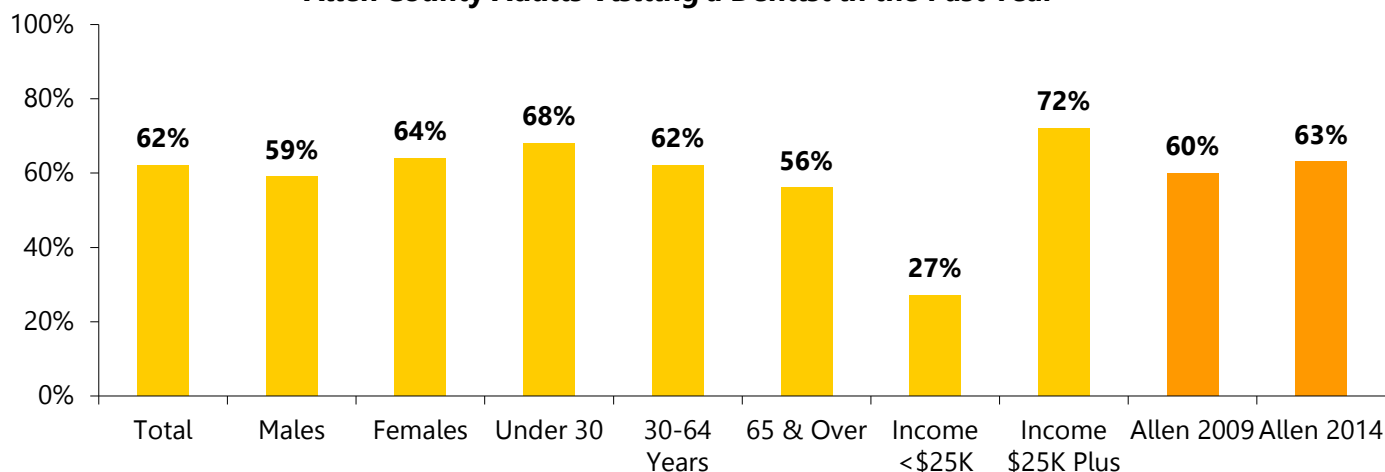
In 2017, 38% of Allen County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. More than one-third (35%) of men had been diagnosed with high blood pressure, 37% had high blood cholesterol, and 19% were identified as smokers, which, along with obesity (32%), are known risk factors for cardiovascular diseases.



## ORAL HEALTH

More than three-fifths (62%) of Allen County adults had visited a dentist or dental clinic in the past year. The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the past year.

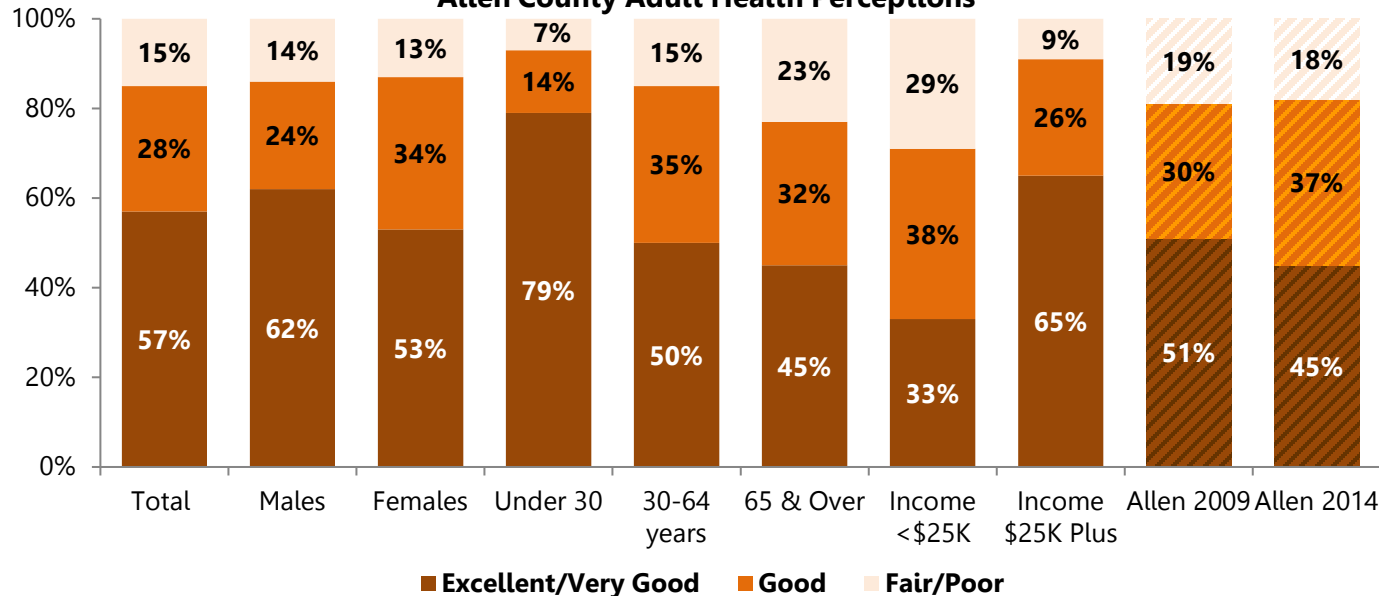
**Allen County Adults Visiting a Dentist in the Past Year**



## HEALTH STATUS PERCEPTIONS

In 2017, more than half (57%) of Allen County adults rated their health status as excellent or very good. Conversely, 15% of adults, increasing to 29% of those with incomes less than \$25,000, described their health as fair or poor.

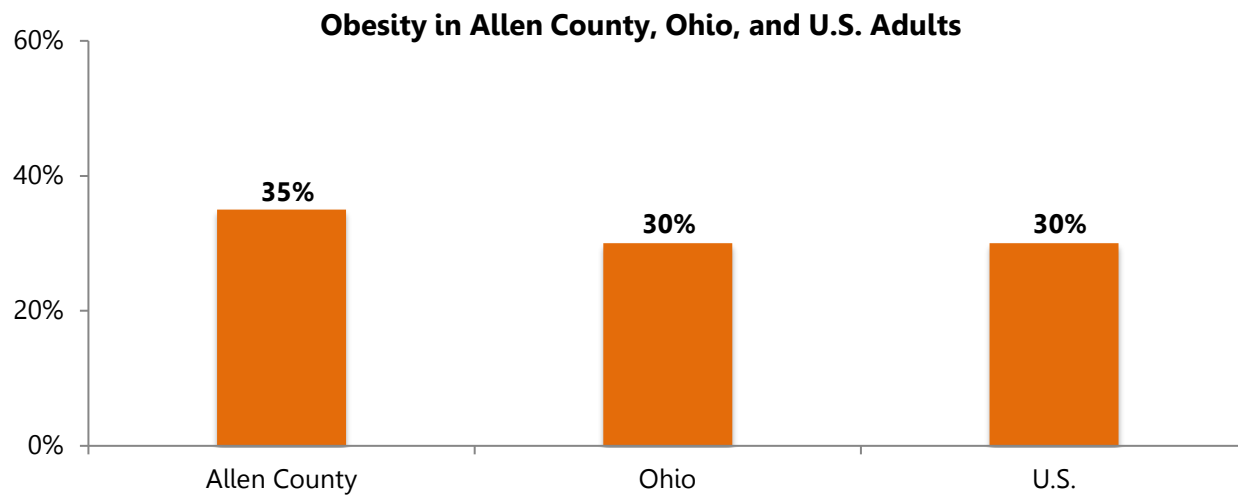
**Allen County Adult Health Perceptions\***



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

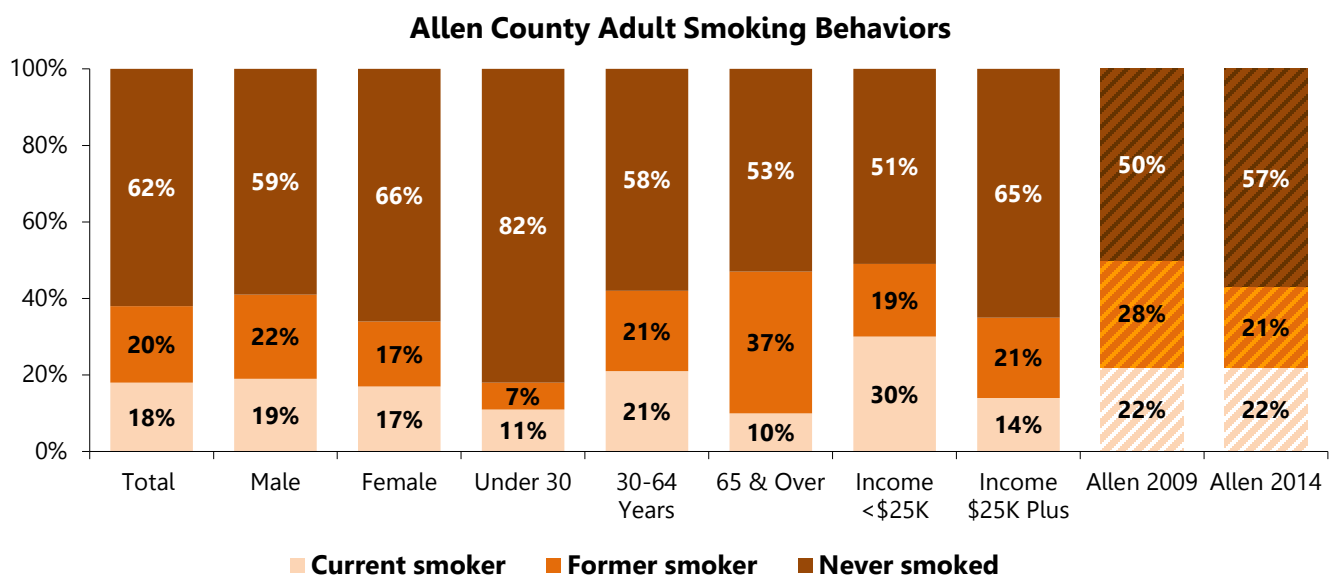
## ADULT WEIGHT STATUS

The 2017 health assessment identified that 70% of Allen County adults were overweight or obese based on Body Mass Index (BMI). More than half (54%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.



## ADULT TOBACCO USE

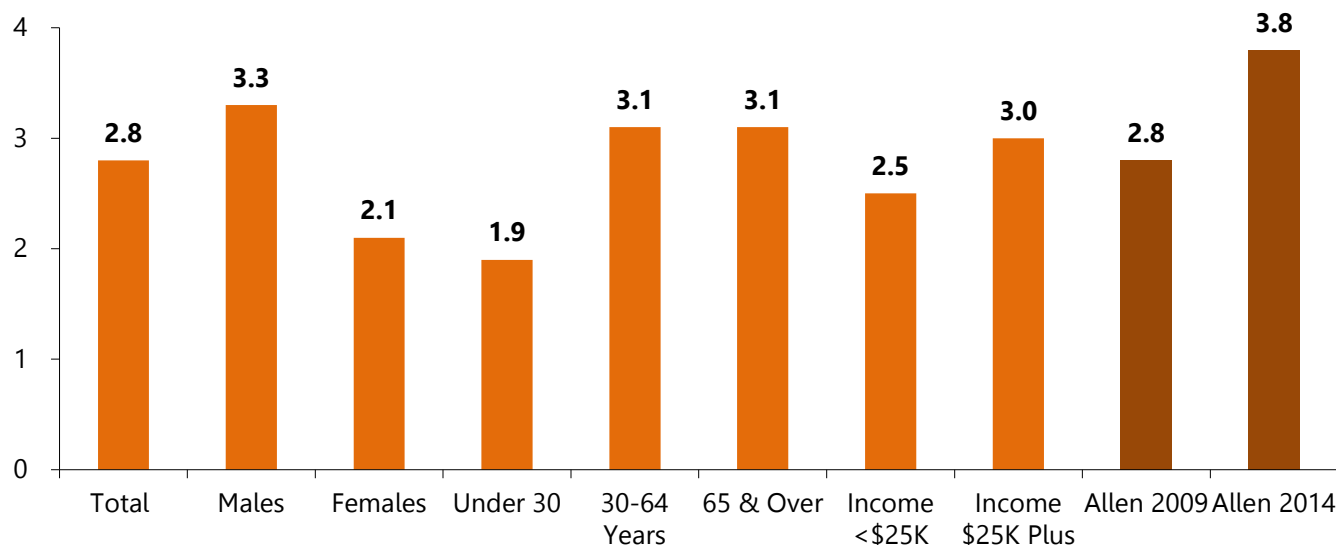
In 2017, 18% of Allen County adults were current smokers, and 20% were considered former smokers. Sixty-two percent (62%) of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.



## ADULT ALCOHOL USE

The health assessment indicated that 51% of adults who drank engaged in binge drinking (had five or more drinks for males or 4 or more drinks for females on one occasion) in the past month. Eight percent (8%) of adults reported driving after having perhaps too much to drink, increasing to 13% of those under the age of 30 and 14% of African Americans.

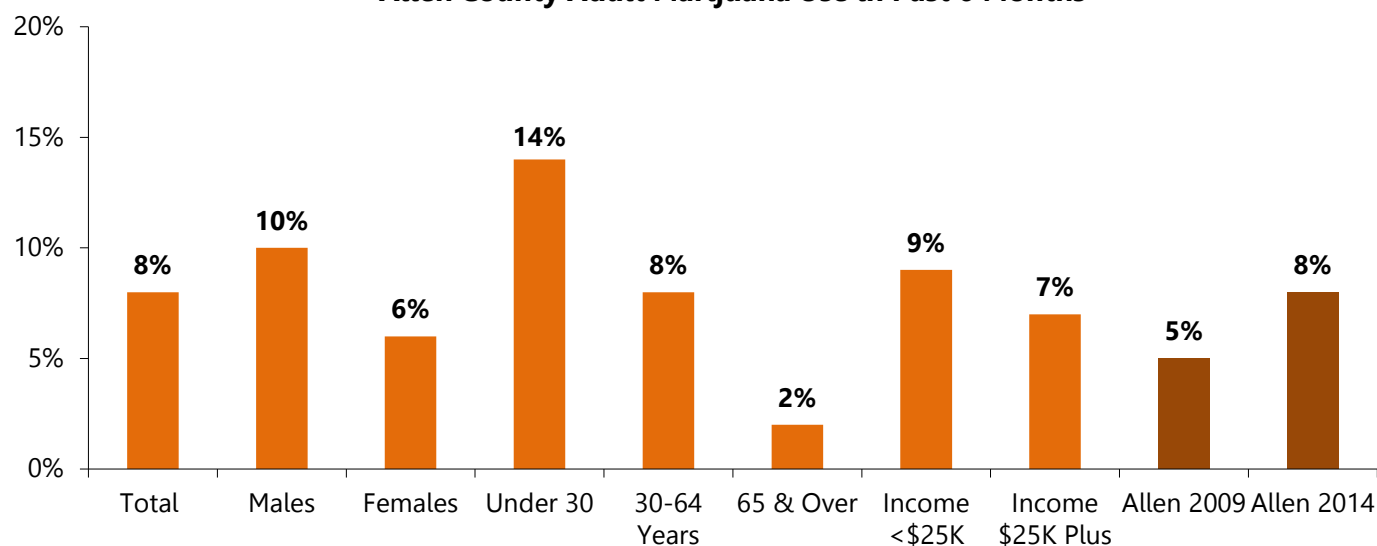
**Adults Average Number of Drinks Consumed Per Drinking Occasion**



## ADULT DRUG USE

In 2017, 8% of Allen County adults had used marijuana during the past 6 months. Eight percent (8%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

**Allen County Adult Marijuana Use in Past 6 Months**





## ADULT SEXUAL BEHAVIOR

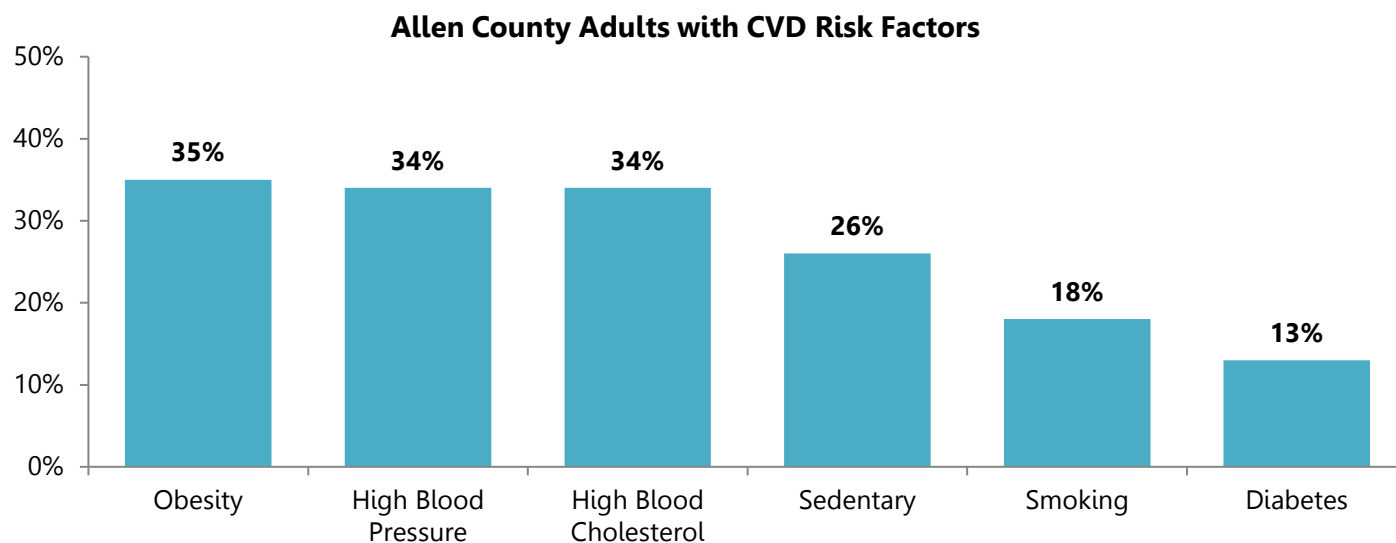
In 2017, 73% of Allen County adults had sexual intercourse. Seven percent (7%) of adults had more than one partner. The Centers for Disease Control and Prevention (CDC) estimates that youth ages 15-24 make up just over one quarter of the sexually active population but account for half of the 20 million new sexually transmitted infections that occur in the United States each year *(Source: CDC, STDs in Adolescents and Young Adults, 2017 STD Surveillance)*.

## ADULT MENTAL HEALTH

In 2017, 3% of Allen County adults considered attempting suicide. Thirty percent (30%) of adults did not get enough sleep or rest almost every day for two weeks or more in a row. Ten percent (10%) of Allen County adults had used a program or service to help with depression, anxiety, or other emotional problems for themselves or a loved one.

## CARDIOVASCULAR HEALTH

The 2017 Allen County Health Assessment found that 5% of adults had survived a heart attack at some time in their life. More than one-third (34%) of Allen County adults had high blood cholesterol, 35% were obese, 34% had high blood pressure, and 18% were smokers, four known risk factors for heart disease and stroke.



## CANCER

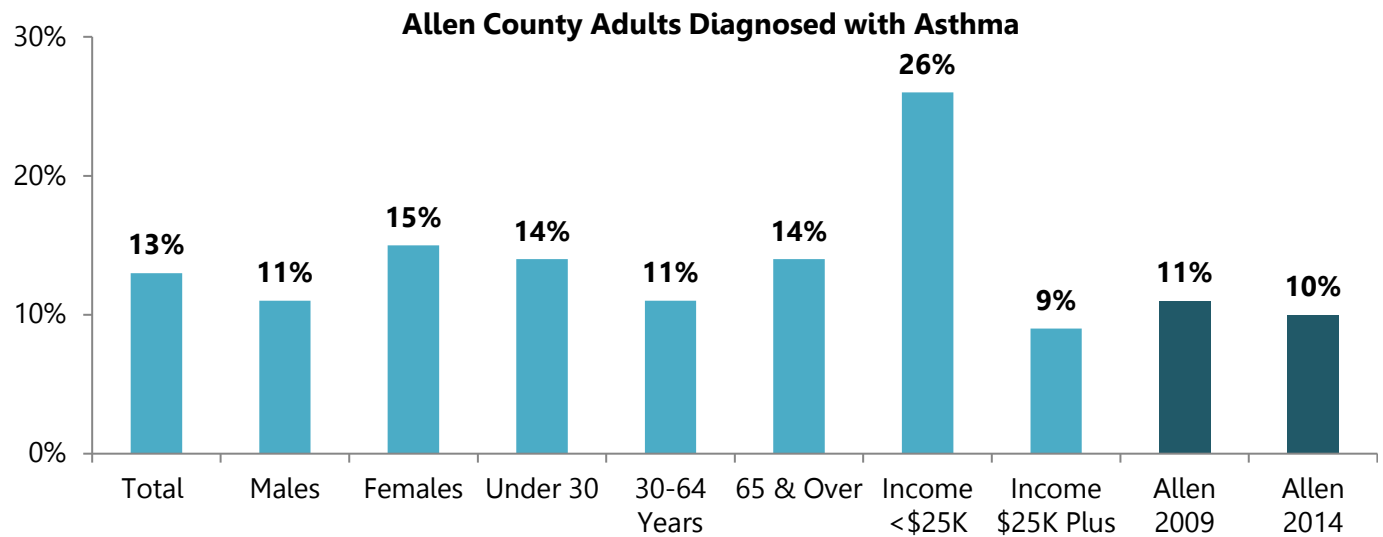
In 2017, 10% of Allen County adults had been diagnosed with cancer at some time in their life. The CDC indicates that from 2013-2015, a total of 789 Allen County residents died from cancer, the leading cause of death in the county. The American Cancer Society advises that not using tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages and early detection may reduce overall cancer deaths.

## ARTHRITIS

One third (33%) of adults were diagnosed with arthritis. According to the 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they had arthritis. More than three-fourths (76%) of adults diagnosed with arthritis were overweight or obese.

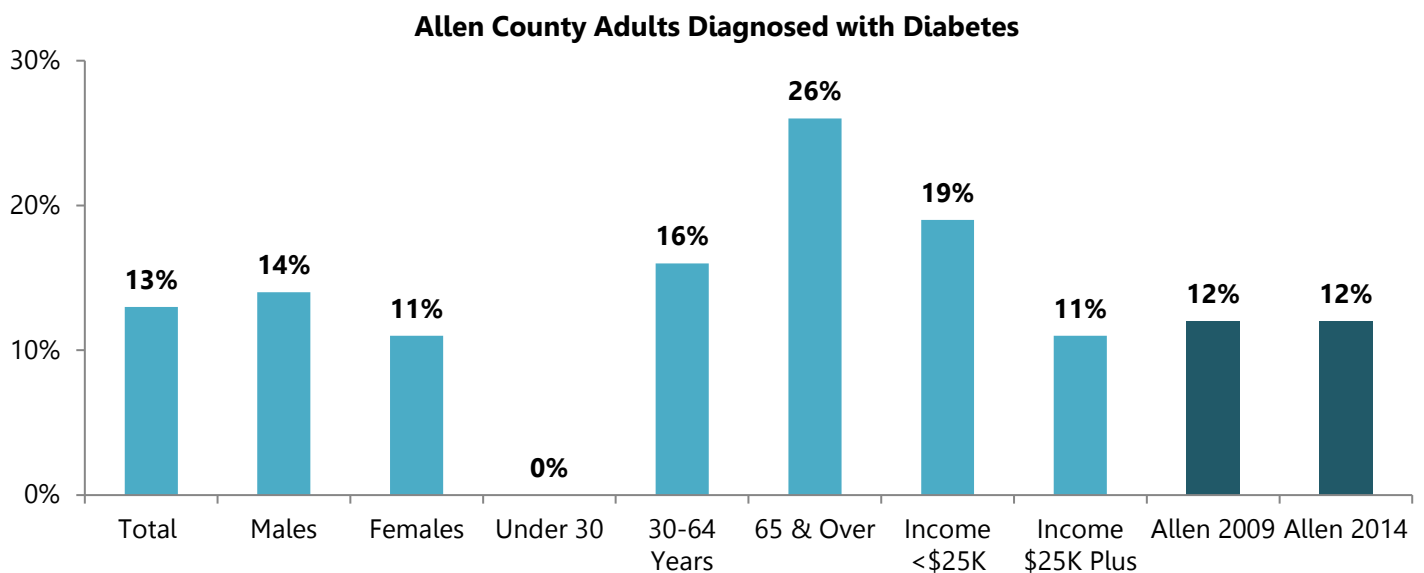
## ASTHMA

In 2017, 13% of adults had been diagnosed with asthma, increasing to 26% of those with incomes less than \$25,000.



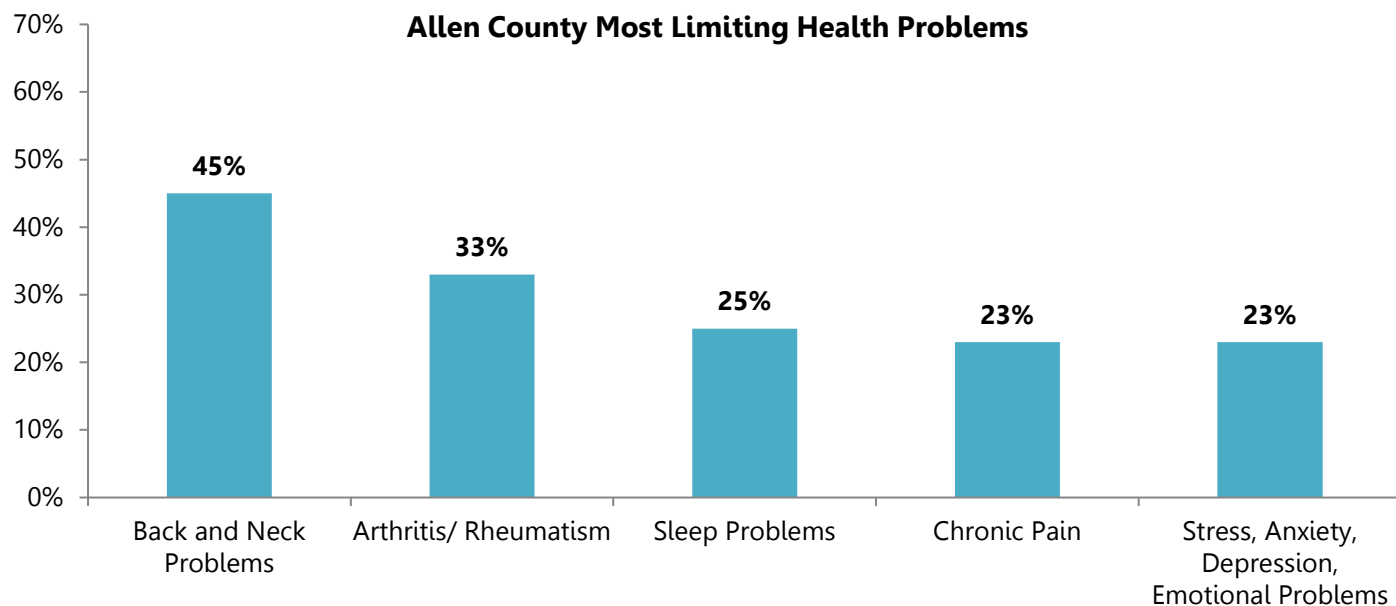
## DIABETES

In 2017, 13% of Allen County adults had been diagnosed with diabetes. Almost two-fifths (38%) of adults with diabetes rated their health as fair or poor.



## QUALITY OF LIFE

In 2017, 24% of Allen County adults were limited in some way because of a physical, mental or emotional problem. Back or neck problems (45%) were reported as the most limiting problem in Allen County.



## SOCIAL DETERMINANTS OF HEALTH

In 2017, 6% of Allen County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Ten percent (10%) of adults experienced 4 or more adverse childhood experiences (ACEs), increasing to 26% of those who contemplated suicide in the past year. In the past year, 10% of Allen County adults had to choose between paying bills and buying food.

## ENVIRONMENTAL HEALTH

Allen County adults reported the following top three environmental issues that threatened their health in the past year: mold (9%), insects (6%), and bed bugs (5%). Seventy-seven percent (77%) of adults reported they had a working smoke detector in their home.

## PARENTING

More than one-fourth (26%) of Allen County mothers never breastfed their child. Eighty-three percent (83%) of parents put their infant to sleep on their back. Sixty-six percent (66%) of parents discussed dating and relationships with their 10-to-17-year-old child.

### **AFRICAN AMERICAN: HEALTH CARE ACCESS, COVERAGE, & UTILIZATION**

The 2017 health assessment identified that 13% of African Americans did not have health care coverage compared to 5% of the rest of Allen County adults. Twenty-four percent (24%) of African Americans rated their health status as fair or poor. More than one-fifth (21%) of African American adults did not get their prescriptions from their doctor filled in the past year. Forty-six percent (46%) of Allen County African Americans visited a hospital emergency room for health care services or advice.

### **AFRICAN AMERICAN: CHRONIC DISEASE & PREVENTION**

In 2017, 14% of Allen County African Americans were diagnosed with diabetes, and 40% were diagnosed with high blood pressure. Seventy-four percent (74%) of African Americans were either overweight or obese by Body Mass Index (BMI). Seventy-one percent (71%) of Allen County African American current drinkers had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition. More than two-fifths (41%) of African American adults were limited in some way because of a physical, mental or emotional problem.

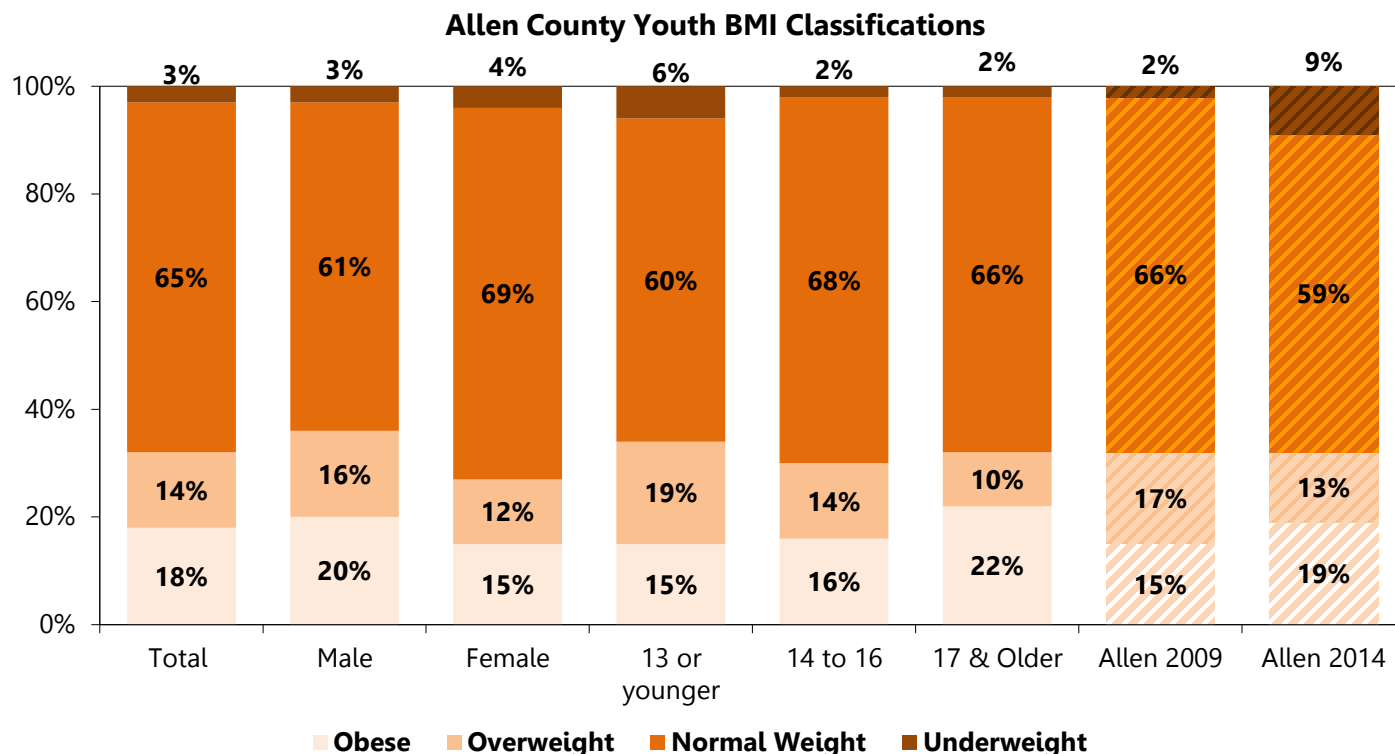
### **AFRICAN AMERICAN: SOCIAL DETERMINANTS OF HEALTH**

Thirteen percent (13%) of African American adults had 4 or more adverse childhood experiences (ACEs) in their lifetime. More than one-third (35%) of African American adults received assistance for food in the past year. Forty-five percent (45%) of Allen County African Americans reported they spent 50% or more of their household income on housing compared to 14% of the rest of Allen County adults.

## Data Summary | Youth Health

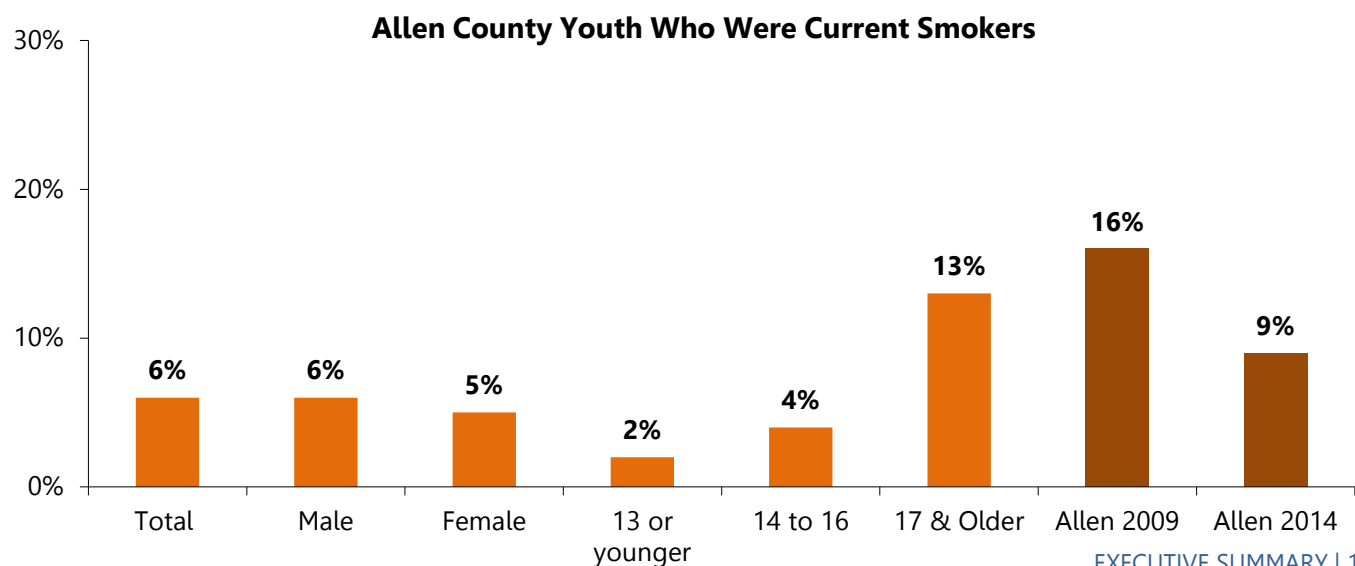
### YOUTH WEIGHT STATUS

The health assessment identified that 18% of Allen County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 30% of Allen County youth reported that they were slightly or very overweight. Three-fourths (75%) of youth exercised for 60 minutes on 3 or more days per week.



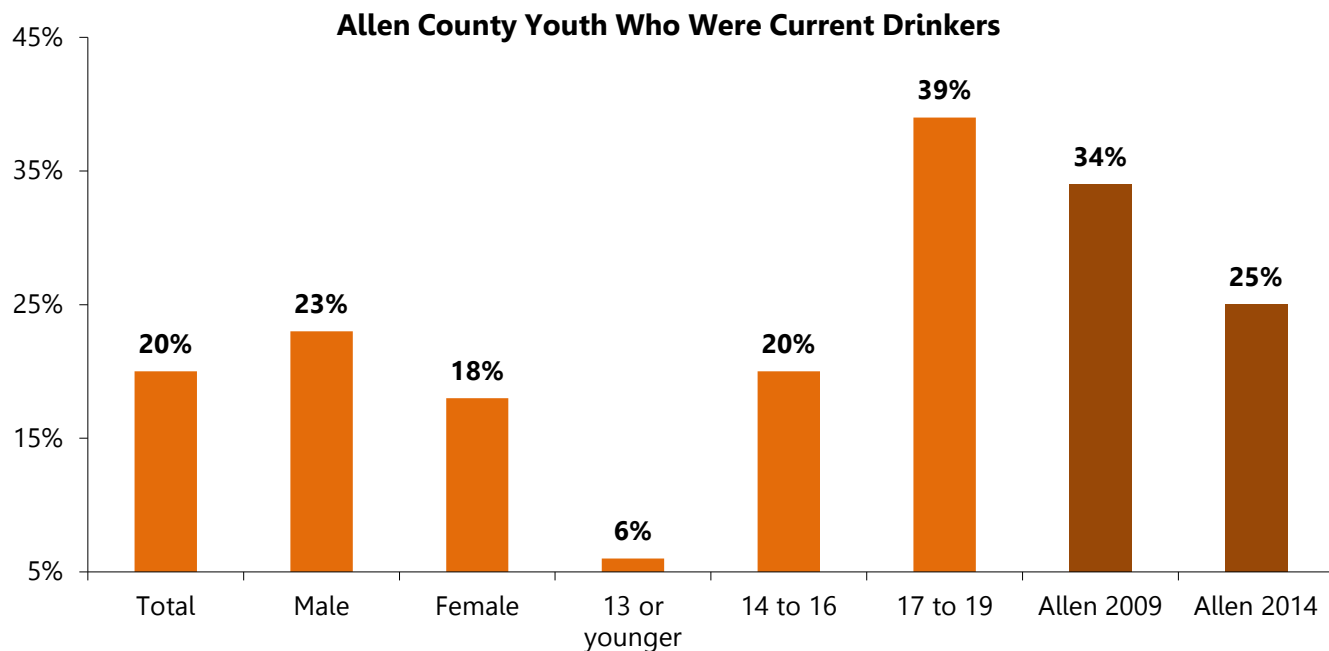
### YOUTH TOBACCO USE

Six percent (6%) of Allen County youth in grades 6-12 were current smokers, increasing to 13% of those ages 17 and older. Eighty-three percent (83%) of Allen County youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.



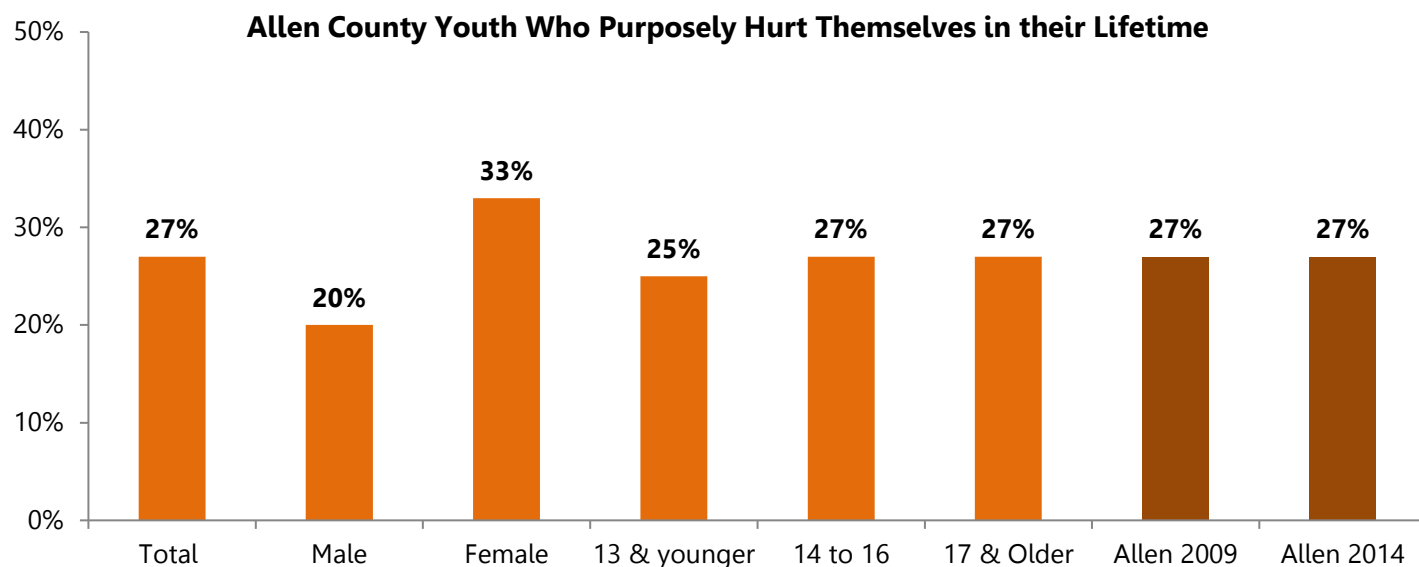
## YOUTH ALCOHOL USE

One-fifth (20%) of all Allen County youth and 39% of those 17 and older had at least one drink in the past 30 days. Over two-fifths (45%) of youth who reported drinking in the past 30 days had at least one episode of binge drinking. Six percent (6%) of all youth drivers had driven a car in the past month after they had been drinking alcohol.



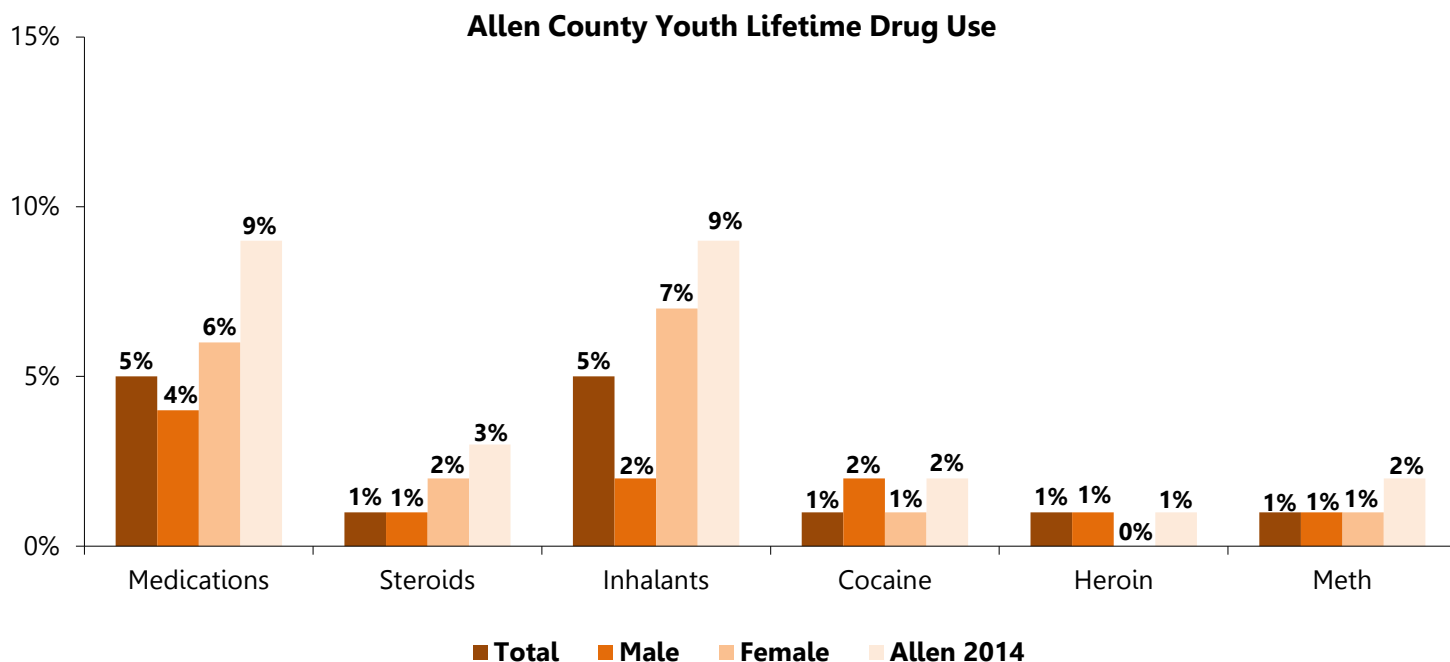
## YOUTH VIOLENCE

Two percent (2%) of Allen County youth carried a weapon (such as a gun, knife or club) on school property in the past month. Thirteen percent (13%) of youth had been hit, slapped, or physically hurt by an adult or caregiver in the past month. Forty-one percent (41%) of youth had been bullied in the past year. Over one-quarter (27%) of youth purposefully hurt themselves by cutting, scratching, burning, hitting or biting, increasing to 33% of females. Nearly one-tenth (9%) of youth had purposefully hurt themselves 10 or more times.



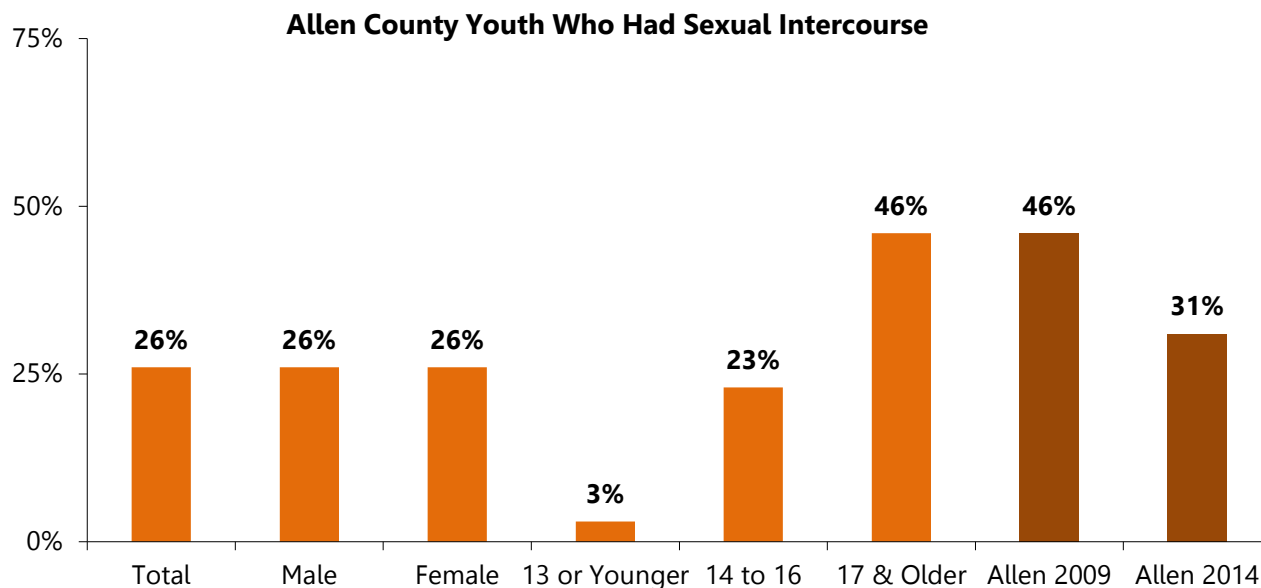
## YOUTH DRUG USE

In 2017, 12% of Allen County 6th-12th grade youth had used marijuana at least once in the past 30 days, increasing to 21% of those ages 17 and older. Five percent (5%) of youth used medications that were not prescribed for them or took more than prescribed to get high at some time in their life, increasing to 6% of those over the age of 17.



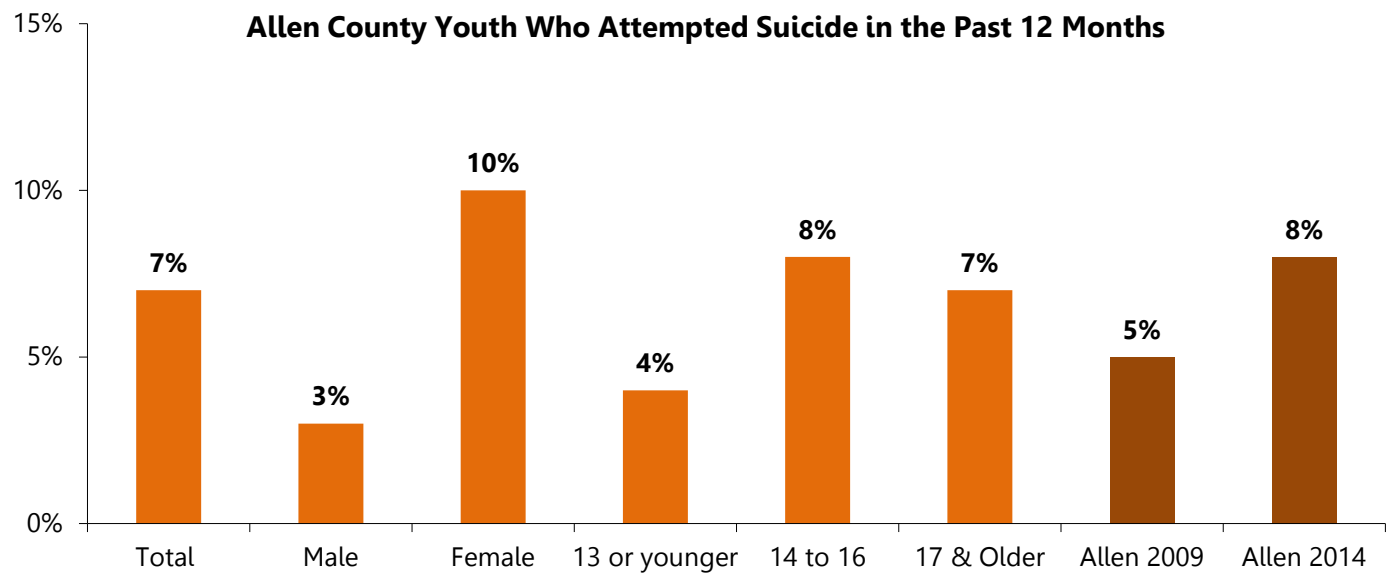
## YOUTH SEXUAL BEHAVIOR

*Disclaimer:* Two out of fourteen participating Allen County schools did not ask sexual behavior questions. Over one-quarter (26%) of Allen County youth have had sexual intercourse. One-fourth (25%) of youth had participated in oral sex, and 6% had participated in anal sex. Thirty-two percent (32%) of youth participated in sexting. Of those who were sexually active, 48% had multiple sexual partners.



**YOUTH MENTAL HEALTH**

In 2017, the health assessment indicated that 15% of Allen County youth had seriously considered attempting suicide in the past year, and 7% actually attempted suicide in the past year, increasing to 10% of females.













**YOUTH PERSONAL HEALTH AND SAFETY**

Around two-fifths (41%) of Allen County youth drivers had texted while driving in the past 30 days. Six percent (6%) of youth had played the choking game, also known as the pass-out game, space monkey, or dream game. Seventy-nine percent (79%) of youth reported they saw a dentist for a check-up, exam, teeth cleaning, or other dental work in the past year.



