Geauga County

COMMUNITY HEALTH STATUS ASSESSMENT

2016

Examining the Health of Geauga County

Released on: June 29, 2017

FOREWORD

The Partnership for a Healthy Geauga is pleased to present the 2016 Geauga County Community Health Assessment. This report provides a snapshot of the health of our community that was collected in two separate surveys, including children ages 0 to 11-years and adults ages 18-years and older. Wherever possible, local findings have been compared to other local, regional, state, and national data.

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

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

This report would not exist without the financial support of many public and private agencies, as well as the dedicated work of planning partners who took the time to carefully plan and carry out the assessment. Special thanks are given to Britney Ward and Emily Golias of the Hospital Council of Northwest Ohio for guiding us through the health assessment process.

It is our intent to periodically repeat this process in an effort to measure improvements and identify emerging issues in population health. It is also our hope that this assessment will stimulate new collaborations among public and private agencies during economically challenging times.

Sincerely,

The Partnership for a Healthy Geauga

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Arthritis Foundation of NE Ohio Berkshire Local School District

Big Brothers Big Sisters

Cardinal Local School District

Carmella Rose

CASA for KIDS of Geauga County Catholic Charities Community Services Chagrin Falls Park Community Center Chardon Community Action Team

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Middlefield Care Center

NAMI Geauga

Ohio Department of Health

Ravenwood Mental Health Center

Starting Point

United Way Services of Geauga County

University Hospitals - Geauga Medical

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WomenSafe, Inc.

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To see Geauga 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 2016 Geauga County Health Assessment is available on the following websites:

Geauga County Health District

www.geaugacountyhealth.org

Hospital Council of Northwest Ohio

www.hcno.org/community/reports.html

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EXECUTIVE SUMMARY

This executive summary provides an overview of health-related data for Geauga County adults (19 years of age and older) and children (ages 0-11) who participated in a county-wide health assessment survey during September through November 2016. 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), as well as the National Survey of Children's Health (NSCH) developed by the Child and Adolescent Health Measurement Initiative. The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

Primary Data Collection Methods

DESIGN

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

INSTRUMENT DEVELOPMENT

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

The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Geauga County. During these meetings, banks of potential survey questions from the BRFSS and NSCH surveys were reviewed and discussed. Based on input from the Geauga County planning committee, the Project Coordinator composed drafts of surveys containing 115 items for the adult survey and 70 items for the child survey. The drafts were reviewed and approved by health education researchers at the University of Toledo.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and over living in Geauga County. There were 67,862 persons ages 19 and over living in Geauga County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding 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. The random sample of mailing addresses of adults from Geauga County was obtained from Allegra Marketing Services in Louisville, KY.

SAMPLING | 0-11 Survey

Children ages 0-11 residing in Geauga County were used as the sampling frame for the child surveys. Using U.S. Census Bureau data, it was determined that 14,854 children ages 0-11 reside in Geauga County. The investigators conducted a power analysis based on a post-hoc distribution of variation in responses (70/30 split) to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error). Because many of the items were identical between the 0-5 and 6-11 surveys, the responses were combined to analyze data for children 0-11. The sample size required to generalize to children ages 0-11 was 374. The random sample of mailing addresses of parents of children 0-11 from Geauga County was obtained from Allegra Marketing Services in Louisville, KY.

PROCEDURE | Adult Survey

Prior to mailing the survey, an advance letter was mailed to 1,200 adults in Geauga County. This advance letter was personalized, printed on Partnership for a Healthy Geauga stationery, and signed by Robert K. Weisdack, Health Commissioner of Geauga County Health District. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

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 Partnership for a Healthy Geauga stationery) describing the purpose of the study, a questionnaire printed on white paper, 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 on white paper, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the mailing was 40% (n=456: $Cl=\pm$ 4.57). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

PROCEDURE | Children 0-5 and 6-11

Prior to mailing the survey to parents of 0-11 year olds, an advance letter was mailed to 2,400 parents in Geauga County. This advance letter was personalized, printed on Partnership for a Healthy Geauga stationery, and signed by Robert K. Weisdack, Health Commissioner of Geauga County Health District. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

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 Partnership for a Healthy Geauga stationery) describing the purpose of the study, a questionnaire printed on white paper, 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 parents to reply, another copy of the questionnaire on white paper, 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 was 23% (n=430: Cl=± 4.66).

DATA ANALYSIS

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using SPSS 23.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Geauga County, the adult data collected was weighted by age, gender, race, and income using 2010 Census data. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix III.

LIMITATIONS

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Geauga County adult assessment had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Geauga County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

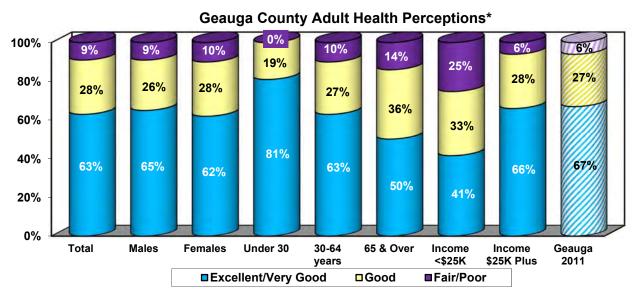
It is also important to note that, although several questions were asked using the same wording as the CDC questionnaires and the NSCH questionnaire, the adult and parent data collection method differed. CDC adult data and NSCH child data were collected using a set of questions from the total question bank, and adults were asked the questions over the telephone rather than through a mailed survey. Additionally, the Amish community is considered a difficult-to-reach population and certain data points may not appropriately reflect specific health indicators within that demographic.

Finally, this survey asked parents questions regarding their young children. Should enough parents had felt compelled to respond in a socially desirable manner inconsistent with reality, this would represent a threat to the internal validity of the results.

Data Summary

HEALTH PERCEPTIONS

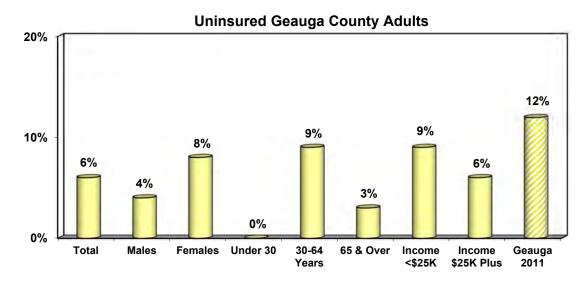
In 2016, almost two-thirds (63%) of Geauga County adults rated their health status as excellent or very good. Conversely, 9% of adults described their health as fair or poor. That percentage increased to 25% of those with incomes less than \$25,000.



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

HEALTH CARE COVERAGE

The 2016 health assessment data has identified that 6% of Geauga County adults were without health care coverage. Those most likely to be uninsured were adults ages 30-64 and those with an income level under \$25,000. In Geauga County, 7.5% of residents live below the poverty level (Source: U.S. Census, American Community Survey 5 Year Estimate, 2011-2015).



HEALTH CARE ACCESS

The 2016 health assessment identified that 59% of Geauga County adults had visited a doctor for a routine checkup in the past year. Seventy-four percent (74%) of adults went outside of Geauga County for health care services in the past year.

CARDIOVASCULAR HEALTH

Four percent (4%) of adults had survived a heart attack and 2% had survived a stroke at some time in their life. More than one-third (36%) of Geauga County adults had high blood cholesterol, 27% were obese, 27% had high blood pressure, and 10% were smokers, four known risk factors for heart disease and stroke. Heart disease (25%) and stroke (4%) accounted for 29% of all Geauga County adult deaths from 2013-2015 (Source: CDC Wonder, 2013-2015).

CANCER

In 2016, 13% of Geauga 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, cancers caused 22% of all Geauga County resident deaths. The American Cancer Society advises that avoiding tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages, and early detection may reduce overall cancer deaths.

Geauga County Leading Causes of Death 2013-2015

Total Deaths: 2,399

- 1. Heart Disease (25% of all deaths)
- 2. Cancer (22%)
- 3. Chronic Lower Respiratory Diseases (6%)
- 4. Accidents, Unintentional Injuries (5%)
- 5. Stroke (4%)

(Source: CDC Wonder, 2013-2015)

Geauga County Incidence of Cancer, 2009-2013

All Types: 2,607 cases

- Breast: 413 cases (16%)
- Prostate: 339 cases (13%)
- Lung and Bronchus: 318 cases (12%)
- Colon and Rectum: 227 cases (9%)

From 2011-2015, there were 533 cancer deaths in Geauga County.

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

DIABETES

In 2016, 9% of Geauga County adults had been diagnosed with diabetes, and 5% were diagnosed with pre-diabetes.

ARTHRITIS

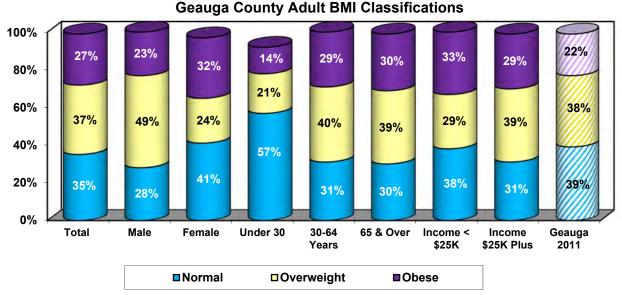
According to the Geauga County survey data, 31% of adults were diagnosed with arthritis. The 2015 BRFSS indicates that 28% of Ohio adults and 25% of U.S. adults were told they have arthritis.

ASTHMA

In 2016, 14% of adults had been diagnosed with asthma.

ADULT WEIGHT STATUS

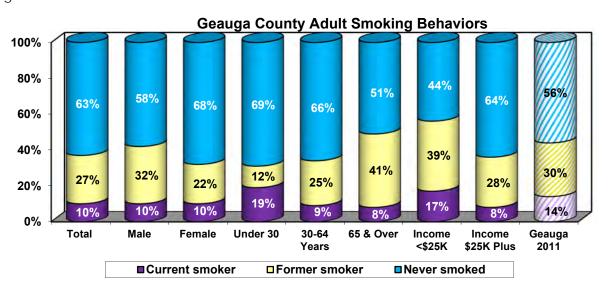
The 2016 health assessment identified that 64% of Geauga County adults were overweight (37%) or obese (27%) based on Body Mass Index (BMI). The 2015 BRFSS indicates that 30% of Ohio and 30% of U.S. adults were obese as measured by BMI. Nine percent (9%) of adults at 5 or more servings of fruits and vegetables per day.



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

ADULT TOBACCO USE

In 2016, 10% of Geauga County adults were current smokers, and 27% 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.



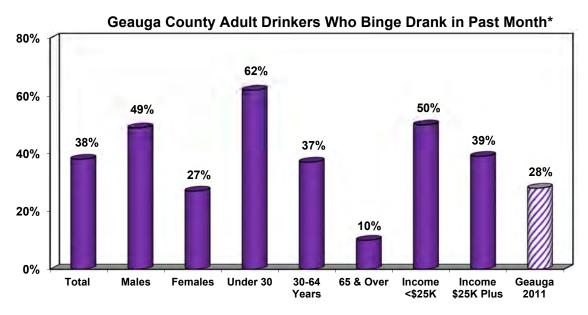
Respondents were asked:

"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?"

ADULT ALCOHOL CONSUMPTION

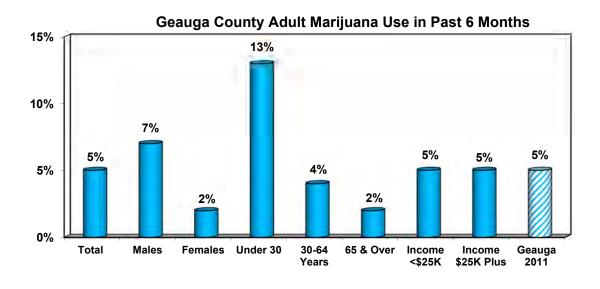
In 2016, the health assessment indicated that 38% of adults who drank engaged in binge drinking (defined as five or more drinks for males or four or more drinks for females at one sitting) in the last month. Five percent (5%) of adults reported they drove despite believing they may have had too much to drink.



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

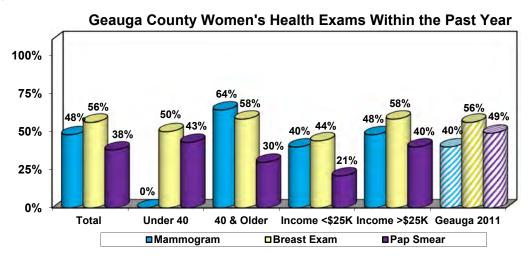
ADULT DRUG USE

In 2016, 5% of Geauga County adults had used marijuana during the past 6 months. Five percent (5%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.



WOMEN'S HEALTH

In 2016, nearly two-thirds (64%) of Geauga County women over the age of 40 reported having a mammogram in the past year. Fifty-six percent (56%) of Geauga County women ages 19 and over had a clinical breast exam, and 38% had a pap smear to detect cancer of the cervix in the past year. Four percent (4%) of women survived a heart attack and 2% survived a stroke at some time in their life. Nearly one-third (32%) were obese, 35% had high blood cholesterol, 25% had high blood pressure, and 10% were identified as smokers, all known risk factors for cardiovascular diseases.



MEN'S HEALTH

In 2016, 45% of Geauga County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. The health assessment determined that 6% of men survived a heart attack and 2% survived a stroke at some time in their life. More than one-fourth (28%) of men had been diagnosed with high blood pressure, 35% had high blood cholesterol, and 10% were identified as smokers, which, along with obesity (23%), are known risk factors for cardiovascular diseases. Major cardiovascular diseases (heart disease and stroke) accounted for 29% and cancers accounted for 24% of all male deaths in Geauga County from 2013-2015 (Source: CDC Wonder, 2013-2015).

PREVENTIVE MEDICINE AND DISASTER PREPAREDNESS

In the past year, more than four-fifths (83%) of adults ages 65 and over had a flu vaccine. More than half (54%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past five years. Sixty percent (60%) of Geauga County adults had a 3-day supply of nonperishable food for everyone in the household.

ADULT SEXUAL BEHAVIOR

In 2016, more than two-thirds (68%) of Geauga County adults had sexual intercourse. Two percent (2%)of adults had more than one partner. 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, 2016 STD Surveillance).

QUALITY OF LIFE

In 2016, 28% of Geauga County adults were limited in some way because of a physical, mental or emotional problem.

SOCIAL DETERMINANTS OF HEALTH

In 2016, 7% of Geauga County adults were abused in the past year (including physical, sexual, emotional, financial, and verbal abuse). Nearly half (48%) of adults reported having firearms in or around their homes.

MENTAL HEALTH AND SUICIDE

In 2016, 3% of Geauga County adults considered attempting suicide. Eleven percent (11%) of adults rated their daily stress level as high or very high.

ORAL HEALTH

Nearly four-fifths (79%) of Geauga County adults had visited a dentist or dental clinic in the past year. The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.

CHILD HEALTH AND FUNCTIONAL STATUS

In 2016, 96% of Geauga County parents of 0-11 year olds rated their child's health as excellent or very good. Thirty-three percent (33%) of children were classified as obese by Body Mass Index (BMI) calculations. Eighty-three percent (83%) of parents had taken their child ages 2-11 to the dentist in the past year. Twelve percent (12%) of parents reported their child had been diagnosed with asthma.

CHILD HEALTH INSURANCE, ACCESS & UTILIZATION

In 2016, 1% of Geauga County parents reported their 0-11 year old did not have health insurance. Eighty-seven (87%) of parents reported they had one or more person they think of as their child's personal doctor or nurse. Twenty-nine percent (29%) of parents reported at least one emergency room visit due to accidents, injury or poisonings.

EARLY CHILDHOOD (0-5 YEARS OLD)

The following information was reported by parents of 0-5 year olds. Seventy-seven percent (77%) of mothers received prenatal care within the first three months during their last pregnancy. Sixty-one percent (61%) of parents put their child to sleep on his or her back. Seventeen percent (17%) of mothers never breastfed their child.

MIDDLE CHILDHOOD (6-11 YEARS OLD)

The following information was reported by Geauga County parents of 6-11 year olds. In 2016, 77% of Geauga County parents reported their child always felt safe at school. Nine percent (9%) of parents reported their child was bullied at some time in the past year. Twenty-one percent (21%) of parents reported their child had an email or a social network account.

FAMILY FUNCTIONING, NEIGHBORHOOD AND COMMUNITY CHARACTERISTICS

In 2016, 35% of parents reported that every family member who lived in their household ate a meal together every day of the week. Nineteen percent (19%) of parents reported they or someone in the family reads to their child every day.

PARENT HEALTH

In 2016, 91% of parents rated their health as excellent or very good. Parents missed work an average of 0.7 days per year due to their child being ill or injured.

Adult I TREND SUMMARY

Adult Variables	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Health Status an	d Coverage			
Rated health as excellent or very good	67%	63%	52%	52%
Rated general health as fair or poor	6%	9%	17%	16%
Rated their mental health as not good on four or more days in the previous month	18%	28%	N/A	N/A
Average days that physical health not good in past month	N/A	3.8	4.0**	3.8**
Average days that mental health not good in past month	N/A	4.8	4.3**	3.7**
Uninsured	12%	6%	8%	11%
Diabe	tes			T
Has been diagnosed with diabetes	6%	9%	11%	10%
Asthm	na			T
Has been diagnosed with asthma	12%	14%	14%	14%
Arthri				
Has been diagnosed with arthritis	34%	31%	28%	25%
Cardiovascu		201	404	1
Had angina	N/A	3%	4%	4%
Had a heart attack	2%	4%	5%	4%
Had a stroke	2%	2%	4%	3%
Has been diagnosed with high blood pressure	30%	27%	34%	31%
Has been diagnosed with high blood cholesterol	36%	36%	37%	36%
Had blood cholesterol checked within the past 5 years	N/A	86%	78%	78%
Weight S				
Overweight	38%	37%	37%	36%
Obese Alaskal Con	22%	27%	30%	30%
Alcohol Con	65%	69%	53%	54%
Had at least one alcoholic beverage in past month Binged in past month (5 or more drinks in a couple of hours	03%	09%	3376	34%
on an occasion)	18%	26%	18%	16%
Tobacco		100/	220/	100/
Current smoker (currently smoke some or all days)	14%	10%	22%	18%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	30%	27%	24%	25%
Drug L	lse			
Adults who used marijuana in the past 6 months	5%	5%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	5%	5%	N/A	N/A
Preventive N	/ledicine			
Had a pneumonia vaccine (age 65 and older)	N/A	81%	72%	73%
Had a flu vaccine in the past year (ages 65 and over)	41%	83%	58%	61%
Had a mammogram in the past two years (age 40 and older)	77%	78%	72%*	73%*
Had a pap smear in the past three years	N/A	69%	74%*	75%*
Quality of	of Life			<u> </u>
Limited in some way because of physical, mental or emotional problem	N/A	28%	21%	21%
Mental H				_
Considered attempting suicide in the past year	2%	3%	N/A	N/A
Oral He			,	
Adults who have visited the dentist in the past year	68%	79%	65%*	65%*

N/A - Not Available

^{*2014} BRFSS data

^{**2014} BRFSS data as compiled by County Health Rankings

Child I TREND SUMMARY

Child Comparisons	Geauga County 2011 Ages 0-5	Geauga County 2016 Ages 0-5	Ohio 2011/12 Ages 0-5	U.S. 2011/12 Ages 0-5	Geauga County 2011 Ages 6-11	Geauga County 2016 Ages 6-11	Ohio 2011/12 Ages 6-11	U.S. 2011/12 Ages 6-11
Health and Functional Status								
Rated health as excellent or very good	96%	96%	89%	86%	96%	96%	86%	83%
Dental care visit in past year	45%	63%	50%	54%	77%	85%	92%	88%
Diagnosed with asthma	6%	10%	6%	6%	11%	12%	10%	10%
Diagnosed with ADHD/ADD	1%	0%	N/A	2%*	10%	7%	12%	9%
Diagnosed with behavioral or conduct problems	4%	1%	N/A	2%*	4%	2%	5%	4%
Diagnosed with vision problems that cannot be corrected	3%	1%	N/A	<1%	2%	3%	N/A	2%
Diagnosed with bone, joint, or muscle problems	2%	3%	N/A	1%	2%	5%	N/A	2%
Diagnosed with epilepsy	2%	3%	N/A	<1%	1%	2%	N/A	1%
Diagnosed with a head injury	2%	1%	N/A	<1%	3%	4%	N/A	<1%
Diagnosed with diabetes	1%	1%	N/A	N/A	<1%	1%	N/A	<1%
Diagnosed with depression	1%	1%	N/A	<1%*	2%	3%	N/A	2%
Never breastfed their child	N/A	17%	29%	21%	N/A	N/A	N/A	N/A
Hea	Ith Care Co	verage, Ad	ccess and	Utilization				
Had public insurance	8%	17%	40%	44%	8%	5%	34%	37%
Have a personal doctor or nurse	79%	88%	91%	91%	81%	87%	93%	90%
Family Function	ning, Neighl	oorhood a	nd Comm	unity Char	acteristics			
Parent reads to child everyday	35%	44%	53%	48%	13%	12%	N/A	N/A
Family eats a meal together every day of the week	38%	43%	63%	61%	15%	33%	45%	47%
Child never attends religious services	27%	28%	N/A	N/A	18%	29%	22%	18%
Middle Childhood (6-11 Year Olds)								
Parent felt child was usually/always safe at school	N/A	N/A	N/A	N/A	98%	99%	96%	94%
NA III		Parent He	alth	1				
Mother's mental or emotional health is fair/poor	2%	20%	7%	7%	5%	12%	10%	8%
Father's mental or emotional health is fair/poor N/A = Not available	13%	24%	N/A	3%	2%	14%	7%	5%

N/A - Not available

*Ages 2-5

Adult | **HEALTH STATUS PERCEPTIONS**

Key Findings

In 2016, almost two-thirds (63%) of Geauga County adults rated their health status as excellent or very good. Conversely, 9% of adults described their health as fair or poor. That percentage increased to 25% of those with incomes less than \$25,000.

Adults Who Rated General Health Status Excellent or Very Good

- Geauga County 63% (2016)
- Ohio 52% (2015)
- U.S. 52% (2015)

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

General Health Status

- In 2016, almost two-thirds (63%) of Geauga County adults rated their health as excellent or very good. Geauga County adults with higher incomes (66%) were most likely to rate their health as excellent or very good, compared to 41% of those with incomes less than \$25,000.
- Nine percent (9%) 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.
- Adults were most likely to rate their health as fair or poor if they:
 - Had an annual household income under \$25,000 (25%)
 - Were separated (25%) or divorced (23%)
 - Had been diagnosed with diabetes (22%)
 - Had high blood pressure (17%) or high blood cholesterol (11%)
 - Were 65 years of age or older (14%)

Physical Health Status

- In 2016, 19% of adults rated their physical health as not good on four or more days in the previous month.
- Adults reported their physical health as not good on an average of 3.8 days in the previous month. Ohio and U.S. adults reported their physical health as not good on an average of 4.0 days and 3.8 days, respectively, in the previous month (Source: 2014 BRFSS).
- Adults were most likely to rate their physical health as not good if they:
 - Had an annual household income under \$25,000 (36%)
 - Were 65 years of age or older (26%)

Mental Health Status

- In 2016, 28% of adults rated their mental health as not good on four or more days in the previous month.
- Adults reported their mental health as not good on an average of 4.8 days in the previous month. Ohio and U.S. adults reported their mental health as not good on an average of 4.3 days and 3.7 days, respectively, in the previous month (Source: 2014 BRFSS).
- More than one-fifth (21%) of adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.
- Adults were most likely to rate their mental health as not good if they:
 - Had an annual household income under \$25,000 (35%)
 - Were female (34%)
 - Were under the age of 30 (33%)

The following graph shows the percentage of Geauga County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 63% of all Geauga County adults, 81% of those under age 30, and 50% of those ages 65 and older rated their health as excellent or very good. The table shows the percentage of adults with poor physical and mental health in the past 30 days. Geauga County Adult Health Perceptions* 0% 100% 6% 10% 9% 9% 10% 14% 19% 25% 28% 27% 80% 26% 28% 28% 27% 36% 60% 33%

81% 40% 63% 65% 63% 66% 62% 50% 41% 20%

■Excellent/Very Good □Good ■Fair/Poor

65 & Over

Income

<\$25K

Income

\$25K Plus

Geauga

2011

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

30-64

years

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
	Physical Hea	alth Not Good	in Past 30 Days	S*	
Males	59%	22%	2%	2%	13%
Females	53%	22%	6%	2%	13%
Total	57%	22%	4%	2%	13%
	Mental Hea	Ith Not Good in	n Past 30 Days	*	
Males	54%	22%	4%	4%	15%
Females	49%	12%	8%	4%	21%
Total	52%	17%	7%	4%	17%

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

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Rated health as excellent or very good	67%	63%	52%	52%
Rated health as fair or poor	6%	9%	17%	16%
Rated their mental health as not good on four or more days in the previous month	18%	28%	N/A	N/A
Average days that physical health not good in past month	N/A	3.8	4.0*	3.8*
Average days that mental health not good in past month	N/A	4.8	4.3*	3.7*

N/A - Not Available

0%

Total

Males

Females

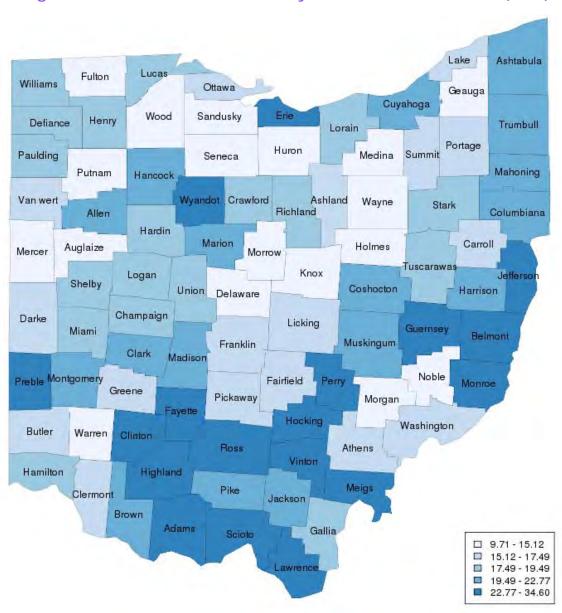
Under 30

^{*2014} BRFSS data as compiled by County Health Rankings

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

- Nine percent (9%) of Geauga County adults, ages 19 years and older, rated their overall health as fair/poor.
- Eighteen prevent (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)

Adult | HEALTH CARE COVERAGE

The 2016 health assessment data has identified that 6% of Geauga County adults were without health care coverage. Those most likely to be uninsured were adults ages 30-64 and those with an income level under \$25,000. In Geauga County, 7.5% of residents live below the poverty level (Source: U.S. Census, American Community Survey 5 Year Estimate, 2011-2015).

