

Morrow County Community Health Assessment

Examining the health of Morrow County

Released February 13, 2020

Foreword

The Community Partners of Morrow County are pleased to present the 2019 health assessment of our community to you. This comprehensive Community Health Assessment is the result of a shared vision and strong commitment by many community partners working together to identify and improve the health and well-being of Morrow County residents.

The Morrow County Health Assessment is a tool providing a snapshot into our community, as well as our state and nation. The data presented in this report will provide valuable information to develop strategies that focus on wellness, access to care, and unmet community needs. It contains data that reflects insight into our collective progress and struggles as a community in the areas of health and well-being. In order to effectively identify, plan, and implement needed policy, systems and environmental changes, communities need to be able to assess the current policy landscape and monitor changes over time. Data will be the driving force for change.

The assessment is important to the community because it is . . .

- Local: it describes *our* community;
- Comprehensive: it assesses adults and youth the broadest scope of assessment possible;
- Thorough: it describes personal health habits, risky behaviors, and public health;
- Actionable: it can be used to guide programming and funding for the community and its many agencies;
- Measurable: it can be measured again in the future to evaluate progress and success.

The Morrow County Health District, area health systems, social service agencies, non-profits, Boards and Commissions, municipalities and individuals will be able to use this data to support their need statements or narratives pertaining to policy or grant development; identify new health concerns; measure the impact of current community health improvement efforts; and guide the judicious use of local resources. It will serve as a guide for strategic planning and decision-making.

Feel free to contact the Morrow County Health District for any assistance with interpretation or copies of this document. It will be on the MCHD website for your review and use. This health assessment document, its data and its many resources belong to you, the residents of Morrow County.

Your efforts are and will be appreciated as we move Morrow County into a healthier and better community in which to live and grow. Let's continue to work together towards a better quality of life and a healthier community for all who live and work in Morrow County. Thank you everyone!

Yours always in good health,

Pamela Butler Riggs, M.P.H. Health Commissioner, Retired Morrow County Health District

and

Stephanie Bragg, RN, BSN, MHA Health Commissioner Morrow County Health District

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Cardington-Lincoln Local School District Cardington Police Columbus Legal Aid **Community Members** Delaware Morrow Health and Recovery Services Board EMA Family and Children's First Council Flying Horse Farm Helpline Highland Local Schools Job and Family Services of Morrow County Legal Aid Mary Haven Morrow County Development Office Morrow County Health District Morrow County Hospital Morrow County Recorder Morrow County Transportation Collaborative Morrow Family Health Clinic Morrow Metro Housing Mount Gilead School District Northmor Local School District Ohio Heartland Community Action Commission **OSU** Extension Salvation Army Southeast Healthcare Services Syntero The Growth Coach The Tomorrow Center **Turning Point** United Way of Morrow County Whetstone Industries

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To see Morrow 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 2019 Morrow County Health Assessment is available on the following websites:

Morrow County Health District www.Morrowcountyhealth.org

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

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Executive Summary

This executive summary provides an overview of health-related data for Morrow County adults (19 years of age and older) and youth (ages 12 through 18) who participated in a county-wide health assessment survey from January-March 2019. The findings are based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS) and Youth Risk Behavior Surveillance System (YRBSS). The Hospital Council of Northwest Ohio (HCNO) collected the data, guided the health assessment process, and integrated sources of primary and secondary data into the final report.

Public Health Accreditation Board (PHAB)

National public health accreditation status through the Public Health Accreditation Board (PHAB) requires community health assessments (CHAs) to be completed at least every five years. The purpose of the community health assessment is to learn about the community: understand the health of the population, identify areas for health improvement, identify contributing factors that impact health outcomes, and identify community assets and resources that can be mobilized to improve population health.

PHAB standards highly recommend that national models of methodology are utilized in compiling CHAs. The 2019 CHA was completed using the National Association of County and City Health Officials (NACCHO) Mobilizing Action through Partnerships and Planning (MAPP) process. MAPP is a community-driven planning process for improving community health. This process was facilitated by HCNO in collaboration with various local agencies representing a variety of sectors.

This assessment includes a variety of data and information from various sources, focusing on primary data at the county level. Supporting data—such as secondary data, demographics, health disparities (including age, gender, and income-based disparities), and social determinants of health—can be found throughout the report. For a more detailed approach on primary data collection methods, please see the section below.

Primary Data Collection Methods

DESIGN

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

INSTRUMENT DEVELOPMENT

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

The project coordinator from the Hospital Council of Northwest Ohio conducted a series of meetings with the Morrow County Community Partners. During these meetings, HCNO and the Morrow County Community Partners reviewed and discussed banks of potential survey questions. Based on input from the Morrow County Community Partners, the project coordinator composed drafts of surveys containing 116 items for the adult survey and 75 items for the adolescent survey. Health education researchers from the University of Toledo reviewed and approved the drafts.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and over living in Morrow County. There were 25,345 persons ages 19 and over living in Morrow 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 378 adults was needed to ensure this level of confidence. The random sample of mailing addresses was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.

SAMPLING | Adolescent Survey

Youth in grades 6-12 in Morrow County public school districts were used as the sampling frame for the adolescent survey. Using the U.S. Census Bureau data, it was determined that approximately 3,673 youth ages 12 to 18 years old live in Morrow County. A sample size of 348 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error. Students were randomly selected and surveyed in the school.

PROCEDURE | Adult Survey

Prior to mailing the survey, the project team mailed an advance letter to 1,200 adults in Morrow County. This advance letter was personalized; printed on Morrow County Community Partners letterhead; and signed by Pamela Butler, Health Commissioner of the Morrow 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, the project team implemented a three-wave mailing process to maximize the survey return rate. The initial mailing included a personalized hand-signed cover letter (on Morrow County Community Partners letterhead) describing the purpose of the study, a questionnaire, a self-addressed stamped return envelope, and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging individuals to reply, another copy of the questionnaire, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the mailing was 23% (n=266 CI= \pm 5.9). Prior to surveys being sent, a power analysis was conducted which concluded that 378 surveys would need to be returned to have a \pm 5% confidence interval which is standard. However, there were only 266 surveys returned, thus reducing the level of power and broadening the confidence level to \pm 5.9%.

PROCEDURE | Adolescent Survey

The survey was approved by all participating superintendents. Schools and grades were randomly selected. To ensure each student in a particular grade had an equal chance of being selected, the research team used "general" school classes such as English or Health. Classrooms were chosen by the school principal. Passive permission slips were mailed home to parents of any student whose class was selected to participate. The response rate was 90% (n=344: $CI=\pm$ 5.03).

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 24.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Morrow County, the adult data collected was weighted by age, gender, race, and income using 2017 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 Morrow 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 Morrow County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

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

Lastly, caution should be used when interpreting subgroup results, as the margin of error for any subgroup is higher than that of the overall survey.

Secondary Data Collection Methods

HCNO collected secondary data from multiple websites, including county-level data, whenever possible. HCNO utilized sites such as the Behavioral Risk Factor Surveillance System (BRFSS), numerous CDC sites, U.S. Census data, and Healthy People 2020, among other national and local sources. All data is included as a citation in the section of the report with which it corresponds, and the URLs are available in the references at the end of this report. All primary data collected in this report is from the 2019 Morrow County Community Health Assessment (CHA). All other data is cited accordingly.

2016 Ohio State Health Assessment (SHA)

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

Similar to the 2016 Ohio SHA, the 2019 Morrow County Community Health Assessment (CHA) examined a variety of metrics from various areas of health including, but not limited to, health behaviors, chronic disease, access to health care, and social determinants of health. Additionally, the CHA studied themes and perceptions from local public health stakeholders from a wide variety of sectors. **Note: This symbol will be displayed in the trend summary when an indicator directly aligns with the 2016 Ohio SHA**.

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

Comprehensive

and actionable picture of health and wellbeing

in Ohio

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

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

Data profiles

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

SHA regional forums

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

Review of local health department and hospital assessments/plans

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

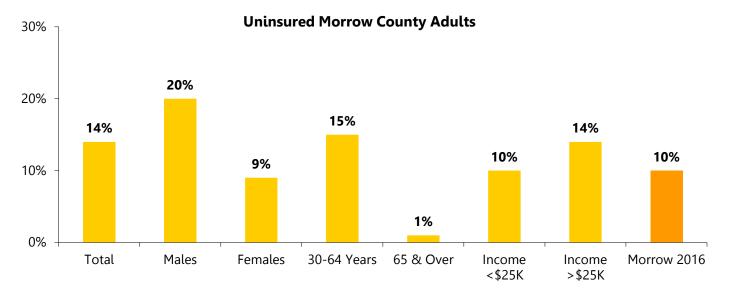
Key informant interviews

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

Data Summary | Health Care Access

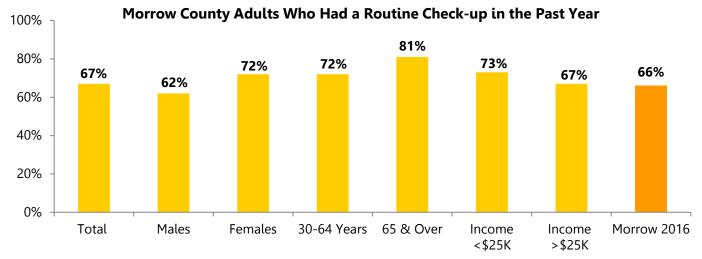
HEALTH CARE COVERAGE

In 2019, 14% of Morrow County adults were without health care coverage. One-fourth (25%) of adults did not get prescriptions from their doctor filled in the past year.



ACCESS AND UTILIZATION

Two-thirds (67%) of Morrow County adults had visited a doctor for a routine checkup in the past year. Ninety-four percent (94%) of adults went outside of Morrow County for health care services in the past year.



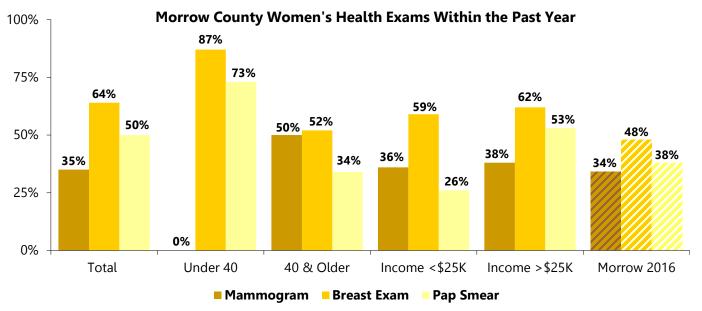
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

PREVENTIVE MEDICINE

Almost two-thirds (64%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Nearly half (49%) of adults had a flu vaccine in the past year.

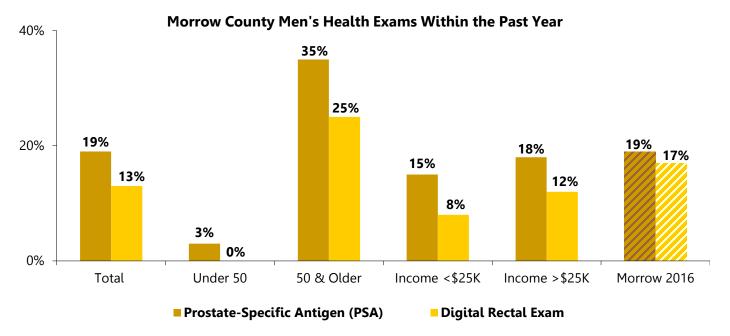
WOMEN'S HEALTH

Half (50%) of Morrow County women over the age of 40 reported having a mammogram in the past year. Sixty-four percent (64%) of Morrow County women ages 19 and over had a clinical breast exam and 50% had a Pap smear to detect cancer of the cervix in the past year. Two percent (2%) of women survived a heart attack and 3% survived a stroke at some time in their life. Twenty-nine percent (29%) were obese, 29% had high blood pressure, 26% were diagnosed with high blood cholesterol, and 15% were identified as current smokers, known risk factors for cardiovascular diseases.



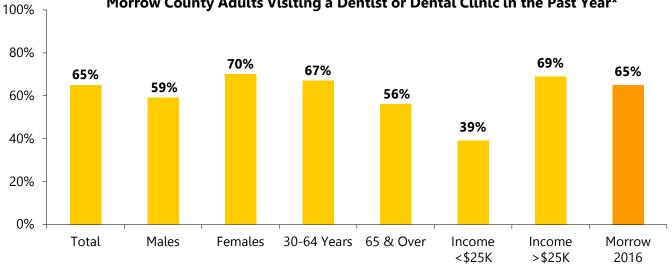
MEN'S HEALTH

In 2019, 35% of Morrow County males age 50 and over had a prostate-specific antigen (PSA) test in the past year. Nearly half (48%) had been diagnosed with high blood pressure, 42% were obese, 41% had high blood cholesterol, and 12% were current smokers, known risk factors for cardiovascular diseases.



ORAL HEALTH

Sixty-five percent (65%) of Morrow County adults visited a dentist or dental clinic in the past year. Nearly half (47%) of all adults had one or more permanent teeth removed, and 19% of adults over the age of 65 had all of their permanent teeth removed.



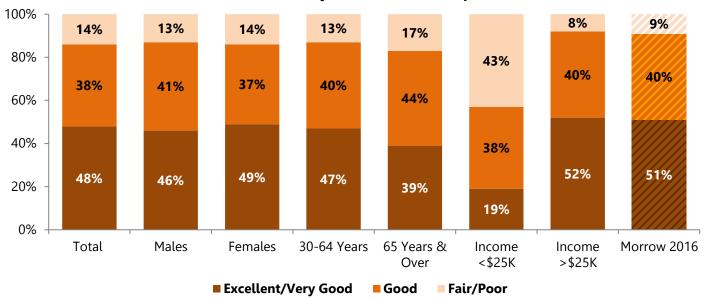
Morrow County Adults Visiting a Dentist or Dental Clinic in the Past Year*

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

Data Summary | Health Behaviors

HEALTH STATUS PERCEPTIONS

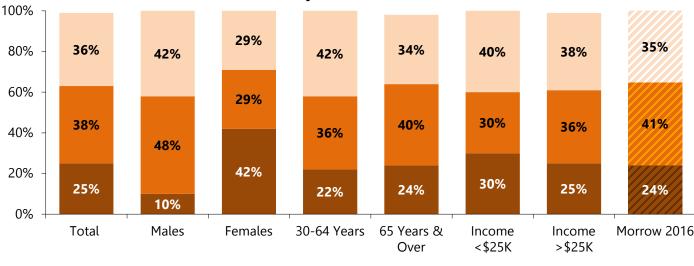
In 2019, nearly half (48%) of Morrow County adults rated their health status as excellent or very good. Conversely, 14% of adults described their health as fair or poor, increasing to 43% of those with incomes less than \$25,000.



Morrow County Adult Health Perceptions*

ADULT WEIGHT STATUS

Nearly three-fourths (74%) of Morrow County adults were overweight or obese based on body mass index (BMI). More than three-fifths (61%) of adults engaged in some type of physical activity or exercise for at least 30 minutes on three or more days per week.



Morrow County Adult BMI Classifications*

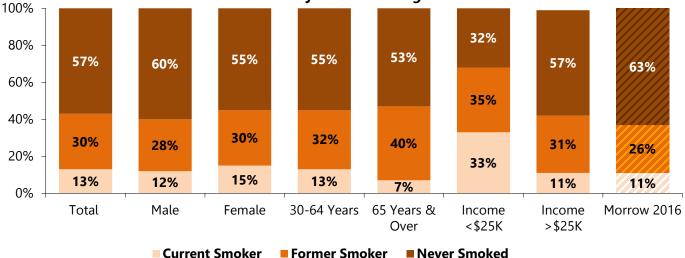
Normal Overweight Obese

*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

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

ADULT TOBACCO USE

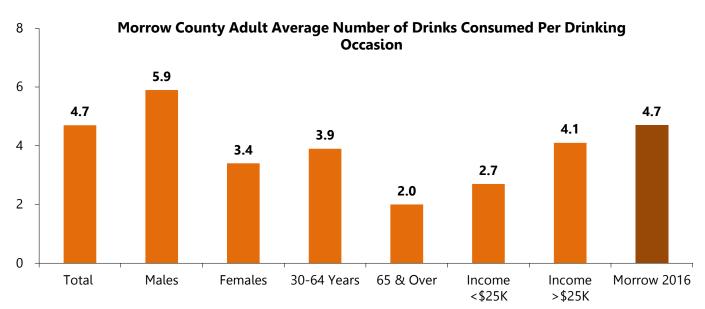
In 2019, 13% of Morrow County adults were current smokers, and 30% were considered former smokers. Three percent (3%) of adults used e-cigarettes in the past year. Most (91%) adults believed secondhand smoke was harmful to their and their family's health.



Morrow County Adult Smoking Behaviors*

ADULT ALCOHOL CONSUMPTION

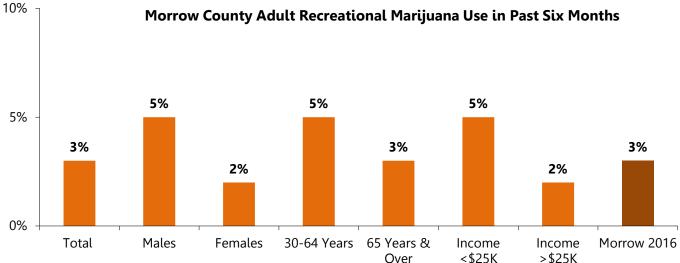
More than half (55%) of Morrow County adults had at least one alcoholic drink in the past month. Sixteen percent (16%) of Morrow County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers. Twelve percent (12%) of current drinkers drove a vehicle or other equipment after consuming any alcoholic beverages.



^{*}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 DRUG USE

In 2019, 3% of Morrow County adults had used marijuana during the past six months. Seven percent (7%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past six months.



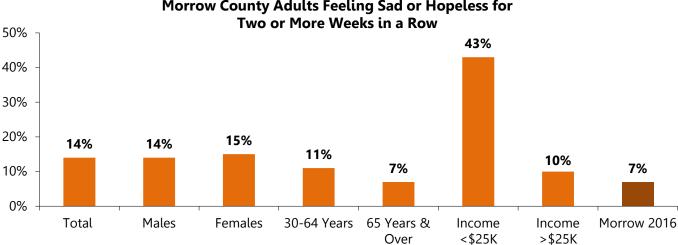
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the

ADULT SEXUAL BEHAVIOR

In 2019, 75% of Morrow County adults had sexual intercourse. Six percent (6%) of adults had more than one partner. Seven percent (7%) of Morrow County adults reported being forced to participate in sexual activity when they did not want to.

ADULT MENTAL HEALTH

In 2019, 6% of Morrow County adults considered attempting suicide. Fourteen percent (14%) of adults felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities, increasing to 43% of those with household incomes less than \$25,000.



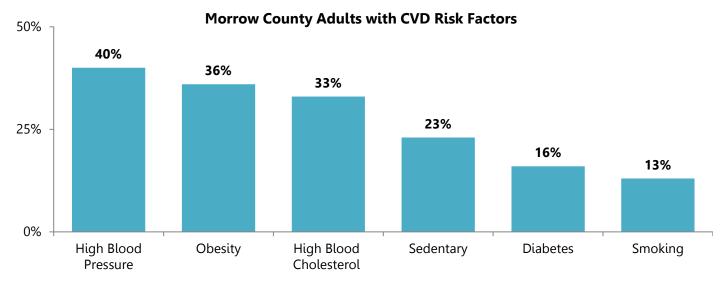
Morrow County Adults Feeling Sad or Hopeless for

overall survey.

Data Summary | Chronic Disease

CARDIOVASCULAR HEALTH

Seven percent (7%) of adults had survived a heart attack and 3% had survived a stroke at some time in their life. Forty percent (40%) had high blood pressure, 36% were obese, 33% had high blood cholesterol, and 13% were current smokers, four known risk factors for heart disease and stroke.

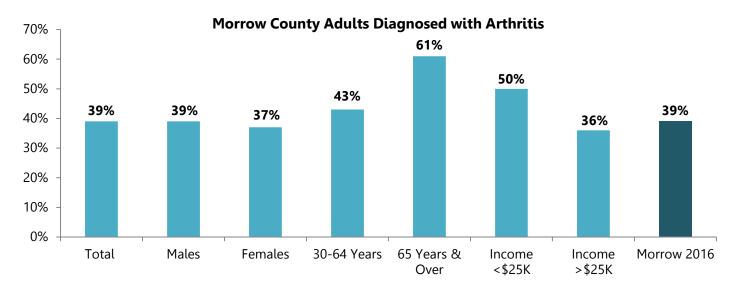


CANCER

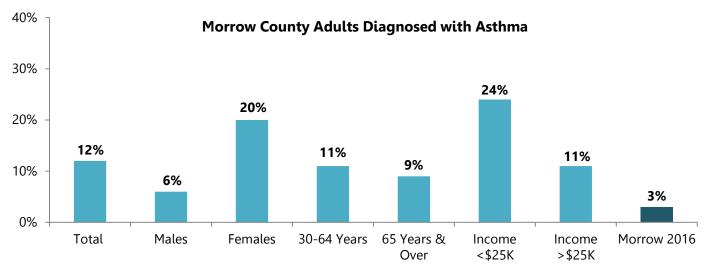
Eleven percent (11%) of Morrow County adults had been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that from 2015-2017, cancers caused 25% (256) of all (1,022) of all Morrow County resident deaths.

ARTHRITIS

Nearly two-fifths (39%) of Morrow County adults were told by a doctor, nurse, or other health professional that they had some form of arthritis.



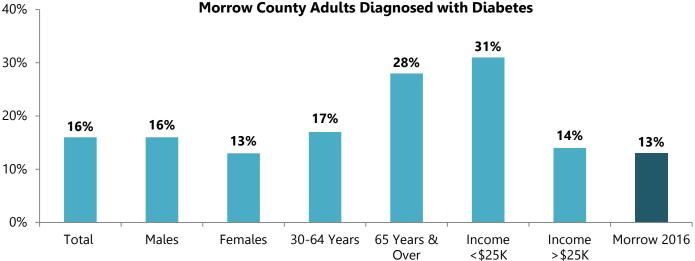
ASTHMA



In 2019, 12% of Morrow County adults had been diagnosed with asthma.

DIABETES

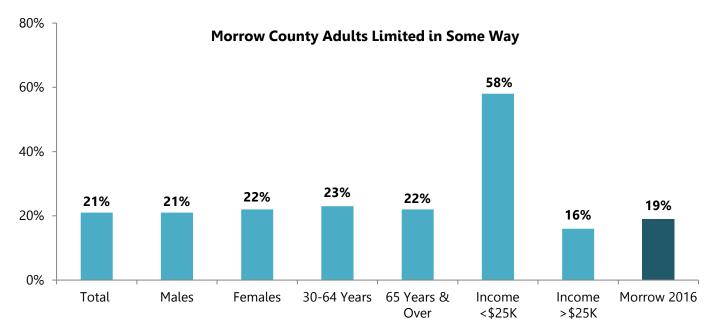
In 2019, 16% of Morrow County adults had been diagnosed with diabetes. More than one-fourth (29%) of adults with diabetes rated their health as fair or poor.



Morrow County Adults Diagnosed with Diabetes

QUALITY OF LIFE

More than one-fifth (21%) of adults were limited in some way because of a physical, mental, or emotional problem. Nearly half (48%) of adults who were limited in some way were limited by back or neck problems.



Data Summary | Social Conditions

SOCIAL DETERMINANTS OF HEALTH

More than one-fourth (27%) of Morrow County adults kept a firearm in or around their home. In the past year, 5% of adults had to choose between paying bills and buying food. Fifteen percent (15%) of adults experienced four or more adverse childhood experiences (ACEs) in their lifetime.

ENVIRONMENTAL HEALTH

Morrow County adults indicated insects (14%), rodents (11%), and mold (7%) were the most threatening environmental issues to their health in the past year. Most (95%) Morrow County households had two or more disaster preparedness supplies.

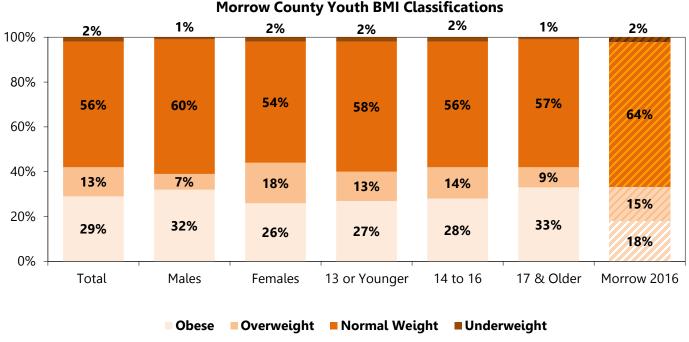
PARENTING

In the past year, 65% of parents discussed career plans and post-secondary education with their 6-to-17-year-old child.

Data Summary | Youth Health

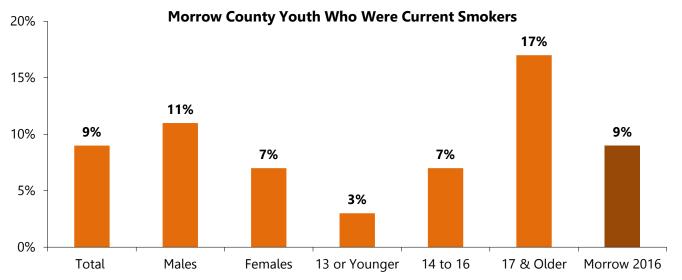
YOUTH WEIGHT STATUS

Over one-quarter (29%) of Morrow County youth were obese, according to body mass index (BMI) by age. When asked how they would describe their weight, 39% of youth reported that they were slightly or very overweight. Nearly three-quarters (71%) of youth exercised for at least 60 minutes on three or more days per week.



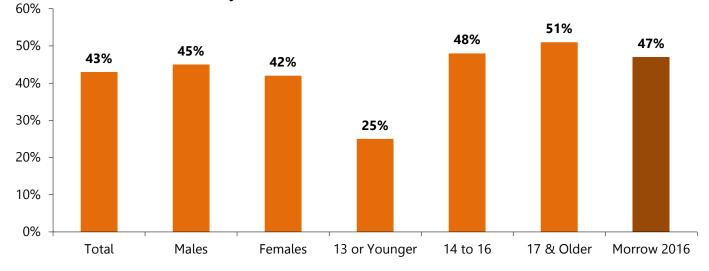
YOUTH TOBACCO USE

Nine percent (9%) of Morrow County youth were current smokers. One-fifth (20%) of youth used e-cigarettes in the past year. Of youth who had used e-cigarettes/vapes in the past year, 69% put e-liquid or e-juice with nicotine in them.



YOUTH ALCOHOL CONSUMPTION

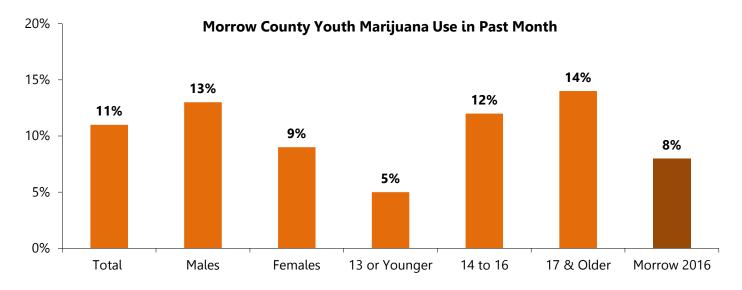
Over two-fifths (43%) of Morrow County youth had drank at least one drink of alcohol in their life. Nearly one-fifth (18%) of youth had at least one drink in the past month, defining them as a current drinker. Of those who drank, 53% were defined as binge drinkers.



Morrow County Youth Who Had At least One Drink In Their Lifetime

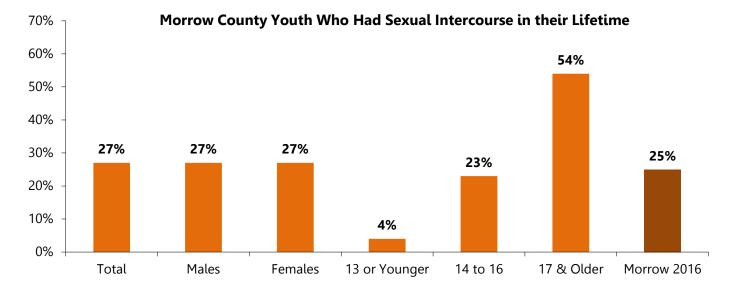
YOUTH DRUG USE

In 2019, 11% of Morrow County youth had used marijuana at least once in the past month. Seven percent (7%) of youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at some time in their lives.



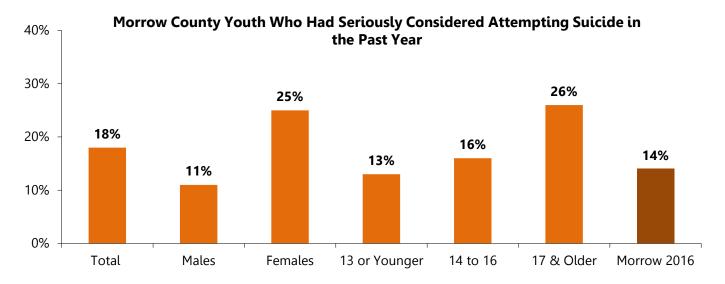
YOUTH SEXUAL BEHAVIOR

Twenty-seven percent (27%) of Morrow County youth have had sexual intercourse in their lifetime. Twenty-eight percent (28%) of sexually active youth had four or more sexual partners. Nine percent (9%) youth engaged in intercourse without a reliable method of protection, and 15% reported they were unsure if they used a reliable method.



YOUTH MENTAL HEALTH

Nearly one-fifth (18%) of Morrow County youth had seriously considered attempting suicide in the past year, and 8% attempted suicide in the past year. Forty-seven percent (47%) of Morrow County youth reported academic success caused them anxiety, stress, or depression. More than one-fourth (29%) of youth had experienced three or more adverse childhood experiences (ACEs) in their lifetime.

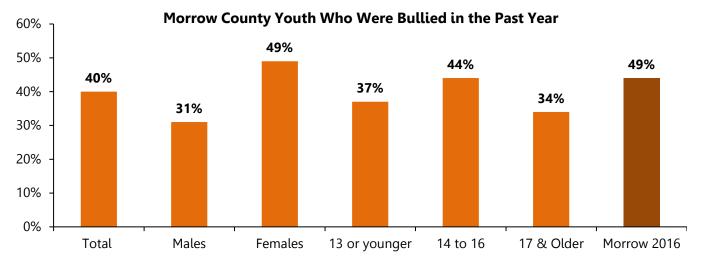


YOUTH SOCIAL DETERMINANTS OF HEALTH

Twenty-seven percent (27%) of Morrow County youth drivers had texted while driving in the past month. Over half (54%) of youth who had a social media or online gaming account believed that sharing information online is dangerous.

