

2019/2020



Sandusky County **Community Health Assessment**

Examining the health of Sandusky County

Released April 2020

Foreword

A community relies on the health and vitality of its members to thrive. Creating and maintaining a healthy community is a team effort in which community members and agencies commit time, effort and dedication to support such an initiative. A community health assessment is a collaborative process in which data is collected regarding the public health issues that present the most concern for community members and leaders. These results are an important reference when developing strategies to mobilize communities and address critical public health issues. This 2019-2020 Sandusky County Complete Community Health Assessment is the result of the continued support, commitment and dedication of our community partners to work together to improve the health and well-being of the citizens of Sandusky County. The information presented in this report is intended to support the collaborative efforts that began with the 2001 Community Health Assessment and its strong base of evidence. Health and human service programs, health care providers, managed care organizations and other groups and individuals interested in gaining a factual understanding of Sandusky County's issues should find this information very useful. It is the Health Partners' wish that community groups will persevere in meeting the challenges presented by the findings in this assessment.

Sincerely,

Sandusky County Health Partners

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The Bellevue Hospital

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The 2019-2020 Sandusky County Community Health Assessment was released to the public in April 2020



Sandusky County Health Partners

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Community Health Services
Firelands Counseling & Recovery Services
Fremont City School District
Great Lakes Community Action Partnership
Mental Health and Recover Services Board
ProMedica Memorial Hospital
Sandusky County Board of DD
Sandusky County Family and Children First Council
Sandusky County Job and Family Services
Sandusky County Juvenile and Probate Court
Sandusky County Public Health
United Way of Sandusky County

The 2019 Sandusky County Health Assessment is available on the following websites:

The Bellevue Hospital

www.bellevuehospital.com

Community Health Services

www.fremontchs.com

Great Lakes Community Action Partnership

www.glcap.org

Firelands Counseling & Recovery Services

www.firelands.com

Fremont City School District

www.fremontschools.net

Mental Health and Recover Services Board

www.mhrsb.org

ProMedica Memorial Hospital

www.promedica.org/memorial-hospital

Sandusky County Board of DD

www.scbdd.org

Sandusky County Family and Children First Council

www.sanduskycountyfjfc.org

Sandusky County Public Health

www.scpulichealth.com

United Way of Sandusky County

www.uwsandco.org

Sandusky County Job and Family Services

www.sanduskycountydjfs.org

Sandusky County Juvenile and Probate Court

www.sanduskycountyjuvenilecourt.com

Hospital Council of Northwest Ohio

www.hcno.org/community-services/community-health-assessments/

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The Hospital Council of Northwest Ohio (HCNO) is a 501(c)3 non-profit regional hospital association located in Toledo, Ohio. They facilitate community health needs assessments and planning processes in 40+ counties in Ohio, Michigan, and Oregon. Since 2004, they have used a process that can be replicated in any county that allows for comparisons from county to county, within the region, the state, and the nation. HCNO works with coalitions in each county to ensure a collaborative approach to community health improvement that includes multiple key stakeholders, such as those listed above. All HCNO project staff have their master's degree in public health, with emphasis on epidemiology and health education.

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

<http://www.hcno.org/community-services/data-link/>

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Executive Summary

This executive summary provides an overview of health-related data for Sandusky County adults (ages 19 and older), youth (ages 12 through 18), and children (ages 0 through 11) who participated in a county-wide health assessment survey from August through October 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), Youth Risk Behavior Surveillance System (YRBSS), and the National Survey of Children's Health (NSCH) which was developed by the Child and Adolescent Health Measurement Initiative. 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 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, adolescents, and parents within Sandusky 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

Three survey instruments were designed, and pilot tested for this study: one for adults, one for adolescents in grades 6 through 12, and one for parents of children ages 0 through 11. As a first step in the design process, health education researchers from the University of Toledo and staff members from HCNO 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, adolescents, and children. The investigators decided to derive the majority of the adult survey items from the BRFSS, the majority of the adolescent survey items from the YRBSS, and the majority of the survey items for the parents of children 0 through 11 from the NSCH. This decision was based on being able to compare local data with state and national data.

The project coordinator from the Hospital Council of Northwest Ohio conducted a series of meetings with the planning committee from Sandusky County. During these meetings, HCNO and the planning committee reviewed and discussed banks of potential survey questions from the BRFSS, YRBSS, and NSCH surveys. Based on input from the committee, the project coordinator composed drafts of surveys containing 115 items for the adult survey, 78 items for the adolescent survey, and 77 items for the children's 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 Sandusky County. There were 45,254 persons ages 19 and over living in Sandusky 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 381 adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Sandusky County was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.

SAMPLING | Adolescent Survey

The sampling frame for the adolescent survey consisted of youth in grades 6 through 12 in Sandusky County public school districts. For more information on participating districts and schools, see Appendix IV. Using the U.S. Census Bureau data, it was determined that approximately 6,000 youth ages 12 through 18 years old lived in Sandusky County. A sample size of 361 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error. Students were randomly selected and surveyed in the schools.

SAMPLING | Child Survey

The sampling frame for the child survey consisted of children ages 0 through 11 residing in Sandusky County. Using U.S. Census Bureau data, it was determined that 9,690 children ages 0 through 11 resided in Sandusky County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error). The sample size required to generalize to children aged 0 through 11 was 370. The random sample of mailing addresses of parents from Sandusky County was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.

PROCEDURE | Adult Survey

Prior to mailing the survey to adults, the project team mailed an advance letter to 1,800 adults in Sandusky County. This advance letter was personalized; printed on Health Partners of Sandusky County stationery; and signed by Bethany Brown, Sandusky County Health Commissioner. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Two weeks following the advance letter, a two-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter describing the purpose of the study, a questionnaire printed on white paper, a self-addressed stamped return envelope, and a \$2 incentive. Approximately two weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging the recipient to reply, another copy of the questionnaire on white paper, and another reply envelope. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the mailing was 28% (n=472; CI=± 4.49). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

PROCEDURE | Adolescent Survey

The survey was approved by all participating superintendents. Schools and grades were randomly selected. To ensure that students in a particular grade had an equal chance of being selected, the research team used “general” school classes like English or Health to distribute surveys. 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 94% (n=460: CI=± 4.39).

PROCEDURE | Child Survey

Prior to mailing the survey to parents of 0 through 11-year-olds, the project team mailed an advance letter to 3,600 parents in Sandusky County. This advance letter was personalized; printed on Health Partners of Sandusky County stationery; and signed by Bethany Brown, Sandusky County Health Commissioner. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents’ confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Two weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter describing the purpose of the study, a questionnaire printed on white paper, a self-addressed stamped return envelope, and a \$2 incentive. Approximately two weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging the recipient to reply, another copy of the questionnaire on white paper, and another reply envelope. Surveys returned as undeliverable were not replaced with another potential respondent. The response rate was 8% (n=252: CI=± 6.09).

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 Sandusky 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 Sandusky 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 Sandusky County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

Furthermore, while the survey was mailed to random households in Sandusky County, those responding to the survey were more likely to be older. For example, only 12 respondents were under the age of 30. While weightings are applied during calculations to help account for this sort of variation, it still presents a potential limitation (to the extent that the responses from these 12 individuals might be substantively different from the majority of Sandusky County residents under the age of 30).

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

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


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 sites, 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, Healthy People 2020, among other national and local sources. All primary data collected in this report is from the 2019 Sandusky County Community Health Assessment (CHA). All other data is cited accordingly.

2019 Ohio State Health Assessment (SHA)

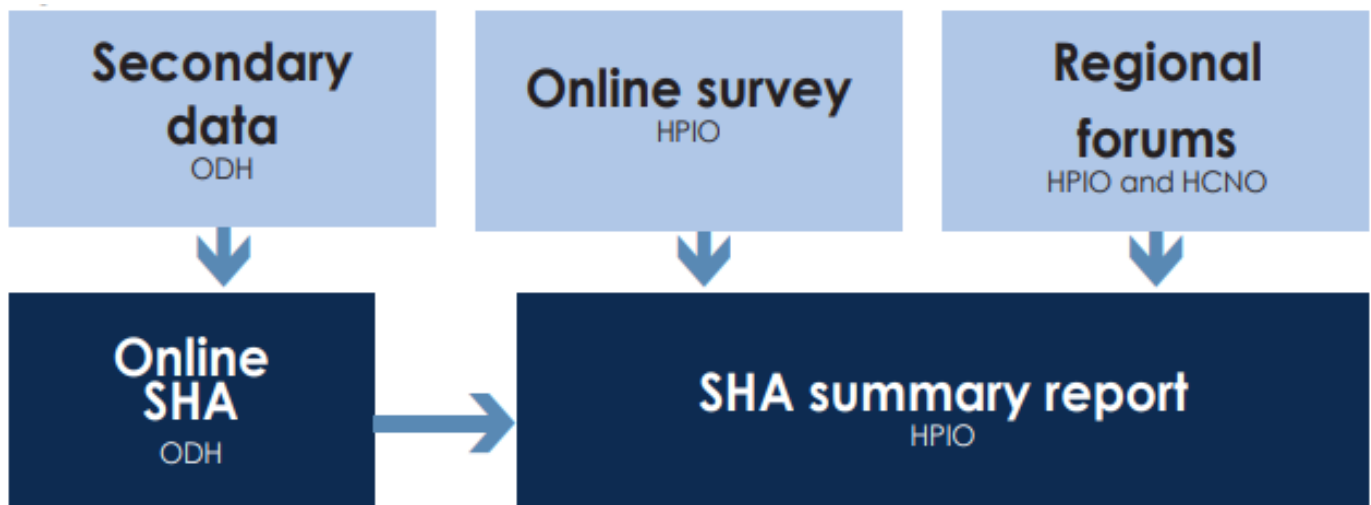
The 2019 Ohio State Health Assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, online surveys completed by over 300 stakeholders, and advisory and steering committee members who represented 13 state agencies, including sectors beyond health.

Similar to the 2019 Ohio SHA, the 2019 Sandusky 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 2019 Ohio SHA.**

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

To view the 2019 Ohio State Health Assessment, please visit: <https://odh.ohio.gov/wps/portal/gov/odh/explore-data-and-stats/interactive-applications/2019-Online-State-Health-Assessment>

FIGURE 1.1 | Components of the 2019 SHA

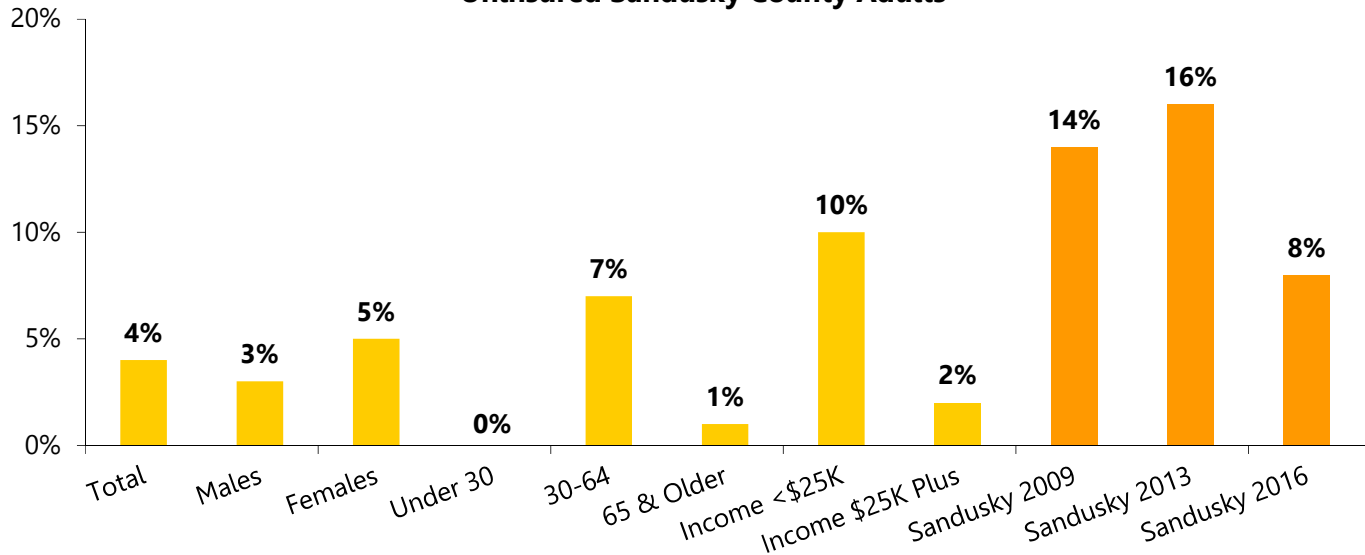


Data Summary | Healthcare Access

HEALTHCARE COVERAGE

Four percent (4%) of Sandusky County adults were without health care coverage. Those most likely to be uninsured were those with an income level under \$25,000 (10%).

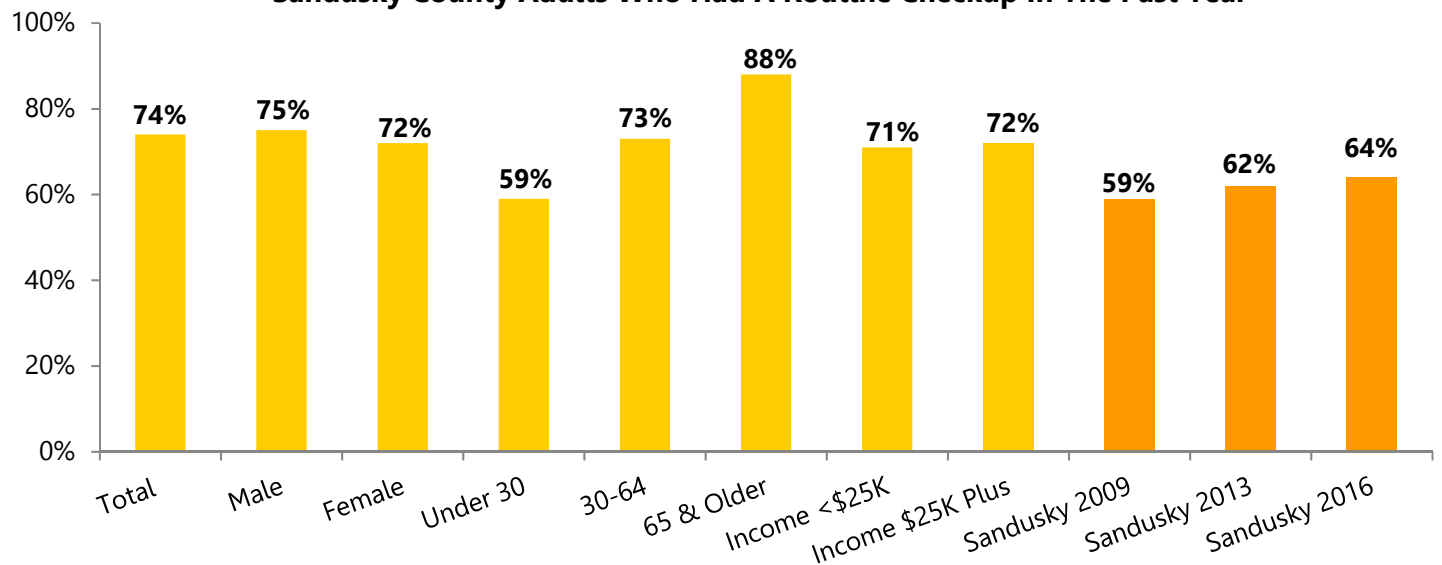
Uninsured Sandusky County Adults



ACCESS AND UTILIZATION

Nearly three-quarters (74%) of Sandusky County adults visited a doctor for a routine checkup in the past year. Ninety percent (90%) of adults indicated they had at least one person they thought of as their personal doctor or health care provider.

