



# 2015 Union County Community Assessment





# FOREWORD

Dear Community Member,

Thank you for your concern for the health and well-being of Union County. The data presented in this publication is the result of the 2015 health and needs status assessment of Union County adults. The data collected from Union County residents is reported along with health information from the Ohio Department of Health and relevant national, state, and local data sources.

Monitoring the health status of local residents to identify community health problems is an essential public health service. This health and needs status assessment is invaluable because it serves as a guide for strategic planning and decision-making. It can help our community identify new health concerns, measure the impact of current community health improvement efforts, and guide the judicious use of local resources. However, this is only one planning tool. A true plan of action for community health improvement will require taking a closer look at these survey results; seeking additional information from community residents, service providers, and others; identifying population(s) at risk for specific health conditions; and choosing effective strategies that will truly improve the health of Union County residents when put into action.

This report would not exist without the financial support of community organizations and assistance of community leaders who all care about your health. The project was supported financially by the following organizations: Community Action Organization of Delaware, Madison, and Union Counties, Mental Health & Recovery Board of Union County, Memorial Hospital, Union County Senior Services, Union County Health Department, United Way of Union County, and World of Wanders Childcare and Learning Center.

In addition, the following individuals worked on the planning committee: Tony Brooks, Kara Brown, Kathy Brown, Dick Douglas, Beth Johnson, Shari Marsh, Tom McCarthy, Kandyce Reeves, Brenda Rock, Mary Salimbene, Merriman, Shawn Sech, Jerome R. Shapiro, Jean Shoemaker, Jason R. Stanford, Amy Stephens, Jason Orcena, Holly Zweizig, and Rochelle Twining. Special thanks are given to Britney Ward from the Healthy Communities Foundation of the Hospital Council of Northwest Ohio for guiding this process.

While data is useful, it is how people utilize this information that ultimately benefits the community. Please join the Union County Health Partners as we work together to improve the health and well-being of Union County residents. We encourage you to be open to new ideas and collaborations. We also encourage you to remain optimistic and positive about the excellent work this community can do together.

Sincerely,  
  
**Jason E. Orcena, DrPH**  
Health Commissioner  
Union County Health Department

**This report has been funded by:**

Community Action Organization of Delaware, Madison, and Union Counties  
Mental Health & Recovery Board of Union County  
Memorial Hospital  
Union County Senior Services  
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Union County Health Department  
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To see Union 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 2015 Union County Health Assessment is available on the following website:

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 Union County adults (19 years of age and older) who participated in a county-wide health assessment survey during 2015. The findings are based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instrument used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS). The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

## Primary Data Collection Methods

### DESIGN

This community health assessment was cross-sectional in nature and included a written survey of adults within Union 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

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

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

### SAMPLING

Adults ages 19 and over living in Union County were used as the sampling frame for the adult survey. Since U.S. Census Bureau age categories do not correspond exactly to this age parameter, the investigators calculated the population of those 18 years and older living in Union County. There were 38,050 persons ages 18 and older living in Union County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error of the survey findings). A sample size of at least 380 adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Union County was obtained from Allegra Marketing Services in Louisville, KY.

## **PROCEDURE**

Prior to mailing the survey, an advance letter was mailed to 1,200 adults in Union County. This advance letter was personalized, printed on Union County Community Assessment Committee stationery and was signed by Jason Orcena, Health Commissioner, Union County Health Department, Rochelle Twinning, Executive Director, Community Action of Delaware, Madison and Union Counties, and Shari Marsh, Executive Director, United Way of Union County. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

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

The response rate for the mailing was 40% (n=459; CI= $\pm 4.55$ ). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

## **DATA ANALYSIS**

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

## **LIMITATIONS**

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Union 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 Union County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