YOUTH VIOLENCE

Sixteen percent (16%) of Morrow County youth carried a weapon (such as a gun, knife or club) in the past month. Over one-fifth (23%) of youth had been involved in a physical fight in the past year. Forty percent (40%) of youth had been bullied in the past year.



Adult Trend Summary

Adult Variables	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Health Status				
Rated general health as good, very good, or excellent	91%	86%	81%	83%
Rated general health as excellent or very good	51%	48%	49%	51%
Rated general health as fair or poor	9%	14%	19%	18%
Rated mental health as not good on four or more days (in the past month)	16%	26%	26%	24%
Rated physical health as not good on four or more days (in the past	20%	22%	23%	22%
month) Average number of days that physical health was not good (in the	3.5	3.5	4.0 [¥]	3.7 [¥]
past month) (County Health Rankings)	5.5	5.5	4.0	5.7
Average number of days that mental health was not good (in the past month) (County Health Rankings)	2.9	3.9	4.3 [¥]	3.8 [¥]
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past month)	20%	26%	24%	23%
Health Care Coverage, Access	, and Utilizati	on		
Uninsured	10%	14%	8%	11%
Had at least one person they thought of as their personal doctor or health care provider	88%	84%	81%	77%
Visited a doctor for a routine checkup (in the past year)	66%	67%	72%	70%
Visited a doctor for a routine checkup (five or more years ago)	N/A	6%	7%	8%
Arthritis, Asthma, & [Diabetes			
Ever been told by a doctor they have diabetes (not pregnancy related)	13%	16%	11%	11%
Ever been diagnosed with pregnancy-related diabetes	N/A	2%	1%	1%
Ever been diagnosed with pre-diabetes or borderline diabetes	N/A	3%	2%	2%
Diagnosed with arthritis by a doctor, nurse or other health professional	39%	39%	N/A	N/A
Had ever been told they have asthma	12%	12%	14%	14%
Cardiovascular He	-	1270	1170	1170
Ever diagnosed with angina or coronary heart disease 🖤	5%	5%	5%	4%
Ever diagnosed with a heart attack, or myocardial infarction	4%	7%	6%	4%
Ever diagnosed with a stroke	2%	3%	4%	3%
Had been told they had high blood pressure 🔰	35%	40%	35%	32%
Had been told their blood cholesterol was high	39%	33%	33%	33%
Had their blood cholesterol checked within the last five years	87%	81%	85%	86%
Weight Status		0170	0370	0070
Normal weight (BMI of 18.5 – 24.9)	24%	25%	30%	32%
Overweight (BMI of 25.0 – 29.9)	41%	38%	34%	35%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)		36%	34%	32%
	35%	50%	5470	52%
Alcohol Consump Current drinker (had at least one drink of alcohol within the past	tion 50%	55%	54%	55%
month) Binge drinker (males having five or more drinks on one occasion,	11%	16%	19%	17%
females having four or more drinks on one occasion) 🔰		10%	1970	1770
Drinking and driving (had driven after drinking too much) 2016 BRFSS Data as compiled by 2019 County Health Rankings	7%	12%	4%*	4%*

*¥2016 BRFSS Data as compiled by 2019 County Health Rankings *2016 BRFSS Data*

N/A – Not Available

Indicates alignment with the Ohio State Health Assessment

Adult Variables	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Tobacco U	lse			
Current smoker (smoked on some or all days) 🔍	11%	13%	21%	17%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	26%	30%	24%	25%
Drug Use	e			
Adults who used recreational marijuana in the past six months	3%	3%	N/A	N/A
Adults who misused prescription drugs in the past six months	9%	7%	N/A	N/A
Preventive Me	dicine			
Ever had a pneumonia vaccine in lifetime (ages 65 and older)	77%	64%	76%	75%
Ever had shingles or zoster vaccine	14%	16%	29%	29%
Had a flu shot within the past year (ages 65 and over)	77%	68%	63%	60%
Had a clinical breast exam in the past two years (ages 40 and older)	66%	67%	N/A	N/A
Had a mammogram within the past two years (ages 40 and older)	70%	65%	74%*	72%*
Had a Pap smear in the past three years (ages 21-65)	65%‡	76%	82%*	80%*
Had a PSA test within the past two years (ages 40 and older)	45%	52%	39%*	40%*
Had a digital rectal exam within the past year	17%	13%	N/A	N/A
Had a colonoscopy/sigmoidoscopy within the past five years (ages 50 and over)	53%	49%	N/A	N/A
Quality of I	Life			
Limited in some way because of physical, mental or emotional problem	19%	21%	21%**	21%**
Mental Hea	alth			
Considered attempting suicide in the past year	2%	6%	N/A	N/A
Felt sad or hopeless for two or more weeks in a row	7%	14%	N/A	N/A
Sexual Beha		1		I
Had more than one sexual partner in past year	4%	6%	N/A	N/A
Oral Heal:				
Visited a dentist or a dental clinic (within the past year)	65%	65%	68%*	66%*
Visited a dentist or a dental clinic (five or more years ago)	11%	13%	11%*	10%*
Had any permanent teeth extracted	42%	47%	45%*	43%*
Had all their natural teeth extracted (ages 65 and older)	19%	19%	17%*	14%*

N/A – Not Available *2016 BRFSS Data **2015 BRFSS Data #Pap smear was reported for women ages 19 and over ♥ Indicates alignment with the Ohio State Health Assessment

Youth Trend Summary

Youth Variables		Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Weight Control				
Obese 🖤	18%	29%	29%	15%
Overweight	15%	13%	14%	16%
Described themselves as slightly or very overweight	30%	39%	41%	32%
Were trying to lose weight	46%	54%	52%	47%
Exercised to lose weight (in the past month)	51%	57%	59%	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight (in the past month)	31%	33%	32%	N/A
Went without eating for 24 hours or more (in the past month)	5%	5%	5%	N/A
Took diet pills, powders, or liquids without a doctor's advice (in the past month)	2%	2%	3%	N/A
Vomited or took laxatives (in the past month)	1%	2%	3%	N/A
Physically active at least 60 minutes per day on every day in past week	36%	29%	28%	26%
Physically active at least 60 minutes per day on five or more days in past week	58%	53%	51%	46%
Did not participate in at least 60 minutes of physical activity on any day in the past week	8%	12%	12%	15%
Watched three or more hours per day of television (on an average school day)	N/A	19%	20%	21%
Unintentional Injuries and Violence	•			
Were in a physical fight (in the past year)	18%	23%	21%	24%
Carried a weapon (in the past month)	10%	16%	14%	16%
Threatened or injured with a weapon on school property (in the past year)	7%	7%	7%	6%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past month)	3%	10%	9%	7%
Electronically bullied (in past year)	13%	14%	13%	15%
Bullied (in past year)	44%	40%	37%	N/A
Were bullied on school property (during the past year)	34%	29%	25%	19%
Experienced physical dating violence (including being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with in the past year)	4%	7%	9%	8%
Alcohol Consumption				
Ever drank alcohol (at least one drink of alcohol on at least one day during their life)	47%	43%	50%	60%
Current Drinker (at least one drink of alcohol on at least one day during the past month)	19%	18%	20%	30%
Binge drinker (drank five or more drinks within a couple of hours on at least one day during the past month)	14%	9%	12%	14%
Drank for the first time before age 13 (of all youth)	12%	14%	12%	16%
Obtained the alcohol they drank by someone giving it to them (of youth drinkers)	28%	38%	43%	44%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on one or more occasion during the past month)	14%	12%	11%	17%
Drove when they had been drinking alcohol (in a car or vehicle, one or more times during the past month, among youth who had driven a car or other vehicle)	3%	2%	2%	6%

N/A – Not Available Indicates alignment with the Ohio State Health Assessment

Youth Variables		Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Mental Health				
Seriously considered attempting suicide (in the past year)	14%	18%	20%	17%
Attempted suicide (in the past year)	6%	8%	8%	7%
Felt sad or hopeless (almost every day for 2 or more weeks in a row so that they stopped doing some usual activities in the past year)	27%	29%	28%	32%
Tobacco Use				
Ever tried cigarette smoking (even one or two puffs)	25%	23%	30%	29%
Currently smoked cigarettes (on at least one day during the past month)	9%	9%	11%	9%
Currently frequently smoked cigarettes (on 20 or more days during the past month)	2%	1%	1%	3%
First tried cigarette smoking before age 13 years (even one or two puffs)	5%	10%	11%	10%
Tried to quit using all tobacco products (during the past year)	44%	57%	59%	41%
Sexual Behavior				
Ever had sexual intercourse	25%	27%	38%	40%
Had sexual intercourse with four or more persons (of all youth during their life)	5%	9%	12%	10%
Had sexual intercourse before the age 13 (for the first time of all youth)		3%	3%	3%
Used a condom (during last sexual intercourse)	37%	35%	37%	54%
Used birth control pills (during last sexual intercourse)	38%	27%	31%	21%
Used an IUD (during last sexual intercourse)	3%	3%	3%	4%
Used a shot, patch or birth control ring (during last sexual intercourse)	1%	4%	4%	5%
Did not use any method to prevent pregnancy (during last sexual intercourse)	4%	9%	7%	14%
Drug Use				
Used marijuana in the past month	8%	11%	13%	20%
Misused medications that were not prescribed to them or took more to feel good or high (in their lifetime)	3%	7%	8%	N/A
Ever used methamphetamines (in their lifetime)	2%	1%	1%	3%
Ever used cocaine (in their lifetime)	2%	2%	2%	5%
Ever used heroin (in their lifetime)	2%	1%	1%	2%
Ever took steroids without a doctor's prescription (in their lifetime)	2%	2%	2%	3%
Ever used inhalants (in their lifetime)	6%	6%	5%	6%
Ever used ecstasy (also called MDMA/Molly in their lifetime)	2%	2%	2%	4%
Ever used hallucinogenic drugs (such as LSD, acid, PCP, angel dust, mescaline, or mushrooms in their lifetime)	N/A	3%	4%	7%
Ever been offered, sold, or given an illegal drug by someone on school property (in the past year)	4%	12%	14%	20%
Oral Health				
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work) N/A – Not Available	75%	73%	74%	74%*

N/A – Not Available *Comparative YRBS data for U.S. is 2015

Health Care Access: Health Care Coverage

Key Findings

In 2019, 14% of Morrow County adults were without health care coverage. One-fourth (25%) of adults did not get prescriptions from their doctor filled in the past year.

General Health Coverage

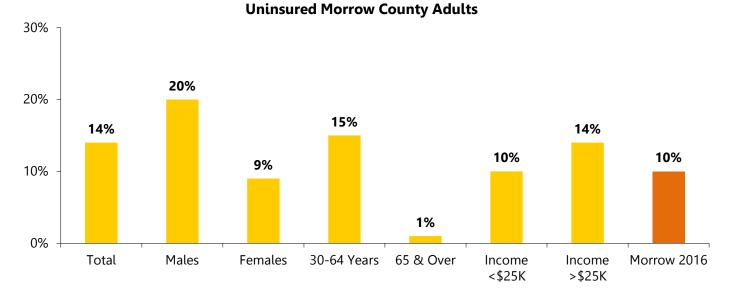
- In 2019, 86% of Morrow County adults had health care coverage.
- In the past year, 14% of adults were uninsured.
- Nearly one-fifth (18%) of adults with children did not have health care coverage, compared to 12% of those who did not have children living in their household.
- The following types of health care coverage were used: employer (46%); Medicare (18%); someone else's employer (11%); Medicaid or medical assistance (9%); self-paid plan (8%); Health Insurance Marketplace (4%); multiple, including private sources (2%); multiple, including government sources (1%); and military or VA (1%).

3,548 of Morrow County adults were uninsured.

- Morrow County adult health care coverage included the following: medical (97%), prescription coverage (92%), preventive health (80%), immunizations (76%), dental (73%), vision/eyeglasses (67%), outpatient therapy (66%), Morrow County physicians (63%), mental health (57%), durable medical equipment (38%), alcohol and drug treatment (36%), home care (27%), skilled nursing/assisted living (25%), hospice (21%), and transportation (11%).
- Morrow County adults had the following issues regarding their health care coverage: cost (41%), opted out of certain coverage because they could not afford it (11%), opted out of certain coverage because they did not need it (7%), could not understand their insurance plan (6%), service not deemed medically necessary (5%), working with their insurance company (5%), limited visits (5%), provider no longer covered (3%), pre-existing conditions (3%), and service no longer covered (2%).
- One-fourth (25%) of adults did not get prescriptions from their doctor filled in the past year. Reasons for not getting their prescriptions filled included: no prescriptions to be filled (57%), too expensive (45%), they did not think they needed it (25%), no insurance (20%), side effects (14%), they stretched their current prescription by taking less than prescribed (6%), there was no generic equivalent (5%), they were taking too many medications (5%), fear of addiction (3%), and transportation (2%).

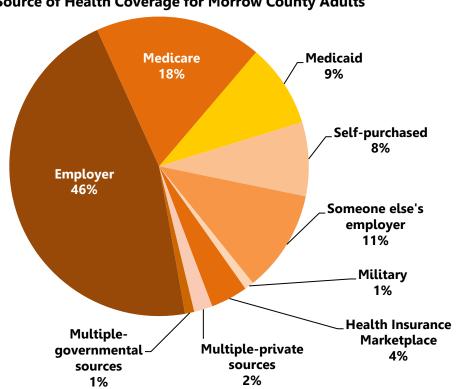
Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Uninsured	10%	14%	8%	11%

The following graph shows the percentage of Morrow County adults who were uninsured. Examples of how to interpret the information in the graph include: 14% of all adults were uninsured, including 10% of those with incomes less than \$25,000 and 20% of males. The pie chart shows sources of Morrow County adults' health care coverage.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

10% of Morrow County adults with incomes less than \$25,000 were uninsured.



Source of Health Coverage for Morrow County Adults

Health Coverage Includes:	Yes	Νο	Don't Know
Medical	97%	<1%	3%
Prescription Coverage	92%	5%	3%
Preventive Health	80%	3%	17%
Immunizations	76%	4%	20%
Dental	73%	23%	4%
Vision/Eyeglasses	67%	27%	6%
Outpatient Therapy	66%	2%	32%
Physicians in Morrow County	63%	6%	31%
Mental Health/Mental Health Counseling	57%	5%	38%
Durable Medical Equipment	38%	5%	57%
Alcohol and Drug Treatment	36%	6%	58%
Home Care	27%	5%	68%
Skilled Nursing/Assisted Living	25%	4%	71%
Hospice	21%	5%	74%
Transportation	11%	15%	74%

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

Healthy People 2020 Access to Health Services (AHS)

Objective	Morrow County 2019	Ohio 2017	U.S. 2016*	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health care insurance	100% age 20-24 76% age 25-34 83% age 35-44 79% age 45-54 88% age 55-64	87% age 18-24 90% age 25-34 90% age 35-44 91% age 45-54 93% age 55-64	85% age 18-24 84% age 25-34 87% age 35-44 90% age 45-54 93% age 55-64	100%

*U.S. baseline is age-adjusted to the 2000 population standard. (Sources: Healthy People 2020 Objectives, 2016 BRFSS, 2017 BRFSS, 2019 Morrow County Community Health Assessment)

Health Care Access: Access and Utilization

Key Findings

Two-thirds (67%) of Morrow County adults had visited a doctor for a routine checkup in the past year. Ninety-four percent (94%) of adults went outside of Morrow County for health care services in the past year.

Health Care Access and Utilization

- More than four-fifths (84%) of adults indicated they had at least one person they thought of as their personal doctor or health care provider, and 14% did not have a personal doctor or health care provider.
- Adults with health care coverage were more likely to have at least one person they thought of as their personal doctor or health care provider (88%), compared to 61% of those without health care coverage.
- Two-thirds (67%) of Morrow County adults visited a doctor for a routine checkup in the past year, increasing to 81% of those over the age of 65.
- Adults with health care coverage were more likely to have visited a doctor for a routine checkup in the past year (72%), compared to 38% of those without health care coverage.

3,548 Morrow County adults did not have a personal doctor or health care provider.

- Adults visited the following places when they were sick or needed advice about their health: doctor's office (68%); urgent care center (9%); in-store health clinic (3%); Internet (2%); a public health center or community health center (2%); hospital emergency room (2%); chiropractor (2%); family and friends (2%); multiple places, including a doctor's office (2%); multiple places, not including a doctor's office (1%); Department of Veteran's Affairs (VA) (1%); and alternative therapies (<1%). Six percent (6%) of adults indicated they had no usual place for health care services.
- One-in-nine (11%) Morrow County adults had the following transportation issues when they needed services: could not afford gas (4%), no car (3%), disabled (3%), limited public transportation available or accessible (2%), did not feel safe to drive (2%), no driver's license (1%), car did not work (1%), no public transportation available or accessible (1%), no transportation before or after 8 a.m.- 4:30 p.m. (<1%), no car insurance (<1%), and other car issues/expenses (1%).
- The following might prevent Morrow County adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (30%), could not get time off work (8%), difficult to get an appointment (7%), inconvenient hours (6%), doctor would not take their insurance (5%), worried they might find something wrong (3%), difficult to find/no transportation (2%), frightened of the procedure or doctor (2%), did not trust or believe doctors (1%), could not find childcare (1%), and some other reason (4%).
- Ninety-four percent (94%) of adults went outside of Morrow County for the following health care services in the past year: dental services (56%), primary care (53%), specialty care (39%), obstetrics/gynecology/NICU (21%), female health services (19%), pediatric care (11%), orthopedic care (11%), cardiac care (11%), counseling services (5%), cancer care (4%), pediatric therapies (4%), skilled nursing (4%), mental health care (3%), hospice (1%), addiction services (<1%), and other services (13%).
- Adults traveled to the following locations for their health care needs outside of Morrow County: Columbus (43%), Marion (27%), Delaware (26%), Galion (15%), Mansfield (13%), Mt. Vernon (11%), and other places (12%).

- Morrow County adults had not gotten any of the following recommended major care or preventive care due to cost: mammogram (9%), lab testing (8%), colonoscopy (6%), weight loss program (6%), mental health services (6%), surgery (6%), medications (5%), Pap smear (5%), immunizations (4%), prostate-specific antigen (PSA) test (3%), smoking cessation (3%), family planning services (3%), and alcohol/drug treatment (3%).
- Morrow County adults felt confident doing the following when accessing health care: filling out medical forms accurately (94%), following instructions correctly on a medicine prescription container (88%), following their health care provider's advice (85%), knowing how to obtain health insurance that best fits their needs (63%), and knowing their health care provider's exchange information so they can accurately provide care (62%).

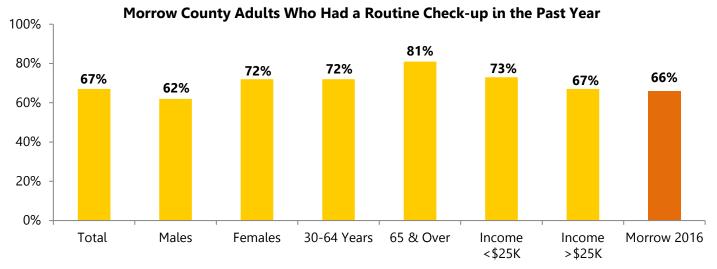
Availability of Services

• Morrow County adults reported they had looked for the following programs: depression, anxiety, or mental health (26%); eldercare (11%); weight problems (8%); disability (8%); end-of-life/Hospice care (8%); marital or family problems (6%); family planning (5%); cancer support group/counseling (3%); alcohol abuse (3%); tobacco cessation (3%); drug abuse (3%); detoxification for opiates/heroin (2%); and gambling abuse (1%).

		-
Types of Programs (% of all adults who looked for the programs)	Morrow County adults who have looked and have found a specific program	Morrow County adults who have looked and have NOT found a specific program
Depression, Anxiety, or Some Mental Health Problem (26% of all adults looked)	86%	14%
Eldercare (11% of all adults looked)	80%	20%
Weight Problems (8% of all adults looked)	75%	25%
Disability (8% of all adults looked)	78%	22%
End-of-life/Hospice Care (8% of all adults looked)	95%	5%
Marital/Family Problems (6% of all adults looked)	93%	7%
Family Planning (5% of all adults looked)	73%	27%
Cancer Support Group/Counseling (3% of all adults looked)	88%	12%
Alcohol Abuse (3% of all adults looked)	83%	17%
Tobacco Cessation (3% of all adults looked)	88%	12%
Drug Abuse (3% of all adults looked)	63%	37%
Detoxification for Opiates/Heroin (2% of all adults looked)	40%	60%
Gambling Abuse (1% of all adults looked)	67%	33%

Morrow County Adults Able to Access Assistance Programs/Services

The following graph shows the percentage of Morrow County adults who had a routine check-up in the past year. Examples of how to interpret the information include: 67% of all Morrow County adults had a routine check-up in the past year, including 62% of males and 81% of those 65 years and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Visited a doctor for a routine checkup (in the past year)	66%	67%	72%	70%
Visited a doctor for a routine checkup (five or more years ago)	N/A	6%	7%	8%
Had at least one person they thought of as their personal doctor or health care provider	88%	84%	81%	77%

N/A-Not Available

Health Care Access: Preventive Medicine

Key Findings

Almost two-thirds (64%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Nearly half (49%) of adults had a flu vaccine in the past year.

Preventive Medicine

- Nearly half (49%) of Morrow County adults had a flu vaccine during the past year, increasing to 68% of Morrow County adults ages 65 and over.
- Thirty-one percent (31%) of adults have had a pneumonia vaccine in their life, increasing to 64% of those ages 65 and over.
- Morrow County adults have had the following vaccines
 - MMR in their lifetime (79%)
 - Tetanus booster (including Tdap) in the past ten years (67%)
 - Chicken pox in their lifetime (52%)
 - Hepatitis B in their lifetime (42%)
 - Hepatitis A in their lifetime (31%)
 - Pertussis vaccine in the past ten years (23%)
 - Zoster (shingles) vaccine in their lifetime (16%)
 - Human papillomavirus (HPV) vaccine in their lifetime (13%)

12,419 Morrow County adults had a flu vaccine in the past year.

- Reasons for not receiving recommended vaccinations included the following: cost (4%), did not think they were necessary (4%), personal beliefs (3%), doctor did not recommend them (2%), fear of getting sick (2%), fear of adverse effects (2%), religious beliefs (1%), fear of immunizations (1%), pre-existing health issues (<1%), and other reasons (6%).
- Morrow County adults indicated a doctor or health professional talked to them about following topics: family history (43%); weight control (diet, physical activity) (33%); immunizations (32%); safe use of prescription medication (26%); depression, anxiety or emotional problems (22%); tobacco use (15%); bone density (12%); PSA test (11%); falls (9%); alternative pain therapy (9%); alcohol use (9%); family planning (7%); self-testicular exams (7%); safe use of opiate-based pain medication (7%); sexually transmitted diseases (STDs) (7%); injury prevention, such as safety belt use, helmet use, or smoke detectors (6%); genetic testing (4%); illicit drug abuse (2%); domestic violence (1%); and firearm safety (1%).

Preventive Health Screenings and Exams

- Morrow County adults had the following preventive screenings or exams in the past two years: vision (76%), hearing (25%), skin cancer (22%), and bone density (13%).
- Nearly half (49%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past five years.
- In the past year, 50% of Morrow County women ages 40 and over had a mammogram.
- Thirty-five percent (35%) of men ages 50 and over had a PSA test in the past year.
- See the Women and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Morrow County adults.

Healthy People 2020 Immunization and Infectious Diseases (IID)

Objective	Morrow County 2019	Ohio 2017	U.S. 2017	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	64%	76%	75%	90%
IID-12.7: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated annually against seasonal influenza	68%	63%	60%	90%
IID-14: Increase the percentage of adults who are vaccinated against zoster (shingles)	16%	29%	29%	30%

Note: U.S. baseline is age-adjusted to the 2000 population standard (Sources: Healthy People 2020 Objectives, 2017 BRFSS, 2019 Morrow County Health Assessment)

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Had a pneumonia vaccination (age 65 and over)	77%	64%	76%	75%
Had a flu vaccine in the past year (age 65 and over)	77%	68%	63%	60%
Ever had a shingles or zoster vaccine	14%	16%	29%	29%
Had a colonoscopy/sigmoidoscopy within the past five years (age 50 and over)	53%	49%	N/A	N/A

N/A – Not Available

	with their Health Care Professional in the Past Year						
Health Care Topics	Total	Total					
·	2016	2019					
Family History	22%	43%					
Weight Control	N/A	33%					
Immunizations	22%	32%					
Safe Use of Prescription Medication	25%	26%					
Depression, Anxiety, or Emotional Problems	15%	22%					
Tobacco Use	N/A	15%					
Bone Density	N/A	12%					
PSA test	N/A	11%					
Alcohol Use	7%	9%					
Alternative Pain Therapy	8%	9%					
Falls	N/A	9%					
Self-Testicular Exams	N/A	7%					
Sexually Transmitted Disease (STDs)	N/A	7%					
Family Planning	N/A	7%					
Safe Use of Opiate-Based Pain Medication	10%	7%					
Injury Prevention	12%	6%					
Genetic Testing	N/A	4%					
Illicit Drug Abuse	2%	2%					
Firearm Safety	N/A	1%					
Domestic Violence	2%	1%					

Morrow County Adults Having Discussed Health Care Topics With Their Health Care Professional in the Past Year

N/A – Not Available

Recommended Adult Immunization Schedule by Age Group United States, 2019 Table 1

Vaccine	19–21 years	22–26 years	27-49) years	50–64 years	≥65 years	
Influenza inactivated (IIV) or Influenza recombinant (RIV) Influenza live attenuated			1 dose a				
(LAIV)			1 dose a	nnually			
Tetanus, diphtheria, pertussis (Tdap or Td)		1 dose Tdap, then Td booster every 10 yrs					
Measles, mumps, rubella (MMR)		1 or 2 doses depend	ling on indica	tion (if born in	1957 or later)		
Varicella (VAR)	2 doses (if born in 1980 or later)					
Zoster recombinant (RZV) (preferred)						2 doses	
Zoster live (ZVL)						1 dose	
Human papillomavirus (HPV) Female	2 or 3 doses depending or	n age at initial vaccination					
Human papillomavirus (HPV) Male	2 or 3 doses depending or	n age at initial vaccination					
Pneumococcal conjugate (PCV13)						1 d <mark>ose</mark>	
Pneumococcal polysaccharide (PPSV23)		1 or	2 doses deper	nding on indica	ation	1 dose	
Hepatitis A (HepA)		2 or	3 doses depe	nding on vacc	ine		
Hepatitis B (HepB)		2 or	3 doses depe	nding on vacc	ine		
Meningococcal A, C, W, Y (MenACWY)	1 or 2 doses depending on indication, then booster every 5 yrs if risk remains						
Meningococcal B (MenB)	2 or 3 doses depending on vaccine and indication						
Haemophilus influenzae type b (Hib)		1 or 3 doses depending on indication					
	Recommended vaccination fo	r adults who meet age requirement,	Rec	ommended vaccin	ation for adults with an	No recommendation	

lack documentation of vaccination, or lack evidence of past infection

additional risk factor or another indication

(Source: Centers for Disease Control and Prevention, Recommended Immunizations for Adults, 2019)

Health Care Access: Women's Health

Key Findings

Half (50%) of Morrow County women over the age of 40 reported having a mammogram in the past year. Sixty-four percent (64%) of Morrow County women ages 19 and over had a clinical breast exam and 50% had a Pap smear to detect cancer of the cervix in the past year. Two percent (2%) of women survived a heart attack and 3% survived a stroke at some time in their life. Twenty-nine percent (29%) were obese, 29% had high blood pressure, 26% were diagnosed with high blood cholesterol, and 15% were identified as current smokers, known risk factors for cardiovascular diseases.

Women's Health Screenings

- In 2019, 63% of women had a mammogram at some time in their life, and more than one-third (35%) had this screening in the past year.
- Half (50%) of women ages 40 and over had a mammogram in the past year, and 65% had one in the past two years.

Morrow County Female Leading Causes of Death, 2015 – 2017 Total Female Deaths: 459

- 1. Cancers (25% of all deaths)
- 2. Heart Diseases (23%)
- 3. Chronic Lower Respiratory Diseases (8%)
- 4. Alzheimer's Disease (4%)
- 5. Stroke (4%)
- 6. Unintentional Injuries (4%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

Ohio Female Leading Causes of Death, 2015 – 2017 Total Female Deaths: 180,539

- 1. Heart Diseases (22% of all deaths)
- 2. Cancers (21%)
- 3. Chronic Lower Respiratory Diseases (6%)
- 4. Stroke (6%)
- 5. Alzheimer's disease (5%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

- Ninety-six percent (96%) of Morrow County women had a clinical breast exam at some time in their life, and 64% had one within the past year. Two-thirds (67%) of women ages 40 and over had a clinical breast exam in the past two years.
- Ninety-two percent (92%) of Morrow County women had a Pap smear at some point in their life, and 50% reported having had the exam in the past year. More than three quarters (76%) of women had a Pap smear in the past three years.

Pregnancy

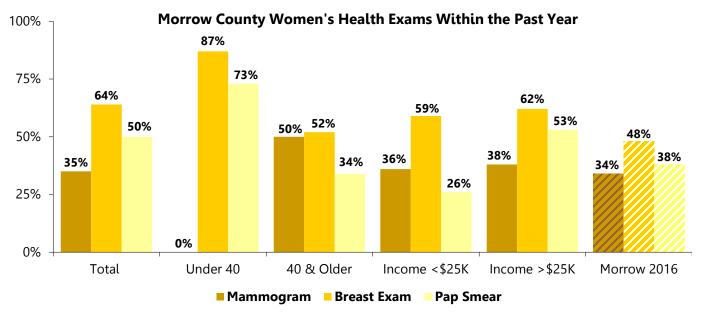
- Twenty-eight percent (28%) of Morrow County women had been pregnant in the past five years.
- During their last pregnancy, Morrow County women:
 - Got a prenatal appointment in the first three months (56%)
 - Took a multi-vitamin with folic acid (53%)
 - Got a dental exam (41%)
 - Experienced depression (19%)
 - Received WIC benefits (16%)
 - Smoked cigarettes or used other tobacco products (13%)

Women's Health Concerns

• Women used the following as their usual source of services for female health concerns: private gynecologist (69%), general or family physician (18%), multiple sources (4%), midwife (2%), and nurse practitioner/physician assistant (2%). Six percent (6%) indicated they did not have a usual source of services for female health concerns.