Sandusky County Adults Who Had A Routine Checkup In The Past Year



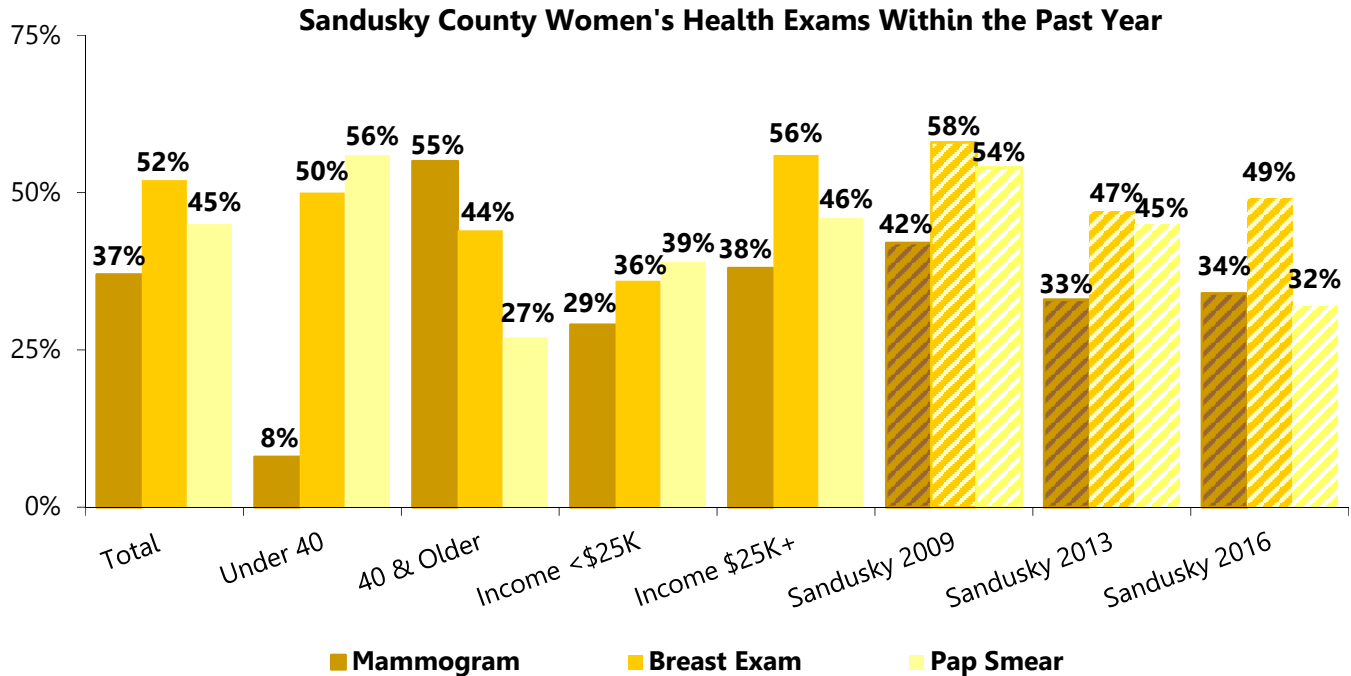
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

PREVENTIVE MEDICINE

More than half (52%) of Sandusky County adults had a flu vaccine during the past year. Nearly three-quarters (73%) of adults ages 65 and older had a pneumonia vaccination at some time in their life. Fifteen percent (15%) of adults were screened for skin cancer in the past year.

WOMEN'S HEALTH

Over half (55%) of women ages 40 and over had a mammogram in the past year. Forty-five percent (45%) of women had a clinical breast exam within the past year. Two-thirds (66%) of women ages 21-65 had a Pap smear in the past three years. Thirty-six percent (36%) of women were obese, 31% had high blood pressure, 27% had high blood cholesterol, and 19% were identified as smokers, all known risk factors for cardiovascular diseases.



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.

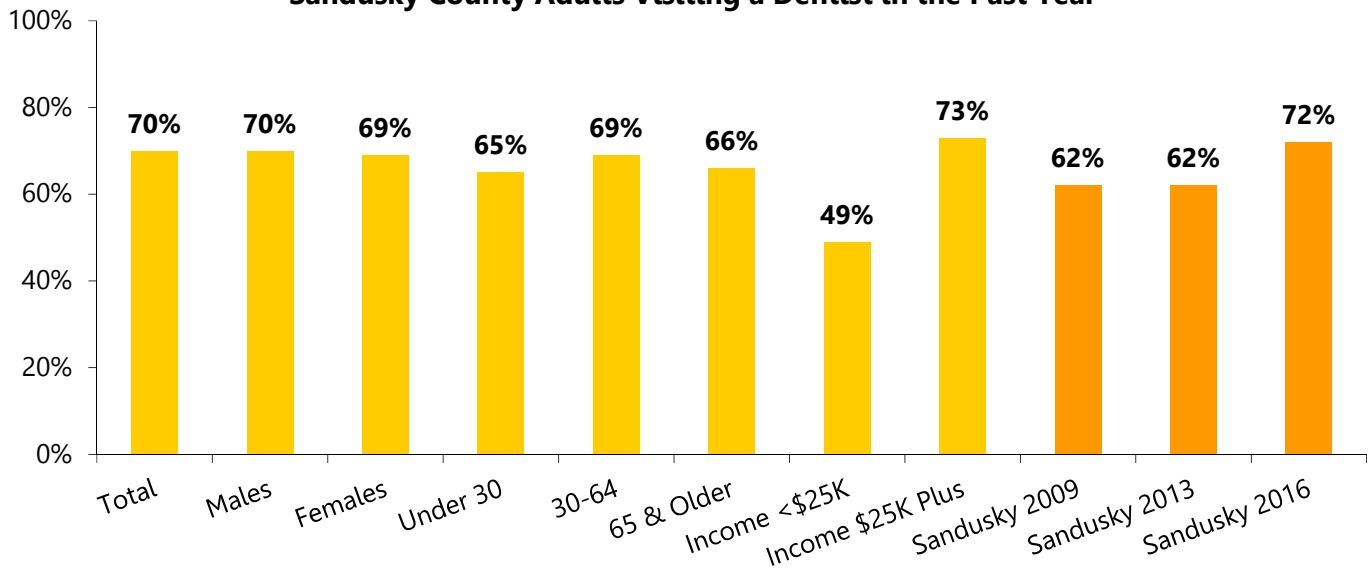
MEN'S HEALTH

Nearly one-third (31%) of Sandusky County males performed a self-testicular exam in the past year. Nearly half (47%) of men had high blood cholesterol, 44% had been diagnosed with high blood pressure, and 15% were identified as smokers, which, along with obesity (41%), are known risk factors for cardiovascular diseases.

ORAL HEALTH

Seventy percent (70%) of Sandusky County adults visited a dentist or dental clinic in the past year. Thirty percent (30%) of adults did not see a dentist in the past year due to cost.

Sandusky County Adults Visiting a Dentist in the Past Year

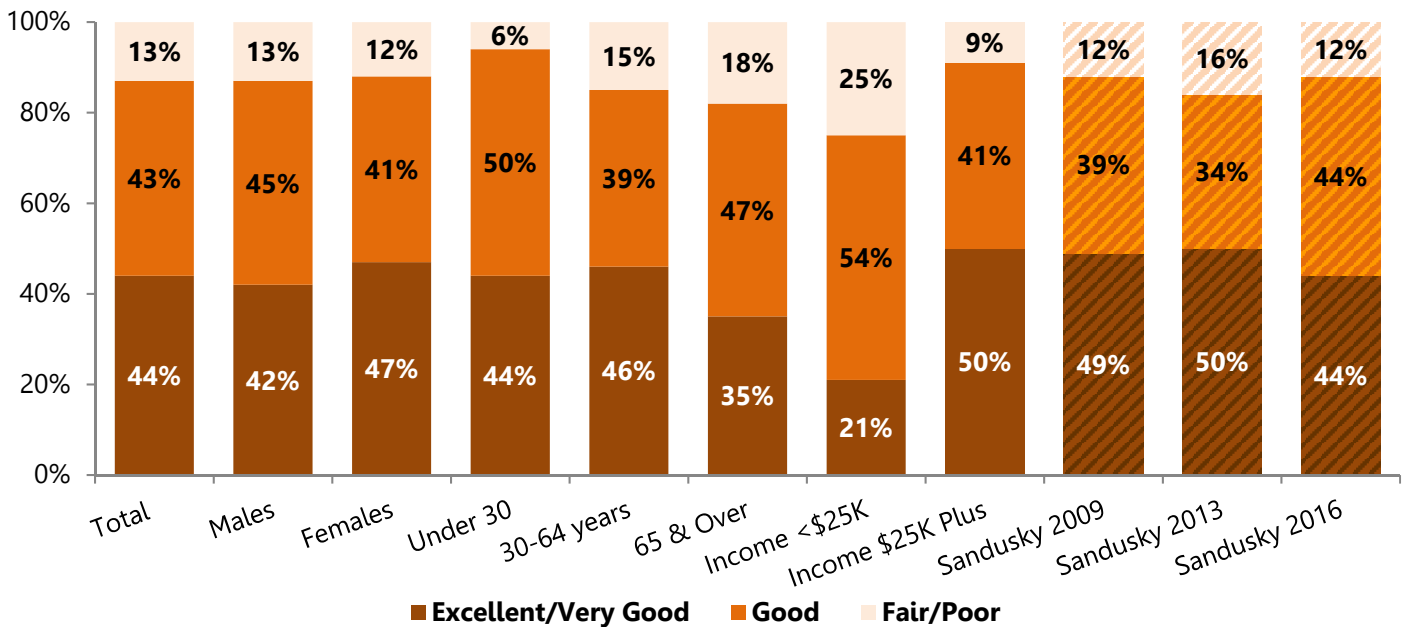


Data Summary | Health Behaviors

HEALTH STATUS PERCEPTIONS

Over two-fifths (44%) of Sandusky County adults rated their health status as excellent or very good. Conversely, 13% of adults described their health as fair or poor, increasing to 25% of those with incomes less than \$25,000.

Sandusky County Adult Health Perceptions*

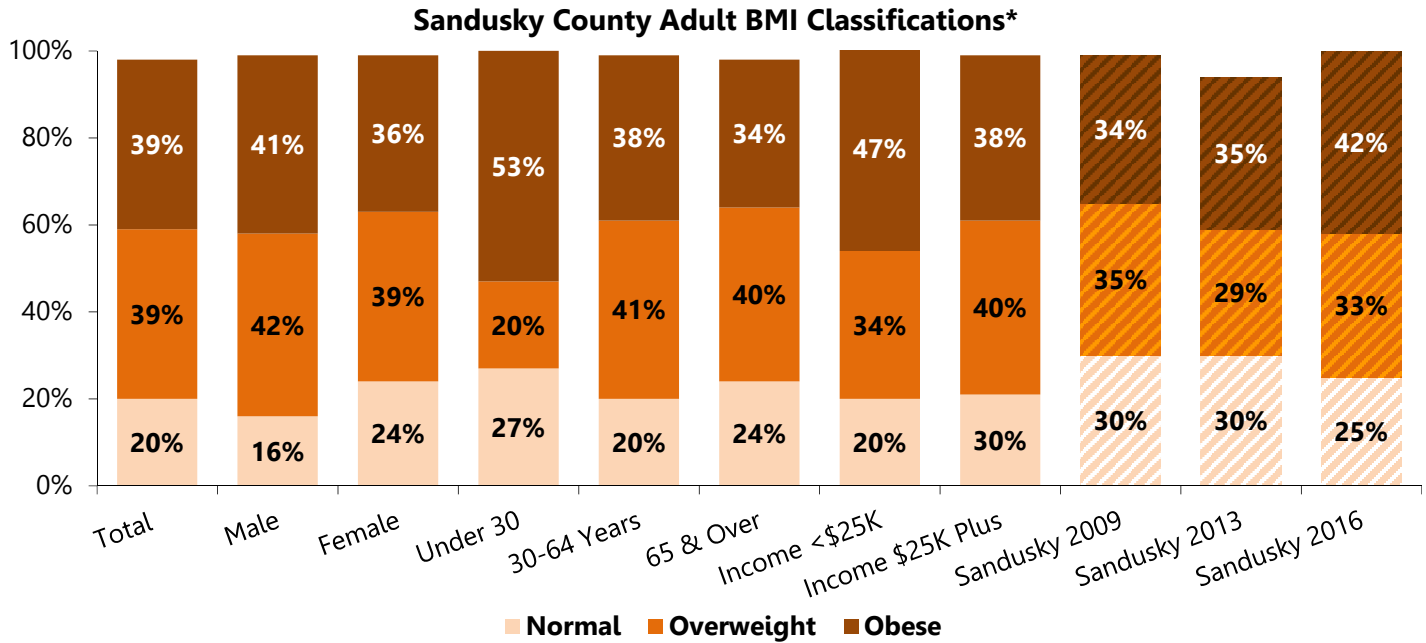


*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"

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.

ADULT WEIGHT STATUS

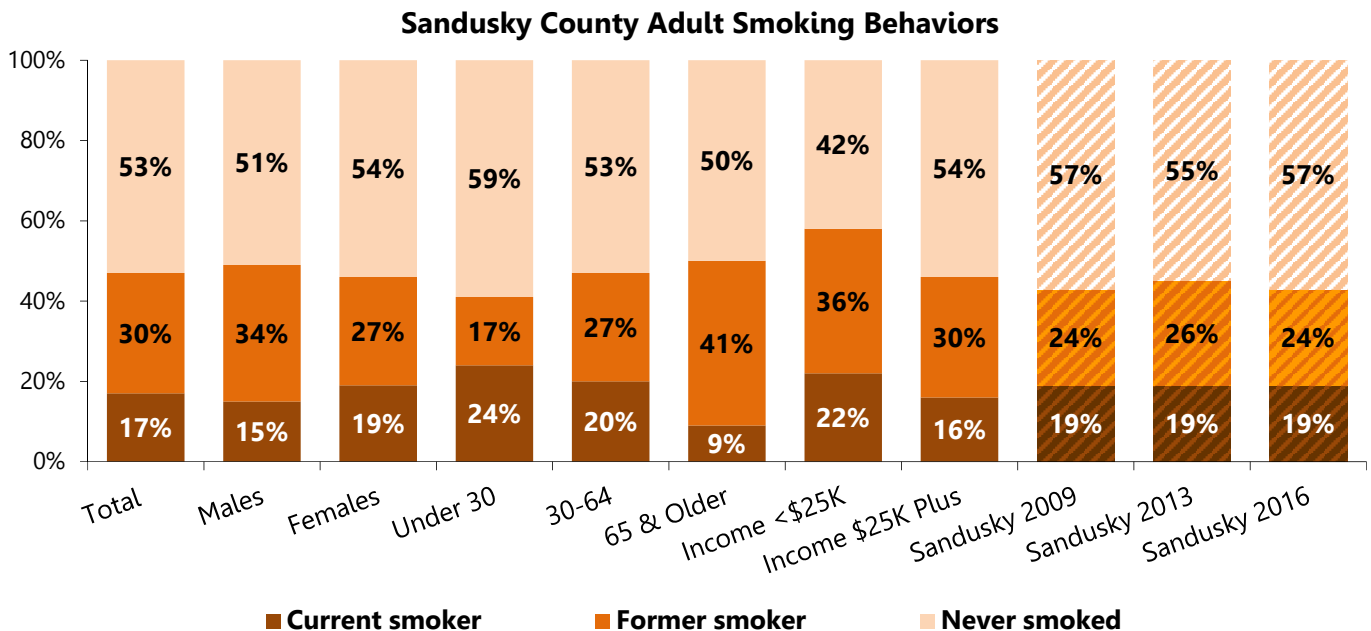
More than three-fourths (78%) of Sandusky County adults were overweight or obese based on body mass index (BMI). Over one-fifth (23%) of adults did not participate in any physical activity in the past week, including 1% who were unable to exercise.