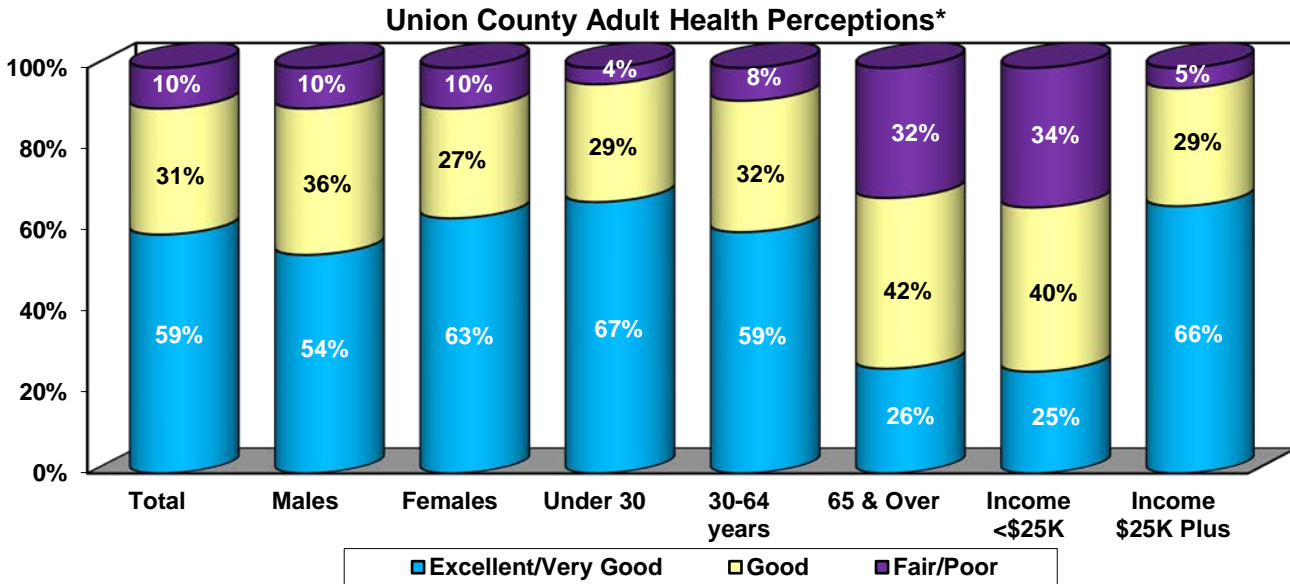
Second, it is important to note that, although several questions were asked using the same wording as the CDC questionnaires, the adult data collection method differed. CDC adult data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than as a mail survey.



## Data Summary

### HEALTH PERCEPTIONS

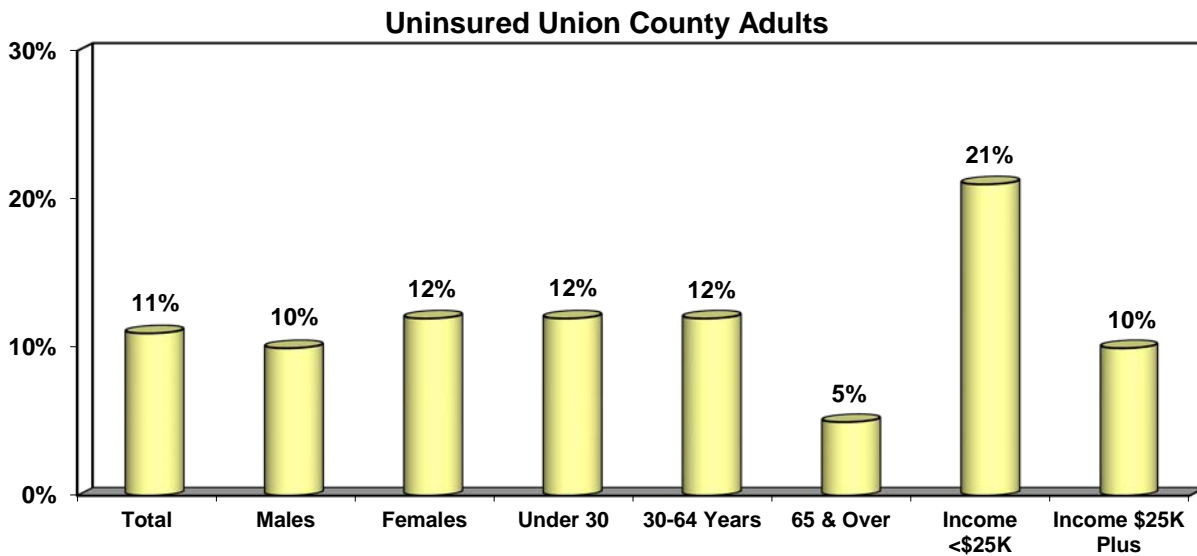
In 2015, nearly three-fifths (59%) of the Union County adults rated their health status as excellent or very good. Conversely, 10% of adults, increasing to 32% of those over the age of 65, described their health as fair or poor.