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Morrow County, the 2019 health assessment identified that:
 - 58% of women were overweight or obese (2017 BRFSS reports 64% for Ohio and 60% for U.S.)
 - 29% were diagnosed with high blood pressure (2017 BRFSS reports 33% for Ohio and 31% for U.S.)
 - 26% were diagnosed with high blood cholesterol (2017 BRFSS reports 33% for Ohio and 32% for U.S.)
 - 15% of all women were current smokers (2017 BRFSS reports 20% for Ohio and 14% for U.S.)
 - 13% had been diagnosed with diabetes (2017 BRFSS reports 11% for Ohio and 11% for U.S.)

The following graph shows the percentage of Morrow County females who had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 35% of females had a mammogram within the past year, 64% had a clinical breast exam, and 50% had a Pap smear.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

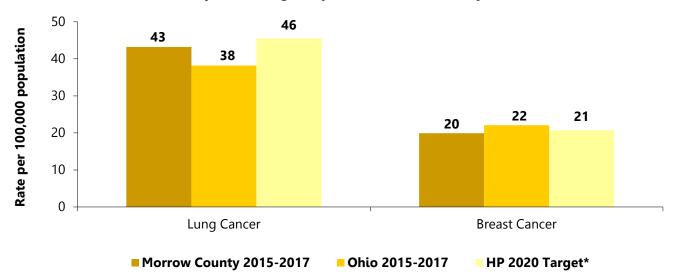
Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2016	U.S. 2016
Had a clinical breast exam in the past two years (age 40 and over)	66%	67%	N/A	N/A
Had a mammogram in the past two years (age 40 and over)	70%	65%	74%	72%
Had a Pap smear in the past three years (age 21-65)	65% <i>‡</i>	76%	82%	80%

N/A – Not Available

‡Pap smear was reported for women ages 19 and over

The following graph shows the Morrow County and Ohio age-adjusted cancer mortality rates per 100,000 population for women with comparison to Healthy People 2020 objectives. The graph shows:

• From 2015 to 2017, the Morrow County age-adjusted mortality rate for breast cancer was slightly lower than both the Ohio rate and Healthy People 2020 target objective.



Morrow County Female Age-Adjusted Cancer Mortality Rates, 2015-2017

(Source: Ohio Public Health Data Warehouse, 2015-2017, Healthy People 2020)

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

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

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

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

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

(Source: Centers for Disease Control and Prevention, What Can I Do to Reduce My Risk of Breast Cancer? Updated September 11, 2018)

Health Care Access: Men's Health

Key Findings

In 2019, 35% of Morrow County males age 50 and over had a prostate-specific antigen (PSA) test in the past year. Nearly half (48%) had been diagnosed with high blood pressure, 42% were obese, 41% had high blood cholesterol, and 12% were current smokers, known risk factors for cardiovascular diseases.

Men's Health Screenings and Concerns

- Nearly two-fifths (38%) of Morrow County males had a prostate-specific antigen (PSA) test at some time in their life, and 19% had one in the past year.
- Sixty-five percent (65%) of males age 50 and over had a PSA test at some time in their life, and 35% had one in the past year.
- Approximately two-fifths (41%) of men had a digital rectal exam in their lifetime, and 13% had one in the past year.
- One-fourth (25%) of males age 50 and over had a digital rectal exam in the past year.

Morrow County Male Leading Causes of Death, 2015 – 2017 Total Male Deaths: 563

- 1. Heart Diseases (29% of all deaths)
- 2. Cancers (25%)
- 3. Accidents, Unintentional Injuries (8%)
- 4. Chronic Lower Respiratory Diseases (7%)
- 5. Stroke (3%)
- 6. Diabetes (3%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

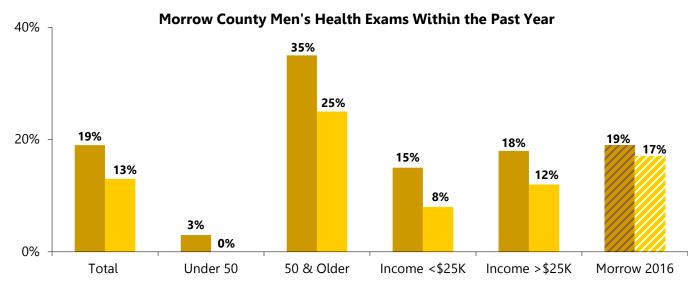
Ohio Male Leading Causes of Death, 2015 – 2017 Total Male Deaths: 180,695

- 1. Heart Diseases (24% of all deaths)
- 2. Cancers (22%)
- 3. Accidents, Unintentional Injuries (8%)
- 4. Chronic Lower Respiratory Diseases (6%)
- 5. Stroke (4%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

- Morrow County males used the following as their usual source of services for male health concerns:
 General or family physician (72%)
 - Health department clinic (1%)
 - Some other place (1%)
- Twenty-two percent (22%) of males indicated they did not have a usual source of services for male health concerns.
- Three percent (3%) of Morrow County males had been diagnosed with prostate cancer, increasing to 7% of those over the age of 50.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Morrow County, the 2019 health assessment identified that:
 - 90% of men were overweight or obese (2017 BRFSS reports 72% for Ohio and 71% for U.S.)
 - 48% were diagnosed with high blood pressure (2017 BRFSS reports 37% for Ohio and 35% for U.S.)
 - 41% were diagnosed with high blood cholesterol (2017 BRFSS reports 34% for Ohio and 35% for U.S.)
 - 16% had been diagnosed with diabetes (2017 BRFSS reports 11% for Ohio and 11% for U.S.)
 - 12% of all men were current smokers (2017 BRFSS reports 22% for Ohio and 19% for U.S.)

The following graph shows the percentage of Morrow County males who had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 19% of Morrow County males had a PSA test within the past year, and 13% had a digital rectal exam.



Prostate-Specific Antigen (PSA) Digital Rectal

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2016	U.S. 2016
Had a PSA test in within the past two years (age 40 and over)	45%	52%	39%	40%
Had a digital rectal exam within the past year	17%	13%	N/A	N/A

N/A - Not Available

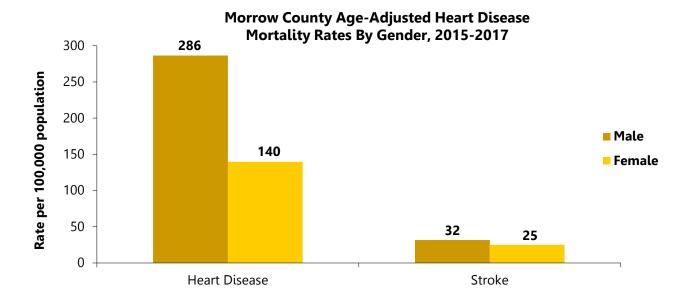
Prostate Cancer Awareness

- Prostate cancer is the most common 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 if they are 50 years old or older, are African-American, or have a father, brother, or son who has had prostate cancer.
- This test is commonly used to screen for prostate cancer:
 - 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: Centers for Disease Control and Prevention, Prostate Cancer Awareness, June 11, 2018)

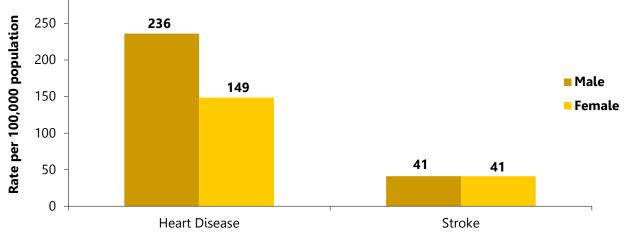
The following graphs show the Morrow County and Ohio age-adjusted mortality rates per 100,000 population for cardiovascular diseases by gender. The graphs show:

- From 2015 to 2017, the Morrow County and Ohio male age-adjusted mortality rates were higher than the female rate for heart disease.
- The Morrow County male age-adjusted stroke mortality rate was lower than the Ohio male rate.



Ohio Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2015-2017

300



(Source for graphs: Ohio Public Health Data Warehouse, 2015-2017)

Health Care Access: Oral Health

Key Findings

Sixty-five percent (65%) of Morrow County adults visited a dentist or dental clinic in the past year. Nearly half (47%) of all adults had one or more permanent teeth removed, and 19% of adults over the age of 65 had all of their permanent teeth removed.

Access to Dental Care

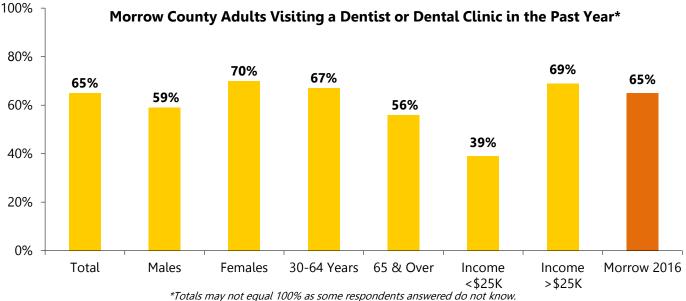
- In the past year, 65% of Morrow County adults had visited a dentist or dental clinic, decreasing to 39% of those with incomes less than \$25,000.
- Two-thirds (67%) of Morrow County adults with dental insurance had been to the dentist in the past year, compared to 50% of those without dental insurance.
- When asked the main reason for not visiting a dentist in the last year, 26% had dentures; 24% had no oral health problems or had not thought of it; 22% said cost; 11% said fear, apprehension, nervousness, pain, and dislike going; 4% did not have/know a dentist; 1% said their dentist did not accept their medical coverage; and 1% had transportation issues.
- Nearly half (47%) of adults had one or more of their permanent teeth removed, increasing to 74% of those ages 65 and over.

•	Nearly one-fifth (19%) of Morrow Cour	ty adults ages 65 and over had all of their permanent teeth removed.

Adult Oral Health	Within the Past Year	Within the Past Two Years	Within the Past Five Years	Five or More years	Never		
Time Since Last Visit to Dentist/Dental Clinic							
Males	59%	9%	8%	19%	0%		
Females	70%	14%	5%	7%	1%		
Total	65%	11%	7%	13%	<1%		

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2016	U.S. 2016
Visited a dentist or a dental clinic (within the past year)	65%	65%	68%	66%
Visited a dentist or a dental clinic (five or more years ago)	11%	13%	11%	10%
Had any permanent teeth extracted	42%	47%	45%	43%
Had all their natural teeth extracted (ages 65 and older)	19%	19%	17%	14%

The following graph indicates the percentage of Morrow County adults who visited a dentist or dental clinic in the past year. Examples of how to interpret the information include: 65% of all Morrow County adults had been to the dentist or dental clinic in the past year, including 59% of males and 39% of those with incomes less than \$25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Oral Health Basics

- Oral health affects our ability to speak, smile, eat, and show emotions. It also affects self-esteem, school performance, and attendance at work and school. Oral diseases—which range from cavities to gum disease to oral cancer—cause pain and disability for millions of Americans. They also cost taxpayers billions of dollars each year.
- Cavities (also called tooth decay) are one of the most common chronic diseases in the United States. By age 34, more than 80% of people have had at least one cavity. More than 40% of adults have felt pain in their mouth in the last year. The nation spends more than \$124 billion a year on costs related to dental care. On average, over 34 million school hours are lost and over \$45 billion is lost in productivity each year due to unplanned (emergency) dental care.
- Oral health has been linked with other chronic diseases, like diabetes and heart disease. It is also linked with risk behaviors like using tobacco and eating and drinking foods and beverages high in sugar.
- Public health strategies such as community water fluoridation and school dental sealant programs have been proven to save money and prevent cavities.

(Source: CDC, Division of Oral Health, National Center for Chronic Disease Prevention and Health Promotion, Updated June 3, 2019)

Health Behaviors: Health Status Perceptions

Key Findings

In 2019, nearly half (48%) of Morrow County adults rated their health status as excellent or very good. Conversely, 14% of adults described their health as fair or poor, increasing to 43% of those with incomes less than \$25,000.

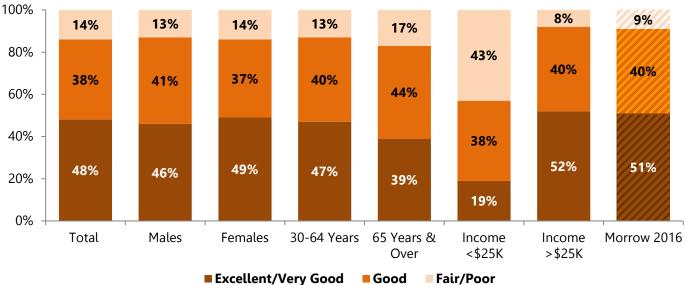
General Health Status

- In 2019, nearly half (48%) of Morrow County adults rated their health as excellent or very good. Morrow County adults with higher incomes (52%) were most likely to rate their health as excellent or very good, compared to 19% of those with incomes less than \$25,000.
- Fourteen percent (14%) of adults rated their health as fair or poor.
- Twenty-six percent (26%) of adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation for at least one day during the past month.

In 2019, 3,548 Morrow County adults rated their health as fair or poor.

- Morrow County adults were most likely to rate their health as fair or poor if they:
 - Had an annual household income less than \$25,000 (43%)
 - Had been diagnosed with diabetes (29%)
 - Had high blood cholesterol (22%)
 - Were never married (22%) or widowed (21%)
 - Had high blood pressure (20%)

The following graph shows the percentage of Morrow County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 48% of all Morrow County adults, 46% of males, and 39% of those ages 65 and older rated their health as excellent or very good.



Morrow County Adult Health Perceptions*

*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?" Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Physical Health Status

- In 2019, 22% of Morrow County adults rated their physical health as not good on four or more days in the previous month.
- Morrow County adults reported their physical health as not good on an average of 3.5 days in the previous month.
- Morrow County adults were most likely to rate their physical health as not good if they:
 - Had an annual household income under \$25,000 (38%)
 - Were over the age of 65 (27%)

Mental Health Status

- In 2019, 26% of Morrow County adults rated their mental health as not good on four or more days in the previous month.
- Morrow County adults reported their mental health as not good on an average of 3.9 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 3.8 days, respectively, in the previous month *(Source: 2016 BRFSS as compiled by 2019 County Health Rankings).*
- Morrow County adults were most likely to rate their mental health as not good if they:
 - Had an annual household income less than \$25,000 (73%)
 - Were female (30%)

The table shows the percentage of adults with poor physical and mental health in the past month.

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days					
	Physical Health Not Good in Past Month*									
Males	48%	16%	10%	2%	12%					
Females	51%	16%	3%	3%	15%					
Total	49%	16%	6%	2%	13%					
	Mental	Health Not Go	od in Past Mor	nth*						
Males	56%	14%	8%	2%	10%					
Females	45%	22%	7%	0%	21%					
Total	50%	17%	7%	1%	15%					

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

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Rated general health as good, very good, or excellent	91%	86%	81%	81%
Rated general health as excellent or very good	51%	48%	49%	51%
Rated general health as fair or poor	9%	14%	19%	18%
Rated mental health as not good on four or more days (in the past month)	16%	26%	26%	24%
Rated physical health as not good on four or more days (in the past month)	20%	22%	23%	22%
Average number of days that physical health was not good (in the past month) (County Health Rankings)	3.5	3.5	4.0 [¥]	3.7 [¥]
Average number of days that mental health was not good (in the past month) (County Health Rankings)	2.9	3.9	4.3 [¥]	3.8 [¥]
Poor physical or mental health kept them from doing usual activities, such as self- care, work, or recreation (on at least one day during the past month)	20%	26%	24%	23%

**2016 BRFSS data as compiled by 2019 County Health Rankings*

Health Behaviors: Adult Weight Status

Key Findings

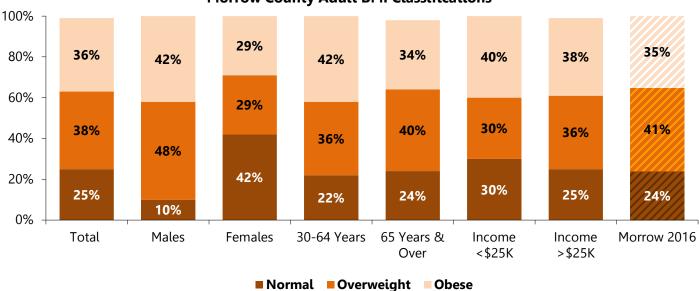
Nearly three-fourths (74%) of Morrow County adults were overweight or obese based on body mass index (BMI). More than three-fifths (61%) of adults engaged in some type of physical activity or exercise for at least 30 minutes on three or more days per week.

Adult Weight Status

- Almost three-fourths (74%) of Morrow County adults were either overweight (38%) or obese (36%) by body mass index (BMI), putting them at elevated risk for developing a variety of diseases.
- More than two-fifths (44%) of adults were trying to lose weight, 26% were trying to maintain their current weight or keep from gaining weight, and 1% were trying to gain weight.
- Morrow County adults did the following to lose weight or keep from gaining weight: drank more water (40%); exercised (37%); ate less food, fewer calories, or foods low in fat (35%); ate a low-carb diet (14%); smoked cigarettes (1%); went without eating 24 or more hours (1%); used a weight loss program (<1%); received health coaching (<1%); and took prescribed medications (<1%).

9,124 Morrow County adults were obese.

The following graph shows the percentage of Morrow County adults who were overweight or obese by body mass index (BMI). Examples of how to interpret the information include: 25% of all Morrow County adults were classified as normal weight, 38% were overweight, and 36% were obese.



Morrow County Adult BMI Classifications*

*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight. Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Obese	35%	36%	34%	32%
Overweight	41%	38%	34%	35%
Normal weight	24%	25%	30%	32%

Physical Activity

- Morrow County adults spent an average of 2.5 hours watching TV, 1.8 hours on their cell phone, 1.3 hours on the computer/tablet, and 0.2 hours playing video games on an average day of the week.
- In Morrow County, 61% of adults engaged in some type of physical activity or exercise for at least 30 minutes on three or more days per week. Thirty-seven percent (37%) of adults exercised five or more days per week. Nearly one-fourth (23%) of adults did not participate in any physical activity in the past week, including 4% who were unable to exercise.
- The CDC recommends that adults should complete at least 2 hours and 30 minutes to 5 hours a week of moderate-intensity, or 1 hour and 15 minutes to 2 hours and 30 minutes a week of vigorous-intensity aerobic physical activity, or an equivalent combination of moderate- and vigorous-intensity aerobic activity. Preferably, aerobic activity should be spread throughout the week *(Source: U.S. Department of Health and Human Services, 2018 Physical Activity Guidelines for Americans).*
- Reasons for not exercising included the following: time (23%); weather (21%); too tired (17%); laziness (14%); pain or discomfort (13%); did not like to exercise (9%); could not afford a gym membership (5%); no exercise partner (4%); poorly maintained/no sidewalks (4%); lack of opportunities for those with physical impairments or challenges (4%); no walking, biking trails, or parks (3%); no gym available (3%); transportation (2%); no access to green spaces or parks (1%); no child care (1%); neighborhood safety (1%); and no access to schools/recreational facilities (<1%).

Nutrition

- In 2019, 38% of adults ate one to two servings of fruits and vegetables per day, 37% ate three to four servings per day, and 22% ate five or more servings per day. Three percent (3%) of adults ate no servings of fruits and vegetables per day.
- The American Cancer Society recommends that adults eat at least 2¹/₂ cups of fruits and vegetables per day to reduce the risk of cancer and to maintain good health *(Source: American Cancer Society, 2017).*
- Forty-three percent (43%) of adults drank one to two servings of sugar-sweetened beverages per day, 6% drank three to four servings, 4% drank five or more servings per day, and nearly half (47%) did not drink any sugar-sweetened beverages.
- Over half (51%) of adults drank one to two servings of caffeinated beverages per day, 21% drank three to four servings, 12% drank five or more servings per day, and 16% did not drink any caffeinated beverages.
- Morrow County adults reported the following reasons they chose the types of food they ate: taste/enjoyment (57%), healthiness of food (51%), cost (48%), ease of preparation/time (46%), what their family prefers (38%), food they were used to (38%), availability (33%), nutritional content (24%), calorie content (19%), if it is organic (12%), artificial sweetener content (9%), if it is genetically modified (8%), other food sensitivities (6%), if it is gluten free (5%), health care provider's advice (3%), and if it is lactose free (<1%).
- In a typical week, 64% of adults ate one to two meals out at a restaurant or brought home takeout food, 14% ate three to four meals, and 4% ate five or more meals per week. Eighteen percent (18%) of adults reported they did not eat out or bring takeout home to eat in a typical week.

• Morrow County adults purchased their fruit and vegetables from the following places: large grocery store (94%), grow their own/garden (42%), farmer's market (26%), local grocery store (19%), Dollar General/Store (14%), Veggie Mobile/mobile produce (4%), food pantry (3%), corner/convenience store (3%), community garden (2%), and other places (2%).

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

- The food environment index in Morrow County is 8.7
 - LA AH FU WI OT GE CU SA DE HY HU SE PA ME PU MH HN VW WD AS WY RI HR MR CA HL AU MC MW LO KN JE SH UN HI DL CH DA MM FR MK a MA NO PR MG FA PE PI FY WA BT AT Morrow County had a VI HA food index measure of: PK м 8.7 SC MISSING BEST WORST
- The food environment index in Ohio is 6.7.

(Source: USDA Food Environment Atlas, as compiled by County Health Rankings 2019)

Health Behaviors: Adult Tobacco Use

Key Findings

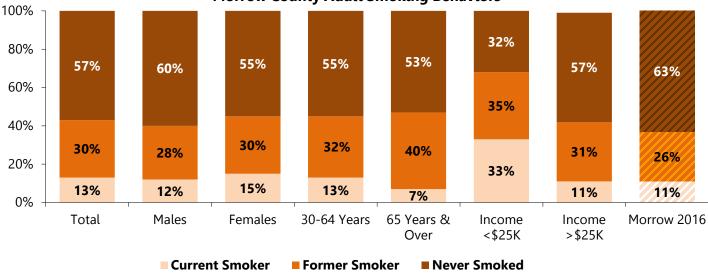
In 2019, 13% of Morrow County adults were current smokers, and 30% were considered former smokers. Three percent (3%) of adults used e-cigarettes in the past year. Most (91%) adults believed secondhand smoke was harmful to their and their family's health.

Adult Tobacco Use Behaviors

- In 2019, one-in-eight (13%) Morrow County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- Nearly one-third (30%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- Morrow County adult smokers were more likely to have:
 - Never been married (42%) or divorced (32%)
 - Incomes less than \$25,000 (33%)
 - Rated their health as poor (25%)
- Morrow County adults used the following tobacco products in the past year: cigarettes (22%); chewing tobacco, snuff, dip, or Betel quid (8%); e-cigarettes (3%); cigars (2%); hookah (1%); little cigars (1%); pipes (1%); and pouch (1%).
- More than half (57%) of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit.
- Ninety-one percent (91%) of Morrow County adults believed secondhand tobacco smoke was harmful to their or their family's health. Three percent (3%) of adults did not believe secondhand tobacco smoke was harmful to their or their family's health. Six percent (6%) of adults were not sure if secondhand smoke was harmful to their or their family's health.
- Adults who used e-cigarettes in the past year put the following in their e-cigarette:
 - E-liquid or e-juice with nicotine (4%)
 - E-liquid or e-juice without nicotine (4%)
 - Marijuana or THC in their e-liquid (2%)

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Current smoker (currently smoke some or all days)	11%	13%	21%	17%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	26%	30%	24%	25%

The following graph shows the percentage of Morrow County adults' smoking behaviors. Examples of how to interpret the information include: 13% of all Morrow County adults were current smokers, 30% were former smokers, and 57% had never smoked.



Morrow County Adult Smoking Behaviors*

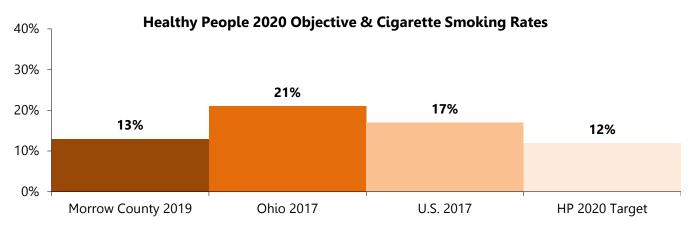
*Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?" Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall

survey.

57% 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 Morrow County, Ohio, and U.S. adult cigarette smoking rates. The BRFSS rates shown for Ohio and the U.S. were for adults 18 years and older. This graph shows:

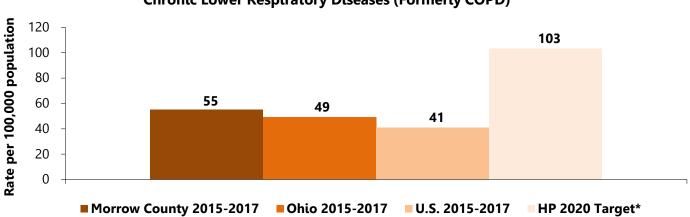
• The Morrow County adult cigarette smoking rate was lower than the Ohio and U.S. rates but higher than the Healthy People 2020 objective.



(Source: 2019 Morrow County Health Assessment, 2017 BRFSS and Healthy People 2020)

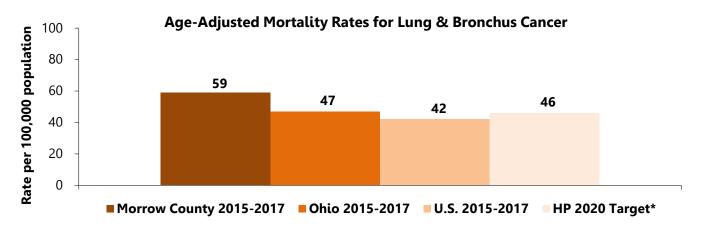
The following graphs show Morrow County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD), as well as lung and bronchus cancer, in comparison with the Healthy People 2020 objective. These graphs show:

- From 2015 to 2017, Morrow County's age-adjusted mortality rate for chronic lower respiratory disease was higher than the Ohio and U.S. rates, but lower than the Healthy People 2020 target objective.
- Morrow County's age-adjusted mortality rate for lung and bronchus cancer was higher than Ohio and U.S. rates, and higher than the Healthy People 2020 target objective.



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

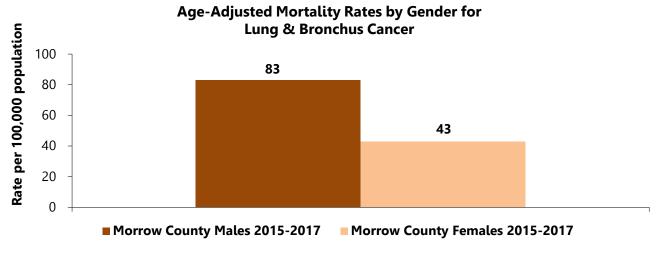
^{*}The Healthy People 2020's target rate and the U.S. rate is for adults ages 45 years and older. (Source: Ohio Public Health Data Warehouse 2015-2017, CDC Wonder 2015-2017 and Healthy People 2020)



*The Healthy People 2020 target objective only includes the age-adjusted lung cancer death rate. (Source: Ohio Public Health Data Warehouse 2015-2017, CDC Wonder 2015-2017 and Healthy People 2020)

The following graph shows the Morrow County age-adjusted mortality rates for lung and bronchus cancer by gender. The graph shows:

• Disparities existed by gender for Morrow County lung and bronchus cancer age-adjusted mortality rates. From 2015 to 2017, the Morrow County male rate was higher than the female rate.



(Source: Ohio Public Health Data Warehouse 2015-2017)

E-Cigarette Health Effects

- Most e-cigarettes contain nicotine, which has known health effects.
 - Nicotine is highly addictive.
 - Nicotine is toxic to developing fetuses.
 - Nicotine can harm adolescent brain development, which continues into the early to mid-20s.
 - Nicotine is a health danger for pregnant women and their developing babies.
- Besides nicotine, e-cigarette aerosol can contain substances that harm the body.
 - This includes cancer-causing chemicals and tiny particles that reach deep into lungs. However, e-cigarette
 aerosol generally contains fewer harmful chemicals than smoke from burned tobacco products.
- E-cigarettes can cause unintended injuries.
 - Defective e-cigarette batteries have caused fires and explosions, some of which have resulted in serious injuries. Most explosions happened when the e-cigarette batteries were being charged.
 - The Food and Drug Administration (FDA) collects data to help address this issue. You can report an ecigarette explosion, or any other unexpected health or safety issue with an e-cigarette, here.
 - In addition, acute nicotine exposure can be toxic. Children and adults have been poisoned by swallowing, breathing, or absorbing e-cigarette liquid through their skin or eyes.

(Source: CDC, Smoking & Tobacco Use, About Electronic Cigarettes (E-Cigarettes), updated November 15, 2018)

Health Behaviors: Adult Alcohol Consumption

Key Findings

More than half (55%) of Morrow County adults had at least one alcoholic drink in the past month. Sixteen percent (16%) of Morrow County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers. Twelve percent (12%) of current drinkers drove a vehicle or other equipment after consuming any alcoholic beverages.

Adult Alcohol Consumption

- In 2019, 55% of the Morrow County adults had at least one alcoholic drink in the past month, increasing to 59% of males and those with incomes more than \$25,000.
- Of those who drank, Morrow County adults drank 4.7 drinks on average, increasing to 5.9 drinks for males.
- One-in-six (16%) Morrow County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.