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

ADULT TOBACCO USE

In 2019, 17% of Sandusky County adults were current smokers and 30% were considered former smokers. Six percent (6%) of adults were current electronic vapor product users.

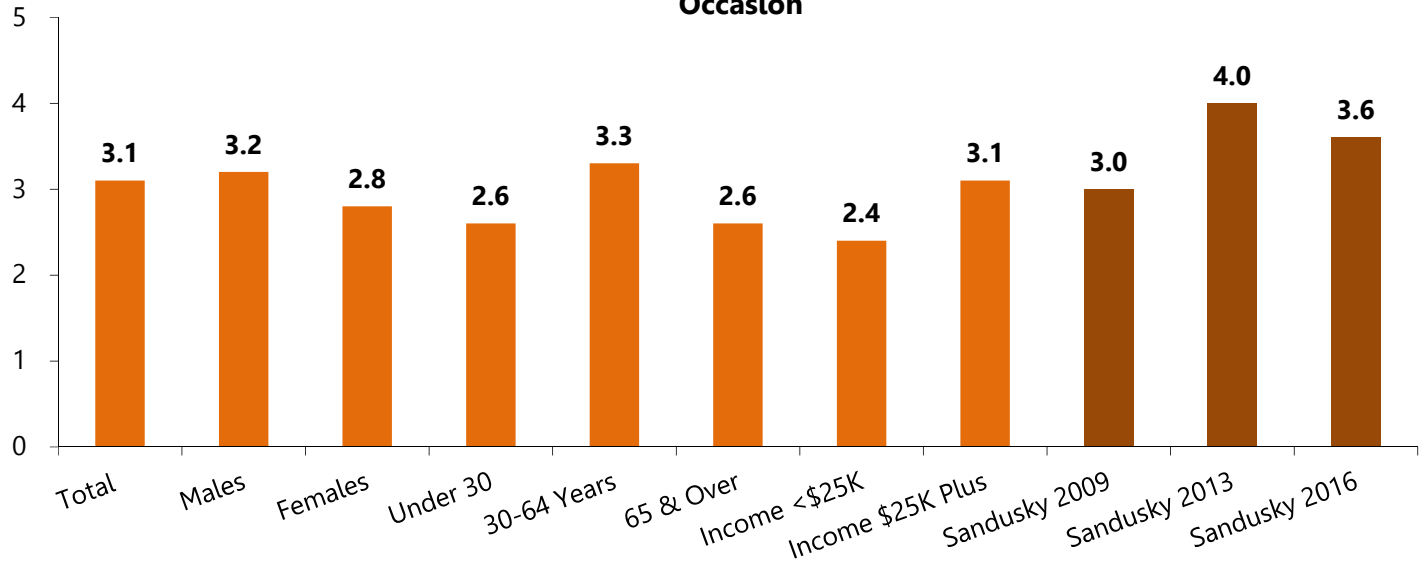


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT ALCOHOL CONSUMPTION

Fifty-six percent (56%) of Sandusky County adults had at least one alcoholic drink in the past month and would be considered current drinkers. Twenty-nine percent (29%) of all 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.

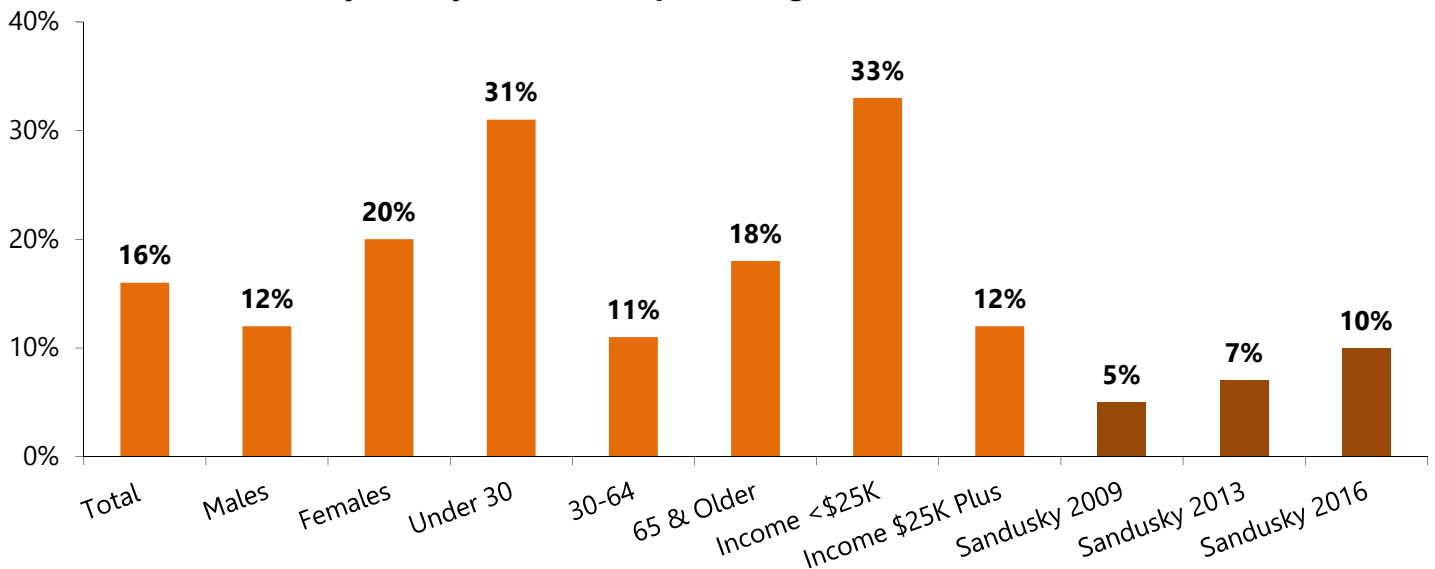
Sandusky County Adults Average Number of Drinks Consumed Per Drinking Occasion



ADULT DRUG USE

Six percent (6%) of Sandusky County adults had used recreational marijuana or hashish during the past 6 months. Sixteen percent (16%) 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.

Sandusky County Adult Prescription Drug Misuse in the Past Six Months

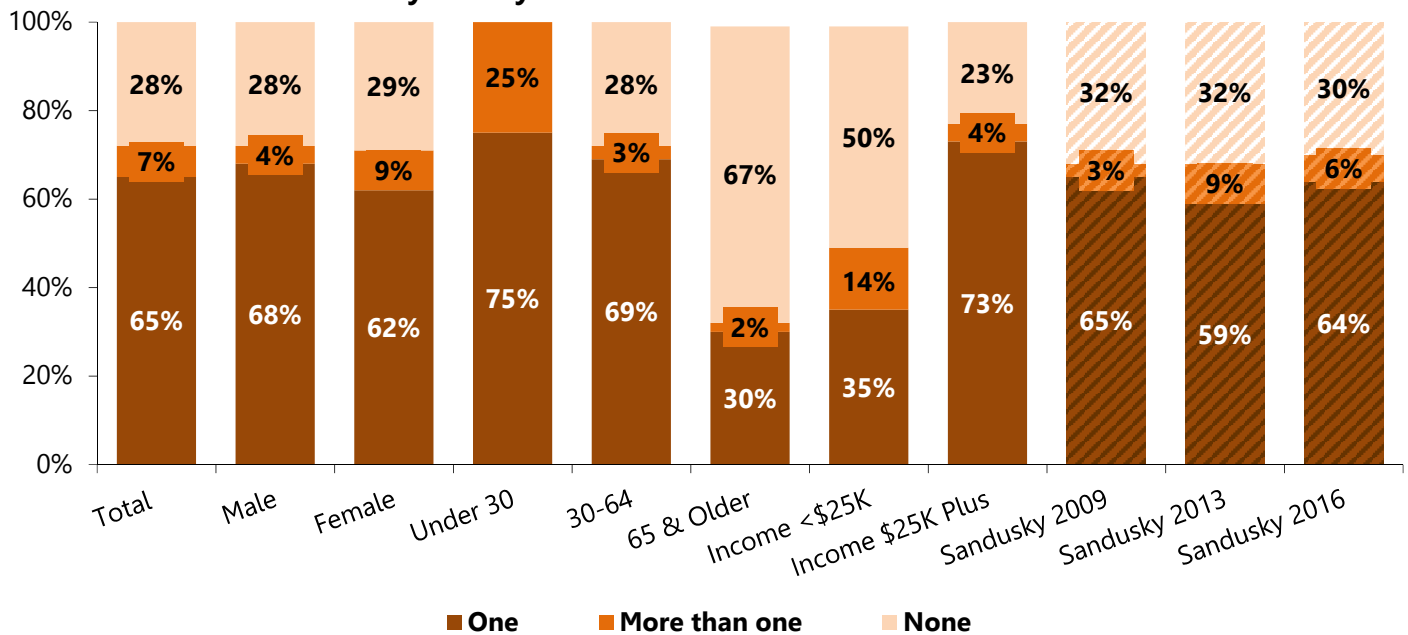


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT SEXUAL BEHAVIOR

Seventy-two percent (72%) of Sandusky County adults had sexual intercourse in the past year. Seven percent (7%) of adults had more than one sexual partner in the past year.

Sandusky County Number of Sexual Partners in the Past Year*

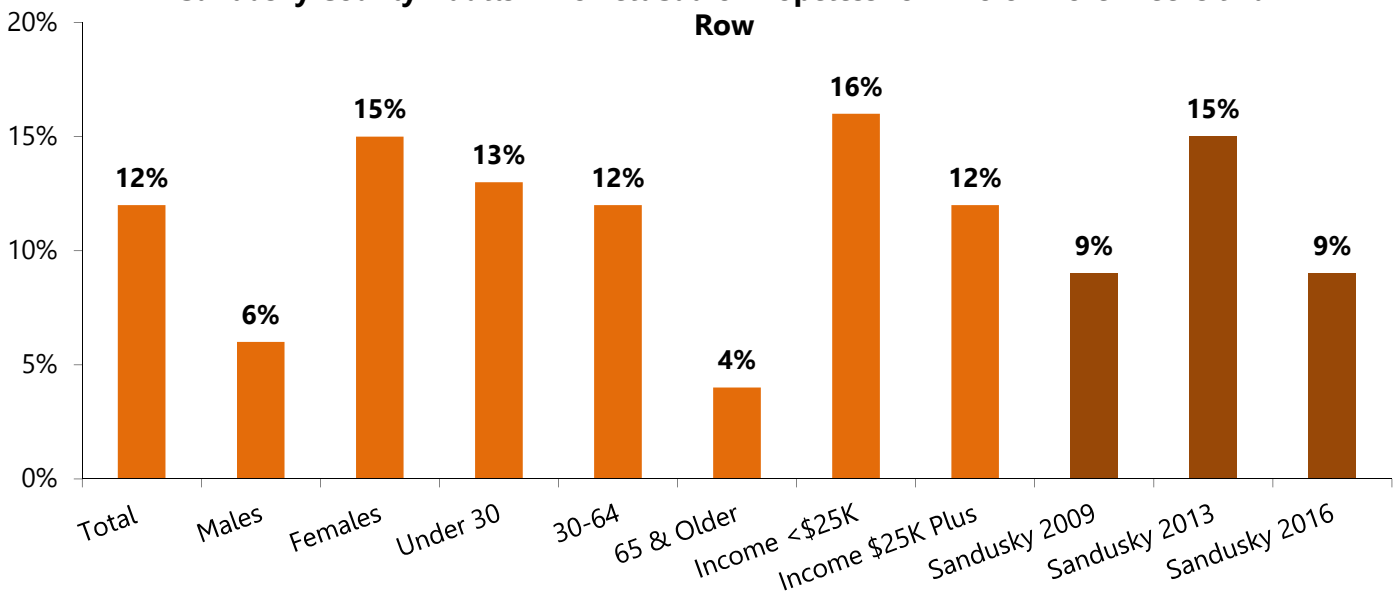


*Percentages may not equal 100% as some respondents answered, "don't know"

ADULT MENTAL HEALTH

In the past year, 12% of Sandusky 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. Six percent (6%) of Sandusky County adults considered attempting suicide, and 2% actually attempted suicide.

Sandusky County Adults Who Felt Sad or Hopeless for Two or More Weeks in a Row



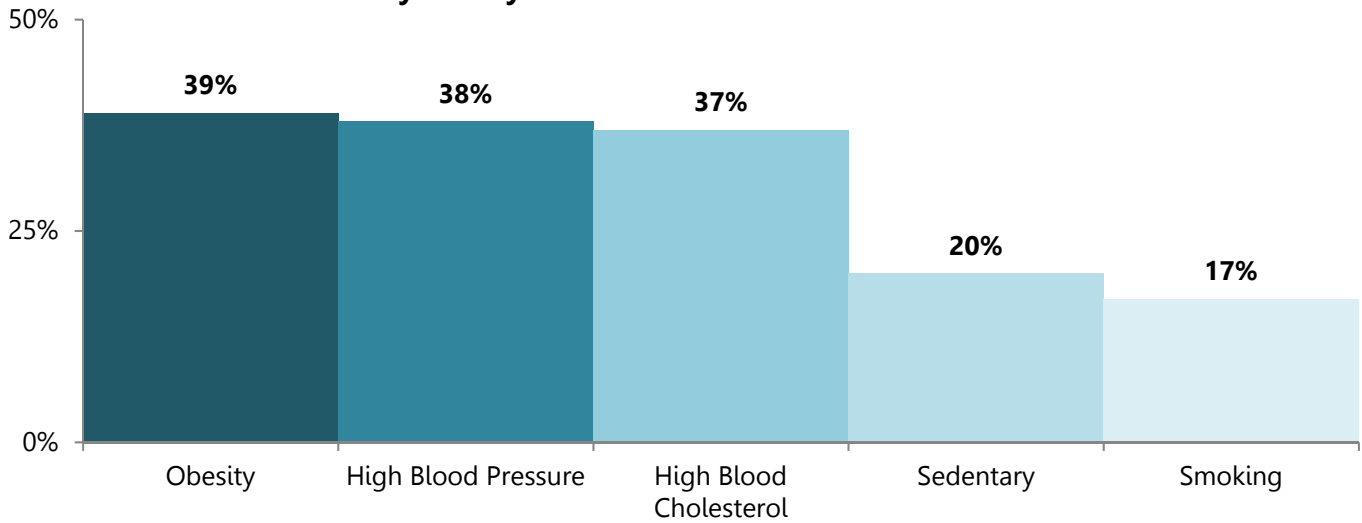
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Chronic Disease

CARDIOVASCULAR HEALTH

More than one-third (38%) of adults had high blood pressure and 37% had high blood cholesterol. Three percent (3%) of adults survived a heart attack and 3% survived a stroke.