# ADULT TREND SUMMARY

Adult Variables	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Health Status					
Rated health as excellent or very good	51%	45%	57%	52%	52%
Rated general health as fair or poor 	19%	18%	15%	17%	16%
Rated their mental health as not good on four or more days in the previous month	22%	23%	27%	N/A	N/A
Average days that physical health not good in past month	N/A	3.2	4.2	3.7**	3.6**
Average days that mental health not good in past month	N/A	3.3	4.2	4.0**	3.7**
Average days that poor physical or mental health kept them from doing their usual activities in past month	N/A	2.2	2.8	N/A	N/A
Healthcare Coverage, Access, and Utilization					
Uninsured	14%	11%	5%	8%	11%
Visited a doctor for a routine checkup in the past year 	62%	62%	63%	72%	70%
Arthritis, Asthma, & Diabetes					
Has been diagnosed with diabetes 	12%	12%	13%	11%	10%
Has been diagnosed with arthritis	29%	27%	33%	28%	25%
Has been diagnosed with asthma 	11%	10%	13%	14%	14%
Cardiovascular Health					
Had angina 	11%	7%	6%	4%	4%
Had a heart attack 	7%	4%	5%	5%	4%
Has been diagnosed with high blood pressure 	41%	33%	34%	34%	31%
Has been diagnosed with high blood cholesterol	34%	32%	34%	37%	36%
Had blood cholesterol checked within the past 5 years	N/A	71%	77%	78%	78%
Weight Status					
Overweight	36%	34%	35%	37%	36%
Obese 	41%	33%	35%	30%	30%
Alcohol Consumption					
Had at least one alcoholic beverage in past month	56%	47%	54%	53%	54%
Binged in past month (5 or more drinks in a couple of hours on an occasion) 	20%	18%	27%	18%	16%
Drove after having perhaps too much to drink	4%	7%	8%	N/A	N/A
Tobacco Use					
Current smoker (currently smoke some or all days) 	22%	22%	18%	22%	18%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	28%	21%	20%	24%	25%
Tried to quit smoking	54%	52%	62%	N/A	N/A

\*\*2015 BRFSS data as compiled by County Health Rankings

N/A- Not available

 Indicates alignment with the Ohio State Health Assessment










Adult Variables	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
<b>Drug Use</b>					
Adults who used marijuana in the past 6 months	5%	8%	8%	N/A	N/A
Adults who used other recreational drugs in the past 6 months	5%	1%	2%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	2%	10%	8%	N/A	N/A
<b>Sexual Behavior</b>					
Had more than one sexual partner in past year	5%	6%	7%	N/A	N/A
<b>Preventive Medicine</b>					
Had a pneumonia vaccine (age 65 and older)	61%	55%	73%	72%	73%
Had a flu vaccine in past year (age 65 and older)	70%	75%	72%	58%	61%
Had a clinical breast exam in the past two years (age 40 and older)	79%	80%	74%	N/A	N/A
Had a mammogram in the past two years (age 40 and older)	69%	70%	72%	72%*	73%*
Had a pap smear in the past three years	74%	74%	61%	74%*	75%*
Had a PSA test within the past two years (men ages 40 & over)	N/A	N/A	47%	43%	43%
Had a sigmoidoscopy/colonoscopy in the past 5 years (ages 50 and over)	54%	53%	59%	68%*	69%*
<b>Quality of Life</b>					
Limited in some way because of physical, mental or emotional problem	23%	18%	24%	21%	21%
<b>Mental Health</b>					
Considered attempting suicide in the past year	5%	4%	3%	N/A	N/A
Hit their head hard enough that they were dizzy, had a concussion, were knocked out, or had their "bell rung"	34%	38%	39%	N/A	N/A
<b>Oral Health</b>					
Adults who have visited the dentist in the past year	60%	63%	62%	65%*	65%*

N/A - Not available

\*2014 BFRSS data


 Indicates alignment with the Ohio State Health Assessment




# YOUTH TREND SUMMARY

Youth Variables	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Weight Control</b>						
<b>Obese</b> 	15%	19%	18%	18%	13%	14%
<b>Overweight</b> 	17%	13%	14%	11%	16%	16%
<b>Described themselves as slightly or very overweight</b>	29%	29%	30%	31%	28%	32%
<b>Trying to lose weight</b>	43%	44%	49%	47%	47%	46%
<b>Exercised to lose weight</b>	N/A	40%	52%	53%	N/A	N/A
<b>Ate less food, fewer calories, or foods lower in fat to lose weight</b>	N/A	27%	29%	31%	N/A	N/A
<b>Went without eating for 24 hours or more</b>	14%	4%	4%	5%	10%	13%*
<b>Took diet pills, powders, or liquids without a doctor's advice</b>	4%	2%	1%	2%	5%	5%*
<b>Drank pop or soda one or more times per day during the past week</b>	N/A	21%	21%	26%	21%	27%
<b>Vomited or took laxatives</b>	4%	2%	1%	1%	5%	4%*
<b>Ate 1 to 4 servings of fruits and vegetables per day</b> 	N/A	N/A	88%	88%	N/A	N/A
<b>Physically active at least 60 minutes per day on every day in past week</b>	31%	28%	24%	23%	26%	27%
<b>Physically active at least 60 minutes per day on 5 or more days in past week</b>	50%	50%	48%	50%	48%	49%
<b>Did not participate in at least 60 minutes of physical activity on any day in past week</b>	13%	17%	10%	9%	13%	14%
<b>Watched TV 3 or more hours per day</b>	43%	28%	20%	22%	28%	25%
<b>Unintentional Injuries and Violence</b>						
<b>Carried a weapon on school property in past month</b>	4%	2%	2%	3%	N/A	4%
<b>Threatened or injured with a weapon on school property in past year</b>	11%	8%	7%	5%	N/A	6%
<b>Did not go to school because felt unsafe</b> 	5%	5%	4%	3%	5%	6%
<b>Electronically/cyber bullied in past year</b> 	13%	13%	12%	9%	15%	16%
<b>Bullied in past year</b>	47%	48%	41%	38%	N/A	N/A
<b>Bullied on school property in past year</b> 	N/A	30%	28%	25%	21%	20%
<b>Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year</b> 	12%	5%	5%	6%	N/A	10%
<b>Purposely hurt themselves (lifetime)</b>	27%	27%	27%	27%	N/A	N/A
<b>Mental Health</b>						
<b>Youth who had seriously considered attempting suicide in the past year</b> 	13%	18%	15%	18%	14%	18%
<b>Youth who had attempted suicide in the past year</b>	5%	8%	7%	8%	6%	9%
<b>Youth who felt sad or hopeless almost every day for 2 or more weeks in a row</b> 	27%	29%	27%	31%	26%	30%

N/A – Not Available

\* Comparative YRBS data for U.S. is 2013


 Indicates alignment with the Ohio State Health Assessment

Youth Variables	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Personal Health and Safety</b>						
Visited a dentist for a check-up within the past year	68%	70%	79%	77%	75%	74%
Suffered a blow or jolt to their head while playing with a sports team	N/A	12%	12%	10%	12%	N/A
<b>Alcohol Consumption</b>						
Current drinker 	34%	25%	20%	30%	30%	33%
Binge drinker (of all youth) 	22%	15%	9%	14%	16%	18%
Drank for the first time before age 13 (of all youth)	27%	16%	14%	11%	13%	17%
Rode with someone who was drinking	22%	22%	13%	15%	17%	20%
Drank and drove (of youth drivers)	8%	8%	6%	6%	4%	8%
Obtained the alcohol they drank by someone giving it to them (of youth drinkers)	N/A	38%	28%	26%	38%	44%
<b>Tobacco Use</b>						
Current smokers	16%	9%	6%	9%	15%	11%
Smoked cigarettes on 20 or more days during the past month (of all youth)	6%	2%	2%	4%	7%	3%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	13%	9%	5%	6%	14%*	7%
Tried to quit smoking (of youth who smoked in the past year)	56%	57%	50%	53%	56%*	45%
<b>Sexual Behavior**</b>						
Ever had sexual intercourse	46%	31%	26%	35%	43%	41%
Used a condom at last intercourse	70%	52%	35%	34%	51%	57%
Used birth control pills at last intercourse	35%	32%	10%	12%	24%	18%
Did not use any method to prevent pregnancy during last sexual intercourse	14%	12%	8%	8%	12%	14%
Had four or more sexual partners (of all youth)	14%	6%	5%	7%	12%	12%
Had sexual intercourse before age 13 (of all youth)	13%	3%	3%	3%	4%	4%
<b>Drug Use</b>						
Youth who used marijuana in the past month 	16%	16%	12%	19%	21%	22%
Ever used methamphetamines	2%	<1%	1%	1%	N/A	3%
Ever used cocaine	2%	3%	1%	2%	4%	5%
Ever used heroin	1%	<1%	0%	<1%	2%	2%
Ever used steroids	3%	3%	1%	2%	3%	4%
Ever used inhalants	9%	3%	5%	3%	9%	7%
Ever used ecstasy/MDMA/Molly	N/A	3%	1%	1%	N/A	5%
Ever misused medications	10%	9%	5%	6%	N/A	N/A
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	16%	10%	8%	12%	20%	22%

N/A – Not available

\* Comparative YRBS data for Ohio is 2011

\*\* In 2017, two schools did not ask sexual behavior questions; please use data with caution.

 Indicates alignment with the Ohio State Health Assessment

# Health Care Access: Health Care Coverage

## Key Findings

*The health assessment identified that 5% of Allen County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30 and African Americans. In Allen County, 17.5% of residents live below the poverty level (Source: U.S. Census, American Community Survey 5 Year Estimate, 2011-2015).*

## General Health Coverage

- In 2017, 95% of Allen County adults had health care coverage.
- In the past year, 5% of adults were uninsured, increasing to 13% among African Americans. The 2015 BRFSS reported uninsured prevalence rates as 8% for Ohio and 11% for the U.S.
- Eight percent (8%) of adults with children did not have healthcare coverage, compared to 2% of those who did not have children living in their household.
- The following types of health care coverage were used: employer (45%), Medicare (18%), someone else's employer (14%), Medicaid or medical assistance (10%), multiple-including private sources (4%), multiple-including government sources (3%), self-paid plan (3%), military or VA (1%), Health Insurance Marketplace (1%), and Indian Health Service (<1%).

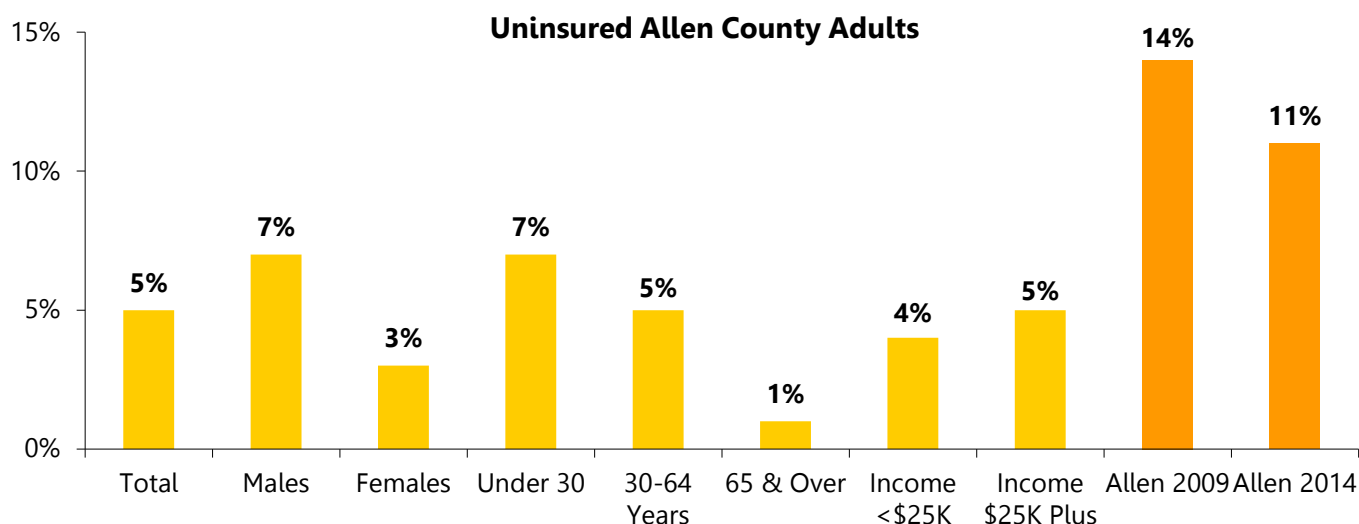
## 5% of Allen County adults were uninsured.

- Allen County adult health care coverage included the following: medical (95%), prescription coverage (91%), immunizations (80%), preventive health (74%), outpatient therapy (69%), dental (66%), mental health (66%), vision (65%), durable medical equipment (49%), alcohol and drug treatment (42%), skilled nursing/assisted living (31%), home care (30%), hospice (30%), and transportation (20%).
- The top reasons uninsured adults gave for being without health care coverage were:
  1. They lost their job or changed employers (40%)
  2. They could not afford to pay the premiums (29%)
  3. Their employer does not/stopped offering coverage (13%)
  4. They became a part-time or temporary employee (11%)
  5. They became ineligible (9%)

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

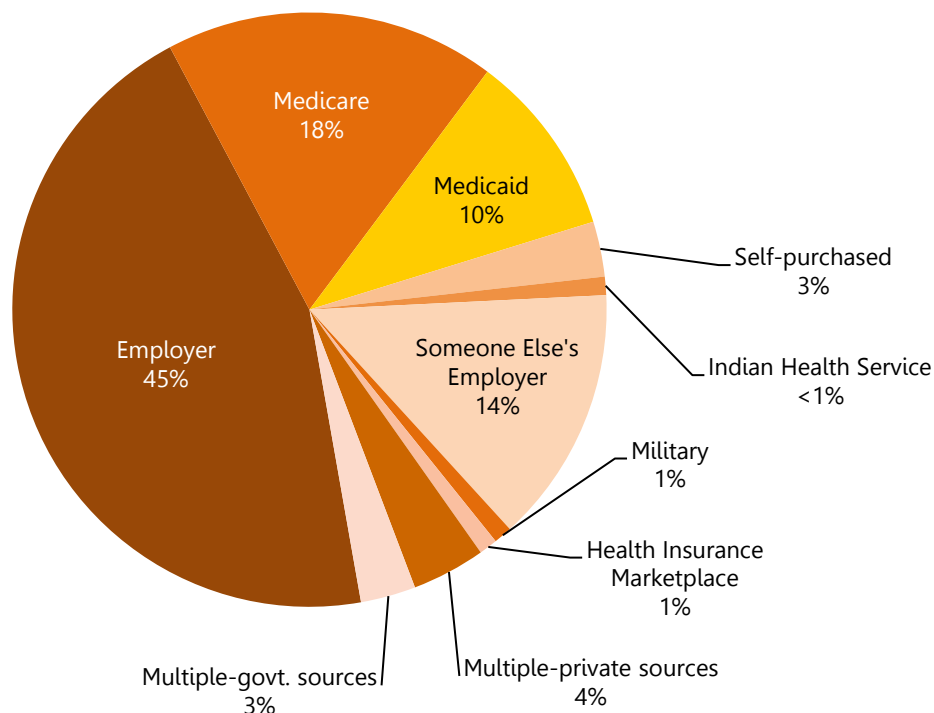
Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Uninsured	14%	11%	5%	8%	11%

The following graph shows the percentages of Allen County adults who were uninsured. Examples of how to interpret the information in the graph include 5% of all Allen County adults were uninsured; 4% of adults with incomes less than \$25,000 reported being uninsured, and 7% of those under age 30. The pie chart shows sources of Allen County adults' health care coverage.



**4% of Allen County adults with incomes less than \$25,000 were uninsured.**

### Source of Health Coverage for Allen County Adults



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

Health Coverage Includes:	Yes	No	Don't Know
Medical	95%	<1%	5%
Prescription Coverage	91%	5%	4%
Immunizations	80%	4%	16%
Preventive Health	74%	5%	21%
Outpatient Therapy	69%	3%	28%
Dental	66%	29%	5%
Mental Health	66%	4%	30%
Vision	65%	28%	7%
Durable Medical Equipment	49%	6%	45%
Alcohol and Drug Treatment	42%	12%	46%
Skilled Nursing/Assisted Living	31%	7%	62%
Home Care	30%	10%	60%
Hospice	30%	8%	62%
Transportation	20%	28%	52%

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

Objective	Allen County 2017	Ohio 2015	U.S. 2015	Healthy People 2020 Target
<b>AHS-1.1: Persons under age of 65 years with health care insurance</b>	89% age 20-24 90% age 25-34 97% age 35-44 94% age 45-54 96% age 55-64	84% age 18-24 88% age 25-34 89% age 35-44 93% age 45-54 93% age 55-64	76% age 18-24 74% age 25-34 80% age 35-44 84% age 45-54 87% age 55-64	100%

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

# Health Care Access: Access and Utilization

## Key Findings

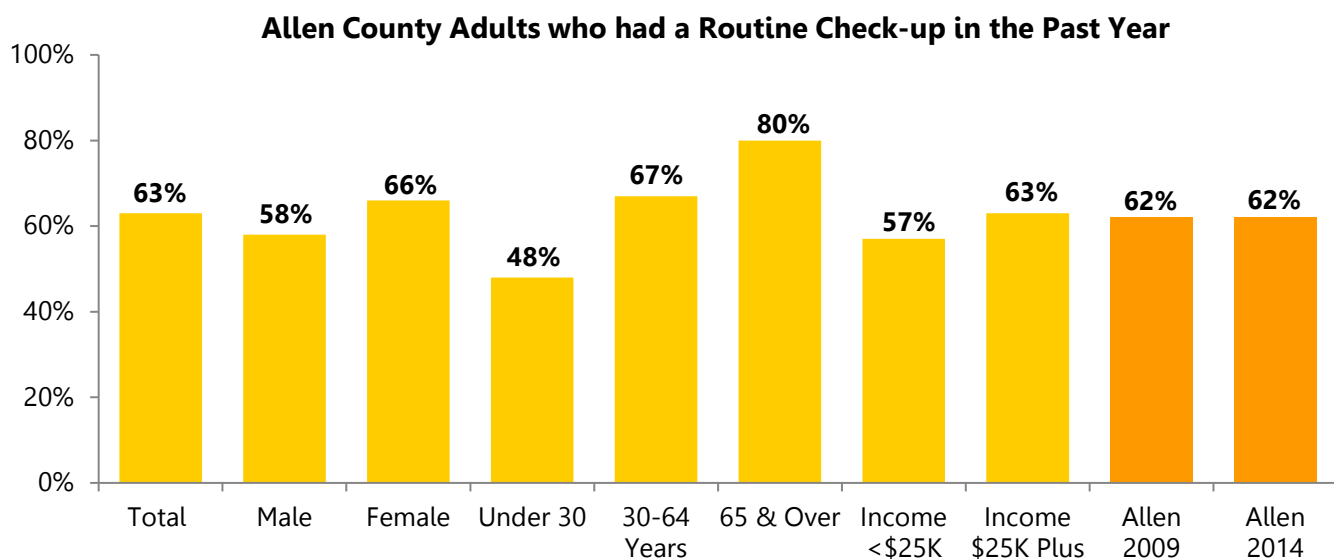
*The 2017 health assessment identified that 63% of Allen County adults had visited a doctor for a routine checkup in the past year. Thirty-two percent (32%) of adults went outside of Allen County for health care services in the past year.*

## Health Care Access and Utilization

- Almost two-thirds (63%) of Allen County adults visited a doctor for a routine checkup in the past year, increasing to 80% of those over the age of 65.
- Adults with health care coverage were more likely to have visited a doctor for a routine checkup in the past year (65%), compared to 21% of those without health care coverage.
- Adults visited the following places for health care services or advice: a doctor's office (80%), urgent care center (34%), a hospital emergency room (26%), family and friends (26%), internet (22%), chiropractor (17%), Health Partners of Western Ohio (10%), in-store health clinic (4%), alternative therapies (3%), VA (2%), Community Health Services (2%), telemedicine (1%), e-visit (1%), and some other kind of place (2%). Two percent (2%) of adults indicated they had no usual place for health care services.
- Eighty-eight percent (88%) of adults indicated they had a usual source of medical care, decreasing to 83% of those with incomes less than \$25,000 and 78% of African Americans.
- Reasons for not having a usual source of medical care included the following: had two or more usual places (26%), had not needed a doctor (16%), cost (13%), no insurance (7%), did not know where to go (7%), do not like/trust/ believe in doctors (2%), previous doctor unavailable/moved (2%), not accepting Medicare or Medicaid (2%), language barrier (1%), outstanding bill (1%), and other reasons (7%). Eight percent (8%) of adults indicated multiple reasons for not having a usual source of medical care.
- The following might prevent Allen County adults from seeing a doctor if they were sick, injured, or needed some type of health care: cost (32%), hours not convenient (13%), could not get time off work (11%), difficult to get an appointment (10%), worried they might find something wrong (8%), doctor would not take their insurance (6%), frightened of the procedure or doctor (4%), difficult to find/no transportation (4%), could not find childcare (3%), do not trust or believe doctors (2%), discrimination (<1%), and some other reason (2%).
- Nearly one-third (32%) of adults went outside of Allen County for the following health care services in the past year: specialty care (12%), dental services (10%), primary care (9%), cancer care (3%), orthopedic care (3%), pediatric care (3%), mental health care/counseling services (1%), addiction services (1%), obstetrics/ gynecology (1%), cardiac care (1%), pediatric therapies (<1%), and other services (9%).
- Half (50%) of adults reported feeling extremely confident filling out medical records by themselves. An additional 30% felt quite a bit confident, 14% felt somewhat confident, and 3% felt a little bit confident. Three percent (3%) of adults did not feel confident at all.
- Almost one-fourth (23%) of adults did not get prescriptions from their doctor filled in the past year.
- Those who did not get their prescriptions filled gave the following reasons: no prescriptions to be filled (44%), cost (36%), side effects (13%), no generic equivalent (13%), they did not think they needed it (11%), they stretched their current prescription by taking less than prescribed (9%), no insurance (8%), they were taking too many medications (7%), fear of addiction (2%), and transportation (1%).



The following graph shows the percentage of Allen County adults who had a routine check-up in the past year. Examples of how to interpret the information on the first graph include: 63% of all Allen County adults had a routine check-up in the past year, including 58% of all Allen County males and 80% of those 65 years and older.

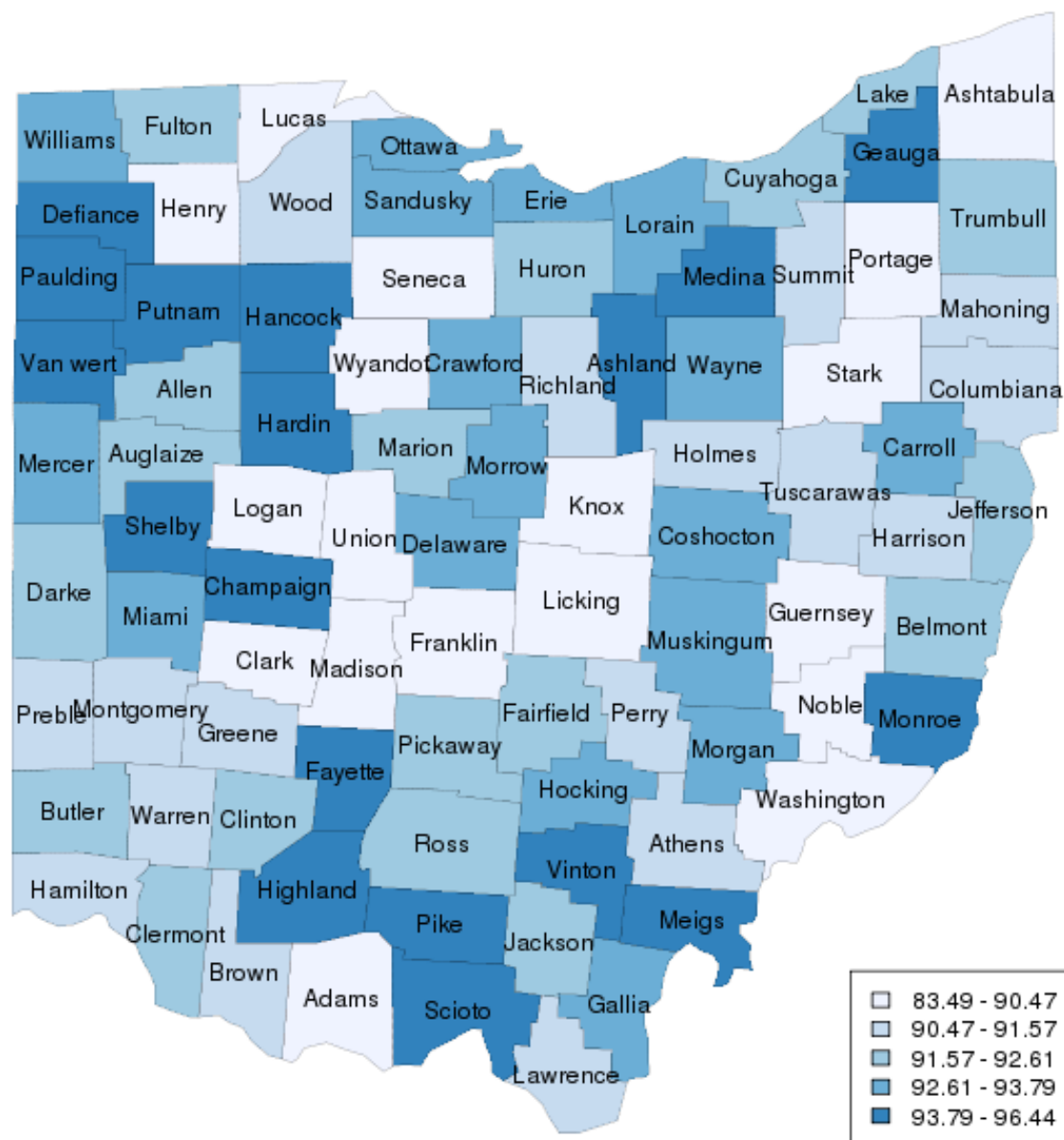


Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Visited a doctor for a routine checkup in the past year	62%	62%	63%	72%	70%

*The following map shows the estimated proportion of all adults, ages 19 years and older, with family incomes at 0% Federal Poverty Level (FPL) or more with a usual source of care.*

- Ninety-two percent (92%) of Allen County adults, ages 19 years, and older, had a usual source of care.
- Ninety-one percent (91%) of Ohio adults, ages 19 years, and older, had a usual source of care.

**Estimated Proportion: Usual Source of Care, All Adults, Ages 19 and Older with Family Incomes 0% FPL or More (2015)**

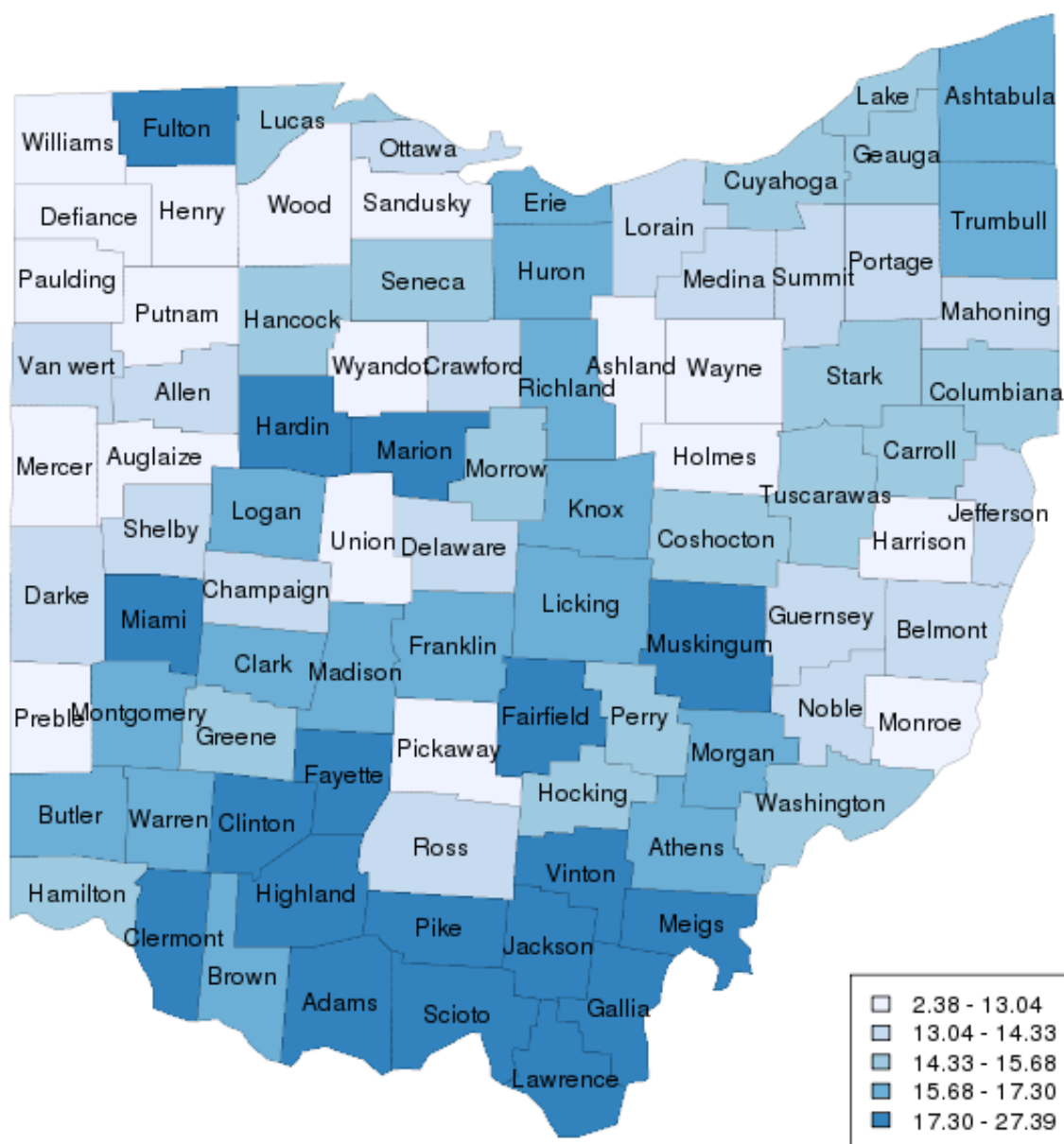


*(Source: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015)*

*The following map shows the estimated proportion of all adults, ages 19 years and older, with family incomes at 0% Federal Poverty Level (FPL) or more with unmet needs in prescription medication.*

- Fourteen percent (14%) of Allen County adults, ages 19 years and older, had unmet needs in prescription medication.
- Fifteen percent (15%) of Ohio adults, ages 19 years and older, had unmet needs in prescription medication.

**Estimated Proportion: Unmet Needs in Prescription Medication,  
All Adults, Ages 19 and Older with Family Incomes 0% FPL or More (2015)**



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

# Healthcare Access: Preventive Medicine

## Key Findings

*Almost three-quarters (73%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Nearly three-fifths (59%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.*

## Preventive Medicine

- Almost half (46%) of Allen County adults had a flu vaccine during the past 12 months.
- Almost three-quarters (72%) of Allen County adults ages 65 and over had a flu vaccine in the past 12 months. The 2015 BRFSS reported that 56% of Ohio and 61% of U.S. adults ages 65 and over had a flu vaccine in the past year.
- More than one-third (37%) of adults have had a pneumonia shot in their life, increasing to 73% of those ages 65 and over. The 2015 BRFSS reported that 72% of Ohio and 73% of U.S. adults ages 65 and over had a pneumonia shot in their life.
- Allen County adults have had the following vaccines: MMR in their lifetime (66%); tetanus booster (including Tdap) in the past 10 years (64%); chicken pox in their lifetime (43%); Zoster (shingles) vaccine in their lifetime (19%); and human papillomavirus (HPV) vaccine in their lifetime (12%).
- In the past year, adults reported their doctor talked to them about the following topics: family history (35%); weight control (35%); immunizations (32%); safe use of prescription medication (27%); depression, anxiety, or emotional problems (22%); tobacco use (20%); family planning (13%); safe use of opiate-based pain medications (11%); alcohol use (11%); sexually transmitted diseases (10%); injury prevention (9%); self-testicular exams (7%); illicit drug abuse (3%); and domestic violence (2%).

## Preventive Health Screenings and Exams

- Nearly three-fifths (59%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- Allen County adults have had the following cancer screenings: colorectal cancer in the past years (30%), skin cancer in the past year (13%), oral cancer in the past year (11%), and lung cancer in the past 3 years (5%).
- In the past year, 55% of Allen County women ages 40 and over have had a mammogram.
- In the past year, almost two-fifths (38%) of men ages 50 and over have had a PSA test.
- See the Women's and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Allen County adults.

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
<b>Had a pneumonia vaccination</b> (ages 65 and over)	61%	55%	73%	72%	73%
<b>Had a flu vaccine in the past year</b> (ages 65 and over)	70%	75%	72%	58%	61%
<b>Had a sigmoidoscopy/colonoscopy in the past 5 years</b> (ages 50 and over)	54%	53%	59%	68%*	69%*

\* 2014 BRFSS data

## Allen County Adult Health Screening Results

General Screening Results	Total
Diagnosed with High Blood Pressure	34%
Diagnosed with High Blood Cholesterol	34%
Diagnosed with Diabetes	13%
Survived a Heart Attack	5%

*Note: Percentages based on all Allen County adults surveyed*

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

Healthcare Topics	Total
Weight Control including diet and physical activity	35%
Family history	35%
Immunizations	32%
Safe use of prescription medication	27%
Depression, anxiety or emotional problems	22%
Tobacco use	20%
Family planning	13%
Alcohol use	11%
Safe use of opiate-based pain medication	11%
Sexually transmitted diseases (STD's)	10%
Injury prevention such as safety belt use, helmet use & smoke detectors	9%
Self-testicular exams	7%
Illicit drug use	3%
Domestic violence	2%

## Healthy People 2020 Immunization and Infectious Diseases (IID)

Objective	Allen County 2017	Ohio 2015	U.S. 2015	Healthy People 2020 Target
<b>IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease</b>	73%	72%	73%	90%

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

# Healthcare Access: Women's Health

## Key Findings

*In 2017, more than half (55%) of Allen County women over the age of 40 reported having a mammogram in the past year. Fifty-nine percent (59%) of females ages 19 and over had a clinical breast exam and 42% had a Pap smear to detect cancer of the cervix in the past year. Three percent (3%) of women survived a heart attack at some time in their life. Nearly two-fifths (39%) were obese, 32% had high blood pressure, 31% had high blood cholesterol, and 17% were identified as smokers, known risk factors for cardiovascular diseases.*

## Women's Health Screenings

- Nearly two-thirds (65%) of women had a mammogram at some time, and about two-fifths (38%) 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 72% had one in the past two years. The 2014 BRFSS reported that 72% of women 40 and over in Ohio and 73% in the U.S., had a mammogram in the past two years.
- Most (90%) Allen County women had a clinical breast exam at some time in their life, and 59% had one within the past year. Almost three-fourths (74%) of women ages 40 and over had a clinical breast exam in the past two years. The 2014 BRFSS reported that 75% of women 40 and over in Ohio and 77% in the U.S. had a clinical breast exam in the past two years.
- Eighty-four percent (84%) of Allen County women had a Pap smear and 42% reported having had the exam in the past year. Sixty-one percent (61%) of women had a Pap smear in the past three years. The 2014 BRFSS indicated that 74% of Ohio and 75% of U.S. women had a Pap smear in the past three years.

## Women's Health Concerns

- In 2017, the health assessment determined that 3% of women had survived a heart attack at some time in their life.
- Four percent (4%) of Allen County women reported a health professional diagnosed them with coronary heart disease.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Allen County, the 2017 health assessment has identified that:
  - 66% of women were overweight or obese (61% Ohio, 59% U.S., 2015 BRFSS)
  - 32% were diagnosed with high blood pressure (31% Ohio, 30% U.S., 2015 BRFSS)
  - 31% were diagnosed with high blood cholesterol (36% Ohio, 35% U.S., 2015 BRFSS)
  - 17% of all women were current smokers (20% Ohio, 15% U.S., 2015 BRFSS)
  - 11% had been diagnosed with diabetes (11% Ohio, 10% U.S., 2015 BRFSS)
- From 2013-2015, major cardiovascular diseases (heart disease and stroke) accounted for 29% of all female deaths in Allen County (Source: CDC Wonder, Underlying Cause of Death).

### Allen County Female Leading Causes of Death, 2013 – 2015

1. Heart Disease (22% of all deaths)
2. Cancers (22%)
3. Stroke (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Alzheimer's (5%)

Source: CDC Wonder, 2013-2015

### Ohio Female Leading Causes of Death, 2013 – 2015

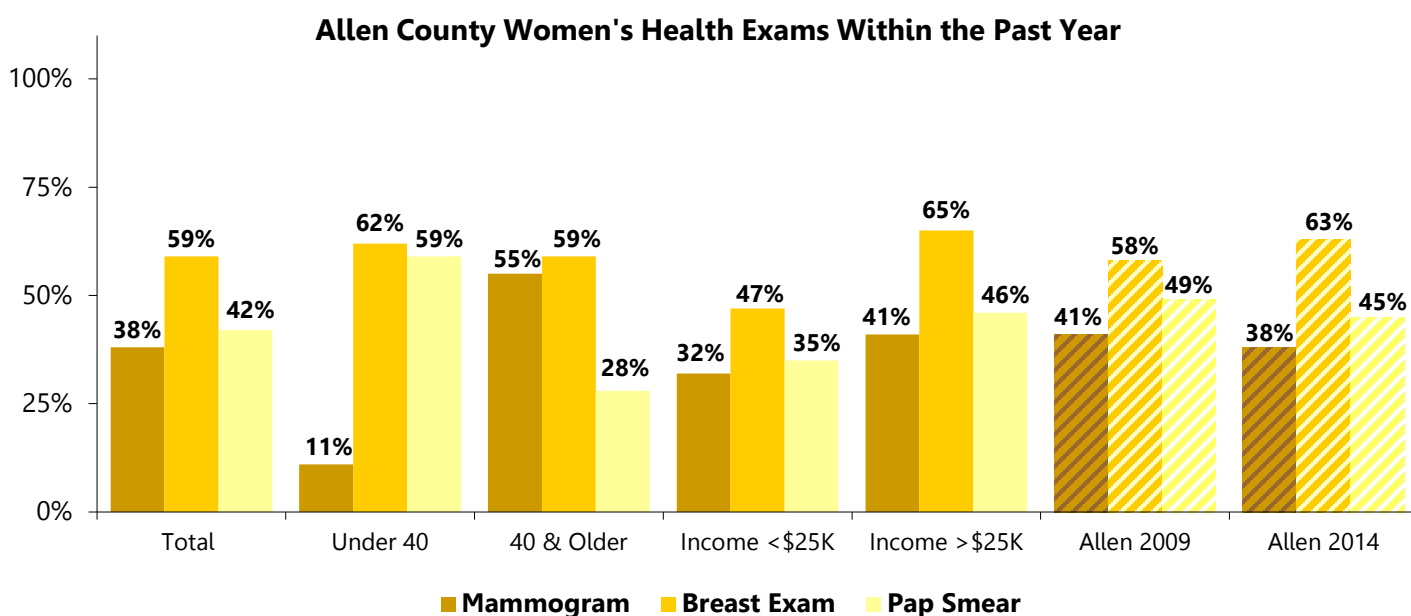
1. Heart Diseases (23% of all deaths)
2. Cancers (21%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (6%)
5. Alzheimer's (5%)

Source: CDC Wonder, 2013-2015

## Pregnancy

- Almost one-fourth (23%) of Allen County women had been pregnant in the past 5 years.
- During their last pregnancy, Allen County women experienced the following: got a prenatal appointment in the first 3 months (57%), took a multi-vitamin with folic acid during pregnancy (49%), got a dental exam (43%), took a multi-vitamin with folic acid pre-pregnancy (32%), took folic acid during pregnancy (20%), received WIC benefits (19%), took folic acid pre-pregnancy (17%), smoked cigarettes (10%), experienced depression (9%), experienced domestic violence (5%), consumed alcoholic beverages (1%), used marijuana (1%), used e-cigarettes (1%), and used opioids (1%).

*The following graph shows the percentage of Allen County females that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 38% of Allen County females had a mammogram within the past year; 59% had a clinical breast exam, and 42% had a Pap smear.*



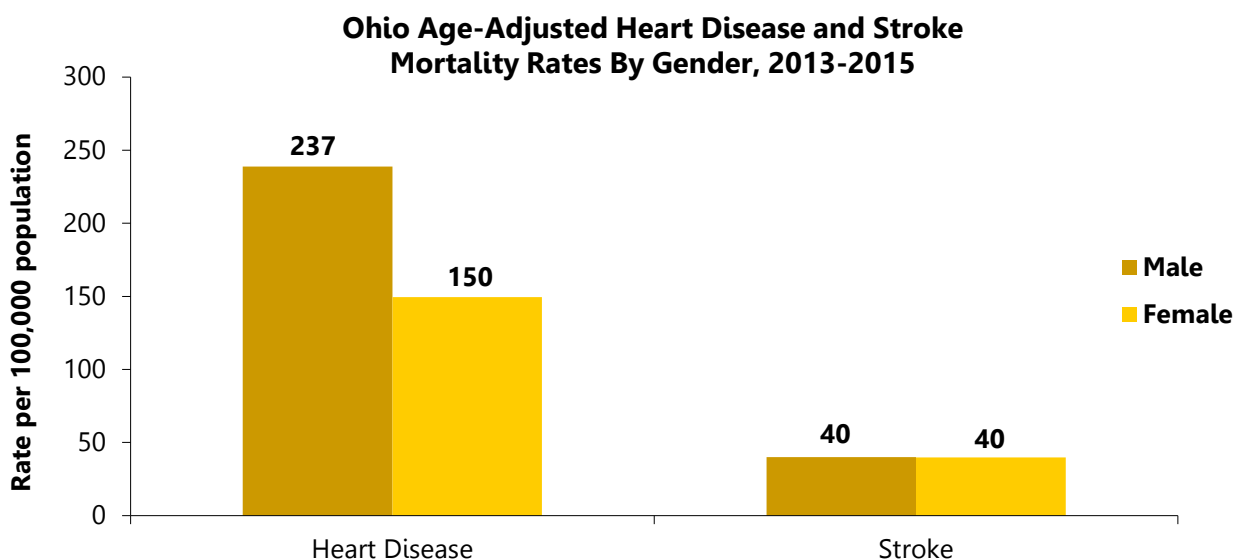
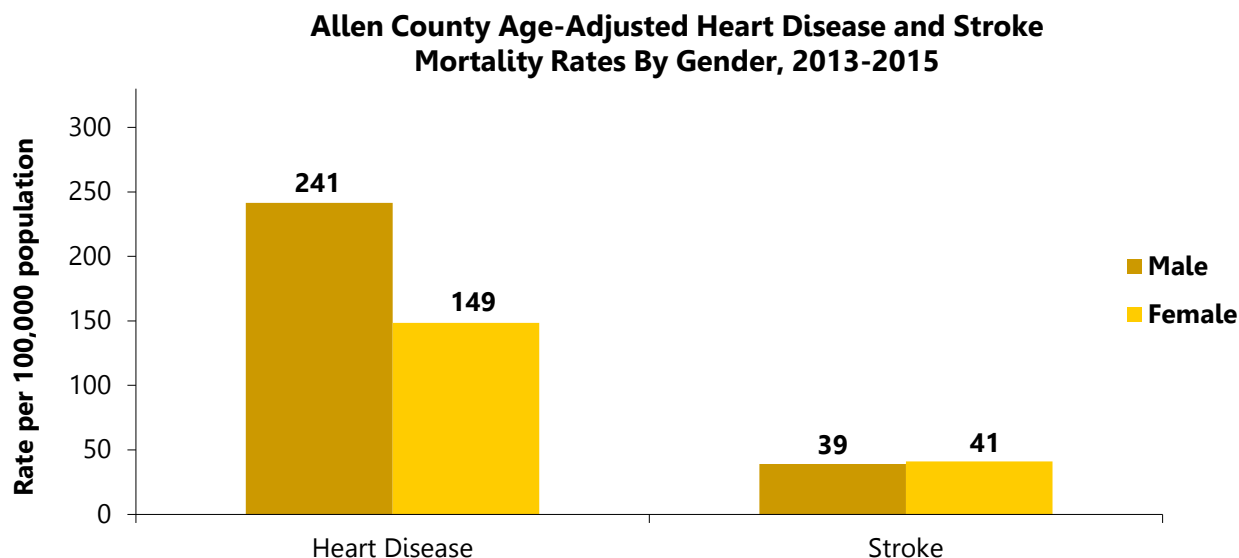
Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2014	U.S. 2014
Had a clinical breast exam in the past two years (age 40 & over)	79%	80%	74%	N/A	N/A
Had a mammogram in the past two years (age 40 & over)	69%	76%	72%	72%*	73%*
Had a Pap smear in the past three years	74%	74%	61%	74%*	75%*

N/A – Not available

\*2014 BRFSS data

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

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



*(Source: CDC Wonder, 2013-2015)*



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

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

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

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

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

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

# Healthcare Access: Men's Health

## Key Findings

In 2017, 38% of Allen County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. More than one-third (35%) of men had been diagnosed with high blood pressure, 37% had high blood cholesterol, and 19% were identified as smokers, which, along with obesity (32%), are known risk factors for cardiovascular diseases.

## Men's Health Screenings and Concerns

- More than one-third (37%) of Allen County males had a Prostate-Specific Antigen (PSA) test at some time in their life, and 22% had one in the past year.
- More than two-thirds (68%) of males age 50 and over had a PSA test at some time in their life, and 38% had one in the past year.
- From 2013-2015, major cardiovascular diseases (heart disease and stroke) accounted for 30% of all male deaths in Allen County (Source: CDC Wonder).

### Allen County Male Leading Causes of Death, 2013 – 2015

1. Cancers (26% of all deaths)
2. Heart Disease (25%)
3. Chronic Lower Respiratory Diseases (8%)
4. Accidents/ Unintentional Injury (4%)
5. Stroke (4%)

(Source: CDC Wonder, 2013-2015)

### Ohio Male Leading Causes of Death, 2013 – 2015

6. Heart Disease (25% of all deaths)
7. Cancers (23%)
8. Accidents/ Unintentional Injury (7%)
9. Chronic Lower Respiratory Disease (6%)
10. Stroke (4%)

(Source: CDC Wonder, 2013-2015)

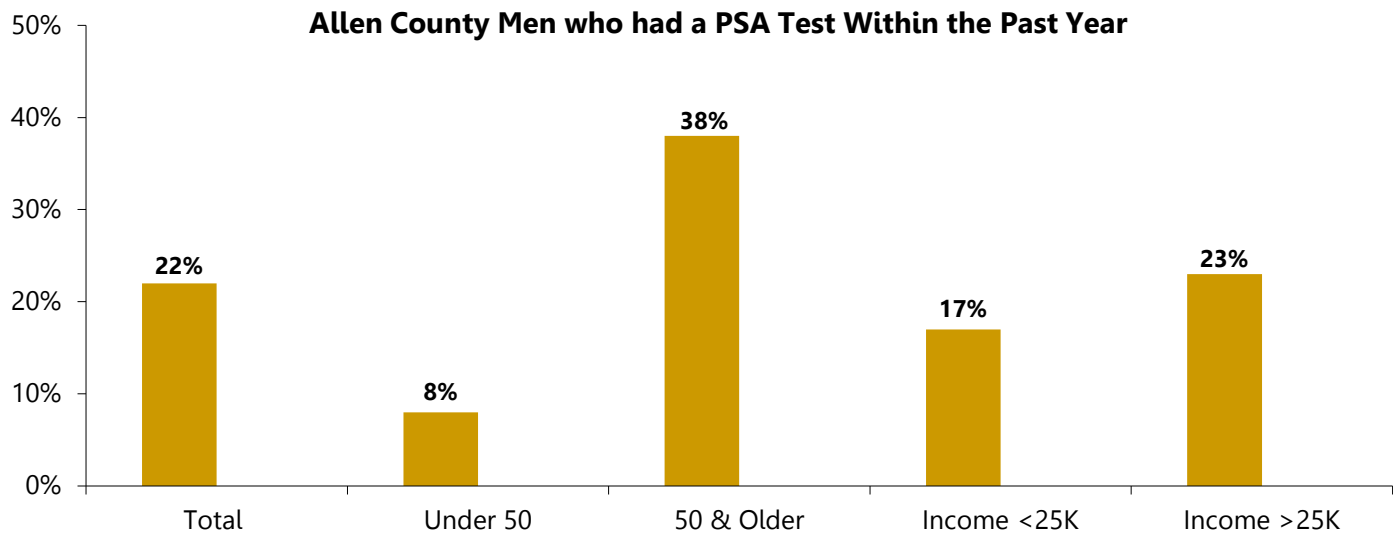
## 22% of Allen County males had a PSA test in the past year.

- In 2017, the health assessment determined that 7% of men had a heart attack at some time in their life.
- Eight percent (8%) of Allen County men reported a health professional diagnosed them with coronary heart disease.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Allen County, the 2017 health assessment identified that:
  - 74% of men were overweight or obese (71% Ohio, 70% U.S. 2015 BRFSS)
  - 37% were diagnosed with high blood cholesterol (38% Ohio, 38% U.S., 2015 BRFSS)
  - 35% were diagnosed with high blood pressure (38% Ohio, 34% U.S., 2015 BRFSS)
  - 19% of all men were current smokers (23% Ohio, 19% U.S. 2015 BRFSS)
  - 14% had been diagnosed with diabetes (11% Ohio, 11% U.S., 2015 BRFSS)
- From 2013-2015, the leading cancer deaths for Allen County males were lung, prostate, and colon and rectum cancers. Statistics from the same period for Ohio males indicate that lung, colon and rectum, and prostate cancers were the leading cancer deaths (Source: CDC Wonder).

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2014	U.S. 2014
Had a PSA test in within the past two years (men ages 40 & over)	N/A	N/A	47%	43%	43%

N/A- Not available

*The following graph shows the percentage of Allen County males that had a PSA test in the past year. Examples of how to interpret the information shown on the graph include: 22% of Allen County males had a PSA test within the past year, increasing to 38% of those ages 50 and older.*



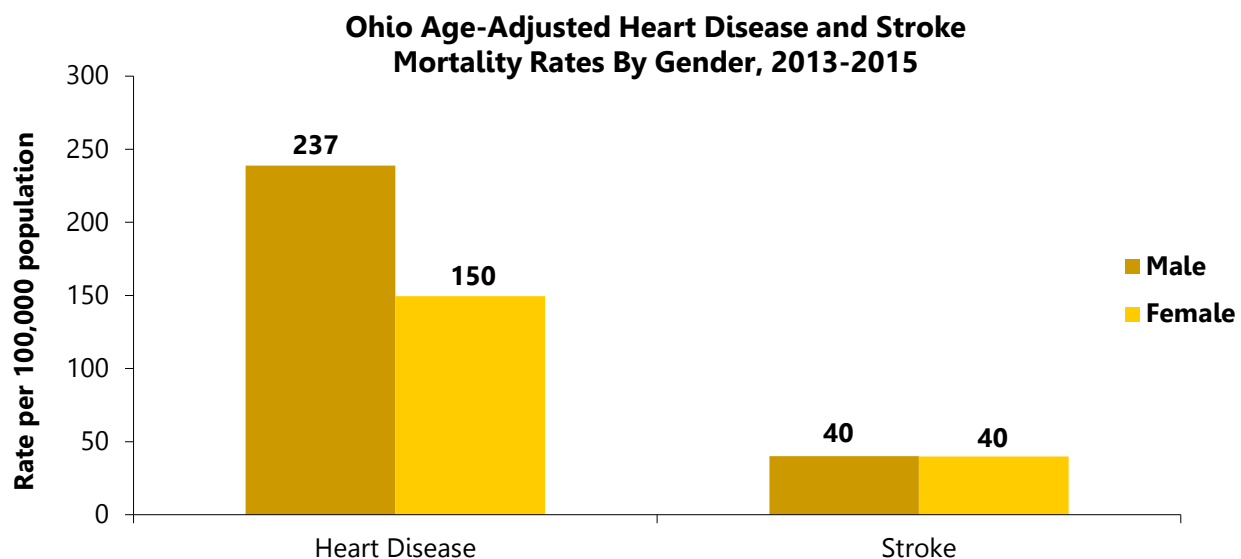
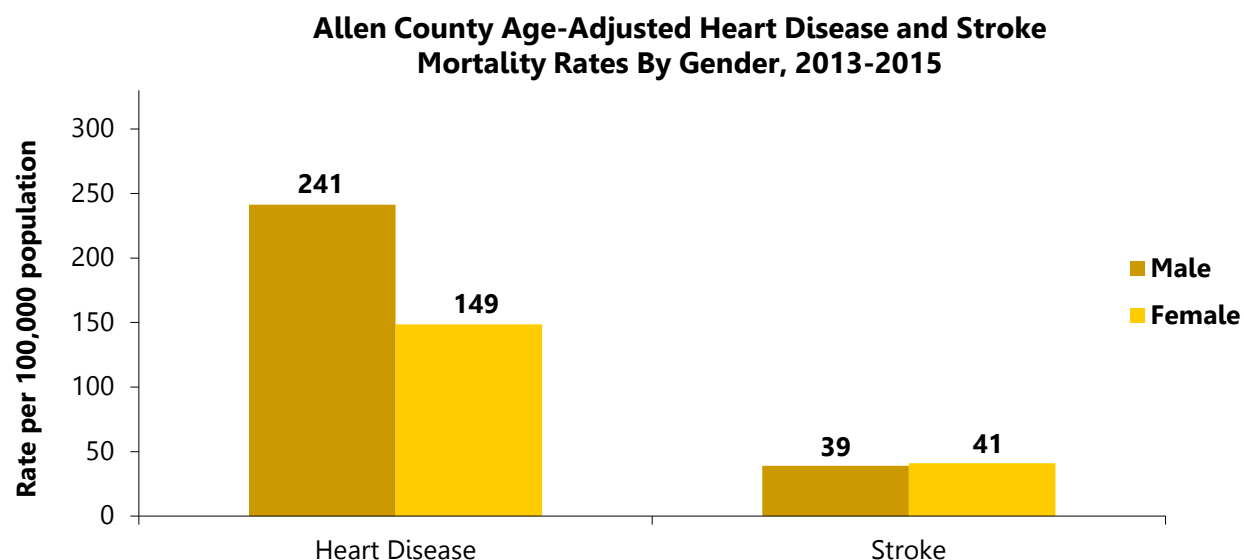
### Men's Health Data

- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- 17% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 30% had 5 or more drinks in 1 day at least once in the past year.
- Only 52% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- 35% of men 20 years and over are obese.
- There are 12% of males under the age of 65 without 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, March 31, 2017)*

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

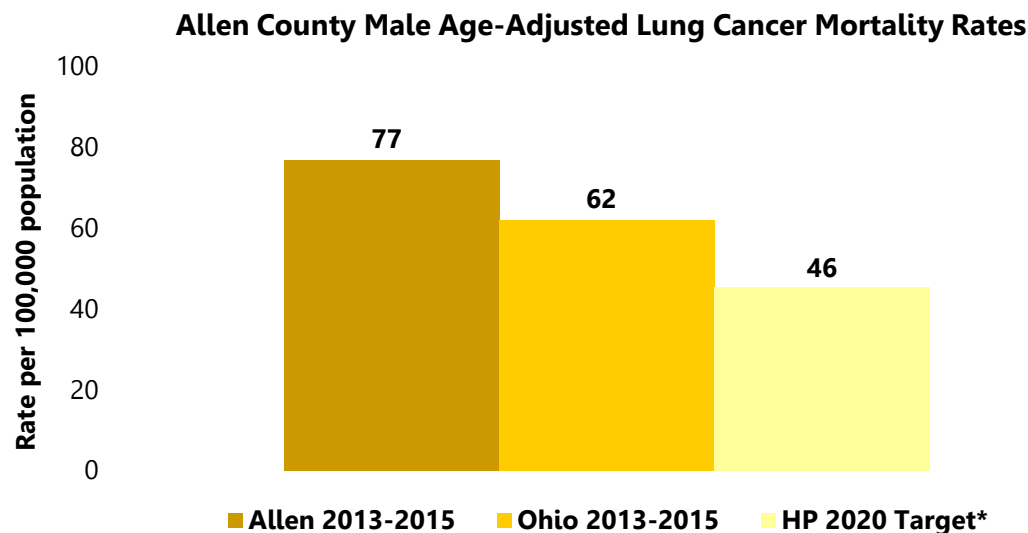
- From 2013-2015, the Allen County and Ohio male age-adjusted mortality rate was higher than the female rate for heart disease.
- The Allen County male age-adjusted heart disease mortality rate was higher than the Ohio male rate.



*(Source: CDC Wonder 2013-2015)*

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

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



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

### Prostate Cancer Awareness

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

*(Source: Centers for Disease Control and Prevention, Prostate Cancer Awareness, March 8, 2017)*

# Healthcare Access: Oral Health

## Key Findings

*The health assessment has determined more than three-fifths (62%) of Allen County adults visited a dentist or dental clinic in the past year. The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the past year.*

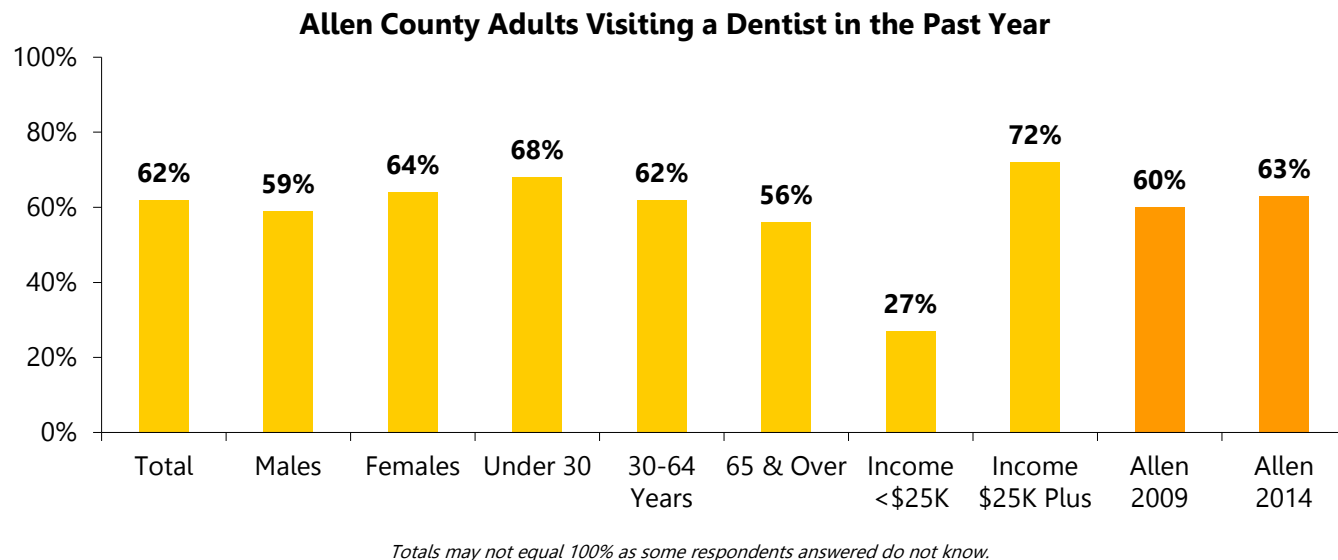
## Access to Dental Care

- In the past year, 62% of Allen County adults had visited a dentist or dental clinic, decreasing to 53% of African Americans and 27% of those with incomes less than \$25,000.
- The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.
- Almost three-fourths (72%) of Allen County adults with dental insurance had been to the dentist in the past year, compared to 49% of those without dental insurance.
- When asked the main reason for not visiting a dentist in the past year, 23% said cost; 18% had no oral health problems/had not thought of it; 15% had dentures; 13% said fear, apprehension, nervousness, pain, and dislike going; 5% could not find a dentist taking new Medicaid patients; 3% did not have/know a dentist; 1% could not get into a dentist; and 1% said their dentist did not accept their medical insurance. 4% of adults selected multiple reasons for not visiting a dentist in the past year.

Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never
<b>Time Since Last Visit to Dentist/Dental Clinic</b>					
<b>Males</b>	59%	12%	12%	12%	<1%
<b>Females</b>	64%	13%	9%	10%	1%
<b>Total</b>	62%	12%	11%	11%	1%

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2014	U.S. 2014
<b>Adults who had visited the dentist in the past year</b>	60%	63%	62%	65%	65%

*The following graph provides information about the frequency of Allen County adult dental visits. Examples of how to interpret the information include 62% of all Allen County adults had been to the dentist in the past year, including 68% of those under the age of 30 and 27% of those with incomes less than \$25,000.*



### Oral Health Basics

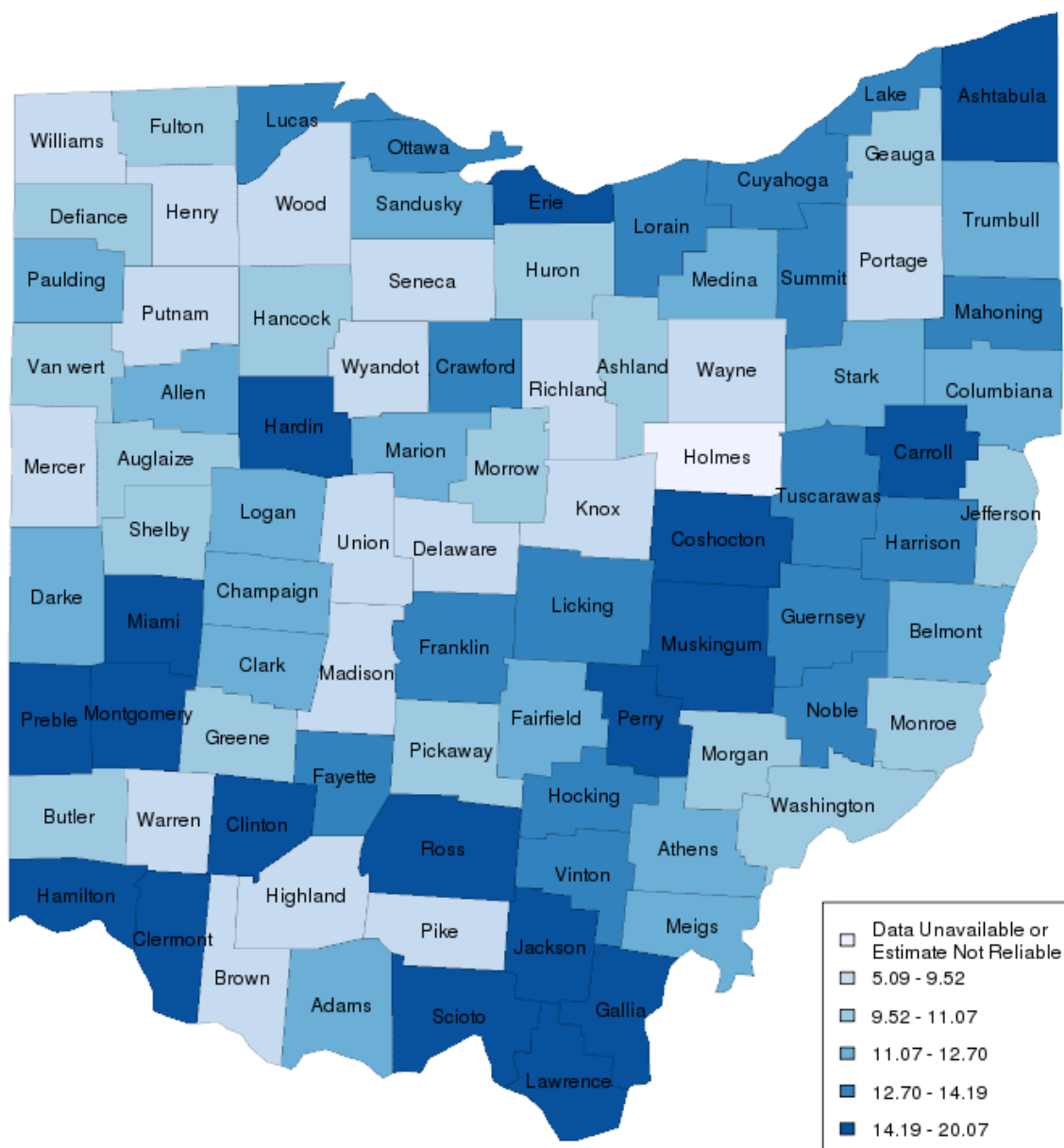
- Oral health affects our ability to speak, smile, eat, and show emotions. It also affects self-esteem, school performance, and attendance at work and school. Oral diseases—which range from cavities to gum disease to oral cancer—cause pain and disability for millions of Americans. They also cost taxpayers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

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

*The following map shows the estimated proportion of all adults, ages 19 years and older, with family incomes at 0% Federal Poverty Level (FPL) or more with unmet needs in dental care.*

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

**Estimated Proportion: Unmet Needs in Dental Care,  
All Adults, Ages 19 Years and Older with Family Incomes 0% FPL or More (2015)**



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



# Health Behaviors: Health Status Perceptions

## Key Findings

*In 2017, almost three-fifths (57%) of Allen County adults rated their health status as excellent or very good. Conversely, 15% of adults described their health as fair or poor, increasing to 29% of those with incomes less than \$25,000.*

### Adults Who Rated General Health Status Excellent or Very Good

- Allen County 57% (2017)
- Ohio 52% (2015)
- U.S. 52% (2015)

*(Source: BRFSS 2015 for Ohio and U.S.)*

## General Health Status

- Almost three-fifths (57%) of Allen County adults rated their health as excellent or very good. Allen County adults with higher incomes (65%) were most likely to rate their health as excellent or very good, compared to 33% of those with incomes less than \$25,000.
- Fifteen percent (15%) of adults rated their health as fair or poor. The 2015 BRFSS has identified that 17% of Ohio and 16% of U.S. adults self-reported their health as fair or poor.
- Allen County adults were most likely to rate their health as fair or poor if they:
  - Were separated (50%)
  - Had been diagnosed with diabetes (38%)
  - Had an annual household income under \$25,000 (29%)
  - Had high blood pressure (25%) or high blood cholesterol (22%)
  - Were African American (24%)
  - Were 65 years of age or older (23%)

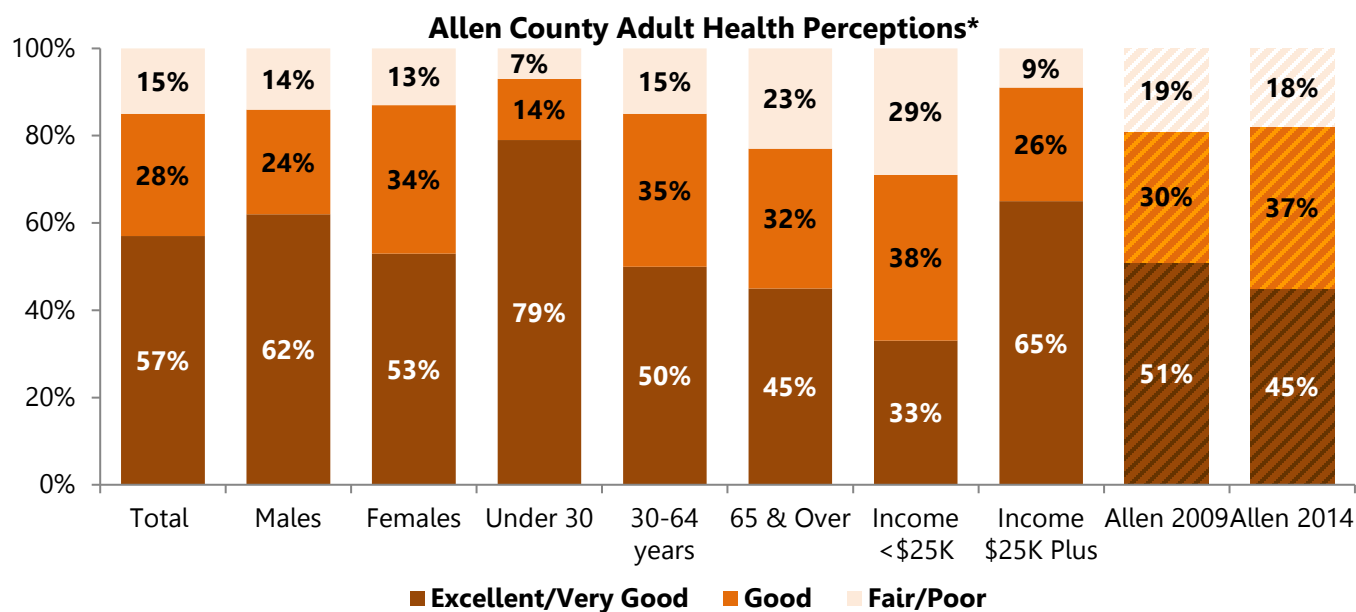
## Physical Health Status

- Nearly one-fourth (24%) of Allen County adults rated their physical health as not good on four or more days in the previous month.
- Allen County adults reported their physical health as not good on an average of 4.2 days in the previous month. Ohio and U.S. adults reported their physical health as not good on an average of 3.7 days and 3.6 days, respectively, in the previous month *(Source: 2015 BRFSS as compiled by 2017 County Health Rankings)*.
- Allen County adults were most likely to rate their physical health as not good if they:
  - Had an annual household income under \$25,000 (35%)
  - Were African American (35%)
  - Were 65 years of age or older (28%)

## Mental Health Status

- More than one-quarter (27%) of Allen County adults rated their mental health as not good on four or more days in the previous month.
- Allen County adults reported their mental health as not good on an average of 4.2 days in the previous month. Ohio and U.S. adults reported their mental health as not good on an average of 4.0 days and 3.7 days, respectively, in the previous month *(Source: 2015 BRFSS as compiled by 2017 County Health Rankings)*.
- More than one-fourth (28%) of adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.
- Allen County adults were most likely to rate their mental health as not good if they:
  - Had an annual household income under \$25,000 (40%)

The following graph shows the percentage of Allen County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 57% of all Allen County adults, 79% of those under age 30, and 45% of those ages 65 and older rated their health as excellent or very good. The table shows the percentage of adults with poor physical and mental health in the past 30 days.



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

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
<b>Physical Health Not Good in Past 30 Days*</b>					
<b>Males</b>	52%	25%	5%	3%	12%
<b>Females</b>	48%	21%	8%	3%	17%
<b>Total</b>	49%	22%	7%	3%	15%
<b>Mental Health Not Good in Past 30 Days*</b>					
<b>Males</b>	52%	21%	4%	1%	17%
<b>Females</b>	53%	15%	7%	4%	18%
<b>Total</b>	52%	18%	6%	3%	17%

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

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Rated health as excellent or very good	51%	45%	57%	52%	52%
Rated health as fair or poor	19%	18%	15%	17%	17%
Rated their mental health as not good on four or more days in the previous month	22%	23%	27%	N/A	N/A
Average days that physical health not good in past month	N/A	3.2	4.2	3.7*	3.6*
Average days that mental health not good in past month	N/A	3.3	4.2	4.0*	3.7*
Average days that poor physical or mental health kept them from doing their usual activities in past month	N/A	2.2	2.8	N/A	N/A

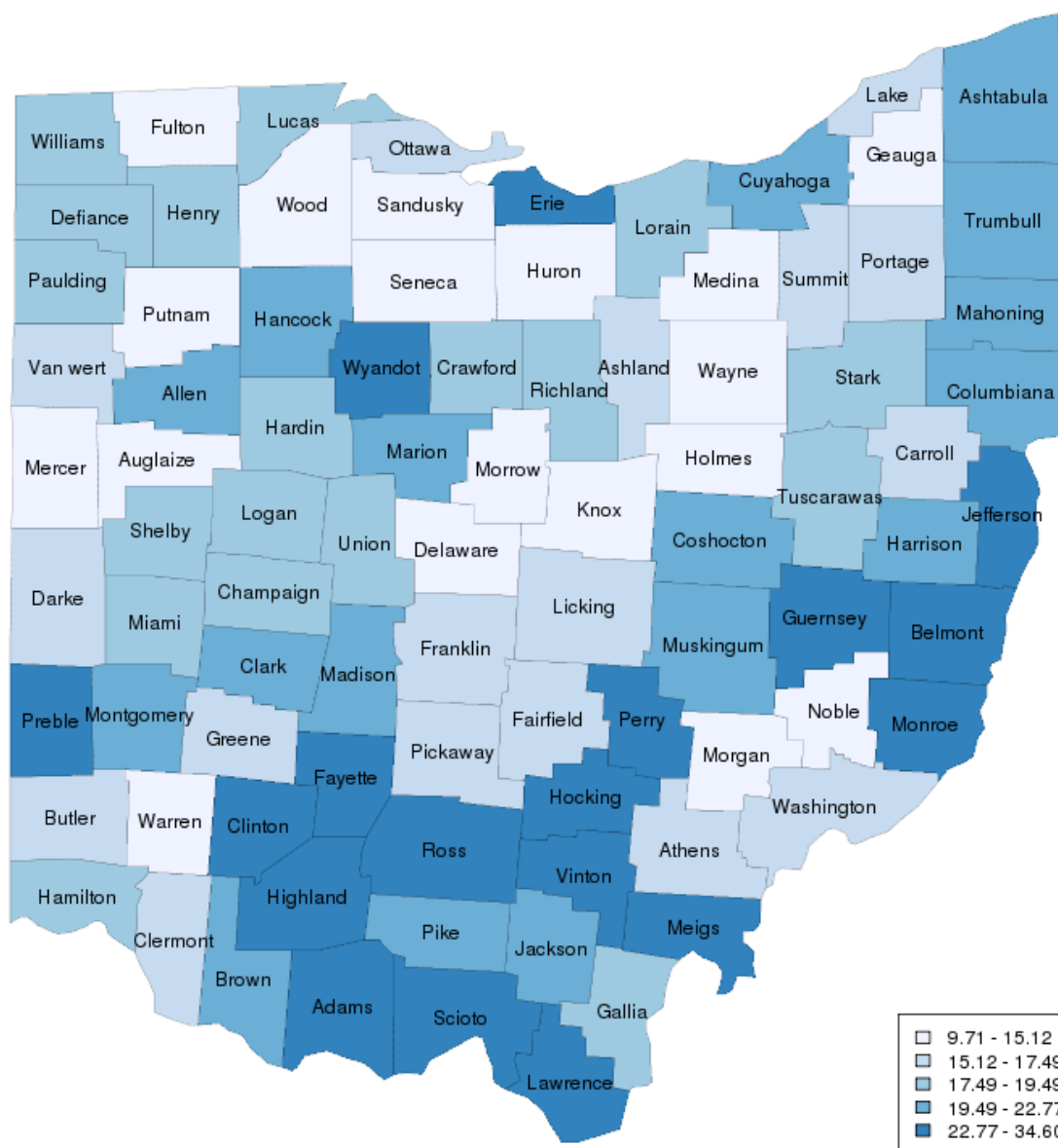
\*2015 BRFSS data as compiled by 2017 County Health Rankings

N/A – Not Available

*The following map shows the estimated proportion of all adults, ages 19 years and older, with family incomes of 0% Federal Poverty Level (FPL) or more who rated their overall health as fair/poor.*

- Twenty-two percent (22%) of Allen County adults, ages 19 years and older, rated their overall health as fair/poor.
- Eighteen percent (18%) of Ohio adults, ages 19 years and older, rated their overall health as fair/poor.

**Estimated Proportion: Poor/Fair Overall Health, All Adults,  
Ages 19 Years and Older with Family Incomes 0% FPL or More (2015)**



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

# Health Behaviors: Adult Weight Status

## Key Findings

*The 2017 health assessment identified that 70% of Allen County adults were overweight or obese based on Body Mass Index (BMI). More than half (54%) of adults were engaging in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.*

## Adult Weight Status

- More than two-thirds (70%) of Allen County adults were either overweight (35%) or obese (35%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
- More than two-fifths (42%) of adults were trying to lose weight, 32% were trying to maintain their current weight or keep from gaining weight, and 4% were trying to gain weight. More than one-in-five (22%) Allen County adults were not doing anything to lose or gain weight.
- Allen County adults did the following to lose weight or keep from gaining weight: exercised (55%); drank more water (47%); ate less food, fewer calories, or foods low in fat (45%); ate a low-carb diet (17%); took diet pills, powders or liquids without a doctor's advice (3%); smoked cigarettes (3%); health coaching (2%); used a weight loss program (2%); went without eating 24 or more hours (1%); participated in a prescribed dietary or fitness program (1%); took prescribed medications (1%); bariatric surgery (<1%); took laxatives (<1%); and vomited after eating (<1%).

**35% of Allen County adults were obese.**

## Physical Activity

- More than half (54%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. 28% of adults exercised 5 or more days per week. More than one-fourth (26%) of adults did not participate in any physical activity in the past week, including 4% who were unable to exercise.
- The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, the CDC also recommends muscle-strengthening activities that work all major muscle groups on 2 or more days per week (Source: CDC, Physical Activity for Everyone).
- Reasons for not exercising included the following: time (20%); too tired (16%); laziness (16%); weather (12%); do not like to exercise (12%); pain or discomfort (9%); could not afford a gym membership (8%); no exercise partner (4%); did not know what activities to do (3%); lack of opportunities for those with physical impairments or challenges (3%); no child care (2%); poorly maintained/no sidewalks (2%); neighborhood safety (2%); no walking, biking trails or parks (1%); transportation (1%); doctor advised them not to exercise (1%); and no gym available (1%).
- Allen County adults spent an average of 2.9 hours watching TV, 1.7 hours on their cell phone, 1.3 hours on the computer (outside of work), and 0.3 hours playing video games on an average day of the week.

## Nutrition

- During the past 7 days, Allen County adults reported eating fruit or 100% fruit juice at the following frequencies: 1 to 3 times per week (33%), 4 to 6 times per week (17%), 1 to 2 times per day (26%), 3 times per day (4%), and 4 or more times per day (3%). Nearly one-fifth (18%) of Allen County adults did not have any servings of fruit in the past 7 days, increasing to 25% of African Americans.

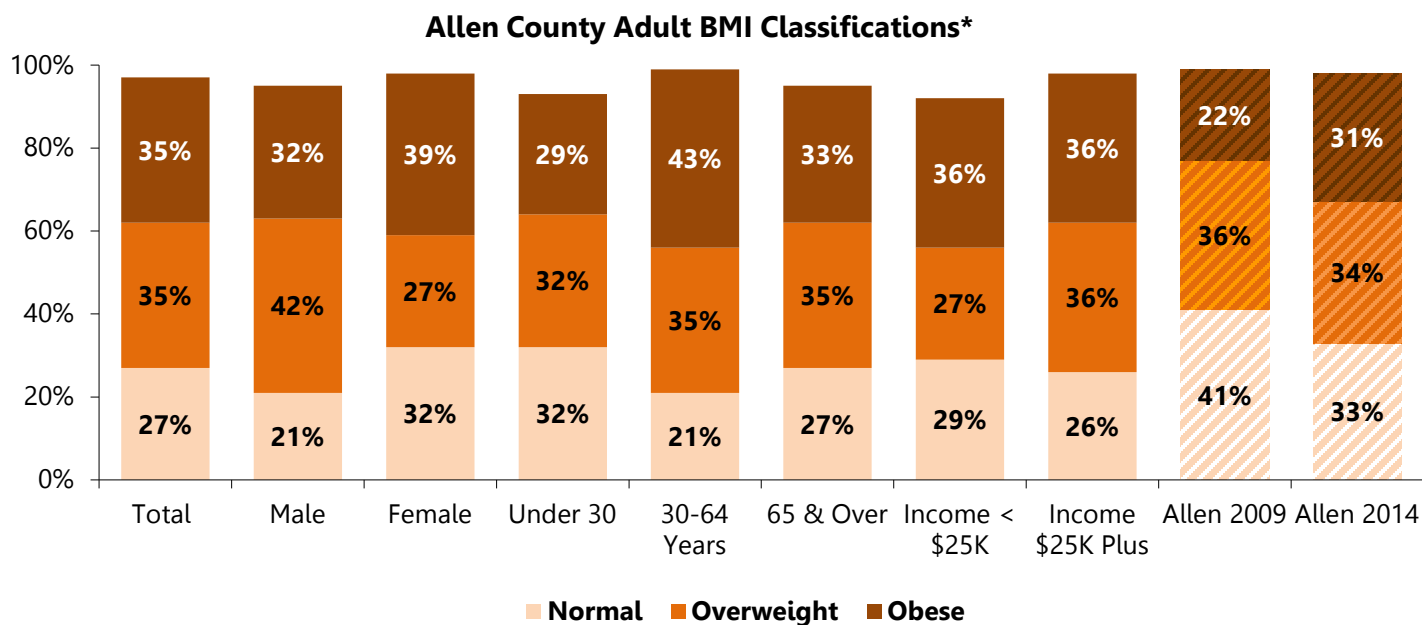
- During the past 7 days, Allen County adults reported eating vegetables at the following frequencies: 1 to 3 times per week (28%), 4 to 6 times per week (25%), 1 to 2 times per day (30%), 3 times per day (9%), and 4 or more times per day (4%). Four percent (4%) of Allen County adults did not have any servings of vegetables in the past 7 days, increasing to 14% of African Americans.
- The American Cancer Society recommends that adults eat at least 2 ½ cups (5 servings) of fruits and vegetables per day to reduce the risk of cancer and to maintain good health.
- Allen County adults purchased their fruit and vegetables from the following places: large grocery stores (80%), local grocery stores (54%), grew their own/garden (16%), Farmer's Market (11%), food pantry (4%), Dollar General Store (3%), mobile produce market (1%), Community Supported Agricultural (CSA) (1%), mail order food service (1%), community garden (<1%), corner/convenience stores (<1%), and other places (2%).
- One-third (33%) of adults drank soda pop, punch, Kool-Aid, sports drinks, energy drinks, or other fruit-flavored drinks at least once per day in the past week. More than one-fourth (28%) of adults did not drink any flavored drinks in the past 7 days, decreasing to 19% of African Americans.
- Allen County adults reported the following barriers in consuming fruits and vegetables: too expensive (11%), no variety (5%), did not like the taste (3%), no access (3%), did not know how to prepare them (2%), stores did not take EBT (<1%), and other reasons (3%). Seventy-nine percent (79%) reported no barriers to consuming fruits and vegetables.
- More than four-fifths (82%) of adults drank water at least once per day in the past week. Two percent (2%) of adults did not drink any water in the past 7 days.
- Adults had access to a wellness program through their employer or spouse's employer with the following features: health risk assessment (18%); free/discounted gym membership (15%); on-site health screenings (15%); lower insurance premiums for participation in wellness program (12%); gift cards or cash for participation in wellness program (11%); free/discounted smoking cessation program (11%); on-site fitness facility (11%); healthier food options in vending machines or cafeteria (9%); lower insurance premiums for positive changes in health status (6%); on-site health education classes (6%); gift cards or cash for positive changes in health status (5%); free/discounted weight loss program (5%); and other features (2%).
- Fifteen percent (15%) of adults did not have access to any wellness programs.

### Obesity Facts

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

*(Source: CDC, Adult Obesity Facts, updated September 1, 2016)*

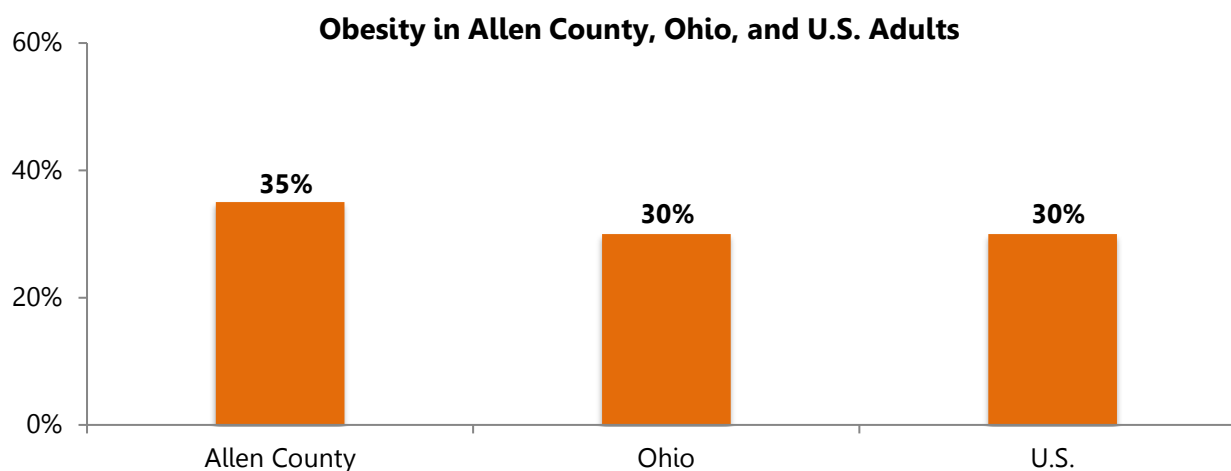
The following graph shows the percentage of Allen County adults who were overweight or obese by Body Mass Index (BMI). Examples of how to interpret the information include: 27% of all Allen County adults were classified as normal weight, 35% were overweight, and 35% were obese.



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

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
<b>Obese</b>	41%	33%	35%	30%	30%
<b>Overweight</b>	36%	34%	35%	37%	36%

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



(Source: 2017 Allen County Health Assessment and 2015 BRFSS)

# Health Behaviors: Adult Tobacco Use

## Key Findings

*In 2017, 18% of Allen County adults were current smokers, and 20% were considered former smokers. In 2017, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of death worldwide and is responsible for the deaths of approximately half of long-term users. Each year, tobacco use is responsible for almost 6 million premature deaths, 80% of which are in low-and middle-income countries, and by 2030, this number is expected to increase to 8 million (Source: Cancer Facts & Figures, American Cancer Society, 2017).*

## In 2017, 18% of Allen County adults were current smokers.

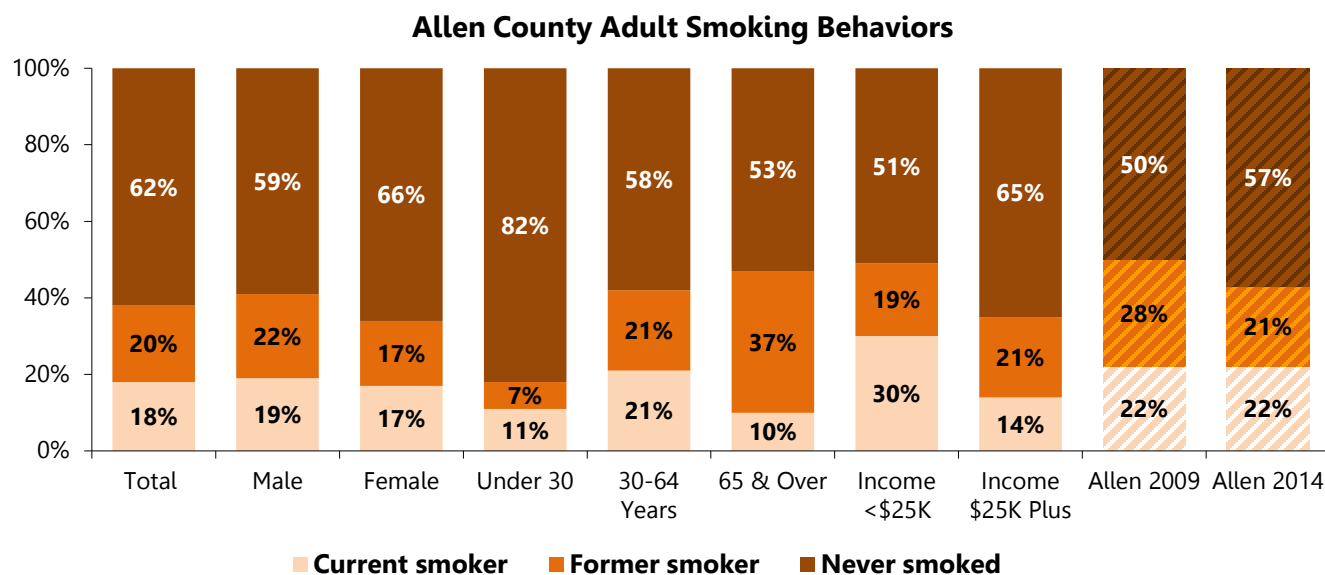
### Adult Tobacco Use Behaviors

- Almost one-fifth (18%) of Allen County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days). The 2015 BRFSS reported current smoker prevalence rates of 22% for Ohio and 18% for the U.S.
- One-fifth (20%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2015 BRFSS reported former smoker prevalence rates of 24% for Ohio and 25% of the U.S.
- Allen County adult smokers were more likely to:
  - Have incomes less than \$25,000 (30%)
  - Be African American (25%)
  - Have one or more kids under 18 (25%)
  - Have rated their overall health as poor (21%)
  - Have been divorced (21%)
- Adults used the following tobacco products in the past year: cigarettes (23%), cigars (7%), e-cigarettes (4%), Black and Milds (3%), snuff (3%), chewing tobacco (3%), Swishers (3%), cigarillos (2%), pipes (2%), hookah (1%), little cigars (1%), roll-your-own (<1%), and pouch (<1%).
- Sixty-two percent (62%) of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- Allen County adults had the following rules/practices about smoking in their home: never allowed (82%), sometimes allowed (8%), and always allowed (8%). Two percent (2%) responded that they did not know the rules/practices about smoking in their home.
- Allen County adults would support an ordinance to ban smoking in the following places: vehicle with a minor present (72%), college/university campuses (49%), multi-unit housing (49%), parks or ball fields (43%), and fairgrounds (41%). Nearly one-fourth (23%) of adults would not support any ordinance to ban smoking.

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
<b>Current smoker</b>	22%	22%	18%	22%	18%
<b>Former smoker</b>	28%	21%	20%	24%	25%
<b>Tried to quit smoking</b>	54%	52%	62%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Allen County adults who smoked cigarettes. Examples of how to interpret the information include: 18% of all Allen County adults were current smokers, 20% of all adults were former smokers, and 62% had never smoked.

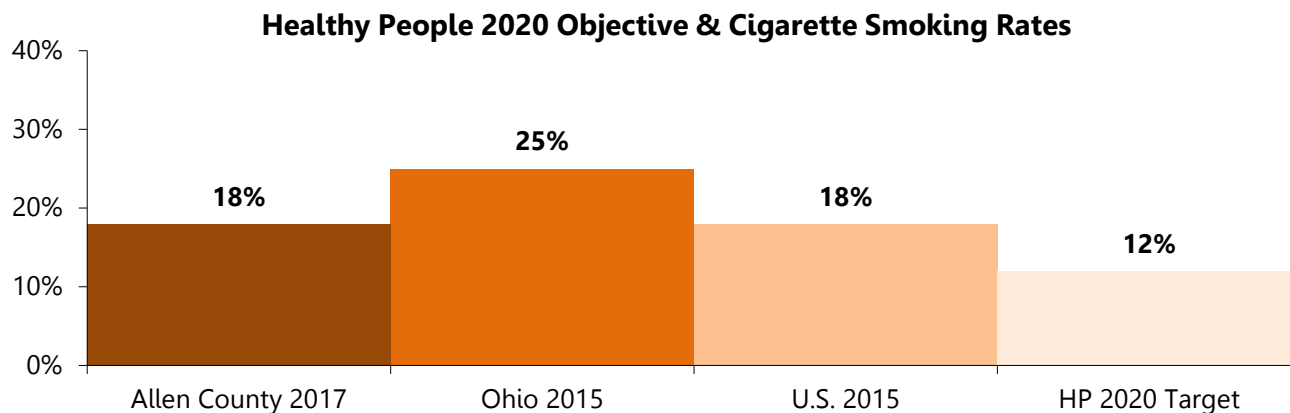


*Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"*

**62% of current smokers had stopped smoking for at least one day in the past year because they were trying to quit smoking.**

The following graph shows Allen County, Ohio, and U.S. adult cigarette smoking rates. This graph shows:

- The Allen County adult cigarette smoking rate was equal to or lower than the Ohio and U.S. rates and higher than the Healthy People 2020 target objective.



*(Source: 2017 Allen County Health Assessment, 2015 BRFSS and Healthy People 2020)*



## Electronic Cigarette Use Among Adults: United States, 2014

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

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

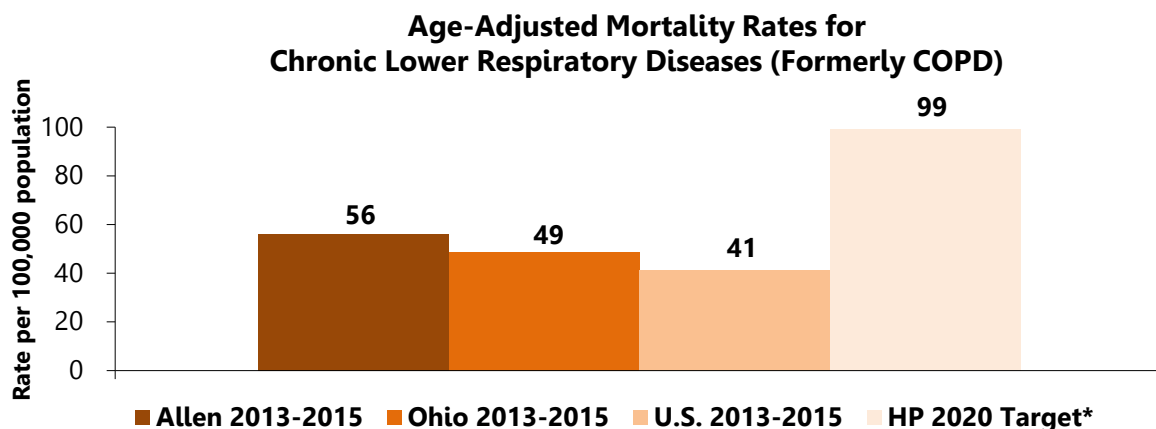
## Smoking and Other Health Risks

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

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

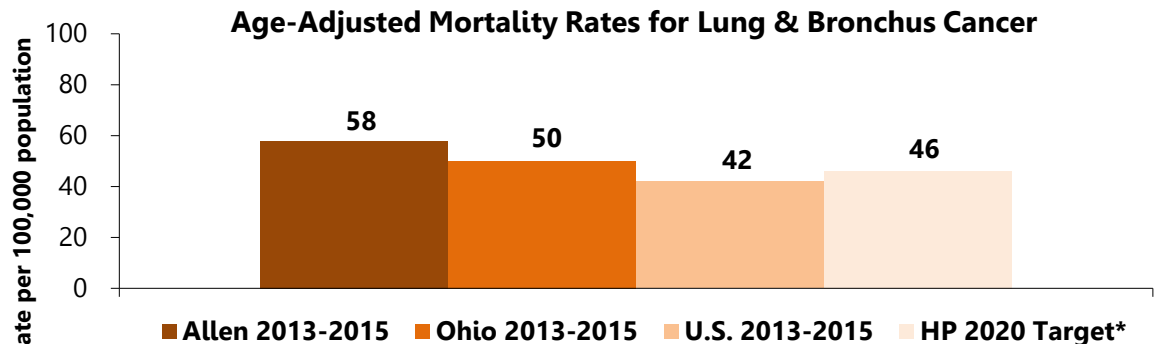
The following graphs show Allen County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD) and lung and bronchus cancer in comparison with the Healthy People 2020 objective. Allen County age-adjusted mortality rates for lung and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

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



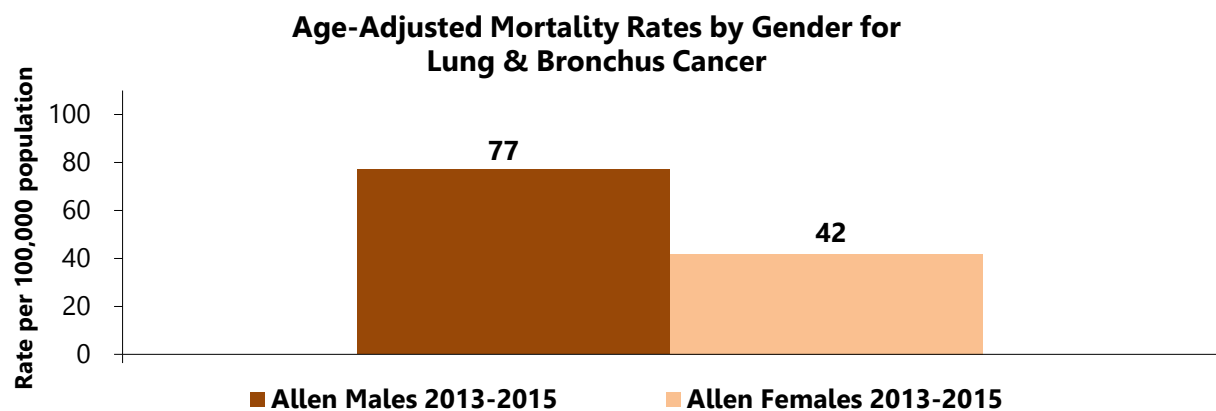
*(Sources: CDC Wonder, 2013-2015 and Healthy People 2020)*

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



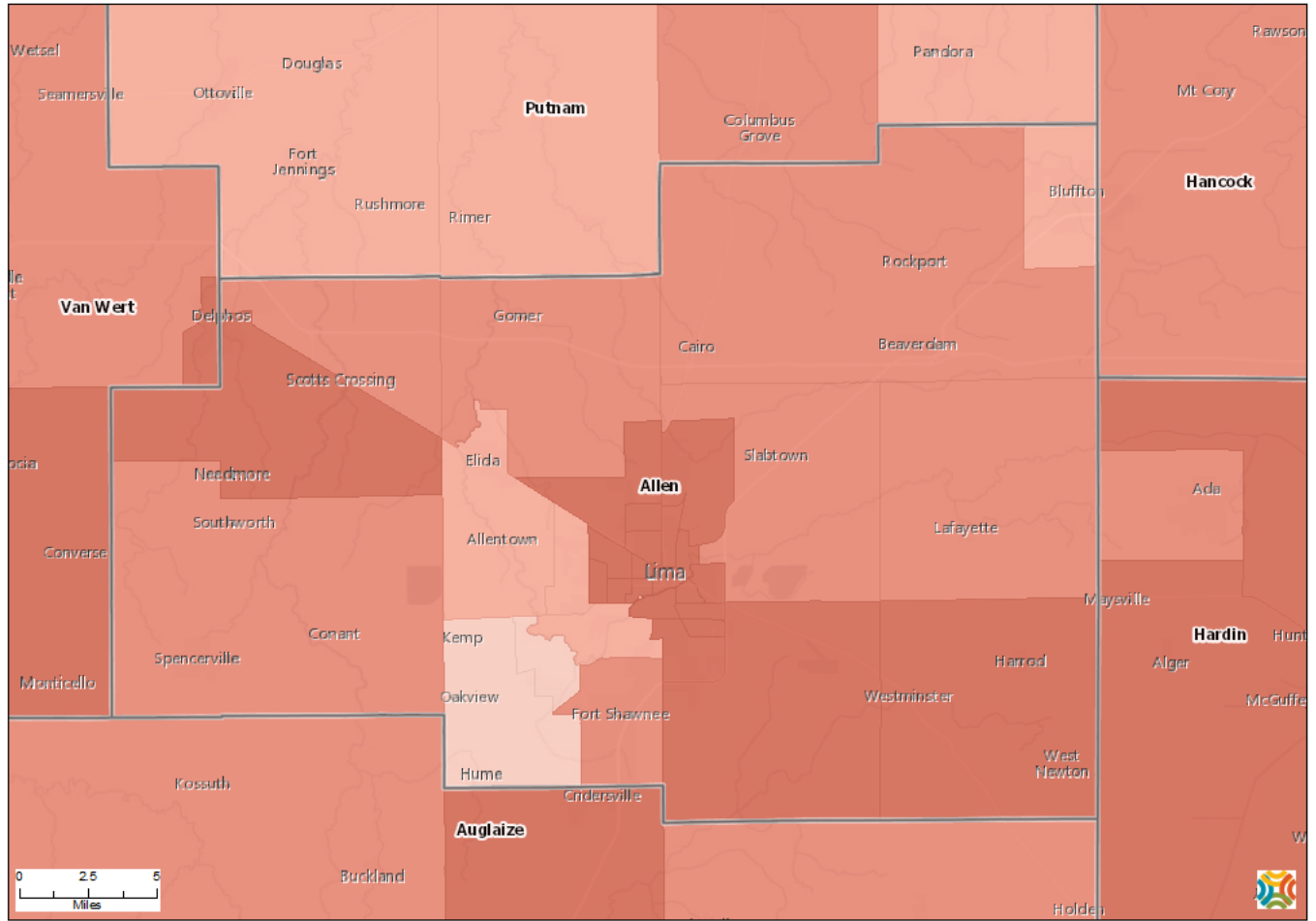
*(Sources: Health People 2020, Ohio Public Health Data Warehouse 2013-2015, National Cancer Institute)*

*Note: Healthy People 2020's target rate is for lung cancer only*



*(Source: Ohio Public Health Data Warehouse, 2013-2015)*

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



### Map Legend

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

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

Community Commons, 1/18/2017

*(Source: Nielsen, Nielsen SiteReports: 2014, as compiled by Community Commons, 1/20/2017)*

# Health Behaviors: Adult Alcohol Use

## Key Findings

*More than one-fourth (27%) of Allen County adults were considered binge drinkers. Eight percent (8%) of adults reported driving after having perhaps too much to drink, increasing to 13% of those under the age of 30 and 14% of African Americans.*

**54% of Allen County adults had at least one alcoholic drink in the past month.**

## Adult Alcohol Consumption

- More than half (54%) of Allen County adults had at least one alcoholic drink in the past month, increasing to 62% of those with annual household incomes more than \$25,000 and 63% of males. The 2015 BRFSS reported current drinker prevalence rates of 53% for Ohio and 54% for the U.S.
- Of those who drank, adults drank 2.8 drinks on average, increasing to 3.3 drinks for males.
- In the past month, 8% of adults reported driving after having perhaps too much to drink, increasing to 13% of those under the age of 30 and 14% of African Americans.

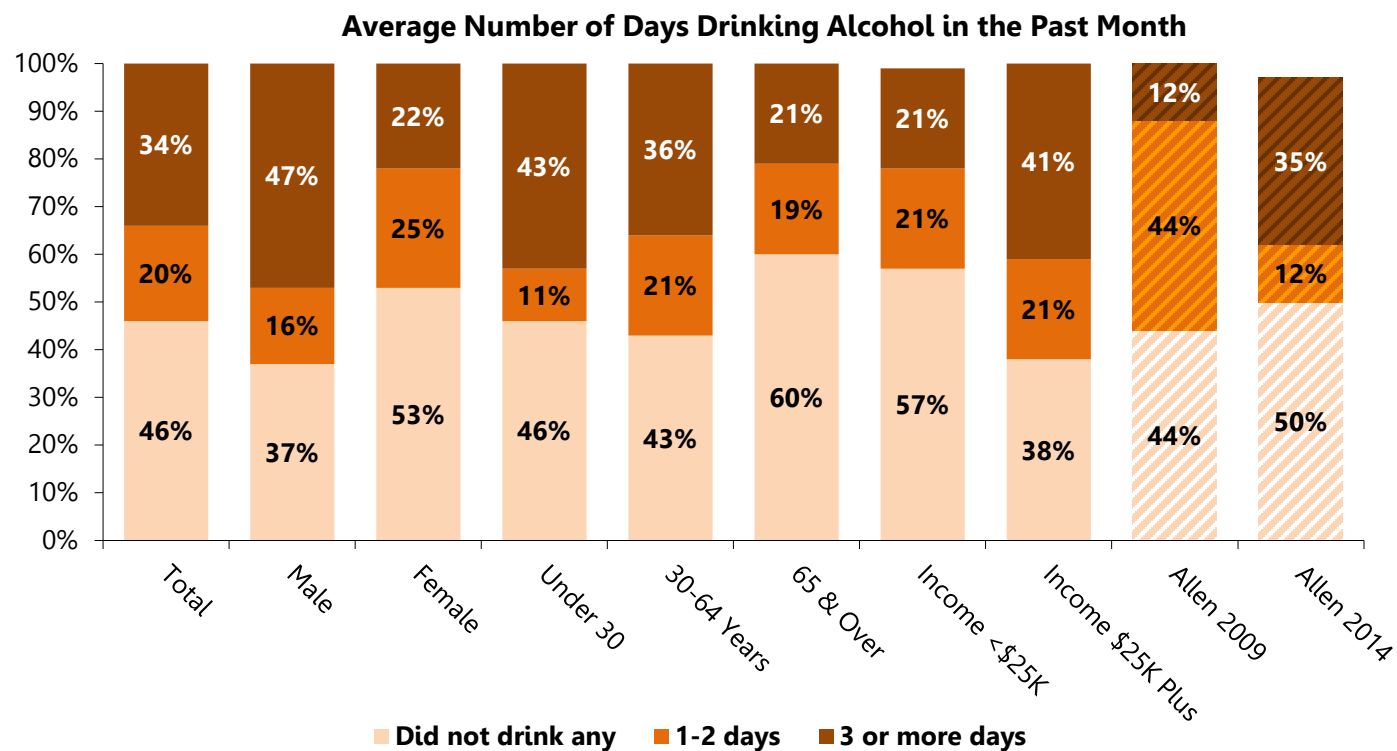
**27% of Allen County adults were considered binge drinkers**

- More than one-fourth (27%) of Allen County adults reported they had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition (The 2015 BRFSS reported binge drinking rates of 18% for Ohio and 16% for the U.S). Of those who drank in the past month, 51% had at least one episode of binge drinking.
- Allen County adults experienced the following in the past six months: drove after having any alcoholic beverage (10%); drank more than they expected (9%); used prescription drugs while drinking (3%); spent a lot of time drinking (2%); drank more to get the same effect (2%); gave up other activities to drink (2%); continued to drink despite problems caused by drinking (1%); tried to quit or cut down but could not (1%); failed to fulfill duties at work, home, or school (1%); and drank to ease withdrawal symptoms (<1%).

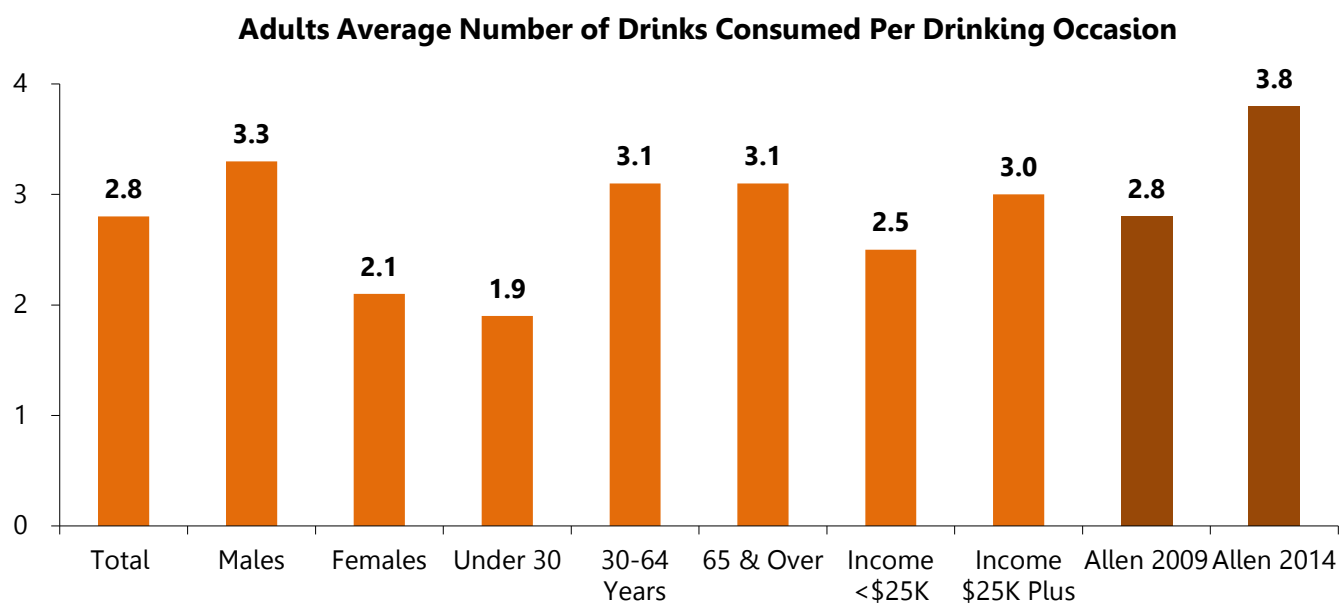
Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
<b>Drank alcohol at least once in past month</b>	56%	47%	54%	53%	54%
<b>Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)</b>	20%	18%	27%	18%	16%
<b>Drove after having perhaps too much to drink</b>	4%	7%	8%	4%*	3%*

*\*2014 BRFSS data*

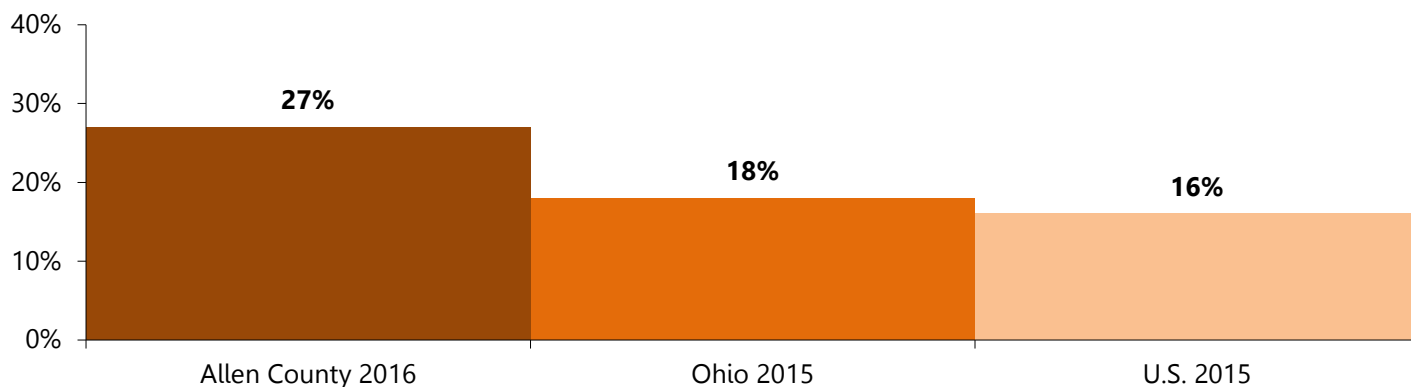
The following graphs show the percentage of Allen County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 46% of all Allen County adults did not drink alcohol, including 37% of males and 53% of females.



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



### Adult Binge Drinkers\*



(Source: 2015 BRFSS, 2017 Allen County Health Assessment)

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

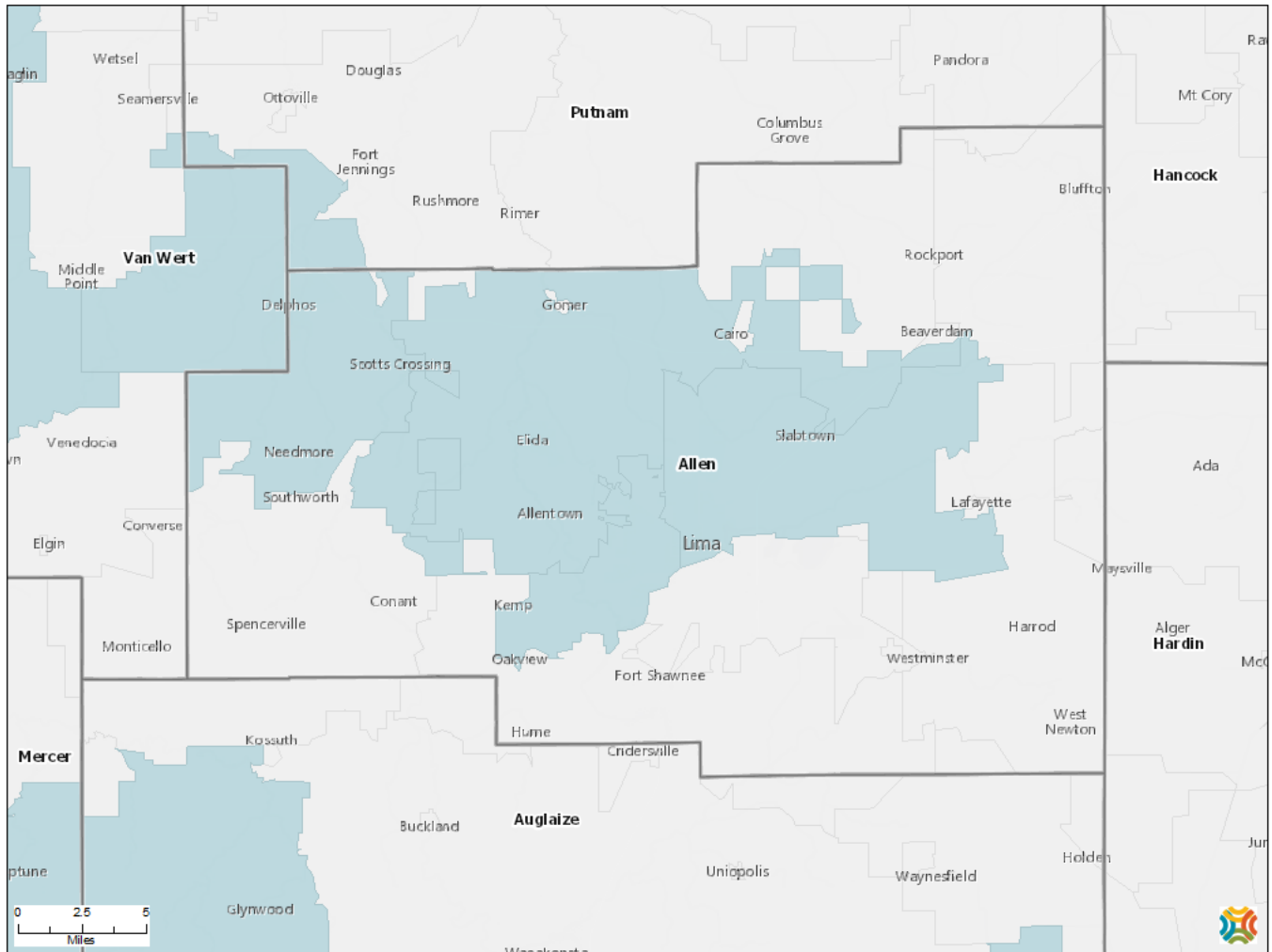
The following table shows the City of Lima, Allen County, and Ohio motor vehicle accident statistics. The table shows:

- In 2016, 4% of the total crashes in Allen County and the U.S. were alcohol-related.
- Of the total number of alcohol-related crashes (131) in Allen County, 63% were property damage only, 34% were non-fatal injury, and 4% were fatal injury.
- There were 11,988 alcohol-related crashes in Ohio in 2016. Of those crashes, 56% were property damage only, 41% were non-fatal injury, and 3% were fatal injury.