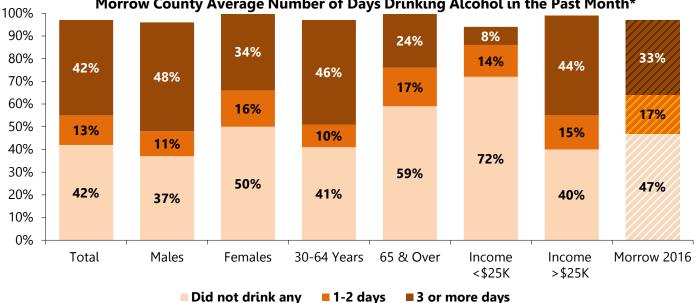
4,055 Morrow County adults were considered binge drinkers

- In the past month, adults drove a vehicle while they had perhaps too much to drink at the following frequencies: one time (1%), two times (<1%), don't know (2%), never (44%), and did not drink at all (54%).
- One-in-eight (12%) current drinkers reported driving a vehicle after drinking any alcoholic beverage in the past month.
- Morrow County adults experienced the following in the past six months:
 - Drove a vehicle or other equipment after having any alcoholic beverages (12%)
 - Drank more than they expected (9%)
 - Used prescription drugs while drinking (4%)
 - Continued to drink despite problems caused by drinking (4%)
 - Drank more to get the same effect (3%)
 - Spent a lot of time drinking (3%)
 - Tried to quit or cut down but could not (3%)
 - Gave up other activities to drink (2%)
 - Had legal problems (<1%)
 - Drank to ease withdrawal symptoms (<1%)
- Less than one percent (<1%) of Morrow County adults used a program to help with an alcohol or drug problem for themselves or a loved one. Reasons for not using such a program included the following: had not thought of it (3%), did not want to miss work (1%), could not afford to go (<1%), and other reasons (2%). Ninety-six percent (96%) of adults indicated such a program was not needed.

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Current drinker (drank alcohol at least once in the past month)	50%	55%	54%	55%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past month)	11%	16%	19%	17%
Drinking and driving (had driven after drinking too much)	7%	12%	4%*	4%*

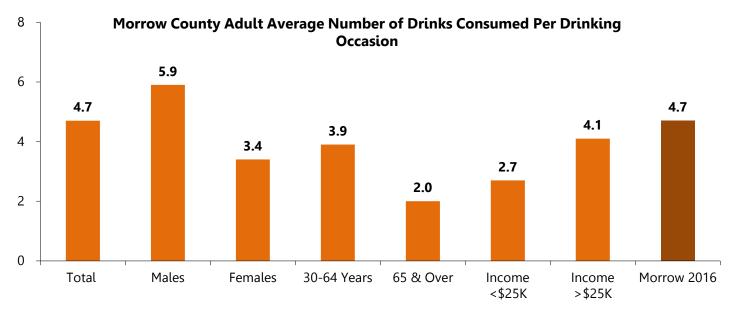
^{*2016} BRFSS Data

The following graphs show the percentage of Morrow County adults who consumed alcohol and the amount consumed on average in the past month. Examples of how to interpret the information shown on the first graph include: 42% of all Morrow County adults did not drink alcohol, including 37% of adult males and 50% of adult females.



Morrow County Average Number of Days Drinking Alcohol in the Past Month*

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



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Behaviors: Adult Drug Use

Key Findings

In 2019, 3% of Morrow County adults had used marijuana during the past six months. Seven percent (7%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past six months.

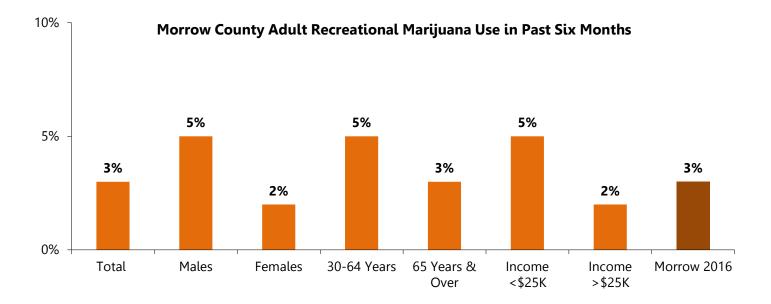
Adult Drug Use

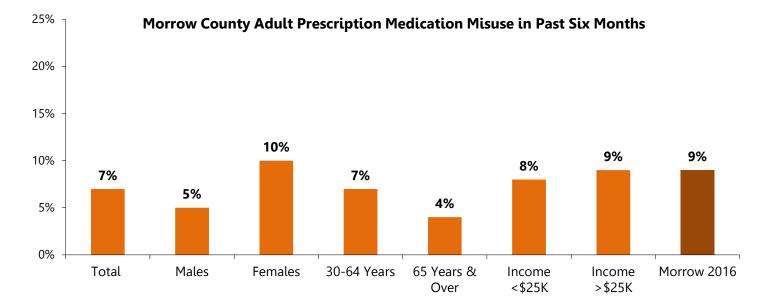
- Three percent (3%) of Morrow County adults had used recreational marijuana in the past six months.
- One percent (1%) of Morrow County adults reported using other recreational drugs in the past six months such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamine.
- Seven percent (7%) of adults had used medication not prescribed for them during the past six months.
- Morrow County adults indicated they did the following with their unused prescription medication:
 - Took as prescribed (24%)
 - Threw them in the trash (12%)
 - Flushed them down the toilet (12%)
 - Kept them (11%)
 - Took them to the medication collection program (11%)
 - Took them in on Drug Take Back Days (6%)
 - Took them to the sheriff's office (2%)
 - Disposed in RedMed Box/Yellow Jug (2%)
 - Kept them in a locked cabinet (1%)
 - Gave them away (1%)
 - Sold them (1%)
 - Some other destruction method (2%)
- Forty-seven percent (47%) of adults did not have unused medication.
- Less than one percent (<1%) of Morrow County adults used a program to help with an alcohol or drug problem for themselves or a loved one. Reasons for not using such a program included the following: had not thought of it (3%), did not want to miss work (1%), could not afford to go (<1%), and other reasons (2%). Ninety-six percent (96%) of adults indicated such a program was not needed.

	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Adults who used marijuana in the past six months	3%	3%	N/A	N/A
Adults who misused prescription medication in the past six months	9%	7%	N/A	N/A

N/A- Not Available

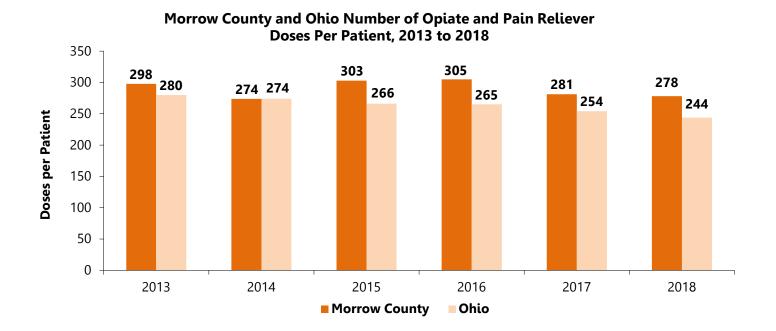
The following graphs show adult marijuana use and medication misuse in the past six months. Examples of how to interpret the information on the first graph include: 3% of all Morrow County adults used recreational marijuana in the past six months, including 5% of males and 2% of those with incomes more than \$25,000.

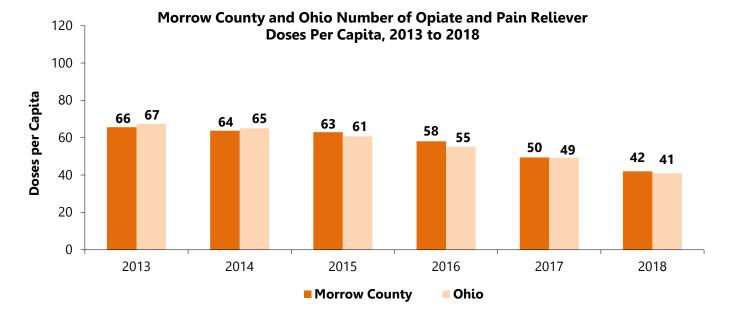




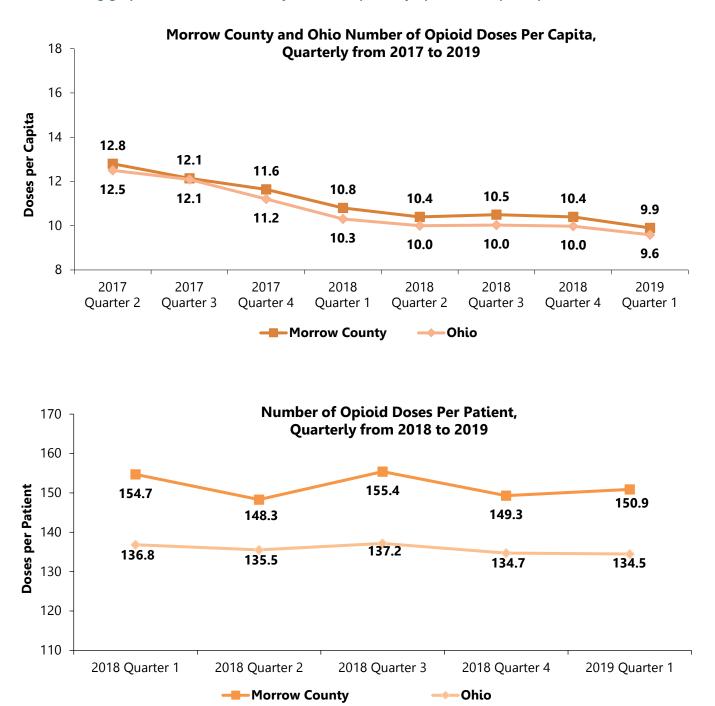
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

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

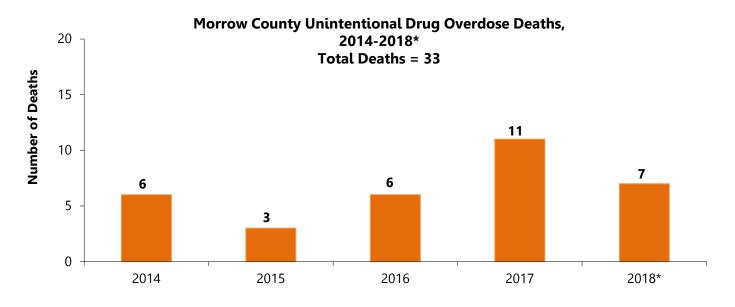




(Source for graphs: Ohio's Automated Rx Reporting System, 2013-2018)



(Source for graphs: Ohio's Automated Rx Reporting System, 2018-2019, retrieved on 7/9/19)



The following graph shows Morrow County unintentional drug overdose deaths 2014 to 2018.

*Years are considered partial and may be incomplete.

(Source for graphs: Ohio Public Health Data Warehouse, 2014-2018)

Note: Resident deaths include individuals that resided in Morrow at the time of death regardless of where the death occurred.

Ohio Automated Rx Reporting System (OARRS)

- OARRS has been collecting information from all Ohio-licensed pharmacies and Ohio personal licensed prescribers regarding outpatient prescriptions for controlled substance since 2006.
 All data reported is updated every 24 hours and is maintained in a secure database.
- OARRS aims to be a reliable tool in addressing prescription drug diversion and abuse.
- With many features such as a patient care tool, epidemic early warning system, drug diversion and insurance fraud investigation tool, OARRS is the only statewide electronic database that helps prescribers and pharmacists avoid potential life-threatening drug interactions.
 - OARRS also works in limiting patients who "doctor shop" which refers to individuals fraudulently
 obtaining prescriptions from multiple health care providers for the same or multiple prescription for
 abuse or illegal distribution.
- Additionally, OARRS is also used for investigating and identifying health care professionals with continual inappropriate prescribing and dispensing to patients, and then aids in law enforcement cases against such acts.

(Source: Ohio Automated RX Reporting System; What is OARRS?, updated August 15, 2017)

The table below shows the number of unintentional drug overdose deaths, and average crude and age-adjusted annual death rates per 100,000 population, for Morrow County and Ohio.

Number of Unintentional Drug Overdose Deaths and Average Crude and Age-Adjusted Annual Death Rates Per 100,000 Population, by County, 2005-2017

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2012-2017 Total	Crude Rate	Age Adjusted Rate
lorrow County	3	5	2	2	5	8	5	2	9	6	3	6	11	37	17.7	20.5
Ohio	1,020	1,261	1,351	1,473	1,423	1,544	1,772	1,914	2,110	2,531	3,050	4,050	4,854	18,509	26.6	27.9

(Source: Ohio Department of Health, 2017 Ohio Drug Overdose Data: General Findings)

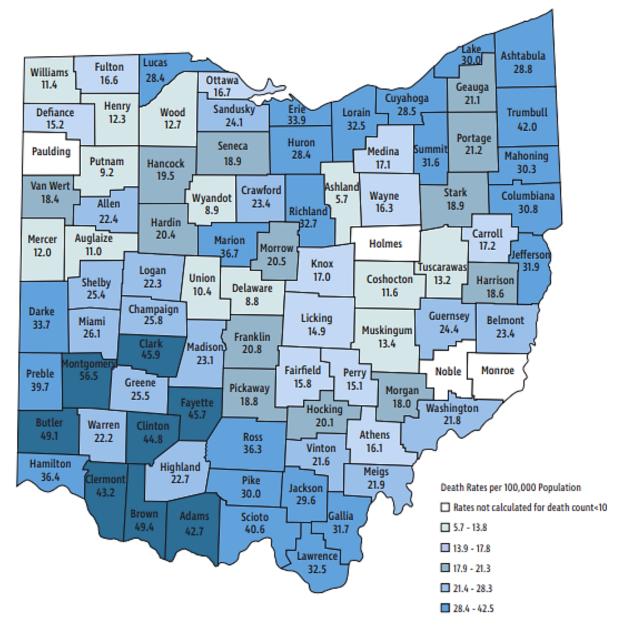
Ohio's New Limits on Prescription Opiates

- The opioid epidemic is undeniably a major public health issue that Ohio has been addressing since 2012. Furthering steps to save lives, Ohio has updated its policies in limiting opiate prescriptions, especially acute pain. With the highlights of Ohio's new opiate prescribing limits below, Ohio hopes to reduce opiate doses by 109 million per year:
 - No more than seven days of opiates can be prescribed for adults; no more than five days of opiates can be prescribed for minors.
 - The total morphine equivalent dose (MED) of a prescription for acute pain cannot exceed an average of 30 MED per day.
 - Health care providers can prescribe opiates in excess of the new limits only if they provide a specific reason in the patient's medical record. Unless
 such a reason is given, a health care provider is prohibited from prescribing opiates that exceed Ohio's limits.
 - Prescribers will be required to include a diagnosis or procedure code on every controlled substance prescription, which will be entered into Ohio's
 prescription monitoring program, OARRS.
 - The new limits do not apply to opioids prescribed for cancer, palliative care, end-of-life/hospice care or medication-assisted treatment for addiction.
 - The new limits will be enacted through rules passed by the State Medical Board, Board of Pharmacy, Dental Board and Board of Nursing.
- Since 2012, Ohio has reduced opiate prescriptions by 20% yet, more needs to be done to reduce the possibility of opiate abuse to those who are prescribed.

(Source: Ohio Mental Health and Addiction Services; New Limits on Prescription Opiates Will Save Lives and Fight Addiction, updated March 31, 2017)

Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population, by County, 2012-2017

- The Ohio age-adjusted unintentional drug overdose death rate for 2012-2017 was 27.9 deaths per 100,000 population.
- Morrow County's age-adjusted unintentional drug overdose death rate for 2012-2017 was 20.5 deaths per 100,000 population.



Sources: "2017 Ohio Drug Overdoes Data: General Findings," Ohio Department of Health; Ohio Department of Health, Bureau of Vital Statistics; analysis conducted by ODH Violence and Injury Prevention Program; U.S. Census Bureau (Vintage 2017 population estimates)

Note: Includes Ohio residents who died due to unintentional drug poisoning (underlying cause of death ICD-10 codes X40-X44). Rate suppressed if < 10 total deaths for 2012-2017.

Health Behaviors: Adult Sexual Behavior

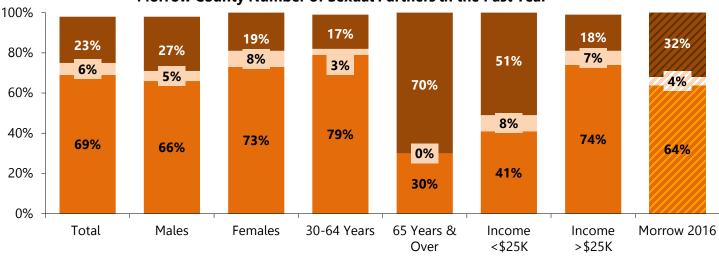
Key Findings

In 2019, 75% of Morrow County adults had sexual intercourse. Six percent (6%) of adults had more than one partner. Seven percent (7%) of Morrow County adults reported being forced to participate in sexual activity when they did not want to.

Adult Sexual Behavior

- Three-fourths (75%) of Morrow County adults had sexual intercourse in the past year. Six percent (6%) of adults reported they had intercourse with more than one partner in the past year.
- Morrow County adults used the following methods of birth control: vasectomy (20%), tubes tied (19%), they or their partner were too old (17%), abstinence (16%), hysterectomy (10%), birth control pill (10%), condoms (4%), IUD (4%), withdrawal (3%), ovaries or testicles removed (2%), infertility (2%), diaphragm/cervical ring/cap (1%), and contraceptive implants (<1%).
- One-in-ten (10%) Morrow County adults did not use any method of birth control.
- Morrow County adults did not use birth control for the following reasons:
 - They or their partner had a hysterectomy/vasectomy/tubes tied (38%)
 - They or their partner were too old (22%)
 - They did not think they or their partner could get pregnant (8%)
 - They wanted to get pregnant (4%)
 - No regular partner/not sexually active (4%)
 - They did not want to use birth control (4%)
 - Religious preferences (3%)
 - They did not care if they or their partner got pregnant (3%)
 - They or their partner did not like birth control/fear of side effects (2%)
 - They or their partner were currently pregnant (2%)
 - Their partner did not want to use birth control (1%)
 - They or their partner had just had a baby (1%)
 - They or their partner were breastfeeding (1%)
 - They had a same-sex partner (<1%)
- Seven percent (7%) of Morrow County adults indicated they were forced or coerced to have sexual activity when they did not want to, increasing to 12% of females and 16% of those with incomes less than \$25,000. Of those who were forced to participate in sexual activity, 6% reported it.
- Adults made the following sexual behavior changes in the past year due to what they knew about HIV: only had sexual intercourse with the same partner (30%), decreased the number of sexual partners or became abstinent (8%), practiced abstinence (4%), and always used condoms for protection (3%). More than half (58%) of adults did not make any changes.
- The following situations applied to Morrow County adults in the past year: had sex without a condom (32%), had anal sex without a condom (3%), tested for an STD (2%), were forced to have sex (2%), had four or more sexual partners (2%), had sex with someone they met on social media (2%), tested positive for HPV (2%), used intravenous drugs (1%), thought they may have an STD (<1%), and tested positive for HIV (<1%).

The following graph shows the number of sexual partners Morrow County adults had in the past year. Examples of how to interpret the information in the graph include: 69% of all Morrow County adults had one sexual partner in the past year and 6% had more than one; additionally, 66% of males had one partner in the past year.



Morrow County Number of Sexual Partners in the Past Year*

One More than one None

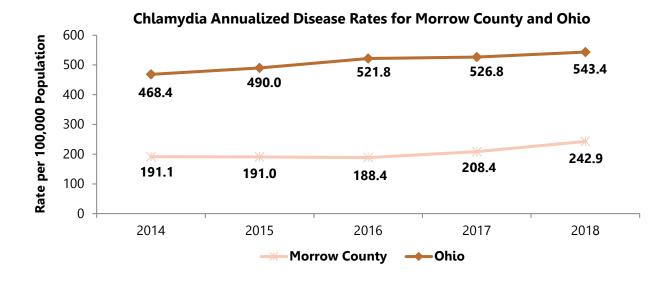
*Respondents were asked: "During the past year, with how many different people have you had sexual intercourse?" Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

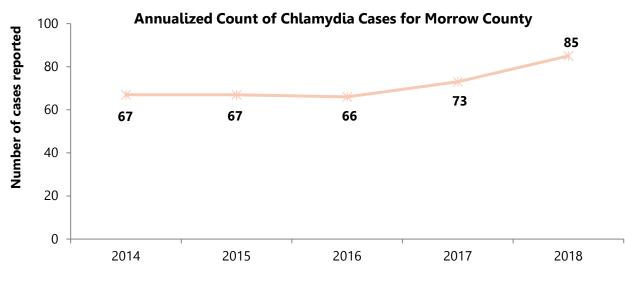
Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Had more than one sexual partner in past year	4%	6%	N/A	N/A

N/A – Not Available

The following graphs show Morrow County chlamydia rates per 100,000 population and the number of chlamydia cases. The graphs show:

- Morrow County chlamydia rates increased from 2014 to 2018.
- The number of chlamydia cases in Morrow County stayed about the same from 2014-2016, then gradually increased from 2017 to 2018.

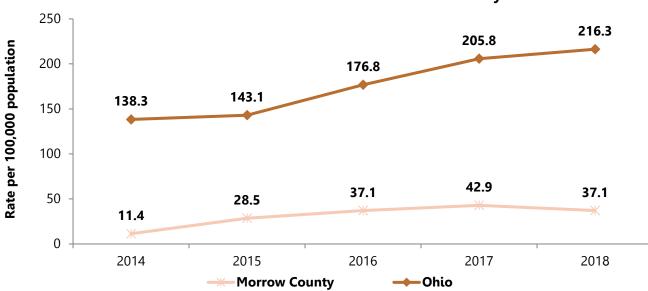




(Source for graphs: ODH, STD Surveillance, data reported through 5-2-19)

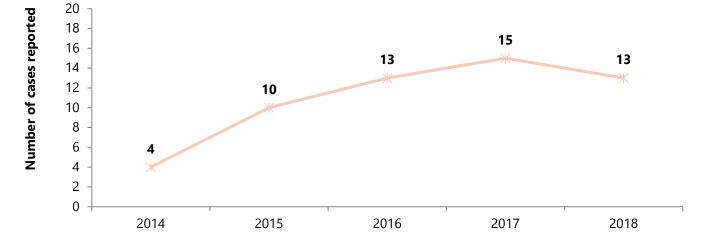
The following graphs show Morrow County gonorrhea rates per 100,000 population and the number of gonorrhea cases. The graphs show:

- The Morrow County gonorrhea rate increased from 2014 to 2017, then slowly decreased in 2018.
- The number of gonorrhea cases in Morrow County increased from 2014-2017, then slowly started to decrease in 2018.



Gonorrhea Annualized Disease Rates for Morrow County and Ohio





(Source for graphs: ODH, STD Surveillance, data reported through 5-2-19)

Health Behaviors: Adult Mental Health

Key Findings

In 2019, 6% of Morrow County adults considered attempting suicide. Fourteen percent (14%) of adults felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities.

Adult Mental Health

• In the past year, 14% of Morrow County adults had a period of two or more weeks when they felt so sad or hopeless nearly every day that they stopped doing usual activities.

Mental Health in the U.S.

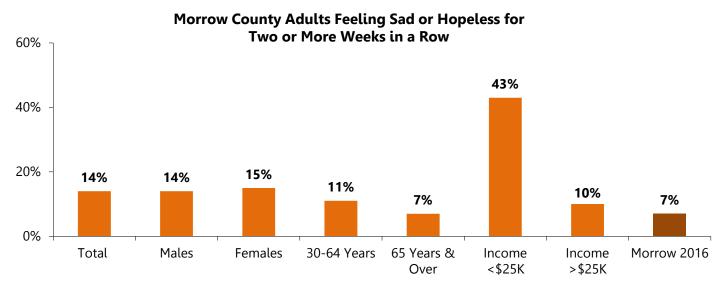
- 3.9% of adults aged 18 and over experienced serious psychological distress in the past month
- There were 56.8 million visits to physicians' offices with mental disorders as the primary diagnosis
- There were 5.5 million visits to emergency departments with mental disorders as the primary diagnosis
- 47,173 suicide deaths
- 14.5 suicide deaths per 100,000 population

(Source: CDC, National Center for Health Statistics, Mental Health, Depression, updated 5/3/2017)

- Six percent (6%) of Morrow County adults considered attempting suicide in the past year.
- Two percent (2%) of adults reported attempting suicide in the past year.
- Adults would do the following if they knew someone who was suicidal:
 - Talk to them (77%)
 - Try to calm them down (56%)
 - Call a crisis line (50%)
 - Call 9-1-1 (47%)
 - Take them to the ER (35%)
 - Call a friend (31%)
 - Call their spiritual leader (23%)
 - Text a crisis line (12%)
 - Nothing (2%)
- Adults indicated the following caused them anxiety, stress, or depression: job stress (41%), financial stress (34%), death of close family member or friend (26%), raising/caring for children (18%), poverty/no money (16%), current news/politics (14%), sick family member (14%), fighting at home (13%), other stress at home (13%), marital/dating relationship (13%), caring for a parent (9%), family member with mental illness (6%), unemployment (5%), social media (5%), divorce/separation (3%), not having enough to eat (2%), sexual orientation/gender identity (1%), not feeling safe at home (1%), not feeling safe in the community (<1%), not having a place to live (<1%), and other causes (9%).
- Morrow County adults dealt with stress in the following ways: talked to someone they trust (52%), prayed/meditated (39%), listened to music (33%), worked on a hobby (28%), worked (25%), exercised (24%), slept (24%), ate more than normal (18%), drank alcohol (10%), used prescription drugs as prescribed (8%), smoked tobacco (6%), took it out on others (6%), talked to a professional (6%), ate less than normal or not at all (5%), used illegal drugs (2%), misused prescription drugs (1%), and other ways (6%).
- Thirteen percent (13%) of Morrow County adults had used a program or service to help with depression, anxiety, or other emotional problems for themselves or a loved one. Reasons for not using a program or service to help with depression, anxiety, or emotional problems included the following: had not thought of it (11%), could not afford to go (6%), stigma of seeking mental health services (4%), other priorities (4%), co-pay/deductible was too high (3%), transportation (2%), did not know how to find a program (2%), fear (2%), too long to see a doctor (<1%), and other reasons (4%). Sixty-one percent (61%) indicated this type of program was not needed.

- Adults reported they or a family member had been diagnosed with or treated for the following mental health issues: depression (20%), anxiety or emotional problem (20%), anxiety disorder (18%), bipolar (9%), post-traumatic stress disorder (9%), attention deficit disorder (7%), other trauma (6%), alcohol and/or illicit drug abuse (3%), eating disorder (3%), psychotic disorder (2%), life adjustment disorder (1%), and another mental health disorder (5%). One-fourth (25%) of adults indicated they or a family member had taken medication for a mental health issue.
- Morrow County adults received the social and emotional support they needed from the following: family (71%), friends (59%), God/prayer (39%), church (32%), neighbors (7%), a professional (6%), community (5%), Internet (3%), online support group (2%), self-help group (1%), and other (3%). Ten percent (10%) of adults reported they did not get the social and emotional support they need and 23% reported they did not need support and could handle it themselves.

The following graph shows Morrow County adults who felt sad or hopeless for two or more weeks in a row in the past year. Examples of how to interpret the information include: 14% of all Morrow County adults felt sad or hopeless for two or more weeks in a row, including 14% of males and 15% of females.



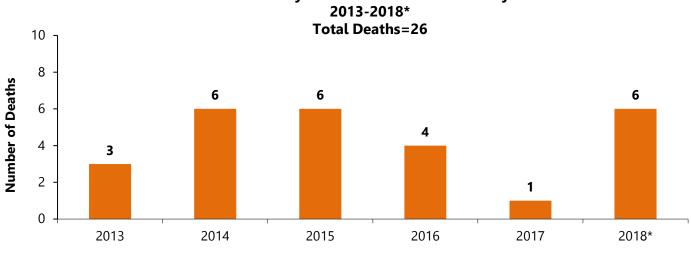
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017	
Considered attempting suicide in the past year	2%	6%	N/A	N/A	
Felt sad or hopeless for two or more weeks in a row	7%	14%	N/A	N/A	

N/A – Not Available

The graph below shows Morrow County suicide counts by year. The graph shows:

From 2013 to 2018, there was an average of 4.3 suicides per year in Morrow County.



Morrow County Number of Suicide Deaths By Year

*2018 data incomplete – please use with caution (Source: Ohio Public Health Data Warehouse 2013-2017, updated 6/12/18)

Suicide Rising Across the U.S.

- Suicide is a leading cause of death in the U.S. •
- Suicide rates have increased more than 30% in half of states since 1999.
- Nearly 45,000 lives were lost to suicide in 2016. •
- More than half (54%) of people who died by suicide did not have a known mental health condition.
- Many factors contribute to suicide among those with and without known mental health conditions. For instance, • relationship problems, crisis in the past or upcoming two weeks, physical health problems, problematic substance use, or job/financial problems.
- Making sure government, public health, health care, employers, education, the media and community • organizations are working together is important for preventing suicide. Public health departments can bring together these partners to focus on comprehensive state and community efforts with the greatest likelihood of preventing suicide.
- States and communities can: •
 - Identify and support people at risk of suicide.
 - Teach coping and problem-solving skills to help people manage challenges with their relationships, jobs, health, or other concerns.
 - Promote safe and supportive environments. This includes safely storing medications and firearms to reduce access among people at risk.
 - Offer activities that bring people together so they feel connected and not alone.
 - Connect people at risk to effective and coordinated mental and physical health care.
 - Expand options for temporary help for those struggling to make ends meet.
 - Prevent future risk of suicide among those who have lost a loved one to suicide.

(Source: CDC, Suicide rising across the US, Updated on June 7, 2018)

Chronic Disease: Cardiovascular Health

Key Findings

Seven percent (7%) of adults had survived a heart attack and 3% had survived a stroke at some time in their life. Forty percent (40%) had high blood pressure, 36% were obese, 33% had high blood cholesterol, and 13% were current smokers, four known risk factors for heart disease and stroke.

Heart Disease and Stroke

- In 2019, 7% of Morrow County adults reported they had survived a heart attack or myocardial infarction, increasing to 20% of those over the age of 65.
- Three percent (3%) of Morrow County adults reported they had survived a stroke, increasing to 9% of those over the age of 65 and 10% of those with incomes less than \$25,000.
- Five percent (5%) of adults reported a doctor, nurse, or other health professional diagnosed them with angina or coronary heart disease, increasing to 10% of those over the age of 65.
- Two percent (2%) of adults reported they had been diagnosed with congestive heart failure, increasing to 8% of those over the age of 65.