Sandusky County Adults with Cardiovascular Disease Risk Factors



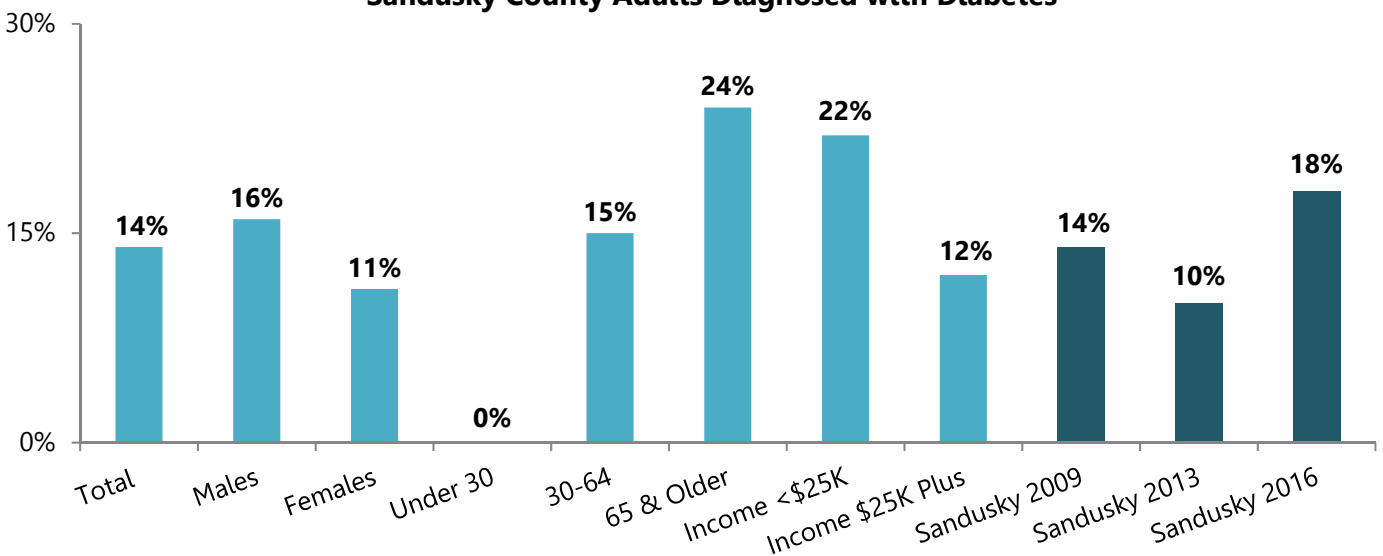
CANCER

Eleven percent (11%) of Sandusky County adults were diagnosed with cancer at some point in their lives, increasing to 31% of those over the age of 65.

DIABETES

Fourteen percent (14%) of Sandusky County adults had been diagnosed with diabetes. Eight percent (8%) of adults had been diagnosed with pre-diabetes or borderline diabetes.

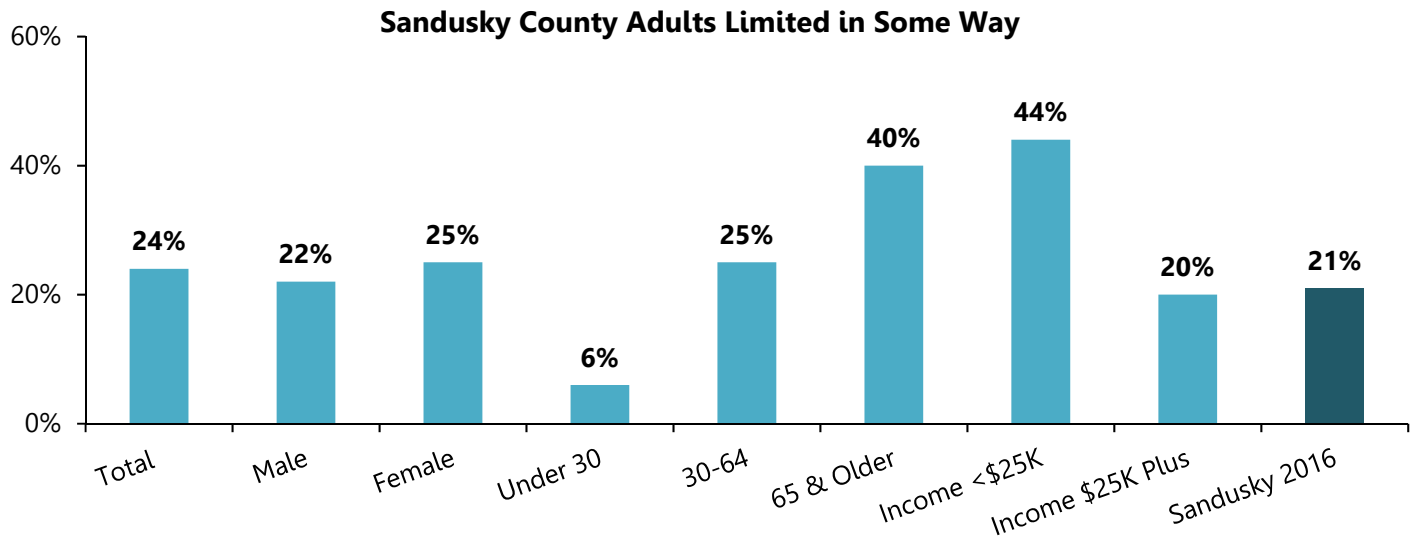
Sandusky County Adults Diagnosed with Diabetes



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

QUALITY OF LIFE

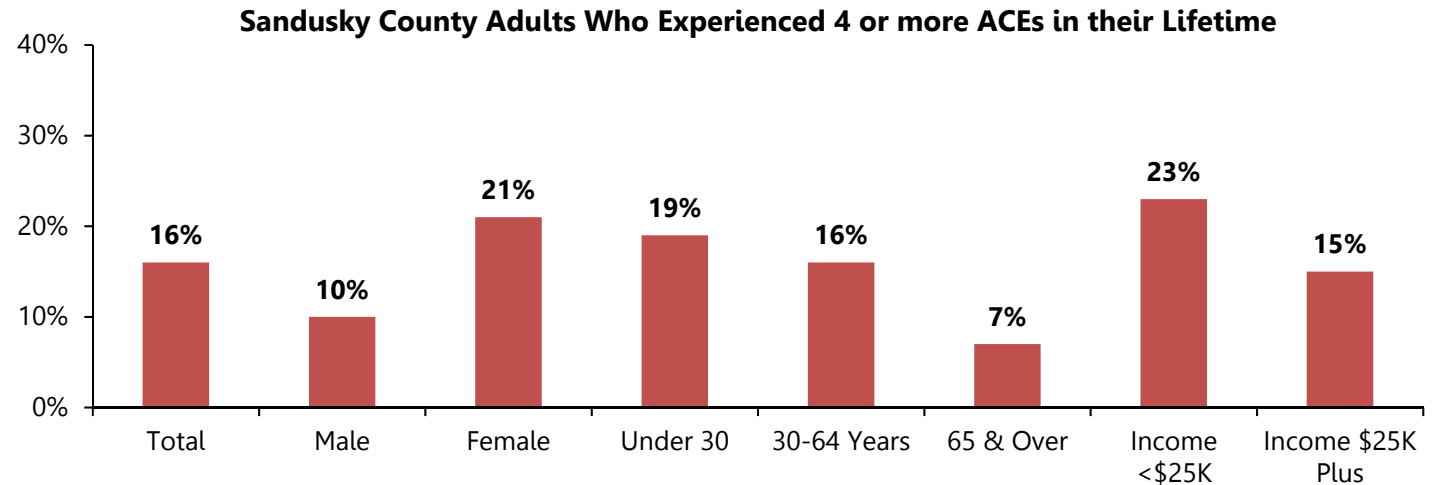
In 2019, 24% of Sandusky County adults were limited in some way because of a physical, mental or emotional problem. Seven percent (7%) of adults were responsible for providing regular care or assistance to a friend, family member or spouse with a health problem.



Data Summary | Social Conditions

ADULT SOCIAL DETERMINANTS OF HEALTH

In the past month, 15% of Sandusky County adults reported needing help meeting general daily needs such as food, clothes, shelter, or paying for utility bills. About one in six (16%) adults experienced four or more adverse childhood experiences (ACEs).



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.

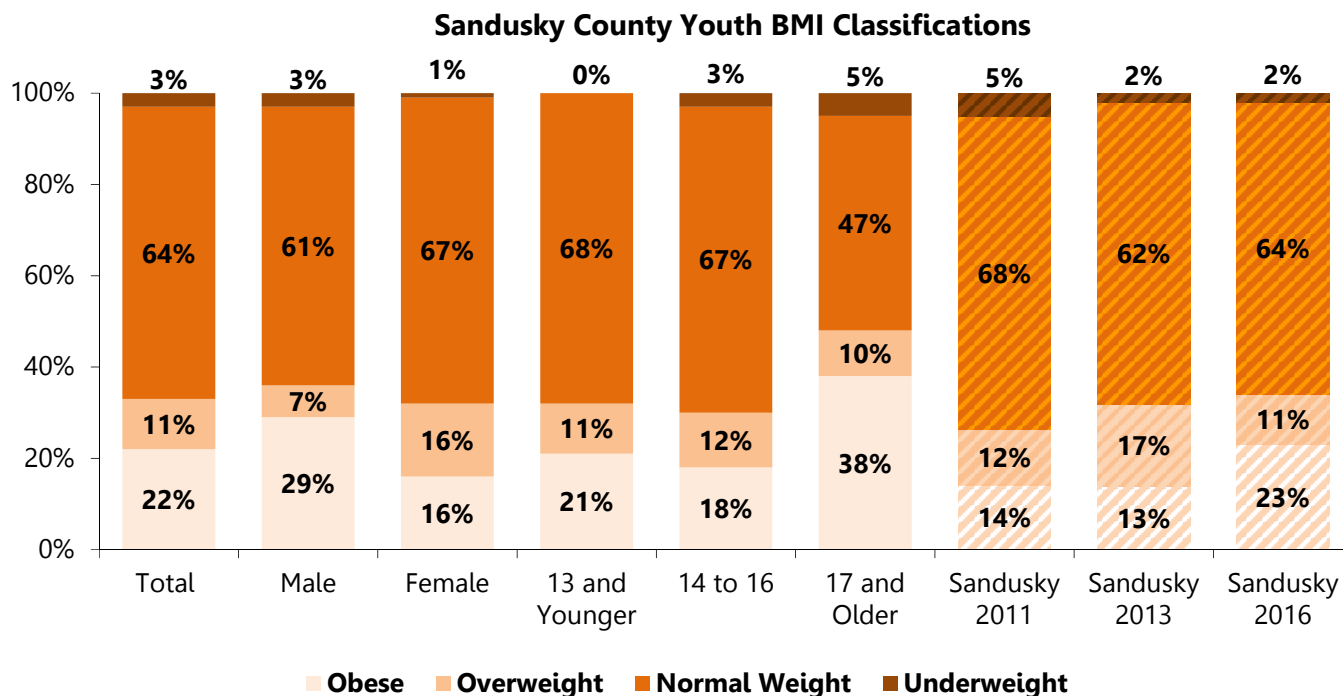
ENVIRONMENTAL HEALTH

Sandusky County adults indicated that insects (9%) and mold (8%) threatened their health in the past year.

Data Summary | Youth Health

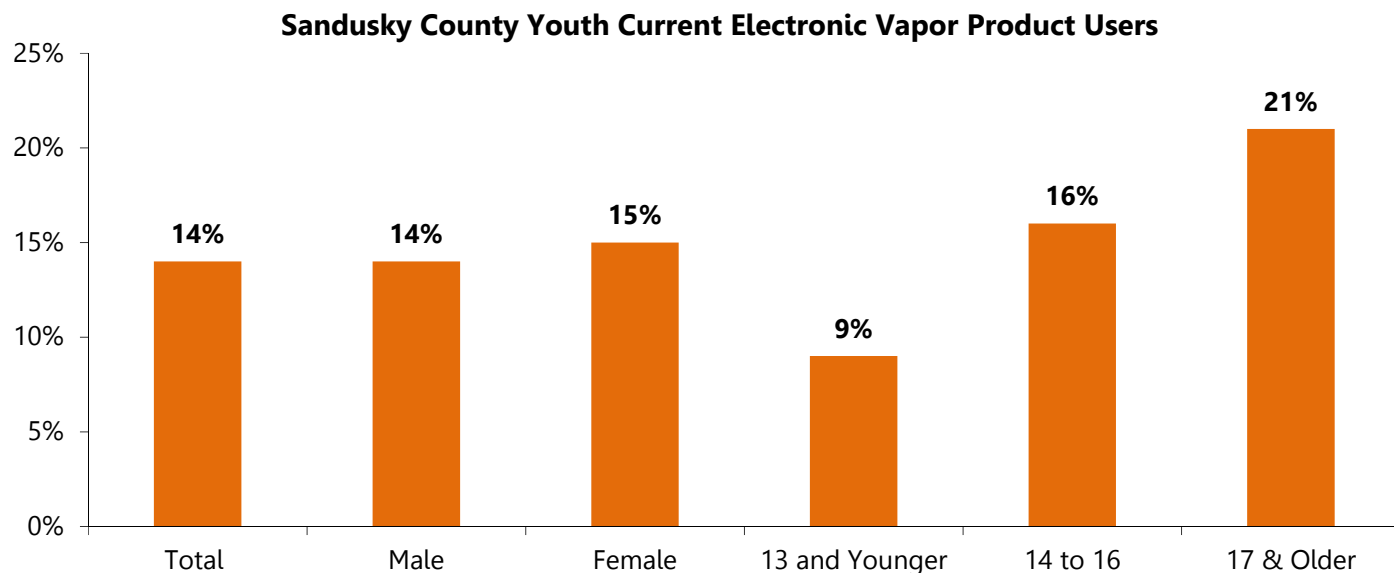
YOUTH WEIGHT STATUS

In 2019, 22% of Sandusky County youth were obese, according to body mass index (BMI) by age. When asked how they would describe their weight, 33% of Sandusky County youth reported that they were slightly or very overweight. Sixty-four percent (64%) of youth exercised for 60 minutes on 3 or more days per week.



YOUTH TOBACCO USE

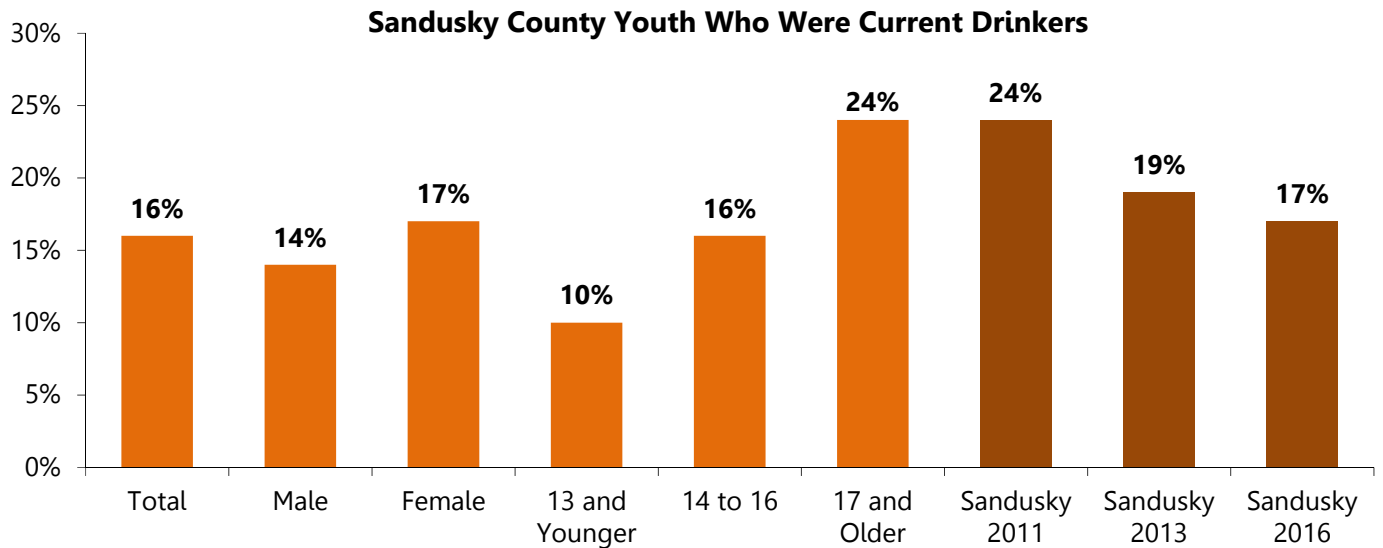
In 2019, 7% of Sandusky County youth were current smokers. Fourteen percent (14%) of youth used an electronic vapor product in the past 30 days and 17% of youth used an electronic vapor product in the past year. Of youth who had used electronic vapor products in the past 12 months, (60%) put e-liquid or e-juice with nicotine in them.