	City of Lima 2016	Allen County 2016	Ohio 2016
<b>Total Crashes</b>	1,134	3,236	300,016
<b>Alcohol-Related Total Crashes</b>	50	131	11,988
<b>Fatal Injury Crashes</b>	1	12	1,027
<b>Alcohol-Related Fatal Crashes</b>	1	5	304
<b>Alcohol Impaired Drivers in Crashes</b>	49	129	11,717
<b>Injury Crashes</b>	322	802	76,130
<b>Alcohol-Related Injury Crashes</b>	17	44	4,974
<b>Property Damage Only</b>	811	2,422	222,859
<b>Alcohol-Related Property Damage Only</b>	32	82	6,710
<b>Deaths</b>	1	14	1,107
<b>Alcohol-Related Deaths</b>	1	5	334
<b>Total Non-Fatal Injuries</b>	472	1,222	110,311
<b>Alcohol-Related Injuries</b>	26	77	7,033

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

## Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by Zip Code Tabulation Area (ZCTA), Census Business Patterns (CBP), 2015



### Map Legend

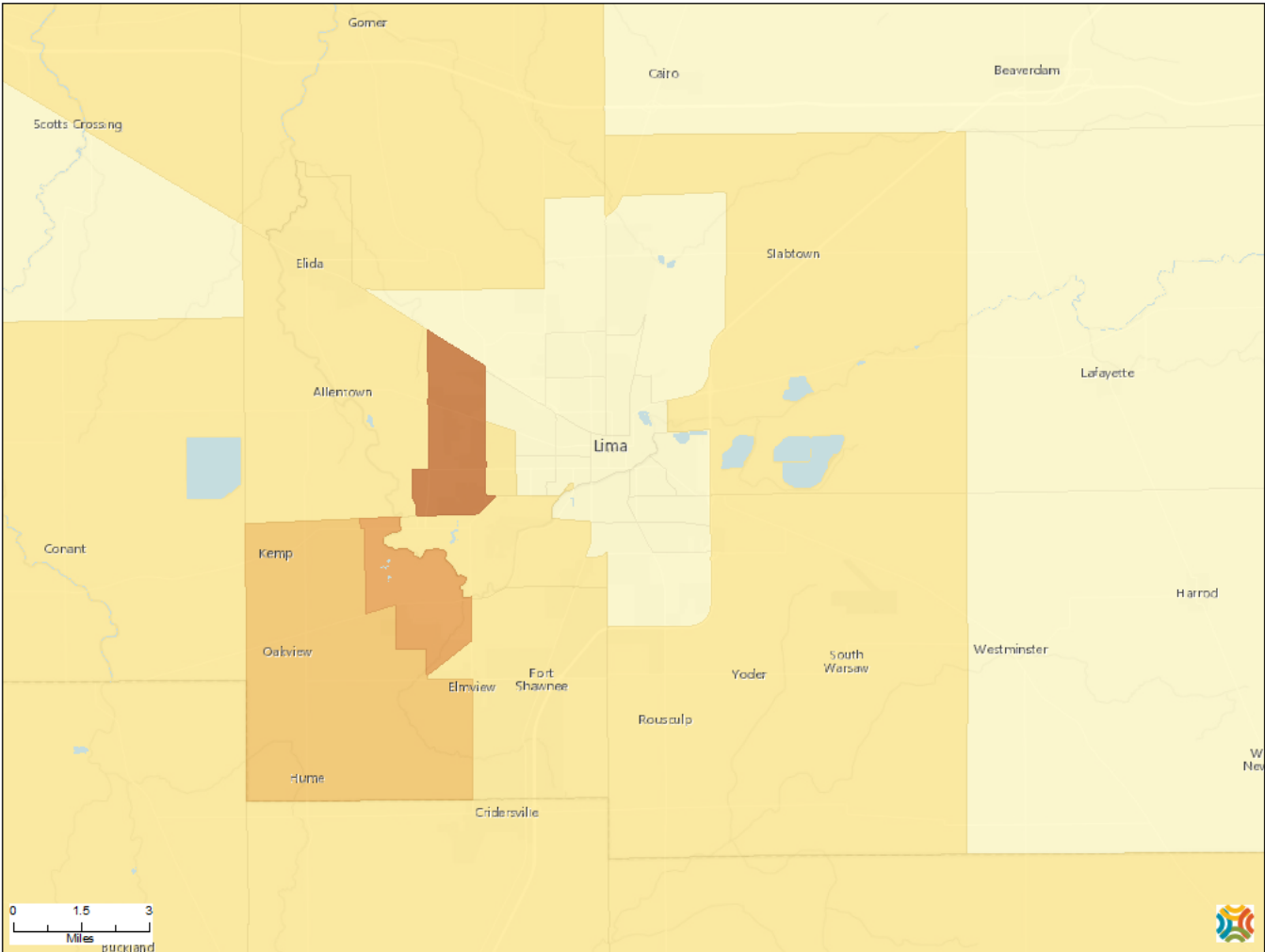
Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by ZCTA, CBP 2015

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

Community Commons, 6/2/2017

(Source: U.S. Census Bureau, County Business Patterns: 2015, as compiled by Community Commons, updated 6/2/2017)

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



Map Legend

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

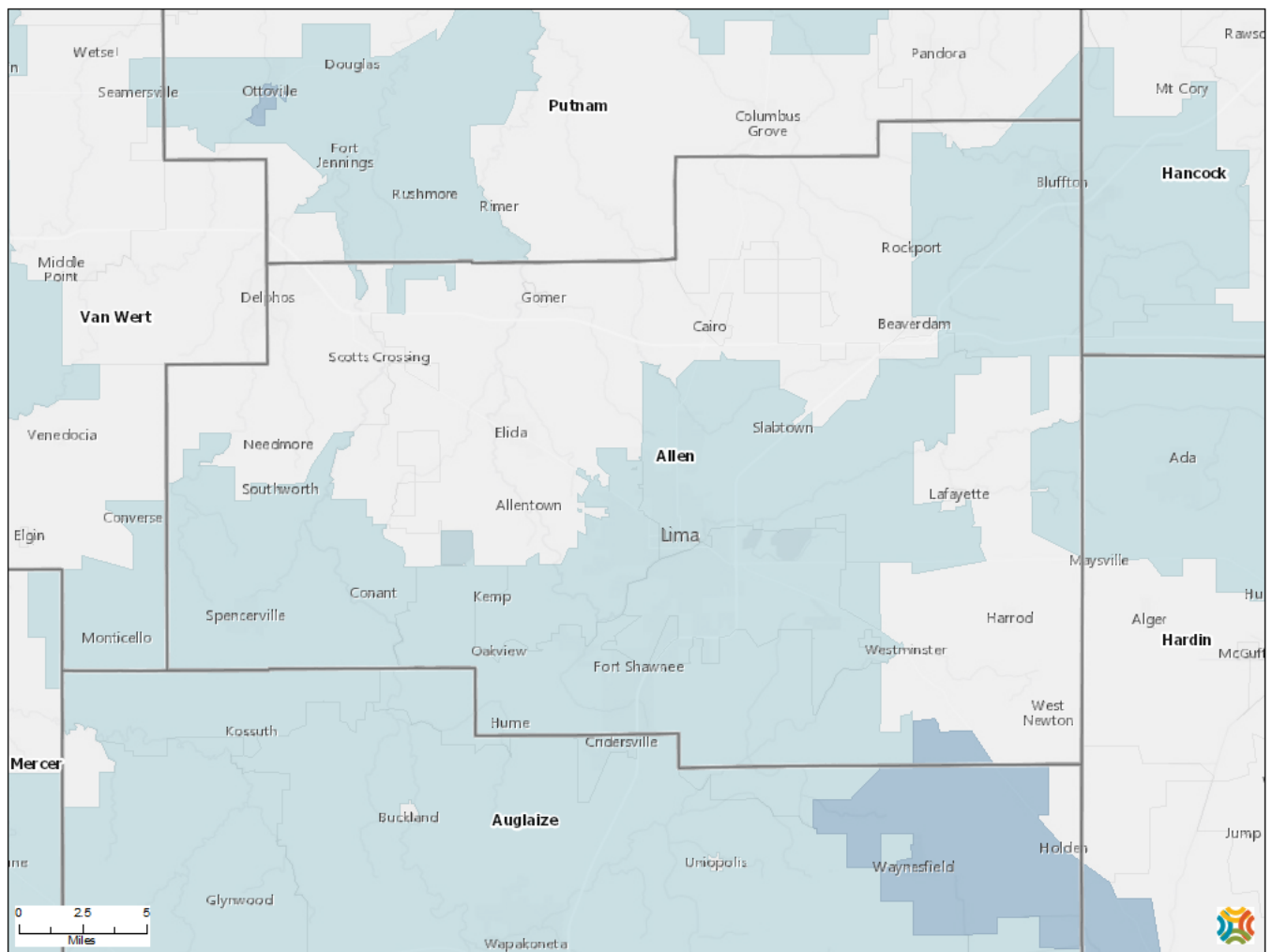
- 1st Quintile (Highest Expenditures)
- 2nd Quintile
- 3rd Quintile
- 4th Quintile
- 5th Quintile (Lowest Expenditures)
- No Data or Data Suppressed

Community Commons, 4/6/2017

*(Nielsen, Nielsen SiteReports: 2014 as compiled by Community Commons)*



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



### Map Legend

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

- Over 32.0
- 16.1 - 32.0
- 8.1 - 16.0
- Under 8.1
- No Bars or Drinking Establishments

Community Commons, 6/2/2017

(Source: U.S. Census Bureau, County Business Patterns: 2015, as compiled by Community Commons, updated 6/2/2017)

# Health Behaviors: Adult Drug Use

## Key Findings

*In 2017, 8% of Allen County adults had used marijuana during the past 6 months. Eight percent (8%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.*

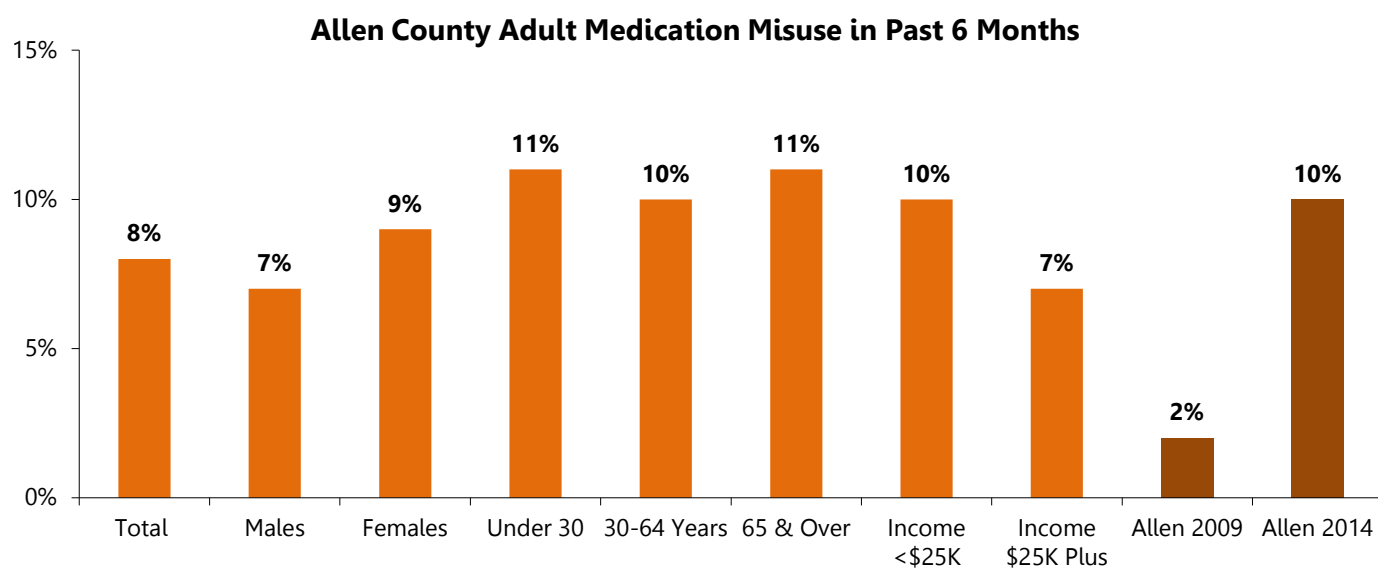
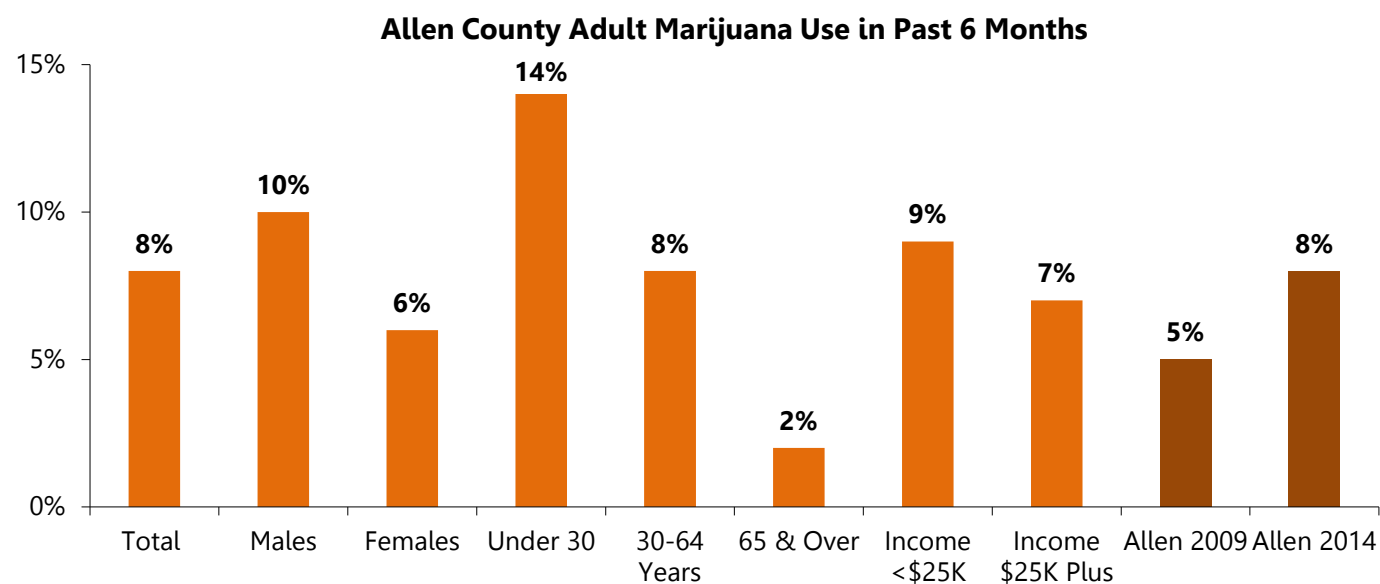
## Adult Drug Use

- Eight percent (8%) of Allen County adults had used marijuana in the past 6 months, increasing to 14% of those under the age of 30.
- Two percent (2%) of Allen County adults reported using other recreational drugs in the past six months such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- When asked about their frequency of marijuana and other recreational drug use in the past six months, 21% of Allen County adults who used drugs did so almost every day, and 29% did so less than once a month.
- Eight percent (8%) of adults had used medication not prescribed for them or they took more than prescribed to feel good or high and/or more active or alert during the past 6 months, increasing to 11% of those under the age of 30 and over the age of 65 and 13% of African Americans.
- When asked about their frequency of medication misuse in the past six months, 38% of Allen County adults who used these drugs did so almost every day, and 18% did so less than once a month.
- Adults who misused prescription medications obtained them from the following: primary care physician (93%), ER or urgent care doctor (16%), multiple doctors (8%), bought from a drug dealer (3%), free from a friend or family member (1%), stole from a friend or family member (1%), and bought from a friend or family member (1%).
- Two percent (2%) of Allen County adults had used a program or service to help with an alcohol or drug problem for themselves or a loved one. Reasons for not using a program or service to help with a drug or alcohol problem included: had not thought of it (1%), did not know how to find a program (1%), could not afford to go (<1%), stigma of seeking drug services (<1%), fear (<1%), did not want to get in trouble (<1%), did not want to miss work (<1%), no program available (<1%), and other reasons (2%). 95% indicated this type of program was not needed.

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Adults who used marijuana in the past 6 months	5%	8%	8%	N/A	N/A
Adults who used other recreational drugs in the past 6 months	5%	1%	2%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	2%	10%	8%	N/A	N/A

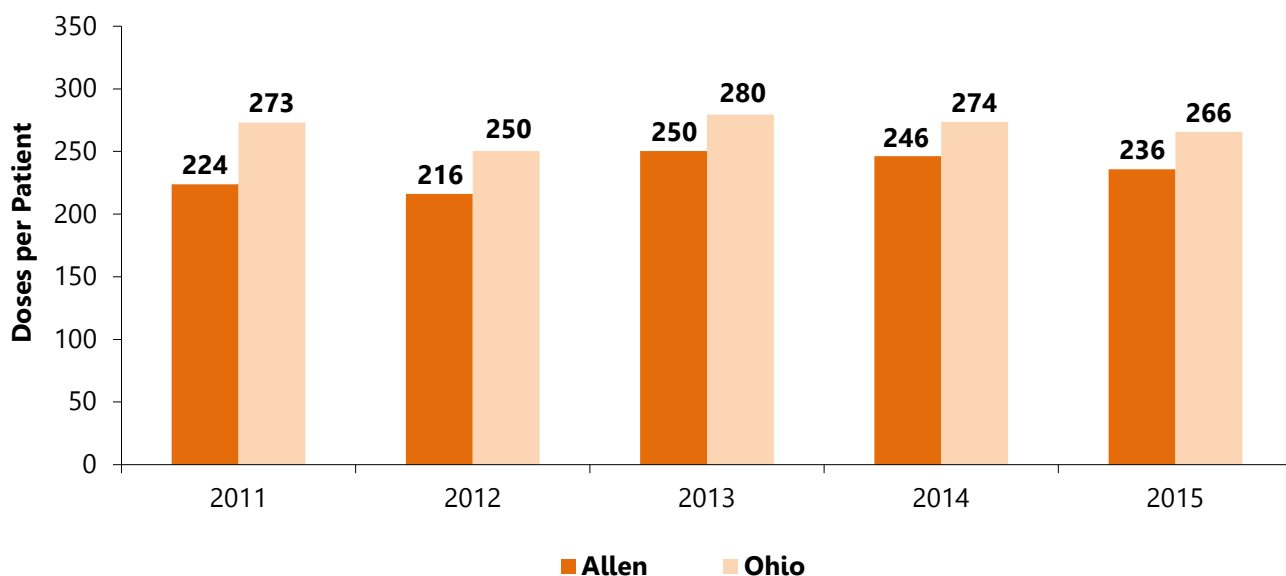
N/A – Not available

*The following graphs indicate adult marijuana use and medication misuse in the past six months. Examples of how to interpret the information include: 8% of all Allen County adults used marijuana in the past six months, including 14% of those under the age of 30 and 9% of those with incomes less than \$25,000.*

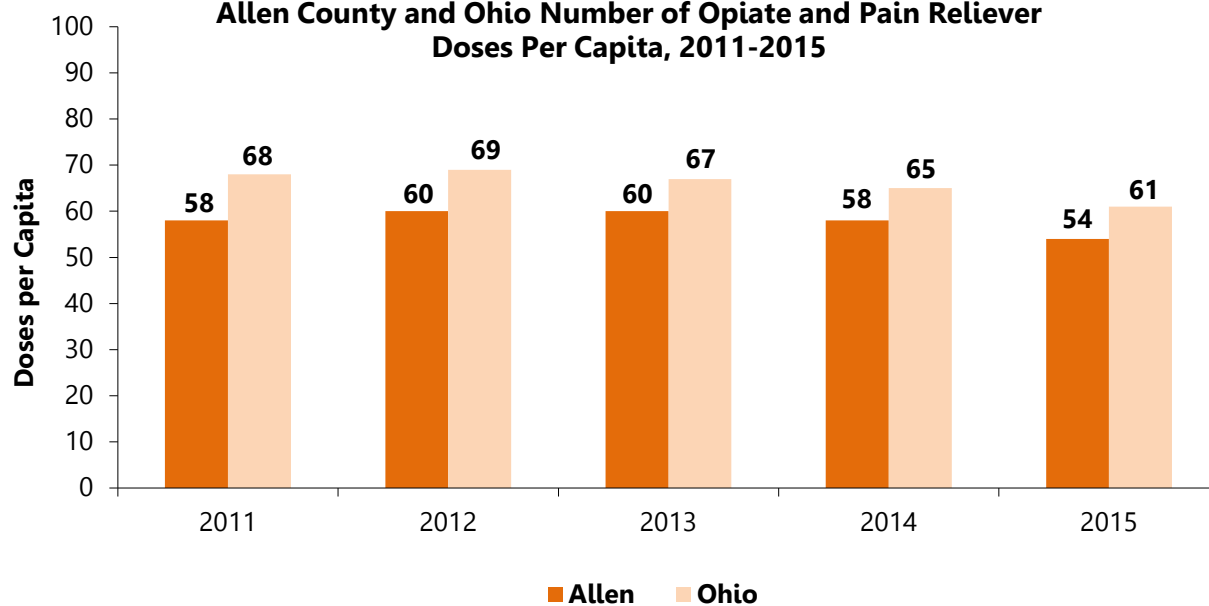


The following graphs are data from the Ohio Automated Prescription Reporting System indicating Allen County and Ohio opiate and pain reliever doses per patient, as well as doses per capita.

**Allen County and Ohio Number of Opiate and Pain Reliever  
Doses Per Patient, 2011-2015**

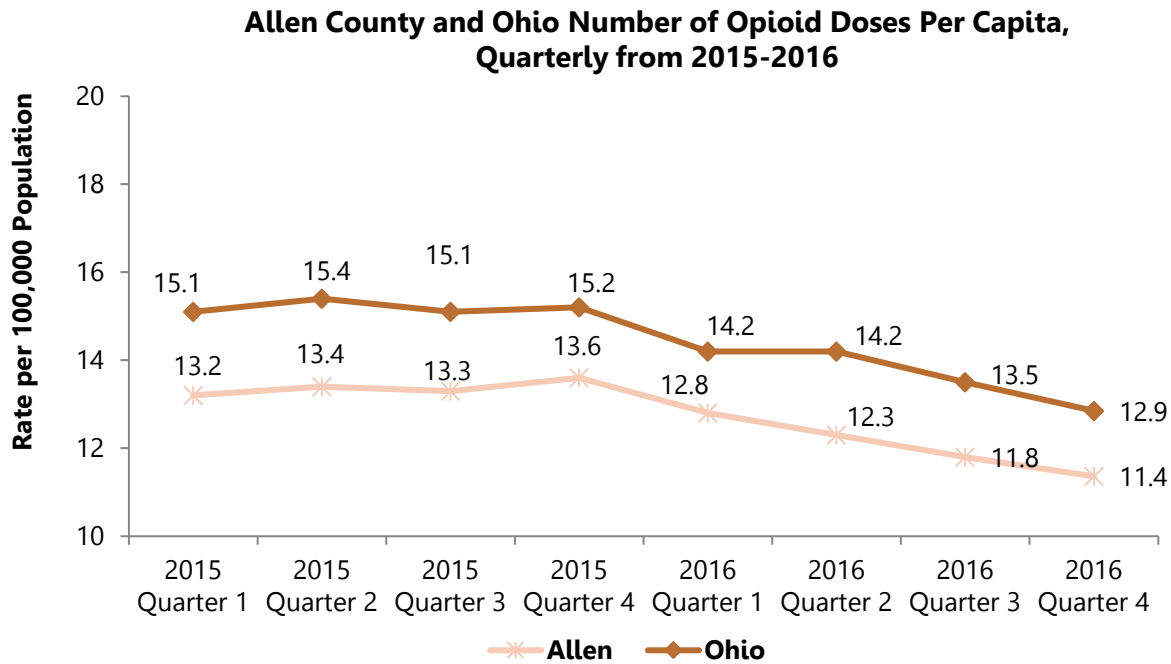


**Allen County and Ohio Number of Opiate and Pain Reliever  
Doses Per Capita, 2011-2015**



(Source: Ohio Automated Rx Reporting System, Quarterly County Data, Accessed on July 7, 2016)

The following graph is data from the Ohio Automated Prescription Reporting System indicating Allen County and Ohio opioid doses per capita.



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

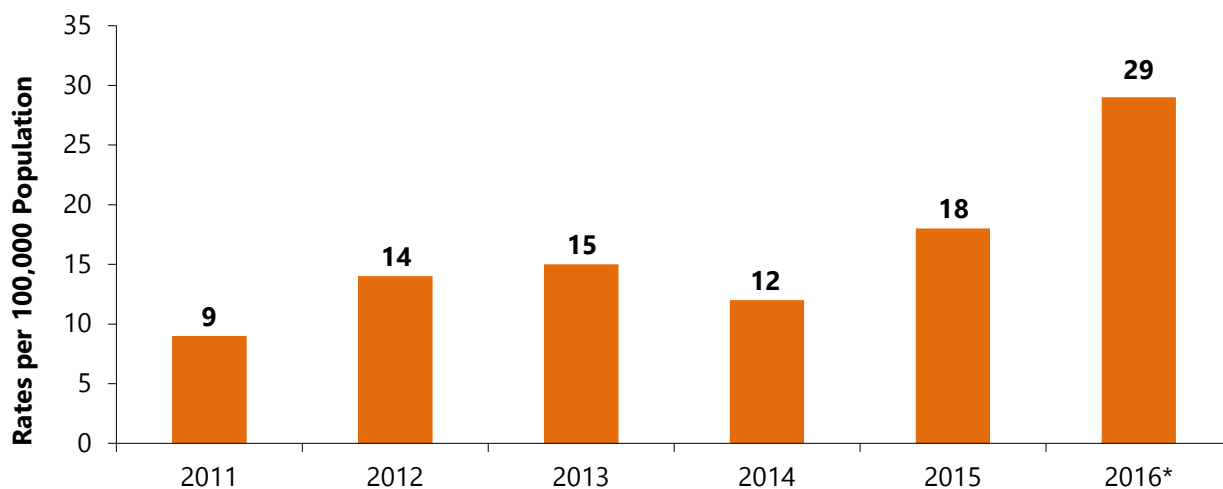
### Abuse of Prescription (Rx) Drugs

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

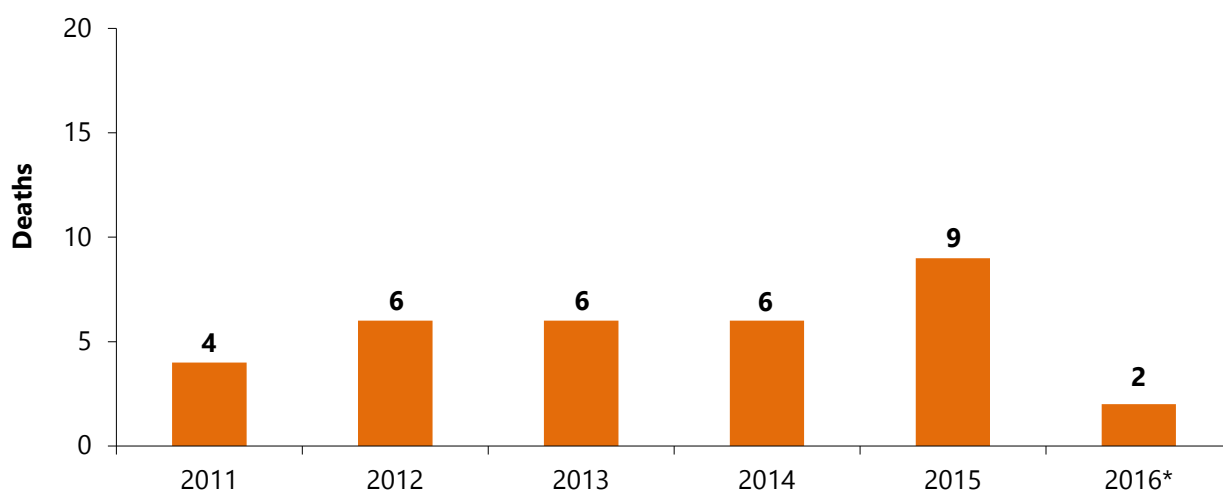
(Source: National Institute on Drug Abuse, Abuse of Prescription (Rx) Drugs Affects Young Adults Most, February 2016)

The following graphs are data from Ohio's Public Health Data Warehouse indicating the number of unintentional drug overdose deaths and prescription opiate related drug overdose deaths from 2011-2016 in Allen County.

**Allen County Unintentional Drug Overdose  
Death Rates, 2011-2016**



**Allen County Number of Prescription Opiate Related Unintentional Drug  
Overdose Deaths, 2011-2016**



(Source for graphs: Ohio Public Health Data Warehouse, 2011-2016)

\*Data is incomplete and subject to change

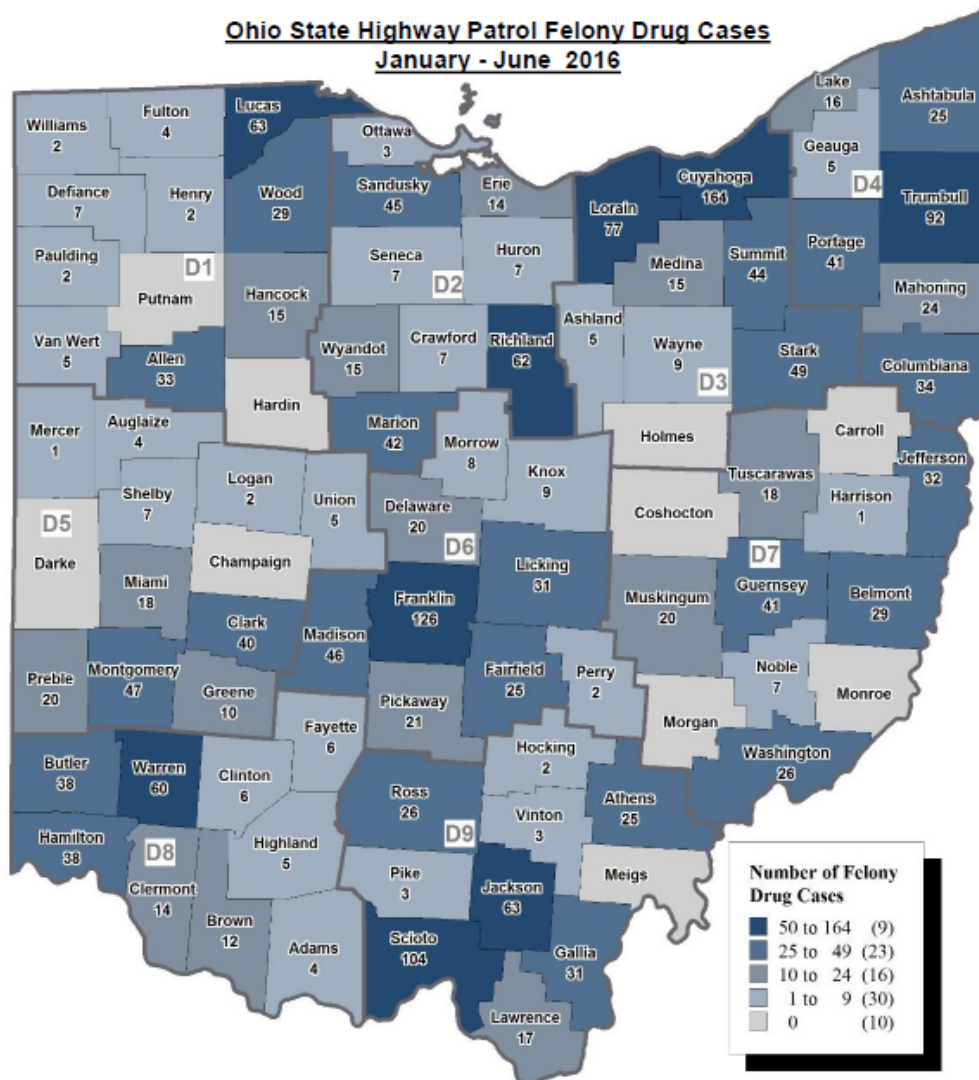
## Ohio Felony Cases and Drug Arrests January – June 2016

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

OSHP felony cases by type <sup>1</sup> (Jan. 1 – Jun. 30, 2016)	
Homicide/Death	13
Robbery/Burglary	2
Larceny	318
Assault	893
False pretense <sup>2</sup>	92
Vices <sup>3</sup>	2,154
Property crimes	87
Other investigations	143
<b>Total:</b>	<b>3,702</b>

OSHP drug arrests (Jan. 1 – Jun. 30, 2016)	
Total drug arrests	7,493
Felony drug cases	2,037

OSHP drug seizures in grams (Jan. 1 – Jun. 30, 2016)	
Marijuana	885,221
Cocaine	38,804
Crack	1,266
Heroin	53,514
OSHP scheduled pill seizures (Jan. 1 – Jun. 30, 2016)	
Opiate	19,660
Stimulant	1,749
Depressant	11,059
Hallucinogen	316



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

# Health Behaviors: Adult Sexual Behavior

## Key Findings

*In 2017, 73% of Allen County adults had sexual intercourse. Seven percent (7%) percent of adults had more than one partner. The CDC estimates that youth ages 15-24 make up just over one quarter of the sexually active population but account for half of the 20 million new sexually transmitted infections that occur in the United States each year (Source: CDC, STDs in Adolescents and Young Adults, 2017 STD Surveillance).*

## Adult Sexual Behavior

- Seven percent (7%) of adults reported they had intercourse with more than one partner in the past year, increasing to 19% of those with incomes less than \$25,000 and 23% of African Americans.
- Allen County adults used the following methods of birth control: they or their partner were too old (18%), vasectomy (17%), tubes tied (16%), condoms (14%), hysterectomy (13%), birth control pill (8%), ovaries or testicles removed (5%), withdrawal (4%), infertility (4%), rhythm method (3%), abstinence (2%), IUD (2%), contraceptive implants (1%), diaphragm (<1%), emergency contraception (<1%), and shots (<1%).
- Thirteen percent (13%) of Allen County adults were not using any method of birth control.
- Allen County adults had been diagnosed with the following sexually transmitted diseases (STDs) in the past 5 years: human papilloma virus (HPV) (2%), gonorrhea (2%), chlamydia (2%), Hepatitis C (1%), genital herpes (1%), HIV/AIDS (<1%), and other STDs (1%).
- More than one-third (35%) of adults had been tested for HIV. Those who had not been tested reported the following reasons for not doing so: did not think they could have it (44%), did not know where to get tested (2%), did not want to know (1%), privacy (1%), and other reasons (11%). Forty-eight percent (48%) of adults reported they had no reason to be tested for HIV.
- The following situations applied to Allen County adults in the past year: tested for an STD (4%), had anal sex without a condom (3%), had sexual activity with someone of the same gender (2%), had sex with someone they did not know (2%), tested positive for Hepatitis C (1%), thought that they may have had an STD (1%), treated for an STD (1%), tested positive for HIV (<1%), used intravenous drugs (<1%), and knew someone involved in sex trafficking (<1%).
- Six percent (6%) of Allen County adults reported being forced to have sexual activity when they did not want to, increasing to 9% of females and 11% of those with incomes less than \$25,000. Eighteen percent (18%) of those who were forced to have sexual activity reported it.

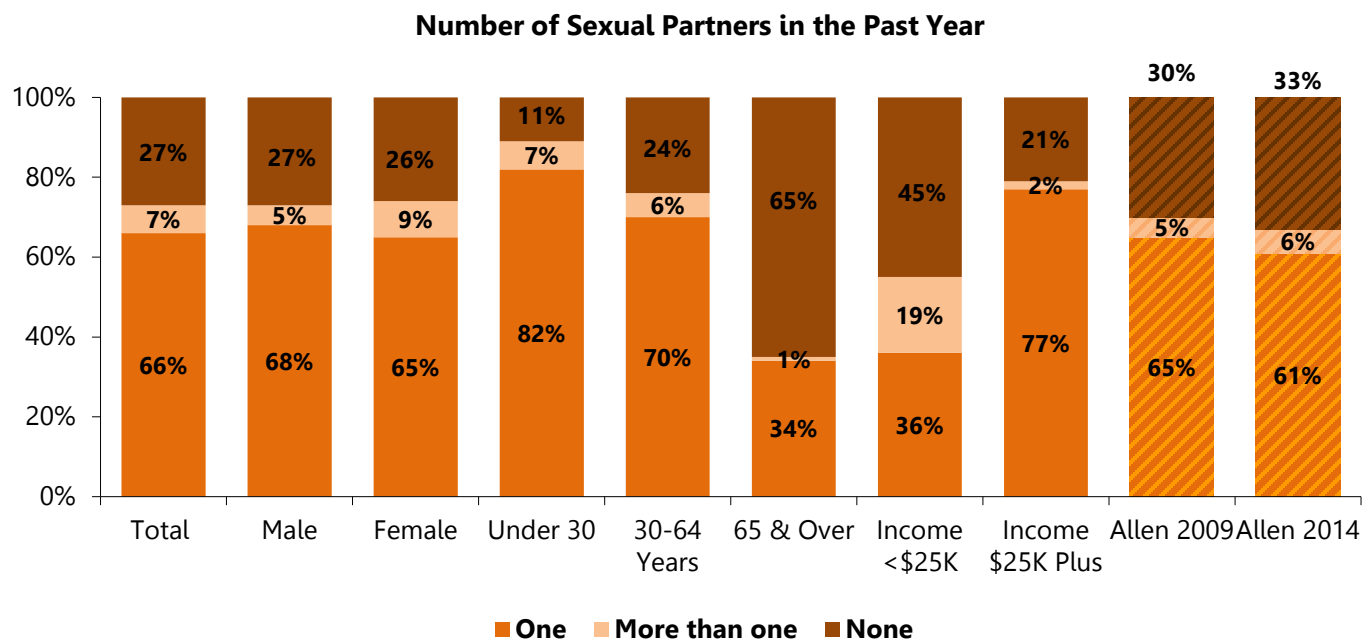
## HIV in the United States

- More than 1.1 million people in the United States are living with HIV infection, and almost 1 in 7 are unaware of their infection.
- By race, African Americans face the most severe burden of HIV.
- The number of new HIV diagnoses fell 19% from 2005 to 2014.
- In 2014, an estimated 44,073 people were diagnosed with HIV infection in the United States. In that same year, an estimated 20,896 people were diagnosed with AIDS. Since the epidemic began, an estimated 1,210,835 people in the United States have been diagnosed with AIDS.
- In 2014, there were 12,333 deaths (due to any cause) of people with diagnosed HIV infection ever classified as AIDS, and 6,721 deaths were attributed directly to HIV.

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



The following graph shows the number of sexual partners Allen County adults had in the past year. Examples of how to interpret the information in the graph include: 66% of all Allen County adults had one sexual partner in the past 12 months, 7% had more than one, and 82% of those under age 30 had more than one partner.



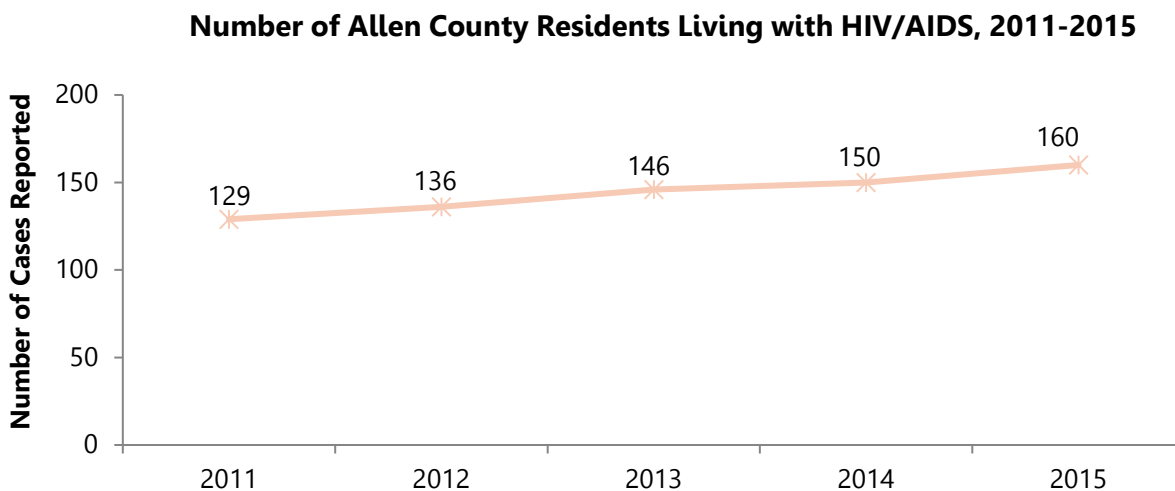
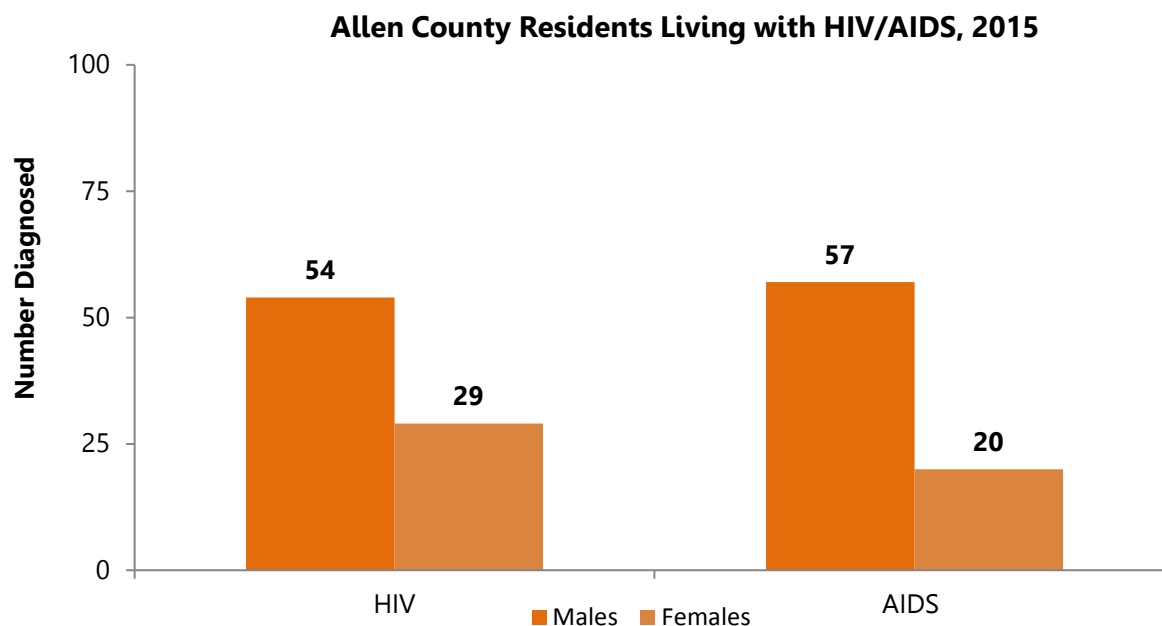
Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Had more than one sexual partner in past year	5%	6%	7%	N/A	N/A

N/A – Not available

*The following graphs show the number of Allen County residents diagnosed with HIV/AIDS and the annual number of cases reported from 2011-2015. The graphs show:*

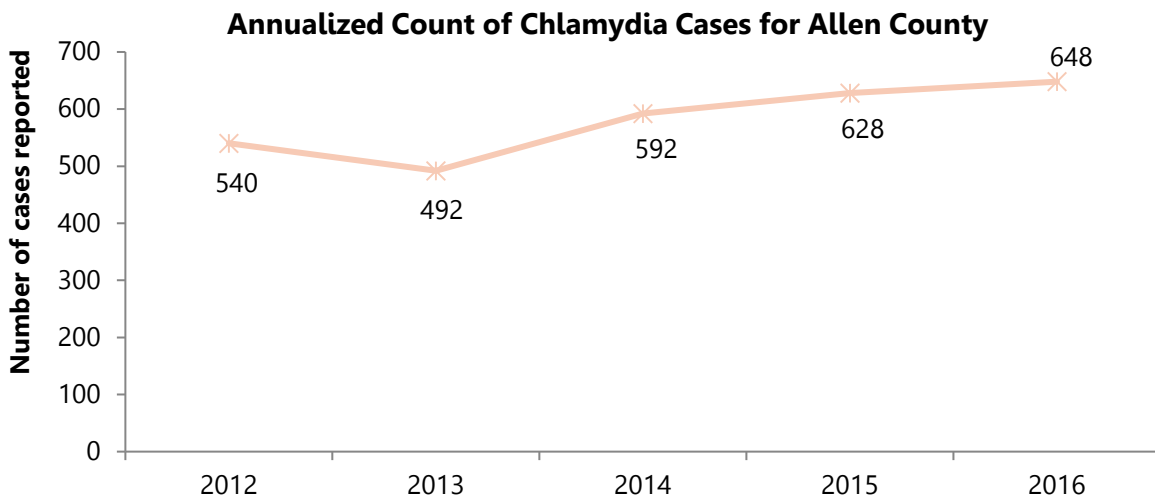
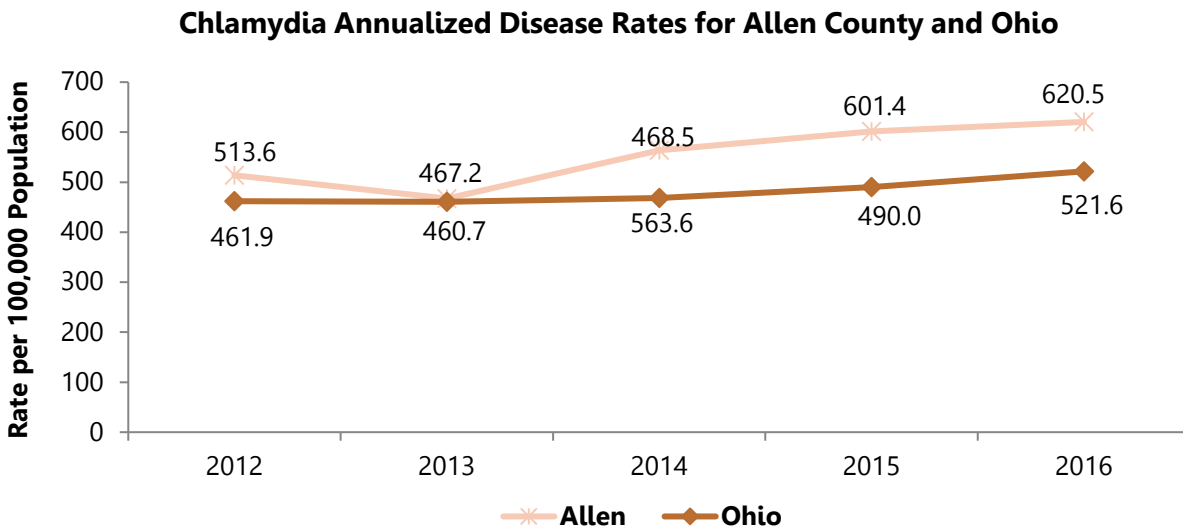
- Allen County males were almost three times more likely than females to be living with AIDS in 2015.
- From 2011-2015, the number of people living with HIV/AIDS in Allen County steadily increased



*(Source for graphs: ODH HIV/AIDS Surveillance Program, data reported through 12-31-16)*

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

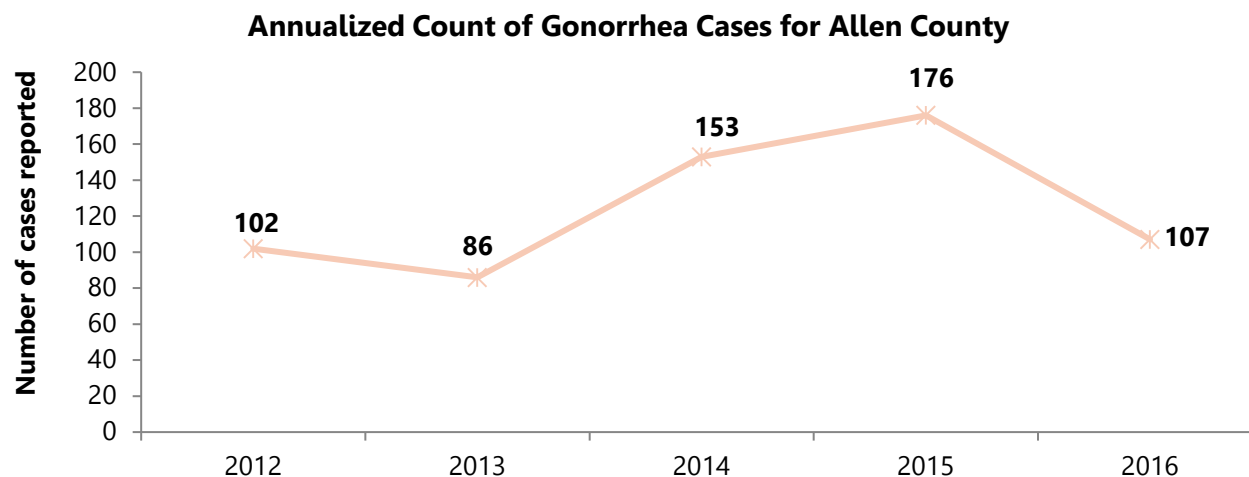
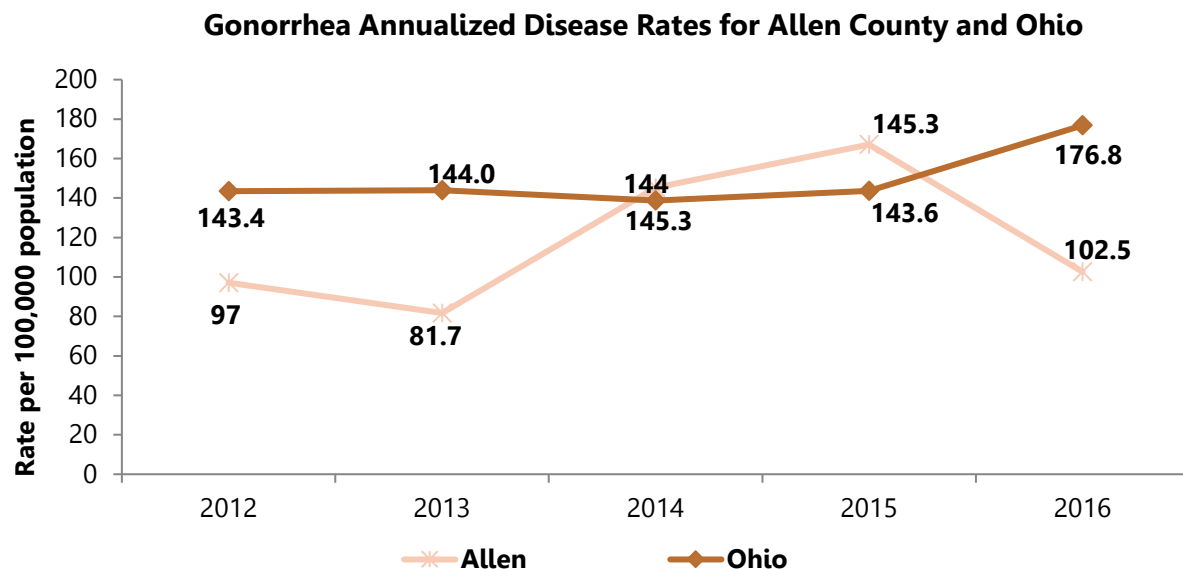
- Allen County chlamydia rates fluctuated from 2012-2016, but was always higher than the Ohio rates.
- The number of chlamydia cases in Allen County greatly increased from 2013-2016.



(Source for graphs: ODH, STD Surveillance, data reported through 5-17-17)

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

- The Allen County gonorrhea rate greatly increased from 2013-2016.
- The Ohio gonorrhea rate stayed about the same from 2012-2016.