High Blood Pressure (Hypertension)

Morrow County Leading Causes of Death 2015-2017

Total Deaths: 1,022

- Heart Disease (26% of all deaths)
- Cancer (25%)
- Chronic Lower Respiratory Diseases (7%)
- Accidents, Unintentional Injury (6%)
- Stroke (4%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

Ohio Leading Causes of Death 2015-2017

Total Deaths: 361,238

- Heart Disease (23% of all deaths)
- Cancers (21%)
- Accidents, Unintentional Injuries (7%)
- Chronic Lower Respiratory Diseases (6%)
- Stroke (5%)

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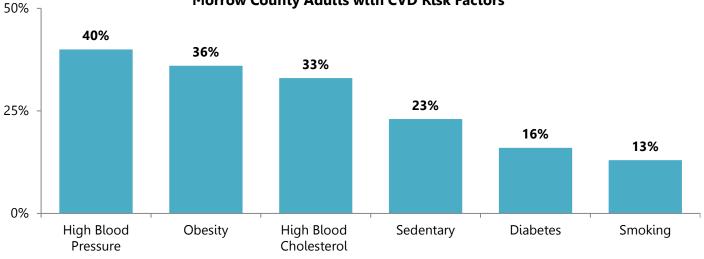
(Source: Ohio Public Health Data Warehouse, 2015-2017)

- Two-fifths (40%) of adults had been diagnosed with high blood pressure.
- More than four-fifths (88%) of adults had their blood pressure checked within the past year.
- Morrow County adults diagnosed with high blood pressure were more likely to have:
 Been ages 65 years or older (64%)
 - Rated their overall health as fair or poor (57%)
 - Incomes less than \$25,000 (51%)
 - Been classified as obese by body mass index (BMI) (43%)

High Blood Cholesterol

- One-third (33%) of adults had been diagnosed with high blood cholesterol.
- More than four-fifths (81%) of adults had their blood cholesterol checked within the past five years.
- Morrow County adults with high blood cholesterol were more likely to have:
 - Been ages 65 years or older (53%)
 - Rated their overall health as fair or poor (53%)
 - Been classified as obese by body mass index (BMI) (48%)
 - Incomes less than \$25,000 (41%)

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

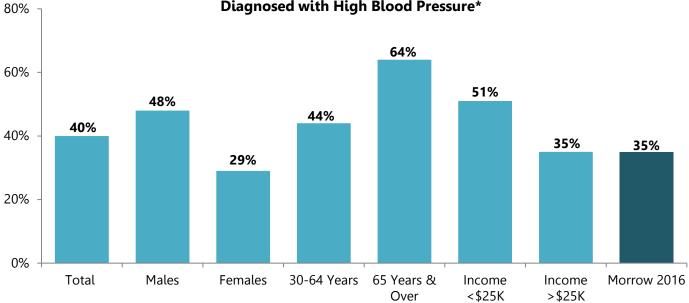


Morrow County Adults with CVD Risk Factors

(Source: 2019 Morrow County Health Assessment)

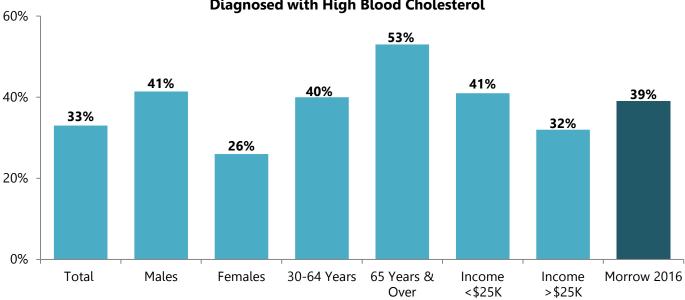
Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Ever diagnosed with angina or coronary heart disease	5%	5%	5%	4%
Ever diagnosed with a heart attack, or myocardial infarction	4%	7%	6%	4%
Ever diagnosed with a stroke	2%	3%	4%	3%
Had been told they had high blood pressure	35%	40%	35%	32%
Had been told their blood cholesterol was high	39%	33%	33%	33%
Had their blood cholesterol checked within the last five years	87%	81%	85%	86%

The following graphs show the percentages of Morrow County adults who had been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 40% of all Morrow County adults had been diagnosed with high blood pressure, including 48% of males and 64% of those 65 years and older.



Diagnosed with High Blood Pressure*

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

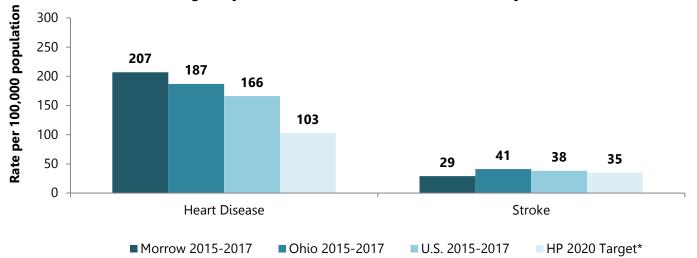


Diagnosed with High Blood Cholesterol

Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

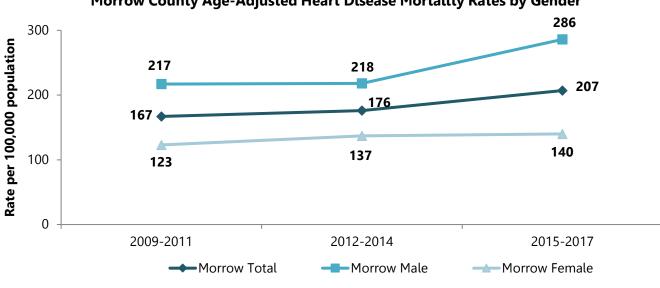
The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- The Morrow County age-adjusted stroke mortality rate from 2015 to 2017 was slightly lower than the state rate and U.S. and slightly lower than the Healthy People 2020 target objective.
- From 2009 to 2017, the Morrow County male total age-adjusted heart disease mortality rate increased.



Age-Adjusted Heart Disease and Stroke Mortality Rates

Note: The Healthy People 2020 Target objective for coronary heart disease is reported for heart attack mortality. (Sources: Ohio Public Health Data Warehouse, 2015-2017, CDC Wonder 2015-2017, Healthy People 2020)

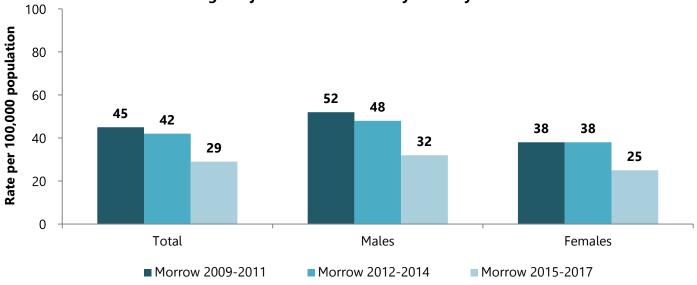


Morrow County Age-Adjusted Heart Disease Mortality Rates by Gender

(Source: Ohio Public Health Data Warehouse, 2009-2017)

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

• From 2015 to 2017, the Morrow County stroke mortality rate was significantly lower for females than for males.



Age-Adjusted Stroke Mortality Rates by Gender

(Source: Ohio Public Health Data Warehouse, 2009-2017)

Healthy People 2020 Objectives Heart Disease and Stroke

Objective	Morrow County Population Baseline	2017 U.S. Baseline	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	40% (2019)	32% Adults age 18 and up	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding five years	81% (2019)	86% Adults age 18 & up	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	33% (2019)	33% Adults age 20+ with TBC>240 mg/dl	14%

Note: All U.S. figures age-adjusted to 2000 population standard. (Source: Healthy People 2020, 2017 BRFSS, 2019 Morrow County Health Assessment)

Chronic Disease: Cancer

Key Findings

Eleven percent (11%) of Morrow County adults had been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) indicates that from 2015-2017, cancers caused 25% (256) of all (1,022) Morrow County resident deaths.

Adult Cancer

• Eleven percent (11%) Morrow County adults were diagnosed with cancer at some point in their lives, increasing to 20% of those over the age of 65.

Morrow County Incidence of Cancer, 2012-2016 All Types: 1,092 cases

- Lung and Bronchus: 202 cases (18%)
- Breast: 150 cases (14%)
- Prostate: 116 cases (11%)
- Colon and Rectum: 104 cases (10%)

In 2015-2017, there were 256 cancer deaths in Morrow County.

(Source: Ohio Cancer Incidence Surveillance System, Ohio Public Health Information Warehouse, 2012-2017)

• One-third (33%) of adults had been screened by a doctor or other health professional for skin cancer. Of those who were screened, 16% were diagnosed with skin cancer, and 23% had a pre-cancerous spot.

2,788 Morrow County adults had been diagnosed with cancer at some time in their life.

Cancer Facts

- The Ohio Department of Health (ODH) indicates that from 2015 to 2017, cancers caused 25% (256) of all (1,022) Morrow County resident deaths. The largest percent (31%) of 2015 to 2017 cancer deaths were from lung and bronchial cancer *(Source: Ohio Public Health Data Warehouse, 2015-2017).*
- 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 cancers: lung, colon and rectum, stomach, pancreas, kidney, bladder, uterine cervix, ovary (mucinous) and blood and bone marrow (acute myeloid leukemia) *(Source: American Cancer Society, Facts & Figures 2019).*
- The American Cancer Society states that about 606,880 Americans are expected to die of cancer in 2019. Cancer is the second leading cause of death in the U.S., exceeded only by heart disease. Nearly 1 of every 7 deaths is associated with cancer *(Source: American Cancer Society, Facts & Figures 2019).*

Lung Cancer

- In Morrow County, 12% of male adults were current smokers, and 63% had stopped smoking for one or more days in the past year because they were trying to quit.
- Approximately 15% of female adults in Morrow County were current smokers, and 53% had stopped smoking for one or more days in the past year because they were trying to quit.
- The Ohio Department of Heath reports that lung and bronchus cancer (n=47) was the leading cause of male cancer deaths from 2015 to 2017 in Morrow County. Cancer of the colon and rectum (n=16) and kidney and prostate cancers (n=15) caused male deaths during the same time *(Source: Ohio Public Health Data Warehouse, 2015-2017)*.
- The Ohio Department of Heath reports that lung and bronchus cancer was the leading cause of female cancer deaths (n=32) in Morrow County from 2015 to 2017, followed by breast (n=15) *(Source: Ohio Public Health Data Warehouse, 2015-2017).*

• According to the American Cancer Society, smoking causes 81% 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 2019).*

Breast Cancer

- In 2019, 64% of Morrow County females reported having had a clinical breast examination in the past year.
- Half (50%) of Morrow 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 90% (*Source: American Cancer Society, Facts & Figures 2019*).
- 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 an annual mammography, and those 55 years of age and older may transition to biennial or continue annual mammography. Women should continue mammography 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 2019).*

Prostate Cancer

- Nearly two-fifths (38%) of Morrow County males had a prostate-specific antigen (PSA) test at some time in their life, and 19% had one in the past year.
- Approximately two-fifths (41%) of men had a digital rectal exam in their lifetime, and 13% had one in the past year.
- The ODH statistics indicate that prostate cancer deaths accounted for 11% of all male cancer deaths from 2015 to 2017 in Morrow County *(Source: Ohio Public Health Data Warehouse, 2015-2017).*
- No organizations presently endorse routine prostate cancer screening for men at average risk because of concerns about the high rate of overdiagnosis (detecting disease that would never have caused symptoms), along with the significant potential for serious side effects associated with prostate cancer treatment. The American Cancer Society recommends that beginning at age 50, men who are at average risk of prostate cancer and have a life expectancy of at least 10 years have a conversation with their health care provider about the benefits and limitations of PSA testing and make an informed decision about whether to be tested based on their personal values and preferences. Men at high risk of developing prostate cancer (black men or those with a close relative diagnosed with prostate cancer before the age of 65) should have this discussion beginning at age 45, and men at even higher risk (those with several close relatives diagnosed at an early age) should have this discussion beginning at age 40 (*Source: American Cancer Society, Facts & Figures 2019*).

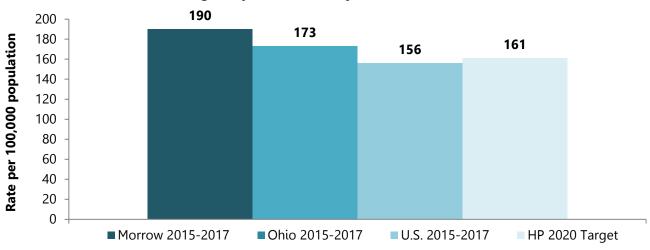
Colorectal Cancers

- Nearly half (49%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past five years.
- ODH indicates that colon and rectal cancer deaths accounted for 9% of all male and female cancer deaths from 2015 to 2017 in Morrow County *(Source: Ohio Public Health Data Warehouse, 2015-2017).*
- Modifiable factors that increase colon and rectal cancer risk include obesity, physical inactivity, long-term smoking, high consumption of red or processed meat, low calcium intake, moderate to heavy alcohol consumption, and very low intake of fruits and vegetables and whole-grain fiber. Hereditary and medical factors that increase risk include a personal or family history of colorectal cancer and/or polyps, certain inherited genetic conditions, a personal history of chronic inflammatory bowel disease, and type 2 diabetes. *(Source: American Cancer Society, Facts & Figures 2019).*

In the U.S., 3.7% annually among adults 55 years of age and older but increased by 1.8% annually among those younger than age 55, suggesting that at the age of 45 a screening should be done (Source: American Cancer Society, Facts & Figures 2019).

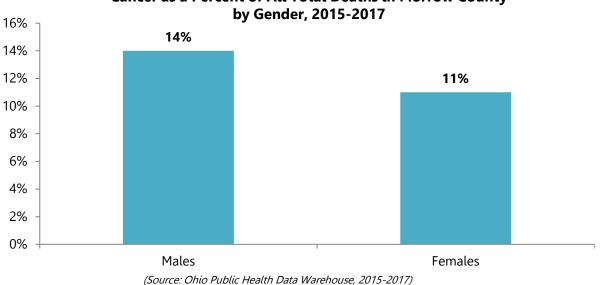
The following graph shows the Morrow County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer in comparison to the Healthy People 2020 objective, as well as cancer as a percent of total deaths in Morrow County. The graphs show:

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



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

(Source: Ohio Public Health Data Warehouse 2015-2017, CDC Wonder 2015-2017, Healthy People 2020)



Cancer as a Percent of All Total Deaths in Morrow County

CANCER | 78

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Lung and Bronchus	202	18%
Breast	150	14%
Prostate	116	11%
Colon & Rectum	104	10%
Other Sites/Types	88	8%
Bladder	55	5%
Kidney & Renal Pelvis	54	5%
Melanoma of Skin	49	4%
Uterus	40	4%
Oral Cavity & Pharynx	37	3%
Non-Hodgkins Lymphoma	30	3%
Leukemia	27	2%
Pancreas	21	2%
Thyroid	15	1%
Liver & Intrahepatic Bile Duct	14	1%
Brain and Other CNS	13	1%
Larynx	13	1%
Cervix	12	1%
Ovary	12	1%
Multiple Myeloma	11	1%
Stomach	11	1%
Esophagus	7	1%
Hodgkins Lymphoma	7	1%
Testis	4	<1%
Total	1,092	100%

Morrow County Incidence of Cancer 2012-2016

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse 2012-2016, Updated 7/25/2019)

2019 Cancer Estimates

- In 2019, about 1,735,450 million new cancer cases are expected to be diagnosed.
- The most common cancers diagnosed in men are prostate, lung and colorectal cancers. Together they account for 42% of all cases in men, with prostate cancer alone accounting for nearly 1 in 5 new cases.
- About 606,880 Americans are expected to die of cancer in 2019.
- The cancer death rate in 2016 was 14% higher in blacks than in whites.
- In 2019, estimates predict that there will be 56,590 new cases of cancer and 25,740 cancer deaths in Ohio.
- As of January 1, 2019, an estimated 1,944,280 people ages 85 and older were cancer survivors, representing 1/3 of all the men and ¼ of all the women in this age group. They are the fastest-growing group of cancer survivors.
- The lifetime probability of being diagnosed with cancer is 39.3% for men and 37.7% for women, which is a little more than 1 in 3.

(Source: American Cancer Society, Facts and Figures 2019)

Chronic Disease: Arthritis

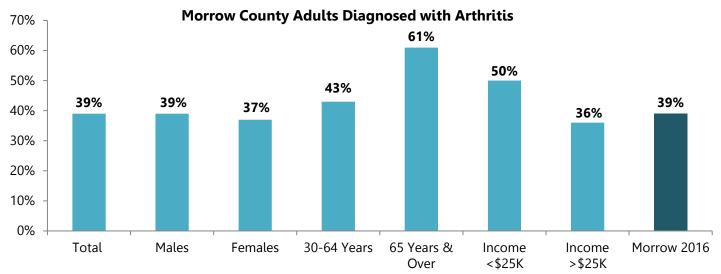
Key Findings

Nearly two-fifths (39%) of Morrow County adults were told by a doctor, nurse, or other health professional that they had some form of arthritis.

Arthritis

- Nearly two-fifths (39%) of Morrow County adults were told by a doctor, nurse, or other health professional that they had some form of arthritis, increasing to 61% of those over the age of 65.
- More than three-fourths (77%) of adults diagnosed with arthritis were overweight or obese.
- An estimated 54 million U.S. adults (about 1 in 5) report having arthritis. About 8 million working age adults (aged 18-65) reported that arthritis limited their work. As the U.S. population ages, the number of adults with arthritis is expected to increase sharply to 78 million by 2040 (*Source: CDC, Arthritis at a Glance 2018*).
- Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of arthritis, are overweight or obese, and/or have joint injuries or infections (*Source: CDC Arthritis: Risk Factors, 2018*).

The following graph shows the percentage of Morrow County adults who were diagnosed with arthritis. An example of how to interpret the information includes: 39% of adults were diagnosed with arthritis, including 37% of females and 61% of those ages 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Diagnosed with arthritis by a doctor, nurse or other health professional	39%	39%	N/A	N/A

N/A – Not Available

Chronic Disease: Asthma

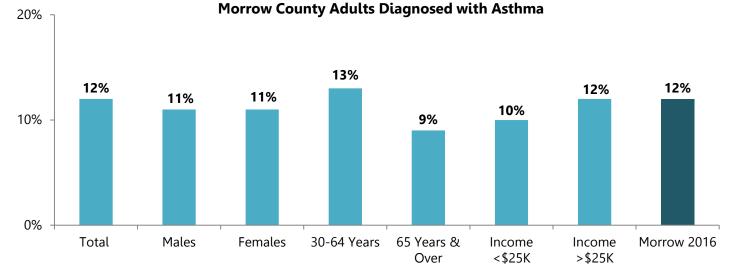
Key Findings

In 2019, 12% of Morrow County adults had been diagnosed with asthma.

Asthma and Other Respiratory Disease

- Twelve percent (12%) of Morrow County adults had been diagnosed with asthma.
- Nearly one-fifth (19%) of adults with asthma visited the emergency room or urgent care center in the past year because of their asthma.
- 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, What Causes an Asthma Attack, 2018).*
- Seven percent (7%) of adults had been diagnosed with a chronic lung disease (including COPD or emphysema), increasing to 18% of those over the age of 65 and 20% of those with incomes less than \$25,000.
- Chronic lower respiratory disease was the third leading cause of death in Morrow County and the fourth leading cause of death in Ohio from 2015 to 2017 *(Source: Ohio Public Health Data Warehouse, 2015-2017).*

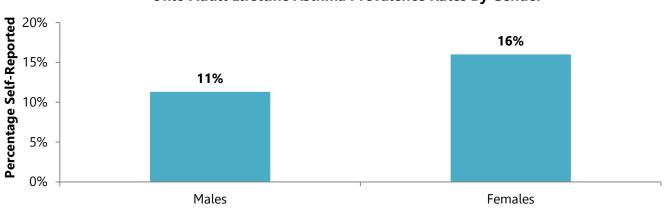
The following graph shows the percentage of Morrow County adults who were diagnosed with asthma. An example of how to interpret the information includes: 12% of adults were diagnosed with asthma, including 11% of females and 13% of those ages 30-64 years.



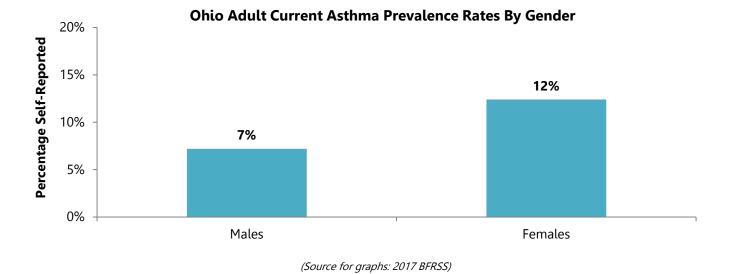
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Had ever been told they have asthma	12%	12%	14%	14%

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



Ohio Adult Lifetime Asthma Prevalence Rates By Gender



Asthma Facts

- The number of Americans with asthma grows every year. Currently, 8.3% of Americans have asthma. Of the 26.5 million, 20.4 million are adults.
- Almost 3,500 people die of asthma each year, nearly half of whom are age 65 or older.
- Asthma results in 439,000 hospitalizations and 1.3 million emergency room visits annually.
- Patients with asthma reported 11 million visits to a doctor's office and 1.7 million visits to hospital outpatient departments.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

(Source: American College of Allergy, Asthma, & Immunology, Asthma Facts, 2018)

Chronic Disease: Diabetes

Key Findings

In 2019, 16% of Morrow County adults had been diagnosed with diabetes. More than one-fourth (29%) of adults with diabetes rated their health as fair or poor.

Diabetes

- Sixteen percent (16%) of Morrow County adults had been diagnosed with diabetes, increasing to 31% of those with incomes less than \$25,000.
- Three percent (3%) of adults had been diagnosed with prediabetes.
- More than one-fourth (29%) of adults with diabetes rated their health as fair or poor.

Diabetes by the Numbers

- Diabetes is the seventh leading cause of death in the US.
- Diabetes is the number one cause of kidney failure, lower-limb amputations, and adult-onset blindness.
- In the last 20 years, the number of adults diagnosed with diabetes has more than doubled as the American population has aged and become more overweight or obese.

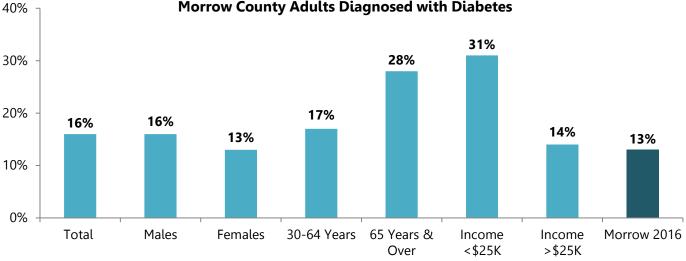
(Source: CDC, Diabetes by the Numbers, Updated on August 6, 2019)

- Adults with diabetes were using the following to treat their diabetes: diet control (66%), diabetes pills (54%), six month check-up with provider (54%), checking blood sugar (48%), annual vision exams (46%), checking A1C annually (41%), exercise (39%), checking their feet (29%), insulin (14%), dental exam (11%), injectables (7%), and taking a class (7%).
- Morrow County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 85% were obese or overweight
 - 71% had been diagnosed with high blood pressure
 - 54% had been diagnosed with high blood cholesterol

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2017	U.S. 2017
Had ever been told by a doctor they have diabetes (not pregnancy related)	13%	16%	11%	11%
Ever been diagnosed with pregnancy-related diabetes	N/A	2%	1%	1%
Ever been diagnosed with pre- diabetes or borderline diabetes	N/A	3%	2%	2%

N/A – Not Available

The following graph shows the percentage of Morrow County adults who had been diagnosed with diabetes. Examples of how to interpret the information on the first graph include: 16% of all Morrow County adults had been diagnosed with diabetes, including 16% of males and 31% of those 65 years and older.



Morrow County Adults Diagnosed with Diabetes

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survev

Types of Diabetes

Diabetes is a chronic disease that affects how your body turns food into energy. There are three main types of diabetes: type 1, type 2 and gestational diabetes (diabetes while pregnant).

- **Type 1 diabetes** is caused by an autoimmune reaction (the body attacks itself by mistake) that stops your • body from making insulin. About 5% of the people who have diabetes have type 1. Symptoms of type 1 diabetes often develop quickly. It's usually diagnosed in children, teens, and young adults. If you have type 1 diabetes, you'll need to take insulin every day to survive. Currently, no one knows how to prevent type 1 diabetes.
- Type 2 diabetes is when the body doesn't use insulin well and is unable to keep blood sugar at normal • levels. About 90% of people with diabetes have Type 2. It develops over many years and is usually diagnosed in adults (though increasingly in children, teens, and young adults). Symptoms sometimes go unnoticed. Type 2 diabetes can be prevented or delayed with healthy lifestyle changes, such as losing weight if you're overweight, eating healthy food, and getting regular physical activity.
- Gestational diabetes develops in pregnant women who have never had diabetes. Babies born to women • with gestational diabetes could be at higher risk for health complications. Gestational diabetes usually goes away after the baby is born but increases the mothers risk for type 2 diabetes later in life. The baby is more likely to become obese as a child or teen, and more likely to develop type 2 diabetes later in life too.

(Source: CDC, About Diabetes, Updated: May 30, 2019)

Key Findings

More than one-fifth (21%) of adults were limited in some way because of a physical, mental, or emotional problem. Nearly half (48%) of adults who were limited in some way were limited by back or neck problems.

Impairments and Health Problems

- In 2019, more than one-fifth (21%) of Morrow County adults were limited in some way because of a physical, mental, or emotional problem, increasing to 58% of those with incomes less than \$25,000.
- Among those who were limited in some way, the following most limiting problems or impairments were reported: back or neck problems (48%); stress, depression, anxiety, or emotional problems (40%); arthritis/rheumatism (39%); chronic pain (31%); walking problems (27%); sleep problems (24%); chronic illness (21%); mental health illness/disorder (19%); fractures, bone/joint injuries (16%); lung/breathing problems (15%); eye/vision problems (11%); memory loss (10%); fitness level (10%); hearing problems (8%); dental problems (8%); learning disability (3%); confusion (2%); developmental disability (2%); and other impairments/problems (10%).
- Adults indicated they or an immediate family member had the following literacy needs:
 - Learning computer skills (7%)
 - Reading and understanding instructions (3%)
 - Completing a job application (2%)
 - Reading a map, signs, food ingredient labels, etc. (2%)

Adult Comparisons	Morrow County 2016	Morrow County 2019	Ohio 2015	U.S 2015
Limited in some way because of a physical, mental, or emotional problems	19%	21%	21%	21%

Healthy People 2020

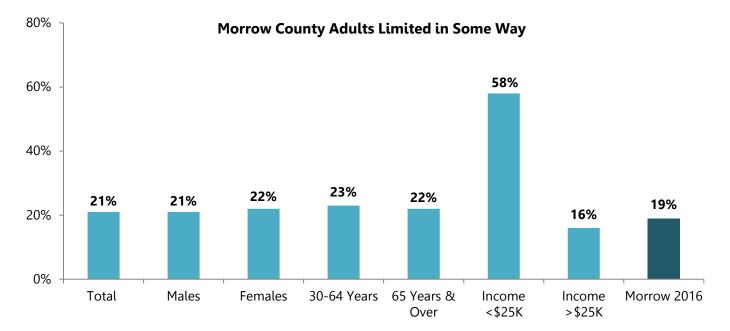
Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Morrow County 2019	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor- diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	39%	36%

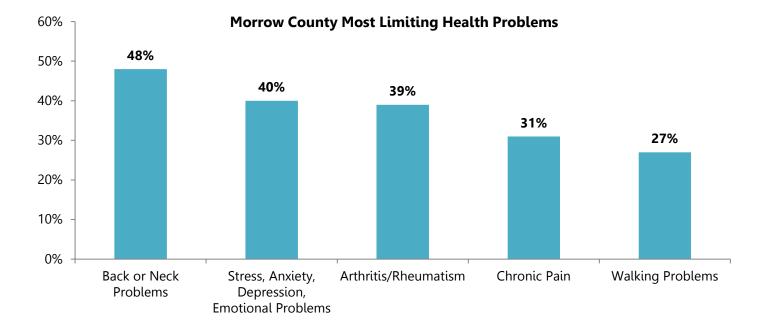
Note: U.S. baseline is age-adjusted to the 2000 population standard.

(Sources: Healthy People 2020 Objectives, 2019 Morrow County Health Assessment)

The following graphs show the percentage of Morrow County adults who were limited in some way and the most limiting health problems. Examples of how to interpret the information shown on the first graph include: 21% of Morrow County adults were limited in some way, including 21% of males and 58% of those with incomes less than \$25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



Social Conditions: Social Determinants of Health

Key Findings

More than one-fourth (27%) of Morrow County adults kept a firearm in or around their home. In the past year, 5% of adults had to choose between paying bills and buying food. Fifteen percent (15%) of adults experienced four or more adverse childhood experiences (ACEs) in their lifetime.