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.

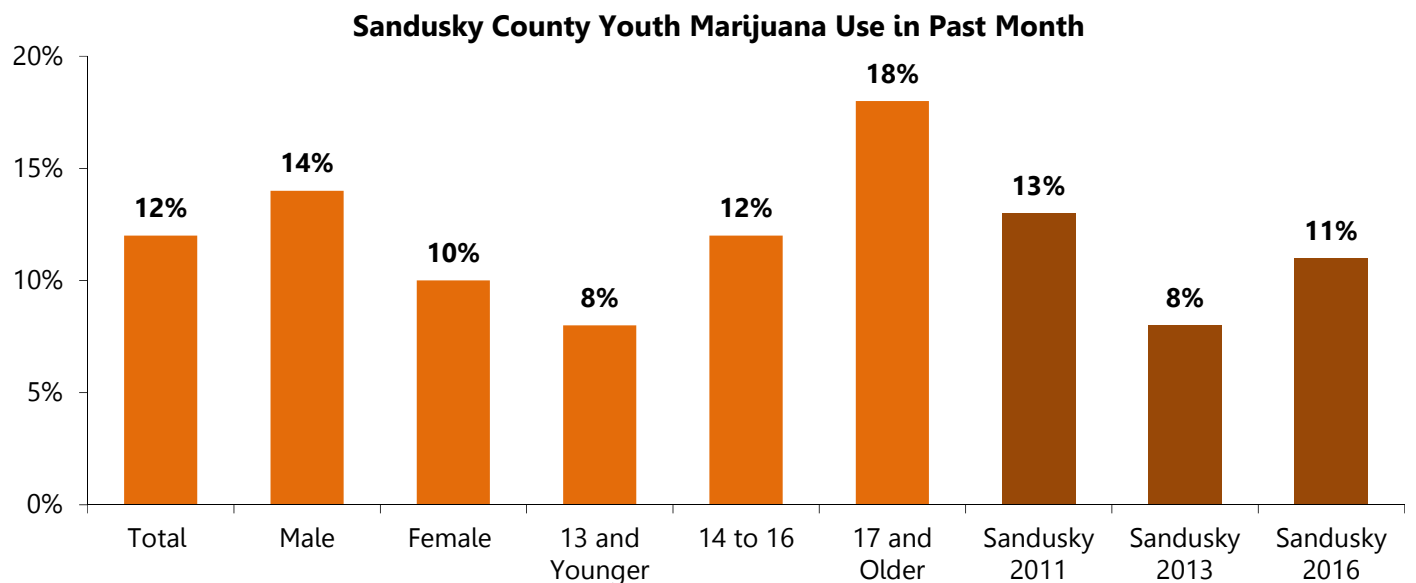
YOUTH ALCOHOL USE

In 2019, 49% of Sandusky County youth had at least one drink of alcohol in their life. Sixteen percent (16%) of youth had at least one drink in the past month, defining them as a current drinker. Of those who drank, 70% were defined as binge drinkers.



YOUTH DRUG USE

In 2019, 12% of Sandusky County youth had used marijuana at least once in the past 30 days. Five percent (5%) of youth used prescription drugs not prescribed for them in the past 30 days.

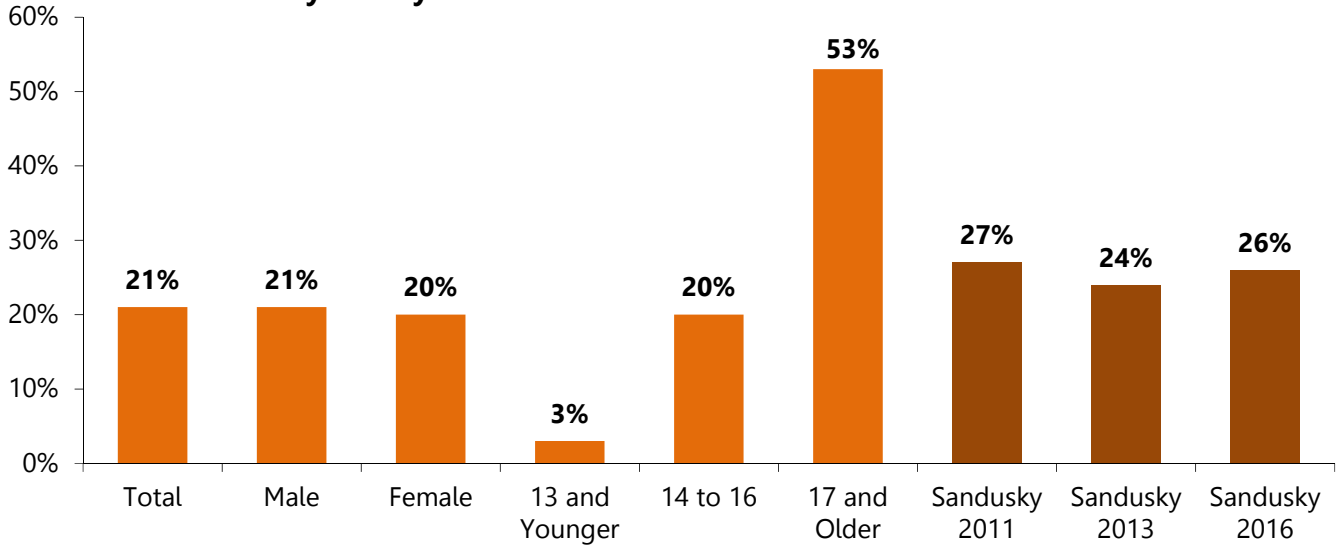


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

YOUTH SEXUAL BEHAVIOR

In 2019, 21% of Sandusky County youth reported having had sexual intercourse in their lifetime. Twenty-one percent (21%) of sexually active youth had four or more sexual partners. Nine percent (9%) of youth engaged in intercourse without a reliable method of protection, and 27% reported they were unsure if they used a reliable method.

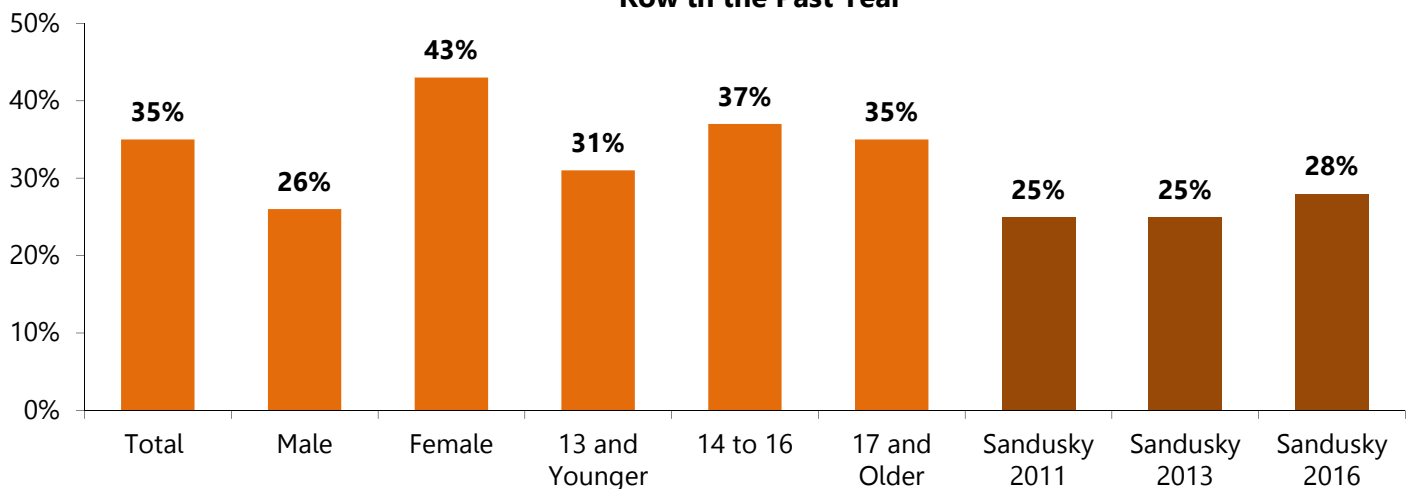
Sandusky County Youth Who Had Sexual Intercourse in their Lifetime



YOUTH MENTAL HEALTH

Thirty-five percent (35%) of Sandusky County 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. Forty-four percent (44%) of youth reported academic success caused them anxiety, stress, or depression.

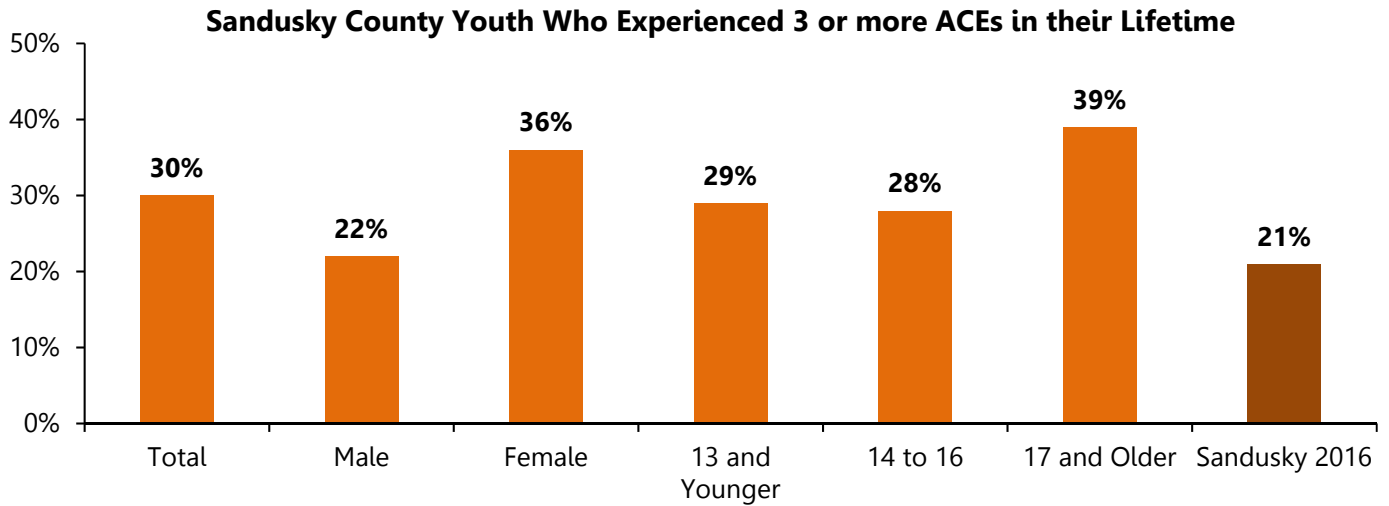
Sandusky County Youth Who Felt Sad or Hopeless for Two or More Weeks in a Row in the Past Year



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.

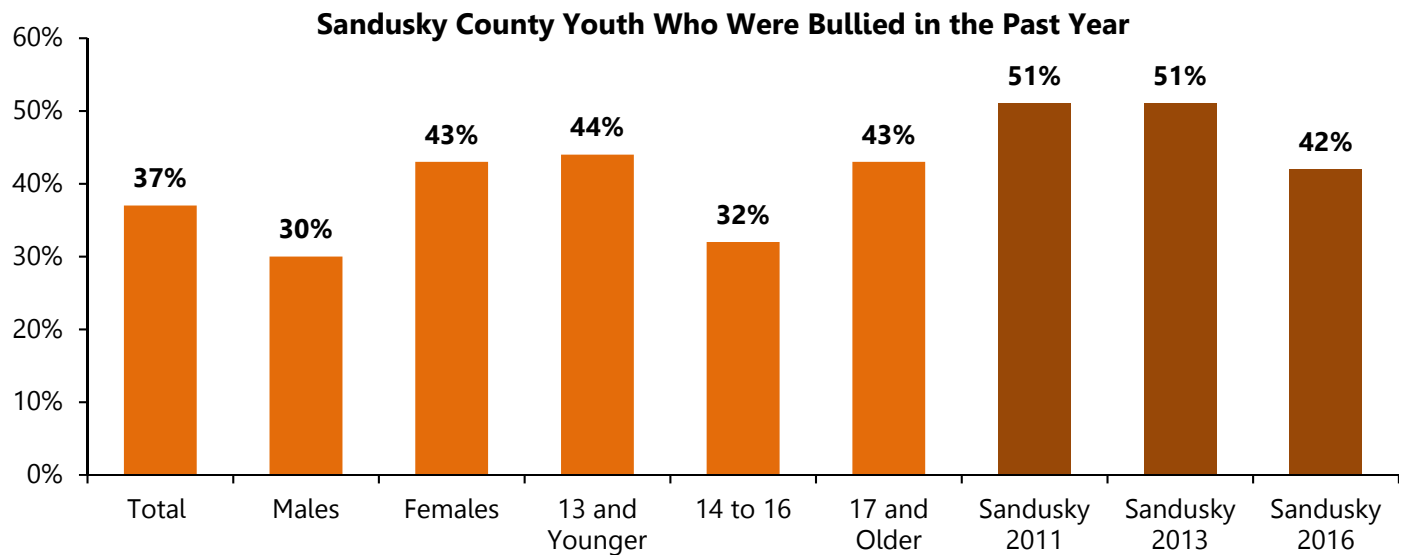
YOUTH SOCIAL DETERMINANTS OF HEALTH

Thirty percent (30%) of Sandusky County youth had three or more adverse childhood experiences (ACEs) in their lifetime. Eighty-four percent (84%) of youth participated in extracurricular activities. Sixty-six percent (66%) of youth had been to the doctor for a routine check-up in the past year.



VIOLENCE

Eight percent (8%) of Sandusky County youth carried a weapon (such as a gun, knife, or club) in the past month. Twenty percent (20%) of youth had been involved in a physical fight in the past year. Thirty-seven percent (37%) of youth had been bullied 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.

PERCEPTIONS

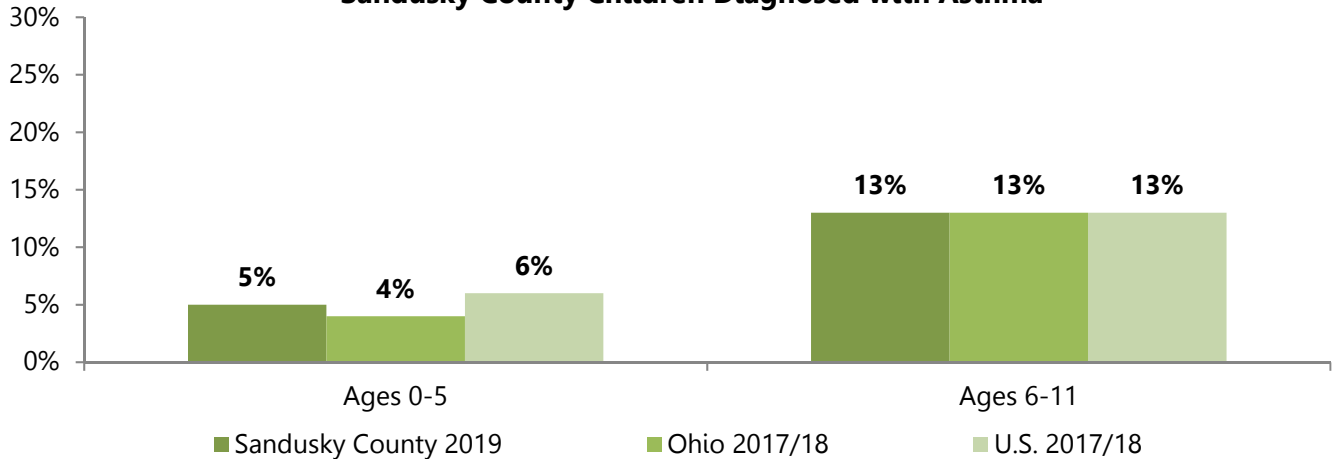
In 2019, 45% of Sandusky County youth thought that there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Forty-nine (49%) percent of youth thought there was great risk in harming themselves physically or in other ways if they used prescription drugs that were not prescribed for them. Twenty-nine percent (29%) of youth thought there was no risk in harming themselves physically or in other ways if they smoked marijuana once or twice a week.