General Health Coverage

Key Findings

- In 2016, 94% of Geauga County adults had health care coverage, leaving 6% who were uninsured. The 2015 BRFSS reported uninsured prevalence rates as 8% for Ohio and 11% for the U.S.
- In the past year, 6% of adults were uninsured, increasing to 9% of those with incomes less than \$25,000 and those ages 30-64.
- Six percent (6%) of adults with children did not have healthcare coverage, compared to 4% of those who did not have children living in their household.
- The following types of health care coverage were used: employer (39%), someone else's employer (20%), Medicare (18%), self-paid plan (9%), Medicaid or medical assistance (7%), multiple-including private sources (4%), Health Insurance Marketplace (1%), military or VA (1%), and multiple-including government sources (1%).

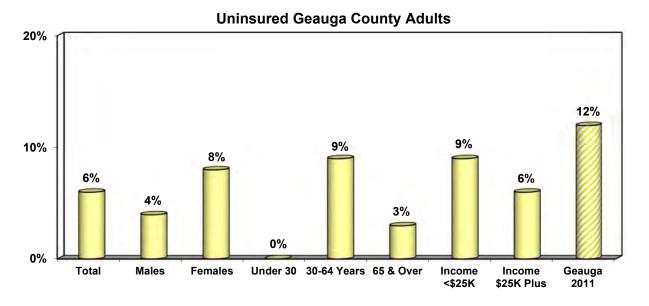
6% of Geauga County adults were uninsured.

- Adult health care coverage included the following: medical (97%), prescription coverage (92%), immunizations (84%), health (81%), outpatient therapy (75%), dental (69%), mental health (66%), vision (59%), alcohol and drug treatment (45%), durable medical equipment (45%), skilled nursing (30%), home care (27%), hospice (24%), and transportation (14%).
- The top reasons uninsured adults gave for being without health care coverage were:
 - 1. They lost their job or changed employers (58%)
 - 2. They could not afford to pay the premiums (19%)
 - 3. They became a part-time or temporary employee (16%)

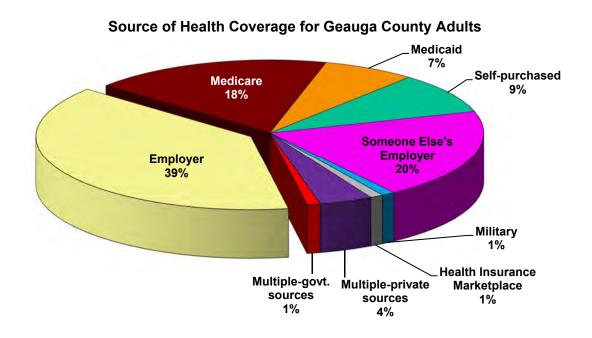
(Percentages do not equal 100% because respondents could select more than one reason)

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Uninsured	12%	6%	8%	11%

The following graph shows the percentages of Geauga County adults who were uninsured by demographic characteristics. Examples of how to interpret the information in the graph include: 6% of all Geauga County adults were uninsured: 9% of adults with an income less than \$25,000 and 9% of those ages 30-64. The pie chart shows sources of Geauga County adults' health care coverage.



9% of Geauga County adults with incomes less than \$25,000 were uninsured.



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

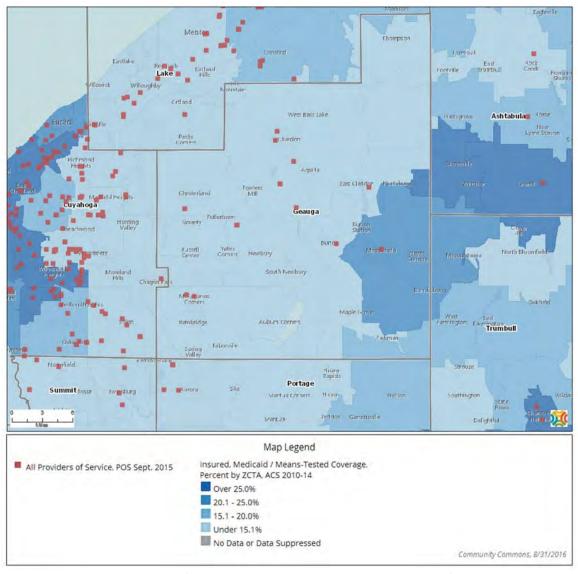
Health Coverage Includes:	Yes	No	Don't Know
Medical	97%	1%	2%
Prescription Coverage	92%	6%	2%
Immunizations	84%	3%	12%
Preventive Health	81%	3%	16%
Outpatient Therapy	75%	2%	23%
Dental	69%	29%	2%
Mental Health	66%	2%	32%
Vision	59%	34%	7%
Alcohol and Drug Treatment	45%	4%	51%
Durable Medical Equipment	45%	3%	52%
Skilled Nursing	30%	5%	65%
Home Care	27%	7%	65%
Hospice	24%	5%	71%
Transportation	14%	23%	63%

Healthy People 2020 Access to Health Services (AHS)

Objective	Geauga County 2016	Ohio 2015	U.S. 2015*	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health care insurance	100% age 20-24 100% age 25-34 94% age 35-44 90% age 45-54 89% age 55-64	84% age 18-24 88% age 25-34 89% age 35-44 93% age 45-54 93% age 55-64	76% age 18-24 74% age 25-34 80% age 35-44 84% age 45-54 87% age 55-64	100%

Note: U.S. baseline is age-adjusted to the 2000 population standard (Sources: Healthy People 2020 Objectives, 2014 BRFSS, 2016 Geauga County Health Assessment) *2013 BRFSS Data. The 2015 U.S. BRFSS is not able to be broken down by age.

Insured, Medicaid/Means-Tested coverage, Percent by Tract, ACS 2009-13



(Source: Community Commons. Updated 8-31-2016)

Ohio Medicaid Assessment Survey

- Half of Ohio's adult Medicaid enrollees or their spouses work, and another 30 percent are individuals living with disabilities.
- Ohio's uninsured rate has been cut in half, from 17.3 percent in 2012 to 8.7 percent in 2015.
- The rate of uninsured children in Ohio also has been cut in half, from 4.7 percent in 2012 to 2.0 percent in 2015. Medicaid eligibility for children has not changed, but aggressive enrollment efforts have resulted in Medicaid covering 46.1 percent of insured children, up from 42 percent in 2012.
- The rate of employer-sponsored insurance has remained constant since 2010, with nearly 55 percent of Ohioans covered through an employer.

(Source: Office of Health Transformation, Extend Medicaid Coverage and Automate Enrollment, 8/19/2015)

Adult | HEALTH CARE ACCESS AND UTILIZATION

Key Findings

The 2016 health assessment identified that 59% of Geauga County adults had visited a doctor for a routine checkup in the past year. Seventy-four percent (74%) of adults went outside of Geauga County for health care services in the past year.

Health Care Access

- Nearly three-fifths (59%) of Geauga County adults visited a doctor for a routine checkup in the past year, increasing to 82% of those over the age of 65.
- More than half (54%) of adults reported they had one person they thought of as their personal doctor or healthcare provider. Thirty-four

How does Lack of Insurance Affect Access to Health Care?

- Uninsured people are far more likely than those with insurance to report problems getting needed medical care.
- Uninsured people are less likely than those with coverage to receive timely preventive care.
- Anticipating high medical bills, many uninsured people are not able to follow recommended treatments.
- Because people without health coverage are less likely than those with insurance to have regular outpatient care, they are more likely to be hospitalized for avoidable health problems and experience declines in their overall health.
- Lack of health coverage, even for short periods of time, results in decreased access to care.

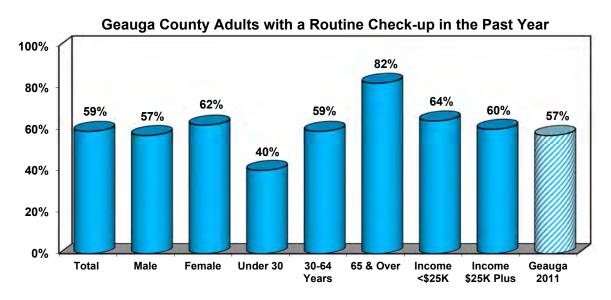
(Source: The Henry Kaiser Family Foundation, How Does Lack of Insurance Affect Access to Health Care?. 2013)

percent (34%) of adults had more than one person they thought of as their personal healthcare provider, and 9% did not have one at all.

- Adults visited the following places for health care services or advice: doctor's office (61%), multiple places including a doctor's office (12%), family and friends (5%), Internet (5%), urgent care center (3%), chiropractor (2%), hospital emergency room (1%), in-store health clinic (1%), public health clinic or community health center (1%), Department of Veteran's Affairs (VA) (<1%), and some other place (1%). Nine percent (9%) of adults indicated they had no usual place for health care services.
- Seven percent (7%) of adults indicated there was a time in the past year they needed to see a doctor but could not do so because of cost, increasing to 18% of those with incomes less than \$25,000.
- The following might prevent adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (24%); difficult to get an appointment (15%); high deductible (13%); inconvenient hours (10%); could not get time off work (9%); doctor would not take their insurance (5%); worried they might find something wrong (4%); difficult to find/no transportation (3%); frightened of the procedure or doctor (2%); do not trust or believe doctors (2%); could not find childcare (1%); and some other reason (3%).
- Adults did not get the following major or preventive care because of cost: colonoscopy (5%), mammogram (5%), medication (4%), pap smear (4%), surgery (4%), lab testing (3%), weight loss program (3%), immunizations/vaccinations (2%), mental health services (2%), family planning services (1%), PSA test (1%), alcohol/drug treatment (<1%), and smoking cessation (<1%).

- Almost three-quarters (74%) of adults went outside of Geauga County for the following health care services in the past year: dental services (43%), specialty care (36%), primary care (34%), obstetrics/gynecology/NICU (10%), cardiac care (8%), orthopedic care (7%), pediatric care (6%), mental health care/counseling services (5%), cancer care (2%), addiction services (1%), pediatric care/therapies (1%), hospice/palliative care (<1%), and other services (6%).
- More than one-fourth (26%) of adults did not get their prescriptions from their doctor filled in the past year, increasing to 50% of those without prescription coverage.
- Those who did not get their prescriptions filled gave the following reasons: no prescriptions to be filled (56%), too expensive/out-of-pocket costs too high (27%), they did not think they needed it (17%), side effects (10%), they stretched their current prescription by taking less than prescribed (10%), there was no generic equivalent (8%), transportation (5%), they were taking too many medications (4%), they did not have insurance (3%), and fear of addiction (1%).
- Adults over the age of 65 understood the following Medicare options available to them: Medicare (33%), Medicare Advantage plan (9%), Medicare Part D drug program (3%), and My Care/Care Source (2%). Nearly one-third (32%) understood multiple options available to them, and 21% understood none of the Medicare options available to them.

The following graph shows the percentage of Geauga County adults who had a routine check-up in the past year. An example of how to interpret the information includes: 59% of all Geauga County adults have had a routine check-up in the past year, including 57% of males and 62% of females.



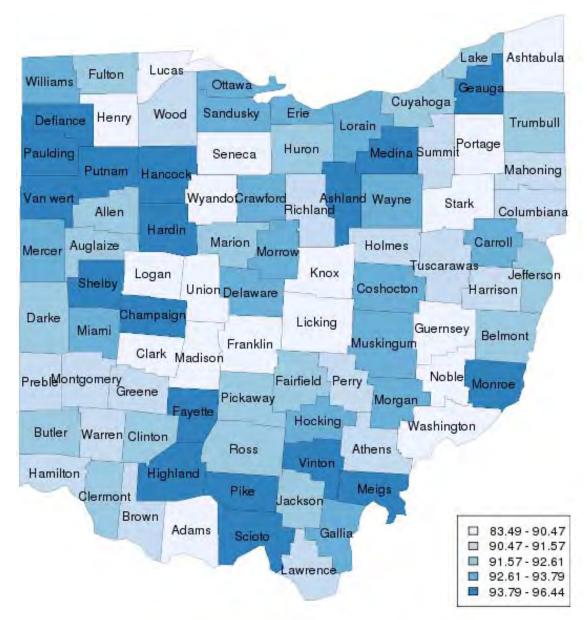
Availability of Services

Fourteen percent (14%) of Geauga County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems. Reasons for not using such a program included the following: could not afford to go (5%), co-pay/deductible too high (3%), had not thought of it (3%), other priorities (3%), stigma of seeking mental health services (3%), transportation (2%), could not get to the office or clinic (1%), did not know how to find a program (1%), fear (1%), and other reasons (6%). Sixty-eight percent (68%) of adults indicated they did not need such a program.

The following map shows the estimated proportion of all adults, ages 19 years and older with a usual source of care.

- 95% of Geauga County adults, ages 19 years and older, had a usual source of care.
- 91% of Ohio adults, ages 19 years and older, had a usual source of care.

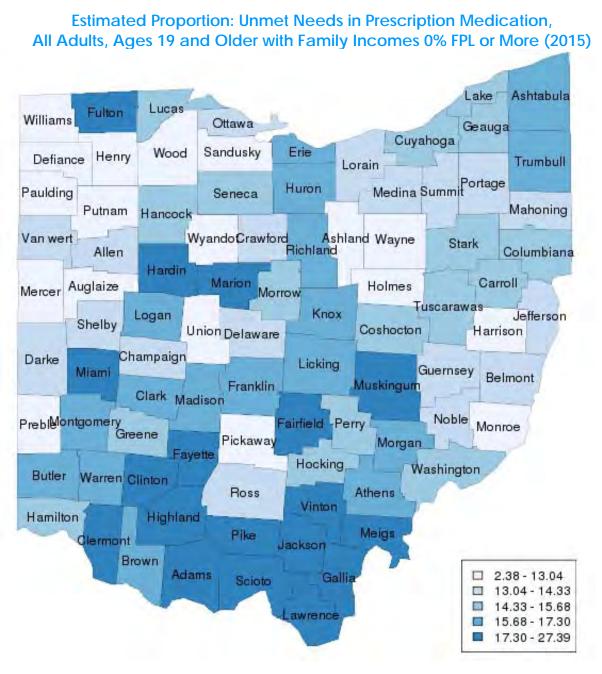
Estimated Proportion: Usual Source of Care, All Adults, Ages 19 and Older with Family Incomes 0% FPL or More (2015)



(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 unmet needs in prescription medication.

- 14% of Geauga County adults, ages 19 years and older, had unmet needs in prescription medication.
- 15% of Ohio adults, ages 19 years and older, had unmet needs in prescription medication.



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

Adult I CARDIOVASCULAR HEALTH

Key Findings

Four percent (4%) of adults had survived a heart attack and 2% had survived a stroke at some time in their life. More than one-third (36%) of Geauga County adults had high blood cholesterol, 27% were obese, 27% had high blood pressure, and 10% were smokers, four known risk factors for heart disease and stroke. Heart disease (25%) and stroke (4%) accounted for 29% of all Geauga County adult deaths from 2013-2015 (Source: CDC Wonder, 2013-2015).

Heart Disease and Stroke

- In 2016, 4% of Geauga County adults reported they had survived a heart attack or myocardial infarction, increasing to 12% of those over the age of 65.
- 5% of Ohio and 4% of U.S. adults reported they had a heart attack or myocardial infarction in 2015 (Source: 2015 BRFSS).
- 2% of Geauga County adults reported they had survived a stroke, increasing to 7% of those over the age of 65.
- 4% of Ohio and 3% of U.S. adults reported having had a stroke in 2015 (Source: 2015 BRFSS).
- 3% of adults reported they had angina or coronary heart disease, increasing to 10% of those over the age of 65.
- 4% of Ohio and 4% of U.S. adults reported having had angina or coronary heart disease in 2015 (Source: 2015 BRFSS).
- Less than one percent (<1%) of adults reported they had congestive heart failure, increasing to 1% of those over the age of 65.

High Blood Pressure (Hypertension)

- More than one-fourth (27%) 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.
- 8% of adults were told they were pre-hypertensive/borderline high.
- 90% of adults had their blood pressure checked within the past year.
- Geauga County adults diagnosed with high blood pressure were more likely to:
 - o Have rated their overall health as fair or poor (55%)
 - Have been ages 65 years or older (53%)
 - Have incomes less than \$25,000 (44%)
 - Have been classified as obese by Body Mass Index-BMI (37%)

Geauga County Leading Causes of Death 2013-2015

Total Deaths: 2,399

- 1. Heart Disease (25% of all deaths)
- 2. Cancer (22%)
- 3. Chronic Lower Respiratory Diseases (6%)
- 4. Accidents, Unintentional Injuries (5%)
- 5. Stroke (4%)

(Source: CDC Wonder, 2013-2015)

Ohio Leading Causes of Death 2013-2015

Total Deaths: 345,955

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

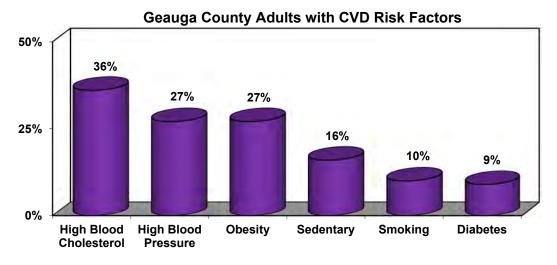
(Source: CDC Wonder, 2013-2015)



High Blood Cholesterol

- More than one-third (36%) 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 four-fifths (86%) of adults had their blood cholesterol checked within the past 5 years. The 2015 BRFSS reported 78% of Ohio and 78% of U.S. adults had their blood cholesterol checked within the past 5 years.
- Geauga County adults with high blood cholesterol were more likely to:
 - Have been ages 65 years or older (63%)
 - Have been classified as obese by Body Mass Index-BMI (50%)
 - Have rated their overall health as fair or poor (46%)
- Adults were taking medication for the following conditions: blood pressure (21%), blood cholesterol (19%), preventative reasons (15%), heart disease (8%), stroke (2%), and other conditions (19%).

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

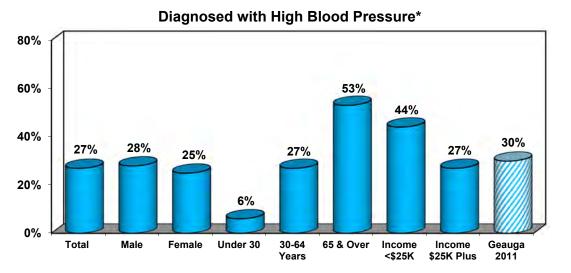


(Source: 2016 Geauga County Health Assessment)

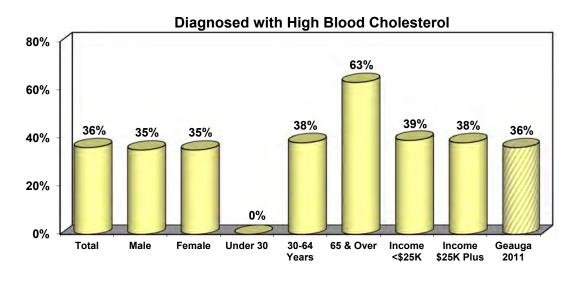
Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Had a heart attack	2%	4%	5%	4%
Had a stroke	2%	2%	4%	3%
Had high blood pressure	30%	27%	34%	31%
Had high blood cholesterol	36%	36%	37%	36%
Had blood cholesterol checked within past 5 years	N/A	86%	78%	78%

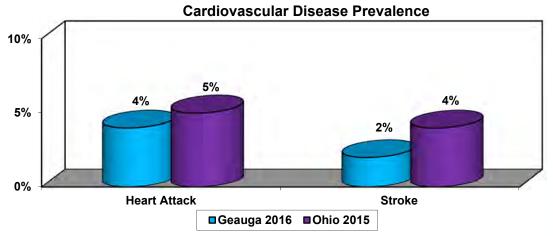
N/A - Not Available

The following graphs show the number of Geauga County adults who had been diagnosed with high blood pressure and high blood cholesterol, as well as those who have had a heart attack or stroke. Examples of how to interpret the information on the first graph include: 27% of all Geauga County adults have been diagnosed with high blood pressure, including 28% of males, 25% of females, and 53% of those 65 years and older.



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

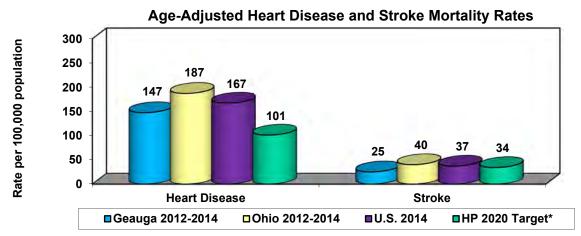




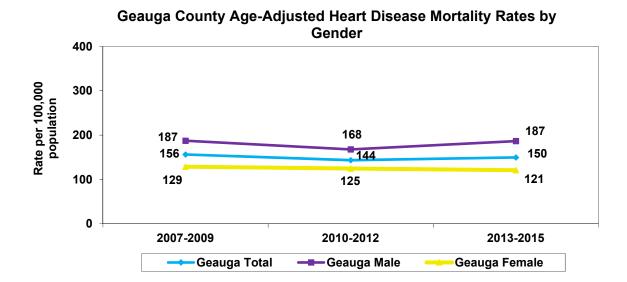
(Source: 2016 Geauga Health Assessment and 2015 BRFSS)

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

- When age differences are accounted for, the statistics indicate that from 2012-2014 Geauga County heart disease mortality rate was less than the figures for the state and the U.S., but higher than the Healthy People 2020 target.
- The Geauga County age-adjusted stroke mortality rate from 2012-2014 was lower than the state, the U.S. figure, and the Healthy People 2020 target objective.
- From 2007-2015, the total Geauga County age-adjusted heart disease mortality rate slightly fluctuated.



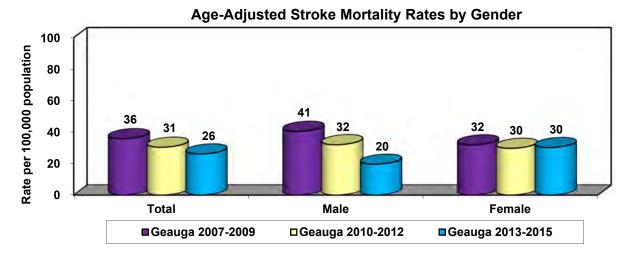
*The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality. (Source: Health Indicators Warehouse, Healthy People 2020)



(Source: CDC Wonder)

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

 From 2013-2015, the Geauga County stroke mortality rate was higher for females than for males.



(Source: CDC Wonder, About Underlying Cause of Death, 2007-2015)

Healthy People 2020 Objectives

Heart Disease and Stroke

Objective	Geauga Survey Population Baseline	2015 U.S. Baseline*	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	27% (2016)	31% Adults age 18 and up	27%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	36% (2016)	36% Adults age 20 & up with TBC>240 mg/dl	14%

*All U.S. figures age-adjusted to 2000 population standard.
*All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2020, 2015 BRFSS, 2016 Geauga County Health Assessment)

Adult | CANCER

Key Findings

In 2016, 13% of Geauga 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, cancers caused 22% of all Geauga County resident deaths. The American Cancer Society advises that avoiding tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages, and early detection may reduce overall cancer deaths.