Healthy People 2020

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

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

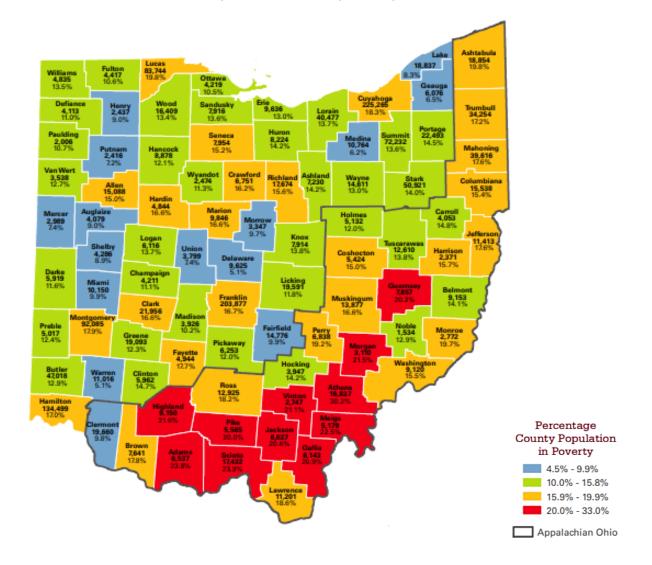
Economic Stability



- Morrow County adults attempted to get assistance from the following social service agencies: Job & Family Services/JFS (14%), food pantries (9%), friend or family member (8%), WIC/Morrow County Health Department (3%), church/mosque/synagogue (2%), personal debts/budgeting (1%), other charities (1%), Legal Aid (<1%), and somewhere else (3%). More than half (56%) of adults did not look for assistance. Thirty-four percent (34%) of adults did not need assistance, and 1% did not know where to look for assistance.
- Morrow County adults received assistance for the following in the past year: health care (14%), Medicare (11%), mental illness issues (10%), dental care (9%), food (9%), prescription assistance (7%), utilities (7%), clothing (6%), diapers (4%), employment (4%), transportation (2%), affordable childcare (2%), free tax preparation (2%), home repair (2%), rent/mortgage (1%), credit counseling (1%), legal aid services (1%), and drug or alcohol addiction (<1%).
- Adults experienced the following food insecurity issues during the past year: had to choose between paying bills and buying food (5%), food assistance was cut (4%), loss of income led to food insecurity issues (3%), went hungry/ate less to provide more food for their family (2%), worried food would run out (1%), and were hungry but did not eat because they did not have money for food (1%).
- Four percent (4%) of Morrow County adults experienced more than one food insecurity issue in the past year.
- The median household income in Morrow County in 2017 was \$55,466. The U.S. Census Bureau reports median income levels of \$54,077 for Ohio and \$60,336 for the U.S. *(Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2017).*
- Eleven percent (11%) of all Morrow County residents were living in poverty, and 18% of children and youth ages 0-17 were living in poverty (*Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2017).*
- The unemployment rate for Morrow County civilian labor force was 3.9 as of November 2018 (Source: Ohio Department of Job and Family Services, Office of Workforce Development, Bureau of Labor Market Information).
- There were 14,234 housing units. The owner-occupied housing unit rate was 90%. Rent in Morrow County cost an average of \$646 per month *(Source: U.S. Census Bureau, American Community Survey, 2013-2017).*

The map below shows the variation in poverty rates across Ohio during the 2013-17 period.

- The 2013 to 2017 American Community Survey 5-year estimates report that approximately 1,683,890 Ohio residents, or 14.9% of the population, were in poverty.
- From 2013 to 2017, almost 9.7% of Morrow County residents were in poverty.



Estimated Poverty Rates in Ohio by County (2013-2017)

(Source: 2013-2017 American Community Survey 5-year estimates, as compiled by Ohio Development Services Agency, Office of Research, Ohio Poverty Report, February 2019)

Education

- Eighty-eight percent (88%) of Morrow County adults 25 years and over had a high school diploma. Twelve percent (12%) had less than a high school diploma, compared to 10% for Ohio (Source: U.S. Census Bureau, American Community Survey, 2013-2017).
- Fourteen percent (14%) of Morrow County adults 25 years and over had a bachelor's degree or higher (Source: U.S. Census Bureau, American Community Survey, 2013-2017).

Social and Community Context

- Thirty-four percent (34%) of adults reported gambling in the past year. They reported the following types of gambling: lottery (30%), casinos (12%), with friends at home (8%), at work (7%), bingo (4%), and horse track (3%).
- Morrow County adults experienced the following in the past year: a close family member went to the hospital (42%); death of a family member or close friend (35%); had bills they could not pay (14%); a decline in their health (13%); someone in their household lost their job/had their hours at work reduced (11%); were a caregiver (10%); someone close to them had a problem with drinking or drugs (9%); household income was reduced by 50% (3%);

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 January 28 2019)

had someone homeless living with them (3%); were threatened or abused by someone physically, emotionally, sexually, or verbally (3%); knew someone who lived in a hotel (2%); their child was threatened or abused by someone physically, emotionally, sexually, or verbally (2%); moved to a new address (2%); became separated or divorced (1%); witnessed someone in their family being hit or slapped (1%); their family was at risk for losing their home (1%); and were homeless (<1%).

- Morrow County adults experienced the following adverse childhood experiences (ACEs): their parents became separated or were divorced (25%); 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 (18%); lived with someone who was depressed, mentally ill, or suicidal (14%); their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (10%); lived with someone who used illegal street drugs, or who abused prescription medications (10%); a parent or adult in their home hit, beat, kicked, or physically hurt them (9%); someone at least five years older than them or an adult touched them sexually (7%); their family did not look out for each other, feel close to each other, or support each other (6%); their parent or guardian died (5%); their parents were not married (5%); lived with someone who served time or was sentenced to serve time in prison, jail or other correctional facility (5%); someone at least five years older than them or an adult tried to make them touch them sexually (3%); someone at least five years older than them or an adult forced them to have sex (3%); and they did not have enough to eat, had to wear dirty clothes, and had no one to protect them (3%).
- Fifteen percent (15%) of adults have experienced four or more ACEs in their lifetime.

Behaviors of Morrow County Adults

Adult Behaviors	Experienced Four or More ACEs	Did Not Experience Any ACEs
Classified as overweight or obese by BMI	62%	72%
Current drinker (had at least one alcoholic beverage in the past month)	62%	54%
Current smoker (currently smoke on some or all days)	38%	7%
Binge drinker (drank five or more drinks for males and four or more for females on an occasion)	35%	11%
Contemplated suicide in the past year	24%	1%
Had two or more sexual partners in the past year	32%	1%
Medication misuse in the past six months	11%	5%
Used recreational drugs in the past six months	3%	3%

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

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 five 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:

— Depression —	- Alcoholism and alcohol abuse
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- Fetal death COPD
- Illicit drug use Unintended pregnancies
 - Suicide attempts

— STDs

— Liver disease

- Early initiation of smoking
- Multiple sexual partners Risk for intimate partner violence
- Given the high prevalence of ACEs, additional efforts are needed at the state and local level to reduce and prevent childhood maltreatment and associated family dysfunction in the US.
- Studies are finding that there is a repetitive does-response relationship between ACE and levels of exposure. A dose-response means that as the dose of the stressor increases, the intensity of the outcome will increase as well. As the number of ACEs increase so does the risk for the following:
 - Myocardial Infarction
 - Asthma — Disability
 - Mental DistressUnemployment
- Stroke

— Diabetes

Lowered educational attainment

(Source: Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System Survey ACE Data, 2009-2014. Atlanta,

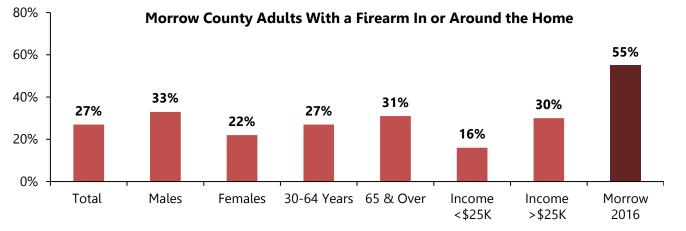
Health and Health Care

- In the past year, 14% of adults were uninsured.
- Morrow County adults had the following issues regarding their health care coverage: cost (41%), opted out of certain coverage because they could not afford it (11%), opted out of certain coverage because they did not need it (7%), could not understand their insurance plan (6%), service not deemed medically necessary (5%), working with their insurance company (5%), limited visits (5%), provider no longer covered (3%), pre-existing conditions (3%), and service no longer covered (2%).
- Reasons for not receiving recommended vaccinations included: cost (4%), did not think they were necessary (4%), personal beliefs (3%), doctor did not recommend them (2%), fear of getting sick (2%), fear of adverse effects (2%), religious beliefs (1%), fear of immunizations (1%), pre-existing health issues (<1%), and other reasons (6%).
- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Morrow County adults.

Neighborhood and Built Environment

- Adults reported doing the following while driving: eating (44%); talking on hands-free cell phone (40%); talking on hand-held cell phone (37%); texting (15%); not wearing a seatbelt (13%); using Internet on their cell phone (10%); reading (5%); being under the influence of prescription drugs (4%); being under the influence of alcohol (2%); being under the influence of marijuana (1%); being under the influence of recreational drugs (<1%); and other activities (such as applying makeup, shaving, etc.) (2%).
- Morrow County residents reported the following concerns in their community: illegal drug use (52%), lack of affordable health care (37%), opiate/prescription drug abuse (32%), crime (31%), distracted driving (31%), school funding (29%), bullying/cyberbullying (26%), unemployment (23%), alcohol abuse (23%), child abuse/childhood trauma (22%), youth substance abuse (20%), underemployment (18%), DUI (18%), domestic violence (17%), traffic (14%), teen pregnancy (12%), violence (11%), and other concerns (8%). Twelve percent (12%) of adults had no community concerns.
- More than one-fourth (27%) of Morrow County adults kept a firearm in or around their home. Eight percent (8%) of adults reported they were unlocked and loaded.

The following graph shows the percentage of Morrow County adults that had a firearm in or around the home. An example of how to interpret the information shown on the graph includes: 27% of all Morrow County adults had a firearm in or around the home, including 33% of males and 33% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Social Conditions: Environmental Health

Key Findings

Morrow County adults indicated insects (14%), rodent (11%), and mold (7%) were the most threatening environmental issues to their health in the past year. Most (95%) Morrow County households had two or more disaster preparedness supplies.

Environmental Health

- Morrow County adults thought the following threatened their health in the past year:
 - Insects (14%)
 - Rodents (11%)
 - Mold (7%)
 - Moisture issues (6%)
 - Agricultural chemicals (5%)
 - Temperature regulation (4%)
 - Air quality (3%)

- Chemicals found in products (3%)
 Plumbing problems (2%)
- Radon (1%)
- Unsafe water supply/wells (1%)
- Safety hazards (1%)
- Lead paint (1%)
- Sewage/wastewater problems (<1%)

Disaster Preparedness

- Morrow County households had the following disaster preparedness supplies: cell phone (88%), cell phone with texting (83%), working flashlight and working batteries (81%), working smoke detector (80%), computer/tablet (75%), fire extinguisher (60%), 3-day supply of nonperishable food for everyone in the household (55%), 3-day supply of prescription medication for each person who takes prescribed medicines (49%), working battery-operated radio and working batteries (40%), 3-day supply of water for everyone in the household (one gallon of water per person per day) (39%), generator (35%), home land-line telephone (31%), communication plan (27%), family disaster plan (16%), and a disaster plan (15%).
- Most (95%) Morrow County households had two or more disaster preparedness supplies.

Mold Prevention Tips

- Exposure to damp and moldy environments may cause a variety of health effects. Mold can cause nasal stuffiness, throat irritation, coughing or wheezing, eye irritation, or, in some cases, skin irritation.
- In your home, you can control mold growth by:
 - Keep humidity levels as low as you can, no higher than 50%, all day long
 - Be sure your home has enough ventilation. Use exhaust fans that vent outside your home in the kitchen and bathroom. Make sure your clothes dryer vents outside your home.
 - Fix any leaks in your home's roof, walls, or plumbing so mold does not have moisture to grow.
 - Clean up and dry out your home thoroughly and quickly (within 24–48 hours) after flooding.
 - Add mold inhibitors to paints before painting.
 - Clean bathrooms with mold-killing products.
 - Remove or replace carpets and upholstery that have been soaked and cannot be dried promptly. Consider not using carpet in rooms or areas like bathrooms or basements that may have a lot of moisture. One gallon of water per person per day for at least three days, for drinking and sanitation.

(Source: CDC, Facts about Mold and Dampness, updated 9/5/17)

Social Conditions: Parenting

Key Findings

In the past year, 65% of parents discussed career plans and post-secondary education with their 6-to-17-year-old child.

Parenting

- Parents discussed the following topics with their 6-to-17-year-old child in the past year:
 - Career plan/post-secondary education (65%)
 - Bullying (64%)
 - Weight status (63%)
 - Body image (56%)
 - Social media issues (55%)
 - Dating and relationships (51%)
 - Safe driving practices (48%)
 - Negative effects of alcohol, tobacco, illegal drugs, or misusing prescription drugs (47%)
 - Volunteering (45%)
 - Depression, anxiety, suicide (35%)
 - School/legal consequences of using alcohol, tobacco, or other drugs (31%)
 - Abstinence and how to refuse sex (28%)
 - Birth control, condoms, safer sex and STD prevention (19%)
 - Energy drinks (17%)
 - Refusal skills (13%)
- Five percent (5%) of parents reported they did not discuss any of these topics with their child in the past year.

How to Help Increase Your School-Aged Child's Social Ability

Consider the following as ways to foster your school-aged child's social abilities:

- Set and provide appropriate limits, guidelines, and expectations and consistently enforce using appropriate consequences.
- Model appropriate behavior.
- Offer compliments for your child being cooperative and for any personal achievements.
- Help your child choose activities that are appropriate for your child's abilities.
- Encourage your child to talk with you and be open with his or her feelings.
- Encourage your child to read and read with your child.
- Encourage your child to get involved with hobbies and other activities.
- Encourage physical activity.
- Encourage self-discipline; expect your child to follow rules that are set.
- Teach your child to respect and listen to authority figures.
- Encourage your child to talk about peer pressure and help set guidelines to deal with peer pressure.
- Spend uninterrupted time together, giving full attention to your child.
- Limit television, video, and computer time.

(Source: Stanford Children's Health, The Growing Child: School Age (6 to 12 Years), 2019)

Youth Health: Weight Status

Key Findings

Over one-quarter (29%) of Morrow County youth were obese, according to body mass index (BMI) by age. When asked how they would describe their weight, 39% of youth reported that they were slightly or very overweight. Nearly three-quarters (71%) of youth exercised for at least 60 minutes on three or more days per week.

1,065 Morrow County youth were classified as obese.

Youth Weight Status

- BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific, as children's body fatness changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- Twenty-nine percent (29%) of Morrow County youth were classified as obese by body mass index (BMI) calculations. Thirteen percent (13%) of youth were classified as overweight. Fifty-six percent (56%) were normal weight, and 2% were underweight.
- Over one-third (39%) of youth described themselves as being either slightly or very overweight.
- Over half (54%) of all youth were trying to lose weight, increasing to 65% of females (compared to 42% of males).
- Youth did the following to lose weight or keep from gaining weight in the past month:
 - Exercised (57%)
 - Drank more water (57%)
 - Ate more fruits (39%)
 - Ate more vegetables (34%)
 - Ate less food, fewer calories, or foods lower in fat (33%)
 - Skipped meals (22%)
 - Went without eating for 24 hours or more (5%)
 - Smoked cigarettes/e-cigarettes (3%)
 - Vomited or took laxatives (2%)
 - Took diet pills, powders, or liquids without a doctor's advice (2%)
- Twenty-nine percent (29%) of youth did not do anything to lose or keep from gaining weight.

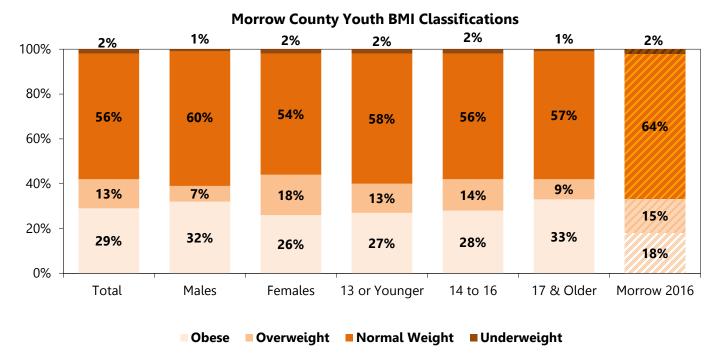
Healthy People 2020 Nutrition and Weight Status (NWS)

Objective	Morrow County 2019	U.S. 2017	Healthy People 2020 Target
NWS-10.4 Reduce the proportion of children and adolescents aged 2 to 19 years who are considered obese	29% (6-12 Grade) 29% (9-12 Grade)	15% (9-12 Grade)	15%*

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

(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBS, 2019 Morrow County Health Assessment)

The following graph shows the percentage of Morrow County youth who were classified as obese, overweight, normal weight or underweight according to body mass index (BMI) by age. Examples of how to interpret the information in the graph include: 56% of all Morrow County youth were classified as normal weight, 29% were obese, 13% were overweight, and 2% were underweight for their age and gender.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Nutrition

- Eleven percent (11%) of youth reported they went to bed hungry at least one day per week because their family did not have enough money for food at least one night per week. Three percent (3%) of youth went to bed hungry every night of the week.
- Most (94%) youth reported they could prepare their own food when they are home alone. Three percent (3%) of youth did not know if they could prepare their own food, and 1% reported they did not usually have food in their home.
- One-fourth (22%) of youth ate five or more servings of fruits and/or vegetables per day, 32% of youth ate three to four servings, and 38% of youth ate one to two servings. Seven percent (8%) of youth ate zero servings of fruits and/or vegetables per day.

The table below indicates the number of servings Morrow County youth had of fruit, vegetables, sugarsweetened beverages and caffeinated beverages per day.

	Five or more servings	Three to four servings	One to two servings	Zero servings
Fruit	5%	16%	68%	11%
Vegetables	3%	16%	67%	14%
Sugar-sweetened beverage	11%	23%	50%	16%
Caffeinated beverage	7%	10%	38%	45%

Youth Physical Activity

- During the past week, youth participated in at least 60 minutes of physical activity at the following frequencies:
 Every day (29%)
 - Five or more days (53%)
 - Three or more days (71%)
 - Zero days (12%)
- The CDC recommends that children and adolescents participate in at least 60 minutes of physical activity per day. As part of their 60 minutes a day, children should engage in aerobic activity, muscle strengthening, and bone strengthening, as appropriate to their age. Children should participate in each of these types of activity on at least three days per week.
- Morrow County youth spent an average of 3.6 hours on their cell phone, 1.5 hours watching TV, 1.2 hours playing video games and 1.1 hours on their computer/tablet on an average day of the week.
- Nearly one-fifth (19%) of youth spent three or more hours watching TV on an average day.
- Youth spent an average of 1.8 hours of family time, 1.8 hours doing extracurricular activities, 1.1 hours doing homework, and 0.8 hours reading and on an average day of the week.

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Obese	18%	29%	29%	15%
Overweight	15%	13%	14%	16%
Described themselves as slightly or very overweight	30%	39%	41%	32%
Trying to lose weight	46%	54%	52%	47%
Exercised to lose weight (in the past month)	51%	57%	59%	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight (in the past month)	31%	33%	32%	N/A
Went without eating for 24 hours or more (in the past month)	5%	5%	5%	N/A
Took diet pills, powders, or liquids without a doctor's advice (in the past month)	2%	2%	3%	N/A
Vomited or took laxatives (in the past month)	1%	2%	3%	N/A
Physically active at least 60 minutes per day on every day in past week	36%	29%	28%	26%
Physically active at least 60 minutes per day on five or more days in past week	58%	53%	51%	46%
Did not participate in at least 60 minutes of physical activity on any day in past week	8%	12%	12%	15%
Watched TV three or more hours per day (on an average school day)	N/A	19%	20%	21%

N/A – Not Available

Youth Health: Tobacco Use

Key Findings

Nine percent (9%) of Morrow County youth were current smokers. One-fifth (20%) of youth used e-cigarettes in the past year. Of youth who had used e-cigarettes/vapes in the past year, 69% put e-liquid or e-juice with nicotine in them.

735 Morrow County youth used e-cigarettes in the past year.

Youth Tobacco Use

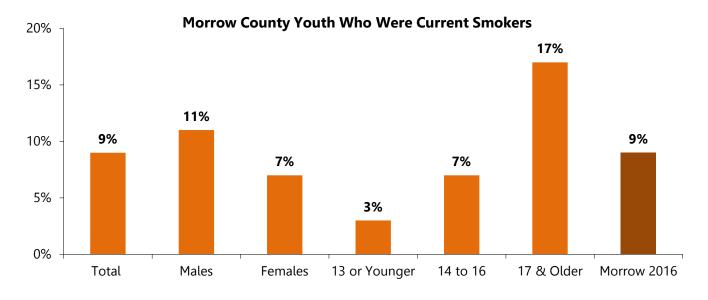
- Twenty-three percent (23%) of Morrow County youth had tried cigarette smoking, increasing to 26% of males and 39% of those ages 17 and older.
- Ten percent (10%) of all youth had tried cigarette smoking for the first time before the age of 13.
- Nearly one-fifth (18%) of those who had tried cigarette smoking did so at 10 years old or younger, and another 17% had done so by 12 years old. The average age of onset for smoking was 12.9 years old.
- Nine percent (9%) of youth were current smokers, having smoked at some time in the past month.
- During the past year, 57% of youth who used tobacco tried to quit using all tobacco products, including cigarettes, cigars, smokeless tobacco, and electronic vapor products.
- Sixty-six percent (66%) of youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past month.
- Youth used the following forms of tobacco in the past year: e-cigarettes (20%); cigarettes (13%); Swishers (8%); chewing tobacco, snuff, or dip (7%); Black and Mild (5%); pouch [snus] (5%); cigars (5%); cigarillos (3%); hookah (2%); little cigars (1%); and dissolvable tobacco products (1%).
- Of youth that had used e-cigarettes/vapes in the past year, they reported putting the following in them:
 - E-liquid or e-juice with nicotine (69%)
 - E-liquid or e-juice without nicotine (43%)
 - Marijuana or THC in the e-liquid (24%)
 - Homemade e-liquid or e-juice (1%)

Healthy People 2020 Tobacco Use (TU)

Objective	Morrow County 2019	U.S. 2017	Healthy People 2020 Target		
TU-2.2 Reduce use of cigarettes by adolescents (past month)	9% (6-12 Grade) 11% (9-12 Grade)	9% (9-12 Grade)	16% (9-12 Grade)		

(Sources: Healthy People 2020 Objectives, 2015 U.S. YRBSS, 2019 Morrow County Health Assessment)

The following graph shows the percentage of Morrow County youth who were current smokers. Examples of how to interpret the information include: 9% of all Morrow County youth were current smokers, including 11% of males and 17% of those ages 17 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between current smokers and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 55% of current smokers used marijuana in the past month, compared to 7% of non-current smokers.

Youth Behaviors		Non- Current Smoker
Currently participate in extracurricular activities	79%	94%
Had sexual intercourse (in their lifetime)	72%	22%
Had at least one drink of alcohol (in the past month)	66%	13%
Bullied (in the past year)	59%	38%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	57%	27%
Have used marijuana (in the past month)	55%	7%
Seriously considered attempting suicide (in the past year)		14%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)		11%
Misused medications (in their lifetime)	41%	4%
Attempted suicide (in the past year)	34%	5%

Behaviors of Morrow County Youth

Current Smokers vs. Non-Current Smokers

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

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Ever tried cigarette smoking (even one or two puffs)	25%	23%	30%	29%
Currently smoked cigarettes (on at least one day during the past month)	9%	9%	11%	9%
Currently frequently smoked cigarettes (on 20 or more days during the past month)	2%	1%	1%	3%
First tried cigarette smoking before age 13 years (even one or two puffs)	5%	10%	11%	10%
Tried to quit using all tobacco products (during the past year)	44%	57%	59%	41%

E-Cigarette Use Among Youth and Young Adults

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

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

Youth Health: Alcohol Consumption

Key Findings

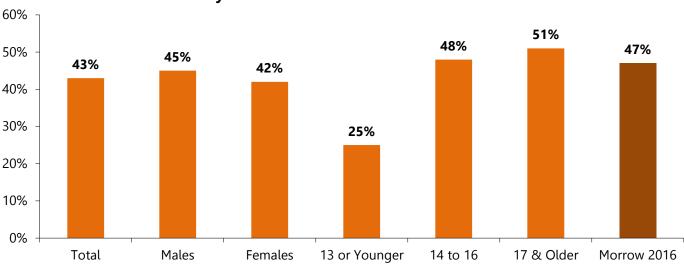
Over two-fifths (43%) of Morrow County youth drank at least one drink of alcohol in their life. Nearly one-fifth (18%) of youth had at least one drink in the past month, defining them as a current drinker. Of those who drank, 53% were defined as binge drinkers.

331 Morrow County youth were binge drinkers.

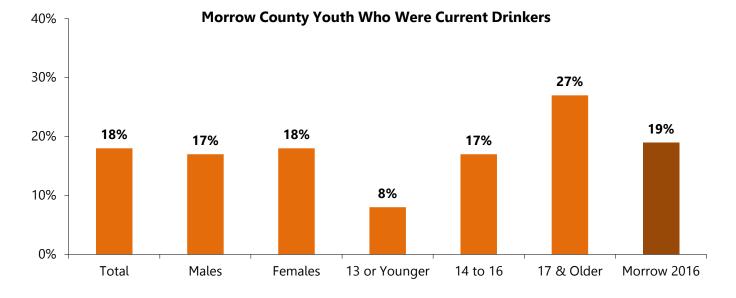
Youth Alcohol Consumption

- Over two-fifths (43%) of Morrow County youth had at least one drink of alcohol in their life, increasing to 51% of those ages 17 and older.
- Eighteen percent (18%) of youth had at least one drink in the past month, increasing to 27% of those ages 17 and older.
- Based on all youth surveyed, 9% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers, increasing to 14% of those ages 17 and older. Of those who drank, 53% were defined as binge drinkers.
- Of all youth, 14% had drunk alcohol for the first time before the age of 13.
- Over one-third (38%) of youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 23% took their first drink between the ages of 13 and 14, and 39% started drinking between the ages of 15 and 18. The average age of onset was 13.0 years old.
- Youth drinkers reported the following ways of obtaining their alcohol:
 - A parent gave it to them (38%)
 - Someone gave it to them (38%)
 - Someone older bought it (30%)
 - An older friend or sibling bought it for them (23%)
 - A friend's parent gave it to them (15%)
 - Took it from a store or family member (10%)
 - Used a fake ID (8%)
 - Bought it in a liquor store, convenience store, supermarket, discount store, or gas station (5%)
 - Some other way (33%)
- Youth drinkers usually drank alcohol in the following places:
 - Home (67%)
 - A friend's home (56%)
 - Another person's home (25%)
 - Restaurant, bar or club (13%)
 - A public place such as a park, beach or parking lot (11%)
 - A public event such as a concert or sporting event (9%)
 - While riding in or driving a car or other vehicle (9%)
 - On school property (9%)
- During the past month, 12% of all Morrow County youth had ridden in a car driven by someone who had been drinking alcohol.
- Two percent (2%) of youth drivers had driven a car in the past month after they had been drinking alcohol.

The following graphs show the percentage of Morrow County youth who drank in their lifetime and youth who were current drinkers. Examples of how to interpret the information include: 43% of all Morrow County youth drank at some time in their life, including 45% of males and 51% of those 17 and older.

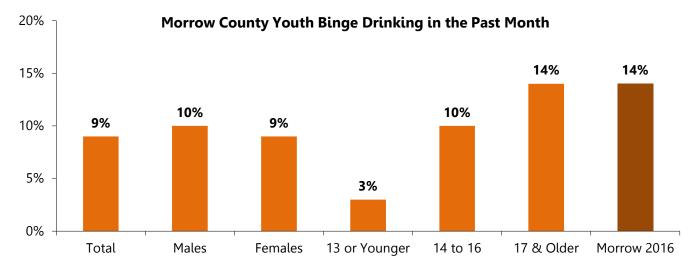


Morrow County Youth Who Had At least One Drink In Their Lifetime



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows the percentage of youth who binge drank in the past month. Examples of how to interpret the information include: 9% of all Morrow County youth binge drank in the past month, including 10% of males and 14% of those 17 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Ever drank alcohol (at least one drink of alcohol on at least one day during their life)	47%	43%	50%	60%
Current Drinker (at least one drink of alcohol on at least one day during the past month)	19%	18%	20%	30%
Binge drinker (drank five or more drinks within a couple of hours on at least one day during the past month)	14%	9%	12%	14%
Drank for the first time before age 13 (of all youth)	12%	14%	12%	16%
Obtained the alcohol they drank by someone giving it to them (of youth drinkers)	28%	38%	43%	44%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on one or more occasion during the past month)	14%	12%	11%	17%
Drove when they had been drinking alcohol (in a car or vehicle, one or more times during the 30 days before the survey, among youth who had driven a car or other vehicle)	3%	2%	2%	6%

The table below indicates correlations between current drinkers and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 61% of current drinkers had sexual intercourse in their lifetime, compared to 19% of non-current drinkers.

Behaviors of Morrow County Youth

Current Drinkers vs. Non-Current Drinkers

Youth Behaviors		Non- Current Drinker
Currently participate in extracurricular activities	93%	92%
Had sexual intercourse (in their lifetime)	61%	19%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	59%	22%
Bullied (in the past year)	54%	36%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	53%	24%
Have used marijuana (in the past month)	49%	3%
Seriously considered attempting suicide (in the past year)		12%
Smoked cigarettes (in the past month)	33%	4%
Attempted suicide (in the past year)	25%	4%
Misused medications (in their lifetime)	22%	4%

"Current drinkers" indicate youth who self-reported having had at least one drink of alcohol during the past month. Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Healthy People 2020

Substance Abuse (SA)

Objective	Morrow County 2019	U.S. 2017	Healthy People 2020 Target
SA-14.4 Reduce the proportion of persons engaging in binge drinking during the past month	9% (6-12 Grade) 14% (9-12 Grade)	14% (9-12 Grade)	9%*

Note: The Healthy People 2020 target is for youth aged 12-17 years.

(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBS, 2019 Morrow County Health Assessment)

Youth Health: Drug Use

Key Findings

In 2019, 11% of Morrow County youth had used marijuana at least once in the past month. Seven percent (7%) of youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at some time in their lives.

404 youth were current marijuana users.

Youth Drug Use

- In 2019, 11% of all Morrow County youth had used marijuana at least once in the past month, increasing to 14% of those over the age of 17.
- Morrow County youth had tried the following in their life:
 - Liquid THC (7%)
 - Inhalants (6%)
 - Posh/salvia/synthetic marijuana (6%)
 - Misused over-the-counter medications (3%)

Synthetic drugs (ex. K2, Spice, etc.)

- Hallucinogenic drugs (3%)
- Cocaine (2%)
- K2/spice (2%)

Heroin

Methamphetamines

- Misused cough syrup (2%)
- Ecstasy/MDMA/Molly (2%)

- Steroid pills or shots without a doctor's prescription (2%)
- Bath salts (1%)
- Pharm party/skittles (1%)
- Methamphetamines (1%)
- Heroin (1%)
- Misused hand sanitizer (<1%)
- Steroids (<1%)
- GHB (0%)
- Seven percent (7%) of youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at some time in their lives.
- During the past year, 12% of all Morrow County youth reported that someone had offered, sold, or given them an illegal drug on school property.
- Morrow County youth thought there was risk in harming themselves physically or in other ways if they did any . of the following: misuse prescription drugs (62%), drink alcohol (60%), smoke cigarettes (50%), use marijuana (48%) and use e-cigarettes (39%).
- Youth reported their parents would disapprove of the following: misusing prescription drugs (89%), smoking cigarettes (88%), using e-cigarettes (84%), using marijuana (83%), and drinking alcohol (77%).
- Youth reported their friends would disapprove of the following: misusing prescription drugs (77%), smoking cigarettes (69%), using marijuana (61%), using e-cigarettes (54%), and drinking alcohol (53%).