Data Summary | Child Health

HEALTH AND FUNCTIONAL STATUS

In 2019, 94% of Sandusky County parents rated their child's health as excellent (58%) or very good (36%). Twenty percent (20%) of children were classified as obese by body mass index (BMI) calculations. More than three-quarters (78%) of Sandusky County parents had taken their child to the dentist in the past year.

Sandusky County Children Diagnosed with Asthma



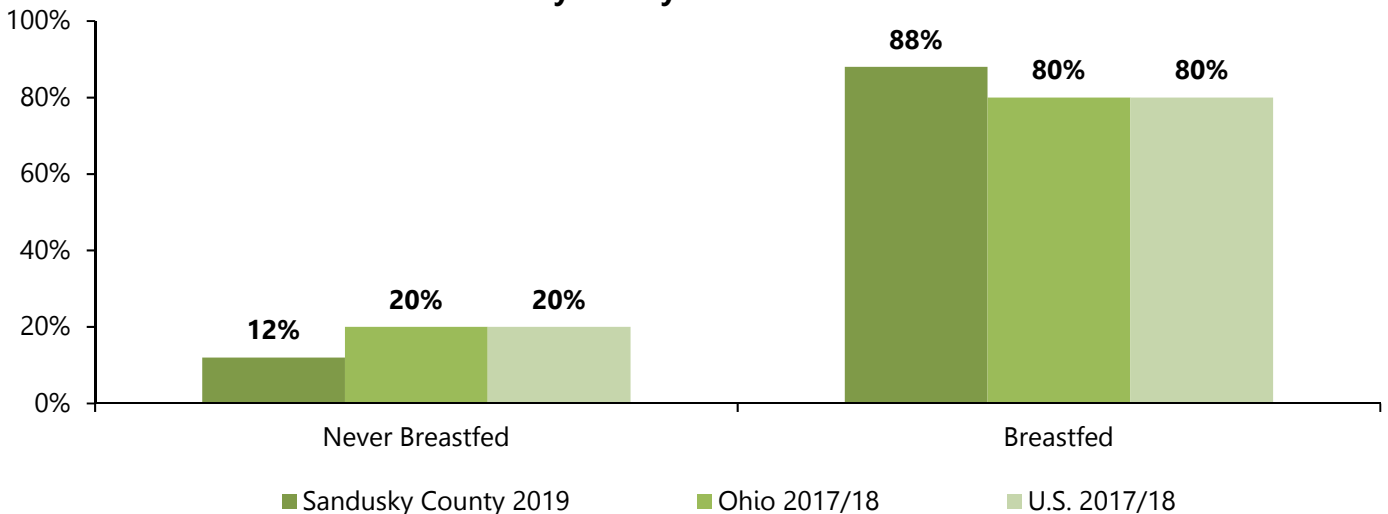
HEALTH CARE ACCESS

In 2019, 82% of children had one or more people they thought of as their child's personal doctor or nurse. Seventeen percent (17%) of parents reported their child did not get all of the prescription medications they needed in the past year. Eighty-nine percent (89%) of children had visited their health care provider for preventive care in the past year.

EARLY CHILDHOOD (0-5 YEARS OLD)

The following information was reported by parents of 0-5 year olds. Ninety-five percent (95%) of mothers got prenatal care within the first three months during their last pregnancy. Nineteen percent (19%) of mothers received WIC services during their last pregnancy. Eighty-four percent (84%) of parents put their child to sleep on his/her back. Twelve percent (12%) of mothers never breastfed their child.

Sandusky County Children Breastfed

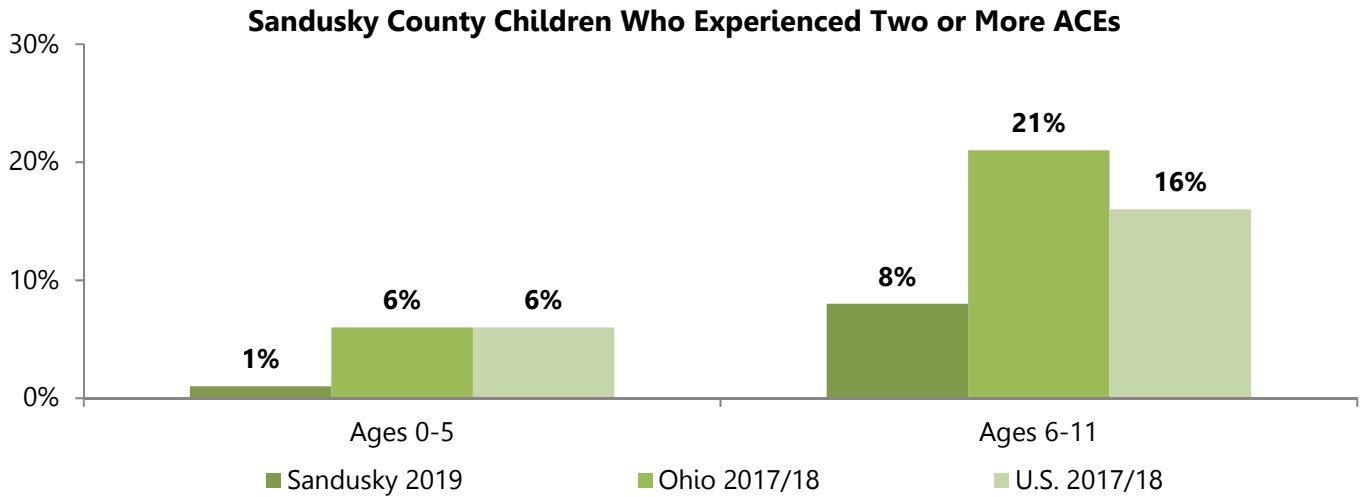


MIDDLE CHILDHOOD (6-11 YEARS OLD)

The following information was reported by Sandusky County parents of 6-11-year old's. Ninety percent (90%) of children participated in extracurricular activities at some point in the past year. Forty-seven percent (47%) of parents reported their child was bullied at some point in time in the past year.

FAMILY AND COMMUNITY CHARACTERISTICS



In 2019, 43% of parents reported that every family member who lived in their household ate a meal together every day of the week. Thirty-six percent (36%) of children never attended a religious service in the past month. One-fifth (20%) of children experienced one or more ACEs in their lifetime, increasing to 28% of those with incomes less than \$25,000.




PARENT HEALTH

In 2019, 73% of parents rated their health as excellent or very good, decreasing to 50% of parents with incomes less than \$25,000. In the past year, 46% of parents missed work due to their child's illness or injuries.

Adult Trend Summary






Adult Variables	Sandusky County 2001	Sandusky County 2005	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Healthcare Coverage								
Uninsured 	14%	7%	14%	16%	8%	4%	7%	11%
Access and Utilization								
Had one or more persons they thought of as their personal health care provider	N/A	N/A	N/A	N/A	88%	90%	80%	77%
Visited a doctor for a routine checkup (in the past year) 	N/A	64%	59%	62%	64%	74%	79%	77%
Preventive Medicine								
Had a pneumonia vaccination (age 65 and over)	N/A	N/A	66%	52%	65%	73%	74%	73%
Had a flu vaccine in the past year (age 65 and over)	N/A	N/A	N/A	76%	78%	77%	56%	55%
Ever had a shingles or zoster vaccine	N/A	N/A	N/A	7%	13%	22%	29%*	29%*
Women's Health								
Had a mammogram within the past two years (ages 40 and over)	72%	70%	68%	68%	69%	68%	74%	72%
Had a pap test in the past three years (ages 21-65)	N/A	78%#	66%#	67%#	71%#	66%	79%	80%
Had a clinical breast exam in the past two years (ages 40 and older)	N/A	72%	68%	66%	66%	59%	N/A	N/A
Oral Health								
Visited a dentist or a dental clinic (within the past year)	55%	57%	62%	62%	72%	70%	67%	68%

 Indicates alignment with the Ohio State Health Assessment (SHA)

*2017 BRFSS

#Pap smear was reported for women ages 19 and over

N/A – Not Available






Adult Variables	Sandusky County 2001	Sandusky County 2005	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Health Status Perceptions								
Rated general health as excellent or very good	49%	49%	49%	50%	44%	44%	49%	51%
Rated general health as fair or poor 	15%	15%	12%	16%	12%	13%	19%	18%
Rated mental health as not good on four or more days (in the past month)	N/A	21%	19%	22%	27%	30%	26%	24%
Average number of days that mental health was not good (in the past month) 	N/A	N/A	N/A	4.2	4.5	5.0	4.3*	3.8*
Rated physical health as not good on four or more days (in the past month)	N/A	21%	19%	22%	21%	20%	24%	23%
Average number of days that physical health was not good (in the past month) 	N/A	N/A	N/A	4.3	3.8	3.9	4.0*	3.7*
Weight Status								
Overweight	31%	36%	35%	29%	33%	39%	34%	35%
Obese 	33%	36%	34%	35%	42%	39%	34%	31%
Tobacco Use								
Current smoker (smoked on some or all days) 	36%	23%	19%	19%	19%	17%	21%	16%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	20%	25%	24%	26%	24%	30%	25%	25%
Tried to quit smoking (on at least one day in the past year)	N/A	54%	41%	60%	39%	60%	N/A	N/A
Current e-cigarette user (vaped on some or all days)	N/A	N/A	N/A	N/A	N/A	6%	5%*	5%*
Former e-cigarette user	N/A	N/A	N/A	N/A	N/A	15%	19%*	16%*
Alcohol Consumption								
Current drinker (had at least one drink of alcohol within the past month)	53%	33%	56%	51%	62%	56%	52%	54%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	20%	18%	21%	22%	29%	29%	16%	16%


 Indicates alignment with the Ohio State Health Assessment (SHA)

N/A – Not Available

*2017 BRFSS

*2016 BRFSS as compiled by 2019 County Health Rankings


Adult Variables	Sandusky County 2001	Sandusky County 2005	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Drug Use								
Used recreational marijuana or hashish in the past six months	7%	7%	7%	7%	5%	6%	N/A	N/A
Misused prescription drugs in the past six months	5%	5%	5%	7%	10%	16%	N/A	N/A
Used recreational drugs in the past six months	N/A	7%	7%	1%	2%	1%	N/A	N/A
Sexual Behavior								
Had more than one sexual partner in past year	N/A	6%	3%	9%	6%	7%	N/A	N/A
Ever been tested for HIV	N/A	N/A	25%	20%	23%	29%	N/A	N/A
Mental Health								
Felt sad or hopeless for two or more weeks in a row in the past year	N/A	9%	9%	15%	9%	12%	N/A	N/A
Seriously considered attempting suicide in the past year	3%	2%	2%	6%	1%	6%	N/A	N/A
Attempted suicide in the past year	N/A	N/A	0%	1%	0%	2%	N/A	N/A
Cardiovascular Disease								
Ever diagnosed with angina or coronary heart disease 	N/A	7%	4%	8%	4%	4%	5%	4%
Ever diagnosed with a heart attack or myocardial infarction 	4%	5%	4%	5%	6%	3%	6%	4%
Ever diagnosed with a stroke	4%	3%	4%	3%	2%	3%	4%	3%
Had been told they had high blood pressure 	25%	37%	34%	31%	33%	38%	35%*	33%*
Had been told their blood cholesterol was high	22%	33%	27%	35%	34%	37%	33%*	33%*
Had their blood cholesterol checked within the last five years	N/A	N/A	N/A	80%	75%	84%	85%*	87%*
Diabetes								
Ever been told by a doctor they have diabetes (not pregnancy-related) 	11%	11%	12%	10%	18%	14%	12%	11%
Had been diagnosed with pre-diabetes or borderline diabetes 	N/A	N/A	N/A	6%	N/A	8%	2%	2%


 Indicates alignment with the Ohio State Health Assessment (SHA)



N/A – Not Available


*2017 BRFSS

Youth Trend Summary

Youth Variables	Sandusky County 2009 (6 th -12 th)	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Weight Status							
Obese 	17%	14%	13%	23%	22%	23%	15%
Overweight	13%	12%	17%	11%	11%	11%	16%
Described themselves as slightly or very overweight	29%	27%	29%	33%	33%	33%	32%
Trying to lose weight	47%	52%	48%	48%	51%	48%	47%
Exercised to lose weight (in the past 30 days)	44%	32%	50%	42%	46%	43%	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight (in the past 30 days)	18%	12%	31%	25%	31%	31%	N/A
Went without eating for 24 hours or more (in the past 30 days)	2%	2%	9%	4%	8%	7%	N/A
Took diet pills, powders, or liquids without a doctor's advice (in the past 30 days)	1%	0%	3%	1%	2%	3%	N/A
Vomited or took laxatives (in the past 30 days)	2%	0%	2%	1%	1%	2%	N/A
Physically active at least 60 minutes per day on every day in past week	N/A	62%	69%	30%	28%	27%	26%
Physically active at least 60 minutes per day on five or more days in past week	N/A	38%	43%	49%	47%	46%	46%
Did not participate in at least 60 minutes of physical activity on any day in past week	10%	8%	12%	13%	18%	17%	15%
Watched TV three or more hours per day (on an average school day)	40%	39%	27%	24%	19%	16%	21%

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

Youth Variables	Sandusky County 2009 (6 th -12 th)	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Tobacco Use							
Current smoker (smoked on at least 1 day during the past 30 days) 	15%	13%	11%	7%	7%	8%	9%
First tried cigarette smoking before age 13 years (even one or two puffs)	N/A	N/A	N/A	6%	7%	4%	10%
Currently used an electronic vapor product (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pends, e-hookahs, and hookah pens on at least 1 day during the past 30 days) 	N/A	N/A	N/A	N/A	14%	16%	13%
Used electronic vapor products frequently (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on 20 or more days during the past 30 days)	N/A	N/A	N/A	N/A	3%	4%	3%
Used electronic vapor products daily (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on all 30 days during the past 30 days)	N/A	N/A	N/A	N/A	3%	3%	2%
Alcohol Consumption							
Ever drank alcohol (at least one drink of alcohol on at least 1 day during their life)	53%	46%	43%	40%	49%	56%	60%
Current Drinker (at least one drink of alcohol on at least 1 day during the past 30 days)	27%	24%	19%	17%	16%	19%	30%
Binge drinker (drank 5 or more drinks within a couple of hours on at least 1 day during the past 30 days)	15%	13%	13%	7%	11%	14%	14%
Drank for the first time before age 13 (of all youth)	N/A	N/A	25%	12%	17%	12%	16%
Obtained the alcohol they drank by someone giving it to them (of current drinkers)	N/A	N/A	58%	41%	39%	34%	44%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on 1 or more occasion during the past 30 days)	24%	20%	20%	16%	17%	14%	17%
Drove when they had been drinking alcohol (in a car or vehicle, 1 or more times during the 30 days before the survey, among youth who had driven a car or other vehicle)	5%	4%	6%	7%	3%	4%	6%