Geauga County Incidence of Cancer, 2009-2013

All Types: 2,607 cases

Breast: 413 cases (16%)Prostate: 339 cases (13%)

Lung and Bronchus: 318 cases (12%)Colon and Rectum: 227 cases (9%)

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

Adult Cancer

- Thirteen percent (13%) of Geauga County adults were diagnosed with cancer at some point in their lives, increasing to 28% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: other skin cancer (30%), breast (28%), cervical (12%), multiple types (12%), prostate (9%), testicular (9%), endometrial (8%), melanoma (6%), Hodgkin's Lymphoma (4%), lung (4%), esophageal (2%), larynx (2%), pharyngeal (2%), thyroid (2%), and other types of cancer (4%).

13% of Geauga County adults had been diagnosed with cancer at some time in their life.

Cancer Facts

- The CDC indicates that from 2013-2015, cancers caused 22% of all Geauga County resident deaths (533 of 3,812 total deaths). The largest percent (22%) of cancer deaths were from lung and bronchus cancers (Source: CDC Wonder).
- The American Cancer Society reports that smoking tobacco is associated with cancers of the mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with the following types of cancers: lung, colorectal, stomach, pancreatic, kidney, bladder, uterine, ovarian (mucinous) and acute myeloid leukemia. The 2016 health assessment has determined that 10% of Geauga County adults were current smokers, and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer.

A current smoker is defined as someone who has smoked over 100 cigarettes in their lifetime and currently smokes some or all days.

Lung Cancer

- Lung cancer (n=68) was the leading cause of male cancer deaths from 2013-2015 in Geauga County; prostate cancer (n=37) was the second leading cause of male cancer deaths, and bladder cancer (n=25) was third. (Source: Ohio Public Health Data Warehouse).
- In Geauga County, 10% of male adults were current smokers, and 50% had stopped smoking for one or more days in the past 12 months because they were trying to quit.

10% of Geauga County male adults and 10% of female adults were current smokers.

- The CDC reports that lung cancer was the leading cause of female cancer deaths (n=54) in Geauga County from 2013-2015, followed by breast (n=47) and colon (n=20) cancers (Source: CDC Wonder).
- Approximately 10% of female adults in the county were current smokers, and 62% had stopped smoking for one or more days in the past 12 months because they were trying to quit.
- According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers (Source: American Cancer Society, Facts & Figures 2017).

Breast Cancer

- In 2016, 56% of Geauga County females reported having had a clinical breast examination in the past year.
- 64% of Geauga County females over the age of 40 had a mammogram in the past year.

More than three-fifths (64%) of Geauga 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).

CAZ CER

Prostate Cancer

- More than two-fifths (45%) of Geauga County males had a Prostate-Specific Antigen (PSA) test at some time in their life, and 26% had one in the past year.
- CDC statistics indicate that prostate cancer deaths accounted for 13% of all male cancer deaths from 2013-2015 in Geauga County.
- Incidence rates for prostate cancer are 74% higher in African Americans than in whites, and they are twice as likely to die of prostate cancer. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. African American men and Caribbean men of African descent have the highest documented prostate cancer incidence rates in the world (Source: American Cancer Society, Facts & Figures 2017).

Colon and Rectum Cancers

- The health assessment identified that more than half (54%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- The CDC statistics indicate that colon, rectum, and anal cancer deaths accounted for 8% of all male and female cancer deaths from 2013-2015 in Geauga 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.

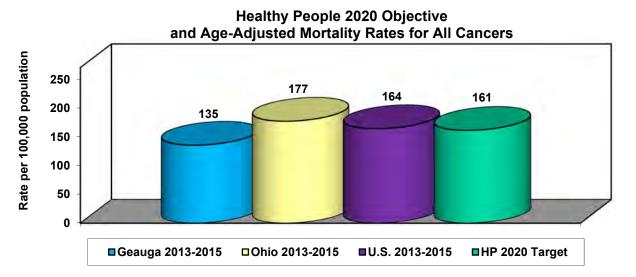
2017 Cancer Estimations

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

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

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

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



(Source: CDC Wonder; Healthy People 2020)

Cancer As Percent of Total Deaths in Geauga County

30% 24% 21% 21% 10% 5%

0%

Male

(Source: CDC Wonder, 2013-2015)

Female

Geauga County Incidence of Cancer 2009-2013

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Breast	413	16%
Prostate	339	13%
Lung and Bronchus	318	12%
Colon and Rectum	227	9%
Other/Unspecified	189	7%
Non-Hodgkins Lymphoma	148	6%
Melanoma of Skin	129	5%
Bladder	118	5%
Cancer and Corpus Uteri	97	4%
Thyroid	82	3%
Kidney and Renal Pelvis	79	3%
Leukemia	78	3%
Pancreas	72	3%
Oral Cavity & Pharynx	65	2%
Multiple Myeloma	44	2%
Brain and CNS	40 2%	
Esophagus	30	1%
Liver and Bile Ducts	30	1%
Ovary	30	1%
Stomach	25	1%
Hodgkins Lymphoma	21	<1%
Testis	13	<1%
Larynx	11	<1%
Cancer of Cervix Uteri	9	<1%
Total	2,607	100%

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

DIABETES

Adult | **DIABETES**

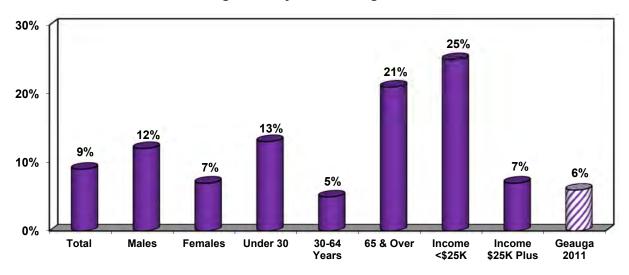
Key Findings

In 2016, 9% of Geauga County adults had been diagnosed with diabetes, and 5% were diagnosed with pre-diabetes.

Diabetes

- The 2016 health assessment has identified that 9% of Geauga County adults had been diagnosed with diabetes, increasing to 25% of those with incomes less than \$25,000.
- The 2015 BRFSS reports an Ohio prevalence of 11% and U.S. prevalence of 10%.
- Five percent (5%) of adults had been diagnosed with pre-diabetes.
- Adults with diabetes were using the following to treat their diabetes: diabetes pills (61%), 6-month checkup with provider (58%), checking blood sugar (57%), checking A1C annually (50%), diet control (50%), annual vision exam (47%), checking their feet (41%), exercise (38%), insulin (22%), dental exam (14%), and taking a class (11%).
- Nearly one-fourth (22%) of adults with diabetes rated their health as fair or poor.
- Geauga County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - o 75% were obese or overweight
 - 61% had been diagnosed with high blood cholesterol
 - 53% had been diagnosed with high blood pressure

Geauga County Adults Diagnosed with Diabetes

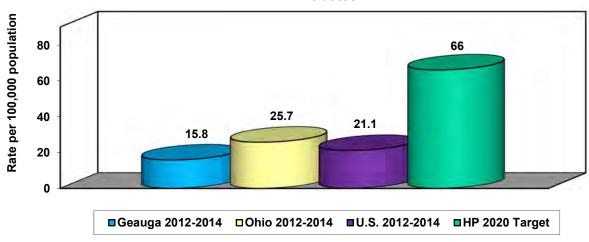


Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Diagnosed with diabetes	6%	9%	11%	10%

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

• From 2012 to 2014, Geauga County's age-adjusted diabetes mortality rate was less than the Ohio and U.S. rate as well as the Healthy People 2020 target objective.

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



Source: Health Indicators Warehouse and Healthy People 2020)

Type 2 Diabetes Risk in Ohio by Gender and BMI

Category	Increase in Risk
Overweight Men	2.4
Overweight Women	3.9
Obese Men	6.7
Obese Women	12.4

(Source: ODH, Obesity and Diabetes in Ohio 2013)

DIABETES

Diabetes Facts

- Nearly 30 million children and adults in the United States have diabetes.
- 86 million Americans have prediabetes.
- 1.4 million Americans are diagnosed with diabetes every year.
- Nearly 10% of the entire U.S. population has diabetes, including over 25% of seniors.
- One person is diagnosed with diabetes every 23 seconds.
- 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.
- 8.1 million Americans have undiagnosed diabetes
- 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, 2015)

Adult | **ARTHRITIS**

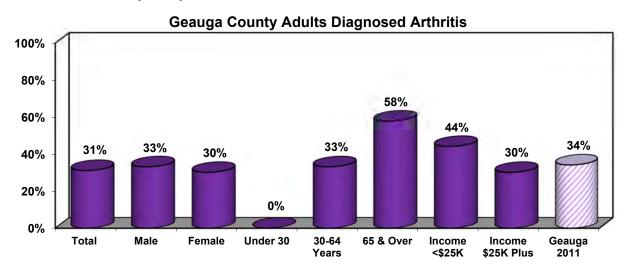
Key Findings

According to the Geauga County survey data, 31% of adults were diagnosed with arthritis. The 2015 BRFSS indicated that 28% of Ohio adults and 25% of U.S. adults were told they have arthritis.

31% of Geauga County adults were told by a health professional that they had some form of arthritis, increasing to 58% of those over the age of 65.

Arthritis

- Nearly one-third (31%) of Geauga County adults were told by a health professional that they had some form of arthritis, increasing to 58% 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.
- Nearly four-fifths (79%) of adults diagnosed with arthritis were overweight or obese.
- An estimated 53 million U.S. adults (about 23%) report having doctor-diagnosed arthritis. By 2040, over 78 million people will have arthritis. Arthritis is more common among women (26%) than men (19%), and it affects all racial and ethnic groups. Arthritis commonly occurs with other chronic diseases, like diabetes, heart disease, and obesity, and it can make it harder for people to manage these conditions (Source: CDC, Arthritis at a Glance 2017).
- Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of arthritis, have an occupation associated with arthritis, are overweight or obese, and/or have joint injuries or infections (Source: CDC).



Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Diagnosed with arthritis	34%	31%	28%	25%

ASTHMA

Adult I ASTHMA AND OTHER RESPIRATORY DISEASE

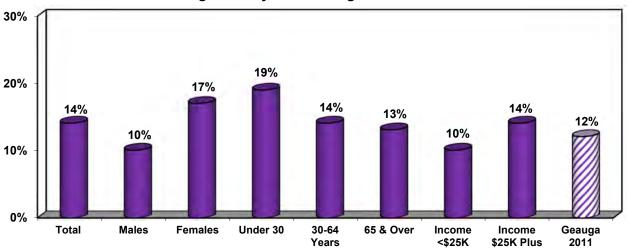
Key Findings

In 2016, 14% of adults had been diagnosed with asthma.

Asthma and Other Respiratory Disease

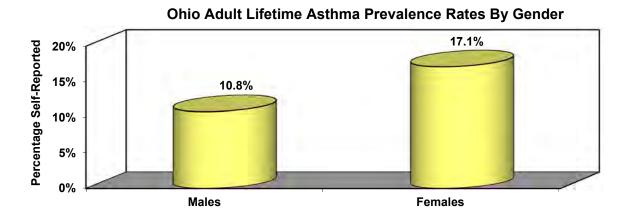
- In 2016, 14% of Geauga County adults had been diagnosed with asthma, increasing to 19% of those under the age of 30
- Fourteen percent (14%) of Ohio and 14% of U.S. adults had been diagnosed with asthma (Source: 2015 BRFSS).
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, smoke from burning wood or grass; and infections linked to the flu, colds, and respiratory viruses (Source: CDC, 2013).
- Chronic lower respiratory disease was the 3rd leading cause of death in Geauga County and the 3rd leading cause of death in Ohio from 2013-2015 (Source: CDC Wonder, 2013-2015).

Geauga County Adults Diagnosed with Asthma

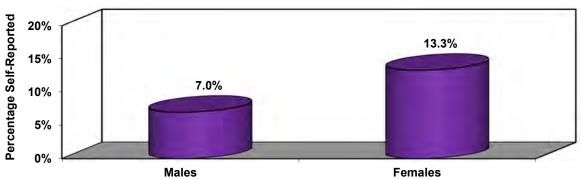


Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Had been diagnosed with asthma	12%	14%	14%	14%

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



Ohio Adult Current Asthma Prevalence Rates By Gender



(Source for graphs: 2015 BRFSS)

Asthma Facts

- Asthma is a chronic condition that causes inflammation and narrowing of the bronchial tubes, the passageways that allow air to enter and leave the lungs.
- The number of Americans with asthma grows every year. Currently, 26 million Americans (19 million adults and 7 million children) have asthma.
- Asthma symptoms are one of the leading causes of absences from work and school.
- Asthma often runs in families; according to the World Health Organization, about half the cases are due to genetic susceptibility and half result from environmental factors.
- There are two types of asthma: allergic (caused by exposure to an allergen) and nonallergic (caused by stress, exercise, illnesses like a cold or the flu, or exposure to extreme weather, irritants in the air or some medications).
- 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, Asthma Information, 2014)

Adult | WEIGHT STATUS

Key Findings

The 2016 health assessment identified that 64% of Geauga County adults were overweight (37%) or obese (27%) based on Body Mass Index (BMI). The 2015 BRFSS indicates that 30% of Ohio and 30% of U.S. adults were obese as measured by BMI. Nine percent (9%) of adults ate 5 or more servings of fruits and vegetables per day.

27% of Geauga County adults are obese.

Adult Weight Status

- In 2016, the health assessment indicated that nearly two-thirds (64%) of Geauga County adults were either overweight (37%) or obese (27%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
- Two-fifths (40%) of adults tried to lose weight, 42% tried to maintain their current weight or keep from gaining weight, and 3% tried to gain weight.
- Geauga County adults did the following to lose weight or keep from gaining weight: exercised (49%); ate less food, fewer calories, or foods low in fat (45%); drank more water (39%); ate a low-carb diet (13%); used a weight loss program (3%); utilized health coaching (2%); participated in a prescribed dietary or fitness program (2%); went without eating 24 or more hours (2%); smoked cigarettes (1%); took diet pills, powders or liquids without a doctor's advice (1%); took prescribed medications (1%); had bariatric surgery (<1%); took laxatives (<1%); and vomited after eating (<1%).

Physical Activity

- In Geauga County, 61% of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week; 33% of adults exercised 5 or more days per week. Nearly one-in-six (16%) adults did not participate in any physical activity in the past week, including 2% who were unable to exercise.
- The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, CDC also recommends musclestrengthening activities that work all major muscle groups on 2 or more days per week (Source: CDC, Physical Activity for Everyone, 2015).

In Geauga County, 61% of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.

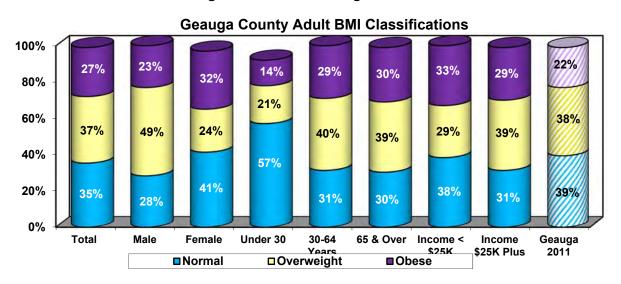
Adults spent the most time doing the following physical activities in the past year: walking (31%), occupational exercise (5%), exercise machines (4%), running/jogging (4%), strength training (4%), cycling (2%), group exercise classes (2%), exercise videos (1%), active video games (<1%), swimming (<1%), and other activities (5%). Seven percent (7%) of adults did not exercise at all in the past year, including 1% who were unable to do so.

- Reasons for not exercising included the following: time (27%); too tired (22%); laziness (14%); pain or discomfort (13%); weather (13%); did not like to exercise (10%); could not afford a gym membership (5%); poorly maintained/no sidewalks (5%); no exercise partner (3%); did not know what activities to do (2%); lack of opportunities for those with physical impairments or challenges (2%); no child care (2%); doctor advised them not to exercise (1%); neighborhood safety (1%); no walking, biking trails or parks (1%); no gym available (<1%); and transportation (<1%),
- Adults spent an average of 2.2 hours watching TV, 1.6 hours on the computer (outside of work), 1.2 hours on their cell phone, and 0.2 hours playing video games on an average day of the week.

Nutrition

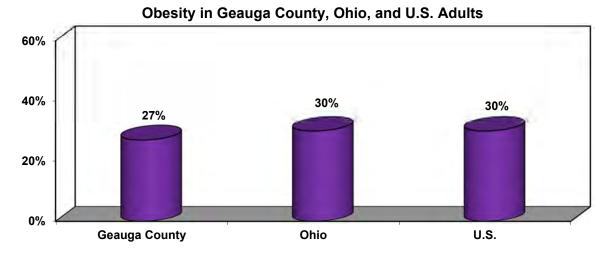
- In 2016, 9% of adults ate 5 or more servings of fruits and vegetables per day. Thirty-five percent (35%) ate between 3 and 4 servings per day, and 51% ate between 1 and 2 servings. Four percent (4%) ate 0 servings of fruits and vegetables: 2% ate 0 servings because they could not afford them, 1% ate 0 servings because they did not like them, and 1% ate 0 servings because they did not have access to them. The American Cancer Society recommends that adults eat at least 2 ½ cups of fruits and vegetables per day to reduce the risk of cancer and to maintain good health.
- Geauga County adults reported the following reasons they chose the types of food they ate: taste/enjoyment (68%), healthiness of food (60%), cost (46%), what their family prefers (43%), ease of preparation/time (42%), food they were used to (37%), nutritional content (36%), availability (30%), calorie content (28%), if it is organic (17%), if it is genetically modified (14%), artificial sweetener content (11%), health care provider's advice (9%), if it is gluten free (7%), other food sensitivities (5%), if it is lactose free (4%), and other reasons (3%).
- Adults reported the following barriers to consuming fruits and vegetables: too expensive (8%), no access (4%), did not like the taste (3%), did not know how to prepare (2%), no variety (2%), and other barriers (3%).
- Seventy-six percent (76%) of adults ate out in a restaurant or brought home take-out food at least once in a typical week, 5% of whom did so for 5 or more meals. Adults ate out in a restaurant or brought home take-out food an average of 1.6 times per week.

The following graph shows the percentage of Geauga County adults who were overweight or obese by Body Mass Index (BMI). Examples of how to interpret the information include: 35% of adults were classified as normal weight, 37% were overweight, and 27% were obese.



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

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



(Source: 2016 Geauga County Health Assessment and 2015 BRFSS)

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Obese	22%	27%	30%	30%
Overweight	38%	37%	37%	36%

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)

Adult | TOBACCO USE

Key Findings

In 2016, 10% of Geauga County adults were current smokers, and 27% 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.

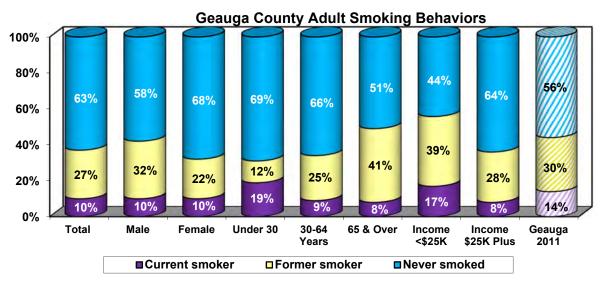
In 2016, 10% of Geauga County adults were current smokers.

Adult Tobacco Use Behaviors

- The 2016 health assessment identified that one-in-ten (10%) Geauga County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- The 2015 BRFSS reported current smoker prevalence rates of 22% for Ohio and 18% for the U.S.
- More than one-fourth (27%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- The 2015 BRFSS reported former smoker prevalence rates of 24% for Ohio and 25% for the U.S.
- Adult smokers were more likely to:
 - Have been a member of an unmarried couple (23%)
 - o Be under the age of 30 (19%)
 - o Have incomes less than \$25,000 (17%)
- Adults used the following tobacco products in the past year: cigarettes (15%), chewing tobacco (3%), cigars (3%), e-cigarettes (3%), little cigars (3%), pouch (3%), Black and Milds (1%), hookah (1%), pipes (1%), roll-your-own (1%), snuff (1%), and Swishers (1%).
- Fifty-one percent (51%) of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to guit smoking.
- Ninety percent (90%) of adults believed secondhand tobacco smoke was harmful to themselves or their family's health.
- Thirty-nine percent (39%) of adults believed e-cigarette vapor was harmful to them, and 36% believed it was harmful to others. 4% of adults did not believe e-cigarette vapor was harmful to anyone.

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Current smoker	14%	10%	22%	18%
Former smoker	30%	27%	24%	25%

The following graph shows the percentage of Geauga County adults who smoked cigarettes. Examples of how to interpret the information include: 10% of adults were current smokers, 27% of adults were former smokers, and 63% had never smoked.

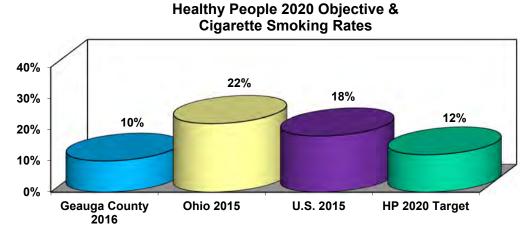


Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"

51% of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.

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

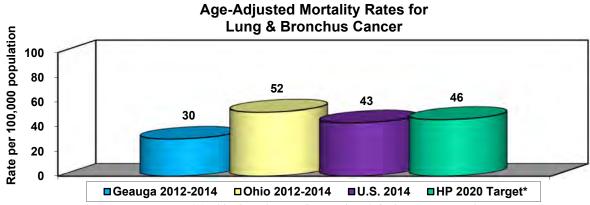
 Geauga County adult cigarette smoking rate was lower than the Ohio and U.S. rates, as well as the Healthy People 2020 target objective.



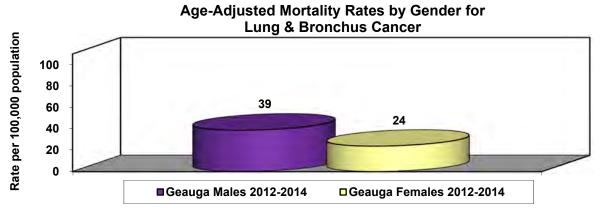
(Source: 2016 Geauga County Health Assessment, 2015 BRFSS and Healthy People 2020)

The following graphs show Geauga 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 and Geauga County mortality rates by gender. These graphs show:

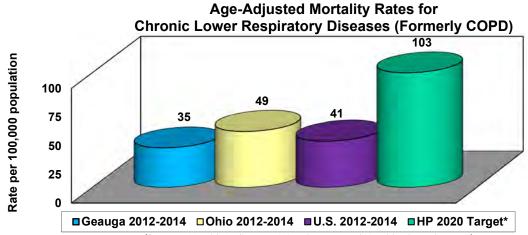
- Disparities existed by gender for Geauga County lung and bronchus cancer age-adjusted mortality rates. The 2012-2014 Geauga male rates were substantially higher than the Geauga female rates.
- From 2012-2014, Geauga County's age-adjusted mortality rate for chronic lower respiratory disease was lower than the U.S., Ohio, and the Healthy People 2020 target objective.



*Healthy People 2020 Target data is for lung cancer only (Sources: Healthy People 2020, National Cancer Institute, Health Indicators Warehouse)

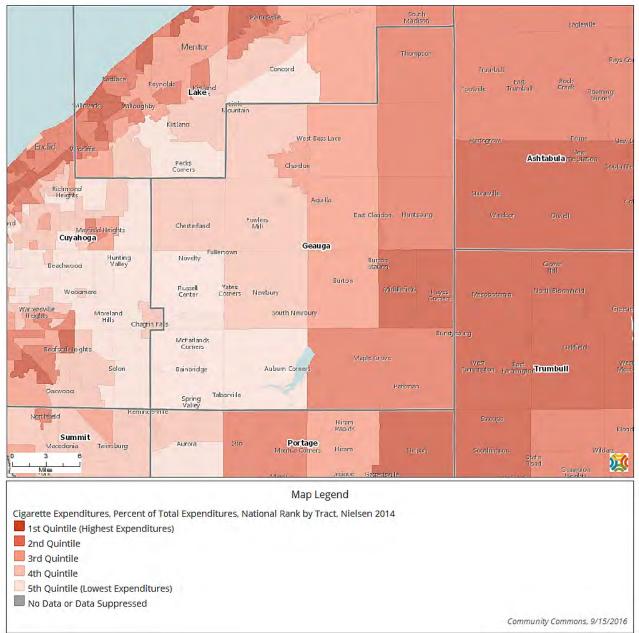


(Source: Health Indicators Warehouse)



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

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



(Source: Community Commons, updated 4/14/2016)

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 an e-cigarette at least one time, with use differing by sex, age, and race and Hispanic or Latino race/ethnicity.
- About 3.7% of adults currently use e-cigarettes, with use differing by age and race and Hispanic or Latino 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 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," October 2015)

Adult I ALCOHOL CONSUMPTION

Key Findings

In 2016, the health assessment indicated that 38% of drinkers engaged in binge drinking (defined as five or more drinks for males or four or more drinks for females) on one occasion in the past month. Five percent (5%) of adults drove after having perhaps too much to drink.