			-
Substance	Available	Not Available	Don't Know
Alcohol	42%	41%	17%
Tobacco	39%	46%	15%
Electronic vapor products	35%	50%	15%
Marijuana	21%	61%	18%
Prescription drugs not prescribed to you	15%	67%	18%

4%

3%

2%

77%

81%

81%

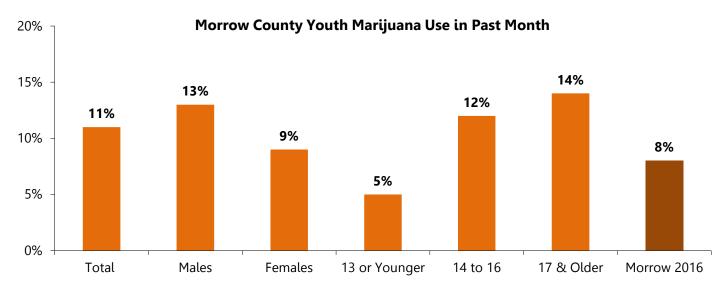
Accessibility of Substances to Morrow County Youth

19%

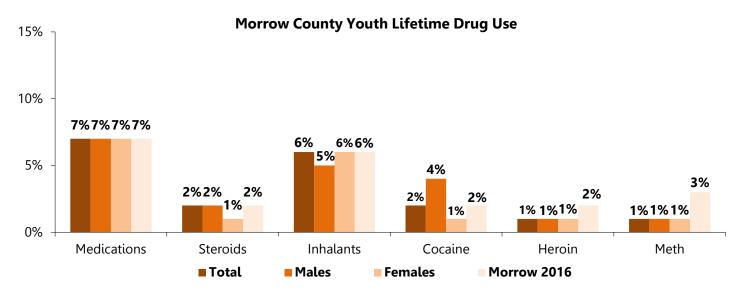
16%

17%

The following graphs indicate youth marijuana use in the past month and youth lifetime drug use. Examples of how to interpret the information include: 11% of youth had used marijuana in the past month, including 13% of males and 9% of females.



257 Morrow County youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at some time in their lives.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Used marijuana in the past month	8%	11%	13%	20%
Misused medications that were not prescribed to them or took more to feel good or high (in their lifetime)	3%	7%	8%	N/A
Ever used methamphetamines (in their lifetime)	2%	1%	1%	3%
Ever used cocaine (in their lifetime)	2%	2%	2%	5%
Ever used heroin (in their lifetime)	2%	1%	1%	2%
Ever took steroids without a doctor's prescription (in their lifetime)	2%	2%	2%	3%
Ever used inhalants (in their lifetime)	6%	6%	5%	6%
Ever used ecstasy (also called MDMA/Molly in their lifetime)	2%	2%	2%	4%
Ever used hallucinogenic drugs (such as LSD, acid, PCP, angel dust, mescaline, or mushrooms in their lifetime)	N/A	3%	4%	7%
Ever been offered, sold, or given an illegal drug by someone on school property (in the past year)	4%	12%	14%	20%

N/A – Not Available

The table below indicates correlations between current marijuana use and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 14% of marijuana users attempted suicide in the past year, compared to 7% of non-marijuana users.

Behaviors of Morrow County Youth

Current Marijuana Use vs. Non-Current Marijuana Use

Current Marijuana User	Non- Current Marijuana User
88%	93%
69%	21%
69%	24%
46%	27%
36%	3%
33%	16%
14%	7%
	Marijuana User 88% 69% 69% 46% 36% 33%

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

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Health: Sexual Behavior

Key Findings

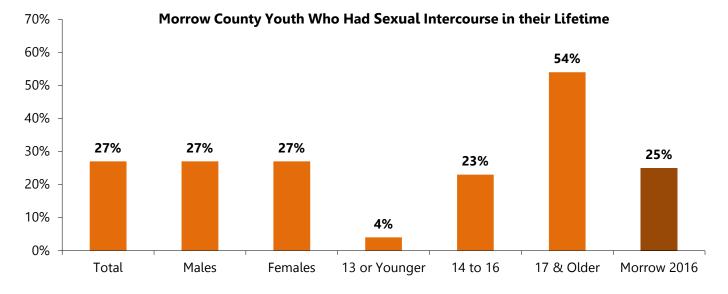
Twenty-seven percent (27%) of Morrow County youth had sexual intercourse in their lifetime. Twenty-eight percent (28%) of sexually active youth had four or more sexual partners. Nine percent (9%) youth engaged in intercourse without a reliable method of protection, and 15% reported they were unsure if they used a reliable method.

Youth Sexual Behavior

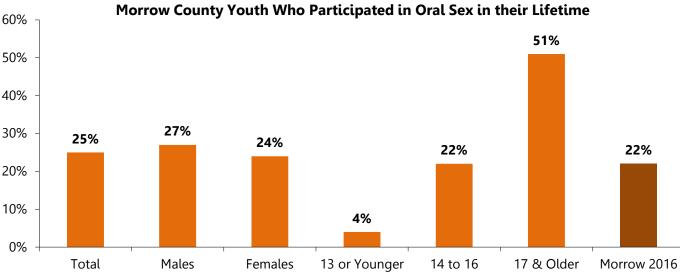
- Twenty-seven percent (27%) of Morrow County youth had sexual intercourse in their lifetime, increasing to 54% of those ages 17 and over.
- One-quarter (25%) of youth had participated in oral sex in their lifetime, increasing to 51% of those ages 17 and over.
- Eight percent (8%) of youth had participated in anal sex in their lifetime, increasing to 15% of those ages 17 and over.
- Nearly one-fourth (24%) of youth had participated in sexting in their lifetime, increasing to 40% of those ages 17 and over.
- Over one-fifth (23%) of youth had viewed pornography in their lifetime, increasing to 35% of males and 33% of those ages 17 and over.
- Of sexually active youth, 38% had one sexual partner, and 62% had multiple partners.
- Twenty-eight percent (28%) sexually active youth had four or more sexual partners in their lifetime.
- Nine percent (9%) of <u>all</u> Morrow County youth had four or more sexual partners in their lifetime.
- Of those youth who were sexually active, 21% had engaged in intercourse by the age of 13. Another 41% had done so by 15 years of age. The average age of onset was 14.8 years old.
- Of <u>all</u> youth, 3% were sexually active before the age of 13.
- Morrow County youth reported they or their partner used the following methods to prevent pregnancy the last time they had sexual intercourse: condoms (35%); birth control pills (27%); a shot, patch or birth control ring (4%); withdrawal method (3%); and an IUD or implant (3%). Two percent (2%) of youth reported they were gay or lesbian. However, 9% engaged in intercourse without a reliable method of protection, and 15% reported they were unsure.
- Youth learned about pregnancy prevention, sexually transmitted diseases, HIV/AIDS, and the use of condoms from school (72%), their parents (61%), their friends (32%), their doctor (29%), the Internet or social media (25%), their siblings (20%), church (9%), and somewhere else (6%). Nine percent (9%) of youth had not been taught about these subjects.
- Morrow County youth had experienced the following in their lifetime: had sexual contact with a female (15%); had sexual contact with a male (15%); wanted to get pregnant (4%); had sex in exchange for something of value such as food, drugs, shelter or money (2%); tried to get pregnant (1%); were treated for and STD (1%); had a miscarriage (1%); had an abortion (<1%); had gotten someone pregnant (<1%); and had a child (<1%).

- In the past month, youth reported they experienced the following: •
 - They received a text or an e-mail with a revealing, or sexual photo of someone (17%)
 - They texted, e-mailed, or posted electronically a revealing or sexual photo of themselves (10%)
 - A revealing or sexual photo of them was texted, emailed, or posted electronically without their permission (3%)

The following graphs show the percentage of Morrow County youth who participated in sexual intercourse and oral sex. Examples of how to interpret the information include: 27% of all Morrow County youth had sexual intercourse, including 54% of those 17 and older.

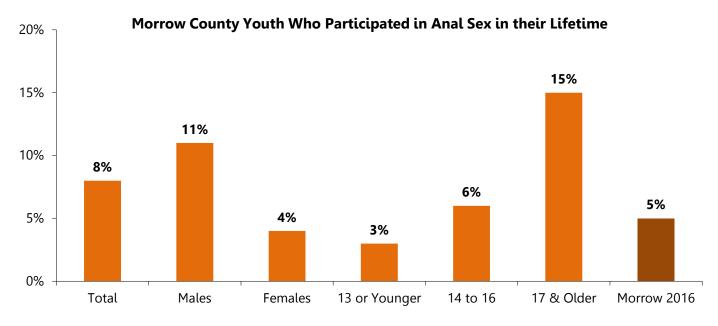


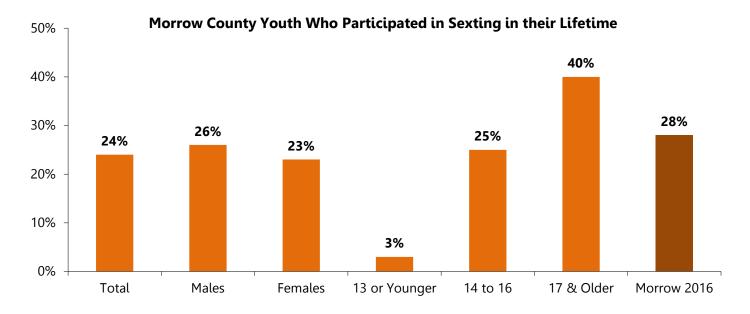
992 youth had sexual intercourse in their lifetime.



Note for graphs Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show the percentage of Morrow County youth who participated in anal sex and sexting. Examples of how to interpret the information include: 8% of Morrow County youth participated in anal sex, including 11% of males and 15% of those 17 and older.





Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Ever had sexual intercourse	25%	27%	38%	40%
Had sexual intercourse with four or more persons (of all youth during their life)	5%	9%	12%	10%
Had sexual intercourse before the age 13 (for the first time of all youth)	3%	3%	3%	3%
Used a condom (during last sexual intercourse	37%	35%	37%	54%
Used birth control pills (during last sexual intercourse)	38%	27%	31%	21%
Used an IUD (during last sexual intercourse)	3%	3%	3%	4%
Used a shot, patch or birth control ring (during last sexual intercourse)	1%	4%	4%	5%
Did not use any method to prevent pregnancy during last sexual intercourse	4%	9%	7%	14%

Sexual Risk Behavior

- Many young people engage in sexual risk behaviors that can result in unintended health outcomes. For example, among U.S. high school students surveyed in 2017:
 - 40% had ever had sexual intercourse
 - 30% had sexual intercourse during the previous three months. Of those who were sexually active in the
 past three months: 46% did not use a condom the last time they had sex, 14% did not use any method to
 prevent pregnancy, and 19% had drank alcohol or used drugs before last sexual intercourse.
 - Less than 10% of sexually experienced students have ever been tested for HIV
- Sexual risk behaviors place adolescents at risk for HIV infection, other sexually transmitted diseases (STDs), and unintended pregnancy.
- Young people (aged 13-24) accounted for an estimated 21% of all new HIV diagnoses in the United States in 2017.
- Among young people (aged 13-24) diagnosed with HIV in 2016, 81% were gay and bisexual males.
- Half of the nearly 20 million new STDs reported each year are among young people, between the ages 15–24.
- Nearly 210,000 babies were born to teen girls aged 15-19 years in 2016.

(Source: CDC, Adolescent and School Health, updated August 13, 2019)

Youth Health: Mental Health

Key Findings

Nearly one-fifth (18%) of Morrow County youth had seriously considered attempting suicide in the past year, and 8% attempted suicide in the past year. Forty-seven percent (47%) of Morrow County youth reported academic success caused them anxiety, stress, or depression. More than one-fourth (29%) of youth had experienced three or more adverse childhood experiences (ACEs) in their lifetime.

1,065 of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.

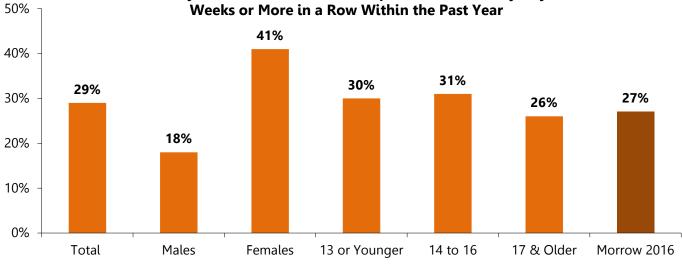
Youth Mental Health

- In the past year 29% of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 41% of females.
- Eighteen percent (18%) of youth reported they had seriously considered attempting suicide in the past year, increasing to 25% of females. One-fifth (20%) of Morrow County high school youth had seriously considered attempting suicide in the past year.
- In the past year, 8% of Morrow County youth had attempted suicide, increasing to 10% of females. Three percent (3%) of youth had made more than one attempt.
- Youth reported the following caused them anxiety, stress or depression: academic success (47%), self-image (38%), fighting with friends (34%), death of close family member or friend (33%), other stress in the home (32%), sports (29%), breakup (25%), dating relationship (24%), fighting at home (23%), being bullied (22%), peer pressure (21%), parent divorce/separation (17%), poverty/no money (12%), sick parent (11%), caring for younger siblings (11%), alcohol or drug use in the home (9%), not having enough to eat (5%), sexual orientation (4%), not having a place to live (2%), and other (19%).
- Youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (46%), engaging in hobbies (38%), texting someone (36%), talking to a peer (31%), eating (28%), exercising (28%), talking to someone in their family (24%), eating more or less than normal (22%), using social media (18%), shopping (13%), praying/reading the Bible (11%), breaking something (10%), writing in a journal (9%), and drinking alcohol/smoke/use tobacco/use illegal drugs (8%). One-quarter (25%) of youth reported they did not have anxiety, stress, or depression.

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Seriously considered attempting suicide (in the past year)	14%	18%	20%	17%
Attempted suicide (in the past year)	6%	8%	8%	7%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	27%	29%	28%	32%

- Youth reported the following reasons for not seeking help if they were dealing with anxiety, stress, depression or thoughts of suicide: can handle it themselves (35%), worried what others might think (31%), no time (17%), do not know where to go (13%), paying for it (11%), family would not support them in getting help (9%), friends would not support them in getting help (7%), and transportation (4%). Seven percent (7%) of youth reported they were currently in treatment.
- Youth reported the following adverse childhood experiences (ACEs): •
 - Parents became separated or divorced (38%)
 - Parents or adults in home swore at them, insulted them or put them down (27%)
 - Family did not look out for each other, feel close to each other, or support each other (21%)
 - Lived with someone who was a problem drinker or alcoholic (18%)
 - Lived with someone who was depressed, mentally ill or suicidal (16%)
 - Parents were not married (14%)
 - Lived with someone who served time or was sentenced to serve in prison or jail (13%)
 - Lived with someone who used illegal drugs or misused prescription drugs (13%)
 - Parents or adults in home slapped, hit, kicked, punched or beat each other up (9%)
 - Did not have enough to eat, had to wear dirty clothes, and had no one to protect them (7%)
 - Parents or adults in the home hit, beat, kicked, or physically hurt them in any way (not including spanking) (6%)
 - An adult or someone five years older than them touched them sexually (6%)
 - An adult or someone five years older than them made them touch them sexually (3%)
 - An adult or someone five years older than them forced them to have sex (2%)
- Twenty-nine percent (29%) of youth had experienced three or more ACEs in their lifetime.

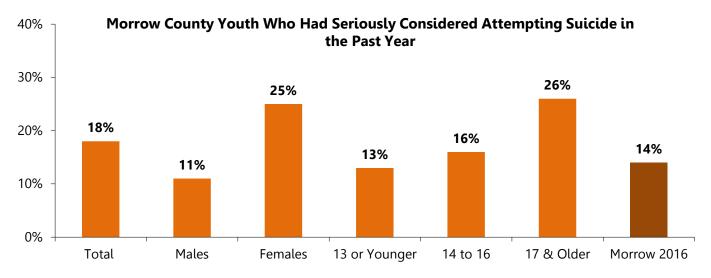
The following graphs show Morrow County youth who felt sad or hopeless every day for two weeks or more in a row. Examples of how to interpret the information include: 29% of youth felt sad or hopeless every day for two weeks or more in a row, including 18% of males and 41% of females.

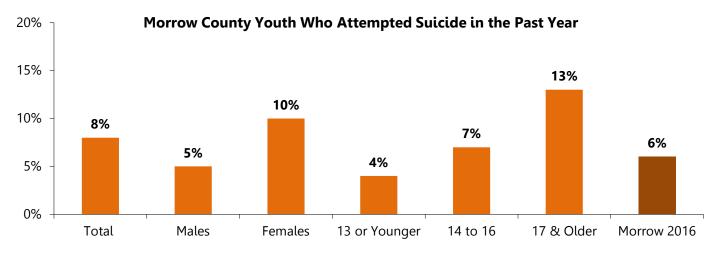


Morrow County Youth Who Felt Sad or Hopeless Almost Every Day for Two

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs shows Morrow County youth who had seriously considered attempting suicide and youth who had attempted suicide in the past year. The table indicates correlations between those who contemplated suicide in the past year and participating in risky behaviors, as well as other activities and experiences.





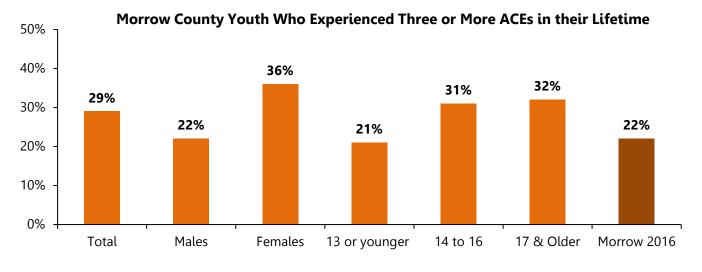
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Behaviors of Morrow County Youth

Contemplated Suicide vs. Did Not Contemplate Suicide					
Youth Behaviors	Contemplated Suicide	Did Not Contemplate Suicide			
Bullied (in the past year)	69%	33%			
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	56%	23%			
Have had at least one drink of alcohol (in the past month)	44%	12%			
Smoked cigarettes (in the past month)	27%	5%			
Used marijuana (in the past month)	20%	9%			

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

The following graph shows the percentage of Morrow County youth who had experienced three or more adverse child experiences (ACEs) in their lifetime. An example of how to interpret the information includes: 29% of all Morrow County youth had experienced three or more ACEs in their lifetime, including 36% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between those who experienced three or more ACEs in their lifetime and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 35% of those who experienced three or more ACEs seriously considered attempting suicide, compared to 9% of those who did not experience any ACEs.

Youth Behaviors	Experienced Three or More ACEs	Did Not Experience Any ACEs
Bullied (in the past year)	61%	30%
Felt sad or hopeless (almost every day for two or more weeks in a row so that they stopped doing some usual activities in the past year)	52%	17%
Have had at least one drink of alcohol (in the past month)	36%	11%
Seriously considered attempting suicide (in the past year)	35%	9%
Have used marijuana (in the past month)	27%	4%
Smoked cigarettes (in the past month)	17%	4%
Attempted suicide (in the past year)	16%	4%
Misused medications (in their lifetime)	15%	2%

Behaviors of Morrow County Youth

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

"ACEs" indicate youth who self-reported having experienced three or more adverse childhood experiences in their lifetime. Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Youth Health: Social Determinants of Health

Key Findings

Twenty-seven percent (27%) of Morrow County youth drivers had texted while driving in the past month. Over half (54%) of youth who had a social media or online gaming account believed that sharing information online is dangerous.

Personal Health

- Youth last saw a dentist for a check-up, exam, teeth cleaning, or other dental work at the following frequencies: less than a year ago (73%), one to two years ago (10%), more than two years ago (4%) and never (1%). Twelve percent (12%) of youth did not know.
- Youth last saw a doctor or health care professional for a routine checkup at the following frequencies: less than a year ago (75%), one to two years ago (11%), three to five years ago (2%), five or more years ago (<1%), and never (1%). Ten percent (10%) of youth did not know.

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work)	75%	73%	74%	75%*

*Comparative YRBS data for U.S. is 2015

Personal Safety

- Ninety-eight percent (98%) of Morrow County youth had a social media or online gaming account. Of those who had an account, they reported the following:
 - Their account was currently checked private (55%)
 - They knew all the people in their "friends" (51%)
 - Their parents had the password to their accounts (24%)
 - They knew all the people they play with online (23%)
 - Their friends have the password to some or all of their accounts (15%)
 - They have been asked to meet someone they met online (10%)
 - They have been bullied as a result of their accounts (8%)
 - Their parents do not know they have an account (6%)
 - They participated in sexual activity with someone they met online (5%)
 - They share personal information about themselves, such as where they live (4%)
- Over half (54%) of Morrow County youth who had a social media or online gaming account believed that sharing information online is dangerous.
- Morrow County youth spent the following time unsupervised after school on an average school day: less than one hour (27%), one to two hours (33%), three to four hours (13%), and more than four hours (14%). Fifteen percent (15%) of youth reported spending no time unsupervised after school on an average school day.
- In the past month, youth drivers did the following while driving car or other vehicle: wore a seatbelt (82%), ate (44%), talked on their cell phone (42%), drove while tired or fatigued (32%), texted (27%), used their cell phone other than for talking or texting (25%), used marijuana (5%), applied makeup (1%), drank alcohol (1%), used illegal drugs (1%), and read (1%).

Neighborhood and Built Environment

• Youth reported living with both parents (52%), mother and step-father (13%), mother only (11%), parents have joint custody (10%), father and step-mother (8%), grandparents (8%), father only (5%), another relative (3%), father and his partner (2%), mother and her partner (2%), guardians/foster parents (2%), and on their own or with friends (1%).

Social and Community Context

- Morrow County youth reported the following plans for the future: attend a four-year college (59%), follow their career path (51%), attend a community college/trade school (22%), and join the military (15%). Four percent (4%) of youth did not have hope for the future. Two percent (2%) of youth reported they will not finish high school.
- Ninety-three percent (93%) of youth participated in extracurricular activities. They participated in the following:
 - A sports or intramural program (56%)
 - Exercising outside of school (45%)
 - School club or social organization (40%)
 - Part-time job (30%)
 - Caring for siblings after school (25%)
 - Church or religious organization (20%)
 - Volunteering in the community (16%)
 - Church youth group (15%)
 - Babysitting for other kids (12%)
 - Caring for parents or grandparents (6%)
 - Some other organized activity (Scouts, 4-H, etc.) (18%)

Youth Health: Violence

Key Findings

Sixteen percent (16%) of Morrow County youth carried a weapon (such as a gun, knife or club) in the past month. Over one-fifth (23%) of youth had been involved in a physical fight in the past year. Forty percent (40%) of youth had been bullied in the past year.

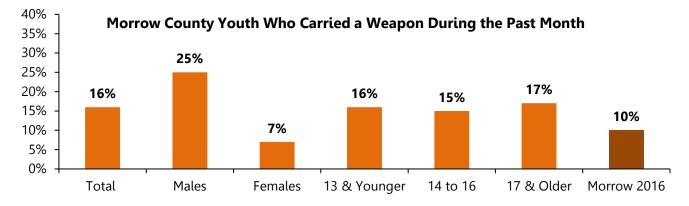
Physical and Sexual Violence

- In the past year, 23% of youth had been involved in a physical fight, increasing to 33% of males.
- Of those who had been in a physical fight, 37% had been in a fight on more than one occasion.
- In the past year, 8% of youth reported an adult or caregiver had ever hit, slapped or physically hurt them on purpose.
- Seven percent (7%) of youth reported a boyfriend or girlfriend hit, slapped or physically hurt them on purpose in the past year.
- Morrow County youth had been forced to engage in the following: touched in an unsafe (sexual) way (9%), other sexual activity (3%), sexual intercourse (3%), and oral sex (2%).
- Nearly one-third (32%) of youth purposefully hurt themselves in their life by cutting, scratching, burning, hitting or biting, increasing to 41% of females.

Violence-Related Behaviors

- Sixteen percent (16%) of youth carried a weapon (such as a gun, knife or club) in the past month, increasing to 25% of males.
- Seven percent (7%) of Morrow County youth were threatened or injured with a weapon on school property in the past year.
- In the past month, 10% of youth did not go to school on one or more days because they did not feel safe at school or on their way to or from school.

The following graph shows the percentage of Morrow County youth who carried a weapon in the past month. Examples of how to interpret the information include: 16% of youth carried a weapon in the past month, including 25% of males and 7% of females.

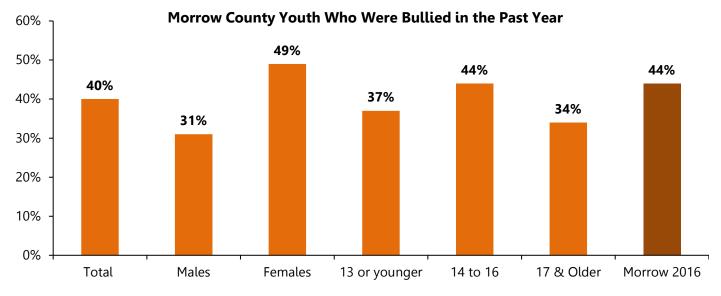


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Bullying

- Forty percent (40%) of Morrow County youth had been bullied in the past year. The following types of bullying were reported:
 - 29% were verbally bullied (teased, taunted or called harmful names)
 - 24% were indirectly bullied (spread mean rumors about them or kept them out of a "group")
 - 14% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
 - 7% were physically bullied (were hit, kicked, punched or people took their belongings)
 - 3% were sexually bullied (used nude or semi-nude pictures to pressure someone to have sex that did not want to, blackmail, intimidate, or exploit another person)
- More than one-fourth (29%) of youth had been bullied on school property in the past year.
- In the past year, youth reported they had been a victim of teasing or name calling due to the following: weight, size or physical appearance (25%); sexual orientation (8%); race or ethnic background (2%); and gender (<1%).

The following graph shows the percentage of Morrow County youth who were bullied in the past year. An example of how to interpret the information includes: 40% of youth were bullied in the past year, including 49% of females and 44% of those ages 14 to 16.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Types of Bullying Morrow County Youth Experienced in the Past Year						
Youth Behaviors	Total	Male	Female	13 and younger	14-16 Years old	17 and older
	2004	2.40/	250/	260/	2.40/	2.40/

Verbally Bullied	29%	24%	35%	26%	34%	24%
Indirectly Bullied	24%	16%	32%	25%	24%	24%
Cyber Bullied	14%	13%	15%	9%	17%	11%
Physically Bullied	7%	8%	6%	9%	8%	3%
Sexually Bullied	3%	1%	4%	0%	4%	2%

The table below indicates correlations between those who were bullied in the past year and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 46% of those who were bullied felt sad or hopeless for two or more weeks in a row in the past year, compared to 17% of those who were not bullied.