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

### HEALTH CARE COVERAGE

The 2015 Health Assessment data has identified that 11% of Union County adults were without health care coverage. Those most likely to be uninsured were adults with an income level under \$25,000. In Union County, 7.5% of residents live below the poverty level (Source: U.S. Census, American Community Survey 3 Year Estimate, 2013).



## HEALTH CARE ACCESS

The 2015 Health Assessment project identified that 70% of Union County adults had visited a doctor for a routine checkup in the past year. 61% of adults went outside of Union County for health care services in the past year.

## CARDIOVASCULAR HEALTH

Heart disease (13%) and stroke (4%) accounted for 17% of all Union County adult deaths in 2013 (Source: ODH Information Warehouse). The 2015 Union County Health Assessment found that 3% of adults had survived a heart attack and 2% had survived a stroke at some time in their life. More than one-fourth (28%) of Union County adults had been diagnosed with high blood pressure, 34% had high blood cholesterol, 33% were obese, and 11% were smokers, four known risk factors for heart disease and stroke.

## CANCER

In 2015, 13% of Union County adults had been diagnosed with cancer at some time in their life. Ohio Department of Health statistics indicate that from 2002-2010, a total of 647 Union County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that not using tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages and early detection may reduce overall cancer deaths.

## DIABETES

In 2015, 9% of Union County adults had been diagnosed with diabetes.

## ARTHRITIS

According to the Union County survey data, 36% of Union County adults were diagnosed with arthritis. According to the 2013 BRFSS, 30% of Ohio adults and 25% of U.S. adults were told they have arthritis.

## ASTHMA

In 2014, 14% of Union County adults had been diagnosed with asthma.

## ADULT WEIGHT STATUS

The 2015 Health Assessment identified that 68% of Union County adults were overweight or obese based on Body Mass Index (BMI). The 2013 BRFSS indicates that 30% of Ohio and 29% of U.S. adults were obese by BMI. One-third (33%) of Union County adults were obese. Half (50%) of adults were trying to lose weight.

### Union County Leading Types of Death 2013 (Preliminary)

Total Deaths: 355

1. Cancer (18% of all deaths)
2. Heart Disease (13%)
3. Unintentional Injuries (Accidents) (5%)
4. Chronic Lower Respiratory Diseases (4%)
5. Stroke (4%)

(Source: ODH Information Warehouse, 2013)