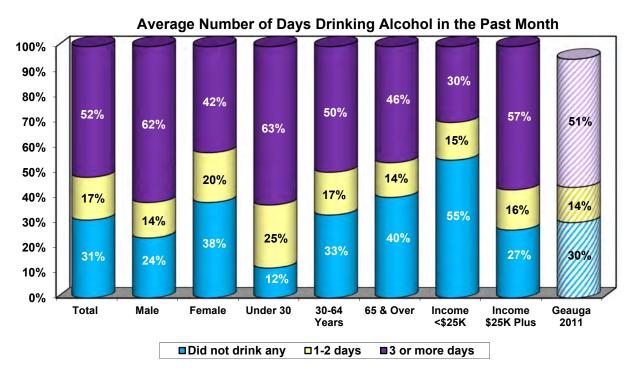
69% of Geauga County adults had at least one alcoholic drink in the past month.

Adult Alcohol Consumption

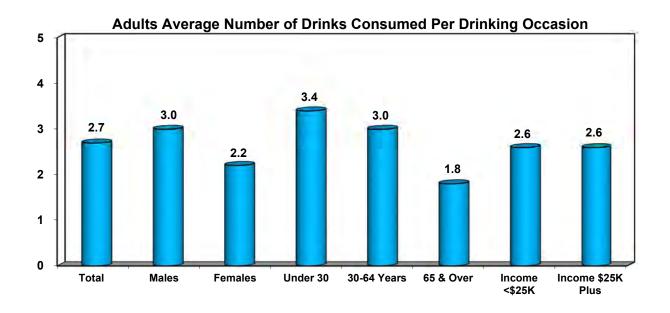
- In 2016, 69% of Geauga County adults had at least one alcoholic drink in the past month, increasing to 88% of those under the age of 30. The 2015 BRFSS reported current drinker prevalence rates of 53% for Ohio and 54% for the U.S.
- Of those who drank, Geauga County adults drank 2.7 drinks on average, increasing to 3.4 drinks for those under the age of 30.
- More than one-fourth (26%) of <u>all</u> Geauga 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.
- Thirty-eight percent (38%) of current drinkers were considered binge drinkers.
- Five percent (5%) of adults reported driving after having perhaps too much to drink, increasing to 13% of those under the age of 30.
- Three percent (3%) of adults used a program or service to help themselves or a loved one with alcohol problems.
- Reasons for not using a program or service to help with alcohol problems included the following: did not want to miss work (1%), had not thought of it (1%), did not want to get in trouble (<1%), stigma of seeking alcohol services (<1%), and other reasons (2%). 96% of adults indicated this type of program was not needed.

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2014	U.S. 2014
Drank alcohol at least once in past month	65%	69%	53%	53%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	18%	26%	18%	16%

The following graphs show the percentage of Geauga County adults who consumed alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 31% of adults did not drink alcohol including 24% of males and 38% of females.



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

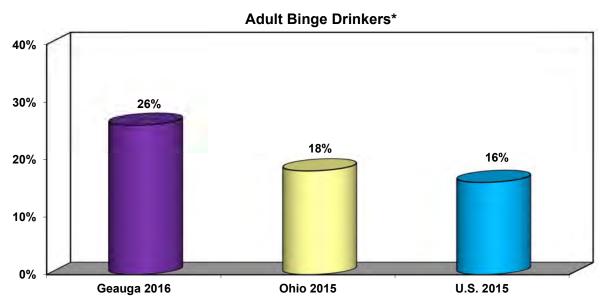


The following graphs show the percentage of Geauga County current drinkers who binge drank in the past month, as well as a comparison of Geauga County binge drinkers with Ohio and U.S. binge drinkers.

Geauga County Adult Drinkers Who Binge Drank in Past Month* 80% 62% 60% 50% 49% 39% 38% 37% 40% 28% 27% 20% 10% 0% Total Males **Females** Under 30 30-64 65 & Over Income Income Geauga \$25K Plus Years <\$25K 2011

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

5% of Geauga County adults reported driving after having perhaps too much to drink.



(Source: 2015 BRFSS, 2016 Geauga 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.

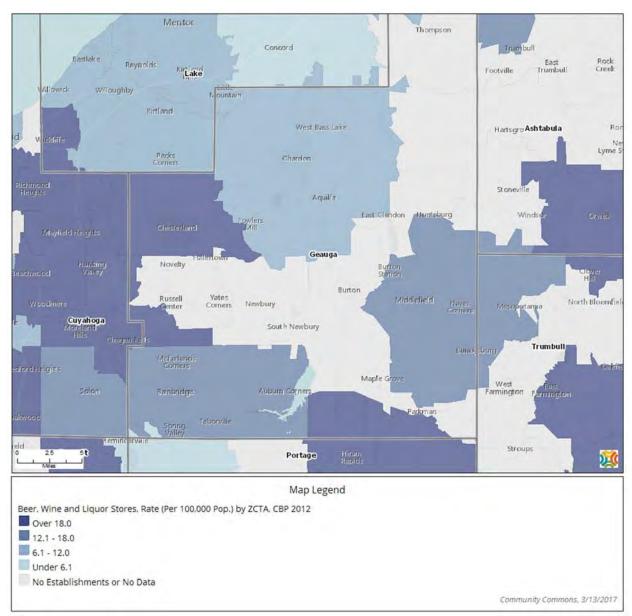
The following table shows the City of Chardon, Geauga County, and Ohio motor vehicle accident statistics. The table shows:

- Four percent (4%) of the total crashes in 2016 in both Geauga County and Ohio were alcohol-related.
- Almost one-third (31%) of all fatal injury crashes in Geauga County were alcohol-related, as compared to 30% of alcohol-related fatal injury crashes in Ohio.
- Of the total number of alcohol-related crashes (85) in Geauga County, 48% were non-fatal injury, 46% were property damage only, and 6% were fatal injury.
- There were 12,198 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 Chardon 2016	Geauga County 2016	Ohio 2016
Total Crashes	224	1,929	305,243
Alcohol-Related Total Crashes	7	85	12,198
Fatal Injury Crashes	1	16	1,048
Alcohol-Related Fatal Crashes	0	5	310
Alcohol Impaired Drivers in Crashes	7	84	11,919
Injury Crashes	46	549	77,336
Alcohol-Related Injury Crashes	2	41	5,056
Property Damage Only	177	1,364	226,859
Alcohol-Related Property Damage Only	5	39	6,832
Deaths	1	16	1,127
Alcohol-Related Deaths	0	5	340
Total Non-Fatal Injuries	65	827	112,069
Alcohol-Related Injuries	3	50	7,158

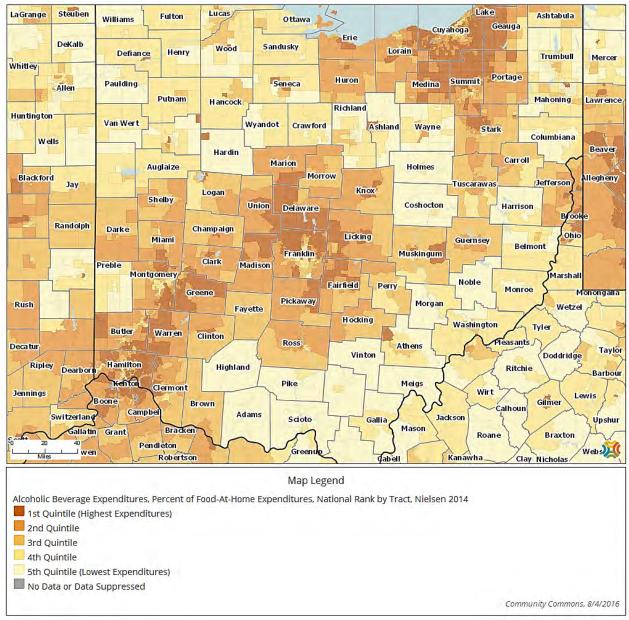
(Source: Ohio Department of Public Safety, Crash Reports, Updated 3/14/2017, Traffic Crash Facts)

Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by ZCTA, Census Business Patterns (CBP), 2012



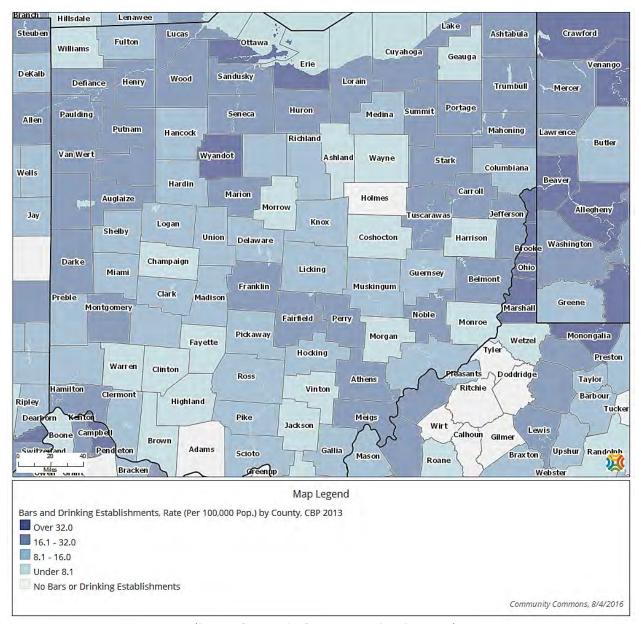
(Source: Community Commons, updated 3-13-2017)

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



(Source: Community Commons, updated 8-4-2016)

Bars and Drinking Establishments, Rate (Per 100,000 Pop.) by County, CBP 2013



(Source: Community Commons, updated 8-4-2016)

Adult | DRUG USE

Key Findings

In 2016, 5% of Geauga County adults had used marijuana during the past 6 months. Five percent (5%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

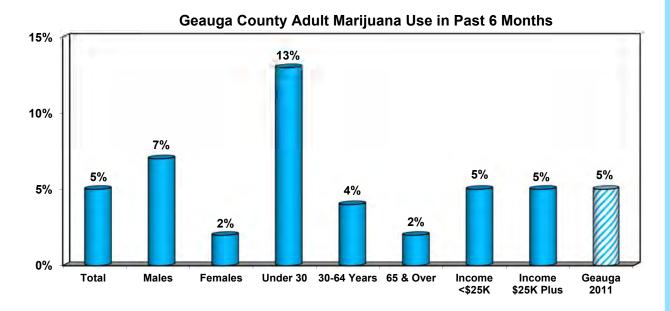
Adult Drug Use

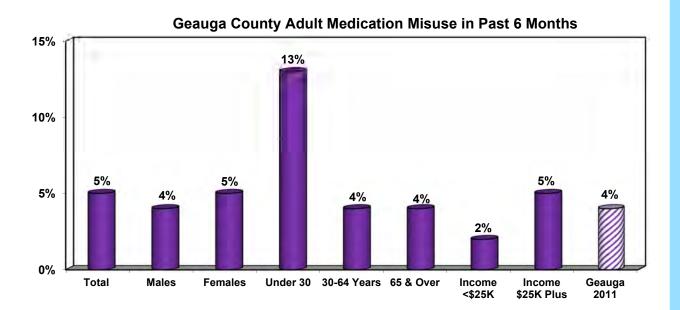
- In 2016, 5% of Geauga County adults had used marijuana in the past 6 months, increasing to 13% of those under the age of 30.
- One percent (1%) of adults reported using other recreational drugs in the past six months, such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- Five percent (5%) of adults had used medication not prescribed for them or they took more than prescribed to feel good or high and/or more active or alert during the past 6 months, increasing to 13% of those under the age of 30.
- Adults indicated they did the following with their unused prescription medication: took as prescribed (20%), threw it in the trash (17%), kept it (14%), flushed it down the toilet (8%), took it to the medication collection program (8%), took it to the sheriff's office (8%), kept in a locked cabinet (3%), gave it away (1%), sold it (1%), took it in on drug take back days (1%), and some other destruction method (2%). Forty-five percent (45%) of adults did not have unused medication.

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Adults who used marijuana in the past 6 months	5%	5%	N/A	N/A
Adults who used other recreational drugs in the past 6 months	N/A	1%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	4%	5%	N/A	N/A

N/A - Not available

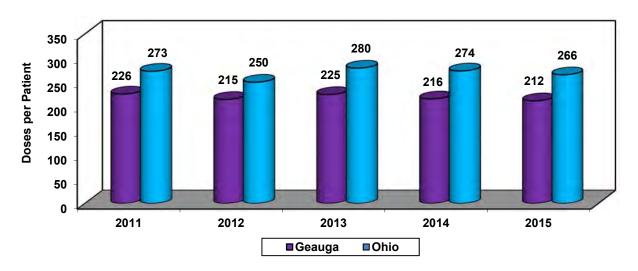
The following graphs from the 2016 Geauga County Health Assessment indicate adult marijuana use and medication misuse in the past six months. Examples of how to interpret the information include: 5% of all Geauga County adults used marijuana in the past six months, including 13% of adults under the age of 30 and 5% of adults with incomes less than \$25,000.



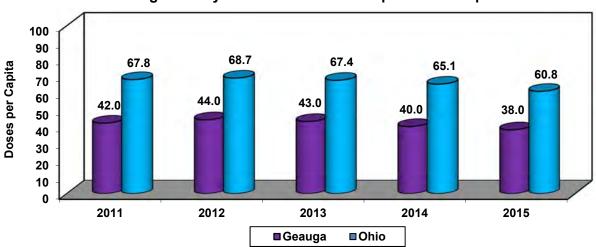


The following graphs show Geauga County and Ohio opioid doses per patient and doses per capita.

Geauga County and Ohio Number of Opioids Doses Per Patient



Geauga County and Ohio Number of Opioids Per Capita



(Source: Ohio Automated Rx Reporting System, 2016)

Abuse of Prescription (Rx) Drugs

- Young adults (age 18 to 25) are the biggest abusers of prescription (Rx) opioid pain relievers, ADHD, stimulants, and anti-anxiety drugs.
- Reasons for abusing these drugs include: getting high, relieving pain, studying better, dealing with problems, losing weight, feeling better, increasing alertness, and having a good time with friends.
- In 2014, more than 1,700 young adults died from prescription drug (mainly opioid) overdosesmore than died from overdoses of any other drug, including heroin and cocaine combinedand 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)

Prescription Analgesic Doses Per Capita - Ohio's Automated Rx Reporting System, 2014

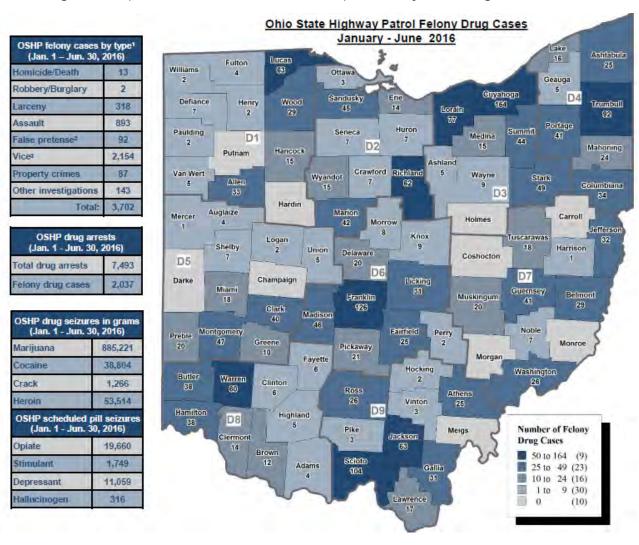
- In 2014, the statewide average per capita dosage rate was 61.2 doses per person.
- The average per capita dosage rate was 38.4 doses in Geauga County in 2014.



(Source: Ohio Mental Health and Addiction Services, Doses Per Capita September 2013, obtained from: http://mha.ohio.gov/Portals/0/assets/Research/Maps/Ohio_OARRS_Opioids_2012_v2.pdf)

Felony Cases and Drug Arrests January - June 2016

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



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

Adult I WOMEN'S HEALTH

Key Findings

In 2016, nearly two-thirds (64%) of Geauga County women over the age of 40 reported having a mammogram in the past year. Fifty-six percent (56%) of Geauga County women ages 19 and over had a clinical breast exam and 38% had a Pap smear to detect cancer of the cervix in the past year. Four percent (4%) of women survived a heart attack and 2% survived a stroke at some time in their life. Nearly one-third (32%) were obese, 35% had high blood cholesterol, 25% had high blood pressure, and 10% were identified as smokers, all known risk factors for cardiovascular diseases.

Women's Health Screenings

 Almost three-quarters (73%) of women had a mammogram at some time in their life and nearly half (48%) had this screening in the past year.

Geauga County Female Leading Causes of Death, 2013 – 2015

- Heart Diseases (24% of all deaths)
- 2. Cancers (21%)
- 3. Stroke (6%)
- 4. Chronic Lower Respiratory Diseases (6%)
- 5. Alzheimer's (4%)

(Source: CDC Wonder, 2013-2015)

Ohio Female Leading Causes of Death, 2013 – 2015

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

(Source: CDC Wonder, 2013-2015)

- Nearly two-thirds (64%) of women ages 40 and over had a mammogram in the past year, and 78% 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%) women had a clinical breast exam at some time in their life, and 56% had one within the past year. Three-fourths (75%) of women ages 40 and over had a clinical breast exam in the past two years.
- The assessment has identified that 88% of women had a Pap smear, and 38% reported having had the exam in the past year. 69% of women had a Pap smear in the past three years. The 2014 BRFSS indicated that 74% of Ohio and 75% of U.S. women had a Pap smear in the past three years.

Women's Health Concerns

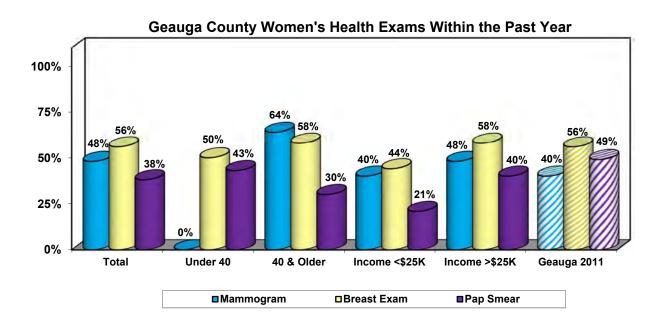
- Women used the following as their usual source of services for female health concerns: private gynecologist (57%), general or family physician (28%), health department clinic (1%), family planning clinic (<1%), and some other source (1%). Twelve percent (12%) indicated they did not have a usual source of services for female health concerns.</p>
- In 2016, the health assessment determined that 4% of women had survived a heart attack and 2% had survived a stroke at some time in their life.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Geauga County, the 2016 Health Assessment has identified that:
 - 56% of women were overweight or obese (61% Ohio, 59% U.S., 2015 BRFSS)
 - 35% were diagnosed with high blood cholesterol (36% Ohio, 35% U.S., 2015 BRFSS)
 - 25% were diagnosed with high blood pressure (31% Ohio, 30% U.S., 2015 BRFSS)
 - o 10% of all women were current smokers (20% Ohio, 15% U.S., 2015 BRFSS)
 - 7% had been diagnosed with diabetes (11% Ohio, 10% U.S., 2015 BRFSS)
- From 2013-2015, major cardiovascular diseases (heart disease and stroke) accounted for 30% of all female deaths in Geauga County (Source: CDC Wonder, Underlying Cause of Death).



Pregnancy

- Fourteen percent (14%) of women had been pregnant in the past 5 years.
- During their last pregnancy, Geauga County women did the following: got prenatal care in the first 3 months (88%), took a multi-vitamin with folic acid during pregnancy (69%), took a multi-vitamin with folic acid pre-pregnancy (65%), got a dental exam during pregnancy (50%), took folic acid during pregnancy (46%), received WIC services (23%), and took folic acid prepregnancy (19%).

The following graph shows the percentage of Geauga County women that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 48% of Geauga County females had a mammogram within the past year; 56% had a breast exam, and 38% had a Pap smear.

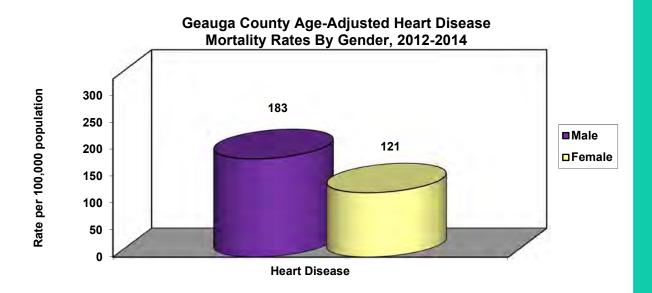


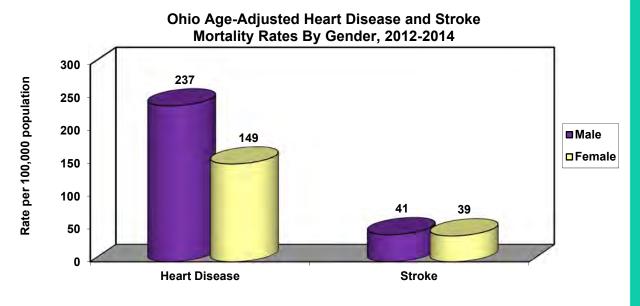
Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Had a mammogram in the past two years (age 40 & over)	77%	78%	72%*	73%*
Had a Pap smear in the past three years	N/A	69%	74%*	75%*

N/A- Not available *2014 BRFSS Data

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

- From 2012-2014, the Geauga County and Ohio female age-adjusted mortality rate was lower than the male rate for heart disease.
- The Geauga County female heart disease mortality rate was lower than the Ohio female rate from 2012-2014.





(Source: Health Indicators Warehouse, 2012-2014)

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
 - o Prophylactic (preventive) mastectomy (removal of breast tissue).
 - Prophylactic (preventive) salpingo-oophorectomy (removal of the ovaries and fallopian tubes).

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

Binge Drinking: A Serious, Under Recognized Problem among Women and Girls

- Binge drinking for women is defined as consuming 4 or more alcohol drinks (beer, wine, or liquor) on an occasion.
- Binge drinking is a dangerous behavior but is not widely recognized as a women's health problem.
- Drinking too much results in about 23,000 deaths in women and girls each year.
- Binge drinking increases the chances of breast cancer, heart disease, sexually transmitted diseases, unintended pregnancy, and many other health problems.
- If women binge drink while pregnant, they risk exposing their developing baby to high levels of alcohol, increasing the chances the baby will be harmed by the mother's alcohol use.
- Drinking during pregnancy can lead to sudden infant death syndrome and fetal alcohol spectrum disorders.
- About 1 in 8 women aged 18 years and older and 1 in 5 high school girls binge drink. Women
 who binge drink do so frequently about 3 times a month and have about 6 drinks per
 binge.

(Sources: Centers for Disease Control and Prevention, Binge Drinking)

Adult | MEN'S HEALTH

Key Findings

In 2016, 45% of Geauga County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. The health assessment determined that 6% of men survived a heart attack and 2% survived a stroke at some time in their life. More than one-fourth (28%) of men had been diagnosed with high blood pressure, 35% had high blood cholesterol, and 10% were identified as smokers, which, along with obesity (23%), are known risk factors for cardiovascular diseases. Major cardiovascular diseases (heart disease and stroke) accounted for 29% and cancers accounted for 24% of all male deaths in Geauga County from 2013-2015 (Source: CDC Wonder, 2013-2015).

Men's Health Screenings and Concerns

More than two-fifths (45%) of Geauga County males had a Prostate-Specific Antigen (PSA) test at some time in their life, and 26% had one in the past year.

Geauga County Male Leading Causes of Death, 2013 – 2015

- 1. Heart Diseases (26% of all deaths)
- 2. Cancers (24%)
- 3. Accidents, Unintentional Injuries (7%)
- 4. Chronic Lower Respiratory Diseases (6%)
- 5. Diabetes (4%)

(Source: CDC Wonder, 2013-2015)

Ohio Male Leading Causes of Death, 2013 – 2015

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

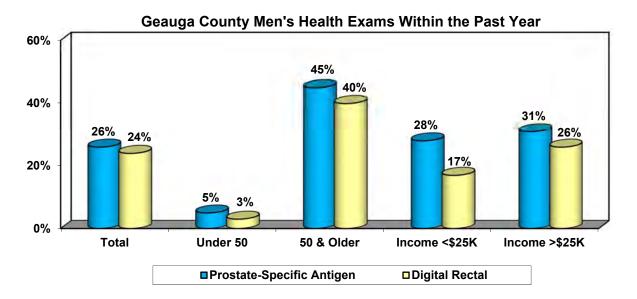
(Source: CDC Wonder, 2013-2015)

- Three-fourths (75%) of males age 50 and over had a PSA test at some time in their life, and 45% had one in the past year.
- Three-fifths (60%) of men had a digital rectal exam in their lifetime, and 24% had one in the past year.
- From 2013-2015, major cardiovascular diseases (heart disease and stroke) accounted for 29% of all male deaths in Geauga County (Source: CDC Wonder).
- In 2016, the health assessment determined that 6% of men had a heart attack and 2% had a stroke at some time in their life.