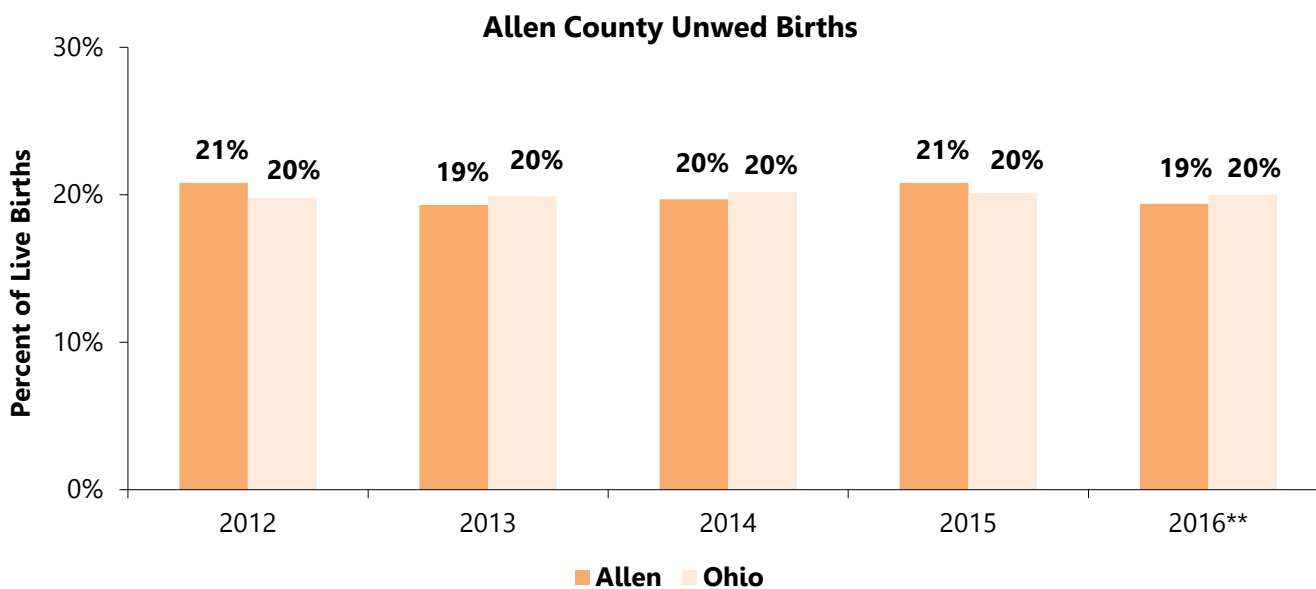
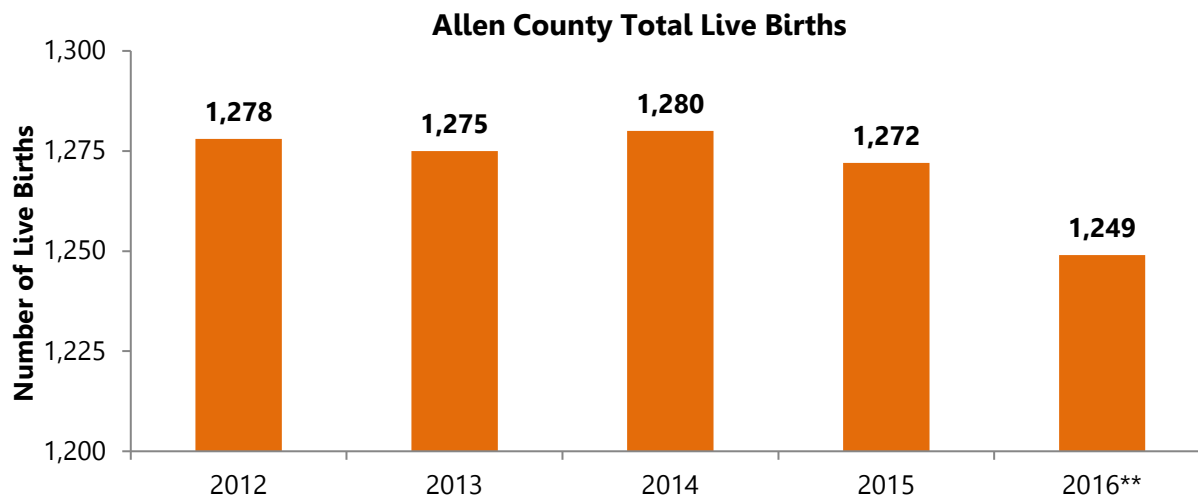


(Source for graphs: ODH, STD Surveillance, data reported through 5-17-17)

## Pregnancy Outcomes

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

- From 2012-2016, there was an average of 1,270 live births per year in Allen County.
- The percentage of Allen County unwed births stayed about the same from 2013-2016.



(Source for graphs: ODH Information Warehouse Updated 4-2-17)

\*\*Indicates preliminary data that may change

# Health Behaviors: Adult Mental Health

## Key Findings

*In 2017, 3% of Allen County adults considered attempting suicide. Thirty percent (30%) of adults did not get enough sleep or rest almost every day for two weeks or more in a row. Ten percent (10%) of Allen County adults have used a program or service to help with depression, anxiety, or other emotional problems for themselves or a loved one.*

## Adult Mental Health

- During the past 12 months, Allen County adults experienced the following almost every day for two weeks or more in a row: did not get enough sleep or rest (30%); had high stress (27%); felt worried, tense or anxious (25%); felt very healthy and full of energy (21%); felt sad, blue or depressed (13%); stopped during some usual activities (9%); and unusual increase or loss of appetite (7%).
- Three percent (3%) of Allen County adults considered attempting suicide in the past year.
- One percent (1%) of adults reported attempting suicide in the past year.
- Allen County adults would do the following if they knew someone who was suicidal:
  - Talk to them (73%)
  - Try to calm them down (57%)
  - Call 911 (46%)
  - Call a crisis line (HOPE line) (45%)
  - Take them to the ER (34%)
  - Call a friend (24%)
  - Call your spiritual leader (19%)
  - Nothing (1%)
- Allen County adults reported they or a family member were diagnosed with or treated for the following mental health issues: depression (46%), anxiety or emotional problems (32%), an anxiety disorder (28%), attention deficit disorder (ADD/ADHD) (27%), bipolar (24%), alcohol and illicit drug abuse (19%), developmental disability (9%), autism spectrum (7%), post-traumatic stress disorder (PTSD) (6%), psychotic disorder (6%), other trauma (5%), life-adjustment disorder/issue (3%), and some other mental health disorder (7%). Twenty-five percent (25%) indicated they or a family member had taken medication for one or more mental health issues.
- Adults received the social and emotional support they needed from the following: family (76%), friends (67%), God/prayer (45%), church (29%), neighbors (7%), Internet (4%), community (4%), a professional (4%), self-help group (1%), online support group (<1%), and other (4%).
- Allen County adults indicated the following caused them anxiety, stress or depression: job stress (33%), financial stress (31%), death of close family member or friend (20%), marital/dating relationship (17%), poverty/no money (14%), sick family member (11%), other stress at home (11%), fighting at home (8%), family member with mental illness (8%), unemployment (6%), caring for a parent (6%), divorce/separation (4%), not feeling safe in the community (3%), not feeling safe at home (2%), not having enough to eat (2%), not having a place to live (1%), sexual orientation (1%), and other causes (12%).
- On a typical day, adults rated their stress level as very low (26%), low (29%), moderate (36%), high (8%), and very high (1%).
- Allen County adults dealt with stress in the following ways: talked to someone they trust (44%), prayer/meditation (42%), exercised (33%), listened to music (33%), worked on a hobby (27%), slept (26%), ate more or less than normal (23%), worked (19%), drank alcohol (9%), took it out on others (9%), smoked tobacco (7%), used prescription drugs as prescribed (5%), used illegal drugs (2%), and other ways (9%).

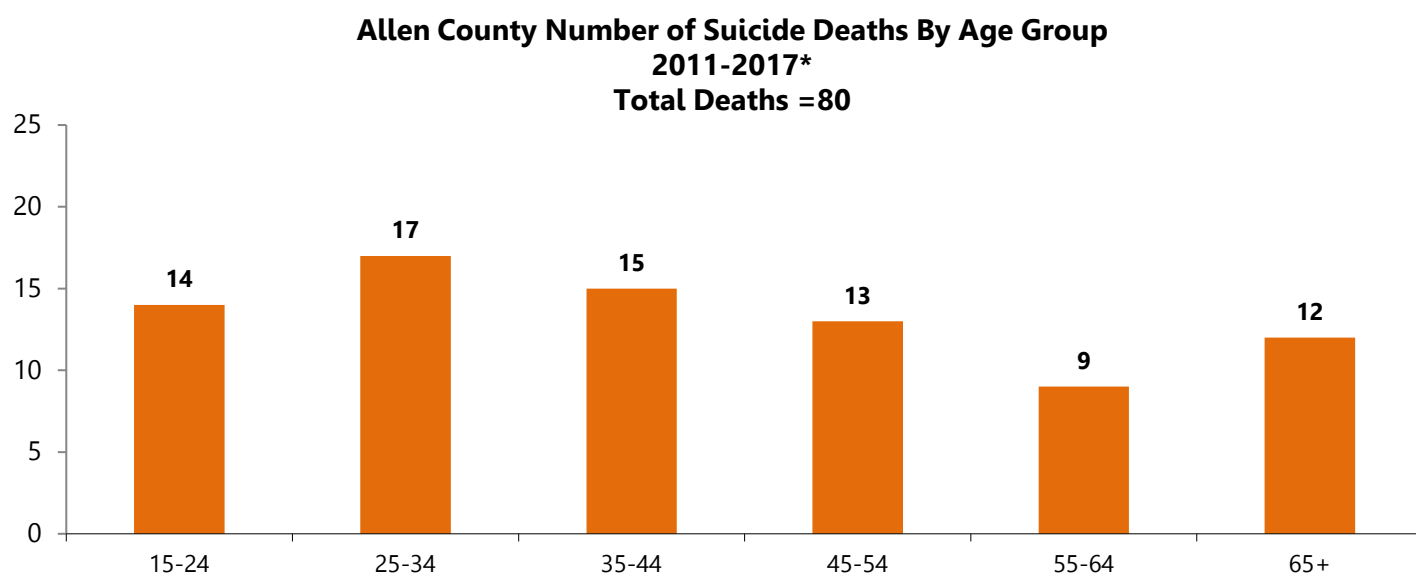
- Ten percent (10%) of Allen County adults have used a program or service to help with depression, anxiety, or other emotional problems for themselves or a loved one. Reasons for not using a program or service to help with depression, anxiety, or emotional problems included the following: had not thought of it (9%), stigma of seeking mental health services (5%), could not afford to go (4%), other priorities (4%), co-pay/deductible was too high (3%), did not know how to find a program (3%), transportation (2%), fear (1%), could not get to the office or clinic (<1%), and other reasons (6%). Sixty-three percent (63%) indicated this type of program was not needed.
- Nearly two-fifths (39%) of adults hit their head hard enough that they were dizzy, had a concussion, were knocked out, or had their “bell rung.”

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2014	U.S. 2014
<b>Considered attempting suicide in the past year</b>	5%	4%	3%	N/A	N/A
<b>Hit their head hard enough that they were dizzy, had a concussion, were knocked out, or had their “bell rung”</b>	34%	38%	39%	N/A	N/A

N/A – Not available

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

- From 2011-2017, 21% of all Allen County suicide deaths occurred among those ages 25-34 years old.



*\*Data for 2016 and 2017 are considered partial and may be incomplete, and should be used with caution  
(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 6/2/2017)*

# Chronic Disease: Cardiovascular Health

## Key Findings

*The 2017 Allen County health assessment found that 5% of adults had survived a heart attack at some time in their life. More than one-third (34%) of Allen County adults had high blood cholesterol, 35% were obese, 34% had high blood pressure, and 18% were smokers, four known risk factors for heart disease and stroke. Heart disease (24%) and stroke (5%) accounted for 29% of all Allen County adult deaths from 2013-2015 (Source: CDC Wonder, 2015).*

## Heart Disease and Stroke

- In 2017, 5% of Allen County adults reported they had survived a heart attack or myocardial infarction, increasing to 18% of those over the age of 65.
- Five percent (5%) of Ohio and 4% of U.S. adults reported they had a heart attack or myocardial infarction in 2015 (Source: 2015 BRFSS).
- Six percent (6%) of adults reported they had coronary heart disease, increasing to 22% of those over the age of 65.
- Four percent (4%) of Ohio and U.S. adults reported having had angina or coronary heart disease in 2015 (Source: 2015 BRFSS).
- Three percent (3%) of adults reported they had congestive heart failure, increasing to 13% of those over the age of 65.

## High Blood Pressure (Hypertension)

- More than one-third (34%) of adults had been diagnosed with high blood pressure. The 2015 BRFSS reports hypertension prevalence rates of 34% for Ohio and 31% for the U.S.
- Six percent (6%) of adults were told they were pre-hypertensive/borderline high.
- More than four-fifths (86%) of adults had their blood pressure checked within the past year.
- Allen County adults diagnosed with high blood pressure were more likely to have:
  - Rated their overall health as fair or poor (59%)
  - Been ages 65 years or older (52%)
  - Been classified as obese by Body Mass Index-BMI (51%)
  - Incomes less than \$25,000 (43%)
  - Been African American (40%)

## High Blood Cholesterol

- More than one-third (34%) of adults had been diagnosed with high blood cholesterol. The 2015 BRFSS reported that 37% of Ohio and 36% of U.S. adults have been told they have high blood cholesterol.
- More than three-fourths (77%) of adults had their blood cholesterol checked within the past 5 years. The 2015 BRFSS reported 78% of Ohio and U.S. adults had their blood cholesterol checked within the past 5 years.

### Allen County Leading Causes of Death 2013-2015

**Total Deaths: 3,293**

- Cancer (24% of all deaths)
- Heart Disease (24%)
- Chronic Lower Respiratory Diseases (7%)
- Stroke (5%)
- Influenza and pneumonia (4%)

(Source: CDC Wonder, 2013-2015)

### Ohio Leading Causes of Death 2013-2015

**Total Deaths: 345,955**

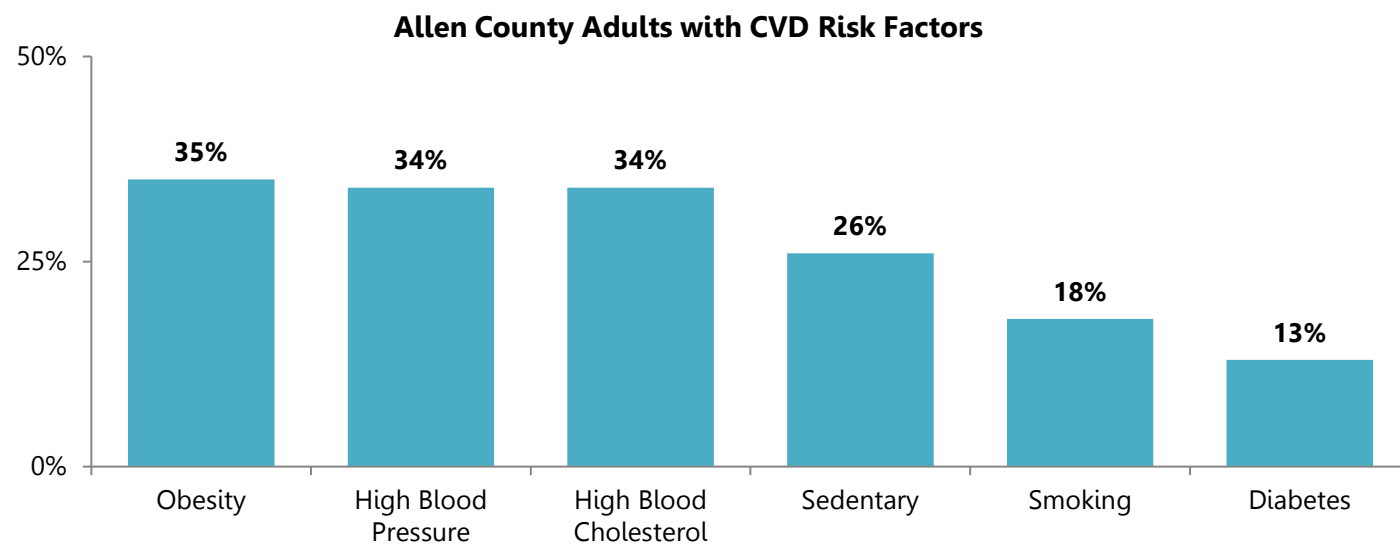
- Heart Disease (24% of all deaths)
- Cancers (22%)
- Chronic Lower Respiratory Diseases (6%)
- Accidents, Unintentional Injuries (5%)
- Stroke (5%)

(Source: CDC Wonder, 2013-2015)



- Allen County adults with high blood cholesterol were more likely to have:
  - Been ages 65 years or older (57%)
  - Rated their overall health as fair or poor (51%)
  - Been classified as obese by Body Mass Index-BMI (46%)

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

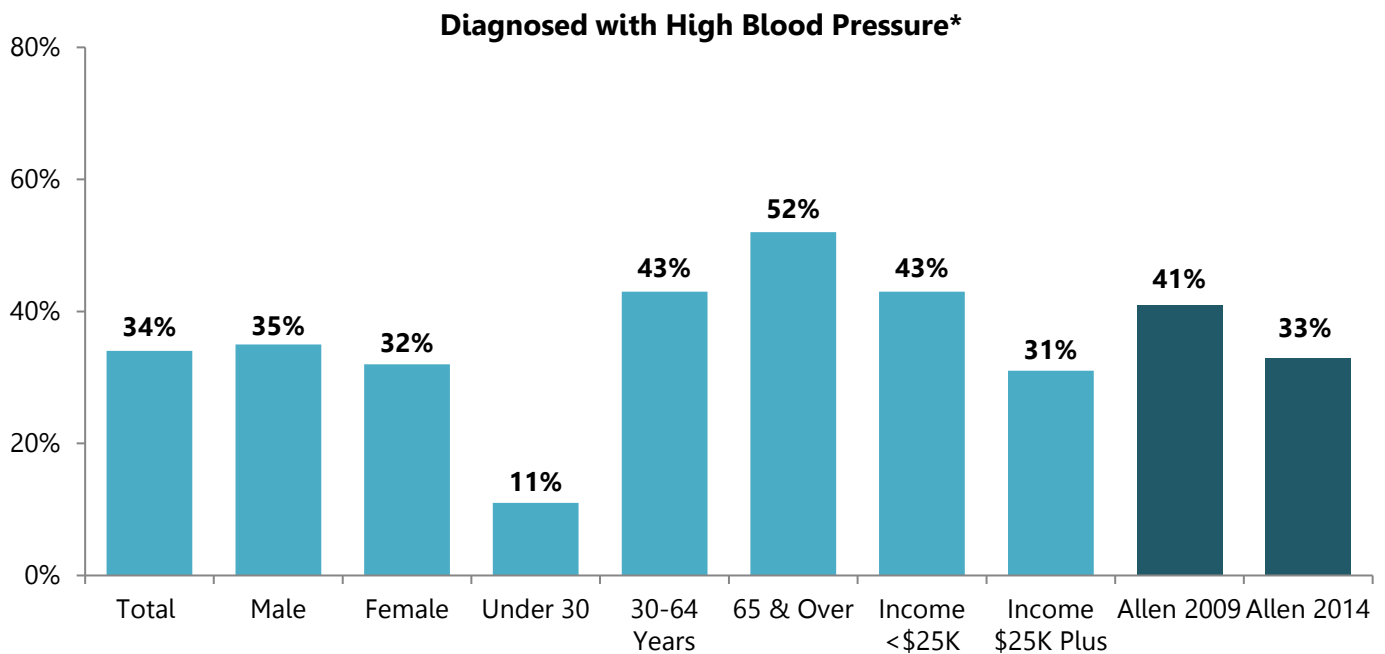


*(Source: 2017 Allen County Health Assessment)*

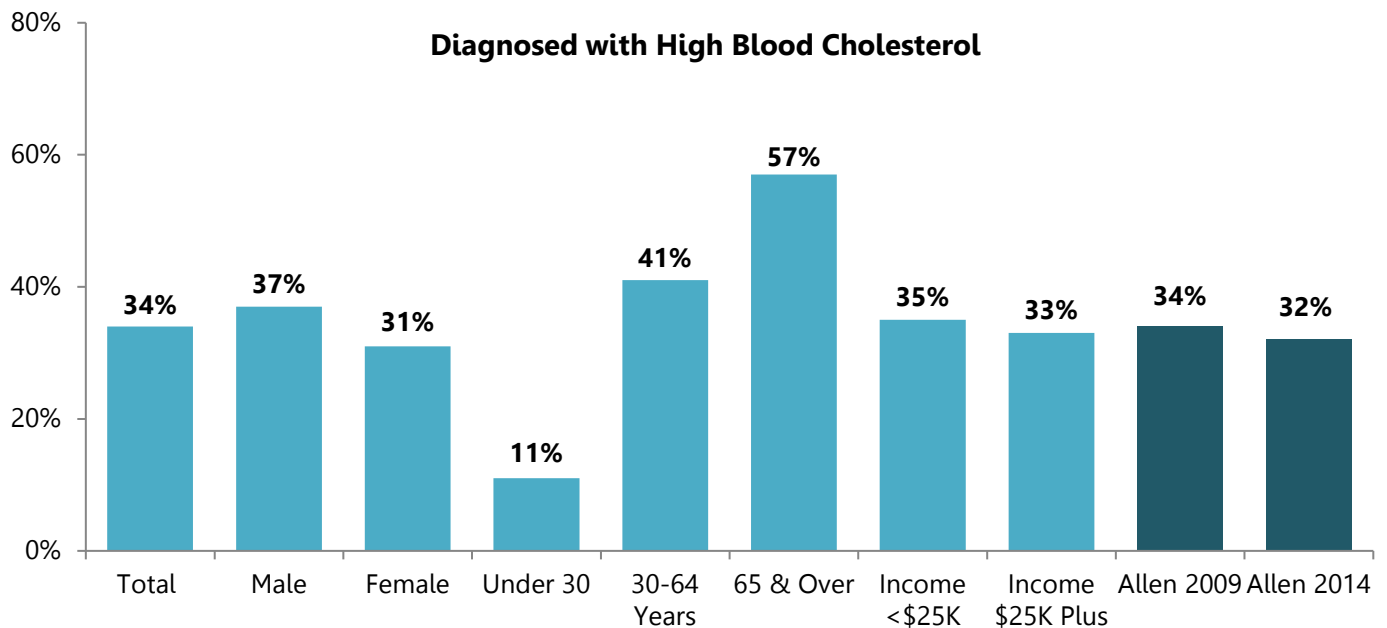
Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Had angina	11%	7%	6%	4%	4%
Had a heart attack	7%	4%	5%	5%	4%
Had high blood pressure	41%	33%	34%	34%	31%
Had high blood cholesterol	34%	32%	34%	37%	36%
Had blood cholesterol checked within past 5 years	N/A	71%	77%	78%	78%

*N/A – Not Available*

*The following graphs show the number of Allen County adults who had been diagnosed with high blood pressure, and high blood cholesterol. Examples of how to interpret the information on the first graph include: 34% of all Allen County adults had been diagnosed with high blood pressure, including 35% of all Allen County males and 52% of those 65 years and older.*

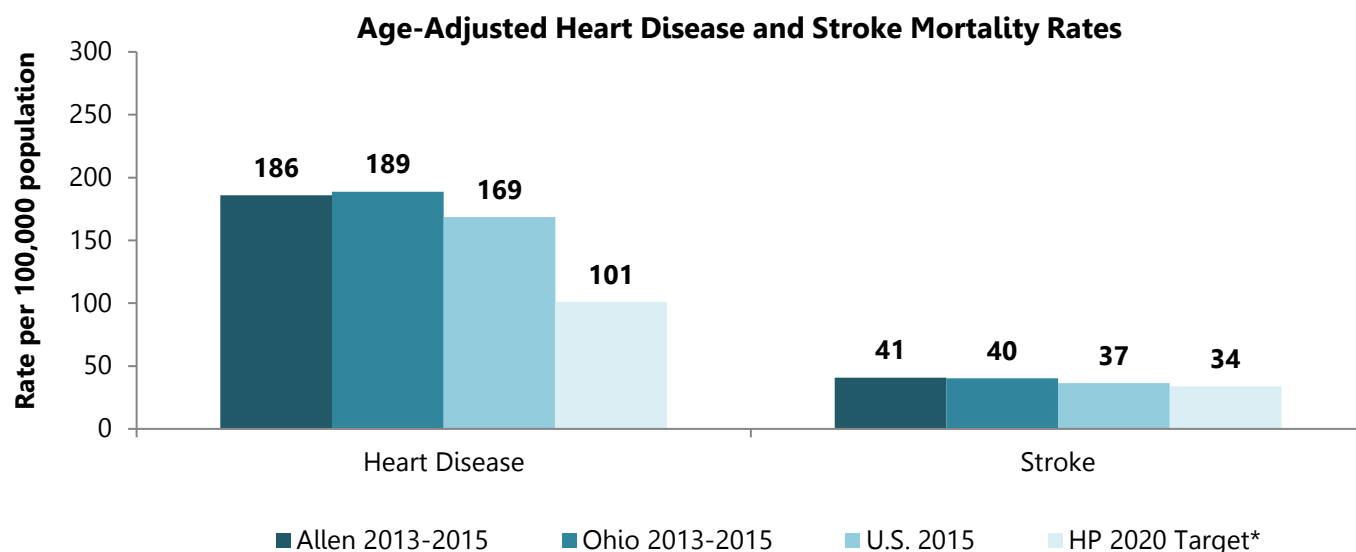


*\*Does not include respondents who indicated high blood pressure during pregnancy only.*

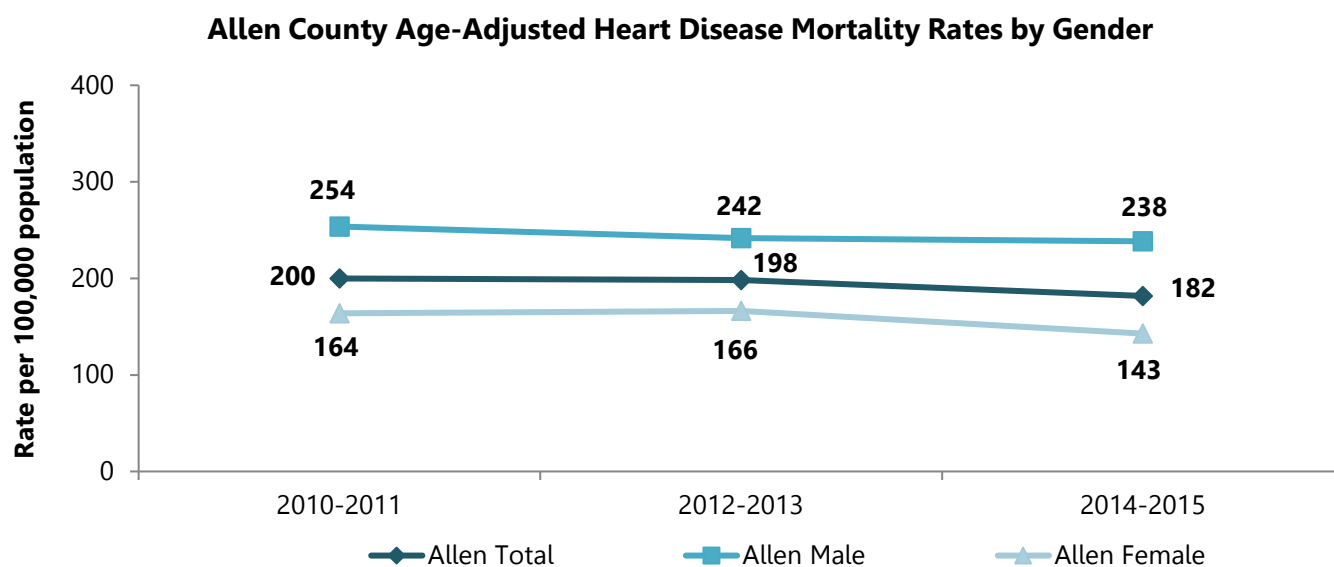


*The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke.*

- When age differences are accounted for, the statistics indicate that from 2013 to 2015 Allen County heart disease mortality rate was lower than the state but higher than the U.S. rate, as well as the Healthy People 2020 target.
- The Allen County age-adjusted stroke mortality rate from 2013 to 2015 was higher than the state, the U.S. figure, and the Healthy People 2020 target objective.
- From 2013- 2015, the total Allen County age-adjusted heart disease mortality rate decreased.



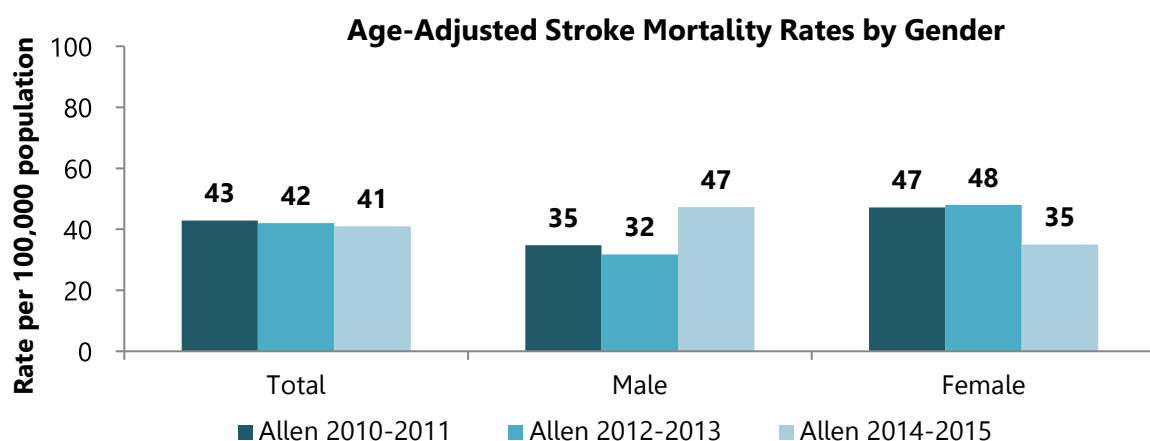
*Note: The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality.  
(Source: CDC Wonder, Healthy People 2020)*



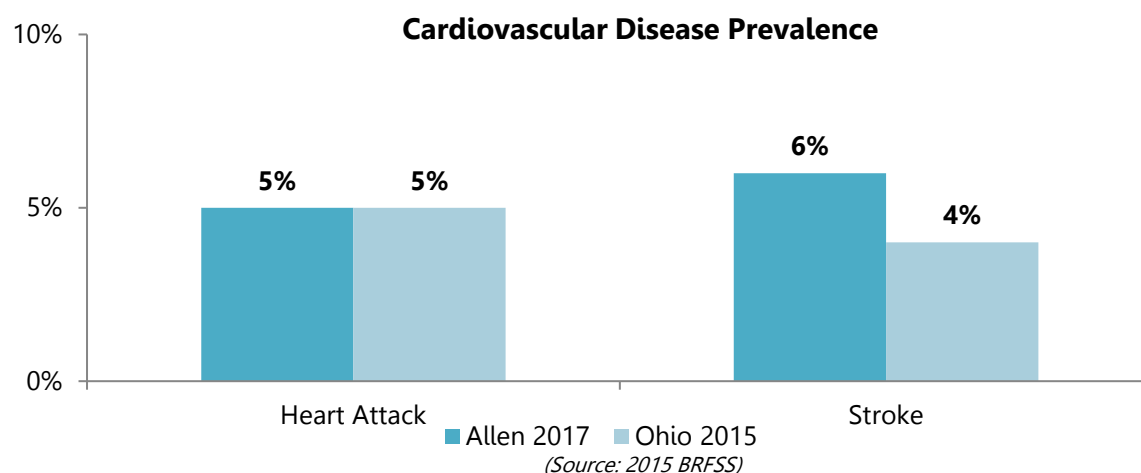
*(Source: CDC Wonder, Underlying Cause of Death, 2010-2015)*

The following graphs shows the age-adjusted mortality rates per 100,000 population stroke by gender, as well as cardiovascular disease prevalence for Allen County and Ohio.

- From 2014-2015 the Allen County stroke mortality rate was higher for males than for females.
- Stroke prevalence in Allen County was slightly higher than Ohio.



(Source: CDC Wonder, Underlying Causes of Death, 2015)



### Healthy People 2020 Objectives Heart Disease and Stroke

Objective	Allen Survey Population Baseline	2015 U.S. Baseline*	Healthy People 2020 Target
<b>HDS-5: Reduce proportion of adults with hypertension</b>	34% (2017)	31% Adults age 18 and up	27%
<b>HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)</b>	34% (2017)	36% Adults age 20+ with TBC > 240 mg/dl	14%

Note: All U.S. figures age-adjusted to 2000 population standard.  
(Source: Healthy People 2020, 2015 BRFSS, 2017 Allen County Health Assessment)

# Chronic Disease: Cancer

## Key Findings

*In 2017, 10% of Allen County adults had been diagnosed with cancer at some time in their life. The Centers for Disease Control and Prevention (CDC) indicates that from 2013-2015, a total of 789 Allen County residents died from cancer, the leading cause of death in the county. The American Cancer Society advises that not using tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages and early detection may reduce overall cancer deaths.*

## Adult Cancer

- Ten percent (10%) of Allen County adults were diagnosed with cancer at some point in their lives, increasing to 30% of those over the age of 65.
- Allen County adults had the following cancer screenings:
  - Colorectal cancer in the past 5 years (30%)
  - Skin cancer in the past year (13%)
  - Oral cancer in the past year (11%)
  - Lung cancer in the past 3 years (5%)

### Allen County Incidence of Cancer, 2010-2014

*All Types: 2,912 cases*

- Lung and Bronchus: 459 cases (16%)
- Breast: 377 cases (13%)
- Prostate: 323 cases (11%)
- Colon and Rectum: 278 cases (10%)

**From 2013-2015, there were 789 cancer deaths in Allen County.**

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 4/27/2016)

**10% of Allen County adults had been diagnosed with cancer at some time in their life.**

## Cancer Facts

- The Centers for Disease Control and Prevention (CDC) indicates that from 2013-2015, cancers caused 24% (789 of 3,293 total deaths) of all Allen County resident deaths. The largest percent (30%) of cancer deaths were from lung and bronchus cancers *(Source: CDC Wonder)*.
- The health assessment has determined that 18% of Allen County adults were current smokers, and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer. The American Cancer Society reports that smoking tobacco is associated with cancers of the mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with cancers of the lung, colorectal, stomach, pancreas, kidney, bladder, uterine cervix, ovary (mucinous) and acute myeloid leukemia.
- The American Cancer Society states that about 600,920 Americans are expected to die of cancer in 2017. Cancer is the second leading cause of death in the U.S. exceeded only by heart disease. Nearly 1 of every 4 deaths is cancer-related.

## Lung Cancer

- In Allen County, 19% of male adults were current smokers, and 54% had stopped smoking for one or more days in the past 12 months because they were trying to quit *(Source: 2017 Allen County Health Assessment)*.
- The CDC reports that lung cancer (n=138) was the leading cause of male cancer deaths from 2013-2015 in Allen County. Cancer of the colon (n=22) male deaths and prostate cancer caused (n=30) male deaths during the same time *(Source: CDC Wonder)*.

- Approximately 17% of female adults in the county were current smokers, and 67% had stopped smoking for one or more days in the past 12 months because they were trying to quit *(Source: 2017 Allen County Health Assessment)*.
- The CDC reports that lung cancer was the leading cause of female cancer deaths (n=96) in Allen County from 2013-2015, followed by breast (n=63) and colon (n=38) cancers *(Source: CDC Wonder)*.
- According to the American Cancer Society, smoking causes 80-90% of lung cancer deaths in the U.S. Men and women who smoke are about 15-30 times more likely to develop lung cancer than nonsmokers *(Source: CDC, What Are the Risk Factors for Lung Cancer?)*.

## Breast Cancer

- In 2017, 59% of Allen County females reported having had a clinical breast examination in the past year.
- More than half (55%) of Allen County females over the age of 40 had a mammogram in the past year.
- The 5-year relative survival for women diagnosed with localized breast cancer (cancer that has not spread to lymph nodes or other locations outside the breast) is 99% *(Source: American Cancer Society, Facts & Figures 2017)*.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommended that those 40 to 44 years of age have the choice of annual mammography; those 45 to 54 have annual mammography; and those 55 years of age and older have biennial or annual mammography, continuing as long as their overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual screening using magnetic resonance imaging (MRI) in addition to mammography is recommended, typically starting at age 30 *(Source: American Cancer Society, Facts & Figures 2017)*.

## Prostate Cancer

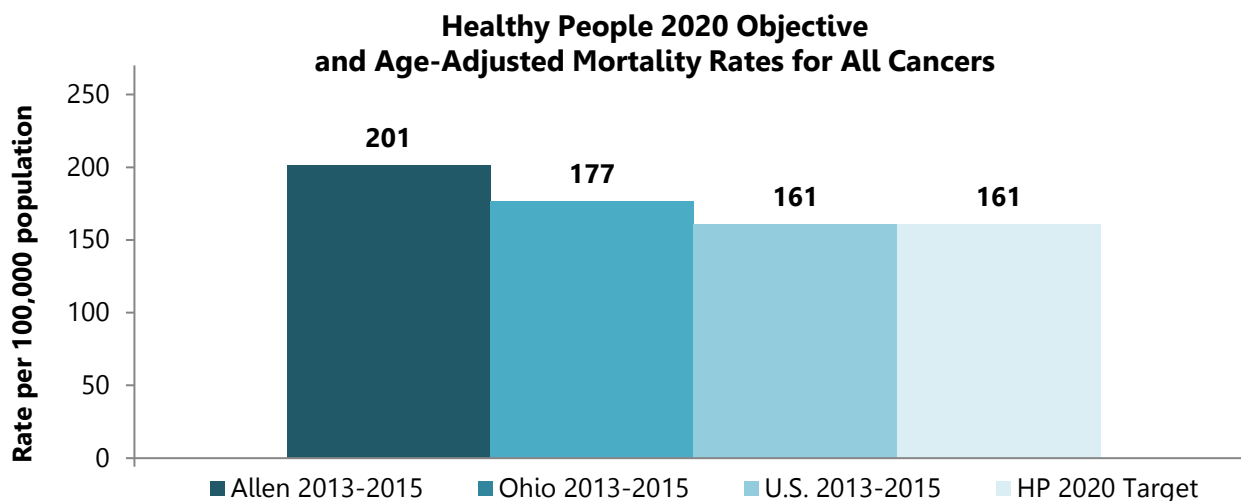
- More than one-third (37%) of Allen County males had a Prostate-Specific Antigen (PSA) test at some time in their lives and 22% had one in the past year.
- CDC statistics indicate that prostate cancer deaths accounted for 7% of all male cancer deaths from 2013-2015 in Allen County.
- Incidence rates for prostate cancer are 74% higher in African Americans than in whites, and they are twice as likely to die of prostate cancer. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. African American men and Caribbean men of African descent have the highest documented prostate cancer incidence rates in the world *(Source: American Cancer Society, Facts & Figures 2017)*.

## Colon and Rectum Cancers

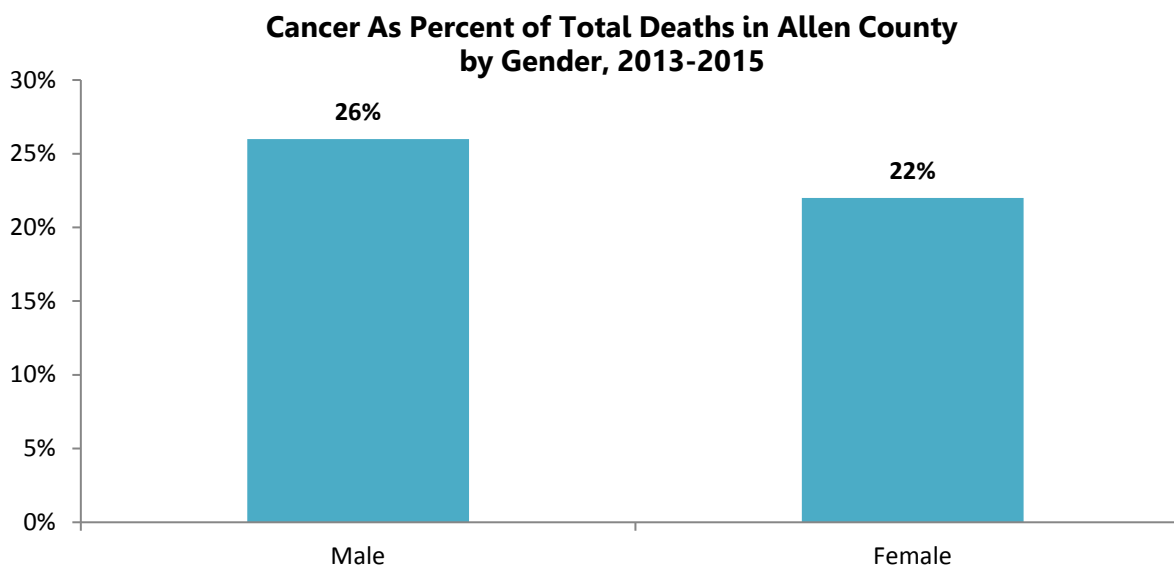
- In 2017, nearly three-fifths (59%) of Allen County adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- The CDC statistics indicate that colon, rectum, and anal cancer deaths accounted for 8% of all male and female cancer deaths from 2013-2015 in Allen County.
- The American Cancer Society reports several risk factors for colorectal cancer, including age; personal or family history of colorectal cancer, polyps, or inflammatory bowel disease; obesity; physical inactivity; a diet high in red or processed meat; alcohol use; and long-term smoking. Very low intake of fruits and vegetables is also potentially a risk factor for colorectal cancer.
- In the U.S., 90% of colon cancers occur in individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings.

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

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



(Source: CDC Wonder, Healthy People 2020)



(Source: CDC Wonder, 2013-2015)

## Incidence of Cancer 2010-2014

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Lung and Bronchus	459	16%
Breast	377	13%
Prostate	323	11%
Colon and Rectum	278	10%
Other/Unspecified	226	8%
Bladder	165	6%
Non-Hodgkins Lymphoma	121	4%
Kidney and Renal Pelvis	107	4%
Melanoma of Skin	107	4%
Pancreas	104	4%
Cancer of Corpus Uteri	94	3%
Oral Cavity & Pharynx	67	2%
Leukemia	69	2%
Esophagus	45	2%
Multiple Myeloma	53	2%
Liver and Bile Ducts	46	2%
Ovary	40	1%
Brain and CNS	42	1%
Stomach	36	1%
Larynx	25	<1%
Cancer of Cervix Uteri	19	<1%
Hodgkins Lymphoma	12	<1%
Testis	9	<1%
Thyroid	88	3%
<b>Total</b>	<b>2,912</b>	<b>100%</b>

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 4/19/2017)

## 2017 Cancer Estimates

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

(Source: American Cancer Society, Facts and Figures 2017)



# Chronic Disease: Arthritis

## Key Findings

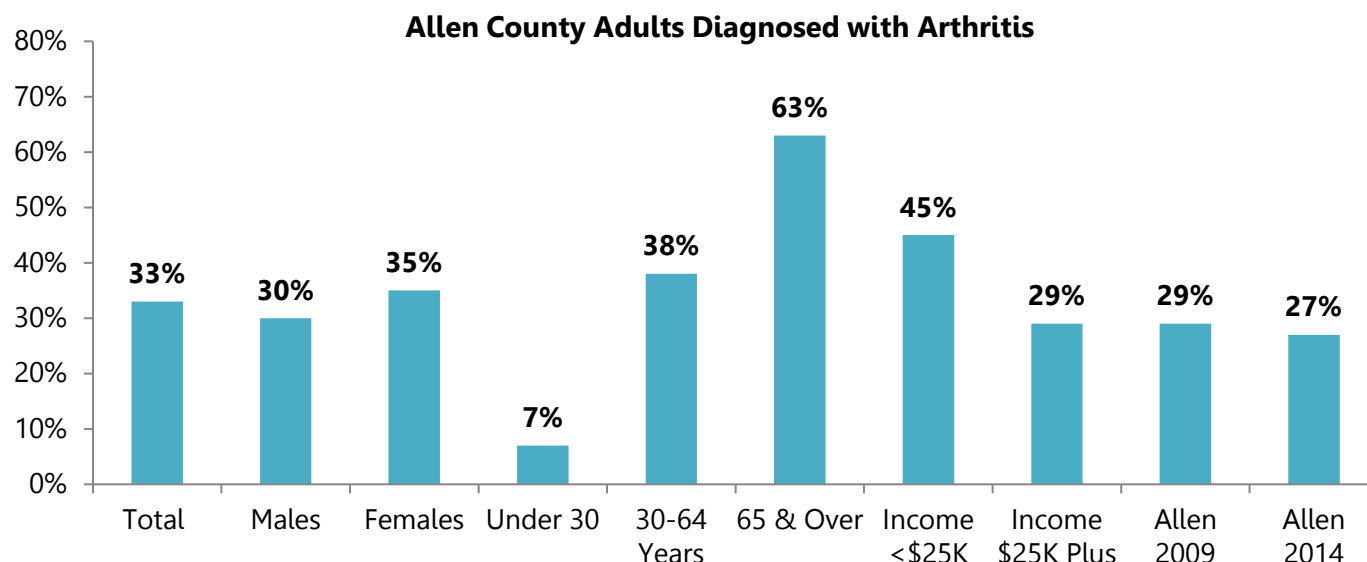
*One third (33%) of Allen County adults were diagnosed with arthritis. According to the 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they had arthritis.*

## Arthritis

- One-third (33%) of Allen County adults were told by a health professional that they had some form of arthritis, increasing to 63% of those over the age of 65.
- According to the 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they have arthritis.
- More than three-fourths (76%) of adults diagnosed with arthritis were overweight or obese.
- Six percent (6%) of adults were told by a health professional that they had osteoporosis, increasing to 11% of females and 17% of those over the age of 65.
- Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of arthritis, have occupations associated with arthritis, are overweight or obese, and/or have joint injuries or infections *(Source: CDC)*.
- An estimated over 54 million U.S. adults (about 23%) report having doctor-diagnosed arthritis. By 2040, over 78 million people will have arthritis. Arthritis is more common among women (24%) than men (18%), and it affects all racial and ethnic groups. Arthritis commonly occurs with other chronic diseases, like diabetes, heart disease, and obesity, and can make it harder for people to manage these conditions *(Source: CDC, Arthritis at a Glance 2017)*.

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Diagnosed with arthritis	29%	27%	33%	28%	25%

The following graph shows the number of Allen County adults who had been diagnosed with arthritis. Examples of how to interpret the information on the first graph include: 33% of all Allen County adults had been diagnosed with arthritis, including 38% of those ages 30-64 years old and 45% of those with incomes less than \$25,000.



### Arthritis: Key Public Health Messages

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

Key self-management activities include the following:

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

*(Source: Centers for Disease Control and Prevention, Arthritis: Key Public Health Messages, 2017)*

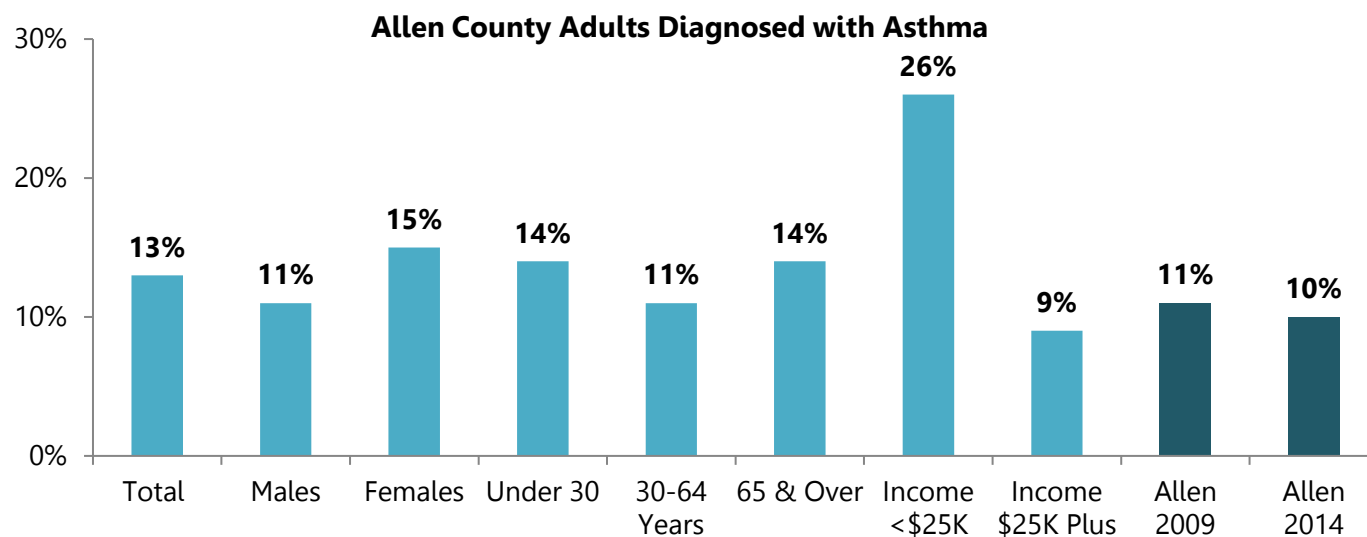
# Chronic Disease: Asthma

## Key Findings

According to the 2017 health assessment, 13% of adults had been diagnosed with asthma.

## Asthma and Other Respiratory Disease

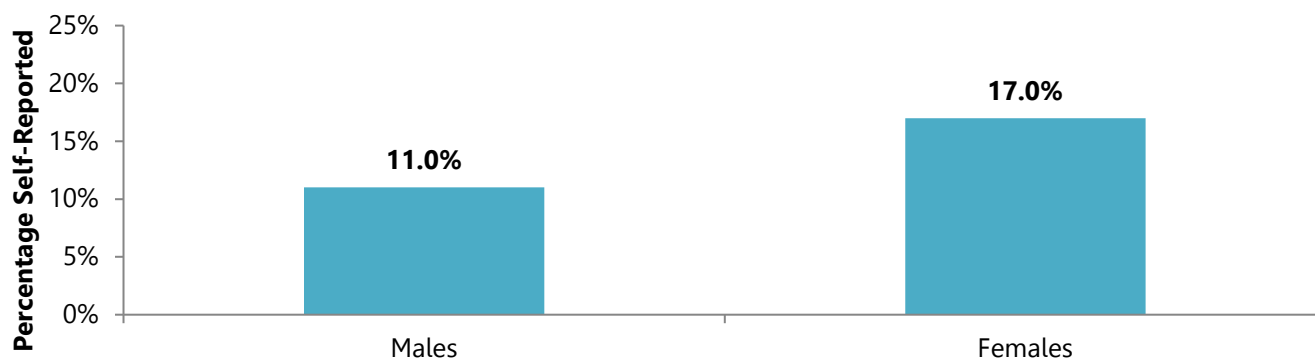
- In 2017, 13% of Allen County adults had been diagnosed with asthma, increasing to 26% of those with incomes less than \$25,000.
- Fourteen percent (14%) of Ohio and U.S. adults had been diagnosed with asthma *(Source: 2015 BRFSS)*.
- Nine percent (9%) of adults had been diagnosed with a chronic lung disease (including bronchitis or emphysema), increasing to 17% of those with incomes less than \$25,000 and 19% of those over the age of 65.
- Some of these triggers are tobacco smoke; dust mites; outdoor air pollution; cockroach allergens; pets; mold; smoke from burning wood or grass; and infections linked to the flu, cold, and respiratory viruses *(Source: CDC, 2017)*.
- Chronic lower respiratory disease was the 3rd leading cause of death in Allen County and the 3rd leading cause of death in Ohio in 2015 *(Source: CDC Wonder, 2015)*.



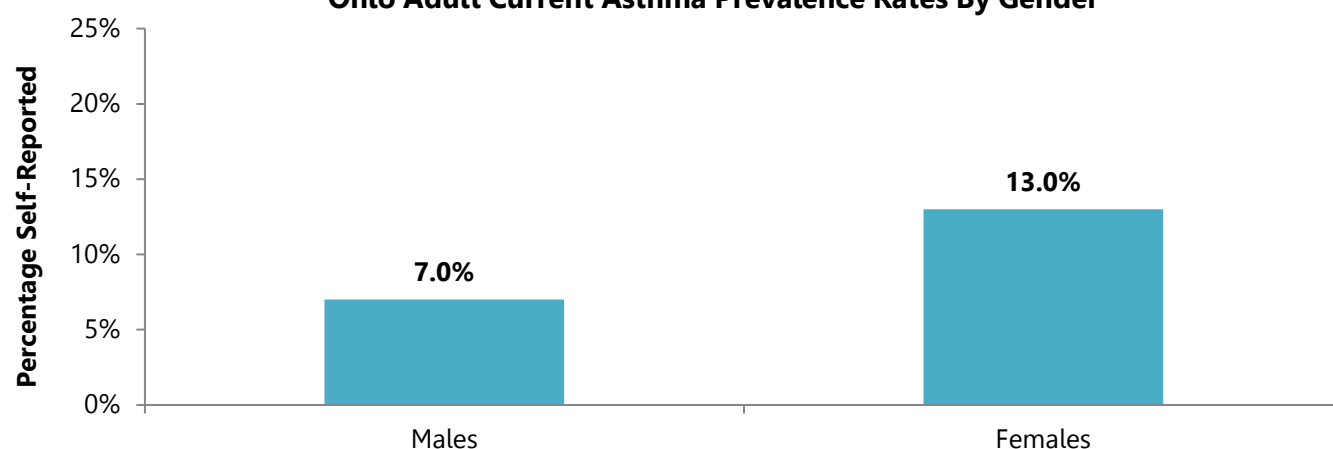
Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Had been diagnosed with asthma	11%	10%	13%	14%	14%

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

**Ohio Adult Lifetime Asthma Prevalence Rates By Gender**



**Ohio Adult Current Asthma Prevalence Rates By Gender**



*(Source: 2015 BFRSS)*

## **Asthma Facts**

- The number of Americans with asthma grows every year. Currently, 26 million Americans have asthma. Of the 26 million, 18.9 million are adults
- Almost 3,600 people die of asthma each year, nearly half of whom are age 65 or older.
- Asthma results in 439,000 hospitalizations and 1.8 million emergency room visits annually.
- Patients with asthma reported 14.2 million visits to a doctor's office and 1.3 million visits to hospital outpatient departments.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

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

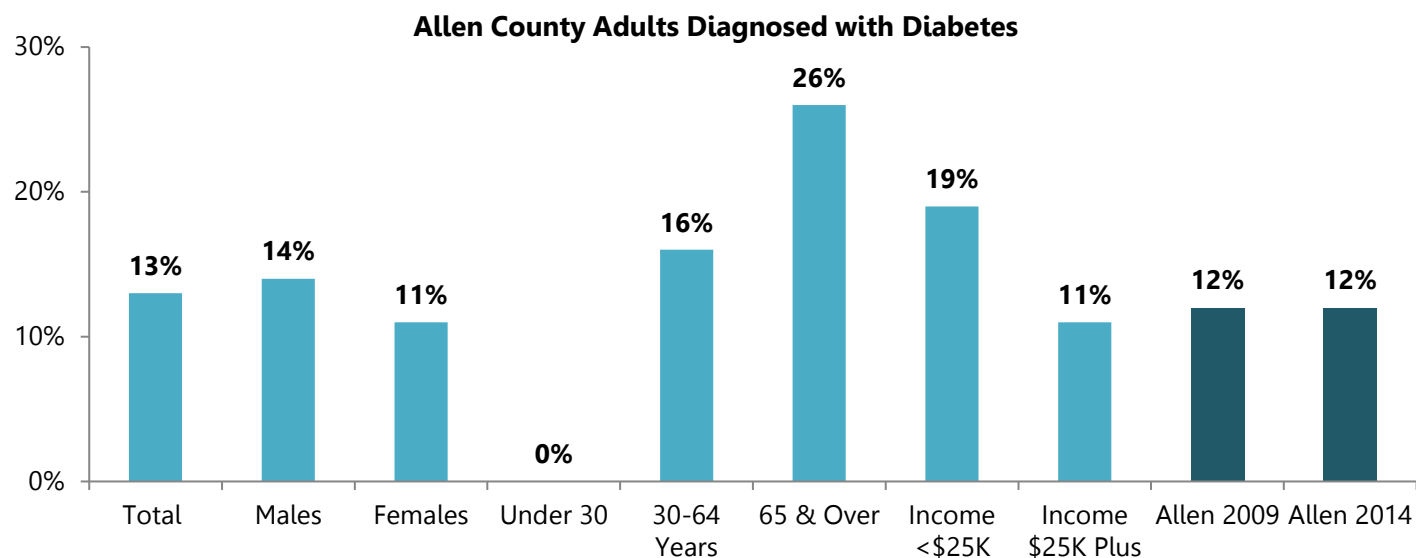
# Chronic Disease: Diabetes

## Key Findings

*In 2017, 13% of Allen County adults had been diagnosed with diabetes. Almost two-fifths (38%) of adults with diabetes rated their health as fair or poor.*

## Diabetes

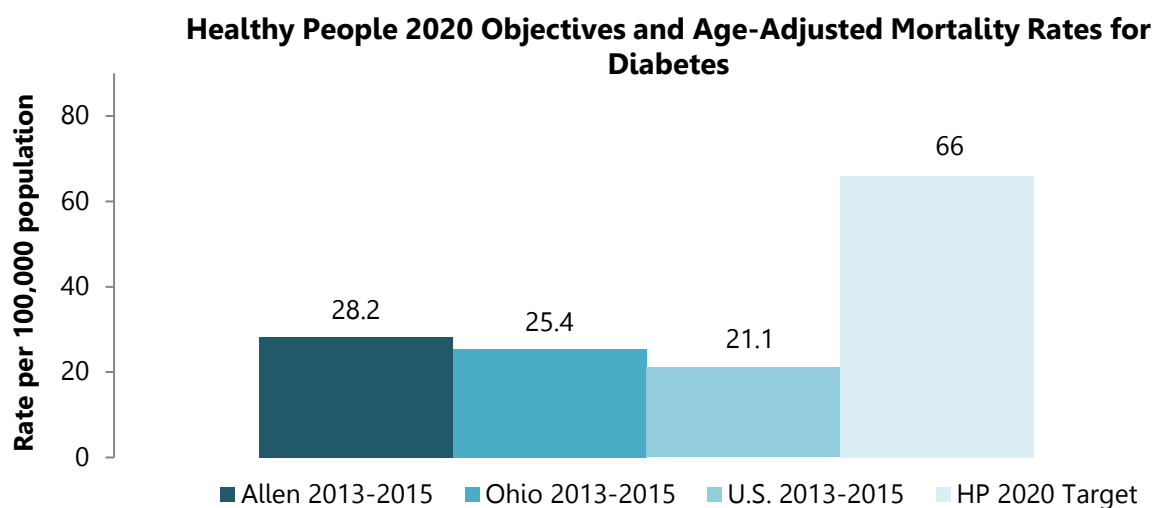
- The health assessment has identified that 13% of Allen County adults had been diagnosed with diabetes, increasing to 26% of those over the age of 65. The 2015 BRFSS reports an Ohio prevalence of 11% and a U.S. prevalence of 10%.
- Five percent (5%) of adults had been diagnosed with pre-diabetes.
- Diabetics were using the following to treat their diabetes: checking blood sugar (71%), diabetes pills (65%), diet control (63%), checking A1C annually (58%), annual vision exam (52%), 6-month check-up with provider (48%), checking their feet (45%), exercise (45%), insulin (33%), dental exam (15%), taking a class (10%), and an injectable (Vyetta, Victoza, Bydureon) (3%).
- Almost two-fifths (38%) of adults with diabetes rated their health as fair or poor.
- Allen County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - 91% were obese or overweight
  - 73% had been diagnosed with high blood pressure
  - 66% had been diagnosed with high blood cholesterol



Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Diagnosed with diabetes	12%	12%	13%	11%	10%

*The following graph shows the age-adjusted mortality rates from diabetes for Allen County and Ohio residents with comparison to the Healthy People 2020 target objective.*

- From 2013-2015, Allen County's age-adjusted diabetes mortality rate was greater than the Ohio and the U.S. rate, but less than the Healthy People 2020 target objective.