### Union County Incidence of Cancer, 2008-2012

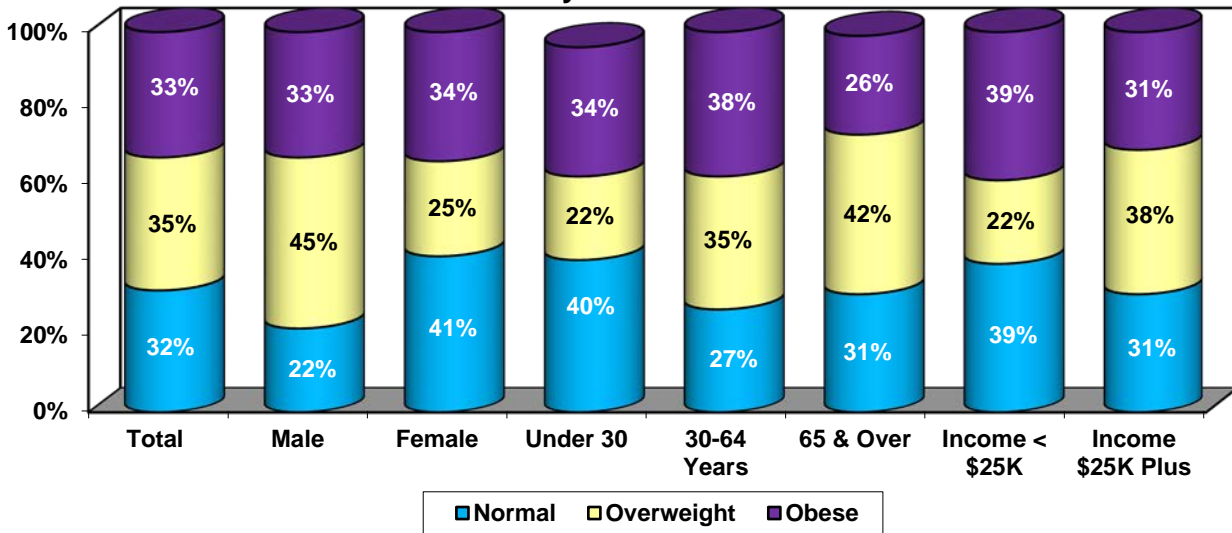
All Types: 1,113 cases

- Breast: 160 cases (14%)
- Lung and Bronchus: 156 cases (14%)
- Prostate: 123 cases (11%)
- Colon and Rectum: 88 cases (8%)

In 2010, there were 72 cancer deaths in Union County.

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 4/8/2015)

**Union County Adult BMI Classifications**

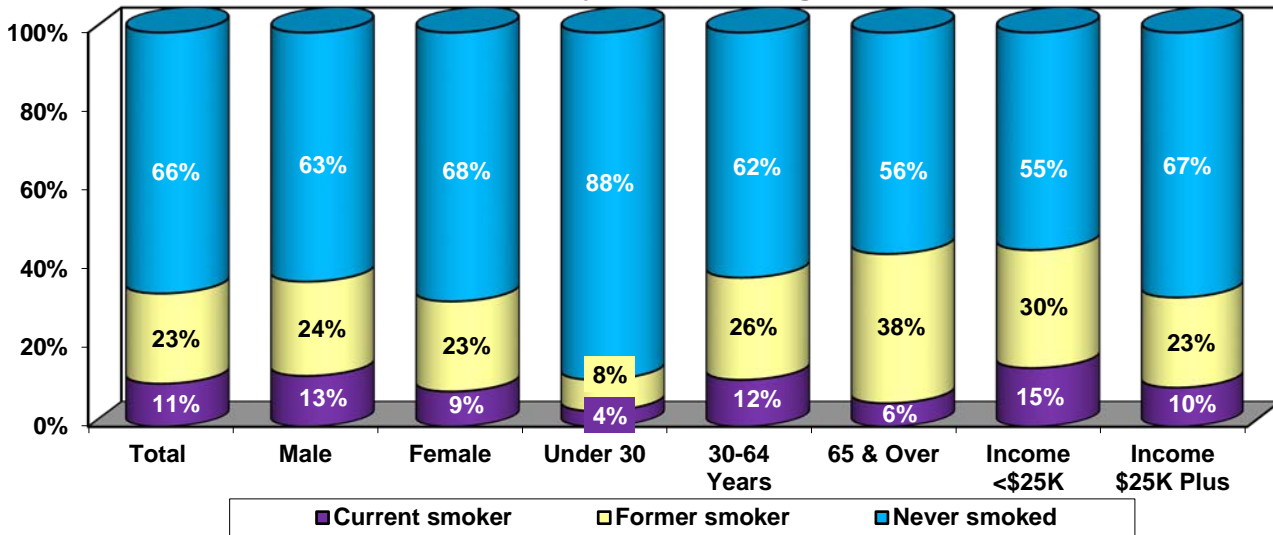


(Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight)