24% of Geauga County males had a digital rectal exam in the past year.

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Geauga County, the 2016 health assessment has identified that:
 - o 72% of men were overweight or obese (71% Ohio, 70% U.S., 2015 BRFSS)
 - 35% were diagnosed with high blood cholesterol (38% Ohio, 38% U.S., 2015 BRFSS)
 - 28% were diagnosed with high blood pressure (38% Ohio, 34% U.S., 2015 BRFSS)
 - 12% of all men were current smokers (23% Ohio, 19% U.S., 2015 BRFSS)
 - o 10% had been diagnosed with diabetes (11% Ohio, 11% U.S., 2015 BRFSS)
- From 2013-2015, lung cancer accounted for the most cancer deaths among Geauga County males. Statistics from the same period for Ohio males indicate that lung, prostate, and colon and rectum cancers were the leading cancer deaths (Source: CDC Wonder).

The following graph shows the percentage of Geauga County male adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 26% of males had a PSA test within the past year, and 24% had a digital rectal exam.



Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2014	U.S. 2014
Had a PSA test within the past two years (age 40 & over)	N/A	56%	43%	43%

Men's Health Data

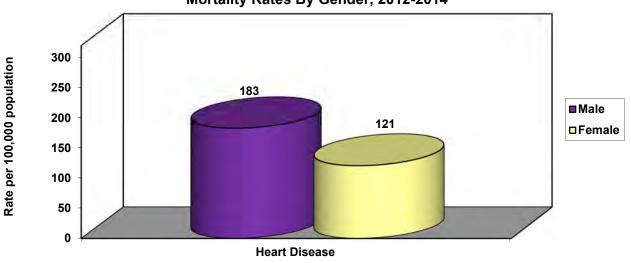
- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- 17% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 30% had 5 or more drinks in 1 day at least once in the past year.
- Only 52% of adult males in the U.S. met the 2008 federal physical 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)

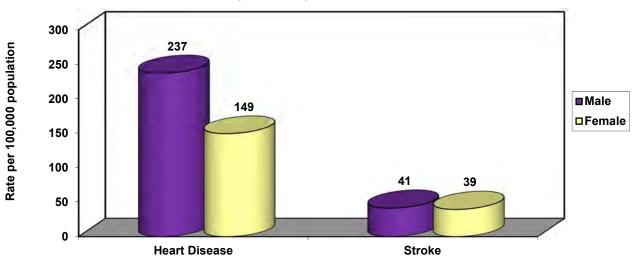
The following graphs show the Geauga County and Ohio age-adjusted mortality rates per 100,000 population for cardiovascular diseases by gender. The graphs show:

- From 2012-2014, the Geauga County and Ohio male age-adjusted mortality rate was higher than the female rate for heart disease.
- The Geauga County male age-adjusted heart disease mortality rate was lower than the Ohio male rate.

Geauga County Age-Adjusted Heart Disease Mortality Rates By Gender, 2012-2014



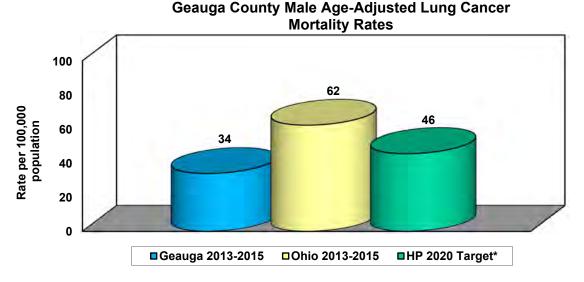
Ohio Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2012-2014



(Source: Health Indicators Warehouse, 2012-2014)

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

• From 2013-2015, the Geauga County age-adjusted mortality rate for male lung cancer was lower than the Ohio 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

- Prostate cancer is the most common non-skin cancer among American men. Most prostate cancers grow slowly and don't cause any health problems in men who have them.
- 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. Men have a greater chance of getting prostate cancer the older they are, 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, nurse, or other health care professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland.
 - Prostate specific antigen test (PSA): PSA is a substance made by the prostate.
 The PSA test measures the level of PSA in the blood, which may be higher in men who have prostate cancer. However, other conditions such as an enlarged prostate, prostate infection and certain medical procedures also may increase PSA levels.

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

Adult | PREVENTIVE MEDICINE AND DISASTER PREPAREDNESS

Key Findings

In the past year, more than four-fifths (83%) of adults ages 65 and over had a flu vaccine. More than half (54%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years. Sixty percent (60%) of Geauga County adults had a 3-day supply of nonperishable food for everyone in the household.

Preventive Medicine

- More than half (51%) of Geauga County adults had a flu vaccine in the past 12 months, increasing to 83% of those ages 65 and over. The 2015 BRFSS reported that 58% of Ohio and 61% of U.S. adults ages 65 and over had a flu vaccine in the past year.
- 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.
- Adults have had the following vaccines: tetanus booster (including Tdap) in the past 10 years (71%), MMR in their lifetime (70%), chicken pox in their lifetime (40%), pertussis vaccine in the past 10 years (22%), Zoster (shingles) vaccine in their lifetime (18%), and human papillomavirus (HPV) vaccine in their lifetime (8%).

Preventive Health Screenings and Exams

- More than half (54%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- Three-fourths (75%) of adults had their vision checked in the past two years, and one-fourth (25%) of adults had their hearing checked in the past two years.
- In the past year, 64% of women ages 40 and over had a mammogram.
- In the past year, more than two-fifths (45%) of men ages 50 and over had a PSA test.
- See the Women's and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Geauga County adults.

Geauga County Adult Health Screening Results

GENERAL SCREENING RESULTS	Total
Diagnosed with High Blood Cholesterol	36%
Diagnosed with High Blood Pressure	27%
Diagnosed with Diabetes	9%
Survived a Heart Attack	4%
Survived a Stroke	2%

(Percentages based on all Geauga County adults surveyed)

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

HEALTHCARE TOPICS	Total
Immunizations	35%
Family History	33%
Weight Control	32%
Depression, Anxiety, or Emotional Problems	23%
Safe Use of Prescription Medication	20%
Injury Prevention Such as Safety Belt Use & Helmet Use	11%
Tobacco Use	10%
Alcohol Use	9%
Family Planning	6%
Self-Testicular Exams	6%
Safe Use of Opiate-Based Pain Medication	5%
Illicit Drug Abuse	4%
Sexually Transmitted Disease	4%
Domestic Violence	3%

Healthy People 2020

Immunization and Infectious Diseases (IID)

Objective	Geauga County 2016	Ohio 2015	U.S. 2015	Healthy People 2020 Target
IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease	81%	72%	73%	90%

*U.S. baseline is age-adjusted to the 2000 population standard (Sources: Healthy People 2020 Objectives, 2013 BRFSS, 2015 Geauga County Health Assessment)

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Had a pneumonia vaccination (ages 65 and over)	N/A	81%	72%	73%
Had a flu vaccine in the past year (ages 65 and over)	41%	83%	58%	61%

Disaster Preparedness

Geauga County households had the following disaster preparedness supplies: working flashlight and working batteries (89%); working smoke detector (87%); cell phone (84%); cell phone with texting (83%); computer/tablet (82%); home land-line telephone (63%); 3-day supply of nonperishable food for everyone in the household (60%); 3-day supply of prescription medication for each person who takes prescribed medicines (54%); working battery-operated radio and working batteries (49%); 3-day supply of water for everyone in the household (1 gallon of water per person per day) (42%); generator (34%); communication plan (19%); disaster plan (12%); and a family disaster plan (10%).

Basic Disaster Supplies Kit

A basic emergency supply kit could include the following recommended items:

- One gallon of water per person per day for at least three days, for drinking and sanitation.
- At least a three-day supply of non-perishable food.
- A working battery operated radio and working batteries.
- Flashlight and extra batteries.
- First aid kit.
- Whistle to signal for help.
- Dust mask to help filter contaminated air.
- Moist towelettes, garbage bags and plastic ties for personal sanitation.
- Cell phone with chargers, inverter or solar charger.
- Manual can opener for food.

(Source: Federal Emergency Management Agency (FEMA), Ready: Prepare. Basic Disaster Supplies Kit, Updated 6/10/2014

Who Should Get a Yearly Flu Shot?

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

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

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

Adult | SEXUAL BEHAVIOR

Key Findings

In 2016, more than two-thirds (68%) of Geauga County adults had sexual intercourse. Two percent (2%) of adults had more than one partner. 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, 2016 STD Surveillance).

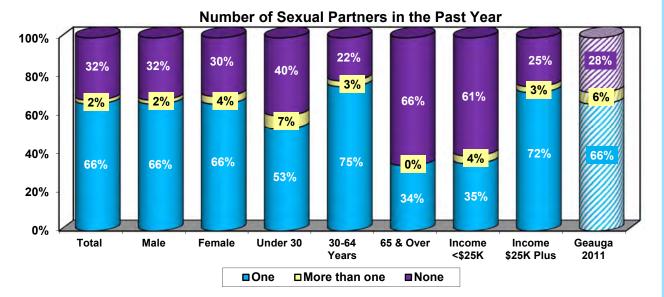
Adult Sexual Behavior

- Two percent (2%) of adults reported they had intercourse with more than one partner in the past year, increasing to 7% of those under the age of 30.
- Adults used the following methods of birth control: they or their partner were too old (26%), abstinence (15%), vasectomy (15%), condoms (10%), tubes tied (8%), birth control pill (7%), hysterectomy (7%), withdrawal (6%), infertility (4%), IUD (4%), ovaries or testicles removed (3%), rhythm method (3%), contraceptive implants (2%), and shots (<1%).
- Twelve percent (12%) of adults were not using any method of birth control.
- The following situations applied to adults in the past year: had anal sex without a condom (2%), tested for an STI (2%), had sex with someone they did not know (1%), tested positive for Hepatitis C (1%), treated for an STI (1%), had sexual activity with someone of the same gender (<1%), and thought they may have had an STI (<1%).
- Twenty percent (20%) of adults had been tested for HIV, increasing to 27% of those under the age of 30 and 35% of those with incomes less than \$25,000.
- Based on what they knew about HIV, adults made the following sexual behavior changes in the past year: only had sexual intercourse with the same partner (33%), decreased number of sexual partners or became abstinent (9%), and always used condoms for protection (8%). Fiftyone percent (51%) did not make any sexual behavior changes.
- Geauga County adults had been diagnosed with the following sexually transmitted infections (STIs) in the past 5 years: chlamydia (2%), genital herpes (2%), human papilloma virus (HPV) (2%), and Hepatitis C (<1%).

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Had more than one sexual partner in past year	5%	2%	N/A	N/A

N/A - Not available

The following graph shows the sexual activity of Geauga County adults. Examples of how to interpret the information in the graph include: 66% of all Geauga County adults had one sexual partner in the past 12 months; 2% had more than one, and 66% of males had one partner in the past year.



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

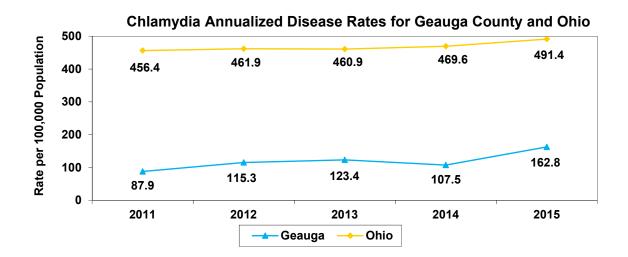
HIV in the United States

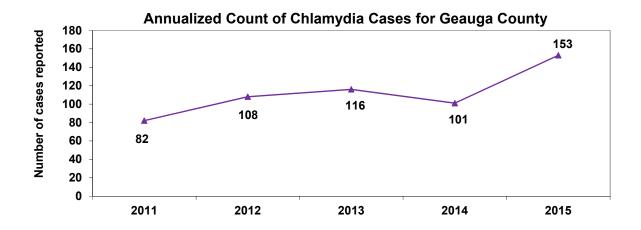
- More than 1.2 million people in the United States are living with HIV infection, and almost 1 in 8 are unaware of their infection.
- Gay and bisexual men, particularly young African American gay and bisexual men, are most affected.
- By race, African Americans face the most severe burden of HIV.
- Over the last decade, the annual number of new HIV diagnoses declined 19%.
- In 2015, an estimated 39,513 people were diagnosed with HIV infection in the United States. In that same year, an estimated 18,303 people were diagnosed with AIDS. Since the epidemic began in the 1980s, an estimated 1,216,917 people in the United States have been diagnosed with AIDS.
- An estimated 12,333 deaths (due to any cause) of people diagnosed with 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, November 2016)

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

Geauga County chlamydia rates fluctuated from 2011 to 2015.

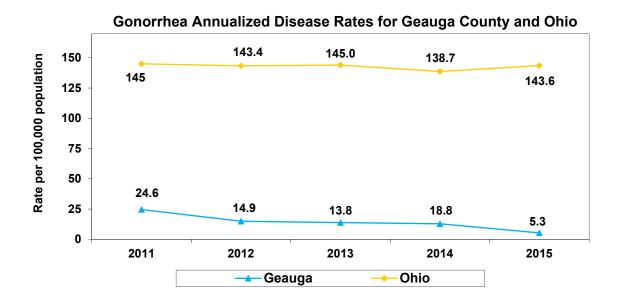


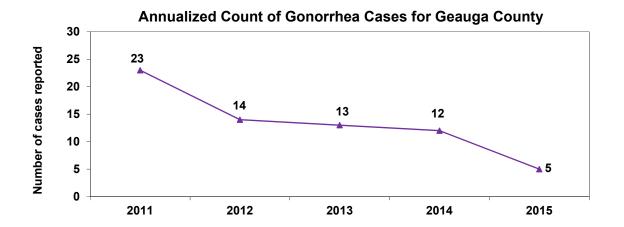


(Source for graphs: ODH, STD Surveillance, data reported through 5-16-16)

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

- The Geauga County gonorrhea rate fluctuated from 2011 to 2015.
- The Ohio gonorrhea rate fluctuated from 2011 to 2015.
- The Healthy People 2020 Objective for gonorrhea is 257 new female and 198 new male cases per 100,000 population.





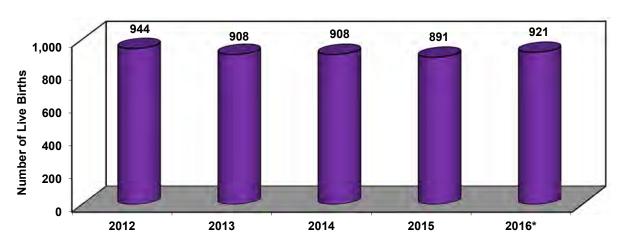
(Source for graphs: ODH, STD Surveillance, data reported through 5-16-16)

Pregnancy Outcomes

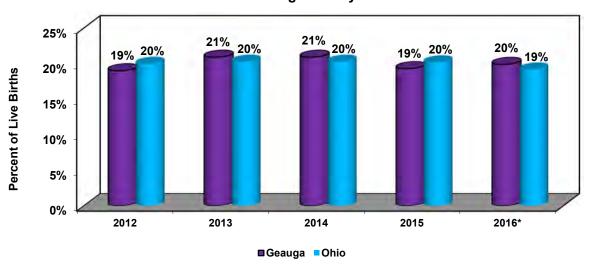
Note: Pregnancy outcome data includes all births to adults and adolescents.

From 2012-2016, there was an average of 914 live births per year in Geauga County.

Geauga County Total Live Births



Geauga County Unwed Births



(Source for graphs: ODH Information Warehouse Updated 3-12-17)
* Indicates preliminary data that may change

Adult | QUALITY OF LIFE

Key Findings

In 2016, 28% of Geauga County adults were limited in some way because of a physical, mental or emotional problem.

Impairments and Health Problems

In 2016, more than one-fourth (28%) of Geauga County adults were limited in some way because of a physical, mental or emotional problem (21% Ohio, 21% U.S., 2015 BRFSS), increasing to 44% of those with incomes less than \$25,000.

Preventing High Blood Pressure: Healthy Living Habits

By living a healthy lifestyle, you can help keep your blood pressure in a healthy range and lower your risk for heart disease and stroke. A healthy lifestyle includes:

- Eating a healthy diet
- Maintaining a healthy weight
- Getting enough physical activity
- Not smoking
- Limiting alcohol use

(Source: CDC, High Blood Pressure, July 7 2014)

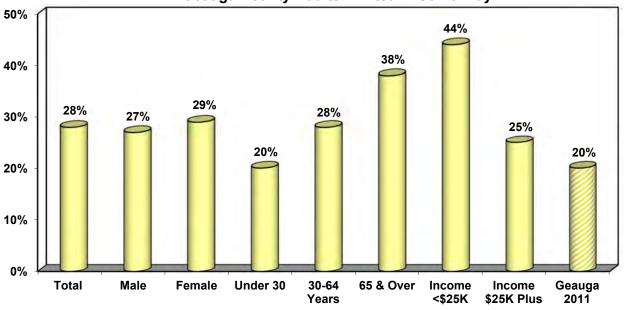
- Among those who were limited in some way, the following most limiting problems or impairments were reported: back or neck problems (44%); arthritis/rheumatism (33%); fitness level (21%); stress, depression, anxiety, or emotional problems (20%); sleep problems (19%); chronic pain (17%); walking problems (17%); chronic illness (13%); fractures, bone/joint injuries (11%); lung/breathing problems (10%); hearing problems (8%); eye/vision problems (6%); mental health illness/disorder (6%); dental problems (4%); learning disability (1%); and substance dependency (1%).
- Adults needed help with the following because of an impairment or health problem: household chores (15%), getting around for other purposes (9%), shopping (8%), doing necessary business (5%), dressing (3%), bathing (2%), getting around the house (2%), and eating (1%).
- Adults would have a problem getting the following if they needed it today: someone to help if they were sick in bed (9%), someone to loan them \$50 (7%), someone to take them to the doctor (6%), someone to talk to about their problems (6%), someone to help them pay for medical expenses (6%), someone to accompany them to their doctor appointments (5%), back-up child care (3%), and someone to explain directions from their doctor (1%).
- Adults reported that someone in their household needed assistance in the following areas as a result of confusion or memory loss: safety (1%), household activities (1%), personal care (1%), transportation (1%), and other areas (2%).
- Thirty percent (30%) of adults fell in the past 6 months, increasing to 36% of those ages 30-64.

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Limited in some way because of a physical, mental, or emotional problems	20%	28%	21%	21%

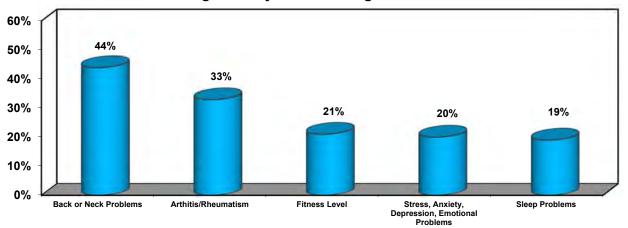


The following graphs show the percentage of Geauga County adults that were limited in some way and the most limiting health problems. Examples of how to interpret the information shown on the graph include: 28% of Geauga County adults were limited in some way, including 29% of females and 38% of individuals 65 and over.





Geauga County Most Limiting Health Problems



Adult | SOCIAL DETERMINANTS OF HEALTH

Key Findings

In 2016, 7% of Geauga County adults were abused in the past year (including physical, sexual, emotional, financial, and verbal abuse). Fifteen percent (15%) of Geauga County adults had 3 or

more adverse childhood experiences (ACEs) in their lifetime. Nearly half (48%) of adults reported having firearms in or around their homes.

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

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Economic Stability

- Seven percent (7%) of Geauga County adults needed help meeting their general daily needs such as food, clothing, shelter or paying utilities in the past month, increasing to 22% of those with incomes less than \$25,000.
- Five percent (5%) of adults were concerned about having enough food for themselves or their family, increasing to 18% of those with incomes less than \$25,000.
- Adults received assistance for the following in the past year: healthcare (12%), dental care (9%), prescription assistance (9%), food (7%), home repair (7%), Medicare (7%), utilities (6%), mental illness issues (5%), transportation (4%), employment (3%), free tax preparation (3%), legal aid services (3%), rent/mortgage (3%), affordable childcare (2%), clothing (2%), drug or alcohol addiction (2%), credit counseling (1%), and unplanned pregnancy (1%).
- Adults attempted to get assistance from the following social service agencies: Geauga County Job & Family Services (6%), friend or family member (5%), church (4%), Ravenwood Health (4%), 2-1-1/First Call for Help (2%), 9-1-1 (2%), Geauga County Board of Developmental Disabilities (2%), Geauga County Health Department (2%), United Way (2%), Catholic charities (1%), Geauga County Board of Mental Health (1%), Help Me Grow (1%), NAMI Geauga (1%), Lake Geauga Recovery Center (<1%), and WomenSafe (<1%). One percent (1%) looked for assistance but did not receive any.
- Fifty-six percent (56%) of adults reported less than 30% of their household income went to their housing. Nineteen percent (19%) reported 30-50%, and 11% reported 50% or more of their income went to housing.
- The median household income in Geauga County was \$72,264. The U.S. Census Bureau reports median income levels of \$48,138 for Ohio and \$53,657 for the U.S. (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2015).

- Eight percent (8%) of all Geauga County residents were living in poverty, and 12% of children and youth ages 0-17 were living in poverty (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2015).
- The unemployment rate for Geauga County was 4.5, as of December 2016 (Source: Ohio Department of Job and Family Services, Office of Workforce Development, Bureau of Labor Market Information).
- There were 36,683 housing units. The owner-occupied housing unit rate was 85.1%. Rent in Geauga County cost an average of \$800 per month (Source: U.S. Census Bureau, American Community Survey, 2011-2015).

Education

- Ninety-one percent (91%) of Geauga County adults 25 years and over had a high school diploma or higher (Source: U.S. Census Bureau, American Community Survey, 2011-2015).
- Thirty-seven percent (37%) of Geauga County adults 25 years and over had at least a bachelor's degree (Source: U.S. Census Bureau, American Community Survey, 2011-2015).

Social Determinants of Health

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

(Source: HealthyPeople2020, Retrieved May 19 2016)

Health and Health Care

- In the past year, 6% of adults were uninsured, increasing to 9% of those with incomes less than \$25,000 and those ages 30-64.
- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Geauga County adults.

Social and Community Context

Geauga County adults experienced the following in the past 12 months: a close family member went to the hospital (37%); death of a family member or close friend (27%); someone close to them had a problem with drinking or drugs (11%); had bills they could not pay (10%); someone in their household lost their job/had their hours at work reduced (9%); household income was cut by 50% (3%); moved to a new address (3%); were threatened or abused by someone physically, emotionally, sexually or verbally (2%); knew someone who lived in a hotel (2%); their child was threatened or abused by someone physically, emotionally, sexually or verbally (2%); became separated or divorced (1%); had someone homeless living with them (1%); were homeless (1%); and witnessed someone in their family being hit or slapped (1%).

- Adults experienced the following adverse childhood experiences (ACEs): lived with someone who was a problem drinker or alcoholic (20%); a parent or adult in their home swore at, insulted, or put them down (16%); their parents became separated or were divorced (14%); lived with someone who was depressed, mentally ill, or suicidal (13%); someone at least 5 years older than them or an adult touched them sexually (6%); a parent or adult in their home hit, beat, kicked, or physically hurt them (6%); lived with someone who used illegal stress drugs, or who abused prescription medications (5%); their family did not look out for each other, feel close to each other, or support each other (5%); someone at least 5 years older than them or an adult tried to make them touch them sexually (3%); their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (3%); did not have enough to eat, had to wear dirty clothes, and had no one to protect them (2%); lived with someone who served time or was sentenced to serve time in prison, jail or other correctional facility (2%); someone at least 5 years older than them or an adult forced them to have sex (2%); and their parents were not married (1%).
- Fifteen percent (15%) of Geauga County adults had 3 or more ACEs in their lifetime, increasing to 18% of females and 19% of those ages 30-64.

Adverse Childhood Experiences (ACE)

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

o Depression o Early initiation of smoking o Risk for intimate partner violence

o Fetal death o COPD o Alcoholism and alcohol abuse

o Illicit drug use o Unintended pregnancies o Multiple sexual partners

o Liver disease o Suicide attempts o STD's

- Given the high prevalence of ACEs, efforts are needed at the state and local level to reduce and prevent childhood maltreatment and associated family dysfunction in the US.
- Studies are finding that there is a repetitive dose-response relationship between ACE and levels of exposure. A dose-response means that as the dose of the stressor increases, the intensity of the outcome will increase as well. As the number of ACEs increase so does the risk for the following:

o Myocardial Infarction o Asthma o Diabetes

o Mental Distress o Disability o Stroke

o Unemployment o Lowered educational attainment

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

- Two percent (2%) of Geauga County adults were threatened by the following individuals in the past year: a spouse or partner (57%), someone outside their home (29%), a child (14%), and a parent (14%).
- Seven percent (7%) of Geauga County adults were abused in the past year by the following: a spouse or partner (48%), someone outside their home (30%), a child (15%), a parent (7%), and someone else (22%).