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


Youth Variables	Sandusky County 2009 (6 th -12 th)	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Drug Use							
Used marijuana (in the past month)	13%	13%	8%	11%	12%	13%	20%
Ever used methamphetamines (in their lifetime)	2%	1%	1%	0%	1%	1%	3%
Ever used cocaine (in their lifetime)	2%	3%	4%	1%	1%	2%	5%
Ever used heroin (in their lifetime)	2%	<1%	2%	0%	<1%	1%	2%
Ever used inhalants (in their lifetime)	11%	10%	10%	5%	6%	5%	6%
Ever used ecstasy (also called MDMA in their lifetime)	6%	5%	3%	1%	1%	2%	4%
Misused medications that were not prescribed to them or took more to get high and/or feel more alert (in the past month)	10%	12%	9%	6%	4%	4%	N/A
Ever took steroids without a doctor's prescription (in their lifetime)	3%	N/A	1%	1%	1%	2%	3%
Were offered, sold, or given an illegal drug on school property (in the past 12 months)	12%	7%	6%	4%	5%	4%	20%
Sexual Behavior							
Had sexual intercourse (in their lifetime)	31%	27%	24%	26%	21%	28%	40%
Had sexual intercourse with four or more persons (of all youth during their life)	6%	15%	6%	7%	6%	7%	10%
Had sexual intercourse before the age 13 (for the first time of all youth)	10%	13%	4%	3%	4%	3%	3%
Used a condom (during last sexual intercourse)	47%	69%	69%	59%	46%	54%	54%
Used birth control pills (during last sexual intercourse)	14%	36%	33%	29%	19%	22%	21%
Used an IUD (during last sexual intercourse)	N/A	N/A	N/A	2%	1%	7%	4%
Used a shot, patch or birth control ring (during last sexual intercourse)	N/A	8%	N/A	7%	<1%	6%	5%
Did not use any method to prevent pregnancy (during last sexual intercourse)	17%	N/A	8%	7%	9%	7%	14%


N/A – Not Available

Youth Variables	Sandusky County 2009 (6 th -12 th)	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Mental Health							
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 12 months)	24%	25%	25%	28%	35%	35%	32%
Made a plan to attempt suicide (in the past 12 months)	9%	12%	13%	12%	15%	13%	17%
Attempted suicide (in the past 12 months)	4%	6%	8%	7%	10%	8%	7%
Social Determinants of Health							
Visited a doctor for a routine checkup in the past year	N/A	67%	73%	64%	64%	67%	N/A
Visited a dentist in the past year (for a check-up, exam, teeth cleaning, or other dental work)	N/A	74%	74%	66%	71%	73%	N/A
Violence							
Carried a weapon (in the past 30 days)	11%	13%	14%	6%	8%	9%	16%
Carried a weapon on school property (in the past 30 days)	2%	1%	4%	1%	2%	1%	4%
Threatened or injured with a weapon on school property (in the past 12 months)	5%	6%	7%	8%	11%	7%	6%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)	7%	6%	5%	6%	6%	4%	7%
Bullied (in past year)	54%	51%	51%	42%	37%	33%	N/A
Bullied on school property (in past year)	N/A	N/A	36%	27%	26%	21%	19%
Electronically bullied (in past year)	N/A	11%	13%	15%	12%	12%	15%

N/A – Not Available

Child 0-5 Trend Summary

Child 0-5 Variables	Sandusky County 2010 Ages 0-5	Sandusky County 2013 Ages 0-5	Sandusky County 2016 Ages 0-5	Sandusky County 2019 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Health and Functional Status						
Rated health as excellent or very good	85%	89%	97%	92%	92%	93%
Dental care visit (in the past year)	56%	46%	59%	45%	51%**	61%**
Diagnosed with asthma 	12%	10%	7%	5%	4%	6%
Diagnosed with diabetes	0%	1%	0%	1%	N/A	<1%
Diagnosed with ADHD/ADD	2%	1%	1%	1%	1%*	2%*
Diagnosed with behavioral or conduct problems	3%	2%	3%	4%	3%*	5%*
Diagnosed with epilepsy or a seizure disorder	2%	1%	1%	1%	N/A	1%
Diagnosed with a brain injury, concussion, or head injury	3%	1%	1%	0%	N/A	1%
Diagnosed with depression	N/A	0%	0%	0%	0%*	<1%*
Diagnosed with cerebral palsy	N/A	0%	1%	0%	N/A	<1%
Diagnosed with anxiety problems	N/A	1%	0%	3%	1%*	2%*
Diagnosed with intellectual disability/mental retardation	N/A	1%	5%	0%	N/A	1%*
Diagnosed with learning disability	N/A	4%	5%	3%	1%*	2%*
Diagnosed with speech or language disorder	N/A	7%	8%	9%	6%*	10%*
Child had one or more health conditions	N/A	9%	17%	13%	N/A	N/A
Healthcare Access						
Had public insurance	24%	19%	22%	18%	32%	33%
Been to doctor for preventive care (in the past year)	88%	91%	96%	92%	92% [‡]	89% [‡]
Had a personal doctor or nurse	87%	86%	84%	89%	72%	72%
Two or more visits to the ER (in the past year)	13%	11%	6%	8%	5%	6%

 Indicates alignment with the Ohio State Health Assessment (SHA)

[‡]2016/17 NSCH data

*Ages 3-5


**Ages 1-5


N/A – Not Available

Child 0-5 Variables	Sandusky County 2010 Ages 0-5	Sandusky County 2013 Ages 0-5	Sandusky County 2016 Ages 0-5	Sandusky County 2019 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Early Childhood (Ages 0-5)						
Never breastfed their child	28%	21%	26%	12%	20%	20%
Parent or family members read to child every day (in the past week)	42% [±]	20% [±]	13% [±]	32%	44%	37%
Family and Community Characteristics						
Family eats a meal together every day of the week	41%	40%	33%	51%	57%	54%
Child never attends religious services	38%	39%	50%	42%	N/A	N/A
Someone living in the household uses cigarettes, cigars, or pipe tobacco	28%	31%	18%	15%	18%	14%
Two or more adverse childhood experiences (ACEs)	N/A	N/A	N/A	1%	6%	6%
Parent Health						
Mother's mental or emotional health is fair/poor	N/A	N/A	N/A	12%	9%	5%
Father's mental or emotional health is fair/poor	N/A	N/A	N/A	6%	7%	3%

[±] Only included parent read to child
N/A – Not Available

Child 6-11 Trend Summary

Child 6-11 Variables	Sandusky County 2010 Ages 6-11	Sandusky County 2013 Ages 6-11	Sandusky County 2016 Ages 6-11	Sandusky County 2019 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Health and Functional Status						
Rated health as excellent or very good	83%	89%	96%	95%	89%	90%
Dental care visit (in the past year)	82%	91%	89%	94%	90%	90%
Diagnosed with asthma 	20%	15%	17%	13%	13%	13%
Diagnosed with diabetes	<1%	0%	0%	1%	N/A	<1%
Diagnosed with ADHD/ADD	9%	8%	9%	10%	14%	10%
Diagnosed with behavioral or conduct problems	7%	5%	4%	5%	13%	10%
Diagnosed with epilepsy or a seizure disorder	2%	1%	1%	1%	N/A	1%
Diagnosed with a brain injury, concussion, or head injury	2%	3%	4%	1%	N/A	3%
Diagnosed with depression	3%	1%	1%	2%	1%	2%
Diagnosed with cerebral palsy	N/A	1%	1%	0%	N/A	<1%
Diagnosed with anxiety problems	N/A	5%	7%	7%	9%	9%
Diagnosed with intellectual disability/mental retardation	N/A	2%	1%	0%	N/A	2%
Diagnosed with learning disability	N/A	6%	5%	5%	11%	9%
Diagnosed with speech or language disorder	N/A	10%	8%	7%	10%	10%
Child had one or more health conditions	N/A	18%	17%	21%	N/A	N/A
Healthcare Access						
Had public insurance	18%	13%	15%	15%	25%	32%
Been to doctor for preventive care (in the past year)	69%	73%	74%	88%	81% [‡]	80% [‡]
Had a personal doctor or nurse	85%	83%	90%	79%	77%	72%
Two or more visits to the ER (in the past year)	10%	9%	6%	6%	5%	4%

 Indicates alignment with the Ohio State Health Assessment (SHA)

[‡]2016/17 NSCH data

N/A – Not Available

Child 6-11 Variables	Sandusky County 2010 Ages 6-11	Sandusky County 2013 Ages 6-11	Sandusky County 2016 Ages 6-11	Sandusky County 2019 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Middle Childhood (Ages 6-11)						
Child participated in one or more activities	N/A	83%	84%	90%	78%	78%
Child did not miss any days of school because of illness or injury	17%	24%	27%	31%	28%	29%
Family and Community Characteristics						
Family eats a meal together every day of the week	N/A	31%	34%	39%	44%	45%
Child never attends religious services	N/A	27%	32%	34%	N/A	N/A
Someone living in the household uses cigarettes, cigars, or pipe tobacco	29%	20%	20%	16%	18%	15%
Two or more adverse childhood experiences (ACEs)	N/A	N/A	N/A	8%	21%	16%
Parent Health						
Mother's mental or emotional health is fair/poor	N/A	N/A	N/A	9%	9%	5%
Father's mental or emotional health is fair/poor	N/A	N/A	N/A	6%	4%	3%

N/A – Not Available

Healthcare Access: Healthcare Coverage

Key Findings

Four percent (4%) of Sandusky County adults were without health care coverage. Those most likely to be uninsured were those with an income level under \$25,000 (10%).

Healthcare Coverage

- In 2019, 96% of Sandusky County adults had health care coverage, leaving 4% uninsured.
- Adults used the following types of health coverage: employer (45%); Medicare (18%); someone else's employer (14%); Medicaid or medical assistance (7%); self-paid plan (5%); multiple, including private sources (4%); multiple, including government sources (2%); health Insurance Marketplace (1%); and military or VA (1%).
- The main reasons uninsured adults gave for being without health care coverage were:
 - They lost their job or changed employers (31%)
 - Cost, such as high co-pays, premiums, and high deductibles with Health Savings Account (25%)
 - Became a part time or temporary employee (19%)

Note: percentages may not equal 100% because respondents could select more than one reason

- Sandusky County adults had the following issues regarding their health care coverage: cost (high co-pays, premiums, deductibles, etc.) (33%); opted out of certain coverage because they could not afford it (10%); working with their insurance company (6%); they could not understand their insurance plan (5%); service is not deemed medically necessary (5%); pre-existing conditions (3%); provider is no longer covered (3%); service is no longer covered (3%); opted out of certain coverage because they did not need it (2%); and limited visits (2%).

Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Uninsured	14%	16%	8%	4%	7%	11%

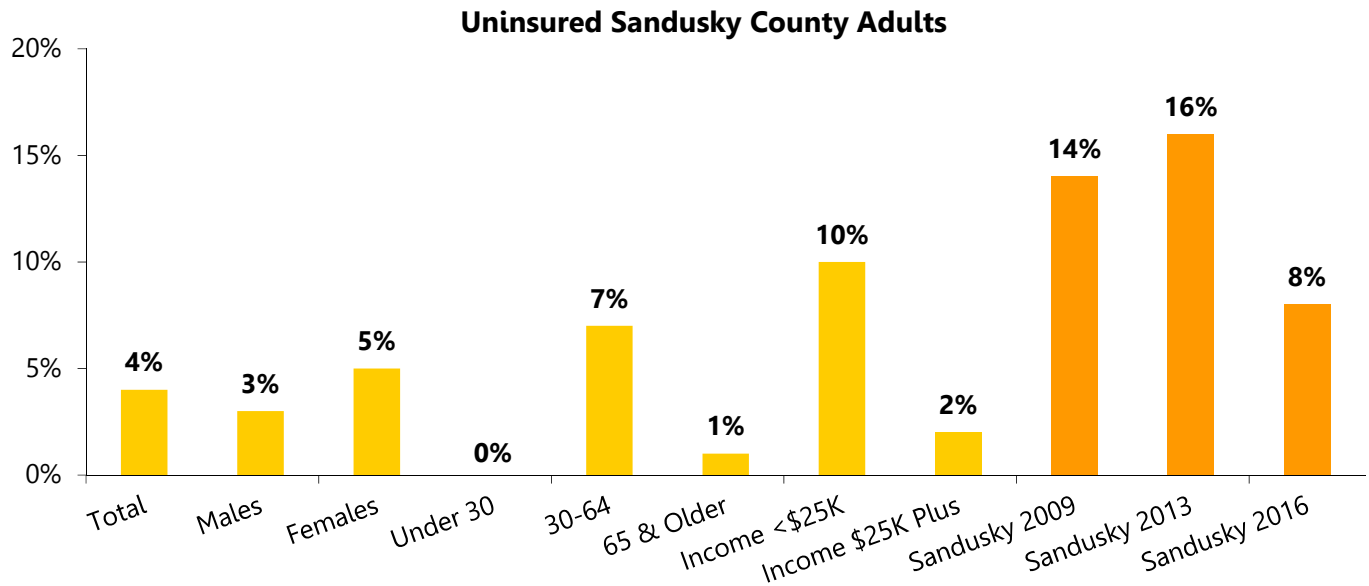
Healthy People 2020 Access to Health Services (AHS)

Objective	Sandusky County 2019	Ohio 2018	U.S. 2018	Healthy People 2020 Target
AHS-1.1: Increase the proportion of persons with medical insurance	100% age 18-24 100% age 25-34 88% age 35-44 95% age 45-54 85% age 55-64	87% age 18-24 89% age 25-34 92% age 35-44 92% age 45-54 95% age 55-64	83% age 18-24 81% age 25-34 83% age 35-44 87% age 45-54 91% age 55-64	100%

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

(Sources: Healthy People 2020 Objectives, 2018 BRFSS, 2019 Sandusky County Community Health Assessment)

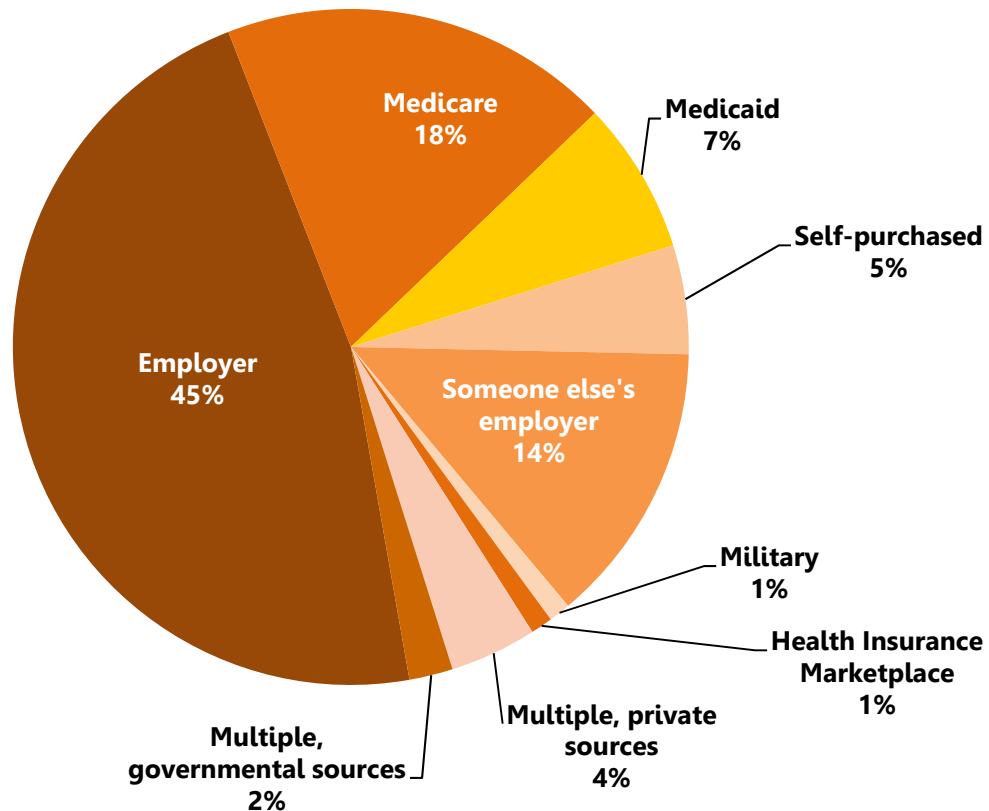
The following graph shows the percentage of Sandusky County adults who were uninsured. An example of how to interpret the information in the graph includes: 4% of all Sandusky County adults were uninsured, including 3% of males and 5% of females.