**ADULT TOBACCO USE**

In 2015, 11% of Union County adults were current smokers and 23% were considered former smokers. In 2014, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of death worldwide, and is responsible for the deaths of approximately half of long-term users. Each year, tobacco use is responsible for almost 6 million premature deaths, 80% of which are in low-and middle-income countries, and by 2030, this number is expected to increase to 8 million. (Source: Cancer Facts & Figures, American Cancer Society, 2015)

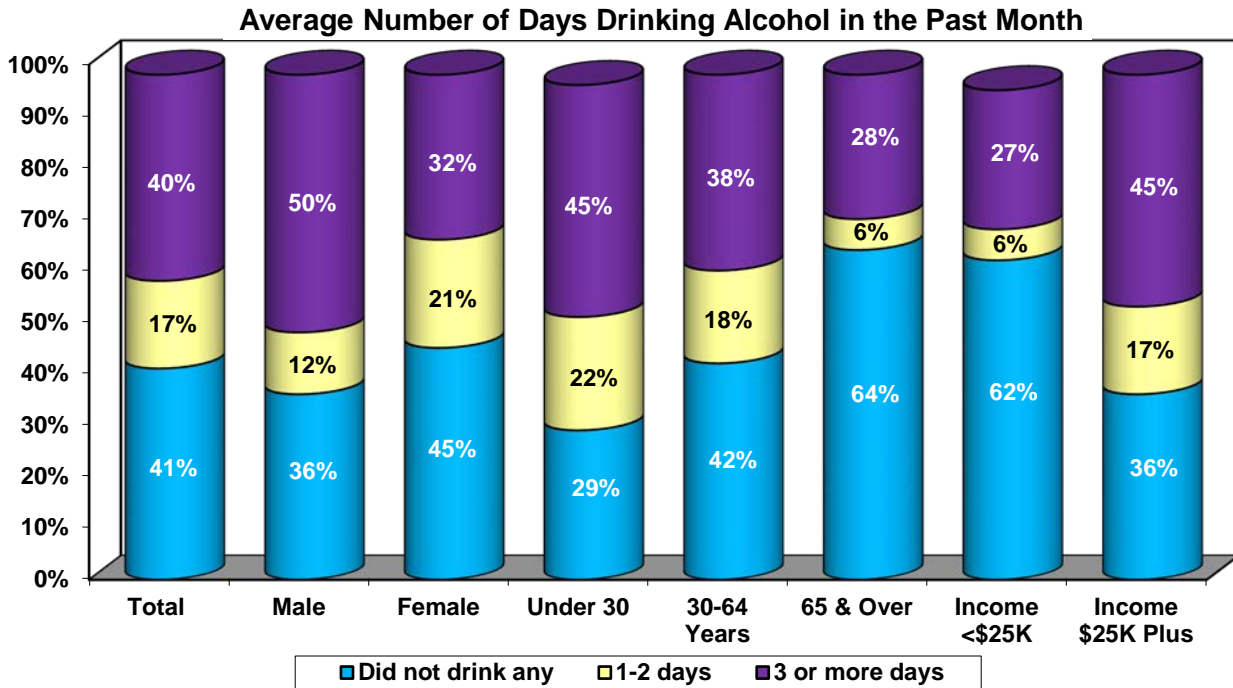
**Union County Adult Smoking Behaviors**



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?"