*(Source: CDC Wonder and Healthy People 2020)*

### Statistics About Diabetes

- In 2012, 29.1 million Americans, or 9.3% of the population, had diabetes. Approximately 1.25 million American children and adults have type 1 diabetes.
- Of the 29.1 million, 8.1 million were undiagnosed.
- 86 million Americans have prediabetes.
- 1.4 million Americans are diagnosed with diabetes every year.
- As many as 1 in 3 American adults will have diabetes in 2050 if present trends continue.
- The economic cost of diagnosed diabetes in the U.S. is \$245 billion per year.
- Diabetes kills more Americans every year than AIDS and breast cancer combined.
- Diabetes is the primary cause of death for 69,071 Americans each year, and contributes to the death of 234,051 Americans annually.

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

# Chronic Disease: Quality of Life

## Key Findings

*In 2017, 24% of Allen County adults were limited in some way because of a physical, mental or emotional problem. Back or neck problems (45%) were reported as the most limiting problem in Allen County.*

## Impairments and Health Problems

- In 2017, nearly one-fourth (24%) of Allen County adults were limited in some way because of a physical, mental or emotional problem (21% Ohio and U.S., 2015 BRFSS), increasing to 41% of African Americans and 42% of those with incomes less than \$25,000.
- Among those who were limited in some way, the following most limiting problems or impairments were reported: back or neck problems (45%); arthritis/rheumatism (33%); sleep problems (25%); stress, depression, anxiety, or emotional problems (23%); chronic pain (23%); walking problems (20%); high blood pressure (18%); fitness level (16%); lung/breathing problems (14%); diabetes (13%); heart problems (13%); eye/vision problems (13%); hearing problems (11%); fractures, bone/joint injuries (10%); dental problems (4%); incontinence (4%); cancer (4%); and stroke-related problems (3%).
- In the past year, adults reported needing the following services: eyeglasses or vision services (30%), pain management (10%), help with routine needs (7%), help with personal care needs (6%), a walker (5%), a cane (4%), medical supplies (4%), hearing aids or hearing care (3%), oxygen or respiratory support (2%), a wheelchair (2%), durable medical equipment (2%), a personal emergency response system (1%), mobility aids or devices (1%), a special bed (1%), wheelchair ramp (1%), and a special telephone (<1%).
- Allen County adults would have a problem getting the following if they needed it today: someone to loan them \$50 (22%), someone to help if they were sick in bed (17%), someone to talk to about their problems (16%), someone to take them to the doctor (15%), someone to help them pay for medical expenses (13%), someone to accompany them to their doctor appointments (12%), someone to explain directions from their doctor (7%), and back-up child care (5%).

Adult Comparisons	Allen County 2009	Allen County 2014	Allen County 2017	Ohio 2015	U.S. 2015
Limited in some way because of a physical, mental, or emotional problems	23%	18%	24%	21%	21%

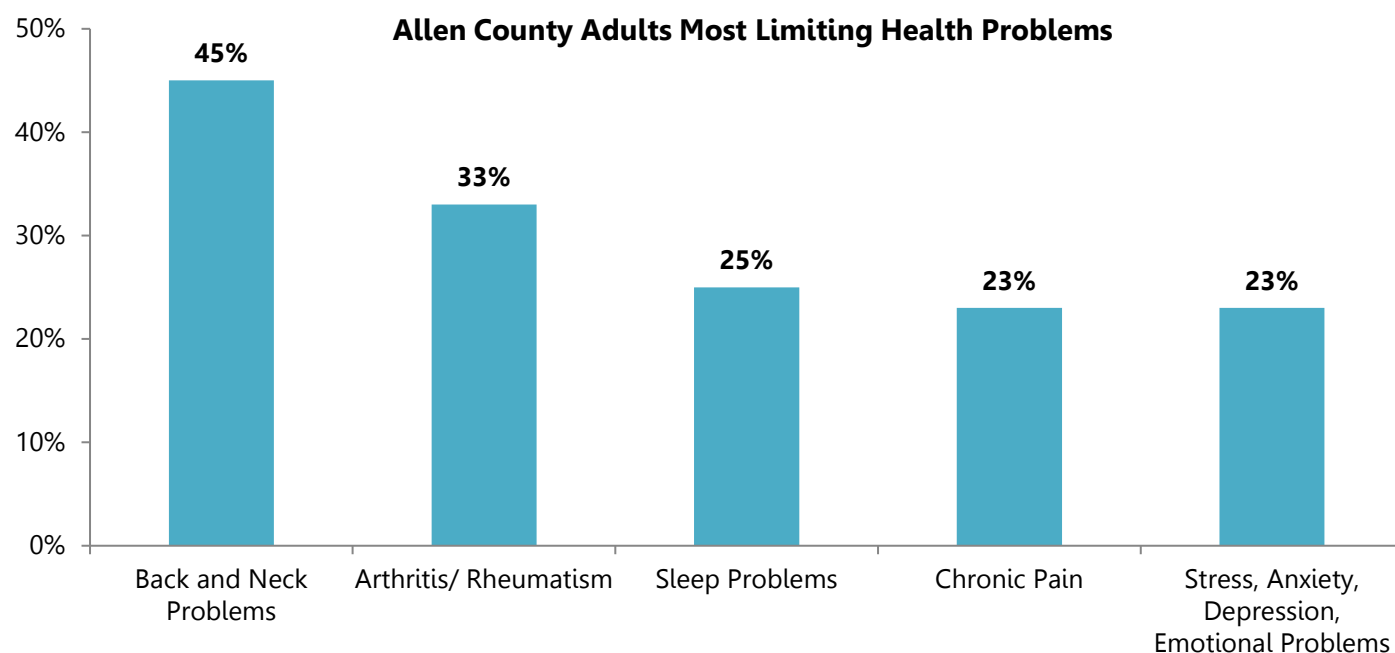
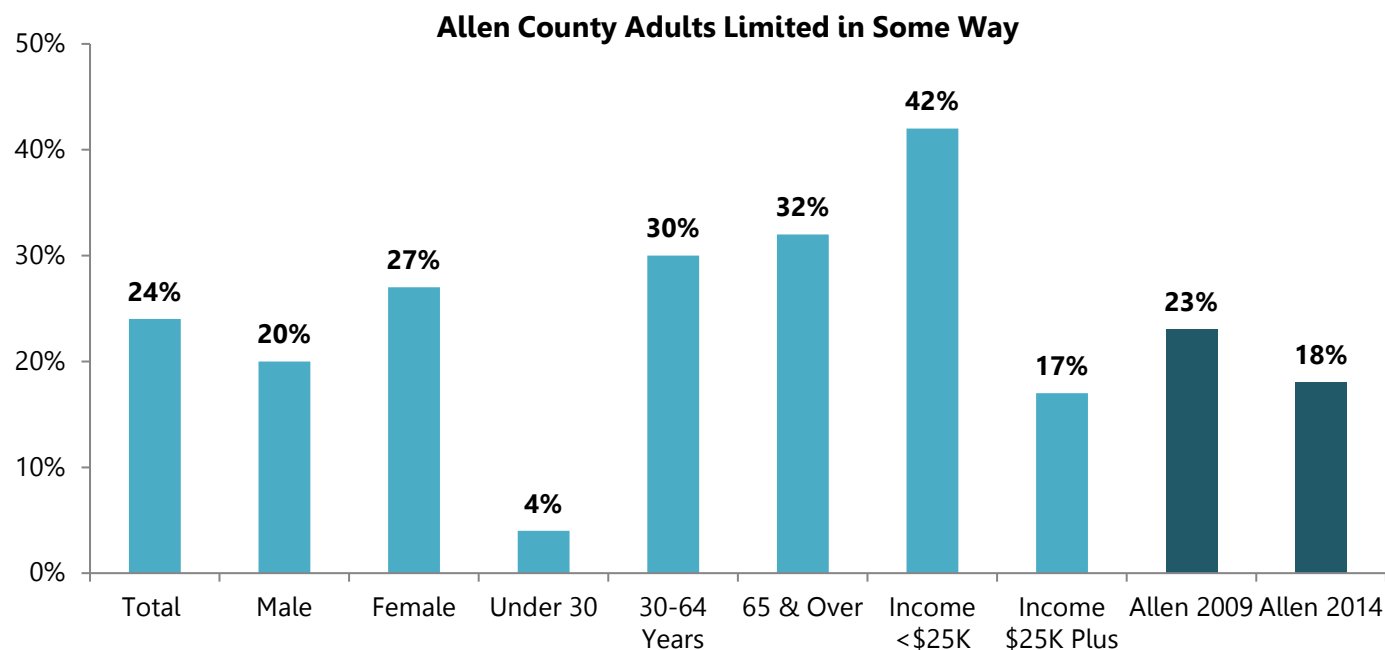
## Healthy People 2020

### Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Allen County 2017	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	33%	36%

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

*The following graphs show the percentage of Allen County adults that were limited in some way and the most limiting health problems. Examples of how to interpret the information shown on the graph include: 24% of Allen County adults were limited in some way, including 20% of males and 42% of those with incomes less than \$25,000.*





# Social Conditions: Social Determinants of Health

## Key Findings

*In 2017, 6% of Allen County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Ten percent (10%) of adults experienced 4 or more adverse childhood experiences (ACE's), increasing to 26% of those who contemplated suicide in the past year. In the past year, 10% of Allen County adults had to choose between paying bills and buying food.*

## Healthy People 2020

- Healthy People 2020 developed five key determinants as a "place-based" organizing framework. These five determinants include:
  - Economic stability
  - Education
  - Social and community context
  - Health and health care
  - Neighborhood and built environment



## Economic Stability

- Adults reported the following percent of their household income goes to their housing:
  - Less than 30% (45%)
  - 30-50% (24%)
  - 50% or higher (18%)
  - Don't know (13%)
- Adults experienced the following food insecurity issues during the past 12 months: had to choose between paying bills and buying food (10%), food assistance was cut (7%), worried food would run out (6%), were hungry but did not eat because they did not have money for food (4%), loss of income led to food insecurity issues (3%), and went hungry/ate less to provide more food for their family (3%).
- Allen County adults attempted to get assistance from the following social service agencies: Job & Family Services/JFS (13%), food pantries (6%), church (4%), friend or family member (4%), WIC (3%), health department (2%), 2-1-1/United Way (1%), legal aid (1%), personal debts and budgeting (<1%), other charities (<1%), and somewhere else (2%). Three percent (3%) did not know where to look for assistance.
- Adults received assistance for the following in the past year: healthcare (16%), dental care (13%), Medicare (13%), food (11%), prescription assistance (11%), utilities (8%), home repair (6%), free tax preparation (6%), transportation (6%), mental illness issues (5%), employment (4%), rent/mortgage (4%), clothing (2%), legal aid services (2%), credit counseling (1%), unplanned pregnancy (1%), affordable childcare (1%), being a victim of a crime (1%), gambling addiction (<1%), and post-incarceration issues (<1%).
- The median household income in Allen County was \$44,103. The U.S. Census Bureau reports median income levels of \$51,086 for Ohio and \$55,775 for the U.S. (Sources: U.S. Census Bureau, Small Area Income and Poverty Estimates)
- Eighteen percent (18%) of all Allen County residents were living in poverty, and 25% of children and youth ages 0-17 were living in poverty (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2011-2015).
- The unemployment rate for Allen County in 2017 was 5.8%. (Sources: U.S. Census Bureau, Small Area Income and Poverty Estimates)
- There were 44,859 housing units. The owner-occupied housing unit rate was 67.2%. Rent in Allen County cost an average of \$639 per month. (Sources: U.S. Census Bureau, Small Area Income and Poverty Estimates)

## Education

- Eighty-nine percent (89%) of Allen County adults 25 years and over had a high school diploma or higher *(Source: U.S. Census Bureau, American Community Survey, 2011-2015).*
- Seventeen percent (17%) of Allen County adults 25 years and over had at least a bachelor's degree *(Source: U.S. Census Bureau, American Community Survey, 2011-2015).*

## Social and Community Context

- Allen County adults reported the following as the top 5 issues in their community:
  - Alcohol/drug abuse (69%)
  - Crime (53%)
  - Obesity (38%)
  - Opiate/prescription drug abuse (36%)
  - Poverty (29%)
- Adults reported the following transportation issues: no car (6%), suspended/no driver's license (4%), no car insurance (3%), disabled (3%), other car issues/expenses (2%), could not afford gas (2%), limited public transportation available or accessible (2%), and did not feel safe to drive (1%). Ninety percent (90%) of adults did not have any transportation issues.
- Three percent (3%) of adults have called 2-1-1, a non-emergency information referral number, for assistance, increasing to 8% of African Americans and 9% of those with incomes less than \$25,000. Of those who called 2-1-1 for assistance, 39% received information that assisted them in getting the help they needed.
- Three percent (3%) of Allen County adults were threatened to be abused in the past year. They were threatened to be abused by the following: someone outside their home (63%), a child (26%), a spouse or partner (21%), another family member (16%), a paid caregiver (5%), and someone else (26%).
- Six percent (6%) of Allen County adults were abused in the past year. They were abused by the following: a spouse or partner (44%), someone outside their home (42%), a child (14%), another family member (6%), a parent (3%), and someone else (11%).
- Allen County adults were abused in the following ways: verbally (73%), emotionally (38%), physically (31%), financially (20%), through electronic methods (4%), and sexually (4%).

### Social Determinants of Health

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

*(Source: HealthyPeople2020, Retrieved May 19 2017)*

- Adults experienced the following adverse childhood experiences (ACEs): their parents became separated or were divorced (20%); lived with someone who was a problem drinker or alcoholic (15%); a parent or adult in their home swore at, insulted, or put them down (15%); lived with someone who was depressed, mentally ill, or suicidal (9%); lived with someone who used illegal stress drugs, or who abused prescription medications (9%); their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (7%); a parent or adult in their home hit, beat, kicked, or physically hurt them (6%); someone at least 5 years older than them or an adult touched them sexually (6%); lived with someone who served time or was sentenced to serve time in prison, jail or other correctional facility (5%); their parents were not married (4%); someone at least 5 years older than them or an adult tried to make them touch them sexually (4%); and someone at least 5 years older than them or an adult forced them to have sex (2%).
- Ten percent (10%) of adults experienced 4 or more ACEs, increasing to 24% of those who used recreational drugs in the past 30 days and 26% of those who contemplated suicide in the past year.

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

Adult Behaviors	Experienced 4 or More ACEs	Did Not Experience Any ACEs
<b>Had at least one alcoholic beverage in past month</b>	60%	55%
<b>Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)</b>	45%	28%
<b>Had an income less than \$25,000</b>	35%	25%
<b>Two or more weeks in a row felt sad or hopeless</b>	31%	6%
<b>Current smoker (currently smoke some or all days)</b>	25%	19%
<b>Considered their neighborhood to be slightly safe from crime</b>	25%	19%
<b>Physically abused</b>	9%	44%

## Health and Health Care

- In the past year, 5% of adults were uninsured, increasing to 13% of African Americans.
- When seeking health care, 3% of Allen County adults felt their experiences were worse than other races. Forty-nine percent (49%) felt their experiences were the same, and 5% reported their experiences were better than other races.
- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Allen County adults.

## Neighborhood and Built Environment

- Allen County adults reported doing the following while driving: eating (44%); talking on hand-held cell phone (36%); talking on hands-free cell phone (31%); texting (20%); not wearing a seatbelt (10%); using internet on their cell phone (8%); being under the influence of prescription drugs (3%); reading (1%); being under the influence of alcohol (1%); being under the influence of recreational drugs (1%); and other activities (such as applying makeup, shaving, etc.) (2%).
- About one-fourth (24%) of Allen County adults reported that their neighborhood was extremely safe, 49% reported it to be quite safe, 19% reported it to be slightly safe, and 4% reported it to be not safe at all. Four percent (4%) reported that they did not know how safe from crime their neighborhood was.

# Social Conditions: Environmental Health

## Key Findings

*Allen County adults reported the following top three issues that threatened their health in the past year: mold (9%), insects (6%), and bed bugs (5%). Seventy-seven percent (77%) of adults reported they had a working smoke detector in their home.*

## Environmental Health

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

— Mold (9%)	— Lice (2%)
— Insects (6%)	— Agricultural chemicals (1%)
— Bed bugs (5%)	— Chemicals found in products (1%)
— Rodents (5%)	— Lead paint (1%)
— Air quality (4%)	— Radon (1%)
— Plumbing problems (3%)	— Safety hazards (1%)
— Temperature regulation (3%)	— Sewage/waste water problems (1%)
— Asbestos (2%)	— Unsafe water supply/wells (1%)
— Cockroaches (2%)	— Radiation (<1%)

## Disaster Preparedness

- Allen County households had the following disaster preparedness supplies: cell phone with texting (79%); working flashlight and working batteries (78%); cell phone (77%); working smoke detector (77%); computer/tablet (70%); 3-day supply of nonperishable food for everyone in the household (52%); working battery-operated radio and working batteries (48%); 3-day supply of prescription medication for each person who takes prescribed medicines (45%); 3-day supply of water for everyone in the household (1 gallon of water per person per day) (36%); home land-line telephone (35%); communication plan (27%); generator (26%); family disaster plan (11%); and a disaster plan (11%). Seven percent (7%) of adults reported they did not have any disaster supplies and 2% did not know.

# Social Conditions: Parenting

## Key Findings

*More than one-fourth (26%) of Allen County mothers never breastfed their child. Eighty-three percent (83%) of parents put their infant to sleep on their back. Sixty-six percent (66%) of parents discussed dating and relationships with their 10-to-17-year-old child.*

## Parenting

- When asked how parents put their child to sleep as an infant, 83% said on their back, 10% said on their stomach, 10% said in bed with them or another person, and 6% said on their side.
- Children were put to sleep in the following places: crib/bassinet without bumper, blankets, or stuffed animals (60%); crib/bassinet with bumper, blankets, or stuffed animals (32%); pack n' play (18%); in bed with parent or another person (17%); swing (13%); car seat (5%); and couch or chair (3%).
- Mothers breastfed their child: more than 9 months (17%), 4 to 6 months (8%), 7 weeks to 3 months (7%), 3 to 6 weeks (21%), 2 weeks or less (13%), still breastfeeding (6%), and never breastfed (26%). No mothers reported breastfeeding their child for 6 to 9 months.
- Parents discussed the following topics with their 10-to-17-year-old child: dating and relationships (66%); bullying (65%); negative effects of alcohol, tobacco, illegal drugs, or misusing prescription drugs (61%); social media issues (59%); weight status (59%); career plan/post-secondary education (55%); school/legal consequences of using alcohol, tobacco, or other drugs (49%); refusal skills/peer pressure (47%); body image (44%); abstinence and how to refuse sex (44%); volunteering (41%); depression, anxiety, suicide (33%); energy drinks (33%); and birth control, condoms, safer sex and STD prevention (28%).

### Facts about Breastfeeding

- The percent of infants who were ever breastfed is 78% in Ohio, compared to 81% in the U.S.
- Human milk provides virtually all the protein, sugar, and fat your baby needs to be healthy, and it also contains many substances that benefit your baby's immune system, including antibodies, immune factors, enzymes, and white blood cells. These substances protect your baby against a wide variety of diseases and infections not only while he is breastfeeding but in some cases long after he has weaned. Formula cannot offer this protection.
- With regards to allergy prevention, there is some evidence that breastfeeding protects babies born to families with a history of allergies, compared to those babies who are fed either a standard cow's milk based formula or a soy formula.
- Recent research even indicates that breastfed infants are less likely to be obese in adolescence and adulthood. They are also less vulnerable to developing both type 1 and type 2 diabetes.
- The American Academy of Pediatrics (AAP) recommends that breastfeeding continue for at least 12 months, and thereafter for as long as mother and baby desire. The World Health Organization recommends continued breastfeeding up to 2 years of age or beyond.

*(Source: CDC, Breastfeeding, July, 31, 2013 & Healthy Children, Breastfeeding Benefits Your Baby's Immune System, 5/11/2016)*

# African American: Health Care Access, Coverage, & Utilization

## Key Findings

*Only 119 African Americans responded to the survey. As a result, there is a greater margin of error when generalizing to the entire population. Caution should be taken when generalizing the results of the assessment to the African American community. The 2017 health assessment indicates that 13% of African Americans did not have health care coverage. Twenty-four percent (24%) rated their health status as fair or poor.*

## Health Status

- Allen County African American adults were more likely to have:
  - Rated their health status as fair or poor (24% compared to 13% of the rest of Allen County adults).
  - Rated their physical health as not good on four or more days in the previous month (35% compared to 23% of the rest of Allen County adults).
  - Rated their mental health as not good on four or more days in the previous month (31% compared to 27% of the rest of Allen County adults).
  - Reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation (32% compared to 28% of the rest of Allen County adults).
- Allen County African American adults were less likely to:
  - Have rated their health status as excellent or very good (48% compared to 58% of the rest of Allen County adults).

## Health Care Coverage

- Thirteen percent (13%) of Allen County African American adults did not have health care coverage, compared to 5% of the rest of Allen County adults.
- The following types of health care coverage were used: Medicaid or medical assistance (32%), employer (17%), Medicare (12%), multiple-including private sources (5%), multiple-including government sources (5%), military or VA (4%), Health Insurance Marketplace (4%), someone else's employer (3%), self-paid plan (2%), and Indian Health Service (2%).
- The top reasons uninsured African American adults gave for being without health care coverage were:
  1. They lost their job or changed employers (42%)
  2. They could not afford to pay the premiums (16%)
  3. They became ineligible (16%)

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

## Health Care Access and Utilization

- African American Adults visited the following places for health care services or advice: a doctor's office (52%), a hospital emergency room (46%), Health Partners of Western Ohio (31%), urgent care center (28%), family and friends (12%), internet (10%), Community Health Services (7%), chiropractor (6%), VA (5%), in-store health clinic (3%), alternative therapies (2%), telemedicine (2%), e-visit (2%), and some other kind of place (1%). One percent (1%) of adults indicated they had no usual place for health care services.

### Uninsured African Americans

- 18% of African Americans under 65 years of age are without health insurance coverage.
- Over 103 million African Americans suffer disproportionately in the health care system.
- A larger share of African Americans and Latinos lack a usual place of health care, and they are less than half as likely as Whites to have a regular doctor.

*(Source: NAACP, Health Care Fact Sheet)*

- Reasons for not having a usual source of medical care included the following: had two or more usual places (9%), no insurance (8%), had not needed a doctor (7%), did not know where to go (6%), cost (5%), do not like/trust/ believe in doctors (2%), previous doctor unavailable/moved (2%), and other reasons (3%). Two percent (2%) of adults indicated multiple reasons for not having a usual source of medical care.
- Thirty-nine percent (39%) of African American adults reported feeling extremely confident filling out medical records by themselves. 35% felt quite a bit confident, 18% felt somewhat confident, and 3% felt a little bit confident. Five percent (5%) of adults did not feel confident at all.
- The following might prevent Allen County African American adults from seeing a doctor if they were sick, injured, or needed some type of health care: difficult to find/no transportation (16%), cost (13%), worried they might find something wrong (11%), doctor would not take their insurance (7%), could not get time off work (6%), frightened of the procedure or doctor (3%), hours not convenient (2%), difficult to get an appointment (1%), do not trust or believe doctors (1%), discrimination (1%), and some other reason (3%).
- More than one-fourth (27%) of African American adults went outside of Allen County for the following health care services in the past year: dental services (14%), specialty care (9%), primary care (2%), cancer care (2%), orthopedic care (2%), pediatric care (2%), cardiac care (1%), and other services (12%).
- More than one-fifth (21%) of African American adults did not get their prescriptions from their doctor filled in the past year.
- Those who did not get their prescriptions filled gave the following reasons: no insurance (41%), no prescriptions to be filled (30%), cost (19%), side effects (15%), they stretched their current prescription by taking less than prescribed (7%), and fear of addiction (7%).
- When seeking health care, 6% of Allen County African American adults felt their experiences were worse than other races. Thirty-two percent (32%) felt their experiences were the same as other races, and 2% reported their experiences were better than other races. Forty-nine percent (49%) did not know how their health care experiences compared to other races.
- Allen County African American adults were more likely to have:
  - Visited a hospital emergency room for health care services or advice (46% compared to 22% of the rest of Allen County adults.)
  - Visited Health Partners of Western Ohio for health care services or advice (31% compared to 6% of the rest of Allen County adults.)
- Allen County African American adults were less likely to have:
  - Visited a doctor for a routine checkup in the past year (60% compared to 63% of the rest of Allen County adults.)
  - A usual source of medical care (78% compared to 89% of the rest of Allen County adults.)
  - Visited a doctor's office for health care services or advice (52% compared to 86% of the rest of Allen County adults.)

Adult Comparisons	Allen County 2017	Allen County African Americans 2017	Ohio African Americans 2015	U.S. African Americans 2015
<b>Rated health as fair or poor</b>	15%	24%	21%	21%
<b>Uninsured</b>	5%	13%	12%	15%
<b>Routine checkup in the past year</b>	63%	60%	80%	78%

(Sources: 2017 Allen County Health Assessment and 2015 BRFSS)



# African American: Chronic Diseases & Prevention

## Key Findings

*Only 119 African Americans responded to the survey. As a result, there is a greater margin of error when generalizing to the entire population. Caution should be taken when generalizing the results of the assessment to the African American community. In 2017, 14% of Allen County African Americans were diagnosed with diabetes and 40% were diagnosed with high blood pressure. Seventy-four percent (74%) of African Americans were either overweight or obese.*

## Health Status

- Allen County African American adults were more likely to have been diagnosed with:
  - High blood pressure (40% compared to 33% of the rest of Allen County adults).
  - Asthma (18% compared to 12% of the rest of Allen County adults).
  - Diabetes (14% compared to 13% of the rest of Allen County adults).
- Allen County African American adults were less likely to have been diagnosed with:
  - High blood cholesterol (25% compared to 35% of the rest of Allen County adults).
  - Coronary heart disease (2% compared to 7% of the rest of Allen County adults).
- Allen County African American adults were equally as likely to have been diagnosed with:
  - Congestive heart failure (3%)
- Allen County African American adults were more likely to have:
  - Been overweight or obese (74% compared to 70% of the rest of Allen County adults).
  - Used marijuana in the past 6 months (13% compared to 7% of the rest of Allen County adults).
  - Misused prescription drugs in the past 6 months (13% compared to 7% of the rest of Allen County adults).
  - Been a current smoker (25% compared to 17% of the rest of Allen County adults).
  - Had intercourse with more than one partner in the past year (23% compared to 5% of the rest of Allen County adults).
  - Been tested for HIV (66% compared to 31% of the rest of Allen County adults).
  - Been considered a binge drinker (31% compared to 26% of the rest of Allen County adults).
  - Reported driving after having perhaps too much to drink (14% compared to 7% of the rest of Allen County adults).
  - Been limited in some way because of a physical, mental or emotional problem (41% compared to 22% of the rest of Allen County adults).
  - Had a pneumonia vaccine in their lifetime (43% compared to 35% of the rest of Allen County adults).
  - Had a human papillomavirus (HPV) vaccine in their lifetime (23% compared to 9% of the rest of Allen County adults).
- Allen County African American adults were less likely to have had:
  - Their blood cholesterol checked in the past 5 years (70% compared to 77% of the rest of Allen County adults).
  - Their blood pressure checked in the past year (79% compared to 86% of the rest of Allen County adults).
  - A PSA test in the past year (14% compared to 22% of the rest of Allen County adults).
  - A mammogram in the past year (34% compared to 39% of the rest of Allen County adults).
  - A breast exam in the past year (46% compared to 62% of the rest of Allen County adults).
  - A Pap smear in the past year (38% compared to 43% of the rest of Allen County adults).
  - A flu vaccine in the past year (40% compared to 46% of the rest of Allen County adults).
  - Visited a dentist or dental clinic in the past year (53% compared to 63% of the rest of Allen County adults).

## Allen County African American Leading Causes of Death 2013-2015

**Total Deaths: 338**

1. Cancer (29% of all deaths)
  2. Heart Disease (22%)
  3. Diabetes Mellitus (5%)
  4. Accidents (unintentional injuries) (4%)
  5. TIE - Stroke (4%)
- Chronic Lower Respiratory Disease (4%)

(Source: CDC Wonder, 2013-2015)



## Oral Health

- When asked the main reason for not visiting a dentist in the last year, 31% of Allen County African American adults had no oral health problems/had not thought of it; 22% said fear, apprehension, nervousness, pain, and dislike going; 12% had dentures; 9% said cost; 5% did not have/know a dentist; and 2% said their dentist did not accept their medical insurance. Three percent (3%) of adults selected multiple reasons for not visiting a dentist in the past year.

## Diabetes

- African American diabetics were using the following to treat their diabetes: diabetes pills (72%), checking blood sugar (67%), checking A1C annually (59%), checking their feet (50%), diet control (50%), insulin (50%), annual vision exam (47%), 6-month check-up with provider (35%), exercise (29%), taking a class (17%), and dental exam (11%).

## Preventive Medicine

- Allen County African American adults have had the following vaccines: tetanus booster (including Tdap) in the past 10 years (64%), MMR in their lifetime (61%), chicken pox vaccine in their lifetime (48%), pneumonia vaccine in their lifetime (43%), human papillomavirus vaccine in their lifetime (23%), and Zoster (shingles) vaccine in their lifetime (16%).
- Allen County African American adults have had the following cancer screenings: colorectal cancer in the past 5 years (20%), oral cancer in the past year (4%), lung cancer in the past 3 years (4%), and skin cancer in the past year (3%).
- In the past year, African American adults reported their doctor talked to them about the following topics: weight control (48%); safe use of prescription medication (40%); family history (37%); depression, anxiety, or emotional problems (36%); safe use of opiate-based pain medications (31%); immunizations (29%); sexually transmitted diseases (25%); tobacco use (25%); family planning (18%); alcohol use (14%); self-testicular exams (14%); injury prevention (10%); domestic violence (7%); and illicit drug abuse (2%).

## Tobacco Use

- One-fourth (25%) of African American adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- Sixteen percent (16%) of African American adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- Allen County African American adults used the following tobacco products in the past year: cigarettes (36%), Swishers (16%), Black and Milds (12%), cigars (9%), cigarillos (7%), hookah (7%), e-cigarettes (5%), chewing tobacco (1%), and snuff (1%).
- Over three-fourths (78%) of current African American smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- Allen County African American adults had the following rules/practices about smoking in their home: never allowed (70%), sometimes allowed (14%), and always allowed (14%). Two percent (2%) of African Americans reported they did not know the rules/practices about smoking in their home.

## Alcohol Use

- In 2017, 45% of Allen County African American adults had at least one alcoholic drink in the past month.
- Almost three-fourths (71%) of Allen County African American current drinkers reported they had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition.
- Of those who drank, Allen County African American adults drank 2.8 drinks on average, the same number as the rest of Allen County adults.
- Allen County African American adults experienced the following in the past six months: drove after having any alcoholic beverage (5%), tried to quit or cut down but could not (4%), drank more than they expected (2%), gave up other activities to drink (2%), used prescription drugs while drinking (2%), spent a lot of time drinking (2%), drank more to get the same effect (1%), continued to drink despite problems caused by drinking (1%), failed to fulfill duties at work, home, or school (1%), and drank to ease withdrawal symptoms (1%).

## Weight Control

- In 2017, the health assessment indicated that nearly three-fourths (74%) of Allen County African American adults were either overweight (25%) or obese (49%) by Body Mass Index (BMI).
- During the past 7 days, Allen County African American adults reported eating fruit or drinking 100% fruit juice: 1 to 3 times per week (30%), 4 to 6 times per week (24%), 1 to 2 times per day (16%), 3 times per day (4%), and 4 or more times per day (2%). 25% of Allen County adults did not have any servings of fruit in the past 7 days
- During the past 7 days, Allen County adults reported eating vegetables: 1 to 3 times per week (29%), 4 to 6 times per week (28%), 1 to 2 times per day (19%), 3 times per day (6%), and 4 or more times per day (5%). Fourteen percent (14%) of adults did not have any servings of vegetables in the past 7 days.
- Allen County African American adults purchased their fruit and vegetables from the following places: large grocery stores (73%), local grocery stores (64%), food pantry (15%), farmer's market (8%), Dollar General Store (7%), grew their own/garden (5%), mail order food service (2%), corner/convenience stores (2%), mobile produce market (1%), and other places (2%).
- More than one-third (36%) of African American adults drank soda pop, punch, Kool-Aid, sports drinks, energy drinks, or other fruit-flavored drinks at least once per day in the past week. Nineteen percent (19%) of African American adults did not drink any flavored drinks in the past 7 days.
- Allen County African American adults reported the following barriers in consuming fruits and vegetables: too expensive (12%), did not like the taste (5%), no access (2%), no variety (1%), and other reasons (5%). Seventy-six percent (76%) reported no barriers to consuming fruits and vegetables.
- More than four-fifths (81%) of African American adults drank water at least once per day in the past week.
- In Allen County, 56% of African American adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. 24% of adults exercised 5 or more days per week. More than one-third (35%) of adults did not participate in any physical activity in the past week, including 11% who were unable to exercise.
- Reasons for not exercising included: too tired (21%); time (15%); pain or discomfort (12%); weather (10%); could not afford a gym membership (9%); laziness (8%); transportation (7%); no exercise partner (6%); did not know what activities to do (5%); do not like to exercise (3%); no child care (3%); poorly maintained/no sidewalks (2%); neighborhood safety (2%); doctor advised them not to exercise (2%); lack of opportunities for those with physical impairments or challenges (1%); and no walking, biking trails or parks (1%).

- Nearly two-fifths (38%) of Allen County African American adults were trying to lose weight, 28% were trying to maintain their current weight or keep from gaining weight, and 12% were trying to gain weight.
- Allen County African American adults spent an average of 3.4 hours watching TV, 2.3 hours on their cell phone, 1.3 hours on the computer (outside of work), and 0.4 hours playing video games on an average day of the week.

## Sexual Behavior

- The following situations applied to African American adults in the past year: tested for an STD (11%), had anal sex without a condom (9%), had sexual activity with someone of the same gender (9%), thought that they may have an STD (5%), had sex with someone they did not know (4%), tested positive for Hepatitis C (2%), and treated for an STD (1%).
- Six percent (6%) of Allen County African American adults reported being forced to have sexual activity when they did not want to. Forty-three percent (43%) of those who were forced to have sexual activity reported it.

## Quality of Life

- More than two-fifths (41%) of African American adults were limited in some way because of a physical, mental or emotional problem.
- Allen County African American adults would have a problem getting the following if they needed it today: someone to loan them \$50 (41%), someone to help them pay for medical expenses (27%), someone to talk to about their problems (25%), someone to take them to the doctor (24%), someone to help if they were sick in bed (20%), someone to accompany them to their doctor appointments (11%), someone to explain directions from their doctor (10%), and back-up child care (9%).

Adult Comparisons	Allen County 2017	Allen County African Americans 2017	Ohio African Americans 2015	U.S. African Americans 2015
Had been diagnosed with diabetes	13%	14%	14%	14%
Had ever been diagnosed with asthma	13%	18%	18%	16%
Had been diagnosed with arthritis	33%	33%	26%	24%
Had angina	6%	2%	4%	4%
Had a heart attack	5%	2%	6%	4%
Had been diagnosed with high blood pressure	34%	40%	40%	41%
Had blood cholesterol checked within past 5 years	77%	70%	75%	78%
Overweight	35%	25%	34%	35%
Obese	35%	49%	35%	38%
Had at least one alcoholic beverage in past month	54%	45%	49%	46%
Current smoker (currently smoke some or all days)	18%	25%	28%	19%

(Sources: 2017 Allen County Health Assessment and the 2015 BRFSS)

# African American: Social Determinants of Health

## Key Findings

*Only 119 African Americans responded to the survey. As a result, there is a greater margin of error when generalizing to the entire population. Caution should be taken when generalizing the results of the assessment to the African American community. Thirteen percent (13%) of African American adults had 4 or more adverse childhood experiences (ACEs) in their lifetime. More than one-third (35%) of African American adults received food assistance in the past year. Forty-five percent (45%) of African Americans reported they spent 50% or more of their household income on housing, compared to 14% of the rest of Allen County adults.*

- African American adults were more likely to have:
  - Had 4 or more adverse childhood experiences (ACEs) in their lifetime (13% compared to 10% of the rest of Allen County adults).
  - Received information/assistance from 2-1-1 (8% compared to 3% of the rest of Allen County adults).
  - Received assistance for food in the past year (35% compared to 7% of the rest of Allen County adults).
  - Attempted to receive assistance from Job & Family Services (JFS) (32% compared to 10% of the rest of Allen County adults).
  - Had transportation issues (37% compared to 6% of the rest of Allen County adults).
  - Spent 50% or more of their household income on housing (45% compared to 14% of the rest of Allen County adults).
  - Contemplated suicide in the past year (4% compared to 3% of the rest of Allen County adults).
  - Attempted suicide in the past year (3% compared to 1% of the rest of Allen County adults).

## Mental Health

- During the past 12 months, African American adults experienced the following almost every day for two weeks or more in a row: did not get enough sleep or rest (33%); felt worried, tense or anxious (31%); had high stress (28%); felt sad, blue or depressed (24%); felt very healthy and full of energy (23%); unusual increase or loss of appetite (21%); and stopped during some usual activities (12%).
- Allen County African American adults dealt with stress in the following ways: prayer/meditation (58%), listened to music (43%), slept (31%), talked to someone they trust (27%), ate more or less than normal (22%), exercised (21%), worked (14%), worked on a hobby (12%), smoked tobacco (11%), took it out on others (6%), used prescription drugs as prescribed (5%), used illegal drugs (4%), drank alcohol (2%), and other ways (11%).
- On a typical day, African American adults rated their stress level as: very low (30%), low (22%), moderate (32%), high (15%), and very high (1%).
- Allen County African American adults received the social and emotional support they needed from the following: family (65%), friends (55%), God/prayer (52%), church (23%), community (5%), a professional (5%), neighbors (2%), self-help group (1%), and other (8%).
- Ten percent (10%) of Allen County African American adults have used a program or service to help with depression, anxiety, or other emotional problems for themselves or a loved one. Reasons for not using a program or service to help with depression, anxiety, or emotional problems included the following: other priorities (9%), had not thought of it (7%), did not know how to find a program (7%), transportation (7%), fear (6%), could not afford to go (3%), co-pay/deductible was too high (1%), could not get to the office or clinic (1%), stigma of seeking mental health services (1%), and other reasons (12%). Forty-four percent (44%) indicated this type of program was not needed.
- Allen County African American adults reported they or a family member were diagnosed with or treated for the following mental health issues: depression (50%), attention deficit disorder (ADD/ADHD) (34%), anxiety or emotional problems (30%), an anxiety disorder (29%), bipolar (28%), alcohol and illicit drug abuse (21%), developmental disability (14%), post-traumatic stress disorder (PTSD) (14%), psychotic disorder (11%), other trauma (8%), autism spectrum (4%), life-adjustment disorder/issue (2%), and some other mental health disorder (10%). Twenty-seven percent (27%) indicated they or a family member had taken medication for one or more mental health issues.

## African American Mental Health

- African Americans experience more severe forms of mental health conditions due to unmet needs and other barriers.
- According to the Health and Human Services Offices of Minority Health, African Americans are 20% more likely to experience serious mental health problems than the general population.
- Common mental health disorders among African Americans include:
  - Major depression
  - Attention deficit hyperactivity disorder (ADHD)
  - Suicide (among young African American men)
  - Post-traumatic stress disorder (PTSD) (because African Americans are more likely to be victims of violent crime)
- African Americans are also more likely to experience certain factors that increase the risk for developing a mental health condition:
  - **Homelessness** people experiencing homelessness are at a greater risk of developing a mental health condition. African Americans make up 40% of the homeless population.
  - **Exposure to violence** increases the risk of developing a mental health condition such as depression, anxiety and post-traumatic stress disorder. African American children are more likely to be exposed to violence than other children.

*(Source: National Alliance on Mental Illness (NAMI), African American Mental Health, 2017)*

## Economic Stability

- African American adults received assistance for the following in the past year: food (35%), healthcare (32%), dental care (28%), Medicare (28%), prescription assistance (27%), utilities (26%), transportation (20%), rent/mortgage (15%), employment (13%), free tax preparation (13%), mental illness issues (12%), home repair (9%), unplanned pregnancy (6%), affordable childcare (5%), clothing (5%), gambling addiction (5%), legal aid services (4%), credit counseling (3%), and being the victim of a crime (2%).
- Allen County African American adults attempted to get assistance from the following social service agencies: Job & Family Services/JFS (32%), food pantries (18%), friend or family member (9%), WIC (8%), church (5%), health department (2%), 2-1-1/United Way (1%), other charities (1%), and somewhere else (2%). Nine percent (9%) did not know where to look for assistance.
- Thirty-five percent (35%) of all Allen County African American residents were living in poverty, and 35% of children and youth ages 0-17 were living in poverty *(Source: U.S. Census Bureau, American Community Survey, 2011-2015)*.

## Education

- Seventy-seven percent (77%) of Allen County African American adults 25 years and over had a high school diploma or higher *(Source: U.S. Census Bureau, American Community Survey, 2011-2015)*.
- Six percent (6%) of Allen County adults 25 years and over had at least a bachelor's degree *(Source: U.S. Census Bureau, American Community Survey, 2011-2015)*.

## Social and Community Context

- African American adults reported the following transportation issues: no car (26%), suspended/no driver's license (12%), no car insurance (5%), other car issues/expenses (4%), disabled (4%), limited public transportation available or accessible (2%), did not feel safe to drive (2%), and could not afford gas (1%). Sixty-three percent (63%) of adults did not have any transportation issues.

## Neighborhood and Built Environment

- Fourteen percent (14%) of African American adults thought their neighborhood was extremely safe from crime. Thirty-eight percent (38%) reported their neighborhood was quite safe, 32% said slightly safe, and 7% reported not at all safe from crime. Ten percent (10%) did not know if their neighborhood was safe from crime.

## Parenting

- When asked how African American parents put their child to sleep as an infant, 44% said on their back, 22% said on their stomach, 22% said in bed with them or another person, and 22% said on their side.
- Parents reported they put their children to sleep in the following places: crib/bassinet with bumper, blankets, or stuffed animals (54%); pack n' play (54%); in bed with parent or another person (33%); swing (33%); car seat (13%); couch or chair (8%); and crib/bassinet without bumper, blankets, or stuffed animals (4%).

# Youth Health: Weight Status

## Key Findings

*The health assessment identified that 18% of Allen County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 30% of Allen County youth reported that they were slightly or very overweight. Three-quarters (75%) of youth exercised for 60 minutes on 3 or more days per week.*

## Youth Weight Status

- BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific, as children's body fatness changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- Nearly one-fifth (18%) of Allen County youth were classified as obese by Body Mass Index (BMI) calculations (YRBS reported 13% for Ohio in 2013 and 14% for the U.S. in 2015). Fourteen percent (14%) of youth were classified as overweight (2013 YRBS reported 16% for Ohio and 2015 YRBS reported 16% for the U.S.). Sixty-five percent (65%) were normal weight, and 3% were underweight.
- Nearly one-third (30%) of youth described themselves as being either slightly or very overweight (2013 YRBS reported 28% for Ohio and 2015 YRBS reported 32% for the U.S.).
- Almost half (49%) of all youth were trying to lose weight, increasing to 60% of females (compared to 37% of males) (2013 YRBS reported 47% for Ohio and 2015 YRBS reported 46% for the U.S.).

### 18% of Allen County youth were classified as obese.

- Youth did the following to lose weight or keep from gaining weight in the past 30 days:
  - Exercised (52%)
  - Drank more water (45%)
  - Ate less food, fewer calories, or foods lower in fat (29%)
  - Ate more fruits and vegetables (28%)
  - Skipped meals (14%)
  - Went without eating for 24 hours or more (4%) (2013 YRBS reported 10% for Ohio and 13% for the U.S.)
  - Took diet pills, powders, or liquids without a doctor's advice (1%) (2013 YRBS reported 5% for Ohio and the U.S.)
  - Vomited or took laxatives (1%) (2013 YRBS reported 5% for Ohio and 4% for the U.S.)
  - Smoked cigarettes or e-cigarettes (1%)
- More than one-third (35%) of youth did not do anything to lose or keep from gaining weight.

## Nutrition

- Six percent (6%) of youth ate 5 or more servings of fruits and vegetables per day. Sixty-one percent (61%) ate 1 to 2 servings per day, and 26% ate 3 to 4 servings of fruits and vegetables per day. Seven percent (7%) of youth ate 0 servings of fruits and vegetables per day.
- About one-fifth (21%) of youth drank a can, bottle, or glass of soda or pop (not including diet pop) at least once per day during the past week (2013 YRBS reports 21% for Ohio and 27% for the U.S.). Six percent (6%) of youth drank 3 or more sugary beverages per day.



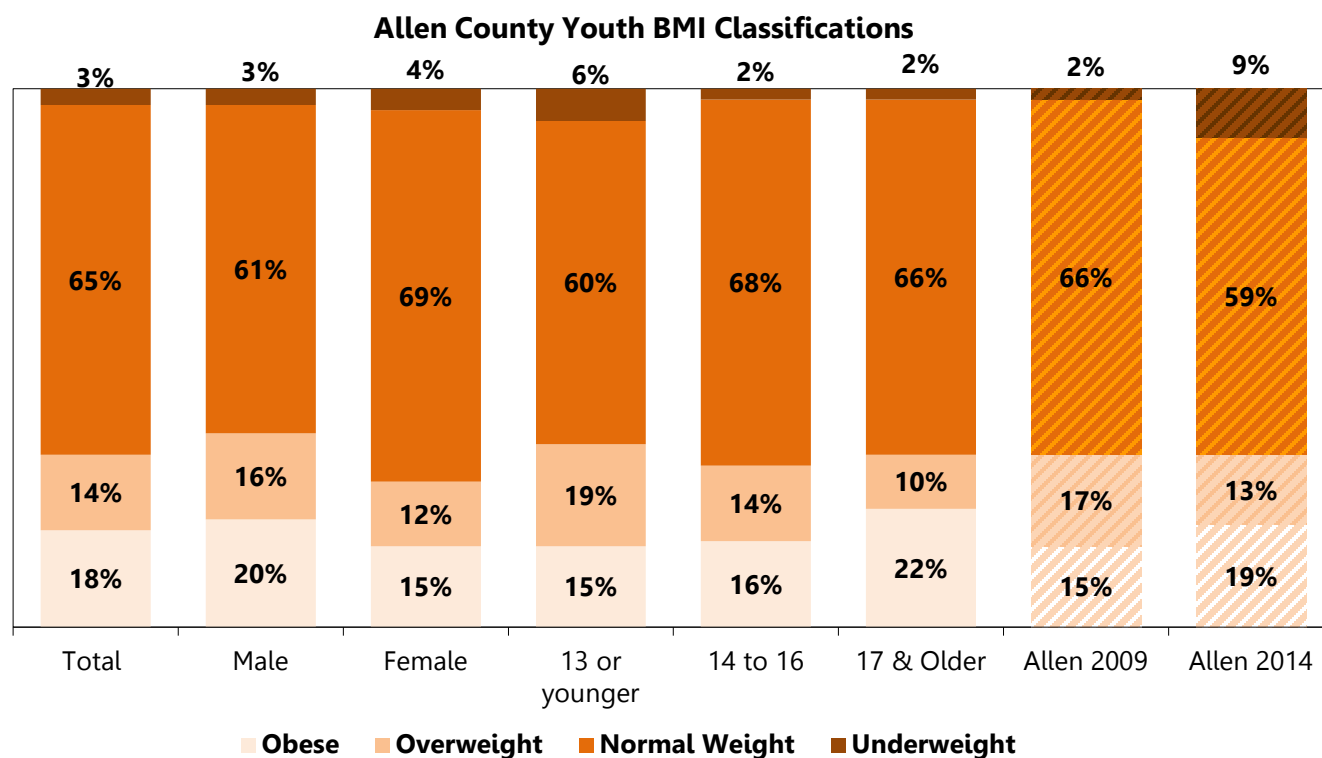
## Physical Activity

- Three-fourths (75%) of youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. Forty-eight percent (48%) did so on 5 or more days in the past week (2013 YRBS reports 48% for Ohio and 2015 YRBS reports 49% for the U.S.), and 24% did so every day in the past week (2013 YRBS reports 26% for Ohio and 2015 YRBS reports 27% for the U.S.). Ten percent (10%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week (2013 YRBS reports 13% for Ohio and 2015 YRBS reports 14% for the U.S.).
- The CDC recommends that children and adolescents participate in at least 60 minutes of physical activity per day. As part of their 60 minutes per day; aerobic activity, muscle strengthening, and bone strengthening are three distinct types of physical activity that children should engage in, appropriate to their age. Children should participate in each of these types of activity on at least three days per week.
- When weather allowed, youth reported walking or biking to or from school on an average week at the following frequencies: one day (4%), two days (2%), three days (3%), four days (1%), and five days (9%). Eighty-one percent (81%) of youth reported that they did not walk or bike to or from school on any day on an average week.
- Ninety-three percent (93%) of youth participated in extracurricular activities. They participated in the following: sports or intramural programs (56%), exercising (outside of school) (43%), school club or social organization (29%), part-time job (23%), church or religious organization (21%), caring for siblings after school (20%), church youth group (20%) babysitting for other kids (17%), volunteering in the community (11%), caring for parents or grandparents (3%), and some other organized activity (Scouts, 4H, etc.) (11%).
- Allen County youth spent an average of 3.7 hours on their cell phone, 1.5 hours on their computer/tablet, 1.5 hours watching TV and 1.2 hours playing video games on an average day of the week.
- One-fifth (20%) of youth spent 3 or more hours watching TV on an average day (2013 YRBS reported 28% for Ohio and 2015 YRBS reports 25% for the U.S.).

Allen County youth did the following to lose weight in the past 30 days:	Percent
<b>Exercised</b>	52%
<b>Drank more water</b>	45%
<b>Ate less food, fewer calories, or foods lower in fat</b>	29%
<b>Ate more fruits and vegetables</b>	28%
<b>Skipped meals</b>	14%
<b>Went without eating for 24 hours</b>	4%
<b>Took diet pills, powders, or liquids without a doctor's advice</b>	1%
<b>Vomited or took laxatives</b>	1%
<b>Smoked cigarettes</b>	1%



The following graph shows the percentage of Allen County youth who were classified as obese, overweight, normal weight or underweight according to Body Mass Index (BMI) by age. Examples of how to interpret the information in the graph include: 65% of all Allen County youth were classified as normal weight, 18% were obese, 14% were overweight, and 3% were underweight for their age and gender.