Behaviors of Morrow County Youth

Youth Behavior	Bullied	Non- Bullied
Currently participate in extracurricular activities	92%	93%
Felt sad or hopeless for two or more weeks in a row (in the past year)	46%	17%
Experienced three or more adverse childhood experiences (ACEs) (in their lifetime)	44%	12%
Classified as overweight or obese by body mass index (BMI)	40%	43%
Seriously considered attempting suicide (in the past year)	31%	9%
Have had at least one drink of alcohol (in the past month)	24%	13%
Carried a weapon on school property (in the past month)	17%	15%
Used marijuana (in the past month)	16%	8%
Attempted suicide (in the past year)	15%	3%
Smoked cigarettes (in the past month)	13%	6%
Misused medications (in their lifetime)	9%	5%

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Healthy People 2020 Injury and Violence Prevention (IVP)

Objective	Morrow County 2019	U.S. 2017	Healthy People 2020 Target
IVP-34 Fighting among adolescents	23% (6-12 Grade) 21% (9-12 Grade)	24% (9-12 Grade)	28% (9-12 Grade)
IVP-35 Reduce bullying among adolescents on school property	29% (6-12 Grade) 25% (9-12 Grade)	19% (9-12 Grade)	18% (9-12 Grade)

(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBS, 2019 Morrow County Health Assessment)

Youth Comparisons	Morrow County 2016 (6 th -12 th)	Morrow County 2019 (6 th -12 th)	Morrow County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Were in a physical fight (in the past year)	18%	23%	21%	24%
Carried a weapon (in the past month)	10%	16%	14%	16%
Threatened or injured with a weapon on school property (in the past year)	7%	7%	7%	6%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past month)	3%	10%	9%	6%
Electronically bullied (in the past year)	13%	14%	13%	15%
Bullied (in the past year)	44%	40%	37%	N/A
Were bullied on school property (during the past year)	34%	29%	25%	19%
Experienced physical dating violence (including being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with in the past year)	4%	7%	9%	8%

N/A- Not Available

Appendix I: Health Assessment Information Sources

Source	Data Used	Website
2017 Ohio Drug Overdoes Data: General Findings, Ohio Department of Health; Ohio Department of Health, Bureau of Vital Statistics; analysis conducted by ODH Violence and Injury Prevention Program; U.S. Census Bureau (Vintage 2017 population estimates)	 Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population, by County, 2011-2016 	https://odh.ohio.gov/wps/wcm/connect/g 5deb684e-4667-4836-862b- cb5eb59acbd3/2017_OhioDrugOverdose ort.pdf?MOD=AJPERES&CONVERT_TO=u ACHEID=ROOTWORKSPACE.Z18_M1HGG N0JO00QO9DDDDM3000-5deb684e-466 4836-862b-cb5eb59acbd3-moxPbu6
American Association of Suicidology	Suicide Statistics	https://suicidology.org/facts-and- statistics/
American Cancer Society, Cancer Facts and Figures 2019. Atlanta:	 2019 Cancer Facts, Figures, and Estimates 	https://www.cancer.org/content/dam/c ancer-org/research/cancer-facts-and- statistics/annual-cancer-facts-and- figures/2019/cancer-facts-and-figures- 2019.pdf
ACS, 2019	Fruit and Vegetables Recommendations	https://www.cancer.org/healthy/eat- healthy-get-active/eat-healthy/add- fruits-and-veggies-to-your-diet.html
American College of Allergy, Asthma & Immunology	Asthma Facts	https://acaai.org/news/facts- statistics/asthma
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	 2010 - 2017 Adult Ohio and U.S. Correlating Statistics 	https://www.cdc.gov/brfss/index.html
CDC, Adolescent and School Health	Sexual Risk Behavior	https://www.cdc.gov/healthyyouth/sexu albehaviors/index.htm
CDC, Alcohol and Public Health	Excessive Drinking	https://www.cdc.gov/alcohol/index.htm
CDC, Arthritis	• Arthritis at a Glance	https://www.cdc.gov/chronicdisease/res ources/publications/aag/arthritis.htm
	Arthritis: Risk Factors	https://www.cdc.gov/arthritis/bas ics/risk-factors.htm
CDC, Asthma	Common Asthma Triggers	https://www.cdc.gov/asthma/triggers.ht ml
CDC, Breast Cancer, 2016	 What Can I do to Reduce My Risk of Breast Cancer? 	https://www.cdc.gov/cancer/breast/basi c_info/prevention.htm
CDC, Children's Mental Health	Youth Anxiety and Depression	https://www.cdc.gov/childrensmentalhe alth/depression.html
CDC, Diabetes	Diabetes by the Numbers	https://www.cdc.gov/diabetes/basics/q uick-facts.html
CDC, Healthy Weight	Healthy Weight	https://www.cdc.gov/healthyweight/ind ex.html
CDC, Men's Health	 National Center for Health Statistics: Men's Health Data 	https://www.cdc.gov/nchs/fastats/mens -health.htm

Source	Data Used	Website
CDC, Mental Health	 National Center for Health Statistics: Prevalence of Depression Among Adults 	https://www.cdc.gov/nchs/fastats/ment al-health.htm
CDC, Oral Health	Adult Oral Health	https://www.cdc.gov/oralhealth/basics/a dult-oral-health/index.html
CDC, Physical Activity	Physical Activity Facts	https://www.cdc.gov/physicalactivity/ba sics/index.htm
CDC, Prostate Cancer	Prostate Cancer Awareness	https://www.cdc.gov/cancer/prostate/ba sic_info/what-is-prostate-cancer.htm
CDC, Recommended Immunization	 Recommended Immunization Schedule for Adults: By Age 	https://www.cdc.gov/vaccines/schedules /easy-to-read/adult.html#print
CDC, Smoking and Tobacco Use	Smoking and Other Health Risks	https://www.cdc.gov/tobacco/data_stati stics/fact_sheets/health_effects/effects_c ig_smoking/index.htm
CDC, Violence Prevention	 Adverse Childhood Experiences (ACE) 	https://www.cdc.gov/violencepreventio n/acestudy/
	 About Underlying Cause of Death, 2013-2015 County and Obia Loading Couses 	
CDC, Wonder	 County and Ohio Leading Causes of Death County and Ohio Mortality Statistics 	http://wonder.cdc.gov/ucd-icd10.html
County Health Rankings	USDA Food Environment Atlas	http://www.countyhealthrankings.org/a pp/ohio/2018/rankings//county/outcom es/overall/snapshot
	 County Health Rankings compiled for 2016 BRFSS 	http://www.countyhealthrankings.org/
Healthy People 2020: U.S. Department of Health & Human Services	 Access to Health Services All Healthy People 2020 Target Data Points Immunization and Infectious Diseases Predictors of Access to Health Care Social Determinants of Health 	www.healthypeople.gov/2020/topicsobj ectives2020
	Some U.S. Baseline StatisticsOpiate and Pain Reliever Doses Per	
The Ohio Automated Rx Reporting System	 Patient, 2011-2016 Opiate and Pain Reliever Doses Per Capita, 2011-2016 Opioid Doses per Capita, Quarterly from 2015-2017 What is OARRS? Fact Sheet, August 2017 	https://www.ohiopmp.gov/About.aspx

Source	Data Used	Website
	Incidence of Cancer	https://odh.ohio.gov/wps/wcm/connect /gov/669a04bb-4ff8-410c-9279- 94828a9dbb2b/Cancer+in+Ohio+2016. pdf
Ohio Department of Health, Information Warehouse	Leading Cause of Death	https://odh.ohio.gov/wps/portal/gov/od h/explore-data-and-stats/published- reports/data-and-stats-mortality- leading-cause-reports
mornation watchouse	Mortality	http://publicapps.odh.ohio.gov/EDW/Da taBrowser/Browse/Mortality
	STD Surveillance Data	https://odh.ohio.gov/wps/portal/gov/od h/know-our-programs/std- surveillance/data-and- statistics/sexually-transmitted-diseases- data-and-statistics
Stanford Children's Health	• The Growing Child: School Age 6 to 12 Years	https://www.stanfordchildrens.org/en/t opic/default?id=the-growing-child- school-age-6-to-12-years-90-P02278
	 American Community Survey 5- year estimate, 2016 	https://www.census.gov/programs- surveys/acs/
U. S. Department of Commerce, Census Bureau; Bureau of	Federal Poverty Threshold	https://www.census.gov/data/tables/tim e-series/demo/income- poverty/historical-poverty- thresholds.html
Economic Analysis	 Ohio and County 2016 Census Demographic Information 	https://factfinder.census.gov/faces/nav/j sf/pages/index.xhtml
	 Small Area Income and Poverty Estimates 	https://www.census.gov/programs- surveys/saipe.html
U.S. Department of Health and	 Physical Activity Guidelines for Americans, 2nd edition 	https://health.gov/paguidelines/second - edition/pdf/Physical_Activity_Guidelines _2nd_edition.pdf
Human Services	 E-cigarette Use Among Youth and Young Adults 	https://e- cigarettes.surgeongeneral.gov/ documents/2016_SGR_Fact_Sheet_508.P df
Youth Risk Behavior Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Centers for Disease Control	 2010 - 2017 Youth Ohio and U.S. Correlating Statistics 	https://nccd.cdc.gov/youthonline/app/

Appendix II: Acronyms and Terms

ACE	Adverse Childhood Experiences
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
ВМІ	B ody M ass 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 Drinker	Individual who has had at least 1 alcoholic beverage in the past 30 days
Current Smoker	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
CY	Calendar Year
FY	Fiscal Year
HCNO	Hospital Council of Northwest Ohio
HDS	Heart 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
N/A	Data is not available.
ODH	Ohio Department of Health
OSHP	Ohio State Highway Patrol
Race/Ethnicity	Census 2010: U.S. Census data consider race and Hispanic origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as "a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race." Data are presented as "Hispanic or Latino" and "Not Hispanic or Latino." Census 2010 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other. Pacific Islander. Data reported, "White alone" or "Black alone", means the respondents reported only one race.
Ohio SHA/SHIP	Ohio State Health Assessment/State Health Improvement Plan

Weapon	Defined in the YRBS as "a weapon such as a gun, knife, or club"
Youth	Defined as 12 through 18 years of age
YPLL/65	Years of Potential Life Lost before age 65. Indicator of premature death.
Youth Binge Drinking	Consumption of five alcoholic beverages or more on one occasion
Youth BMI Classifications	Underweight is defined as BMI-for-age $\leq 5^{\text{th}}$ percentile Overweight is defined as BMI-for-age 85^{th} percentile to < 95^{th} percentile. Obese is defined as $\geq 95^{\text{th}}$ percentile.
YRBS	Youth Risk Behavior Survey, a youth survey conducted by the CDC

Appendix III: Methods for Weighting the 2019 Morrow County Health Assessment Data

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

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population 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 2019 Morrow County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Morrow County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (8 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 Morrow 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 2019 Morrow County Survey and the 2017 Census estimates.

<u>2019 Mo</u>	orrow County	<u>/ Survey</u>	2017 Census Estimate		<u>Weight</u>
<u>Sex</u>	Number	Percent	<u>Number</u>	Percent	_
Male	134	52.14008	17,467	49.99857	0.958928
Female	123	47.85992	17,468	50.00143	1.044745

In this example, it shows that there was a larger portion of males in the sample compared to the actual portion in Morrow County. The weighting for males was calculated by taking the percent of males in Morrow County (based on Census information) (49.99857%) and dividing that by the percent found in the 2019 Morrow County sample (52.14008%) [49.99857/ 52.14008 = weighting of 0.958928 for males]. The same was done for females [50.00143/47.85992 = weighting of 1.044745 for females]. Thus males' responses are weighted less by a factor of 0.958928 and females' responses weighted heavier by a factor of 1.044745.

This same thing was done for each of the 19 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 1.74734[1.04475 (weight for females) x 1.03985 (weight for White) x 1.77621 (weight for age 35-44) x 0.90553 (weight for income 35-50k)]. Thus, each individual in the 2019 Morrow 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 24.0) 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 everyone. When analyses were done comparing groups within one of the four weighting variables (e.g., smoking status by race/ethnicity), that specific variable was not used in the weighting score that was applied in the software package. In the example smoking status by race, the weighting score that was applied during analysis included only age, sex, and income. Thus, a total of eight weighting scores for each individual were created and applied depending on the analysis conducted. The weight categories were as follows:

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

Category	2019 Morrow County Sample	%	2017 Census	%	Weighting Value
Sex:					
Male	134	52.14008	17,467	49.99857	0.958928
Female	123	47.85992	17,468	50.00143	1.044745
Age:					
20 to 34 years	19	7.42188	5,431	21.19828	2.85619
35 to 44 years	25	9.76563	4,444	17.34582	1.77621
45 to 54 years	40	15.62500	4,953	19.33255	1.23728
55 to 59 years	28	10.93750	2,659	10.37861	0.94890
60 to 64 years	37	14.45313	2,621	10.23029	0.70783
65 to 74 years	55	21.48438	3,238	12.63856	0.58827
75 to 84 years	45	17.57813	1,631	6.36612	0.36216
85+ years	7	2.73438	643	2.50976	0.91785
Race:					
White	244	92.42424	33,575	96.10706	1.03985
Non-White	20	7.57576	1,360	3.89294	0.51387
Total Household Income:					
Less than \$25,000	53	21.81070	2,541	19.88107	0.91153
\$25,000 to \$34,999	38	15.63786	1,147	8.97426	0.57388
\$35,000 to \$49,999	43	17.69547	2,048	16.02379	0.90553
\$50,000 to \$74,999	30	12.34568	2,910	22.76817	1.84422
\$75,000 to \$99,999	41	16.87243	1,716	13.42618	0.79575
\$100,000 to \$149,999	29	11.93416	1,812	14.17729	1.18796
\$150,000 or more	9	3.70370	607	4.74924	1.28229

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

Appendix IV: School Participation

The following schools were randomly chosen and agreed to participate in the 2019 Morrow County Health Assessment:

Cardington-Lincoln Local Schools

Cardington-Lincoln High School Cardington-Lincoln Junior High School

Highland Local Schools

Highland High School Highland Middle School

Mount Gilead Ex. Village Schools

Mt. Gilead High School Mt. Gilead Middle School

Northmor Local Schools

Northmor Jr. High/High School Northmor Elementary

Appendix V: Morrow County Sample Demographic Profile*

Variable	2019 Morrow County Survey Sample	Morrow County Census 2017 (5-year estimate)	Ohio Census 2017
Age			
20-29	3.4%	10.2%	13.3%
30-39	7.9%	10.6%	12.2%
40-49	10.5%	14.2%	12.6%
50-59	20.3%	15.0%	14.3%
60 plus	54.1%	23.3%	22.3%
Race/Ethnicity			
White	91.7%	97.3%	81.9%
Black or African American	0.4%	0.7%	12.3%
American Indian and Alaska Native	1.5%	0.1%	0.2%
Asian	0.8%	0.0%	2.0%
Other	2.6%	0.2%	0.9%
Hispanic Origin (may be of any race)	0%	1.4%	3.6%
Marital Status†			
Married Couple	67.7%	55.9%	48.1%
Never been married/member of an unmarried couple	6.0%	23.2%	31.9
Divorced/Separated	11.3%	14.3%	13.6%
Widowed	13.5%	6.6%	6.4%
Education [†]			
Less than High School Diploma	9.8%	12.2%	10.2%
High School Diploma	39.8%	45.7%	33.6%
Some college/College graduate	49.6%	42.1%	56.2%
Income (Families)			
\$14,999 and less	7.9%	4.5%	7.7%
\$15,000 to \$24,999	12.0%	7.2%	7.0%
\$25,000 to \$49,999	30.5%	21.9%	21.4%
\$50,000 to \$74,999	11.3%	27.1%	20.0%
\$75,000 or more	29.7%	39.2%	44.0%

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

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

Youth Variable	2019 Morrow County Youth Survey Sample
Age	Sample
12 years old or younger	7.7%
13 years old	15.7%
14 years old	18.6%
15 years old	14.5%
16 years old	16.0%
17 years old	18.9%
18 years old or older	8.6%
Gender	
Gender	
Male	49.1%
Female	50.0%
Race/Ethnicity	
Race/Ethnicity	
White	95.5%
American Indian and Alaska Native	4.5%
Black or African American	0.9%
Hispanic or Latino	3.0%
Asian	1.5%
Native Hawaiian or Other Pacific Islander	0.3%
Other	4.5%
Grade Level	
Grade Level	
Middle School (6-8)	37.3%
High School (9-12)	62.9%
Individual Grade Level	
6 th grade	5.0%
7 th grade	17.8%
8 th grade	14.2%
9 th grade	18.3%
10 th grade	14.8%
11 th grade	18.3%
12 th grade	11.5%

*Percents may not add to 100% due to missing data (non-responses) or percent's may exceed 100% due to respondents answering more than option.

Appendix VI: Demographics and Household Information

Morrow County Population by Age Groups and Gender

U.S. Census 2010

Age	Total	Males	Females
Morrow County	34,827	17,454	17,373
0-4 years	2,219	1,189	1,030
1-4 years	1,778	951	827
< 1 year	441	238	203
1-2 years	847	462	385
3-4 years	931	489	442
5-9 years	2,524	1,270	1,254
5-6 years	994	500	494
7-9 years	1,530	770	760
10-14 years	2,612	1,383	1,229
10-12 years	1,553	827	726
13-14 years	1,059	556	503
12-18 years	3,673	1,943	1,730
15-19 years	2,545	1,353	1,192
15-17 years	1,638	871	767
18-19 years	907	482	425
20-24 years	1,627	806	821
25-29 years	1,780	868	912
30-34 years	2,047	1,020	1,027
35-39 years	2,346	1,174	1,172
40-44 years	2,399	1,250	1,149
45-49 years	2,736	1,381	1,355
50-54 years	2,812	1,399	1,413
55-59 years	2,483	1,255	1,228
60-64 years	2,017	985	1,032
65-69 years	1,553	752	801
70-74 years	1,196	577	619
75-79 years	861	402	459
80-84 years	560	205	355
85-89 years	330	127	203
90-94 years	147	53	94
95-99 years	26	5	21
100-104 years	6	0	6
105-109 years	1	0	1
110 years & over	0	0	0
Total 85 years and over	510	185	325
Total 65 years and over	4,680	2,121	2,559
Total 19 years and over	25,416	12,517	12,899

MORROW COUNTY PROFILE

(Source: U.S. Census Bureau, 2017) 2017 ACS 5-year estimates

General	Demograp	hic Cha	racteristics

	Number	Percent (%)
Total Population		
2017 Total Population	34,935	100%
Largest City – Galion City (2013-2017 5-year estimate)		
2017 Total Population	10,169	100%
Population by Race/Ethnicity		
Total Population	34,935	100%
White	33,988	97.3%
African American	260	0.7%
Hispanic or Latino (of any race)	490	1.4%
Two or more races	573	1.6%
Asian	14	0.0%
Some other race	66	0.2%
American Indian and Alaska Native	34	0.1%
Population by Age		
Under 5 years	1,963	5.6%
5 to 17 years	6,627	19.0%
18 to 24 years	2,576	7.3%
25 to 44 years	8,024	23.0%
45 to 64 years	10,233	29.3%
65 years and more	5,512	15.8%
Median age (years)	41.8	N/A
Household by Type		
Total households	12,781	100%
Total families	9,339	73.1%
Households with children <18 years	3,496	27.4%
Married-couple family household	7,495	58.6%
Married-couple family household with children <18 years	2,604	20.4%
Female householder, no husband present	1,258	9.8%
Female householder, no husband present with children <18 years	668	5.2%
Nonfamily household (single person)	3,442	26.9%
Nonfamily household (single person) living alone	2,781	80.8%
Nonfamily household (single person) 65 years and >	4,946	38.7%
	4,940	50.770
Households with one or more people <18 years	4,230	33.1%
Households with one or more people 60 years and >	5,368	42.0%
Average household size	2.71 people	N/A
Average family size	3.15 people	N/A

Housing Occupancy		
Median value of owner-occupied units	\$139,400	N/A
Median housing units with a mortgage	\$1,200	N/A
Median housing units without a mortgage	\$446	N/A
Median value of occupied units paying rent	\$646	N/A
Median rooms per total housing unit	6.2	N/A
Total occupied housing units	12,781	N/A
No telephone service available	463	3.6%
Lacking complete kitchen facilities	111	0.9%
Lacking complete plumbing facilities	94	0.7%

General Demographic Characteristics, Continued

Selected Social Characteristics

Selected Social Charac		
School Enrollment		
Population 3 years and over enrolled in school	8,139	100%
Nursery & preschool	483	5.9%
Kindergarten	421	5.2%
Elementary School (Grades 1-8)	3,809	46.8%
High School (Grades 9-12)	2,388	29.3%
College or Graduate School	1,038	12.8%
Educational Attainment		
Population 25 years and over	23,769	100%
< 9 th grade education	611	2.6%
9 th to 12 th grade, no diploma	2,272	9.6%
High school graduate (includes equivalency)	10,871	45.7%
Some college, no degree	4,695	19.8%
Associate degree	2.78	8.7%
Bachelor's degree	2,221	9.3%
Graduate or professional degree	1,021	4.3%
Percent high school graduate or higher	N/A	87.9%
Percent Bachelor's degree or higher	N/A	13.6%
Marital Status		
Population 15 years and over	28,106	100%
Never married	N/A	23.2%
Now married, excluding separated	N/A	55.9%
Separated	N/A	1.6%
Widowed	N/A	6.6%
Widowed females	N/A	9.5%
Divorced	N/A	12.7%
Divorced females	N/A	13.5%
Veteran Status		
Civilian population 18 years and over	26,317	100%
Veterans 18 years and over	2,378	9.0%
VELEIANS TO YEARS AND OVER	2,370	9.070

Selected Social Characteristics, Continued

Disability Status of the Civilian Non-Institutionalized Population		
Total civilian noninstitutionalized population	34,670	100%
Civilian with a disability	4,814	13.9%
Under 18 years	8,576	34.7%
Under 18 years with a disability	388	5.9%
18 to 64 years	20,742	60.0%
18 to 64 years with a disability	2,504	22.6%
65 Years and over	5,352	15.4%
65 Years and over with a disability	1,922	75.7%

Employment Status Population 16 years and over 27,598 100% 16 years and over in labor force 17,730 64.2% 16 years and over not in labor force 9,868 35.8% 13,897 100% Females 16 years and over Females 16 years and over in labor force 8,480 61.0% Population living with own children <6 years 2,233 100% 1,639 73.4% All parents in family in labor force Class of Worker Civilian employed population 16 years and over 16,936 100% Private wage and salary workers 13,326 78.7% Government workers 2,275 13.4% Self-employed workers in own not incorporated business 1,279 7.6% Unpaid family workers 0.3% 56 **Occupations** Employed civilian population 16 years and over 16,936 100% 3,788 22.4% Production, transportation, and material moving occupations Management, business, science, and art occupations 27.4% 4,648 Sales and office occupations 3,481 20.6% Service occupations 3,111 18.4% Natural resources, construction, and maintenance occupations 1,908 11.3% Leading Industries Employed civilian population 16 years and over 16,936 100% Educational, health and social services 3,760 22.2% Trade (retail and wholesale) 2,539 14.9% 19.4% Manufacturing 3,292 7.1% Arts, entertainment, recreation, accommodation, and food services 1,207 Professional, scientific, management, administrative, and waste 1,203 7.1% management services Transportation and warehousing, and utilities 4.9% 835 Construction 1,280 7.6% Other services (except public administration) 855 5.0% Finance, insurance, real estate and rental and leasing 684 4.0% Public administration 688 4.1% Information 182 1.1% Agriculture, forestry, fishing and hunting, and mining

Selected Economic Characteristics, Continued

411

2.4%

Income In 2017		
Households	12,781	100%
< \$10,000	522	4.1%
\$10,000 to \$14,999	428	3.3%
\$15,000 to \$24,999	1,591	12.4%
\$25,000 to \$34,999	1,147	9.0%
\$35,000 to \$49,999	2,048	16.0%
\$50,000 to \$74,999	2,910	22.8%
\$75,000 to \$99,999	1,716	13.4%
\$100,000 to \$149,999	1,812	14.2%
\$150,000 to \$199,999	367	2.9%
\$200,000 or more	240	1.9%
Median household income	\$52,767	N/A
Income in 2017		
Families	9,339	100%
< \$10,000	204	3.1%
\$10,000 to \$14,999	218	1.9%
\$15,000 to \$24,999	671	7.3%
\$25,000 to \$34,999	724	7.6%
\$35,000 to \$49,999	1,318	12.6%
\$50,000 to \$74,999	2,535	21.3%
\$75,000 to \$99,999	1,470	16.0%
\$100,000 to \$149,999	1,634	16.4%
\$150,000 to \$199,999	356	7.4%
\$200,000 or more	209	6.5%
Median family income	\$65,976	N/A
Per capita income in 2017	\$24,864	N/A
Poverty Status in 2017		
Families	N/A	6.3%
Individuals	N/A	9.7%

(Source: U.S. Census Bureau, 2017)

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

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2017	\$37,077	61 st of 88 counties
BEA Per Capita Personal Income 2016	\$36,013	61 st of 88 counties
BEA Per Capita Personal Income 2015	\$34,646	71 st of 88 counties
BEA Per Capita Personal Income 2014	\$33,827	69 th of 88 counties
BEA Per Capita Personal Income 2013	\$33,033	66 th of 88 counties

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

Category	Morrow County	Ohio	
Population in poverty	11.0%	15.4%	
< 125% FPL (%)	14.8%	19.9%	
< 150% FPL (%)	20.2%	24.3%	
< 200% FPL (%)	28.6%	33.3%	
Population in poverty (2001)	10.3%	10.3%	

Poverty Rates, 2012-2016 5-year averages

(Source: The Ohio Poverty Report, Ohio Development Services Agency, February 2018, http://www.development.ohio.gov/files/research/P7005.pdf)

Emp	loyme	ent Sta	atistics

Category	Morrow County	Ohio
Labor Force	17,000	5,756,900
Employed	16,300	5,519,700
Unemployed	700	237,200
Unemployment Rate* in November 2018	3.9	4.1
Unemployment Rate* in October 2018	4.3	4.3
Unemployment Rate* in November 2017	4.3	4.4

*Rate equals unemployment divided by labor force. (Source: Ohio Department of Job and Family Services, November 2018, http://ohiolmi.com/laus/OhioCivilianLaborForceEstimates.pdf)

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval	
Morrow County					
All ages in poverty	4,214	3,395 to 5,033	12.2%	9.8 to 14.6	
Ages 0-17 in poverty	1,577	1,232 to 1,922	19.4%	15.2 to 23.6	
Ages 5-17 in families in poverty	1,083	828 to 1,338	17.4%	13.3 to 21.5	
Median household income	\$52,953	\$49,048 to \$56,858			
Ohio					
All ages in poverty	1,639,636	1,614,177 to 1,665,095	14.5%	14.3 to 14.7	
Ages 0-17 in poverty	521,730	506,894 to 536,566	20.4%	19.8 to 21.0	
Ages 5-17 in families in poverty	348,713	335,691 to 361,735	18.7%	18.0 to 19.4	
Median household income	\$ 52,357	\$52,083 to \$52,631			
United States					
All ages in poverty	44,268,996	44,022,086 to 44,515,906	14.0%	13.9 to 14.1	
Ages 0-17 in poverty	14,115,713	13,976,345 to 14,255,081	19.5%	19.3 to 19.7	
Ages 5-17 in families in poverty	9,648,486	9,548,767 to 9,748,205	18.3%	18.1 to 18.5	
Median household income	57,617	\$57,502 to \$57,732			

Estimated Poverty Status in 2016

(Source: U.S. Census Bureau, 2016 Poverty and Median Income Estimates,

https://www.census.gov/data/datasets/2016/demo/saipe/2016-state-and-county.html)

Federal Poverty Thresholds in 2017 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	\$ 12,752					
1 Person 65 and >	\$ 11,756					
2 people Householder < 65 years	\$ 16,414	\$16,895				
2 People Householder 65 and >	\$14,816	\$16,831				
3 People	\$19,173	\$19,730	\$19,749			
4 People	\$25,283	\$25,696	\$24,858	\$24,944		
5 People	\$30,490	\$30,933	\$29,986	\$29,253	\$28,805	
6 People	\$35,069	\$35,208	\$34,482	\$33,787	\$32,753	\$32,140
7 People	\$40,351	\$40,603	\$39,734	\$39,129	\$38,001	\$36,685
8 People	\$45,129	\$45,528	\$44,708	\$43,990	\$42,972	\$41,678
9 People or >	\$54,287	\$54,550	\$53,825	\$53,216	\$52,216	\$50,840

(Source: U. S. Census Bureau, Poverty Thresholds 2017, https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html)

Appendix VII: County Health Rankings

	Morrow County 2019	Ohio 2019	U.S. 2019
Health	Outcomes		
Premature death. Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2015-2017)	7,900	8,500	6,900
Overall heath. Percentage of adults reporting fair or poor health (age-adjusted) (2016)	16%	17%	16%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2016)	3.8	4.0	3.7
Mental health. Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2016)	4.0	4.3	3.8
Maternal and infant health. Percentage of live births with low birthweight (< 2500 grams) (2011- 2017)	7%	9%	8%
Health	Behaviors		
Tobacco. Percentage of adults who are current smokers (2016)	20%	23%	17%
Obesity. Percentage of adults that report a BMI of 30 or more (2015)	36%	32%	29%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2015 and 2016)	8.7	6.7	7.7
Physical inactivity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2015)	30%	25%	22%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2018)	17%	84%	84%
Alcohol abuse. Percentage of adults reporting binge or heavy drinking (2016)	18%	19%	18%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2013-2017)	24%	33%	29%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2016)	188	521	497.3
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2011-2017)	25	26	25

(Source: 2019 County Health Rankings for County, Ohio, and U.S. data)

	Morrow County 2019	Ohio 2019	U.S. 2019
Cli	nical Care		
Coverage and affordability. Percentage of population under age 65 without health insurance (2016)	7%	7%	10%
Access to health care/medical care. Ratio of population to primary care physicians (2016)	5,840:1	1,300:1	1,330:1
Access to dental care. Ratio of population to dentists (2017)	7,000:1	1,620:1	1,460:1
Access to behavioral health care. Ratio of population to mental health providers (2018)	1,750:1	470:1	440:1
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2016)	4,913	5,135	4,520
Mammography screening. Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening (2016)	34%	41%	41%
Flu vaccinations. Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination (2016)	31%	47%	45%
Social and	Economic Factors		
Education. Percentage of ninth-grade cohort that graduates in four years (2017-2018)	93%	85%	85%
Education. Percentage of adults ages 25-44 years with some post-secondary education (2013-2017)	53%	65%	65%
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2017)	5%	5%	4%
Employment, poverty, and income. Percentage of children under age 18 in poverty (2017)	18%	20%	18%
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2013-2017)	3.9	4.8	4.9
Family and social support. Percentage of children that live in a household headed by single parent (2013-2017)	26%	36%	33%
Family and social support. Number of membership associations per 10,000 population (2016)	10	11	9
Violence. Number of reported violent crime offenses per 100,000 population (2014 and 2016)	61	293	386
Injury. Number of deaths due to injury per 100,000 population (2013-2017)	75	82	67

(Source: 2019 County Health Rankings for County, Ohio, and U.S. data)

	Morrow County 2019	Ohio 2019	U.S. 2019
Physica	l Environment		
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2014)	11.3	11.5	8.6
Air, water, and toxic substances.			
Indicator of the presence of health-related drinking water violations. Yes - indicates the presence of a violation, No - indicates no violation (2017)	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 (2011-2015)	12%	15%	19%
Transportation. Percentage of the workforce that drives alone to work (2013-2017)	85%	83%	76%
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2013-2017)	50%	30%	35%

(Source: 2019 County Health Rankings for County, Ohio, and U.S. data) N/A – Data is not available

Appendix VIII: Community Stakeholder Perceptions

Morrow County Community Event Wednesday, February 12th, 2020

What surprised you the most?

- Percentage of adults and youth who were overweight/obese (2)
- Low percentage of males within normal weight (BMI) (2)
- Increase in uninsured rate
- Low percentage of those coerced/forced to have sexual activity reported it
- Increase in drinking and driving
- Increase in drugs being offered/sold on school property
- Youth current drinker percentage (females higher)
- Youth suicide attempts/contemplation

What would you like to see covered in the report next time?

- Why do kids feel unsafe at school or going to/from school?
- Opioids
- Adult/youth substance use data correlated with other risky behaviors

What will you or your organization do with this data?

- Use extensively in service planning
- Incorporate into CHIP
- Use data to adjust programming at our agency
- Compare with Morrow Family Health Center data
- Promote dental care within low income populations

Based on the community health assessment, what health topics do you see as the most important?

- Mental Health (2)
- Alcohol consumption (2)
- Drug use (2)
- Obesity
- Substance abuse
- Social Determinants of Health
- Youth partner violence
- Recommended screenings
- Immunizations for adults
- Diabetes

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

- Internet (2)
- Social media (i.e., Facebook) (2)
- News media
- Flyers
- Civic groups

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

- Articles in the paper
- Local TV interviews with experts
- Ensure all involved agencies receive an electronic copy of the report
- Town hall meetings
- Schools
- Community meetings

What are some barriers people may face regarding the issues identified?

- Money/poverty (2)
- Employment
- Transportation
- Affordability
- Lack of education
- Adverse Childhood Experiences showing an impact as children age

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

- Delaware-Morrow Mental Health and Recovery Services Board (2)
- Drug court
- EMA
- EMS
- Sheriff's office
- Public Health
- Law enforcement
- School advisors
- OACHC