## ADULT ALCOHOL CONSUMPTION

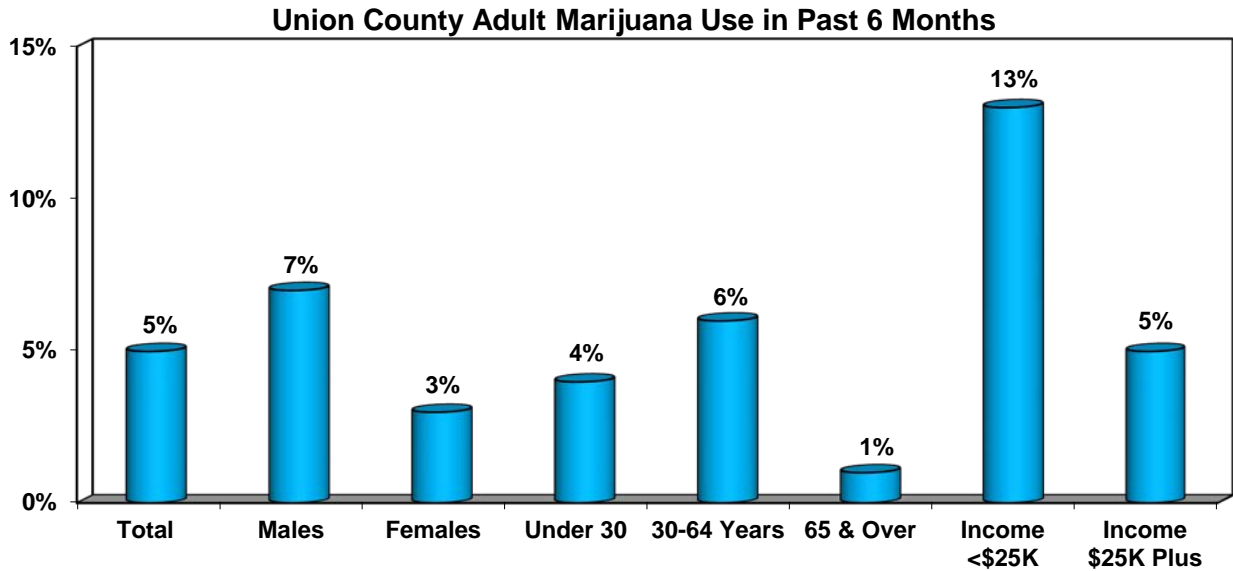
In 2015, the Health Assessment indicated that 12% of Union County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 37% of adults who drank had at least one episode of binge drinking in the past month. Eight percent of adults drove after having perhaps too much to drink.



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

## ADULT MARIJUANA AND OTHER DRUG USE

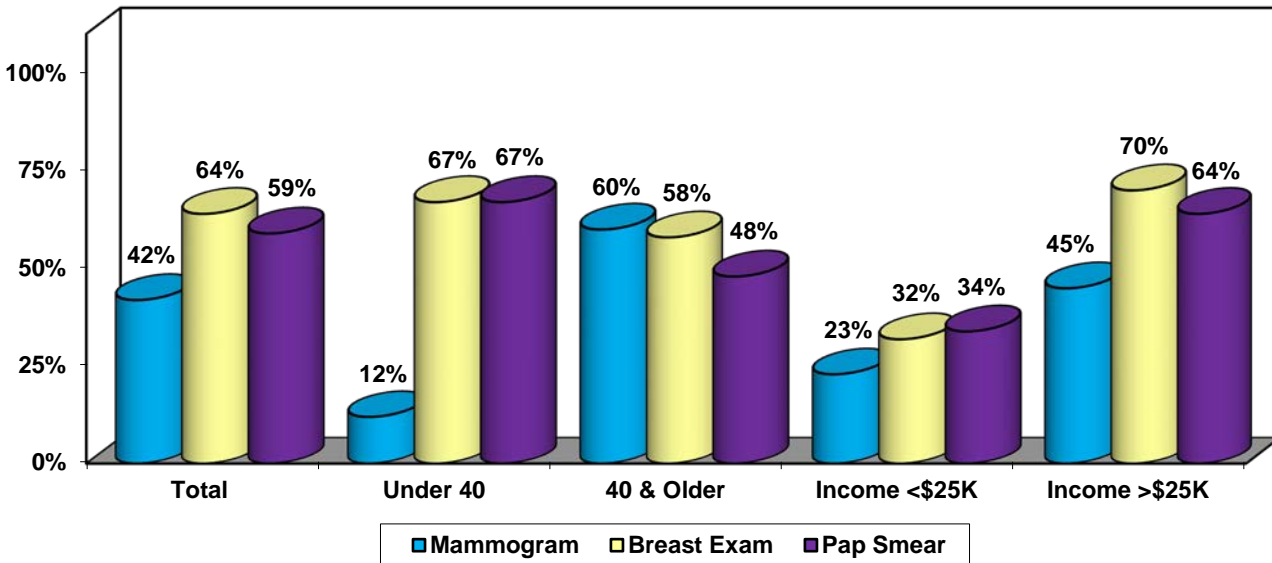
In 2015, 5% of Union County adults had used marijuana during the past 6 months. 14% of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.