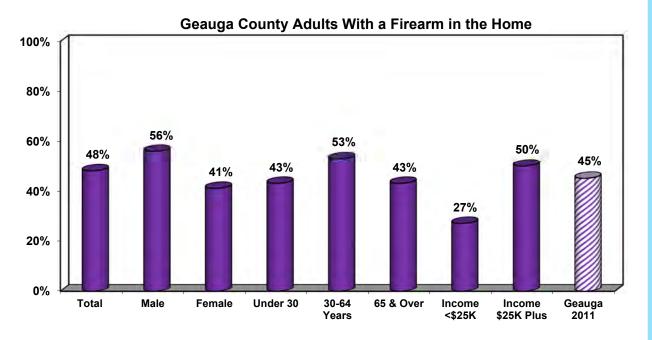
- Adults who were abused were abused in the following ways: emotionally (74%), verbally (70%), financially (19%), physically (19%), through electronic methods (7%), and sexually (4%).
- Adults indicated they or a family member had the following literacy needs: learning computer skills (6%); reading and understanding instructions (2%); reading a map, signs, food ingredient labels, etc. (2%); and completing a job application (1%).

Neighborhood and Built Environment

- Nearly half (48%) of Geauga County adults kept a firearm in or around their home. Three percent (3%) of adults reported they were unlocked and loaded.
- Forty-seven percent (47%) of Geauga County adults thought their neighborhood was extremely safe from crime. Forty-five percent (45%) reported their neighborhood was quite safe, 6% said slightly safe, and 1% reported not at all safe from crime.
- Adults reported doing the following while driving: eating (41%); talking on hands-free cell phone (41%); talking on hand-held cell phone (37%); having kids in the car (28%); having pets in the car (25%); playing loud music (21%); texting (11%); not wearing a seatbelt (7%); using internet on their cell phone (6%); being under the influence of alcohol (3%); being under the influence of prescription drugs (2%); reading (1%); being under the influence of recreational drugs (<1%); and other activities (such as applying makeup, shaving, etc.) (2%).
- Eighty-four percent (84%) of adults reported always wearing a seat belt in the car, and 1% reported never wearing a seat belt.
- Adults had the following transportation issues: could not afford gas (3%), no car (2%), suspended/no driver's license (1%), disabled (1%), limited public transportation available or accessible (1%), no public transportation available or accessible (1%), no car insurance (1%), did not feel safe to drive (1%), and other car issues/expenses (2%).
- Geauga County adults thought the following threatened their health in the past year:
 - o Insects (9%)
 - Moisture issues (6%)
 - Mold (6%)
 - Rodents (5%)
 - Chemicals found in products (3%)
 - Indoor air quality (3%)
 - Temperature regulation (3%)
 - Unsafe water supply/wells (3%)
 - Lice (2%)

- Plumbing problems (2%)
- o Radon (2%)
- Sewage/waste water problems (2%)
- Agricultural chemicals (1%)
- Asbestos (1%)
- Lead paint (1%)
- Outdoor air quality (1%)
- Safety hazards (1%)
- Fracking (<1%)

The following graph shows the percentage of Geauga County adults that had a firearm in the home. Examples of how to interpret the information shown include: 48% of all Geauga County adults kept a firearm in their home, including 56% of males and 53% of those ages 30-64.



Adult | MENTAL HEALTH AND SUICIDE

Key Findings

In 2016, 3% of Geauga County adults considered attempting suicide. Eleven percent (11%) of adults rated their daily stress level as high or very high.

Adult Mental Health

- Three percent (3%) of Geauga County adults considered attempting suicide in the past year.
- No adults reported attempting suicide in the past year.
- When feeling sad, blue, or depressed, Geauga County adults also had a period of two or more weeks when they experienced the following issues: fatigued, no energy (25%); had trouble sleeping or slept too much (21%); woke up before they wanted (15%); had trouble thinking or concentrating (14%); lost interest in most things (11%); felt extremely restless or slowed down (9%); felt worthless or hopeless (9%); had a weight/appetite change (7%); and thought about death or suicide (4%).
- Adults reported they or a family member had been diagnosed with or treated for the following mental health issues: anxiety or emotional problem (21%), depression (17%), anxiety disorder (13%), attention deficit disorder (8%), bipolar disorder (7%), alcohol and illicit drug abuse (5%), developmental disability (3%), autism spectrum (3%), other trauma (2%), psychotic disorder (2%), post-traumatic stress disorder (2%), eating disorder (1%); life adjustment disorder (1%), and another mental health disorder (3%). Seventeen percent (17%) of adults indicated they or a family member had taken medication for a mental health issues.
- Adults indicated the following caused them anxiety, stress or depression: job stress (43%), financial stress (31%), other stress at home (16%), death of close family member or friend (13%), sick family member (12%), marital/dating relationship (12%), poverty/no money (9%), caring for parent (8%), fighting at home (6%), family member with mental illness (5%), unemployment (4%), divorce/separation (2%), not feeling safe in the community (1%), not having enough to eat (1%), not having a place to live (1%), sexual orientation/gender identity (1%), not feeling safe at home (<1%), and other stressors (11%).
- One-in-ten (11%) Geauga County adults rated their stress level on a typical day as high or very high. Forty percent (40%) of adults rated their stress level as low or very low.

Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Considered attempting suicide in the past year	2%	3%	N/A	N/A

N/A - Not available

Suicide Facts

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

(Sources: American Association of Suicidology, Facts & Statistics. Updated in 2015)

Adult | ORAL HEALTH

Key Findings

Nearly four-fifths (79%) of Geauga County adults had visited a dentist or dental clinic in the past year. The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.

Access to Dental Care

Geauga County Dental Care Resources – 2012

- Number of licensed dentists- 47
- Number of primary care dentists- 41
- Ratio of population per dentist- 1,993:1
- Number of dentists who treat Medicaid patients- 6
- Ratio of Medicaid population per dentist who treats Medicaid patients- 1,379:1

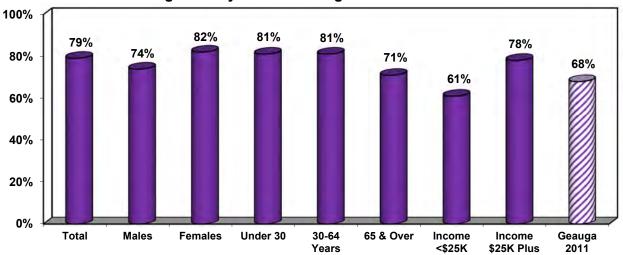
(Source: http://publicapps.odh.ohio.gov/oralhealth/default.aspx)

- In the past year, 79% of Geauga County adults had visited a dentist or dental clinic, decreasing to 61% 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.
- More than four-fifths (86%) of Geauga County adults with dental insurance had been to the dentist in the past year, compared to 70% of those without dental insurance.
- When asked the main reason for not visiting a dentist in the last year, 33% said cost; 22% had no oral health problems or had not thought of it; 14% had dentures, 10% said fear, apprehension, nervousness, pain, and dislike going; 4% could not get into a dentist; 2% said their dentist did not accept their medical insurance; 2% could not find a dentist who took Medicaid; and 1% did not have/know a dentist.

Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never				
Time Since Last Visit to Dentist/Dental Clinic									
Males	74%	8%	6%	8%	1%				
Females	82%	6%	6%	5%	1%				
Total	79%	7%	6%	6%	1%				

The following graph provides information about the frequency of Geauga County adult dental visits. Examples of how to interpret the information on the graph include: 79% of all Geauga County adults had been to the dentist in the past year including 81% of those under the age of 30 and 61% of those with incomes less than \$25,000.

Geauga County Adults Visiting a Dentist in the Past Year



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

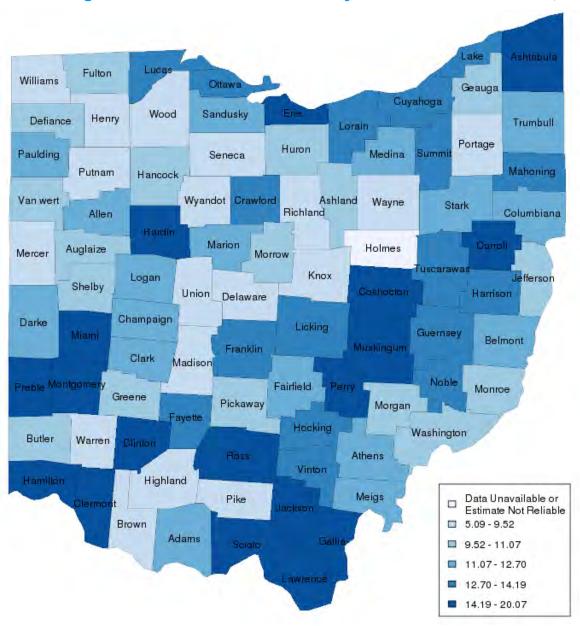
Adult Comparisons	Geauga County 2011	Geauga County 2016	Ohio 2015	U.S. 2015
Adults who have visited the dentist in the past year	68%	79%	65%*	65%*

^{*2014} BRFSS

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

- 5% of Geauga County adults, ages 19 years and older, had unmet needs in dental care.
- 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: The Adult Ohio Medicaid Assessment Survey (OMAS) Dashboard, 2015)

HILD HEALTH & FUNCTION

Child | HEALTH & FUNCTIONAL STATUS

Key Findings

In 2016, 96% of Geauga County parents of 0-11 year olds rated their child's health as excellent or very good. Thirty-three percent (33%) of children were classified as obese by Body Mass Index (BMI) calculations. Eighty-three percent (83%) of parents had taken their child ages 2-11 to the dentist in the past year. Twelve percent (12%) of parents reported their child had been diagnosed with asthma.

National Survey of Children's Health 2011/12

- 6% of Ohio children ages 0-5 were diagnosed with asthma, increasing to 10% of 6-11 year olds.
- 12% of Ohio children ages 6-11 were diagnosed with ADD/ADHD.

(Source: National Survey of Children's Health, 2011/12)

Health of Children Ages 0-11

- In 2016, 96% of parents rated their child's health as excellent or very good. Four percent (4%) of parents rated their child's health as fair or poor.
- One-third (33%) of children were classified as obese by Body Mass Index (BMI) calculations.
 Fourteen percent (14%) of children were classified as overweight, 45% were normal weight, and 8% were underweight.
- Children ate the following for breakfast: cereal (79%), milk (60%), toast (45%), eggs (40%), fruit/fruit juice (36%), oatmeal (31%), yogurt (30%), bacon/ham/sausage (26%), Pop Tart/donut/pastry (19%), pizza (1%) soda pop (<1%), and other (14%). Three percent (3%) of children ate at the school breakfast program. Three percent (3%) of children ate nothing for breakfast.</p>
- Children spent an average of 1.4 hours watching TV, 1.1 hours on a computer or tablet, and
 0.5 hours playing video games on an average day of the week.
- Outside of the regular school day, children spent an average of 1.4 hours reading, 0.3 hours on the cell phone, and 2.1 hours participating in extra-curricular activities on an average day of the week.
- Over four-fifths (83%) of children ages 2 and older had been to the dentist in the past year.
- Parents gave the following reasons for not getting dental care for their child: child was not old enough to go to the dentist (7%), cost (7%), no referral (4%), no insurance (3%), no convenient times/could not get appointment (2%), treatment was ongoing (2%), dissatisfaction with dentist (1%), child refused to go (1%), could not find a dentist who accepted their insurance (<1%), health plan problem (<1%), did not know where to go for treatment (<1%), missed an appointment and was not allowed to go back to clinic (<1%), and other (4%). No one reported having had transportation problems or not having had dental services available in the area.
- Parents reported their children had the following allergies: environmental allergies (22%), animal allergies (6%), milk (4%), peanuts (3%), gluten (2%), red dye (1%), eggs (1%), wheat (1%), bees (1%), other food allergies (3%), and other (5%). Of those with allergies, 3% of parents had an Epi-pen for their child's allergy.

- A doctor told parents their child had the following condition(s):
 - Asthma (12%)
 - Dental problems (10%)
 - Speech and language delays (9%)
 - Pneumonia (6%)
 - ADD/ADHD (5%)
 - Urinary tract infection (5%)
 - Anxiety problems (5%)
 - Learning disability (5%)
 - Bone/joint/muscle problems (4%)
 - Developmental delay or physical impairment (3%)
 - Head injury (3%)
 - Vision problems that cannot be corrected with glasses (3%)
 - Hearing problems (3%)
 - Behavioral/conduct problem (2%)
 - Genetic disease (2%)

- o Epilepsy (2%)
- Other life threatening illness (2%)
- Depression problems (2%)
- o Birth defect (2%)
- Intellectual disability/mental retardation (2%)
- Autism (1%)
- Appendicitis (1%)
- Digestive tract infections (1%)
- Fetal Alcohol Syndrome (1%)
- Cerebral palsy (1%)
- Cancer (1%)
- Addiction disorder (1%)
- Diabetes (1%)
- Neonatal Abstinence Syndrome (1%)
- Sixteen percent (16%) of children had one or more health condition.
- Seven percent (7%) of parents reported their children had an episode of asthma or had an asthma attack.

Child Comparisons	Geauga County 2011 Ages 0-5	Geauga County 2016 Ages 0-5	Ohio 2011/12 Ages 0-5	U.S. 2011/12 Ages 0-5	Geauga County 2011 Ages 6-11	Geauga County 2016 Ages 6-11	Ohio 2011/12 Ages 6-11	U.S. 2011/12 Ages 6-11
Rated health as excellent or very good	96%	96%	89%	86%	96%	96%	86%	83%
Dental care visit in past year	45%	63%	50%	54%	77%	85%	92%	88%
Diagnosed with asthma	6%	10%	6%	6%	11%	12%	10%	10%
Diagnosed with ADHD/ADD	1%	0%	N/A	2%*	10%	7%	12%	9%
Diagnosed with behavioral or conduct problems	4%	1%	N/A	2%*	4%	2%	5%	4%
Diagnosed with vision problems that cannot be corrected	3%	1%	N/A	<1%	2%	3%	N/A	2%
Diagnosed with bone, joint, or muscle problems	2%	3%	N/A	1%	2%	5%	N/A	2%
Diagnosed with epilepsy	2%	3%	N/A	<1%	1%	2%	N/A	1%
Diagnosed with a head injury	2%	1%	N/A	<1%	3%	4%	N/A	<1%
Diagnosed with diabetes	1%	1%	N/A	N/A	<1%	1%	N/A	<1%
Diagnosed with depression	1%	1%	N/A	<1%*	2%	3%	N/A	2%

N/A - Not available

^{* -} Ages 2-5

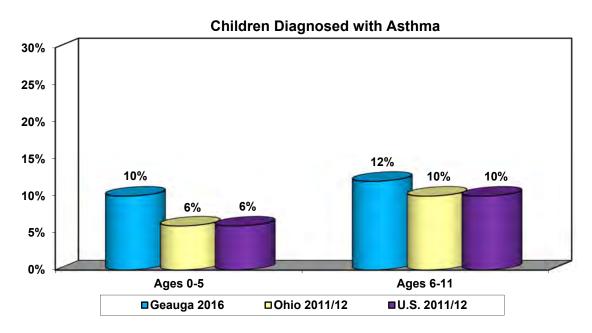
Children's Dental Health

- Dental disease remains a common problem among Ohio's children; 51% of children have experienced tooth decay by third grade.
- Dental care remains the single most common unmet health care need for nearly 157,400 children in Ohio, regardless of family income.
- Almost 486,000 (19%) of Ohio's children are without dental insurance; this is four times the number of children without medical insurance.
- Almost 340,000 children in Ohio have never been to the dentist.
- The overall percentage of children in Ohio with dental sealants has increased; however, children in rural/non-Appalachian counties are significantly less likely to have dental sealants.

(Source: ODH, Oral Health Isn't Optional, 2011)

Asthma

The following graph shows that Geauga County had a higher percentage of children ages 0-5 and 6-11 who were diagnosed with asthma than both Ohio and the U.S.



Attention-Deficit / Hyperactivity Disorder (ADHD)

- 5% of school-aged children have ADHD. However, studies have estimated higher rates in community samples.
- Parents report that approximately 11% of children 4-17 years of age (6.4 million) have been diagnosed with ADHD as of 2011.
- Parent-reported ADHD diagnosis in Ohio was 14.2%
- Rates of ADHD diagnosis increased an average of 3% per year from 1997 to 2006 and an average of 5% per year from 2003 to 2007.
- Boys (13.2%) were more likely than girls (5.6%) to have ever been diagnosed with ADHD.
- Rates of ADHD diagnosis increased at a greater rate among older teens as compared to younger children.
- The highest rates of parent-reported ADHD diagnosis were noted among children covered by Medicaid and multiracial children.

(Source: CDC, Attention-Deficit / Hyperactivity Disorder (ADHD), 12/10/2014)

Child | HEALTH INSURANCE, ACCESS, UTILIZATION AND MEDICAL HOME

Key Findings

In 2016, 1% of Geauga County parents reported their 0-11 year old did not have health insurance. Eighty-seven (87%) of parents reported they had one or more person they think of as their child's personal doctor or nurse. Twenty-nine percent (29%) of parents reported at least one emergency room visit due to accidents, injury or poisonings.

Health Insurance

 One percent (1%) of parents reported that their child did not currently have health insurance.

National Survey of Children's Health 2011/12

- 7% of 0-5 year old and 5% of 6-11 year old Ohio children were without insurance at some time in the past year.
- 40% of 0-5 year old and 34% of 6-11 year old Ohio children had public insurance.
- 94% of 0-5 year old and 86% of 6-11 year old Ohio children had been to the doctor for preventive care in the past year.

(Source: National Survey of Children's Health, 2011/12)

- Children had the following types of health insurance: parent's employer (60%); someone else's employer (15%); Medicaid, Buckeye, or other public health benefits (8%); self-paid (6%); Insurance Marketplace (1%); Medicare (<1%); or some other source of insurance (10%).</p>
- Parents reported their child's health insurance covered the following: hospital stays (88%), well visits (85%), immunizations (85%), doctor visits (84%), prescription coverage (82%), mental health (81%), dental (76%), therapies (75%), and vision (66%).

Access and Utilization

- Six percent (6%) of parents reported the following reasons their child did not get all of the medical care they needed in the past year: cost (3%), no referral (2%), treatment is ongoing (1%), inconvenient times/could not get an appointment (1%), no insurance (1%), health plan problem (1%), not available in area (1%), could not find a doctor who accepted child's insurance (<1%), transportation problems (<1%), and other reasons (1%).
- Fifteen percent (15%) of parents reported their child did not get all of the prescription medications they needed in the past year for the following reasons: their child did not need prescription medication (13%), no referral (3%), cost (1%), no insurance (1%), health plan problem (1%), inconvenient times/could not get an appointment (<1%), treatment is ongoing (<1%), transportation problems (<1%), and other reasons (<1%).
- Parents reported at least one emergency room visit due to the following: accidents, injury or poisonings (29%); fever/cold/flu (14%); doctor's office told them to go (11%); broken bones (9%); ear infections (6%); asthma (4%); dental issues (3%); primary care (2%); and other sick visits (13%).

Medical Home

Nearly nine out of ten (87%) parents reported they had one or more person they think of as their child's personal doctor or nurse.

- In 2016, 99% of Geauga County parents reported that their child had one particular place they usually went if they were sick or needed advice about their health. They reported the following places: a private doctor's office (95%), an urgent care center (1%), an in-store health clinic (1%), a community health center (1%), a hospital emergency room (<1%), and some other kind of place (1%).
- Geauga County children were referred to the following specialists: ear, nose, and throat (ENT) doctor (22%); allergist (14%); pediatric ophthalmologist (13%); dermatologist (7%); cardiologist (heart doctor) (6%); neurologist (6%); psychiatrist (5%); developmental pediatrician (2%); endocrinologist (diabetes doctor) (3%); oncologist (<1%); and other specialist (11%).</p>
- Seventeen percent (17%) of parents reported their child needed the following special services in the past year: speech therapy (7%), counseling (4%), special education (4%), medical equipment (such as a wheelchair) (4%), physical therapy (3%), occupational therapy (3%), respite care (1%), psychiatry (1%), home health nursing (1%), and out of home care (1%).
- Five percent (5%) of Geauga parents reported their child needed more than one type of special service, increasing to 9% of those with less than \$25,000.

Child Comparisons	Geauga County 2011 Ages 0-5	Geauga County 2016 Ages 0-5	Ohio 2011/12 Ages 0-5	U.S. 2011/12 Ages 0-5	Geauga County 2011 Ages 6-11	Geauga County 2016 Ages 6-11	Ohio 2011/12 Ages 6-11	U.S. 2011/12 Ages 6-11
Had public insurance	8%	17%	40%	44%	8%	5%	34%	37%
Have a personal doctor or nurse	79%	88%	91%	91%	81%	87%	93%	90%

Child | EARLY CHILDHOOD (0-5 YEAR OLDS)

Key Findings

The following information was reported by parents of 0-5 year olds. Seventy-seven percent (77%) of mothers received prenatal care within the first three months during their last pregnancy. Sixty-one percent (61%) of parents put their child to sleep on his or her back. Seventeen percent (17%) of mothers never breastfed their child.

Progress on Childhood Obesity

- 1 in 8 preschoolers is obese in the US.
- Obesity among low-income preschoolers declined, from 2008 through 2011, in 19 of 43 states and territories.
- Children who are overweight or obese as preschoolers are 5 times as likely as normal weight children to be overweight or obese as adults.

(Source: CDC, Progress on Childhood Obesity, August 2013)

Early Childhood

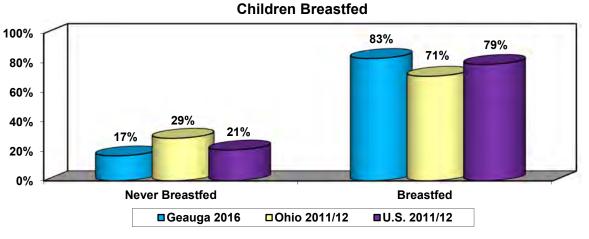
- The following information was reported by parents of 0-5 year olds.
- During their last pregnancy, mothers did the following: took a multi-vitamin with folic acid (80%), got prenatal care within the first 3 months (77%), got a dental exam (50%), took folic acid during pregnancy (22%), took folic acid pre-pregnancy (13%), experienced depression during or after pregnancy (12%), received WIC services (7%), smoked cigarettes (3%), and drank alcohol (2%).
- Thinking back to their last pregnancy, parents felt the following ways about becoming pregnant: they wanted to be pregnant then (51%), they wanted to be pregnant sooner (20%), they wanted to be pregnant later (13%), and they didn't want to be pregnant (5%).
- When asked how parents put their child to sleep as an infant, 61% said on their back, 18% said on their stomach, 15% said on their side, 4% said in bed with them or another person, and 2% said various methods.
- Mothers breastfed their child: less than three months (21%), 4 to 6 months (12%), 7 to 9 months (11%), 10 to 12 months (28%), and more than one year (12%). Seventeen percent (17%) reported having never breastfed their child.
- One-third (33%) of mothers on a public insurance program, such as Medicaid, never breastfed.
- Parents reported using the following in the past year: park district (57%), library programs (50%), Bible School/VBS/Sunday School (33%), kindergarten readiness programs (23%), health department immunization clinics (22%), Devereaux Early Childhood Assessment (16%), breastfeeding counseling (15%), newborn home visits (13%), Dinoschool/Incredible Years (11%), car seat technician (7%), Help Me Grow (7%), and Head Start (4%).

Child Comparisons	Geauga County 2011 0-5 years	Geauga County 2016 0-5 years	Ohio 2011/12 0-5 years	U.S. 2011/12 0-5 years
Never breastfed their child	N/A	17%	29%	21%

Breastfeeding

The following graph shows the percent of infants who had been breastfed or given breast milk from Geauga County, Ohio, and U.S.

 Geauga County has a larger percent of children who had been breastfed for any length of time, compared to Ohio and the U.S.



(Source: National Survey of Children's Health, Data Resource Center, and 2016 Geauga County Health Assessment)

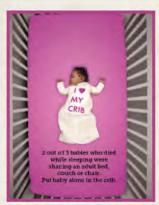
Facts about Breastfeeding

- 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 regard 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 infants are breastfed exclusively for about the first 6 months and 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, 8/22/16 and American Academy of Pediatricians Breastfeeding Benefits Your Baby's Immune System, 5/11/2013)

ABCs of Safe Sleep

Every week in Ohio, 3 babies die in unsafe sleep environments





Share the room, not the bed. Always place your baby alone in a crib, bassinet, or play yard with a firm mattress. The safest place for your baby to sleep is in your room (within arm's reach), but not in your bed. This way, you can easily breastleed and bond with your baby. Never nap on a couch or chair while holding your baby and don't lay your baby down on adult beds, chairs, sofas, waterbeds, air mattresses, pillows, or cushions.