### Healthy People 2020 Nutrition and Weight Status (NWS)

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

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

Sources: Healthy People 2020 Objectives, 2013 YRBS, NHANES, CDC/NCHS, 2016 Allen County Health Assessment

Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Obese</b>	15%	19%	18%	18%	13%	14%
<b>Overweight</b>	17%	13%	14%	11%	16%	16%
<b>Described themselves as slightly or very overweight</b>	29%	29%	30%	31%	28%	32%
<b>Trying to lose weight</b>	43%	44%	49%	47%	47%	46%
<b>Exercised to lose weight</b>	N/A	40%	52%	53%	N/A	N/A
<b>Ate less food, fewer calories, or foods lower in fat to lose weight</b>	N/A	27%	29%	31%	N/A	N/A
<b>Went without eating for 24 hours or more</b>	14%	4%	4%	5%	10%	13%*
<b>Took diet pills, powders, or liquids without a doctor's advice</b>	4%	2%	1%	2%	5%	5%*
<b>Vomited or took laxatives</b>	4%	2%	1%	1%	5%	4%*
<b>Ate 1 to 4 servings of fruits and vegetables per day</b>	N/A	N/A	88%	88%	N/A	N/A
<b>Drank pop or soda one or more times per day during the past week</b>	N/A	21%	21%	26%	21%	27%
<b>Physically active at least 60 minutes per day on every day in past week</b>	31%	28%	24%	23%	26%	27%
<b>Physically active at least 60 minutes per day on 5 or more days in past week</b>	50%	50%	48%	50%	48%	49%
<b>Did not participate in at least 60 minutes of physical activity on any day in past week</b>	13%	17%	10%	9%	13%	14%
<b>Watched TV 3 or more hours per day</b>	43%	28%	20%	22%	28%	25%

N/A – Not Available

\*Comparative YRBS data for the U.S. is 2013

# Youth Health: Tobacco Use

## Key Findings

*The health assessment identified that 6% of Allen County youth were current smokers, increasing to 13% of those ages 17 and older. The average age of onset for smoking was 13.2 years old. Nine percent (9%) of youth used e-cigarettes in the past year.*

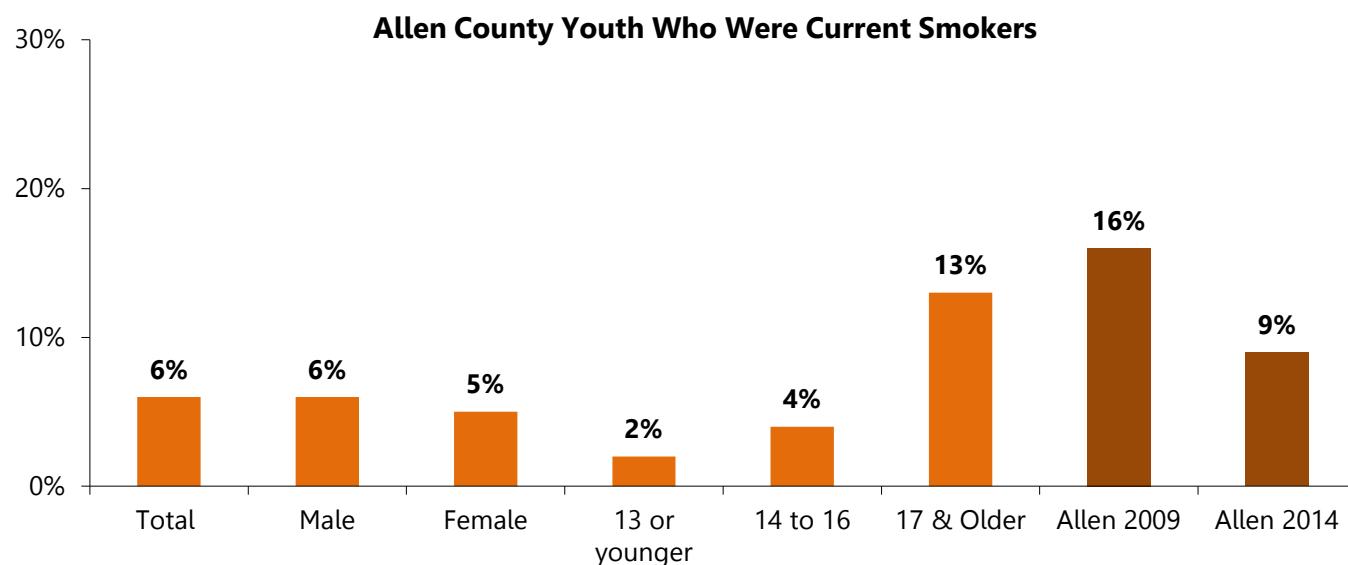
## Youth Tobacco Use Behaviors

- Thirteen percent (13%) of youth had tried cigarette smoking, increasing to 25% of those ages 17 and older (YRBS reported 32% for the U.S. in 2015).
- Five percent (5%) of all Allen County youth had smoked a whole cigarette for the first time before the age of 13 (2015 YRBS reported 7% for the U.S. in 2015).
- Over one-fifth (22%) of those who had smoked a whole cigarette did so at 10 years old or younger, and another 18% had done so by 12 years old. The average age of onset for smoking was 13.2 years old.
- Six percent (6%) of Allen County youth were current smokers, having smoked at some time in the past 30 days (YRBS reported 15% for Ohio in 2013 and 11% for the U.S. in 2015).
- Two percent (2%) of all Allen County youth smoked cigarettes on 20 or more days during the past month (2013 YRBS reported that 7% of youth in Ohio smoked cigarettes on 20 or more days during the past month and 3% for the U.S. in 2015).
- Twenty-two percent (22%) of current smokers smoked cigarettes daily.
- Half (50%) of Allen County youth who smoked in the past year had tried to quit smoking (2015 YRBS reported 45% for the U.S.).

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

- More than four-fifths (83%) of Allen County youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.
- Youth smokers reported the following ways of obtaining cigarettes:
  - Bought cigarettes from a store or gas station (31%) (2015 YRBS reported 13% for the U.S.)
  - A person 18 years or older gave them the cigarettes (24%)
  - Took them from a store or family member (21%)
  - Borrowed cigarettes from someone else (21%)
  - Some other way (28%)
- Allen County youth used the following forms of tobacco the most in the past year: e-cigarettes (9%), Black and Milds (9%), Swishers (8%), cigarettes (7%), chewing tobacco or snuff (5%), cigarillos (5%), cigars (5%), hookah (3%), snus (2%), little cigars (1%), dissolvable tobacco products (<1%), and bidis (<1%).
- More than half (56%) of Allen County youth were exposed to second hand smoke. Youth reported being exposed to second hand smoke in the following places: home (29%), another relative's home (29%), in the car (17%), at a friend's home (17%), fairgrounds (13%), and at a park/ball field (9%).

The following graph shows the percentage of Allen County youth who were current smokers (i.e. having smoked cigarettes in the past 30 days). Examples of how to interpret the information include: 6% of all Allen County youth were current smokers, including 6% of males and 5% of females.



**9% of Allen County youth used e-cigarettes in the past year.**

**Behaviors of Allen County Youth**  
*Current Smokers vs. Non-Current Smokers*

Youth Behaviors	Current Smoker	Non-Current Smoker
Have had at least one drink of alcohol in the past 30 days	83%	17%
Participated in extracurricular activities	83%	94%
Have used marijuana in the past 30 days	74%	8%
Had sexual intercourse in the past 12 months	68%	23%
Been bullied in any way in the past year	52%	37%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	48%	26%
Seriously considered attempting suicide in the past 12 months	43%	13%
Misused prescription drugs	39%	3%
Attempted suicide in the past 12 months	26%	5%

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

## Healthy People 2020 Tobacco Use (TU)

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

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

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

Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Ever tried cigarettes</b>	29%	21%	13%	19%	52%*	32%
<b>Current smokers</b>	16%	9%	6%	9%	15%	11%
<b>Smoked cigarettes on 20 or more days during the past month (of all youth)</b>	6%	2%	2%	4%	7%	3%
<b>Smoked a whole cigarette for the first time before the age of 13 (of all youth)</b>	13%	9%	5%	6%	14%*	7%
<b>Tried to quit smoking (of those youth who smoked in the past year)</b>	56%	57%	50%	53%	56%*	45%
<b>Bought their cigarettes from a store or gas station (of current smokers)</b>	21%	18%	31%	33%	8%	13%

\*Comparative YRBS data for Ohio is 2011

### Electronic Cigarettes and Teenagers in the U.S.

- E-cigarettes look like regular cigarettes, but they are operated by battery. An atomizer heats a solution of liquid, flavorings, and nicotine that creates a mist that is inhaled.
- An estimated 27.1% of U.S. adolescents, representing approximately 7,260,500 persons, had ever tried e-cigarettes
- Current e-cigarette use among high school students rose from 13.4% in 2014 to 16% in 2016 rising from 2 million students to 2.4 million students.
- Among middle school students, current e-cigarette use rose from 3.9% in 2014 to 5.3% in 2015— an increase from approximately 450,000 students to 620,000.
- Among those who had never used an e-cigarette, 32.1% of middle school students and 38.4% of high school students are susceptible to use e-cigarettes in the future.
- Nicotine is a highly addictive drug. Many teens that start with e-cigarettes may be condemned to struggling with a lifelong addiction to nicotine and conventional cigarettes.

(Source: CDC, Press Release, 2016)

# Youth Health: Alcohol Use

## Key Findings

*One-fifth (20%) of Allen County youth had at least one drink of alcohol in the past 30 days, increasing to 39% of those over the age of 17. Almost half (45%) of youth who reported drinking in the past 30 days had at least one episode of binge drinking. Six percent (6%) of all youth drivers had driven a car in the past month after they had been drinking alcohol.*

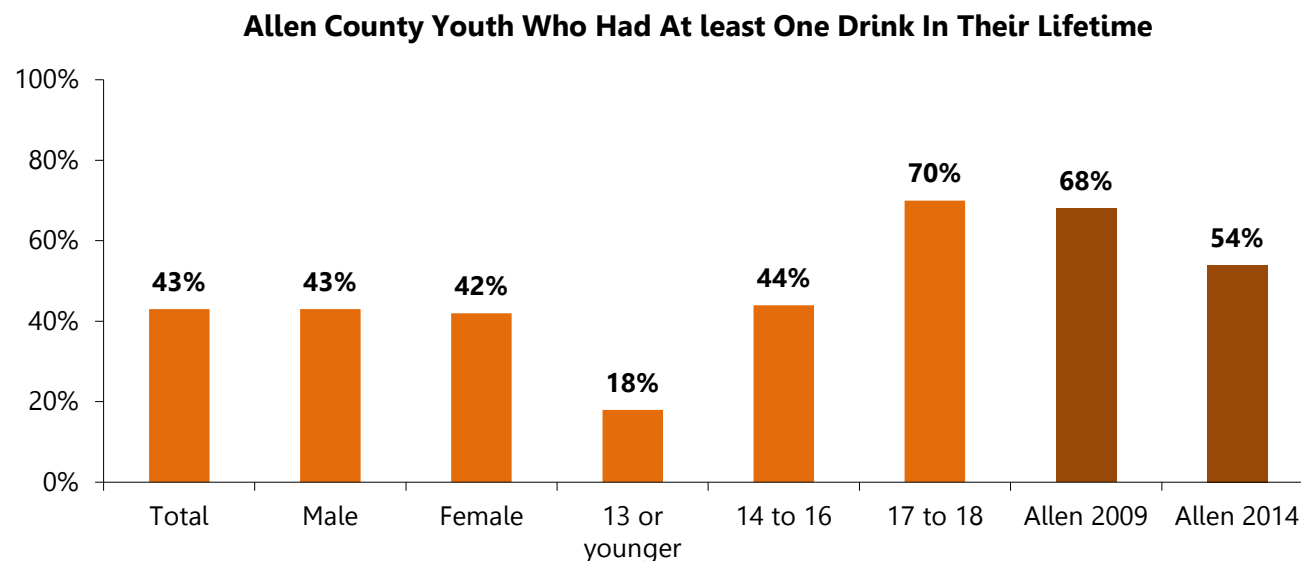
## Youth Alcohol Consumption

- More than two-fifths (43%) of youth had at least one drink of alcohol in their life, increasing to 70% of those ages 17 and older (2015 YRBS reports 63% for the U.S.).
- One-fifth (20%) of youth had at least one drink in the past 30 days, increasing to 39% of those ages 17 and older (YRBS reports 30% for Ohio in 2013 and 33% for the U.S. in 2015).
- Based on all youth surveyed, 9% had five or more alcoholic drinks on occasion in the last month and would be considered binge drinkers by definition, increasing to 20% of those ages 17 and older (YRBS reports 16% for Ohio in 2013 and 18% for the U.S. in 2015). Of those who drank, 45% were considered binge drinkers, increasing to 49% of males.
- Nearly one-third (32%) of youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 21% took their first drink between the ages of 13 and 14, and 48% started drinking between the ages of 15 and 18. The average age of onset was 13.7 years old.
- Of all youth, 14% had drunk alcohol for the first time before the age of 13 (YRBS reports 13% of Ohio youth drank alcohol for the first time before the age of 13 in 2013 and 17% for the U.S. in 2015).

## **In 2017, 20% of Allen County youth had at least one drink in the past 30 days.**

- Youth drinkers reported they got their alcohol from the following: a parent gave it to them (33%), someone gave it to them (28%) (2013 YRBS reports 38% for Ohio and 2015 YRBS reports 44% for the U.S.), an older friend or sibling bought it (19%), someone older bought it (17%), a friend's parent gave it to them (12%), took it from a store or family member (5%), bought it in a liquor store/convenience store/gas station (4%), bought it with a fake ID (1%), and obtained it some other way (21%).
- During the past 30 days, youth drinkers reported drinking alcohol at the following places: home (56%); another person's home (23%); a friend's home (19%); a public place such as a park, beach, or parking lot (5%); at a restaurant, bar, or club (4%); a public event such as a concert or sporting event (3%); while riding or driving a car or other vehicle (3%); and on school property (2%).
- Youth reported the last time a parent or guardian talked to them about the dangers of underage drinking or drug use was less than one month ago (29%), 2-3 months ago (13%), 4-6 months ago (8%), 7-12 months ago (8%), and more than one year ago (17%). About one quarter (26%) of youth reported their parent or guardian never talked to them about this subject.
- During the past month, 13% of all Allen County youth had ridden in a car driven by someone who had been drinking alcohol (YRBS reports 17% for Ohio in 2013 and 20% for the U.S. in 2015).
- Six percent (6%) of youth drivers had driven a car in the past month after they had been drinking alcohol (YRBS reports 4% for Ohio in 2013 and 8% for the U.S. in 2015).

The following graph show the percentage of Allen County youth who drank in their lifetime. Examples of how to interpret the information include: 43% of all Allen County youth had drank at some time in their life, including 43% of males and 42% of females.

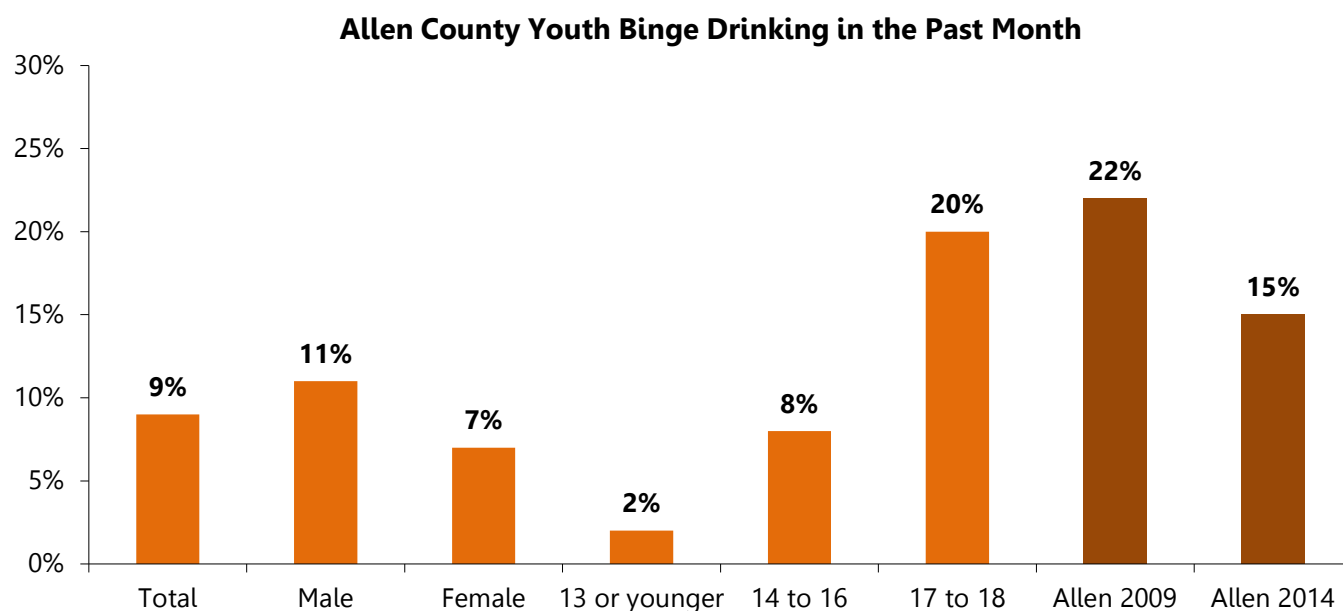
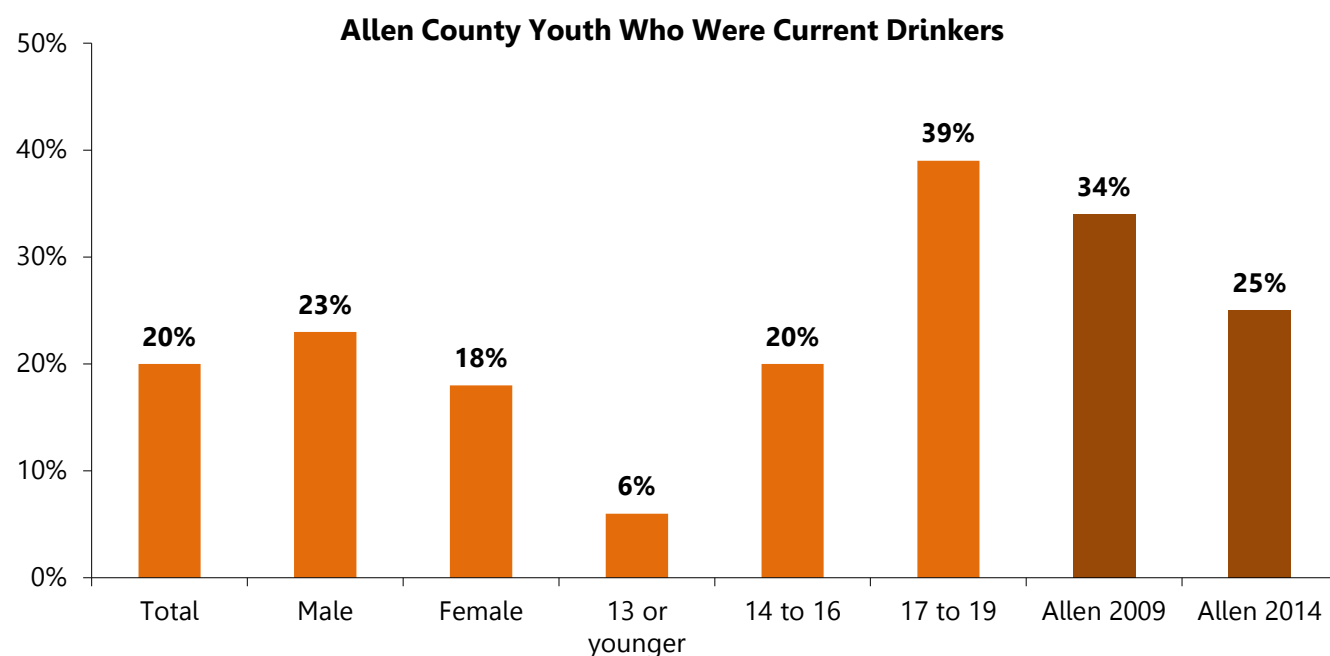


**Behaviors of Allen County Youth**  
*Current Drinkers vs. Non-Current Drinkers*

Youth Behaviors	Current Drinker	Non-Current Drinker
Participated in extracurricular activities	96%	92%
Have been bullied in the past 12 months	44%	40%
Had sexual intercourse in the past 12 months	43%	20%
Have used marijuana in the past 30 days	37%	6%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	33%	26%
Have smoked cigarettes in the past 30 days	23%	1%
Seriously considered attempting suicide in the past 12 months	21%	13%
Abused prescription drugs	17%	2%
Attempted suicide in the past 12 months	12%	5%

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

*The following graphs show the percentage of Allen County youth who were current drinkers and those who binge drank in the past month. Examples of how to interpret the information include: 20% of all Allen County youth had drank in the past 30 days, including 23% of males and 18% of females.*





## Healthy People 2020 Substance Abuse (SA)

Objective	Allen County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
<b>SA-14.4 Reduce the proportion of persons engaging in binge drinking during the past month</b>	9% (6-12 Grade)  14% (9-12 Grade)	16% (9-12 Grade)	18% (9-12 Grade)	9%*

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

Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Ever tried alcohol</b>	68%	54%	43%	59%	71%*	63%
<b>Current drinker</b>	34%	25%	20%	30%	30%	33%
<b>Binge drinker (of all youth)</b>	22%	15%	9%	14%	16%	18%
<b>Drank for the first time before age 13 (of all youth)</b>	27%	16%	14%	11%	13%	17%
<b>Rode with someone who was drinking</b>	22%	22%	13%	15%	17%	20%
<b>Drank and drove (of youth drivers)</b>	8%	8%	6%	6%	4%	8%
<b>Obtained the alcohol they drank by someone giving it to them (of youth drinkers)</b>	N/A	38%	28%	26%	38%	44%

N/A – Not available

\*Comparative YRBSS data for Ohio is 2011

# Youth Health: Drug Use

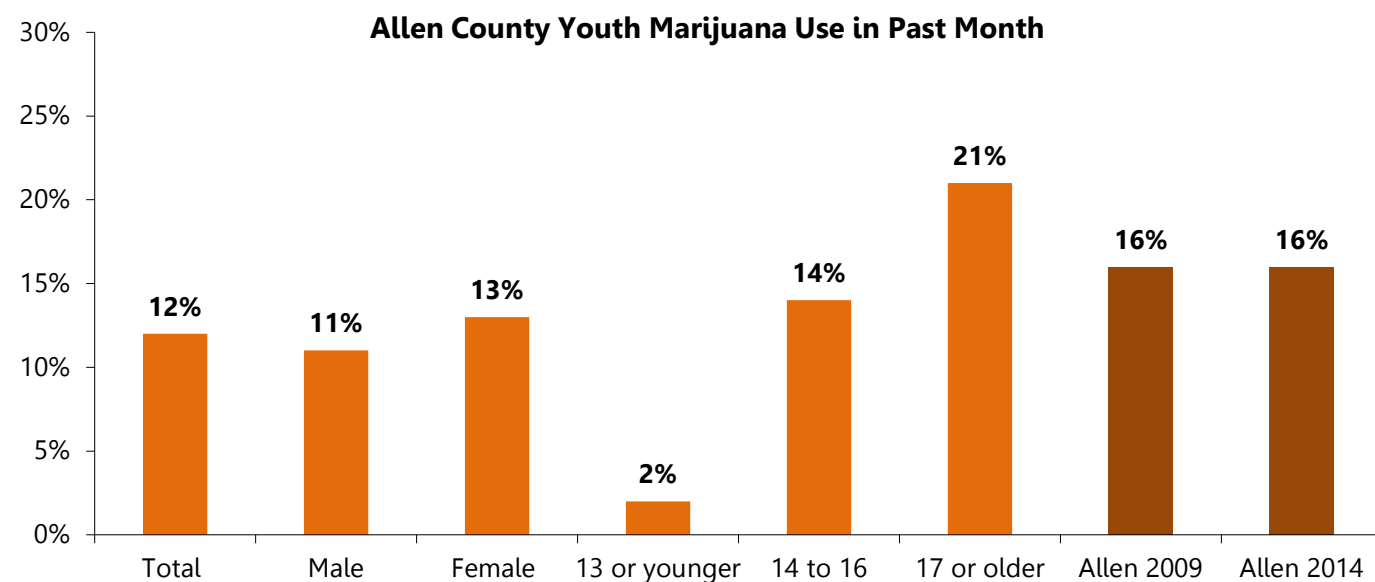
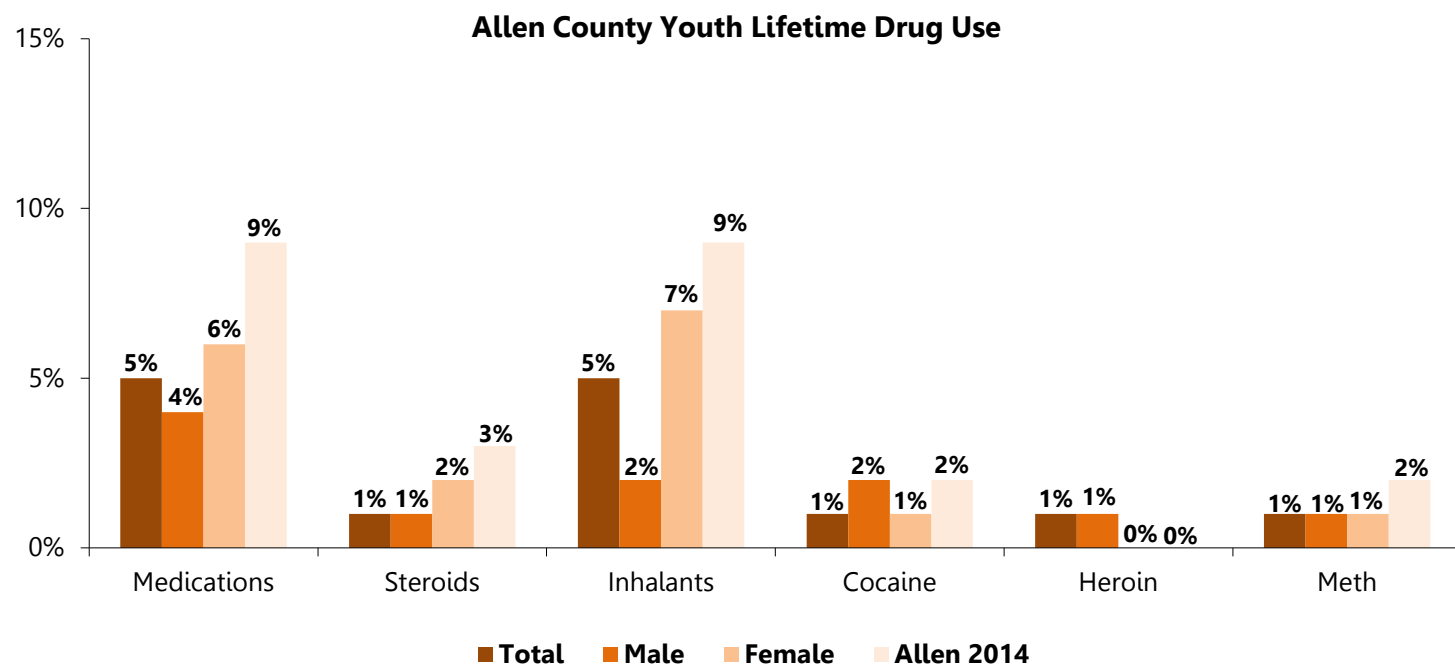
## Key Findings

*In 2017, 12% of Allen County youth had used marijuana at least once in the past 30 days, increasing to 21% of those ages 17 and older. Five percent (5%) of youth used medications that were not prescribed for them or took more than prescribed to get high at some time in their life. Eight percent (8%) of all youth reported that someone had offered, sold, or given them an illegal drug on school property.*

## Youth Drug Use

- In 2017, 12% of all Allen County youth had used marijuana at least once in the past 30 days, increasing to 21% of those over the age of 17. The 2013 YRBS found a prevalence of 21% for Ohio youth and a prevalence of 22% for U.S. youth in 2015.
- Allen County youth had tried the following in their life:
  - Inhalants (5%) (YRBS reports 9% for Ohio in 2013 and 7% for the U.S. in 2015)
  - Misused cough syrup (3%)
  - Liquid THC (2%)
  - Misused over-the-counter medications (2%)
  - Posh/salvia/synthetic marijuana (2%)
  - Cocaine (1%) (YRBS reports 4% for Ohio in 2013 and 5% for U.S. in 2015)
  - Bath salts (1%)
  - K2/spice (1%)
  - Steroids (1%) (YRBS reports 3% for Ohio in 2013 and 4% for the U.S. in 2015)
  - Ecstasy/MDMA/Molly (1%) (2015 YRBS reports 5% for the U.S.)
  - Methamphetamines (1%) (2015 YRBS reports 3% for the U.S.)
  - Heroin (<1%) (YRBS reports 2% for Ohio in 2013 and 2% for U.S. in 2015)
  - GhB (<1%)
  - Misused hand sanitizer (<1%)
- Eight percent (8%) of all youth reported that someone had offered, sold, or given them an illegal drug on school property (YRBS reports 20% for Ohio in 2013 and 22% for the U.S. in 2015).
- Five percent (5%) of youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at some time in their lives.
- Youth who misused prescription medications got them in the following ways: a friend gave it to them (38%), a parent gave it to them (38%), they took it from a friend or family member (33%), bought it from a friend (21%), bought it from someone else (21%), another family member gave it to them (13%) and the internet (4%).
- In the past month, youth reported being on school property under the influence of the following: marijuana (3%), alcohol (1%), and prescription drugs not prescribed for them (1%). No one reported being under the influence of other illegal drugs on school property.
- Youth reported that their parents would disapprove of them misusing prescription drugs (85%), using marijuana (83%), smoking cigarettes (83%), using e-cigarettes (79%), and drinking alcohol (75%).
- Youth indicated the following reasons for not doing drugs: parents would be upset (73%), values (65%), legal consequences (48%), kicked out of extra-curricular activities (46%), health problems (35%), friends would not approve (32%), random student drug testing (13%), and other (29%).
- Youth agreed with the following statements: medical marijuana should be legalized (50%), marijuana is addictive (46%), using marijuana leads to using other drugs (41%), and recreational marijuana should be legalized (25%). Nineteen percent (19%) of youth did not agree with any of these statements.

The following graphs indicate youth lifetime drug use and youth marijuana use in the past 30 days. Examples of how to interpret the information include: 5% of youth had misused medication at some point in their life, including 4% of males and 6% of females.



Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
Youth who used marijuana in the past month	16%	16%	12%	19%	21%	22%
Ever used methamphetamines	2%	<1%	1%	1%	N/A	3%
Ever used cocaine	2%	3%	1%	2%	4%	5%
Ever used heroin	1%	<1%	<1%	<1%	2%	2%
Ever used steroids	3%	3%	1%	2%	3%	4%
Ever used inhalants	9%	3%	5%	3%	9%	7%
Ever used ecstasy/MDMA/Molly	N/A	3%	1%	1%	N/A	5%
Ever misused medications	10%	9%	5%	6%	N/A	N/A
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	16%	10%	8%	12%	20%	22%

N/A – Not available

### Behaviors of Allen County Youth Current Marijuana Use vs. Non-Current Marijuana Use

Youth Behavior	Current Marijuana User	Non-Current Marijuana User
Participated in extracurricular activities	88%	94%
Drank alcohol in the past 30 days	63%	15%
Had sexual intercourse	61%	20%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	51%	24%
Been bullied in any way in the past year	38%	41%
Smoked cigarettes in the past 30 days	35%	2%
Seriously considered attempting suicide in the past 12 months	31%	13%
Ever misused medications	24%	2%
Attempted suicide in the past 12 months	19%	5%

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

### Drug Facts: Drugged Driving

- Vehicle accidents are the leading cause of death among youth people aged 16-19. When teens' relative lack of driving experience is combined with the use of marijuana or other substances that affect cognitive and motor abilities, the results can be tragic.
- According to the 2014 National Survey on Drug Use and Health (NSDUH), an estimated 10 million people aged 12 or older reported driving under the influence of illicit drugs during the year prior to being surveyed.
- After alcohol, THC (delta-9-tetrahydrocannabinol), the active ingredient in marijuana is the substance most commonly found in the blood of impaired drivers, fatally injured drivers, and motor vehicle crash victims. Studies in several localities have found that approximately 4 to 14 percent of drivers who sustained injury or died in traffic accidents tested positive for THC.
- One NHTSA study found that in 2009, 18 percent of drivers killed in a crash tested positive for at least one drug. A 2010 study showed that 1 percent of deadly crashes involved a drugged driver.

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

# Youth Health: Sexual Behavior

## Key Findings

*Disclaimer: Two out of fourteen participating Allen County schools did not ask sexual behavior questions. Please use data with caution. In 2017, just over one-quarter (26%) of Allen County youth have had sexual intercourse. One-quarter (25%) of youth had participated in oral sex, and 6% had participated in anal sex. Thirty-two percent (32%) of youth participated in sexting. Of those who were sexually active, 48% had multiple sexual partners.*

## Youth Sexual Behavior

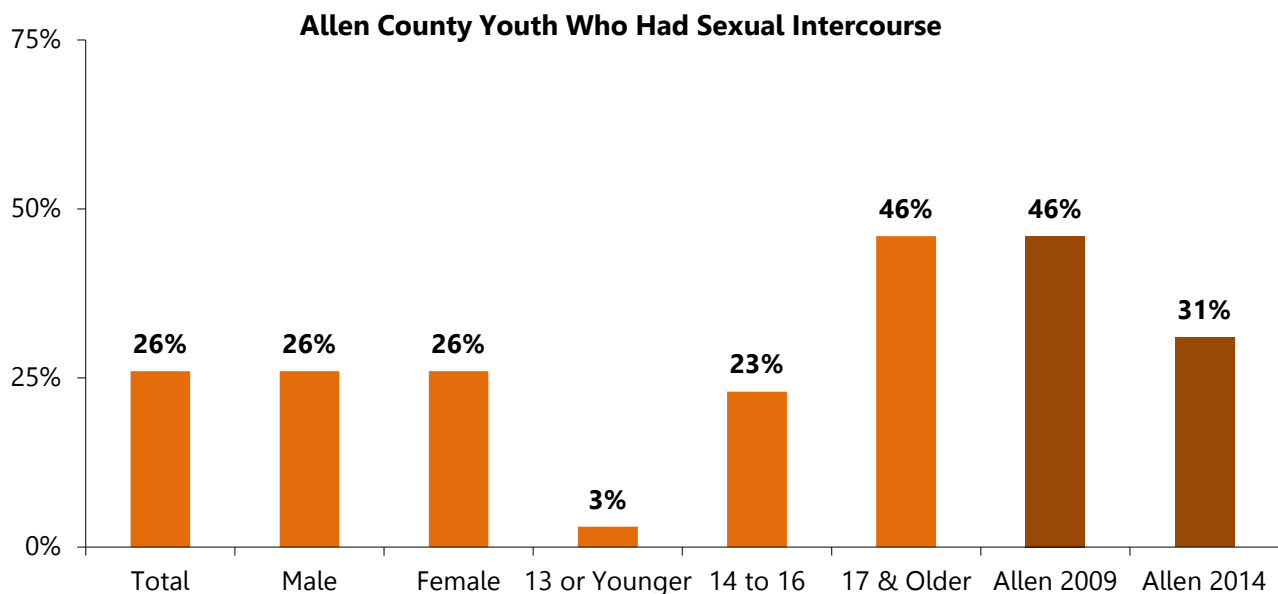
*Disclaimer: Two out of fourteen participating Allen County schools did not ask sexual behavior questions. Please use data with caution.*

- Over one-quarter (26%) of Allen County youth have had sexual intercourse, increasing to 46% of those ages 17 and over. (The YRBS reports 43% for Ohio in 2013 and 41% for U.S. in 2015).
- One-quarter (25%) of youth had participated in oral sex, increasing to 43% of those ages 17 and over.
- Six percent (6%) of youth had participated in anal sex, increasing to 8% of those ages 17 and over.
- Nearly one-third (32%) of youth had participated in sexting, increasing to 40% of those ages 17 and over.
- Nearly one-third (32%) of youth had viewed pornography, increasing to 43% of males and 44% of those ages 17 and over.

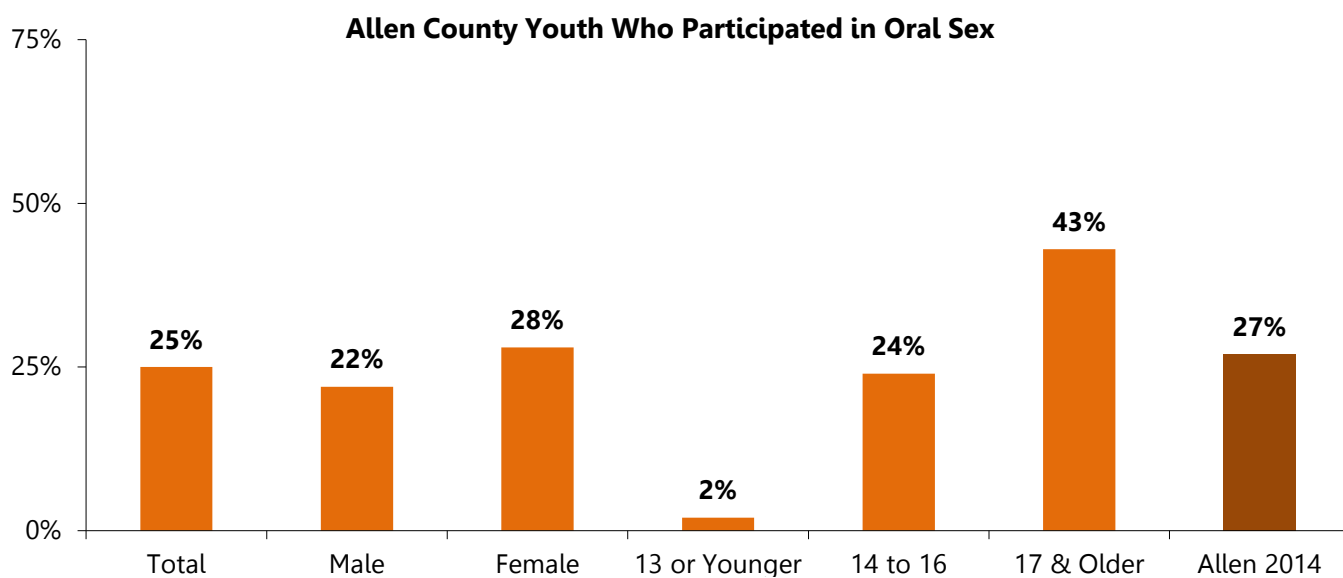
### 26% of Allen County youth had sexual intercourse.

- Of sexually active youth, 52% had one sexual partner and 48% had multiple partners.
- Five percent (5%) of all Allen County youth had 4 or more sexual partners (YRBS reports 12% for Ohio in 2013 and 12% for the U.S. in 2015).
- Seventeen percent (17%) of all sexually active youth had 4 or more partners (2013 YRBS reports 28% for Ohio).
- Of sexually active youth, 20% had done so by the age of 13. Another 40% had done so by 15 years of age. The average age of onset was 15.0 years old.
- Of all youth, 3% were sexually active before the age of 13 (YRBS reports 4% for Ohio in 2013 and 4% for the U.S. in 2015).
- Allen County youth had experienced the following: wanted to get pregnant (3%), been pregnant (2%), had been treated for an STD (1%), had a miscarriage (1%), had an abortion (1%), and tried to get pregnant (<1%).
- Over one-third (35%) of youth who were sexually active used condoms to prevent pregnancy; 10% used birth control pills; 2% used the withdrawal method; 2% used a shot, patch or birth control ring; and 1% used an IUD. Six percent (6%) reported they were gay or lesbian. However, 8% engaged in sexual intercourse without a reliable method of protection, and 8% reported they were unsure.
- Youth learned about pregnancy prevention, sexually transmitted diseases, HIV, AIDS, and the use of condoms from the following: school (85%), parents (64%), the internet or other social media (30%), doctor (27%), friends (25%), siblings (16%), church (6%), and somewhere else (7%). Six percent (6%) of youth had not been taught about these subjects.

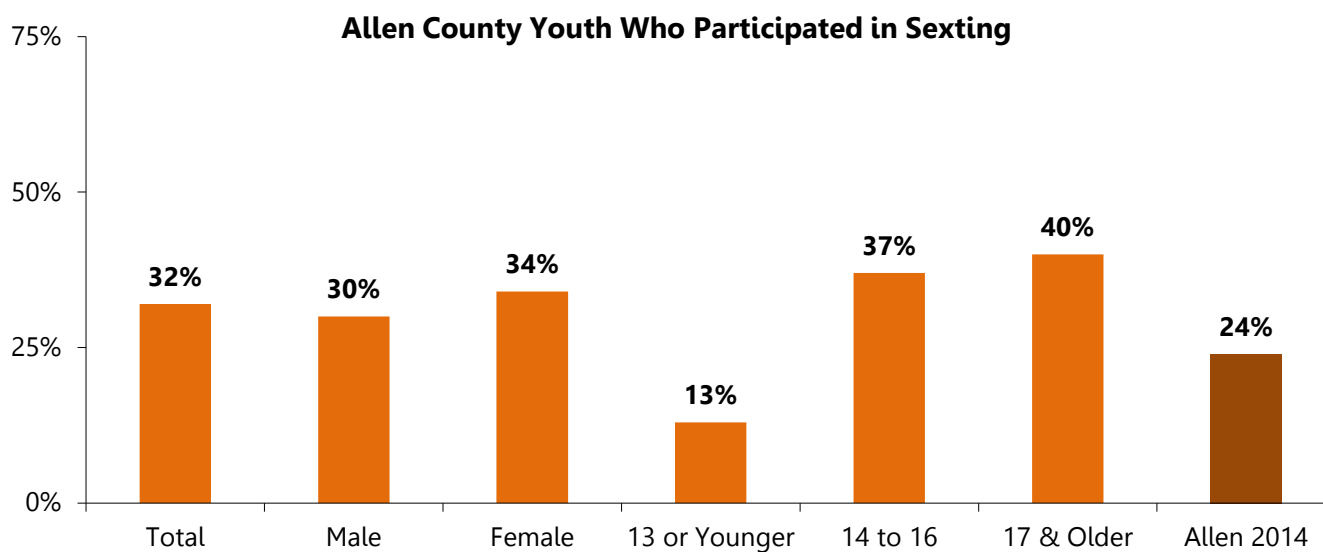
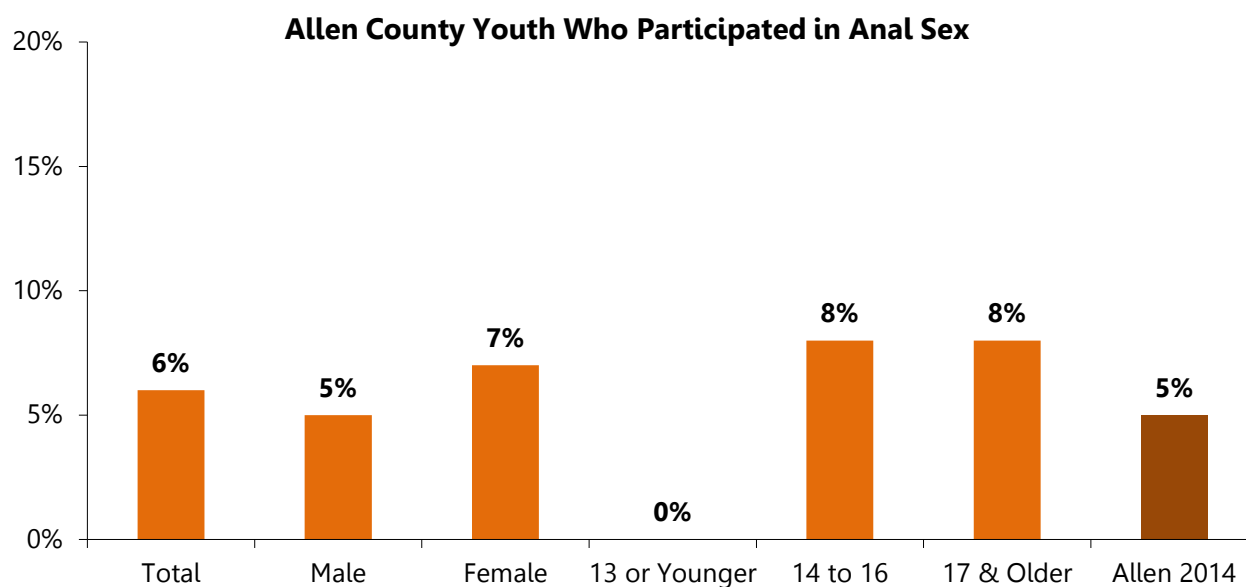
*The following graphs show the percentage of Allen County youth who participated in sexual intercourse and oral sex. Examples of how to interpret the information include: 26% of all Allen County youth had sexual intercourse, including 26% of males, and 26% of females.*



**8% of Allen County sexually active youth were not using a reliable method of protection to prevent pregnancy.**



*The following graphs show the percentage of Allen County youth who participated in anal sex and sexting. Examples of how to interpret the information include: 6% of all Allen County youth participated in anal sex, including 5% of males, and 7% of females.*



Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
Ever had sexual intercourse	46%	31%	26%	35%	43%	41%
Used a condom at last intercourse	70%	52%	35%	34%	51%	57%
Used birth control pills at last intercourse	35%	32%	10%	12%	24%	18%
Did not use any method to prevent pregnancy during last sexual intercourse	14%	12%	8%	8%	12%	14%
Had four or more sexual partners (of all youth)	14%	6%	5%	7%	12%	12%
Had sexual intercourse before age 13 (of all youth)	13%	3%	3%	3%	4%	4%

*Disclaimer: Two out of fourteen participating Allen County schools did not ask sexual behavior questions. Please use data with caution.*

## Sexual Risk Behavior

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

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

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

- Young people (aged 13-24) accounted for an estimated 22% of all new HIV diagnoses in the United States in 2015.
- Among young people (aged 13-24) diagnosed with HIV in 2015, 81% were gay and bisexual males.
- Half of the nearly 20 million new STDs reported each year are among young people, between the ages 15-24.
- Nearly 230,000 babies were born to teen girls aged 15-19 years in 2015.

*(Source: CDC, Adolescent and School Health, updated 7/18/16)*



# Youth Health: Mental Health

## Key Findings

*The health assessment results indicated that 15% of Allen County youth had seriously considered attempting suicide in the past year, and 7% attempted suicide in the past year, increasing to 10% of females. More than one-quarter (29%) of youth who felt depressed or suicidal reported it would be very unlikely for them to seek help. More than one-fourth (28%) of youth had three or more adverse childhood experiences.*

## Youth Mental Health

- Over one-quarter (27%) of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 38% of females (YRBS reported 26% for Ohio in 2013 and 30% for the U.S. in 2015).
- Fifteen percent (15%) of youth reported they had seriously considered attempting suicide in the past 12 months, increasing to 20% of females. Eighteen percent (18%) of high school youth had seriously considered attempting suicide. (Compared to the 2015 YRBS rate of 18% for U.S. youth and the 2013 YRBS rate of 14% for Ohio youth).
- In the past year, 7% of Allen County youth had attempted suicide, increasing to 10% of females. Two percent (2%) of youth had made more than one attempt. (The 2015 YRBS reported a suicide attempt prevalence rate of 9% for U.S. youth and a 2013 YRBS rate of 6% for Ohio youth).

**27% of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.**

- Over two-fifths (44%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide. Of youth who reported they would not seek help, the following reasons were reported: they can handle it themselves (67%), worried what others might think (31%), no time (22%), did not know where to go (11%), their family would not support them (8%), their friends would not support them (8%), cost (7%), and transportation (2%).
- Allen County youth reported the following caused them anxiety, stress and depression: academic success (42%), death of close family member or friend (36%), fighting with friends (32%), sports (31%), self-image (25%), other stress at home (24%), fighting at home (23%), peer pressure (21%), dating relationship (19%), breakup (19%), being bullied (18%), parent divorce/separation (18%), poverty/no money (11%), caring for younger siblings (10%), not having enough to eat (2%), sexual orientation (2%), not having a place to live (1%), and other (18%). Nine percent (9%) of youth stated none of the above caused them anxiety, stress, or depression.
- Allen County youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (39%), texting someone (28%), exercising (24%), hobbies (22%), talking to someone in their family (21%), eating (18%), using social media (13%), pray/reading the Bible (13%), talking to a peer (12%), breaking something (10%), writing in a journal (6%), drink alcohol/smoke/use tobacco/use illegal drugs (6%), and shopping (5%). Twenty-three percent (23%) of youth reported they did not have anxiety, stress, or depression.
- When youth had feelings of depression or suicide, they talked to the following: best friend (52%); parents (36%); girlfriend or boyfriend (33%); brother/sister (20%); an adult relative such as a grandparent, aunt or uncle (19%); caring adults (8%); pastor/priest/youth minister (8%); adult friend (7%); coach (5%); school counselor (4%); religious leader (4%); professional counselor (4%); teacher (3%); and other (5%). 23% of youth reported they had no one to talk to when they had feelings of depression or suicide.

- Of youth who felt depressed or suicidal, 24% reported they would be very likely to seek help. Over one-quarter (29%) of youth reported it would be very unlikely for them to seek help.
- Youth reported the following adverse childhood experiences (ACEs): parents became separated or were divorced (37%); parents or adults in home swore at them, insulted them or put them down (29%); lived with someone who was depressed, mentally ill or suicidal (17%); family did not look out for each other, feel close to each other, or support each other (17%); parents were not married (16%); lived with someone who was a problem drinker or alcoholic (15%); lived with someone who served time or was sentenced to serve in prison or jail (14%); lived with someone who used illegal drugs or misused prescription drugs (11%); parents or adults in the home abused each other (8%); parents or adults in home abused them (8%); did not have enough to eat, had to wear dirty clothes, and had no one to protect them (3%); an adult or someone 5 years older than them touched them sexually (3%); an adult or someone 5 years older than them tried to make them touch them sexually (3%), and an adult or someone 5 years older than them forced them to have sex (2%).
- More than one-fourth (28%) of youth had three or more ACEs.

**Behaviors of Allen County Youth**  
*Experienced 3 or More ACEs vs. Did Not Experience Any ACEs*

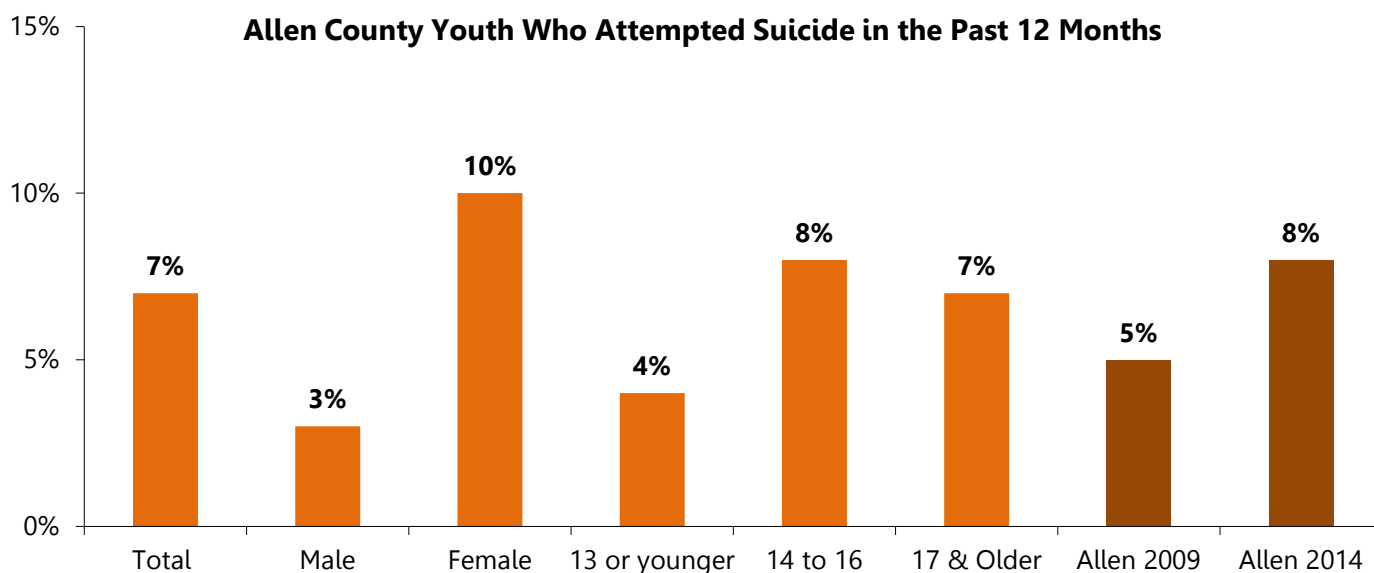
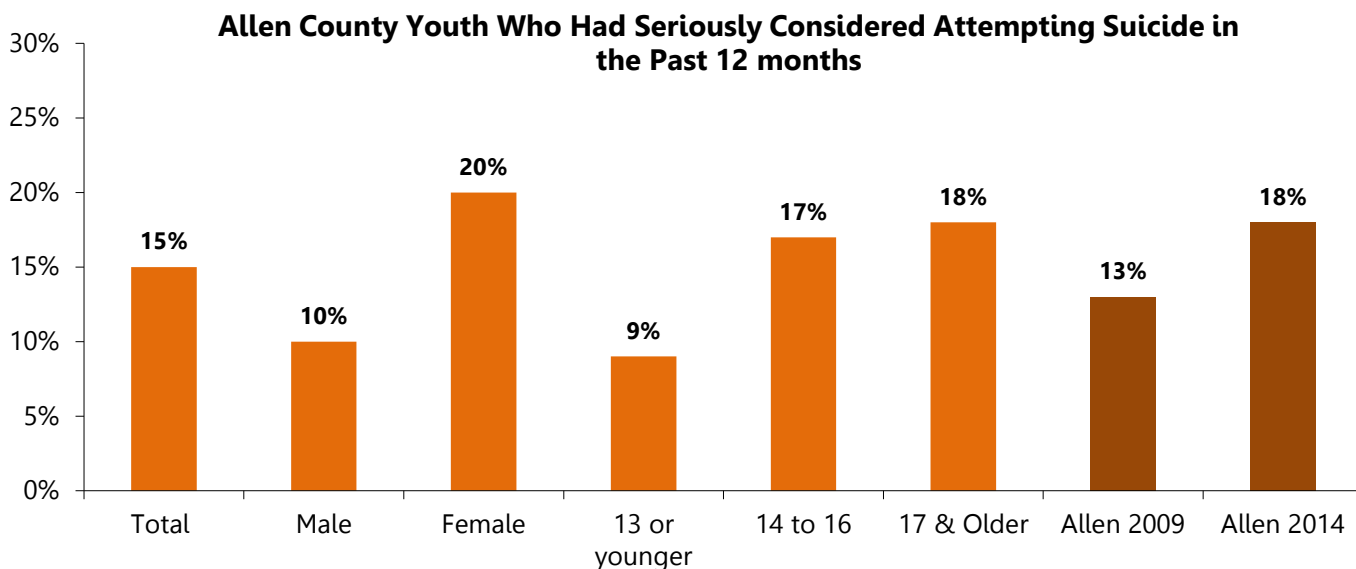
Youth Behaviors	Experienced 3 or More ACEs	Did Not Experience Any ACEs
<b>Participated in extracurricular activities</b>	95%	95%
<b>Seriously considered attempting suicide in the past 12 months</b>	33%	4%
<b>Have had at least one drink of alcohol in the past 30 days</b>	28%	22%
<b>Used marijuana in the past 30 days</b>	26%	5%
<b>Attempted suicide in the past 12 months</b>	17%	2%
<b>Have smoked cigarettes in the past 30 days</b>	11%	5%
<b>Participated in sexual intercourse</b>	39%	13%

**Adverse Childhood Experiences (ACEs)**

- Childhood abuse, neglect, and exposure to other traumatic stressors which we term adverse childhood experiences (ACE) are common. The most common are separated or divorced parents, verbal, physical or sexual abuse, witness of domestic violence, and having a family member with depression or mental illness.
- The short and long-term outcomes of these childhood exposures include a multitude of health and social problems such as:
  - Depression
  - Fetal death
  - Illicit drug use
  - Liver disease
  - STD's
  - Multiple sexual partners
  - Alcoholism and alcohol abuse
  - COPD
  - Unintended pregnancies
  - Suicide attempts
  - Early imitation of smoking
  - Risk for intimate partner violence

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

*The following graphs show Allen County youth who had seriously considered attempting suicide in the past year and had attempted suicide in the past year. Examples of how to interpret the information include 15% of youth seriously considered attempting suicide in the past year, including 10% of males, and 20% of females.*



Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
Youth who had seriously considered attempting suicide in the past year	13%	18%	15%	18%	14%	18%
Youth who had attempted suicide in the past year	5%	8%	7%	8%	6%	9%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	27%	29%	27%	31%	26%	30%

**Behaviors of Allen County Youth**  
*Contemplated Suicide vs. Did Not Contemplate Suicide*

Youth Behaviors	Contemplated Suicide	Did Not Contemplate Suicide
Been bullied in any way in the past year	80%	33%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	58%	22%
Had at least one drink of alcohol in the past 30 days	31%	19%
Smoked cigarettes in the past 30 days	17%	4%
Used marijuana in the past 30 days	25%	10%

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

# Youth Health: Personal Health and Safety

## Key Findings

*Forty-one percent (41%) of Allen County youth drivers had texted while driving in the past 30 days. Six percent (6%) of youth had played the choking game, also known as the pass-out game, space monkey, or dream game. Seventy-nine percent (79%) of youth reported they saw a dentist for a check-up, exam, teeth cleaning, or other dental work in the past year.*

## Personal Health

- Youth last saw a dentist for a check-up, exam, teeth cleaning, or other dental work: less than a year ago (79%), (2013 YRBS reported 75% for Ohio), 1 to 2 years ago (12%), more than 2 years ago (3%), never (1%), and do not know (9%).