**WOMEN'S HEALTH**

In 2015, three-fifths (60%) of Union County women over the age of 40 reported having a mammogram in the past year. 64% of Union County women ages 19 and over had a clinical breast exam and 59% had a Pap smear to detect cancer of the cervix in the past year. The Health Assessment determined that 2% of women survived a heart attack and 2% survived a stroke at some time in their life. About one-third (34%) were obese, 29% had high blood cholesterol, 27% had high blood pressure, and 9% were identified as smokers, known risk factors for cardiovascular diseases.

**Union County Women's Health Exams Within the Past Year**



**MEN'S HEALTH**

In 2015, 54% of Union County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. Major cardiovascular diseases (heart disease and stroke) accounted for 26% and cancers accounted for 26% of all male deaths in Union County from 2011-2013. The Health Assessment determined that 5% of men survived a heart attack and 3% survived a stroke at some time in their life. More than one-fourth (30%) of men had been diagnosed with high blood pressure, 39% had high blood cholesterol, and 13% were identified as smokers, which, along with obesity (33%), are known risk factors for cardiovascular diseases.

**PREVENTIVE MEDICINE AND HEALTH SCREENINGS**

Nearly two-thirds (64%) of adults ages 65 and older had a pneumonia vaccination at some time in their life. More than four-fifths (82%) of adults ages 65 and older had a flu vaccine in the past year.

**ADULT SEXUAL BEHAVIOR AND PREGNANCY OUTCOMES**

In 2015, more than three-fourths (77%) of Union County adults had sexual intercourse. Six percent of adults had more than one partner. Prevalence estimates suggest that young people aged 15-24 years acquire half of all new STDs and that 1 in 4 sexually active adolescent females have an STD, such as chlamydia or human papillomavirus (HPV) (Source: CDC, *STDs in Adolescents and Young Adults, 2014 STD Surveillance*).

**QUALITY OF LIFE**

In 2015, 21% of Union County adults were limited in some way because of a physical, mental or emotional problem.



## **SOCIAL CONTEXT**

In 2015, 92% of Union County adults reported underemployment or unemployment as an important/very important community issue. 8% of adults attempted to get assistance from a social service agency. 84% of adults reported always wearing a seat belt while in a car.

## **MENTAL HEALTH AND SUICIDE**

In 2015, 2% of Union County adults made a plan about attempting suicide. 10% of 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.

## **ORAL HEALTH**

The 2015 Health Assessment project has determined that nearly three-fourths (73%) of Union County adults had visited a dentist or dental clinic in the past year. The 2012 BRFSS reported that 67% of U.S. adults and 68% of Ohio adults had visited a dentist or dental clinic in the previous twelve months.

## **PARENTING**

The 2015 Health Assessment project identified that 73% of parents discussed screen time with their 12-to-17 year-old in the past year.