You should never share the bed with your baby because:

- You can roll too close to or onto your baby while she sleeps.
- Babies can get stuck between the mattress and the wall, headboard, footboard or other furniture.
- Your baby could fall off the bed and get hurt, or fall onto something on the floor and suffocate.





Back is best for baby. Always put your baby to sleep on his back. Healthy babies naturally swallow or cough up their spit up, so your baby will not choke if he's on his back.

It's also safer for your baby to wake up often during the night on his back. If your baby is sleeping on his tummy and needs to take a deep breath, it could be dangerous because:

- . He may be unable to move his head.
- His mouth or nose may be blocked and he could suffocate, even in a bare crib.
- The air people breathe out is filled with carbon dioxide, or "bad air," and your baby could keep breathing "bad air" and suffocate.





Bare is Best. Many parents believe their baby won't be safe and warm without bumper pads, blankets, pillows, and stuffed animals, but these items can be deadly. Babies can suffocate on any extra item in the crib.

Place your baby to sleep in a safety-approved crib with a firm mattress covered by a fitted sheet. Sleep clothing like fitted, appropriate-sized sleepers and sleep sacks, are safer for baby than blankets!

If you use a safety-approved crib, baby's hand or foot won't get caught. Many parents think baby will get hurt if they don't use bumper pads, but this isn't true because:

- Babies don't have enough strength to hurt themselves.
- No babies have seriously hurt themselves by getting stuck between the crib railings.

(Source: Ohio Department of Health, Infant Safe Sleep)

Sudden Infant Death Syndrome (SIDS)

SIDS is the diagnosis given when an infant under one year of age dies suddenly, and the incident cannot be explained by recent illness, medical history, an autopsy or the death scene itself. Risk factors for SIDS have been identified and include:

- Sleeping in the prone position (stomach sleeping)
- Soft bedding or unsafe beds (couches, daybeds, waterbeds)
- Loose bedding such as blankets and pillows
- Overheating due to clothing, blankets or room temperature
- Mother's age younger than 20 years
- Mother smoking during pregnancy
- Exposure to secondhand smoke
- Mother receiving late or no prenatal care
- Premature birth or low birth weight

(Source: National Sleep Foundation, Sudden Infant Death Syndrome and Sleep)

Child | MIDDLE CHILDHOOD (6-11 YEARS OLD)

Key Findings

The following information was reported by Geauga County parents of 6-11 year olds. In 2016, 77% of Geauga County parents reported their child always felt safe at school. Nine percent (9%) of parents reported their child was bullied at some time in the past year. Twenty-one percent (21%) of parents reported their child had an email or a social network account.

Middle Childhood

 The following information was reported by Geauga County parents of 6-11 year olds.

National Survey of Children's Health 2011/12

- 10% of Ohio and 9% of U.S. parents of 6-11 year olds reported their child watched 4 or more hours of TV or played video games each day.
- 83% of Ohio and 79% of U.S. parents of 6-11 year olds reported their child participated in one or more organized activities outside of school
- 96% of Ohio and 94% of U.S. parents of 6-11 year olds reported they felt their child was usually or always safe at school.

(Source: National Survey of Children's Health, 2011/12)

- Nearly four-fifths (79%) of parents reported their child participated in extracurricular activities in the past year. Their child participated in the following: a sports team or sports lessons (65%), a religious group (27%), a club or organization such as Scouts (24%), Boys/Girls Club (2%), and some other organized activity (33%). Forty-eight percent (48%) of children participated in more than one activity.
- Geauga County children were enrolled in the following types of schools: public (65%), private (33%) and home-schooled (2%).
- Over three-quarters (77%) of parents reported they felt their child was always safe at school.
 Twenty-two percent (22%) reported their child was usually safe, and 1% reported they felt their child was never safe at school.
- Parents thought their child was unsafe at school for the following reasons: fear of bullying (11%); fear of other children who demonstrate unusual behavior (7%); buildings are not secure (4%); bomb threats (4%); and drug/alcohol activity (3%). Five percent (5%) of parents had more than one safety concern.
- Nine percent (9%) of parents reported their child was bullied in the past year. The following types of bullying were reported:
 - 23% were verbally bullied (teased, taunted or called harmful names)
 - o 12% were indirectly bullied (spread mean rumors about or kept out of a "group")
 - o 5% were physically bullied (they were hit, kicked, punched or people took their belongings)
 - o 1% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
 - No parents reported their child was 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)
- Five percent (5%) of parents reported they did not know if their child was bullied.

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- Over one-fifth (21%) of parents reported their child had a social network account. Of those who had an account, they reported the following: they had their child's password (71%), they knew all of the people on their child's "friends" list (61%), and their child's account was checked private (57%). Four percent (4%) of parents reported they did not know if their child had a social network account.
- Parents discussed the following topics with their child in the past year: screen time (58%), eating habits (55%), tobacco use (38%), alcohol use (38%), body image (32%), marijuana and other drugs (29%), refusal skills (28%), prescription drug misuse (13%), dating and relationships (13%), abstinence and how to refuse sex (10%), condoms/safe sex/STD prevention (3%) and birth control (3%). Twenty percent (20%) of parents did not discuss any of the topics with their child.
- Nine percent (9%) of parents had contacted the following agencies to help with problems they had with their child: child's school (4%), mental health (4%), children's services (2%), faith-based agency (1%), law enforcement (1%), and juvenile court (1%).
- Parents reported their child had the following unsupervised time after school on an average school day: less than one hour (23%), 1-2 hours (9%), 3-4 more hours (3%) and more than 4 hours (1%). Sixty-five percent (65%) of parents reported their child was never unsupervised.
- Parents believed that reproductive system education should be covered in the following grades: K-2 (4%), 3-5 (34%), 6-8 (48%), and 9-12 (9%). Five percent (5%) said it should not be covered at all.
- Parents believed that abstinence and refusal skills education should be covered in the following grades: K-2 (7%), 3-5 (20%), 6-8 (61%), and 9-12 (10%). Three percent (3%) said it should not be covered at all.
- Parents believed that birth control and condom use education should be covered in the following grades: K-2 (1%), 3-5 (4%), 6-8 (47%), and 9-12 (33%). Fourteen percent (14%) said it should not be covered at all.

Child Comparisons	Geauga County 2011 6-11 Years	Geauga County 2016 6-11 Years	Ohio 2011/12 6-11 Years	U.S. 2011/12 6-11 Years
Parent felt child was usually/always safe at school	98%	99%	96%	94%

^{*2007} National Survey of Children's Health

Child | FAMILY FUNCTIONING, NEIGHBORHOOD AND COMMUNITY CHARACTERISTICS

Key Findings

In 2016, 35% of parents reported that every family member who lived in their household ate a meal together every day of the week. Nineteen percent (19%) of parents reported they or someone in the family reads to their child every day.

Family Functioning

- Parents or family members took their children on any kind of outing, such as to
 - the park, library, zoo, shopping, church, restaurants, or family gatherings an average of 4.8 times per week.
- Over one-third (38%) of parents reported their child attended religious services three or more times per month, and 34% reported one to two times per month. Twenty-nine percent (29%) of parents reported their child has never attended a religious service. Parents reported their child attended religious services an average of 2.7 times per month.
- Thirty-five percent (35%) of parents reported that every family member who lived in their household ate a meal together every day of the week. Families ate a meal together an average of 4.8 times per week.
- In the past year, parents reported that someone in the household received the following: mental health/substance abuse treatment (4%), benefits from WIC program (3%), free or reduced cost breakfast or lunches at school (3%), SNAP/food stamps (2%), Help Me Grow (2%), subsidized childcare through Geauga County JFS (1%), cash assistance from a welfare program (1%), and Head Start/Early Head Start (1%).
- One percent (1%) of parents reported their child went to bed hungry at least one day per week because they did not have enough food.
- Parents reported they or someone in their family reads to their child: every day (19%), almost every day (18%), a few times a week (18%), a few times a month (9%), and a few times a year (3%). Twenty-seven percent (27%) of parents reported their child reads to themselves. One percent (1%) reported never reading to their child due to lack of interest from the child.
- Parents reported their child regularly attended the following: elementary school (66%); child care in their home provided by a relative other than a parent/guardian (20%); nursery school, pre-school, or kindergarten (15%); child care in their home provided by a baby sitter (13%); child care outside of their home provided by a relative other than a parent or guardian (12%); child care center (10%); family-based child care outside of home (3%); and Head Start or Early Start program (1%).
- Parents reported the following forms of discipline they used for their child: take away privileges (78%), time out (46%), yelling (35%), grounding (32%), spanking (27%), wash mouth out (4%) and other method (10%).
- Ninety-seven percent (97%) of parents reported their child slept 7 or more hours per night.

National Survey of Children's Health 2011/12

- 63% of Ohio and 61% of U.S. parents of 0-5 year olds reported their family ate a meal together every night of the week.
- 29% of 0-5 year old and 34% of 6-11 year old Ohio children lived in a household with someone who smokes.

(Source: National Survey of Children's Health, 2011/12)



- Parents reported the following challenges they face in regards to the day-to-day demands of parenthood/raising children: demands of multiple children (45%), financial burdens (19%), child has special needs (6%), loss of freedom (4%), alcohol and/or difficulty with lifestyle changes (4%), being a single parent (3%), post-partum depression (2%) and drug abuse (1%). Twenty percent (20%) of parents reported having more than one challenges.
- Parents felt they were coping with the day-to-day demands of parenthood very well (54%), somewhat well (44%), not very well (1%), and not well at all (1%).
- In order for their child to grow up successful, parents feel they are meeting the needs of their child very well (77%), somewhat well (23%), not very well (<1%), and not well at all (<1%).
- Parents would consider the following for parental help: parenting apps (27%), internet videos (22%), webinars (18%), parenting groups (15%), and parenting classes (12%).
- Parents reported they were very concerned with the following issues with their child: having enough time with their child (12%); child's academic achievement (10%); their relationship with their child (7%); cell phone and technology use (6%); learning difficulties with their child (5%); internet use (5%); how their child copes with stressful things (5%); their child's self-esteem (4%); their child's anxiety (4%); their child being bullied by their classmates (3%); their child getting along with others (3%); their child's depression (2%); their child talking (1%); risky behaviors (1%); eating disorders (1%); violence in the home, school or neighborhood (1%); substance abuse (1%); and their child walking, or running (<1%). Fifty-four percent (54%) of parents reported having more than one concern.
- Eighty-three percent (83%) of parents reported the primary language spoken in their home was English. Seven percent (7%) spoke German, 1% spoke Spanish, and 8% spoke another language.

Neighborhood and Community Characteristics

- Geauga County parents had the following rules about smoking in their home: no one is allowed to smoke inside their home at any time (90%), smoking is not allowed when children are present (9%), smoking is allowed anywhere (5%), and smoking is allowed in some rooms only (4%).
- Geauga County parents had the following rules about smoking in their car: no one is allowed to smoke inside their car at any time (73%), smoking is not allowed when children are present (3%), smoking is allowed as long as a window is open (<1%), and smoking is allowed anywhere (<1%).</p>
- Geauga County parents reported their child experienced the following adverse childhood experiences (ACEs): their parents became separated or were divorced (10%); lived with someone who was mentally ill or suicidal, or severely depressed for more than a couple of weeks (5%); lived with someone who had a problem with alcohol or drugs (2%); lived with a parent/guardian who served time or was sentenced to serve time in prison or jail after they were born (2%); seen or heard any parents or adults in their home hit, beat, kicked, or physically hurt each other (1%); lived with a parent/guardian who died (1%); were treated or judged unfairly because his/her ethnic group (1%); and been the victim of violence or witness violence in their neighborhood (1%).
- Two percent (2%) of children experienced three or more adverse childhood experiences.
- Parents reported their neighborhood was: always safe (66%), usually safe (34%), and never safe (<1%). Seventy-three percent (73%) of those with incomes less than \$25,000 reported their neighborhood was always safe, as compared to 67% of those with higher incomes.</p>

- Parents were concerned about their neighborhood for the following reasons: drugs/alcohol activity (9%), bullying (7%), loud/disrespectful noise levels (2%), crime (2%), gangs (<1%), and other reasons (5%).
- Over two-thirds (69%) of parents had talked to their child about what to do if he/she finds a gun. Twenty-two percent (22%) said they had not talked to their child but planned to, and 9% said they had not talked to their child because he/she is not old enough.
- Parents felt their child's school was meeting their child's educational needs very well (81%), somewhat well (16%), not very well (2%), and not well at all (1%).
- Parents felt their child's school was meeting their child's social needs very well (81%), somewhat well (18%), not very well (<1%), and not well at all (1%).</p>
- Parents felt their child's school was meeting their child's behavioral needs very well (84%), somewhat well (15%), not very well (1%), and not well at all (1%).

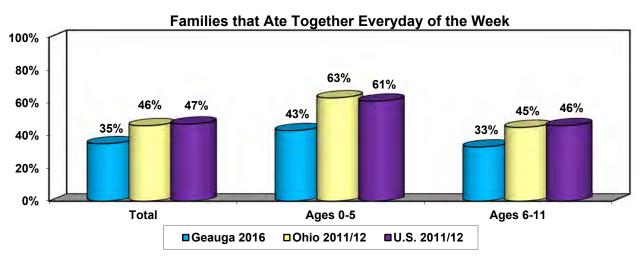
Child Comparisons	Geauga County 2011 0-5 Years	Geauga County 2016 0-5 Years	Ohio 2011/ 12 0-5 Years	U.S. 2011/12 0-5 Years	Geauga County 2011 6-11 Years	Geauga County 2016 6-11 Years	Ohio 2011/12 6-11 Years	U.S. 2011/12 6-11 Years
Parent reads to child every day	35%	44%	53%	48%	13%	12%	N/A	N/A
Family eats a meal together every day of the week	38%	43%	63%	61%	15%	33%	45%	46%
Child never attends religious services	27%	28%	N/A	N/A	18%	29%	22%	18%

N/A - Not available

Family Meals

The following graph shows the percent of Geauga County families that ate a meal together every day of the week along with the percent of Ohio and U.S. families.

 Geauga County families ate a meal together every day of the week less frequently than U.S. and Ohio families.



(Source: National Survey of Children's Health & 2016 Geauga County Health Assessment)

Adverse Childhood Experiences (ACEs)

- Childhood abuse, neglect, and exposure to other traumatic stressors which we term
 adverse childhood experiences (ACEs) 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.
- According to the CDC, 59% of people surveyed in 5 states in 2009 reported having had at least one ACE while 9% reported five or more ACEs.
- The short and long-term outcomes of these childhood exposures include a multitude of health and social problems such as:

o Depression o Alcoholism and alcohol abuse

o Fetal death o COPD

o Illicit drug use o Unintended pregnancies

o Liver disease o Suicide attempts

o STD's o Early initiation of smoking

o Multiple sexual partners o Risk for intimate partner violence

 Given the high prevalence of ACEs, additional efforts are needed at the state and local level to reduce and prevent childhood maltreatment and associated family dysfunction in the US.

Studies are finding that there is a repetitive dose-response relationship between ACEs and levels of exposure. A dose-response means that as the dose of the stressor increases, the intensity of the outcome will increase as well. As the number of ACEs increase so does the risk for the following: myocardial infarction, asthma, mental distress, disability, unemployment, stroke, diabetes, and lowered educational attainment.

(Source: Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System Survey ACE Data, 2009-2014. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2015)

Child | PARENT HEALTH

Key Findings

In 2016, 91% of parents rated their health as excellent or very good. Parents missed work an average of 0.7 days per year due to their child being ill or injured.

Parent Health

- Those filling out the survey had the following relationship to the child: mother (77%) and father (23%).
- About nine out of ten parents (91%) rated their health as excellent or very good, decreasing to 82% of parents with incomes less than \$25,000. Nine percent (9%) of parents rated their health as fair or poor.
- Eighty-six percent (86%) of parents rated their mental and emotional health as excellent or very good. Fourteen percent (14%) rated their mental and emotional health as fair or poor.
- One-fifth (20%) of mothers and 24% of fathers of 0-5 year olds rated their mental and emotional health as fair or poor.* Twelve percent (12%) of mothers and 14% of fathers of 6-11 year olds rated their mental or emotional health as fair or poor.*
- Parents missed work an average of 0.7 days per year due to their child being ill or injured, 0.5 days per year due to their child's medical appointments, 0.1 days due unreliable child care, 0.7 days due to child's chronic illness, and 0.02 days due to behavioral or emotional problems.

Child Comparisons	Geauga County 2011 0-5 Years	Geauga County 2016 0-5 Years	Ohio 2011/12 0-5 Years	U.S. 2011/12 0-5 Years	Geauga County 2011 6-11 Years	Geauga County 2016 6-11 Years	Ohio 2011/12 6-11 Years	U.S. 2011/12 6-11 Years
Mother's mental or emotional health is fair/poor	2%	20%*	7%	7%	5%	12%*	10%	8%
Father's mental or emotional health is fair/poor	13%	24%*	N/A	3%	2%	14%*	7%	5%

N/A - Not available

National Survey of Children's Health 2011/2012

- 78% of mothers of 0-5 year olds and 70% of mothers of 6-11 year olds in Ohio rated their mental and emotional health as excellent or very good.
- 83% of fathers of 0-5 year olds and 80% of fathers of 6-11 year olds in Ohio rated their mental and emotional health as excellent or very good.
- 7% of mothers of 0-5 year olds and 10% of mothers of 6-11 year olds in Ohio rated their mental and emotional health as fair or poor.
- 7% of fathers of 6-11 year olds in Ohio rated their mental and emotional health as fair or poor.

(Source: National Survey of Children's Health, 2011/12)

^{*}The response rate for this question was low compared to 2011. Please use numbers with caution.

Appendix I GEAUGA COUNTY HEALTH ASSESSMENT INFORMATION SOURCES

Source	Data Used	Website	
American Association of Suicidology	Suicide Facts	http://www.suicidology. org/Portals/14/docs/Res ources/FactSheets/2015 /2015datapgsv1.pdf	
American Cancer Society	 Electronic Cigarettes and Teenagers 	www.cancer.org	
American Cancer Society, Cancer Facts and Figures 2015. Atlanta: ACS, 2015	2015 Cancer Facts, Figures, and EstimatesNutrition Recommendations	www.cancer.org	
American College of Allergy, Asthma & Immunology	Asthma Facts	http://acaai.org/news/f acts-statistics/asthma	
American Dental Association	Oral Health in Older Adults	http://www.researcha merica.org/sites/default /files/Oral%20Health%20 in%20Older%20America ns.pdf	
American Diabetes Association	Type 1 and 2 DiabetesRisk Factors for DiabetesDiabetes Facts	www.diabetes.org	
American Heart Association, 2013	 Smoke-free Living: Benefits & Milestones 	http://www.heart.org/H EARTORG/HealthyLiving /QuitSmoking/YourNon- SmokingLife/Smoke- free-Living-Benefits- Milestones_UCM_32271 1_Article.jsp	
Arthritis at a Glance, 2016	 Arthritis: Improving the Quality of Life for People with Arthritis 	https://www.cdc.gov/c hronicdisease/resources /publications/aag/pdf/ 2016/aag-arthritis.pdf	
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	 2009 - 2015 Adult Ohio and U.S. Correlating Statistics 	www.cdc.gov	
Brady Campaign to Prevent Gun Violence	Victims of Gun Violence	http://www.bradycampai gn.org/sites/default/files/b rady-gun-deaths-fact- sheet_jan2017.pdf	

Source	Data Used	Website
Caron Pennsylvania	 Characteristics of New Marijuana Users 	https://www.caron.org /understanding- addiction/drug- addiction/marijuana
Center for Disease Control and Prevention (CDC)	 Adverse Childhood Experience(ACE) Asthma Attacks Binge Drinking Among Women Caffeinated Alcohol Beverages Cancer and Men Distracted Driving Electronic Cigarettes and Teenagers Health Care Access Among the Employed and Unemployed Health Care Access and Utilization High Blood Pressure HIV in the U.S. Heart Health and Stroke Facts Obesity Facts Oral Health Skin Cancer Prevention Smoking Facts Tips for Parents Yearly Flu Shots 	www.cdc.gov
CDC, Adolescent and School Health, 2016	Sexual Risk BehaviorYouth Physical Activity Facts	www.cdc.gov/healthy youth/
CDC, Arthritis	Key Public Health Messages	www.cdc.gov/arthritis /basics/key.htm
CDC, Injury Center: Violence Prevention 2015	Youth Suicide	https://www.cdc.gov/ ViolencePrevention/su icide/youth_suicide.ht ml
CDC, National Center for Health Statistics	Men's Health	www.cdc.gov/nchs/fa stats/
CDC, Physical Activity for Everyone	 Physical Activity Recommendations 	https://www.cdc.gov/ physicalactivity/basics /adults/
CDC, Sexually Transmitted Diseases Surveillance, 2015	 U.S. Chlamydia and Gonorrhea Rates STD's in Adolescents and Young Adults U.S. STD Surveillance Profile 	www.cdc.gov/std/stat s/

PPEZUX

Source	Data Used	Website
CDC, Vaccine Safety, Human Papillomavirus (HPV)	Human Papillomavirus	https://www.cdc.gov/h pv/parents/vaccinesaf ety.html
CDC, Wonder	 About Underlying Cause of Death, 1999-2014 	http://wonder.cdc.gov /ucd-icd10.html
Community Commons	 Cigarette Expenditures Alcohol Beverage Expenditures Beer, Wine and Liquor Stores Bars and Drinking Establishments 	www.communitycomm ons.org/
Federal Emergency Management Agency (FEMA)	Basic Disaster Supplies Kit	https://www.ready.gov /kit
Enough is Enough: Internet Safety 101	Texting While Driving Statistics and Information	www.internetsafety101. org/textinganddriving.h tm
Health Indicators Warehouse	 Heart Disease and Stroke Mortality Rates 	www.healthindicators.g ov/Indicators/Selection
Healthy People 2020: U.S. Department of Health & Human Services	 All Healthy People 2020 Target Data Points Some U.S. Baseline Statistics Predictors of Access to Health Care 	www.healthypeople.go v/2020/topicsobjectives 2020
Legacy for Health	Tobacco Fact Sheet	http://truthinitiative.org /topics/tobacco- products/e-cigarettes
MedlinePlus	 Talking to your teen about drinking 	www.nlm.nih.gov/medli neplus/ency/patientinst ructions/000505.htm
National Cancer Institute	 Age-Adjusted Cancer Mortality Rates 	http://statecancerprofil es.cancer.gov/index.ht ml
National Institute on Drug Abuse	Abuse of Prescription DrugsDrug Facts: HeroinDrug Facts: Drugged Driving	www.drugabuse.gov
National Institute of Health, Senior Health	Hearing Loss	http://nihseniorhealth.g ov/hearingloss/hearingl ossdefined/01.html

Source	Data Used	Website
Network of Care	Health IndicatorsAge-Adjusted Mortality Rates	http://Geauga.oh.net workofcare.org/ph/co unty- indicators.aspx#cat1
Office of Health Transformation	 Ohio Medicaid Assessment Survey 	http://grc.osu.edu/O MAS/2015Survey
Office of Criminal Justice Services	Crime Statistics and Crime Reports	www.ocjs.ohio.gov/cri me_stats_reports.stm
Ohio Department of Health, Information Warehouse	 Geauga County and Ohio Birth Statistics Sexually Transmitted Diseases Incidence of Cancer HIV/AIDS Surveillance Program Statistics: Access to Health Services Teen Birth Rates 	www.odh.ohio.gov/
Ohio Department of Health, Ohio Oral Health Surveillance System	 Geauga County Dental Care Resources 	http://publicapps.odh. ohio.gov/oralhealth/d efault.aspx
Ohio Department of Job & Family Services	 Geauga County and Ohio Medicaid Statistics 	http://jfs.ohio.gov/Co unty/cntypro/pdf13/G eauga.stm
Ohio Department of Public Safety	 2015 Geauga County and Ohio Crash Facts OSHP Computer-Aided Dispatch (CAD) System 	http://ohiohighwaysaf etyoffice.ohio.gov/ots o_annual_crash_facts. stm
Ohio Mental Health and Addiction Services	 Doses Per Capita 	http://mha.ohio.gov/P ortals/0/assets/Resear ch/Maps/Ohio_OARRS _Opioids_2012_v2.pdf
Ohio State Highway Patrol	Compliant DataElectronic Crash RecordsFelony Cases and Drug ArrestsGeauga County Activity Statistics	http://statepatrol.ohio. gov/
Ohio Suicide Prevention Foundation	 Suicide Deaths by Gender and Age Group 	www.ohiospf.org/cont ent.php?pageurl=ohio _statistics

PPEZUX

Source	Data Used	Website
Philadelphia Department of Public Health	Electronic Cigarette Factsheet	www.smokefreephilly. org/smokfree_philly/as sets/File/Electronic%20 Cigarette%20Fact%20S heet_2_27_14.pdf
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	 American Community Survey 5 year estimate, 2010-2014 Ohio and Geauga County 2014-2014 Census Demographic Information Ohio and U.S. Health Insurance Sources Small Area Income and Poverty Estimates Federal Poverty Thresholds 	www.census.gov
U.S. Department of Health and Human Services, Ohio Department of Mental Health	 Mental Health Services in Ohio 	www.lsc.state.oh.us/fis cal/ohiofacts/sept201 2/health&humanservic es.pdf

Appendix II I GEAUGA COUNTY ACRONYMS AND TERMS

AHS Access to Health Services, Topic of Healthy People 2020

objectives

Adult Defined as 19 years of age and older.