## Personal Safety

- In the past month, youth drivers did the following while driving: wore a seatbelt (93%), talked on their cell phone (53%), ate (49%), drove while tired or fatigued (41%), texted (41%), used their cell phone other than for talking or texting (32%), used marijuana (5%), read (3%), applied makeup (2%), drank alcohol (1%), misused prescription drugs (1%), and used illegal drugs (1%),
- Fifty-eight percent (58%) of youth drivers had more than one distraction while driving.
- Twelve percent (12%) of youth suffered a blow or jolt to their head while playing with a sports team which caused them to get “knocked out,” have memory problems, double or blurry vision, headaches or “pressure” in the head, or nausea or vomiting, increasing to 14% of males.
- Six percent (6%) of youth had played the choking game, also known as the pass-out game, space monkey, or dream game.
- During the past 12 months, youth wore a helmet while riding a bike: never (74%), rarely (11%), sometimes (6%), most of the time (6%), and always (2%).
- During the past 12 months, youth wore a helmet while riding an ATV: never (46%), rarely (9%), sometimes (11%), most of the time (10%), and always (25%).
- During the past 12 months, youth wore a helmet while riding a snowmobile: never (57%), rarely (5%), sometimes (2%), most of the time (5%), and always (31%).
- During the past 12 months, youth wore a helmet while riding a skateboard: never (77%), rarely (8%), sometimes (5%), most of the time (5%), and always (4%).

## Education

- Allen County youth reported the following plans for their future: will graduate from high school (79%), will attend a four-year college (75%), will follow their career path (63%), will attend a community college or technical/trade school (20%), will join the military (10%), and won’t finish high school (1%). One percent (1%) of youth reported no hope for their future.

## Neighborhood and Built Environment

- Allen County youth reported living with the following individuals: both parents (50%), one of their parents (22%), mother and step-father (17%), father and step-mother (8%), mother and her partner (3%), father and his partner (1%), grandparents (5%), another relative (2%), guardians/foster parents (1%) and on their own or with friends (<1%).

Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Visited a dentist for a check-up within the past year</b>	68%	70%	79%	77%	75%	74%
<b>Suffered a blow or jolt to their head while playing with a sports team</b>	N/A	12%	12%	10%	12%	N/A

N/A- Not available

# Youth Health: Violence

## Key Findings

*Two percent (2%) of Allen County youth carried a weapon (such as a gun, knife or club) on school property in the past month. Thirteen percent (13%) of youth had been hit, slapped, or physically hurt by an adult or caregiver in the past month. About two-fifths (41%) of youth had been bullied in the past year.*

## Violence-Related Behaviors

- Two percent (2%) of youth carried a weapon (such as a gun, knife or club) on school property in the past 30 days, increasing to 16% of males. (Compared to 5% for the U.S., 2013 YRBS).
- Six percent (6%) of youth were threatened or injured with a weapon on school property in the past year (2015 YRBS reported 6% for the U.S.).
- Five percent (5%) of youth did not go to school on one or more days because they did not feel safe at school or on their way to or from school (YRBS reported 5% for Ohio in 2013 and 6% for the U.S. in 2015).

## Physical and Sexual Violence

- Five percent (5%) of youth reported a boyfriend or girlfriend hit, slapped, or physically hurt them on purpose in the past 12 months (2015 YRBS reported 10% for the U.S.).
- In the past year, 13% of youth reported an adult or caregiver had hit, slapped or physically hurt them on purpose.
- Over one-quarter (27%) of youth purposefully hurt themselves by cutting, scratching, burning, hitting or biting, increasing to 33% of females. Nearly one-tenth (9%) of youth had purposefully hurt themselves 10 or more times.
- Seven percent (7%) of youth had been forced to participate in a sexual activity when they did not want to, increasing to 11% of those ages 14-16.

## Bullying

- About two-fifths (41%) of youth had been bullied in the past year. The following types of bullying were reported:
  - 31% of youth were verbally bullied (teased, taunted or called harmful names)
  - 24% of youth were indirectly bullied (spread mean rumors about them or kept them out of a “group”)
  - 12% of youth were cyber bullied (teased, taunted or threatened by e-mail or cell phone) (YRBS reported 15% for Ohio in 2013 and 16% for the U.S. in 2015)
  - 9% of youth were physically bullied (were hit, kicked, punched or people took their belongings)
  - 4% of youth were sexually bullied (used nude or semi-nude pictures to pressure someone to have sex that did not want to, blackmail, intimidate, or exploit another person)
- Twenty-eight (28%) of youth had been bullied on school property in the past year. (YRBS reported 21% for Ohio in 2013 and 20% for the U.S. in 2015).

## Types of Bullying Allen County Youth Experienced in Past Year

Youth Behaviors	Total	Male	Female	13 and younger	14-16 years old	17 and older
<b>Verbally Bullied</b>	31%	23%	39%	33%	35%	22%
<b>Indirectly Bullied</b>	24%	13%	37%	25%	28%	17%
<b>Cyber Bullied</b>	12%	5%	20%	16%	14%	6%
<b>Physically Bullied</b>	9%	8%	9%	9%	12%	5%
<b>Sexually Bullied</b>	4%	2%	5%	2%	6%	1%

## Behaviors of Allen County Youth *Bullied vs. Non-Bullied*

Youth Behavior	Bullied	Non-Bullied
<b>Participated in extracurricular activities</b>	93%	93%
<b>Felt sad or hopeless for two or more weeks in a row</b>	48%	12%
<b>Overweight or Obese</b>	31%	31%
<b>Seriously considered attempting suicide in the past 12 months</b>	29%	5%
<b>Drank alcohol in the past 30 days</b>	22%	19%
<b>Attempted suicide in the past 12 months</b>	13%	2%
<b>Used marijuana in the past 30 days</b>	11%	12%
<b>Ever misused medications</b>	9%	2%
<b>Smoked cigarettes in the past 30 days</b>	7%	4%
<b>Carried a weapon on school property in the past 30 days</b>	1%	2%

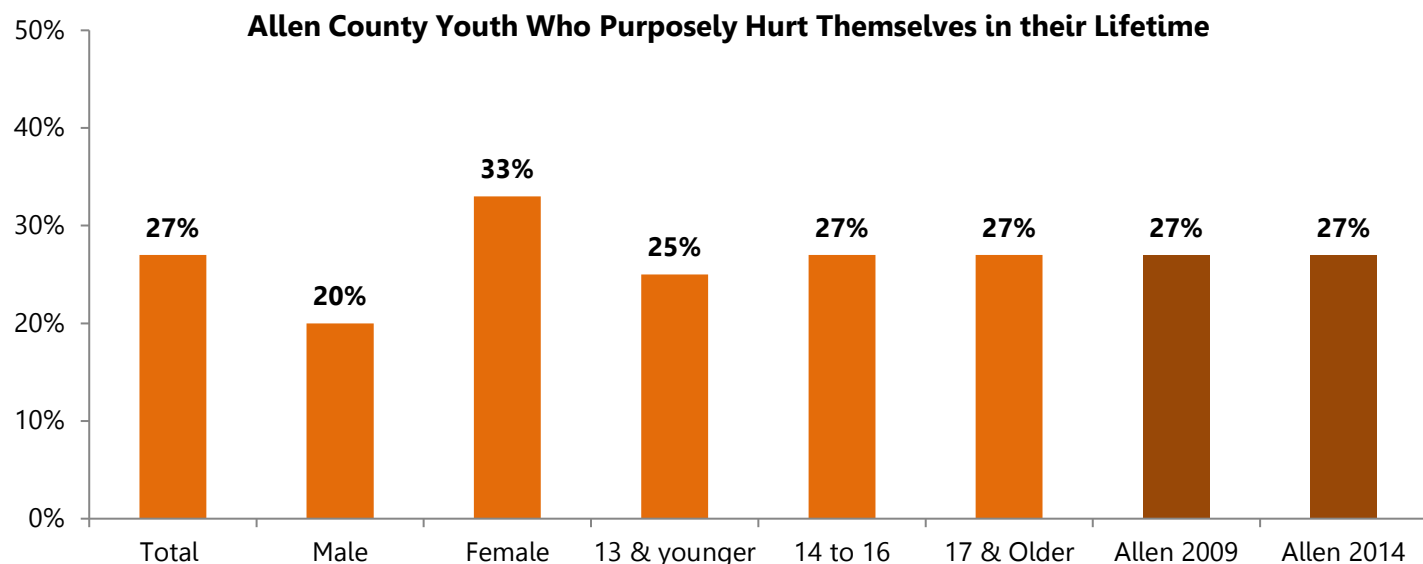
## Understanding Bullying

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

(Source: CDC, Injury Center: Violence Prevention, Understanding Bullying Fact Sheet, 2016)



The following graph shows Allen County youth who purposely hurt themselves (for example, cutting, burning, scratching, hitting, biting, etc.) in their lifetime. Examples of how to interpret the information include 27% of youth purposely hurt themselves, including 20% of males, and 33% of females.



Youth Comparisons	Allen County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2014 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (6 <sup>th</sup> -12 <sup>th</sup> )	Allen County 2017 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
Carried a weapon on school property in past month	4%	2%	2%	3%	N/A	4%
Threatened or injured with a weapon on school property in past year	11%	8%	7%	5%	N/A	6%
Did not go to school because felt unsafe	5%	5%	4%	3%	5%	6%
Electronically/cyber bullied in past year	13%	13%	12%	9%	15%	16%
Bullied in past year	47%	48%	41%	38%	N/A	N/A
Bullied on school property in past year	N/A	30%	28%	25%	21%	20%
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	12%	5%	5%	6%	N/A	10%
Purposely hurt themselves (lifetime)	27%	27%	27%	27%	N/A	N/A
Carried a weapon on school property in past month	4%	2%	2%	3%	N/A	4%

N/A – Not available

# Appendix I: Health Assessment Information Sources

Source	Data Used	Website
American Cancer Society, Cancer Facts and Figures 2017. Atlanta: ACS, 2017	<ul style="list-style-type: none"> <li>2017 Cancer Facts, Figures, and Estimates</li> </ul>	<a href="https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2017.html">https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2017.html</a>
American College of Allergy, Asthma & Immunology, 2016	<ul style="list-style-type: none"> <li>Asthma Facts</li> </ul>	<a href="http://acaai.org/news/facts-statistics/asthma">http://acaai.org/news/facts-statistics/asthma</a>
American Diabetes Association, 2017	<ul style="list-style-type: none"> <li>Statistics About Diabetes, Overall Numbers, Diabetes and Prediabetes</li> </ul>	<a href="http://www.diabetes.org/diabetes-basics/statistics/?referrer=https://www.google.com/">http://www.diabetes.org/diabetes-basics/statistics/?referrer=https://www.google.com/</a>
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	<ul style="list-style-type: none"> <li>2010 - 2015 Adult Ohio and U.S. Correlating Statistics</li> </ul>	<a href="https://www.cdc.gov/brfss/index.html">https://www.cdc.gov/brfss/index.html</a>
CDC, Arthritis, 2017	<ul style="list-style-type: none"> <li>Key Public Health Messages</li> </ul>	<a href="http://www.cdc.gov/arthritis/basics/key.htm">www.cdc.gov/arthritis/basics/key.htm</a>
CDC, Adolescent and School Health, 2013	<ul style="list-style-type: none"> <li>Youth Physical Activity Facts</li> </ul>	<a href="https://www.cdc.gov/healthyschools/physicalactivity/facts.htm">https://www.cdc.gov/healthyschools/physicalactivity/facts.htm</a>
CDC, Breast Cancer, 2016	<ul style="list-style-type: none"> <li>What Can I Do to Reduce My Risk of Breast Cancer?</li> </ul>	<a href="http://www.cdc.gov/cancer/breast/basic_info/prevention.htm">www.cdc.gov/cancer/breast/basic_info/prevention.htm</a>
CDC, Breastfeeding	<ul style="list-style-type: none"> <li>Facts about Breastfeeding</li> </ul>	<a href="https://www.cdc.gov/breastfeeding/pdf/2016breastfeedingreportcard.pdf">https://www.cdc.gov/breastfeeding/pdf/2016breastfeedingreportcard.pdf</a>
CDC, Cancer Prevention and Control	<ul style="list-style-type: none"> <li>Prostate Cancer Awareness</li> </ul>	<a href="https://www.cdc.gov/cancer/dcpc/resources/features/prostatecancer/index.htm">https://www.cdc.gov/cancer/dcpc/resources/features/prostatecancer/index.htm</a>
	<ul style="list-style-type: none"> <li>Lung Cancer Risk Factors</li> </ul>	<a href="https://www.cdc.gov/cancer/lung/basic_info/risk_factors.htm">https://www.cdc.gov/cancer/lung/basic_info/risk_factors.htm</a>
CDC, Division of Oral Health, National Center for Chronic Disease Prevention and Health Promotion, 2015	<ul style="list-style-type: none"> <li>Oral Health Basics</li> </ul>	<a href="http://www.cdc.gov/oralhealth/basics/index.html">www.cdc.gov/oralhealth/basics/index.html</a>
CDC, HIV/AIDS	<ul style="list-style-type: none"> <li>HIV in the U.S.</li> </ul>	<a href="https://www.cdc.gov/hiv/default.html">https://www.cdc.gov/hiv/default.html</a>
CDC, National Center for Health Statistics	<ul style="list-style-type: none"> <li>Leading Causes of Death in U.S.</li> </ul>	<a href="https://www.cdc.gov/nchs/fastats/deaths.htm">https://www.cdc.gov/nchs/fastats/deaths.htm</a>
	<ul style="list-style-type: none"> <li>Men's Health</li> </ul>	<a href="https://www.cdc.gov/nchs/fastats/mens-health.htm">https://www.cdc.gov/nchs/fastats/mens-health.htm</a>
	<ul style="list-style-type: none"> <li>Health Care Access and Utilization</li> </ul>	<a href="https://www.cdc.gov/nchs/fastats/access-to-health-care.htm">https://www.cdc.gov/nchs/fastats/access-to-health-care.htm</a>
CDC, Overweight and Obesity	<ul style="list-style-type: none"> <li>Obesity Facts</li> </ul>	<a href="https://www.cdc.gov/obesity/data/adult.html">https://www.cdc.gov/obesity/data/adult.html</a>
CDC, Physical Activity for Everyone	<ul style="list-style-type: none"> <li>Physical Activity Recommendations</li> </ul>	<a href="http://www.cdc.gov/physicalactivity/everyone/guidelines/adults.html">www.cdc.gov/physicalactivity/everyone/guidelines/adults.html</a>
CDC, Press Release, 2015	<ul style="list-style-type: none"> <li>Electronic Cigarettes and Teenagers in the U.S.</li> </ul>	<a href="http://www.cdc.gov/media/releases/2013/p0905-ecigarette-use.html">www.cdc.gov/media/releases/2013/p0905-ecigarette-use.html</a>
CDC, Sexually Transmitted Diseases Surveillance, 2017	<ul style="list-style-type: none"> <li>U.S. Chlamydia and Gonorrhea Rates</li> </ul>	<a href="http://www.cdc.gov/std/stats/">www.cdc.gov/std/stats/</a>
	<ul style="list-style-type: none"> <li>STD's in Adolescents and Young Adults</li> </ul>	<a href="https://www.cdc.gov/std/life-stages-populations/adolescents-youngadults.htm">https://www.cdc.gov/std/life-stages-populations/adolescents-youngadults.htm</a>
	<ul style="list-style-type: none"> <li>U.S. STD Surveillance Profile</li> </ul>	<a href="http://www.cdc.gov/std/stats/">www.cdc.gov/std/stats/</a>

Source	Data Used	Website
CDC, Smoking and Tobacco Use	<ul style="list-style-type: none"> <li>Smoking and Other Health Risks</li> </ul>	<a href="https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm">https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm</a>
	<ul style="list-style-type: none"> <li>Electronic Cigarette Use Among Adults</li> </ul>	<a href="https://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/">https://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/</a>
CDC, Violence Prevention	<ul style="list-style-type: none"> <li>Adverse Childhood Experiences (ACE)</li> </ul>	<a href="https://www.cdc.gov/violenceprevention/acesstudy/">https://www.cdc.gov/violenceprevention/acesstudy/</a>
	<ul style="list-style-type: none"> <li>Understanding Bullying</li> </ul>	<a href="http://www.cdc.gov/violenceprevention/pdf/bullying_factsheet.pdf">www.cdc.gov/violenceprevention/pdf/bullying_factsheet.pdf</a>
CDC, Wonder	<ul style="list-style-type: none"> <li>About Underlying Cause of Death, 2000-2015</li> <li>Allen County and Ohio Leading Causes of Death, 2013-2015</li> <li>Allen County and Ohio Mortality Statistics</li> </ul>	<a href="http://wonder.cdc.gov/ucd-icd10.html">http://wonder.cdc.gov/ucd-icd10.html</a>
Community Commons	<ul style="list-style-type: none"> <li>Alcohol Beverage Expenditures</li> <li>Cigarette Expenditures</li> <li>Bars and Drinking Establishment</li> <li>Beer, Wine and Liquor Stores</li> </ul>	<a href="http://www.communitycommons.org/">www.communitycommons.org/</a>
County Health Rankings, 2017	<ul style="list-style-type: none"> <li>Food Environment Index</li> <li>Ratio of Population to Mental Health Providers</li> </ul>	<a href="http://www.countyhealthrankings.org/">www.countyhealthrankings.org/</a>
Healthy People 2020: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> <li>Access to Health Services</li> <li>All Healthy People 2020 Target Data Points</li> <li>Predictors of Access to Health Care</li> <li>Social Determinants of Health</li> <li>Some U.S. Baseline Statistics</li> </ul>	<a href="http://www.healthypeople.gov/2020/topicsobjectives2020">www.healthypeople.gov/2020/topicsobjectives2020</a>
National Alliance on Mental Illness (NAMI)	<ul style="list-style-type: none"> <li>African American Mental Health, 2017</li> </ul>	<a href="https://www.nami.org/Find-Support/Diverse-Communities/African-American-Mental-Health">https://www.nami.org/Find-Support/Diverse-Communities/African-American-Mental-Health</a>
National Association for the Advancement of Colored People	<ul style="list-style-type: none"> <li>Health Care Fact Sheet</li> </ul>	<a href="https://donate.naacp.org/pages/health-care-fact-sheet">https://donate.naacp.org/pages/health-care-fact-sheet</a>
National Institute on Drug Abuse	<ul style="list-style-type: none"> <li>Abuse of Prescription (Rx) Drugs Affects Young Adults Mostly</li> </ul>	<a href="https://www.drugabuse.gov/related-topics/trends-statistics/infographics/abuse-prescription-rx-drugs-affects-young-adults-most">https://www.drugabuse.gov/related-topics/trends-statistics/infographics/abuse-prescription-rx-drugs-affects-young-adults-most</a>
National Institute on Drug Abuse	<ul style="list-style-type: none"> <li>Drug Facts: Drugged Driving</li> </ul>	<a href="https://www.drugabuse.gov/publications/drugfacts/drugged-driving">https://www.drugabuse.gov/publications/drugfacts/drugged-driving</a>
Ohio Automated Rx Reporting System	<ul style="list-style-type: none"> <li>Opiate and Pain Reliever Doses Per Patient</li> <li>Opiate and Pain Reliever Doses Per Capita</li> <li>Opioid Doses per Capita, Quarterly from 2015-2016</li> </ul>	<a href="http://www.ohiopmp.gov/Portal/Reports.aspx">www.ohiopmp.gov/Portal/Reports.aspx</a>

Source	Data Used	Website
Ohio Department of Health, STD Surveillance Data	<ul style="list-style-type: none"> <li>Allen County and Ohio Chlamydia and Gonorrhea Disease Rates</li> <li>Allen County Chlamydia and Gonorrhea Cases</li> </ul>	<a href="http://www.odh.ohio.gov/odhprograms/stdsurv/stdsur1.aspx">www.odh.ohio.gov/odhprograms/stdsurv/stdsur1.aspx</a>
Ohio Department of Health, Information Warehouse	<ul style="list-style-type: none"> <li>Allen County and Ohio Birth Statistics</li> </ul>	<a href="http://www.odh.ohio.gov/healthstats/dataandstats.aspx">http://www.odh.ohio.gov/healthstats/dataandstats.aspx</a>
	<ul style="list-style-type: none"> <li>Incidence of Cancer</li> </ul>	<a href="https://www.odh.ohio.gov/healthstats/ociss/hs/access1.aspx">https://www.odh.ohio.gov/healthstats/ociss/hs/access1.aspx</a>
	<ul style="list-style-type: none"> <li>Leading Causes of Death</li> </ul>	<a href="https://www.odh.ohio.gov/healthstats/vitals/tats/deathstat.aspx">https://www.odh.ohio.gov/healthstats/vitals/tats/deathstat.aspx</a>
	<ul style="list-style-type: none"> <li>Mortality</li> </ul>	<a href="http://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/Mortality">http://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/Mortality</a>
Ohio Department of Health, HIV/AIDS Surveillance Program	<ul style="list-style-type: none"> <li>HIV/AIDS Incidence and Prevalence</li> </ul>	<a href="http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/health-statistics---disease---hiv-aids/2015-Data-Tables.pdf?la=en">http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/health-statistics---disease---hiv-aids/2015-Data-Tables.pdf?la=en</a>
Ohio Department of Public Safety	<ul style="list-style-type: none"> <li>2016 Allen County and Ohio Crash Facts</li> </ul>	<a href="http://www.publicsafety.ohio.gov/crashes.stm">http://www.publicsafety.ohio.gov/crashes.stm</a>
Ohio Medicaid Assessment Survey (OMAS), 2015	<ul style="list-style-type: none"> <li>Unmet Needs in Dental Care</li> <li>Unmet Needs in Prescription Medication</li> <li>Poor/Fair Overall Health</li> </ul>	<a href="http://grcapps.osu.edu/dashboards/OMAS/adult/">http://grcapps.osu.edu/dashboards/OMAS/adult/</a>
Ohio State Highway Patrol	<ul style="list-style-type: none"> <li>Felony Cases and Drug Arrests, January-June 2016</li> </ul>	<a href="http://www.statepatrol.ohio.gov/doc/2016_Jan-Jun_FelonyAndDrug.pdf">http://www.statepatrol.ohio.gov/doc/2016_Jan-Jun_FelonyAndDrug.pdf</a>
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> <li>American Community Survey 5-year estimate, 2011-2015</li> </ul>	<a href="https://www.census.gov/programs-surveys/acs/">https://www.census.gov/programs-surveys/acs/</a>
	<ul style="list-style-type: none"> <li>Federal Poverty Thresholds</li> </ul>	<a href="https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html">https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html</a>
	<ul style="list-style-type: none"> <li>Ohio and Allen County 2015 Census Demographic Information</li> </ul>	<a href="https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml">https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml</a>
	<ul style="list-style-type: none"> <li>Small Area Income and Poverty Estimates</li> </ul>	<a href="https://www.census.gov/did/www/saipe/">https://www.census.gov/did/www/saipe/</a>
Youth Risk Behavior Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Centers for Disease Control	<ul style="list-style-type: none"> <li>2009 - 2015 Youth Ohio and U.S. Correlating Statistics</li> </ul>	<a href="https://www.cdc.gov/healthyYouth/data/yrebs/index.htm">https://www.cdc.gov/healthyYouth/data/yrebs/index.htm</a>

## Appendix II: Acronyms and Terms

<b>AHS</b>	<b>A</b> ccess to <b>H</b> ealth <b>S</b> ervices, Topic of Healthy People 2020 objectives
<b>Adult</b>	Defined as 19 years of age and older.
<b>Age-Adjusted Mortality Rates</b>	Death rate per 100,000 adjusted for the age distribution of the population.
<b>Adult Binge Drinking</b>	Consumption of five alcoholic beverages or more (for males) or four or more alcoholic beverages (for females) on one occasion.
<b>AOCBC</b>	<b>A</b> rthritis, <b>O</b> steoporosis, and <b>C</b> hronic <b>B</b> ack <b>C</b> onditions
<b>BMI</b>	<b>B</b> ody <b>M</b> ass <b>I</b> ndex is defined as the contrasting measurement/relationship of weight to height.
<b>BRFSS</b>	<b>B</b> ehavior <b>R</b> isk <b>F</b> actor <b>S</b> urveillance <b>S</b> ystem, an adult survey conducted by the CDC.
<b>CDC</b>	<b>C</b> enters for <b>D</b> isease <b>C</b> ontrol and <b>P</b> revention.
<b>Current Smoker</b>	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
<b>CY</b>	<b>C</b> alendar <b>Y</b> ear
<b>FY</b>	<b>F</b> iscal <b>Y</b> ear
<b>HCNO</b>	<b>H</b> ospital <b>C</b> ouncil of <b>N</b> orthwest <b>O</b> hio
<b>HDS</b>	<b>H</b> ear <b>t</b> <b>D</b> isease and <b>S</b> troke, Topic of Healthy People 2020 objectives
<b>HP 2020</b>	<b>H</b> ealthy <b>P</b> eople <b>2020</b> , a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
<b>Health Indicator</b>	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
<b>High Blood Cholesterol</b>	240 mg/dL and above
<b>High Blood Pressure</b>	Systolic $\geq 140$ and Diastolic $\geq 90$
<b>IID</b>	<b>I</b> mmunizations and <b>I</b> nfectious <b>D</b> iseases, Topic of Healthy People 2020 objectives
<b>N/A</b>	Data is not available.
<b>NSCH</b>	<b>N</b> ational <b>S</b> urvey of <b>C</b> hildren's <b>H</b> ealth
<b>ODH</b>	<b>O</b> hio <b>D</b> epartment of <b>H</b> ealth
<b>OSHP</b>	<b>O</b> hio <b>S</b> tate <b>H</b> ighway <b>P</b> atrol
<b>Race/Ethnicity</b>	<b>Census 2010:</b> U.S. Census data consider race and Hispanic origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as "a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race." Data are presented as "Hispanic or Latino" and "Not Hispanic or Latino." Census 2010 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported, "White alone" or "Black alone", means the respondents reported only one race.
<b>SHA/SHIP</b>	<b>O</b> hio <b>S</b> tate <b>H</b> ealth <b>A</b> ssessment and <b>O</b> hio <b>S</b> tate <b>H</b> ealth <b>I</b> mprovement <b>P</b> lan
<b>Weapon</b>	Defined in the YRBS as "a weapon such as a gun, knife, or club"

<b>Youth</b>	Defined as 12 through 18 years of age
<b>YPLL/65</b>	<b>Y</b> ears of <b>P</b> otential <b>L</b> ife <b>L</b> ost before age 65. Indicator of premature death.
<b>Youth BMI Classifications</b>	<b>Underweight</b> is defined as BMI-for-age $\leq$ 5 <sup>th</sup> percentile <b>Overweight</b> is defined as BMI-for-age 85 <sup>th</sup> percentile to < 95 <sup>th</sup> percentile. <b>Obese</b> is defined as $\geq$ 95 <sup>th</sup> percentile.
<b>YRBS</b>	<b>Youth Risk Behavior Survey</b> , a youth survey conducted by the CDC

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

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

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

Weightings were created for each category within sex (male, female), race (White, Black, others), Age (7 different age categories), and income (9 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Allen County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2017 Allen County Survey and the 2015 Census estimates.

<b><u>2017 Allen Survey</u></b>			<b><u>2015 Census Estimate</u></b>		<b><u>Weight</u></b>
<b><u>Sex</u></b>	<b><u>Number</u></b>	<b><u>Percent</u></b>	<b><u>Number</u></b>	<b><u>Percent</u></b>	
Male	229	35.23077	52,977	50.36028	1.429440
Female	421	64.76923	52,219	49.63972	0.766409

In this example, it shows that there was a larger portion of females in the sample compared to the actual portion in Allen County. The weighting for males was calculated by taking the percent of males in Allen County (based on Census information) (50.36028%) and dividing that by the percent found in the 2017 Allen County sample (35.23077%) [ $50.36028/35.23077 = \text{weighting of } 1.429440$  for males]. The same was done for females [ $49.63972/64.76923 = \text{weighting of } 0.766409$  for females]. Thus males' responses are weighted heavier by a factor of 1.429440 and females' responses weighted less by a factor of 0.766409.

This same thing was done for each of the 21 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 1.416039 [ $0.766409$  (weight for females)  $\times$   $1.097956$  (weight for White)  $\times$   $1.397421$  (weight for age 35-44)  $\times$   $1.204211$  (weight for income \$50-\$75k)]. Thus, each individual in the 2017 Allen County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

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

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

Category	Allen Sample	%	2014 Census*	%	Weighting Value
<b>Sex:</b>					
Male	229	35.23077	52,977	50.36028	1.429440
Female	421	64.76923	52,219	49.63972	0.766409
<b>Age:</b>					
20-24	8	1.21951	7,941	10.27124	8.422413
25-34	37	5.64024	12,498	16.16546	2.866092
35-44	75	11.43293	12,352	15.97661	1.397421
45-54	95	14.48171	13,942	18.03319	1.245239
55-59	91	13.87195	7,709	9.97116	0.718800
60-64	99	15.09146	6,600	8.53673	0.565666
65+	251	38.26220	16,271	21.04562	0.550037
<b>Race:</b>					
White (non-Hispanic)	487	74.35115	85,876	81.63428	1.097956
Black (non-Hispanic)	102	15.57252	12,646	12.02137	0.771961
All other races/ethnicities	66	10.07634	6,674	6.34435	0.629628
<b>Household Income:</b>					
Less than \$10,000	45	7.61421	3,500	8.75306	1.149569
\$10k-\$15k	37	6.26058	2,702	6.75737	1.079352
\$15k-\$25k	87	14.72081	5,331	13.33217	0.905668
\$25k-\$35k	75	12.69036	4,563	11.41149	0.899226
\$35k-\$50	90	15.22843	5,928	14.82519	0.973521
\$50k-\$75k	99	16.75127	8,066	20.17206	1.204211
\$75k-\$100k	62	10.49069	4,369	10.92632	1.041525
\$100k-\$150k	70	11.84433	3,662	9.15821	0.773214
\$150k or more	26	4.39932	1,865	4.66413	1.060193

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

\* Allen County population figures taken from the 2015 Census estimates.



## Appendix IV: School Participation

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

**Allen East Local Schools**

Allen East High School

**Bath Local Schools**

Bath High School

Bath Middle School

**Delphos City Schools**

Jefferson High School

Jefferson Middle School

**Elida Local Schools**

Elida High School

Elida Middle School

**Lima City Schools**

Lima Senior High School

Lima West Middle School

**Perry Local Schools**

Perry High School

**Shawnee Local Schools**

Shawnee High School

Shawnee Middle School

**Spencerville Local Schools**

Spencerville High School

Spencerville Middle School

## Appendix V: Allen County Sample Demographic Profile\*

Variable	2017 Survey Sample	Allen County Census 2011-2015 (5-year estimate)	Ohio Census 2015
<b>Age</b>			
20-29	18.9%	13.4%	13.3%
30-39	15.3%	11.9%	12.2%
40-49	15.7%	11.8%	12.5%
50-59	18.6%	14.4%	14.3%
60 plus	29.7%	21.8%	22.4%
<b>Race/Ethnicity</b>			
White	74.4%	83.5%	82.0%
Black or African American	15.5%	12.1%	12.3%
American Indian and Alaska Native	1.6%	0.3%	0.2%
Asian	0.3%	0.8%	2.0%
Other	8.2%	0.5%	0.8%
Hispanic Origin (may be of any race)	1.2%	2.7%	3.5%
<b>Marital Status†</b>			
Married Couple	50.1%	46.2%	47.5%
Never been married/member of an unmarried couple	27.4%	32.1%	32.1%
Divorced/Separated	13.5%	14.6%	14.0%
Widowed	6.0%	7.0%	6.4%
<b>Education†</b>			
Less than High School Diploma	6.5%	10.7%	10.3%
High School Diploma	31.2%	39.7%	33.7%
Some college/ College graduate	60.6%	49.6%	56.0%
<b>Income (Families)</b>			
\$14,999 and less	12.2%	9.5%	7.7%
\$15,000 to \$24,999	9.4%	8.9%	7.4%
\$25,000 to \$49,999	20.0%	25.1%	22.1%
\$50,000 to \$74,999	23.8%	23.8%	20.2%
\$75,000 or more	25.2%	32.7%	44.7%

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

† The Ohio and Allen 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.

Youth Variable	2017 Youth Survey Sample
<b>Age</b>	
12 years old or younger	15.2%
13 years old	17.1%
14 years' old	15.7%
15 years' old	11.2%
16 years' old	14.5%
17 years' old	17.6%
18 years old or older	8.6%
<b>Gender</b>	
Male	50.2%
Female	49.8%
<b>Race/Ethnicity*</b>	
White	77.4%
American Indian and Alaska Native	5.3%
Black or African American	17.8%
Hispanic or Latino	6.3%
Asian	1.0%
Native Hawaiian or Other Pacific Islander	0.2%
<b>Grade Level</b>	
Middle School (6-8)	45.0%
High School (9-12)	55.0%
<b>Individual Grade Level</b>	
6 <sup>th</sup> grade	12.0%
7 <sup>th</sup> grade	17.7%
8 <sup>th</sup> grade	15.3%
9 <sup>th</sup> grade	12.0%
10 <sup>th</sup> grade	14.6%
11 <sup>th</sup> grade	15.8%
12 <sup>th</sup> grade	12.7%
<b>Sexual Orientation</b>	
Heterosexual (straight)	89.9%
Gay	1.2%
Lesbian	0.9%
Bisexual	4.7%
Transgender	0.6%
Other	0.3%
Not Sure	2.4%

\* Percents may not equal 100% due to missing data (non-responses) and/or multiple response questions.

## Appendix VI: Demographics and Household Information

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

Age	Total	Males	Females
<b>Allen County</b>	<b>6,761</b>	<b>3,501</b>	<b>3,260</b>
<b>0-4 years</b>	5,437	2,819	2,618
1-4 years	1,324	682	642
< 1 year	2,693	1,363	1,330
1-2 years	2,744	1,456	1,288
3-4 years	<b>7,083</b>	<b>3,602</b>	<b>3,481</b>
<b>5-9 years</b>	2,772	1,418	1,354
5-6 years	4,311	2,184	2,127
7-9 years	<b>7,160</b>	<b>3,645</b>	<b>3,515</b>
<b>10-14 years</b>	4,317	2,203	2,114
10-12 years	2,843	1,442	1,401
13-14 years	10,337	5,397	4,940
12-18 years	<b>8,394</b>	<b>4,719</b>	<b>3,675</b>
<b>15-19 years</b>	4,441	2,295	2,146
15-17 years	3,953	2,424	1,529
18-19 years	7,471	4,226	3,245
20-24 years	6,283	3,345	2,938
25-29 years	6,160	3,095	3,065
30-34 years	6,096	3,136	2,960
35-39 years	6,316	3,241	3,075
40-44 years	7,365	3,619	3,746
45-49 years	8,114	4,185	3,929
50-54 years	7,336	3,701	3,635
55-59 years	6,095	3,027	3,068
60-64 years	4,423	2,061	2,362
65-69 years	3,505	1,609	1,896
70-74 years	2,866	1,225	1,641
75-79 years	2,432	950	1,482
80-84 years	1,636	552	1,084
85-89 years	668	161	507
90-94 years	147	24	123
95-99 years	20	6	14
100-104 years	0	0	0
105-109 years	0	0	0
110 years & over	<b>2,471</b>	<b>743</b>	<b>1,728</b>
<b>Total 85 years and over</b>	<b>15,697</b>	<b>6,588</b>	<b>9,109</b>
<b>Total 65 years and over</b>	<b>79,189</b>	<b>39,635</b>	<b>39,554</b>
<b>Total 19 years and over</b>	<b>6,761</b>	<b>3,501</b>	<b>3,260</b>

# ALLEN COUNTY PROFILE

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

*2011-2015 ACS 5-year estimate*

## ***Total Population***

2015 Total Population	105,196
2000 Total Population	106,586

## ***Largest City-Lima***

2015 Total Population	38,232	100%
2000 Total Population	41,774	100%

## ***Population By Race/Ethnicity***

Total Population	105,196	100%
White Alone	87,886	83.5%
Hispanic or Latino (of any race)	2,813	2.7%
African American	12,685	12.1%
Asian	791	0.8%
Two or more races	2,978	2.8%
Other	559	0.5%
American Indian and Alaska Native	297	0.3%

## ***Population By Age***

Under 5 years	6,505	6.2%
5 to 19 years	21,378	20.3%
20 to 24 years	7,941	7.5%
25 to 44 years	24,850	23.6%
45 to 64 years	28,251	26.9%
65 years and more	16,271	15.5%
<b>Median age (years)</b>	<b>38.1</b>	

## ***Household By Type***

Total Households	39,986	100%
Family Households (families)	26,203	65.5%
With own children <18 years	11,508	28.8%
Married-Couple Family Households	18,446	46.1%
With own children <18 years	6,761	16.9%
Female Householder, No Husband Present	5,738	14.4%
With own children <18 years	3,491	8.7%
Non-family Households	13,783	34.5%
Householder living alone	11,468	28.7%
Householder 65 years and >	4,623	11.6%
Households With Individuals < 18 years	12,999	32.5%
Households With Individuals 65 years and >	11,437	28.6%
Average Household Size	2.53 people	
Average Family Size	3.11 people	

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

**2011-2015 ACS 5-year estimate**

Median Value of Owner-Occupied Units	\$105,400
Median Monthly Owner Costs (With Mortgage)	\$1,064
Median Monthly Owner Costs (Not Mortgaged)	\$401
Median Gross Rent for Renter-Occupied Units	\$639
Median Rooms Per Housing Unit	5.9
Total Housing Units	44,859
No Telephone Service	1,076
Lacking Complete Kitchen Facilities	517
Lacking Complete Plumbing Facilities	142

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

**2011-2015 ACS 5-year estimates**

**School Enrollment**

Population 3 Years and Over Enrolled In School	28,220	100%
Nursery & Preschool	1,787	6.3%
Kindergarten	1,536	5.4%
Elementary School (Grades 1-8)	10,848	38.5%
High School (Grades 9-12)	5,685	20.1%
College or Graduate School	8,364	29.6%

**Educational Attainment**

Population 25 Years and Over	69,372	100%
< 9 <sup>th</sup> Grade Education	1,509	2.2%
9 <sup>th</sup> to 12 <sup>th</sup> Grade, No Diploma	5,892	8.5%
High School Graduate (Includes Equivalency)	27,541	39.7%
Some College, No Degree	15,329	22.1%
Associate Degree	7,061	10.2%
Bachelor's Degree	7,015	10.1%
Graduate Or Professional Degree	5,025	7.2%

Percent High School Graduate or Higher	*(X)	89.3%
Percent Bachelor's Degree or Higher	*(X)	17.4%

\*(X) – Not available

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

*2011-2015 ACS 5-year estimate*

***Marital Status***

Population 15 Years and Over	84,723	100%
Never Married	27,196	32.1%
Now Married, Excluding Separated	39,142	46.2%
Separated	1,271	1.5%
Widowed	5,931	7.0%
Female	9,235	10.9%
Divorced	11,099	13.1%
Female	11,607	13.7%

***Veteran Status***

Civilian Veterans 18 years and over	7,787	9.7%
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***Disability Status of the Civilian Non-institutionalized Population***

Total Civilian Noninstitutionalized Population	102,608	100%
With a Disability	14,949	14.6%
Under 18 years	24,681	100%
With a Disability	1,557	6.3%
18 to 64 years	62,354	100%
With a Disability	8,072	12.9%
65 Years and Over	15,573	100%
With a Disability	5,320	34.2%

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

***Employment Status***

Population 16 Years and Over	83,408	100%
In Labor Force	52,520	63.0%
Not In Labor Force	30,888	37.0%
Females 16 Years and Over	41,466	100%
In Labor Force	24,483	59.0%

Population Living With Own Children <6 Years	7,808	100%
All Parents In Family In Labor Force	5,673	72.7%

***Class of Worker***

Employed Civilian Population 16 Years and Over	47,604	100%
Private Wage and Salary Workers	40,569	85.2%
Government Workers	5,014	10.5%
Self-Employed Workers in Own Not Incorporated Business	1,945	4.1%
Unpaid Family Workers	76	0.2%

***Median Earnings***

Male, Full-time, Year-Round Workers	\$43,788
Female, Full-time, Year-Round Workers	\$31,231

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

***Occupations***

Employed Civilian Population 16 Years and Over	47,604	100%
Production, Transportation, and Material Moving Occupations	10,487	22.0%
Management, business, science, and art occupations	12,796	26.9%
Sales and Office Occupations	10,806	22.7%
Service Occupations	9,711	20.4%
Natural Resources, Construction, and Maintenance Occupations	3,808	8.0%

***Leading Industries***

Employed Civilian Population 16 Years and Over	47,604	100%
Manufacturing	9,616	20.2%
Educational, health and social services	12,044	25.3%
Trade (retail and wholesale)	6,522	13.7%
Arts, entertainment, recreation, accommodation, and food services	4,618	9.7%
Professional, scientific, management, administrative, and waste management services	2,999	6.3%
Transportation and warehousing, and utilities	1,844	3.9%
Finance, insurance, real estate and rental and leasing	2,133	4.5%
Other services (except public administration)	2,709	5.7%
Construction	2,326	4.9%
Public administration	1,788	3.8%
Information	583	1.2%
Agriculture, forestry, fishing and hunting, and mining	418	0.9%

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

	<b>Income</b>	<b>Rank of Ohio Counties</b>
BEA Per Capita Personal Income 2015	\$37,469	45 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2014	\$36,188	49 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2013	\$35,070	49 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2012	\$35,481	36 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2011	\$34,190	38 <sup>th</sup> of 88 counties

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



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

*2011-2015 ACS 5-year estimate*

***Income In 2015***

Households	39,986	100%
< \$10,000	3,500	8.8%
\$10,000 to \$14,999	2,702	6.8%
\$15,000 to \$24,999	5,331	13.3%
\$25,000 to \$34,999	4,563	11.4%
\$35,000 to \$49,999	5,928	14.8%
\$50,000 to \$74,999	8,066	20.2%
\$75,000 to \$99,999	4,369	10.9%
\$100,000 to \$149,999	3,662	9.2%
\$150,000 to \$199,999	1,027	2.6%
\$200,000 or more	838	2.1%

***Median Household Income***

***\$44,103***

***Income In 2015***

Families	26,203	100%
< \$10,000	1,505	5.7%
\$10,000 to \$14,999	1,004	3.8%
\$15,000 to \$24,999	2,328	8.9%
\$25,000 to \$34,999	2,777	10.6%
\$35,000 to \$49,999	3,807	14.5%
\$50,000 to \$74,999	6,230	23.8%
\$75,000 to \$99,999	3,732	14.2%
\$100,000 to \$149,999	3,160	12.1%
\$150,000 to \$199,999	913	3.5%
\$200,000 or more	747	2.9%

***Median Household Income (families)***

***\$56,195***

***Per Capita Income In 2011-2015***

***\$22,922***

***Poverty Status In 2015***

	<b><i>Number Below Poverty Level</i></b>	<b><i>% Below Poverty Level</i></b>
Families	*(X)	12.7%
Individuals	*(X)	17.5%

\*(X)- Not available

**Poverty Rates, 5-year averages  
2011- 2015**

Category	Allen	Ohio
Population in poverty	17.5%	15.8%
< 125% FPL (%)	23.2%	20.3%
< 150% FPL (%)	28.2%	24.8%
< 200% FPL (%)	30.4	33.9%
Population in poverty (1999)	12.1%	10.6%

*(Source: The Ohio Poverty Report, Ohio Development Services Agency, February 2017,  
<http://www.development.ohio.gov/files/research/P7005.pdf>)*

**Employment Statistics**

Category	Allen	Ohio
Labor Force	48,200	5,751,600
Employed	46,000	5,498,900
Unemployed	2,100	252,700
Unemployment Rate* in April 2017	4.5	4.4
Unemployment Rate* in March 2017	5.1	5.2
Unemployment Rate* in April 2016	4.5	4.8

*\*Rate equals unemployment divided by labor force.*

*(Source: Ohio Department of Job and Family Services, April 2017, <http://ohiolmi.com/laus/current.htm>)*

### Estimated Poverty Status in 2015

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
<b>Allen County</b>				
All ages in poverty	15,229	12,843 to 17,615	15.5%	13.1 to 17.9
Ages 0-17 in poverty	23,835	4,623 to 6,531	23.4%	19.4 to 27.4
Ages 5-17 in families in poverty	3,742	3,030 to 4,454	21.4%	17.3 to 25.5
Median household income	\$49,297	\$46,661 to \$51,933		
<b>Ohio</b>				
All ages in poverty	1,670,487	1,646,455 to 1,694,519	14.8%	14.6 to 15.0
Ages 0-17 in poverty	546,968	532,624 to 561,312	21.2%	20.6 to 21.8
Ages 5-17 in families in poverty	365,471	352,710	19.3%	18.6 to 20.0
Median household income	\$51,086	\$50,853 to \$51,319		
<b>United States</b>				
All ages in poverty	46,153,077	45,878,016 to 46,428,138	14.7%	14.6 to 14.8
Ages 0-17 in poverty	15,000,273	14,862,975 to 15,137,571	20.7%	20.5 to 20.9
Ages 5-17 in families in poverty	10,245,028	10,145,484 to 10,344,572	19.5%	19.3 to 19.7
Median household income	\$55,775	\$55,690 to \$55,860		

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

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

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

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

## Appendix VII: County Health Rankings

	Allen County	Ohio	U.S.
<b>Health Outcomes</b>			
<b>Premature death.</b> Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2012-2014)	7,100	7,600	6,600
<b>Overall health.</b> Percentage of adults reporting fair or poor health (age-adjusted) (2015)	17%	15%	15%
<b>Physical health.</b> Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2015)	4.0	3.7	3.6
<b>Mental health.</b> Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2015)	4.0	4.0	3.7
<b>Maternal and infant health.</b> Percentage of live births with low birthweight (< 2500 grams) (2008-2014)	8%	9%	8%
<b>Health Behaviors</b>			
<b>Tobacco.</b> Percentage of adults who are current smokers (2015)	20%	22%	18%
<b>Obesity.</b> Percentage of adults that report a BMI of 30 or more (2013)	35%	31%	28%
<b>Food environment.</b> Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2014)	6.9	7.0	7.3
<b>Physical activity.</b> Percentage of adults aged 20 and over reporting no leisure-time physical activity (2013)	31%	25%	22%
<b>Active living environment.</b> Percentage of population with adequate access to locations for physical activity (2010 & 2014)	80%	83%	84%
<b>Drug and alcohol abuse.</b> Percentage of adults reporting binge or heavy drinking (2015)	16%	19%	18%
<b>Drug and alcohol abuse and injury.</b> Percentage of driving deaths with alcohol involvement (2011-2015)	31%	34%	30%
<b>Infectious disease.</b> Number of newly diagnosed chlamydia cases per 100,000 population (2014)	567	474	456:1
<b>Sexual and reproductive health.</b> Teen birth rate per 1,000 female population, ages 15-19 (2008-2014)	43	32	32

	Allen County	Ohio	U.S
<b>Clinical Care</b>			
<b>Coverage and affordability.</b> Percentage of population under age 65 without health insurance (2014)	10%	10%	14%
<b>Access to health care/medical care.</b> Ratio of population to primary care physicians (2014)	1,270:1	1300:1	1,320:1
<b>Access to dental care.</b> Ratio of population to dentists (2015)	1,770:1	1692:1	1,520:1
<b>Access to behavioral health care.</b> Ratio of population to mental health providers (2016)	780:1	633:1	500:1
<b>Hospital utilization.</b> Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2014)	67	60	50
<b>Diabetes.</b> Percentage of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring (2014)	86%	85%	85%
<b>Cancer.</b> Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2014)	59%	61%	63%
<b>Social and Economic Environment</b>			
<b>Education.</b> Percentage of ninth-grade cohort that graduates in four years (2014-2015)	82%	81%	83%
<b>Education.</b> Percentage of adults ages 25-44 years with some post-secondary education (2011-2015)	61%	64%	64%
<b>Employment, poverty, and income.</b> Percentage of population ages 16 and older unemployed but seeking work (2015)	5%	5%	5%
<b>Employment, poverty, and income.</b> Percentage of children under age 18 in poverty (2015)	23%	21%	21%
<b>Employment, poverty, and income.</b> Ratio of household income at the 80th percentile to income at the 20th percentile (2011-2015)	4.6	4.8	5.0
<b>Family and social support.</b> Percentage of children that live in a household headed by single parent (2011-2015)	42%	36%	34%
<b>Family and social support.</b> Number of membership associations per 10,000 population (2015)	16.0	11.3	9
<b>Violence.</b> Number of reported violent crime offenses per 100,000 population (2012-2014)	435	290	380
<b>Injury.</b> Number of deaths due to injury per 100,000 population (2011-2015)	55	70%	62

	Allen County	Ohio	U.S.
<b>Physical Environment</b>			
<b>Air, water, and toxic substances.</b> Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2012)	11.4	11.3	8.7
<b>Air, water, and toxic substances.</b> Indicator of the presence of health-related drinking water violations. 1 - indicates the presence of a violation, 0 - indicates no violation (FY 2013-2014)	Yes	N/A	N/A
<b>Housing.</b> Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (2009-2013)	15%	15%	19%
<b>Transportation.</b> Percentage of the workforce that drives alone to work (2011-2015)	87%	83%	76%
<b>Transportation.</b> Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2011-2015)	17%	30%	34%

*\*Source: 2017 County Health Rankings for Allen County, Ohio and U.S. data  
N/A – Not available*

## Appendix VIII: Qualitative Data

**Community Conversations:** The United Way of Greater Lima conducted community conversations with nine groups during the months of January-May 2017. The groups included clients of the West Ohio Food Bank, Head Start parents, senior public housing residents, a labor group, a young professional group, recovering heroin addicts, and a church group. The breakdown the 87 total participants included:

### Sex

Women- (n=47)

Men- (n=40)

### Race/Ethnicity

White- (n=50)

Black- (n=36)

Latino- (n=1)

### **Community Issues**

Participants were asked to talk about community issues they were concerned about. Common themes among the participants included the following: lack of unity, crime, blight, drugs, jobs that pay a livable wage, youth not staying in the community, safety, bullying, gun violence, job training for youth, lack of things for families and youth to do, transportation for all shifts, daycare, handicap accessible streets and buildings, affordable housing and senior housing, re-entry opportunities for ex-offenders, teen pregnancy, and lack of diversity on community committees and coalitions.

### **Health Concerns**

In the process of talking about the community, participants also talked about health concerns. Common themes included the following: affordable health care, diabetes, air quality, obesity in adults and children, sexually transmitted diseases, HIV/AIDS, Hepatitis C, high blood pressure, general illness, mental health and depression, addiction, asthma and respiratory Issues, inactivity, nutrition/inability to cook, and healthcare inequality.

### **Solutions**

Participants talked about possible solutions. Below are quotes from the conversations:

*"Change begins with us in a community."*

*"We need more than stakeholders. We need the people at the community level, living in the community to be making decisions about social issues and crime. Only they have a real feel for what is causing it. I feel that it is at the grassroots. We need to have the folks that are in it and with it every day. We need to ask them. We need to talk with them."*

*"You have to be willing to understand and only by walking in their shoes (quoted T.D. Jakes). It's a huge undertaking."*

*"I feel like there are a lot of resources...I didn't know about...I go to Coleman down the street, there are all these helpful things that I didn't know about. You don't know about the help that is available. There are no advertisement of services. How do you find out about what out there that can help you?"*

*"We need to stop with arguing about who is right and who is wrong and focus on how we can make it work. Then you get people who will come together and all work together."*

Community Health Assessment Topic/Health Concern	Quotes from Community Conversations
Health Care Coverage	<p><i>"Sometimes making co-pays is difficult."</i></p> <p><i>"Often, I cut ...[medicine] in half – I take half one day and half the next."</i></p>
Health Care Access	<p><i>"There aren't enough places that provide enough care – especially if you don't have health care."</i></p> <p><i>"Diabetics are going around without their meds because there is not a healthcare card. They end up cycling into the emergency room which just costs everyone."</i></p> <p><i>"Society chooses between an addict getting a 'pen' and a working adult that cannot get 'a pen.' If you are working class you lose – these kinds of things don't make sense. Little kids didn't make bad choices and they can't get what they need. Drug addicts get free drugs but a small child cannot get an epi-pen for their allergy?"</i></p> <p><i>"When you don't buy your medicine after 1 ½ to 2 weeks, the symptoms reappear – sometimes I can't drive."</i></p>
Diet/Nutrition	<p><i>"Obesity in children –it's at an all time high in kids being overweight and diabetic. That is the lifestyle that this generation has. They play video (games), eat fast food, they don't go out and play anymore... I learned that [kids] lifespan will be shorter than ours for the first time in history. To think that my grandkids will not reach 50, 60, 70 years old because of unhealthy habits. I think it is something that parents should be really concerned about."</i></p> <p><i>"A lot of adults don't know how to cook now. They can't even make spaghetti."</i></p>
Mental Health and Substance Abuse	<p><i>"I think that there is a lot of depression."</i></p> <p><i>"People automatically judge you and think that you are a drug addict. They are so rude, they will pull you over and search your car. "</i></p>
Quality of Life	<p><i>"Appearances are deceiving – we are constantly juggling. We have to learn to spend at the level at which we are. We have to live within our means."</i></p>
Social Determinants and Context	<p><i>"The landlord is there just to collect the money and not to take care of the properties. Most of the houses are not properly kept. How do we keep landlords accountable?"</i></p> <p><i>"There may be a couple days a month where I just eat bouillon because I cannot afford what I need."</i></p>

United Way of Greater Lima, 2017