# Adult | TREND SUMMARY

Adult Variables	Union County 2015	Ohio 2013	U.S. 2013
<b>Health Status</b>			
Rated health as excellent or very good	59%	50%	52%
Rated general health as fair or poor	10%	18%	17%
<b>Health Care Coverage</b>			
Uninsured	11%	14%	17%
<b>Arthritis, Asthma, &amp; Diabetes</b>			
Has been diagnosed with arthritis	36%	30%	25%
Has been diagnosed with diabetes	9%	11%	11%
Has been diagnosed with asthma	14%	14%	14%
<b>Cardiovascular Health</b>			
Had angina	3%	5%	4%
Had a heart attack	3%	5%	4%
Had a stroke	2%	4%	3%
Has been diagnosed with high blood pressure	28%	34%	31%
Has been diagnosed with high blood cholesterol	34%	38%	38%
Had blood cholesterol checked within the past 5 years	83%	78%	76%
<b>Weight Status</b>			
Overweight	35%	35%	35%
Obese	33%	30%	29%
Ate 5 or more servings of fruits / vegetables per day	8%	21%**	23%**
<b>Alcohol Consumption</b>			
Had at least one alcoholic beverage in past month	57%	53%	55%
Binged in past month (5 or more drinks in a couple of hours on an occasion)	19%	17%	17%
<b>Tobacco Use</b>			
Current smoker (currently smoke some or all days)	11%	23%	19%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	23%	25%	25%
<b>Preventive Medicine</b>			
Had a pneumonia vaccine (age 65 and older)	64%	71%	70%
Had a flu vaccine in the past year (ages 65 and older)	82%	63%	63%
Had a clinical breast exam in the past two years (age 40 and older)	76%	75%**	77%**
Had a mammogram in the past two years (age 40 and older)	78%	74%*	74%*
Had a pap smear in the past three years	84%	78%*	78%*
<b>Quality of Life</b>			
Limited in some way because of physical, mental or emotional problem	21%	21%	20%
<b>Oral Health</b>			
Adults who have visited the dentist in the past year	73%	68%*	67%*
Adults who have had all of their permanent teeth removed (aged 65 and older)	20%	20%*	16%*

\* 2012 BFRSS Data, \*\*2009 BFRSS Data  
 Items in red are worse than the state.

TREND SUMMARY

# Appendix VI | YOUTH COMPARISON DATA

Youth Variables	Union County 2014 (7 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2013 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Weight Control</b>			
Ate 4 or more servings of fruits per day	19.7%	---†	---†
Ate 4 or more servings of vegetables per day	10.7%	---†	---†
Exercising or playing a sport 4 days or less during a typical week	46.8%	---†	---†
Physically active 4 days or less during a typical week	42.9%	---†	---†
<b>Unintentional Injuries and Violence</b>			
Carried a weapon on school property in past month	3.9%	4%‡	5%
Threatened or injured with a weapon on school property in past year	4.9%	8%‡	7%
Been in a physical fight in past year	16.9%	20%	25%
Been in a fight on school property in past year	6.9%	6%	8%
Electronically/cyber bullied in past year	21.7%	15%	15%
Bullied on school property in past year	8.6%	21%	20%
Did not go to school because felt unsafe	4.6%	5%	7%
<b>Mental Health</b>			
Youth who had seriously considered attempting suicide in the past year	20.7%	14%	17%
Youth who had attempted suicide in the past year	4.9%	6%	8%
<b>Alcohol Consumption</b>			
Current drinker	17.3%	30%	35%
Rode with someone who was drinking	12.1%	17%	22%
Drank and drove (of youth drivers)	10.9%	4%	10%
Obtained the alcohol they drank by someone giving it to them	68.4%	38%	42%
<b>Sexual Behavior</b>			
Ever had sexual intercourse	22.5%	43%	47%
Had four or more sexual partners (of all youth)	21.6%	12%	15%
Had sexual intercourse before age 13 (of all youth)	15.8%	4%	6%
<b>Drug Use</b>			
Youth who used marijuana in the past month	8.8%	21%	23%
Ever used cocaine	2.3%	4%	6%
Ever used heroin	0.7%	2%	2%
Ever used steroids	0.9%	3%	3%
Ever used inhalants	1.6%	9%	9%
Ever misused prescription medications	1.3%	N/A	18%
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	8.6%	20%	22%

Data collected and reported by the Council for Union County Families

N/A – Not available

\* Comparative YRBS data for Ohio and U.S. is 2011, ‡ Comparative YRBS data for Ohio is 2007 and U.S. is 2009, †No Comparative YRBS Data

Items in red are worse than the state.