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

Mortality Rates distribution of the population.

Adult Binge Drinking Consumption of five alcoholic beverages or more (for

males) or four or more alcoholic beverages (for females) on

one occasion.

AOCBC Arthritis, Osteoporosis, and Chronic Back Conditions, Topic of

Healthy People 2020 objectives

BMI Body Mass Index is defined as the contrasting

measurement/relationship of weight to height.

BRFSS Behavior Risk Factor Surveillance System, an adult survey

conducted by the CDC.

CDC Centers for Disease Control and Prevention.

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

lifetime and now smokes daily or on some days.

CY Calendar Year

Digital Rectal Exam

FY Fiscal Year

HCNO Hospital Council of Northwest Ohio

Heart Disease and Stroke, Topic of Healthy People 2020

objectives

HP 2020 Healthy People 2020, a comprehensive set of health

objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and

Human Services.

Health Indicator A measure of the health of people in a community, such as

cancer mortality rates, rates of obesity, or incidence of

cigarette smoking.

High Blood Cholesterol 240 mg/dL and above

High Blood Pressure Systolic \geq 140 and Diastolic \geq 90

IID Immunizations and Infectious Diseases, Topic of Healthy

People 2020 objectives

IVP Injury and Violence Prevention, Topic of Healthy People 2020

objectives

MHMD Mental Health and Mental Disorders, Topic of Healthy People

2020 objectives

N/A Data is not available.

NWS Nutrition and Weight Status, Topic of Healthy People 2020

objectives

OARRS Ohio Automated Prescription (Rx) Reporting System

ODH Ohio Department of Health
OSHP Ohio State Highway Patrol

PSA test Prostate-Specific Antigen Test

Race/Ethnicity Census 2010: U.S. Census data consider race and Hispanic

origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as "a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race." Data are presented as "Hispanic or Latino" and "Not Hispanic or Latino." Census 2010 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported, "White alone" or "Black alone", means the respondents

reported only one race.

Substance Abuse, Topic of Healthy People 2020 objectives

TU Tobacco Use, Topic of Healthy People 2020 objectives

Weapon Defined in the YRBSS as "a weapon such as a gun, knife, or

club"

YPLL/65 Years of Potential Life Lost before age 65. Indicator of

premature death.

APPENDIX I

Appendix III I METHODS FOR WEIGHTING THE 2016 GEAUGA COUNTY ASSESSMENT DATA

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

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population in order to gain an appropriate number of responses from that subgroup for appropriate data analysis when investigating them separately (this is often done for minority groups). Whether the over-sampling is done inadvertently or purposefully, the data needs to be weighted so that the proportioned characteristics of the sample accurately reflect the proportioned characteristics of the population. In the 2016 Geauga County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Geauga County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), age (9 different age categories), and income (7 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Geauga County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2016 Geauga County Survey and the 2015 Census estimates.

2016 Geaug	ja Survey		2014 Cer	2014 Census Estimate	
<u>Sex</u>	Number	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	217	49.318182	46,161	49.17336	0.99706
Female	223	50.681818	47,713	50.82664	1.00285

In this example, it shows that, while nearly the same, there was a slightly larger portion of females in the sample compared to the actual portion in Geauga County. The weighting for males was calculated by taking the percent of males in Geauga County (based on Census information) (49.17336%) and dividing that by the percent found in the 2016 Geauga County sample (49.31818%) [49.17336/49.31818= weighting of 0.99706 for males]. The same was done for females [50.82664/50.68182 = weighting of 1.00286 for females]. Thus males' responses are weighted slightly heavier by a factor of 1.00286 and females' responses weighted slightly less by a factor of 0.99706.

This same thing was done for each of the 20 specific categories as described above. For example, a respondent who was female, White, in the age category 35-44, and with a household income in the \$50-\$75k category would have an individual weighting of 1.36783 [1.00286 (weight for females) x 1.00840 (weight for White) x 1.61818 (weight for age 35-44) x 0.83586 (weight for income \$50-\$75k)]. Thus, each individual in the 2016 Geauga County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 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.

APPENDIX =

Category	Geauga Sample	%	2015 Census *	%	Weighting Value
Sex:					
Male	217	49.31818	46,161	49.17336	0.99706
Female	223	50.68182	47,713	50.82664	1.00286
			,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Age:					
20-24	10	2.25225	4,893	7.14359	3.17175
25-34	18	4.05405	7,541	11.00956	2.71569
35-44	41	9.23423	10,235	14.94270	1.61818
45-54	69	15.54054	15,030	21.94321	1.41200
55-59	61	13.73874	7,861	11.47675	0.83536
60-64	73	16.44144	6,556	9.57150	0.58216
65+	172	38.73874	16,379	23.91269	0.61728
Race:					
White	422	95.04505	89,972	95.84336	1.00840
Non-White	22	4.95495	3,902	4.15664	0.83888
Household Income:					
Less than \$10,000	7	2.07715	1244	3.57739	1.72226
\$10k-\$15k	13	3.85757	1000	2.87571	0.74547
\$15k-\$25k	35	10.38576	2,596	7.46535	0.71881
\$25k-\$35k	23	6.82493	2,544	7.31581	1.07193
\$35k-\$50	51	15.13353	3,992	11.47984	0.75857
\$50k-\$75k	76	22.55193	6,555	18.85029	0.83586
\$75k-\$99k	63	18.69436	4,682	13.46408	0.72022
\$100k-\$149k	69	20.47478	6,449	18.54547	0.90577
\$150k+	49	14.54006	5,712	16.42607	1.12971

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

^{*} Geauga County population figures taken from the 2015 American Community Survey Estimates of the U.S. Census.

Appendix IV | GEAUGA COUNTY SAMPLE DEMOGRAPHIC PROFILE*

Variable	2016 Survey Sample	Geauga County Census 2010- 2014 (5 year estimate)	Ohio Census 2014
Age			
20-29	11.4%	8.9%	13.1%
30-39	12.0%	8.8%	12.1%
40-49	18.0%	14.4%	13.4%
50-59	25.7%	16.8%	14.6%
60 plus	31.0%	23.7%	20.7%
Race/Ethnicity			
White	95.6%	96.8%	82.6%
Black or African American	0.7%	1.1%	12.2%
American Indian and Alaska Native	1.1%	0.1%	0.2%
Asian	0.6%	0.6%	1.8%
Other	1.7%	0.1%	1.6%
Hispanic Origin (may be of any race)	0.3%	1.2%	3.3%
Marital Status†			
Married Couple	59.9%	59.5%	48.5%
Never been married/member of an	21.00/	24.7%	21 10/
unmarried couple	21.0%	10.10/	31.1%
Divorced/Separated Widowed	10.7% 6.9%	10.1% 5.6%	13.9% 6.5%
Widowed	0.9%	3.0%	0.5%
Education†			
Less than High School Diploma	3.4%	8.9%	11.2%
High School Diploma	26.8%	28.1%	34.5%
Some college/ College graduate	69.3%	49.4%	54.4%
Income (Families)			
\$14,999 and less	7.3%	6.5%	8.6%
\$15,000 to \$24,999	4.6%	7.8%	7.9%
\$25,000 to \$49,999	13.1%	20.1%	23.0%
\$50,000 to \$74,999	14.0%	19.2%	20.5%
\$75,000 or more	44.7%	46.5%	40.1%

^{*} The percentages 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). Percentages may not add to 100% due to missing data (non-responses).

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

Appendix V I DEMOGRAPHIC INFORMATION

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

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

GEAUGA COUNTY PROFILE

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

2011-2015 ACS 5-year estimate

Total Population		
2015 Total Population	93,874	
2000 Total Population	91,209	
Largest City- Chardon	F 170	1000/
2015 Total Population	5,170	100%
2000 Total Population	5,156	100%
Deputation Du De en /Ftheriette		
Population By Race/Ethnicity	93,874	1000/
Total Population		100% 96.7%
White Alone	90,818 1,193	
Hispanic or Latino (of any race) African American	1,193	1.3% 1.3%
American Indian and Alaska Native	85	0.1%
Asian	567	0.1%
Two or more races	1,052	1.1%
Other	1,052	0.1%
Offici	103	U. 1 /0
Population By Age 2010		
Under 5 years	5,211	5.6%
5 to 17 years	19,056	20.4%
18 to 24 years	6,170	6.6%
25 to 44 years	18,783	20.1%
45 to 64 years	29,725	31.8%
65 years and more	14,474	15.5%
Median age (years)	43.2	.0.070
Household By Type		
Total Households	34,774	100%
Family Households (families)	26,125	75.1%
With own children <18 years	9,998	28.8%
Married-Couple Family Households	22,126	63.6%
With own children <18 years	8,194	23.6%
Female Householder, No Husband Present	3,016	8.7%
With own children <18 years	1,491	4.3%
Non-family Households	8,649	24.9%
Householder living alone	7,133	20.5%
Householder 65 years and >	3,067	8.8%
-		
Households With Individuals < 18 years	10,742	30.9%
Households With Individuals 65 years and >	10,986	31.6%
Average Household Size	2.67 p€	
Average Family Size	3.12 p€	eople

APPEZDIX V

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

2011-2015 ACS 5-year estimate

Median Value of Owner-Occupied Units	\$218,800
Median Monthly Owner Costs (With Mortgage)	\$1,594
Median Monthly Owner Costs (Not Mortgaged)	\$543
Median Gross Rent for Renter-Occupied Units	\$800
Median Rooms Per Housing Unit	7.0
Total Housing Units	36,683
No Telephone Service	1,022
Lacking Complete Kitchen Facilities	994
Lacking Complete Plumbing Facilities	229

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	22,854	100%
Nursery & Preschool	1,357	5.9%
Kindergarten	740	3.2%
Elementary School (Grades 1-8)	10,969	48.0%
High School (Grades 9-12)	5,666	24.8%
College or Graduate School	4,122	18.0%
Educational Attainment		
Population 25 Years and Over	63,602	100%
< 9th Grade Education	3,356	5.3%
9 th to 12 th Grade, No Diploma	2,339	3.7%
High School Graduate (Includes Equivalency)	17,364	27.3%
Some College, No Degree	11,821	18.6%
Associate Degree	5,189	8.2%
Bachelor's Degree	15,133	23.8%
Graduate Or Professional Degree	8,400	13.2%
Percent High School Graduate or Higher	*(X)	91.0%
Percent Bachelor's Degree or Higher *(X) - Not available	*(X)	37.0%

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

2011-2015 ACS 5-year estimate

Marital Status Population 15 Years and Over Never Married Now Married, Excluding Separated Separated Widowed Female Divorced Female	75,518 18,314 45,808 782 4,118 3,363 6,497 3,565	100% 24.3% 60.7% 1.0% 5.5% 4.5% 8.6% 4.7%
Grandparents As Caregivers Grandparent Living in Household with 1 or more own grandchildren <18 years Grandparent Responsible for Grandchildren	1,076 256	100% 23.8%
Veteran Status Civilian Veterans 18 years and over	6,021	8.5%
Disability Status of the Civilian Non-institutionalized Population Total Civilian Noninstitutionalized Population With a Disability Under 18 years With a Disability 18 to 64 years With a Disability 65 Years and Over With a Disability	93,257 9,157 22,993 861 54,391 4,164 15,873 4,132	100% 9.8% 100% 3.7% 100% 7.7% 100% 26.0%
Selected Economic Characteristics (Source: U.S. Census Bureau, Census 2015)		
2011-2015 ACS 5-year estimate		
Employment Status Population 16 Years and Over In Labor Force Not In Labor Force Females 16 Years and Over In Labor Force	73,801 48,556 25,245 37,816 22,288	100% 65.8% 34.2% 100% 58.9%
Population Living With Own Children <6 Years All Parents In Family In Labor Force	5,562 2,904	100% 52.2%

APPEZUX V

\$46,759

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

2011-2011 ACS 5-year estimate

Occupations Employed Civilian Population 16 Years and Over Production, Transportation, and Material Moving Occupations Management, business, science, and art occupations Sales and Office Occupations Service Occupations Natural Resources, Construction, and Maintenance Occupations	46,540 5,314 18,765 10,953 6,552 4,956	11.4% 40.3% 23.5%
Leading Industries Employed Civilian Population 16 Years and Over Manufacturing Educational, health and social services Trade (retail and wholesale) Arts, entertainment, recreation, accommodation, and food services Professional, scientific, management, administrative, and waste management services Transportation and warehousing, and utilities Finance, insurance, real estate and rental and leasing Other services (except public administration) Construction Public administration Information Agriculture, forestry, fishing and hunting, and mining	46,540 7,479 10,324 6,697 3,226 5,018 1,530 2,945 2,547 4,030 1,351 604 789	16.1% 22.2%
Class of Worker Employed Civilian Population 16 Years and Over Private Wage and Salary Workers Government Workers Self-Employed Workers in Own Not Incorporated Business Unpaid Family Workers	46,540 38,154 4,482 3,790 114	82.0%
Median Earnings Male, Full-time, Year-Round Workers	\$59,93	0

Female, Full-time, Year-Round Workers

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

2011-2015 ACS 5-year estimate

Income 2011-2015		
Families	26,125	100%
< \$10,000	451	1.7%
\$10,000 to \$14,999	340	1.3%
\$15,000 to \$24,999	977	3.7%
\$25,000 to \$34,999	1,729	6.6%
\$35,000 to \$49,999	2,749	10.5%
\$50,000 to \$74,999	4,814	18.4%
\$75,000 to \$99,999	3,918	15.0%
\$100,000 to \$149,999	5,758	22.0%
\$150,000 to \$199,999	2,638	10.1%
\$200,000 or more	2,751	10.5%
Median Household Income	\$85,884	
Income 2011-2015		
Households	34,774	100%
< \$10,000	1,244	3.6%
\$10,000 to \$14,999	1,000	2.9%
\$15,000 to \$24,999	2,596	7.5%
\$25,000 to \$34,999	2,544	7.3%
\$35,000 to \$49,999	3,992	11.5%
\$50,000 to \$74,999	6,555	18.9%
\$75,000 to \$99,999	4,682	13.5%
\$100,000 to \$149,999	6,449	18.5%
\$150,000 to \$199,999	2,766	8.0%
\$200,000 or more	2,946	8.5%
Median Household Income (families)	\$72,430	
Per Capita Income 2011-2015	\$37,021	
Poverty Status In 2014	Number Below Poverty Level	% Below Poverty Level
Families	*(X)	4.8%
Individuals	*(X)	7.5%

*(X) - Not available

APPENDIX V

Selected Economic Characteristics, Continued (Source: U.S. Bureau of Economic Analysis)

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

	Income	Rank of Ohio
		Counties
BEA Per Capita Personal Income 2015	\$61,323	2 nd of 88 counties
BEA Per Capita Personal Income 2014	\$59,409	2 nd of 88 counties
BEA Per Capita Personal Income 2013	\$56,814	2 nd of 88 counties
BEA Per Capita Personal Income 2012	\$56,138	2 nd of 88 counties

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

Poverty Rates, 5-year averages 2010 to 2014

Category	Geauga	Ohio
Population in poverty	7.9%	15.9%
< 125% FPL (%)	11.1%	20.3%
< 150% FPL (%)	15.0%	24.9%
< 200% FPL (%)	22.2%	34.1%
Population in poverty (1999)	4.6%	10.6%

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

Employment Statistics

Employment statistics				
Category	Geauga	Ohio		
Labor Force	48,00	5,673,900		
Employed	45,800	5,405,500		
Unemployed	2,200	268,300		
Unemployment Rate* in December 2016	4.5	4.7		
Unemployment Rate* in November 2016	3.6	4.4		
Unemployment Rate* in October 2015	3.3	4.6		

^{*}Rate equals unemployment divided by labor force.

(Source: Ohio Department of Job and Family Services, December 2016, http://ohiolmi.com/laus/current.htm)

Estimated Poverty Status in 2015

	Estimated Foverty Status in 2015						
Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval			
Geauga County							
All ages in poverty	7,299	6,092 to 5,506	7.8%	6.5 to 9.1			
Ages 0-17 in poverty	2,606	2,156 to 3,056	11.5%	9.5 to 13.5			
Ages 5-17 in families in poverty	1,812	1,488 to 2,136	10.2%	8.4 to 12.0			
Median household income	\$72,264	\$69,763 to \$74,765					
Ohio							
All ages in poverty	1,778,288	1,755,728 to 1,800,848	15.8%	15.6 to 16.0			
Ages 0-17 in poverty	588,618	574,885 to 602,351	22.7%	22.2 to 23.2			
Ages 5-17 in families in poverty	395,792	383,745 to 407,839	20.8%	20.2 to 21.4			
Median household income	\$48,138	\$48,991 to \$49,707					
United States							
All ages in poverty	48,208,387	47,966,830 to 48,449,944	15.5%	15.4 to 15.6			
Ages 0-17 in poverty	15,686,012	15,564,145 to 15,807,879	21.7%	21.5 to 21.9			
Ages 5-17 in families in poverty	10,714,518	10,632,252 to 10,796,784	20.4	20.2 to 20.6			
Median household income	\$53,657	\$53,564 to \$53,750					

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

Federal Poverty Thresholds in 2016 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	\$12,486					
1 Person 65 and >	\$11,511					
2 people Householder < 65 years	\$16,072	\$16,543				
2 People Householder 65 and >	\$14,507	\$16,480				
3 People	\$18,774	\$19,318	\$19,337			
4 People	\$24,775	\$25,160	\$24,339	\$24,424		
5 People	\$29,854	\$30,288	\$29,360	\$28,643	\$28,205	
6 People	\$34,337	\$34,473	\$33,763	\$33,082	\$32,070	\$31,470
7 People	\$39,509	\$39,756	\$38,905	\$38,313	\$37,208	\$35,920
8 People	\$44,188	\$44,578	\$43,776	\$43,072	\$42,075	\$40,809
9 People or >	\$53,155	\$53,413	\$52,702	\$52,106	\$51,127	\$49,779

(Source: U. S. Census Bureau, Poverty Thresholds 2016)

Appendix VI | GEAUGA COUNTY HEALTH RANKINGS

	Geauga County	Ohio	U.S.
Heal	Ith Outcomes		
Premature death. Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2011-2013)	4,800	7,500	6,600
Overall heath. Percentage of adults reporting fair or poor health (ageadjusted) (2014)	13%	17%	18%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2014)	3.3	4.0	3.8
Mental health. Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2014)	3.7	4.3	3.7
Maternal and infant health. Percentage of live births with low birthweight (< 2500 grams) (2007-2013)	6%	9%	8%
Hea	Ith Behaviors		
Tobacco . Percentage of adults who are current smokers (2014)	16%	21%	17%
Obesity. Percentage of adults that report a BMI of 30 or more (2012)	28%	30%	27%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2013)	8.3	6.9	7.2
Physical activity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2012)	27%	26%	23%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2014)	90%	83%	84%
Drug and alcohol abuse. Percentage of adults reporting binge or heavy drinking (2014)	18%	19%	17%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2010-2014)	32%	35%	31%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2013)	121.7	460	447
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2007-2013)	9	34	35

(Source: 2016 County Health Rankings for Geauga County, Ohio and U.S. data)

	Geauga County	Ohio	U.S
CI	inical Care		
Coverage and affordability. Percentage			
of population under age 65 without	13%	13%	17%
health insurance (2013)			
Access to health care/medical care.			
Ratio of population to primary care	1,520:1	1,300:1	1,320:1
physicians (2013)			
Access to dental care. Ratio of	2,300:1	1,710:1	1,540:1
population to dentists (2014)	2,300.1	1,710.1	1,340.1
Access to behavioral health care. Ratio of			
population to mental health providers	650:1	640:1	490:1
(2015)			
Hospital utilization. Number of hospital			
stays for ambulatory-care sensitive	50	65	54
conditions per 1,000 Medicare enrollees			
(2013)			
Diabetes. Percentage of diabetic	0.4.04	050/	050/
Medicare enrollees ages 65-75 that receive HbA1c monitoring (2013)	86%	85%	85%
Cancer. Percentage of female Medicare			
enrollees ages 67-69 that receive	64%	60%	63%
mammography screening (2013)	0470	0070	0370
	conomic Environm	ont	
Education. Percentage of ninth-grade	CONOTTIC LITVILOTITI	CIII.	
cohort that graduates in four years (2012-	93%	83%	82%
2013)	7370	0370	0270
Education . Percentage of adults ages 25-			
44 years with some post-secondary	64%	63%	64%
education (2010-2014)			2
Employment, poverty, and income.			
Percentage of population ages 16 and	5%	6%	/ 0/
older unemployed but seeking work	3%	0%	6%
(2014)			
Employment, poverty, and income.			
Percentage of children under age 18 in	12%	23%	22%
poverty (2014)			
Employment, poverty, and income. Ratio			
of household income at the 80th	4.1	4.8	4.7
percentile to income at the 20th			
percentile (2010-2014)			
Family and social support. Percentage of	170/	2E0/	2.40/
children that live in a household headed by single parent (2010-2014)	17%	35%	34%
Family and social support. Number of			
membership associations per 10,000	9.5	11.4	9.0
population (2013)	7.5	17.7	7.0
Violence. Number of reported violent			
crime offenses per 100,000 population	38	307	392
(2010-2012)			
Injury. Number of deaths due to injury per			
	54	63	60

(Source: 2016 County Health Rankings for Geauga County, Ohio and U.S. data)

	Geauga County	Ohio	U.S.
Physic	cal Environment		
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2011)	13.7	13.5	11.4
Air, water, and toxic substances. Indicator of the presence of health- related drinking water violations. 1 - indicates the presence of a violation, 0 - indicates no violation (FY 2013-2014)	No	N/A	N/A
Housing. Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (2008-2012)	15%	15%	19%
Transportation. Percentage of the workforce that drives alone to work (2010-2014)	82%	84%	76%
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2010-2014)	46%	29%	31%

(Source: 2016 County Health Rankings for Geauga County, Ohio and U.S. data) N/A - Data is not available

Appendix VII | COMMUNITY STAKEHOLDER PERCEPTIONS

What surprised you the most? (n=5)

- 33% of children are obese by BMI (2)
- 48% of adults have guns
- Obesity rates among adults
- Men and women accessing preventive care seems low
- Drug use reported was low
- Low percentages. Would have liked to see more Amish specific data or data that reflected existing disparities

What would you like to see covered in the report next time? (n=6)

- Survey youth ages 12-18 (3)
- Questions asking if their chronic diseases are well managed
- Percentage of people eating prepared foods
- Health care access (cost as a barrier to accessing medical care; how does this impact individual health especially if not accessing preventive health care)
- Amish specific data

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

- Review and inform the community (2)
- Use for support of grant applications (2)
- Tailor strategies to address the disparities in the county
- Utilize information for presentations
- Use it for nutrition and health initiatives
- Study social determinants of health/access to healthcare
- Awareness and education about importance of literacy in the home (reading to/watching your child)
- Program development

Based on the 2016-2017 Community Health Assessment, what health topics do you see as the most important? (n=5)

- Mental health (2)
- Alcohol use (2)
- Drug use (2)
- Increase in obesity (2)
- Physical health
- Health care access
- Nutrition in children

In your opinion, what is the best way to communicate the information from the Community Health Assessment and Community Health Improvement Plan to the rest of public? (n=6)

- Social media (3)
- Press release about each section (one per month) (2)
- Schools (2)
- Medical officials
- Trainings
- Provide to doctor's associations
- Electronically
- Include resources in the community relevant to the indicators in press release
- Website
- Make a graphic insert for Geauga mail service to deliver to every resident
- Churches
- Newspaper articles
- Grant making organizations
- Civic organizations

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

- Funding issues (2)
- Access issues
- Knowledge and awareness
- Resources (Amish)
- Lack of progressive thinking
- Mental health and suicide access (do residents know how/where to access care for anxiety, stress, or depression?)
- Behavioral health
- Cultural

Are there any groups or agencies you think would be valuable resources or partners to work towards the priority health issues? (n=2)

- Mental health agencies
- Health agencies
- Schools
- Law enforcement agencies
- Education services Board of education commissioners

Other Comments or Concerns: (n=4)

- Compliments to the presentation (2)
- Separate the categories into (aging, adult, child)
- Would have better understanding of the true health disparities if they had the support to survey inside schools