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 following pie chart identifies sources of health care coverage for Sandusky County adults.

Source of Health Coverage for Sandusky County Adults



Healthcare Access: Access and Utilization

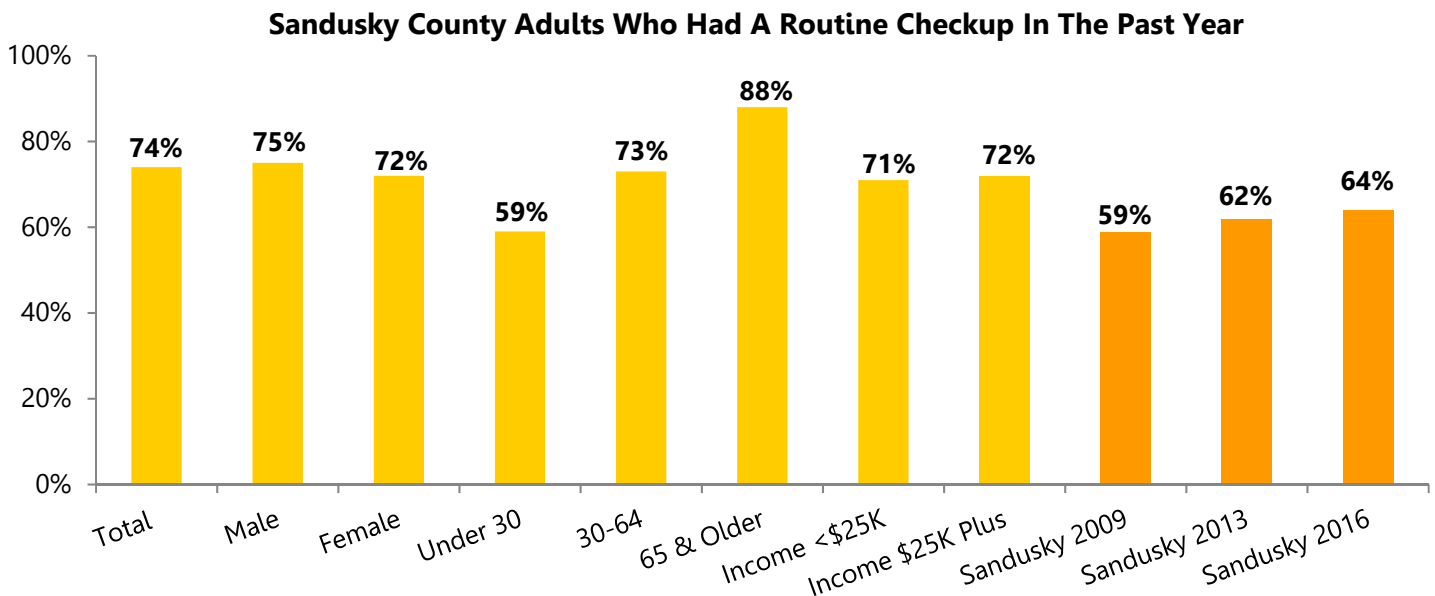
Key Findings

Nearly three-quarters (74%) of Sandusky County adults visited a doctor for a routine checkup in the past year. Ninety percent (90%) of adults indicated they had at least one person they thought of as their personal doctor or health care provider.

Access and Utilization

- Nearly three-quarters (74%) of Sandusky County adults visited a doctor for a routine checkup in the past year, increasing to 93% of those ages 65 and older.
- Adults with health care coverage were more likely to have visited a doctor for a routine checkup in the past year (72%), compared to 44% of those without health care coverage.
- Ninety percent (90%) of adults indicated they had at least one person they thought of as their personal doctor or health care provider, increasing to 94% of those ages 65 and older.

The following graph shows the percentage of Sandusky County adults who had a routine check-up in the past year. An example of how to interpret the information includes: 74% of all Sandusky County adults had a routine check-up in the past year, including 75% of males and 72% 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	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Had one or more persons they thought of as their personal health care provider	N/A	N/A	88%	90%	80%	77%
Visited a doctor for a routine checkup (in the past year)	59%	62%	64%	74%	79%	77%

N/A – Not Available

- More than half (56%) of adults went outside of Sandusky County for the following health care services in the past year: specialty care (39%), primary care (36%), dental services (29%), dermatological care (27%), obstetrics/gynecology (16%), orthopedic care (13%), cardiac care (10%), pediatric care (10%), mental health care/counseling (10%), cancer care (7%), pediatric therapies (6%), female health services (6%), ear, nose, throat care (6%), podiatry care (6%), bariatric care (3%), skilled nursing rehabilitation (2%), addiction services (1%), hospice/palliative care (1%), and other services (22%).
- Sandusky County adults who did not receive medical care in the past year gave the following reasons: no need to go (48%), cost/no insurance (23%), too busy (10%), office was not open when they could get there (2%), too embarrassed to seek help (1%), too long of a wait for an appointment (1%), and other (11%).
- The following might prevent Sandusky County adults from seeing a doctor if they were sick, injured, or needed some kind of health care: nothing (64%); cost/no insurance (24%); doctor/health care provider would not take their insurance (12%); worried they might find something wrong (10%); inconvenient hours (7%); difficult to get an appointment (6%); frightened of the procedure or doctor/health care provider (5%); do not trust or believe doctors/health care providers (4%); could not get time off work (3%); difficult to find/no transportation (2%); could not find childcare (2%); discrimination (2%); language barrier (<1%); and some other reason (2%).
- Adults usually visited the following places when they were sick or needed advice about their health: a doctor/health care provider's office (82%); urgent care center (4%); a public health clinic or community health center (2%); internet (1%); a hospital emergency room (1%); Veterans Affairs (VA) (1%); family and friends (1%); and some other kind of place (2%).

Lack of a Consistent Source of Primary Care, 2011-2012

	Survey Population (Adults Age 18+)	Total Adults Without Any Regular Doctor	Percent Adults Without Any Regular Doctor
Sandusky County	52,206	3,846	7.37%
Ohio	8,711,922	1,624,401	18.65%
United States	236,884,668	52,290,932	22.07%

(Source: Center for Disease Control and Prevention, 2011-2012, as provided by Great Lakes Community Action Partnership)

Availability of Services

- Sandusky County adults reported they had looked for the following programs for themselves:

Sandusky County Adults Able to Access Assistance Programs/Services

Type of Program	Yes, and have found one	Yes, and have not found one	No, and have not looked	No, and have not needed
Alcohol abuse	1%	<1%	6%	92%
Assist in care for the disabled (either in-home or out-of-home)	3%	2%	7%	88%
Assist in care for the elderly	5%	1%	6%	88%
Assist in in-home care for an elderly or disabled adult	4%	3%	6%	87%
Assist in out-of-home placement for an elderly or disabled adult	4%	1%	5%	90%
Assisted living placement program for an elderly or disabled adult	4%	2%	5%	89%
Cancer support group/counseling	1%	1%	6%	92%
Daycare for an elderly or disabled adult	2%	1%	6%	91%
Depression, anxiety, or some mental health problem	14%	6%	10%	70%
Detoxification for opiates/heroin	<1%	0%	5%	95%
Disability	1%	1%	6%	92%
Drug abuse	<1%	0%	5%	95%
End-of-life care or Hospice care	3%	0%	5%	92%
Family planning	5%	1%	6%	88%
Gambling abuse	0%	0%	5%	95%
Marital or family problems	3%	3%	7%	87%
Tobacco cessation	1%	1%	8%	90%
Weight problem	6%	6%	12%	76%

Fremont Specialist Roster

- The following list is published by ProMedica Memorial Hospital as a courtesy to our physicians and community members. While there are many specialists affiliated with PMH, this roster contains only those providers that attend to patients in Fremont. To our knowledge, this information is current and accurate, and provided only as a public service.

Type of Specialist	Number
Cardiology	7
Dermatology	4
General Surgery	4
Genetic Counselors – Hematology/Oncology	2
Heart Failure Clinic	3
Hematology/Medical Oncology	9
Infectious Disease	1
Nephrology	4
Neurology	3
Nurse Midwife	7
Obstetrics/Gynecology	3
Ophthalmology	3
Orthopedic Surgery	12
Otolaryngology	2
Pain Medicine	3
Pediatric Cardiology	3
Pediatric Gastroenterology	1
Pediatric Pulmonary	1
Podiatric Surgery	2
Psychiatry	3
Pulmonary Disease	3
Radiation Oncology	6
Sleep Medicine	1
Urology	3
Vascular Surgery	1
Women's Health Care	1
Wound Care	1

(Source: ProMedica Memorial Hospital, 2018)

ProMedica: Service Area Physician Ratio Methodology

- Physician Surpluses/Deficits Calculated Using Ratio Methodology Adjusting for Expected Attrition:

Service Area Summary	Ohio East
Cardiothoracic Surgery	-3.59
Colon and Rectal Surgery	-1.42
Dermatology	-5.42
Emergency Medicine	-2.76
Endocrinology	-2.49
Family Practice	2.9
Gastroenterology	-6.97
General Surgery	-9.63
Gynecological Oncology	-9.31
Hematology/Oncology	3.81
Infectious Disease	-1.64
Internal Medicine	-35.93
Neonatology	-1.53
Nephrology	2.91
Neurology	-3.93
Neurosurgery	-3.05
Cardiothoracic Surgery	-3.59
Colon and Rectal Surgery	-1.42

(Source: ProMedica Memorial Hospital, 2018)

Healthcare Access: Preventive Medicine

Key Findings

More than half (52%) of Sandusky County adults had a flu vaccine during the past year. Nearly three-quarters (73%) of adults ages 65 and older had a pneumonia vaccination at some time in their life. Fifteen percent (15%) of adults were screened for skin cancer in the past year.

Preventive Medicine

- More than half (52%) of Sandusky County adults had a flu vaccine during the past year, increasing to 77% of those ages 65 and older.
- Over one-third (35%) of adults had a pneumonia vaccine in their life, increasing to 73% of those ages 65 and over.
- Sandusky County adults had the following vaccines:
 - Measles, mumps and rubella (MMR) in their lifetime (75%)
 - Tetanus, diphtheria and pertussis (including Tdap) in the past 10 years (59%)
 - Chicken pox in their lifetime (52%)
 - Hepatitis B in their lifetime (46%)
 - Hepatitis A in their lifetime (38%)
 - Zoster (shingles) vaccine in their lifetime (22%)
 - Human papillomavirus (HPV) vaccine in their lifetime (12%)
- Zero percent (0%) of Sandusky County residents used PrEP (Truvada) in their lifetime. Sixty-six percent (66%) of adults have not used PrEP in their lifetime and 29% of adults have not heard of PrEP. Five percent (5%) of adults reported they did not know if they have ever used PrEP.

Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Had a pneumonia vaccination (age 65 and over)	66%	52%	65%	73%	74%	73%
Had a flu vaccine in the past year (age 65 and over)	N/A	76%	78%	77%	56%	55%
Ever had a shingles or zoster vaccine	N/A	7%	13%	22%	29%*	29%*

*2017 BRFSS

N/A – Not Available

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

Objective	Sandusky County 2019	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	73%	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	77%	90%
IID-14: Increase the percentage of adults who are vaccinated against zoster (shingles)	22%	30%

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

Preventive Health Screenings and Exams

- The U.S. Preventive Services Task Force recommends that adults age 50 to 75 be screened for colorectal cancer. The decision to be screened after age 75 should be made on an individual basis *(Source: Division of Cancer Prevention and Control, Centers for Disease Control and Prevention, 2019)*
- Sandusky County adults reported that they had received the following screenings:
 - Breast cancer in the past year (28%)
 - Colorectal cancer in the past five years (25%)
 - Skin cancer in the past year (15%)
 - Prostate cancer in the past year (14%)
 - Oral cancer in the past year (12%)
 - Osteoporosis in the past year (8%)
 - Lung cancer in the past three years (3%)
- In the past year, adults reported their doctor talked to them about the following topics: family history (36%); weight control (diet, physical activity) (35%); depression, anxiety or emotional problems (34%); immunizations (34%); safe use of prescription medication (20%); tobacco use (15%); bone density (11%); PSA test (11%); family planning (10%); alternative pain therapy (8%); falls (8%); injury prevention such as safety belt use, helmet use, or smoke detectors (6%); alcohol use (5%); domestic violence (5%); sexually transmitted diseases (std's) (5%); safe use of opiate-based pain medication (4%); self-testicular exams (3%); firearm safety (3%); genetic testing (2%); illicit drug abuse (1%); and PrEP (Truvada) (1%).

Employee Wellness

- Sandusky County adults reported having access to the following wellness programs through their or their spouse's employer: lower insurance premiums for participation in wellness program (23%); free/discounted gym membership (21%); health risk assessment (19%); gift cards or cash for participation in wellness program (19%); on-site health screenings (15%); healthier food options in vending machines or cafeteria (10%); lower insurance premiums for positive changes in health status (10%); free/discounted weight loss program (Weight Watchers) (9%); free/discounted smoking cessation program (8%); on-site fitness facility (5%); on-site health education classes (4%); gift cards or cash for positive changes in health status (4%); and other (8%).

Immunizations

- In 2018, 2,299 clients were served in the immunization clinic and 5,463 immunizations were administered *(Source: Sandusky County Public Health, 2018)*.
- In 2018, there were 72 influenza-associated hospitalizations, 58 Hepatitis C cases, 10 campylobacteriosis cases, and 9 invasive streptococcus pneumonia disease cases *(Source: Sandusky County Public Health, 2018)*.
- In 2018, 340 out of 360 ProMedica Memorial Hospital employees received their flu shot and 63 ProMedica Memorial Hospital patients received their flu shot *(Source: Sandusky County Public Health, 2018)*.

2018 Flu Shots	
Count	Clinic
624	Sandusky Co. Public Health Dept.
52	Private business
36	St. Joseph Parish Hall
23	First United Church of Christ
22	Clyde Senior Center
51	Sacred Heart Church
37	Terra State Community College
17	Faith United Methodist Church
25	Trinity United Methodist Church
4	Woodville Fire Dept.
17	Clyde Christian Church

(Source: Sandusky County Public Health, 2018)

Healthcare Access: Women's Health

Key Findings

Over half (55%) of women ages 40 and over had a mammogram in the past year. Forty-five percent (45%) of women had a clinical breast exam within the past year. Two-thirds (66%) of women ages 21-65 had a Pap smear in the past three years. Thirty-six percent (36%) of women were obese, 31% had high blood pressure, 27% had high blood cholesterol, and 19% were identified as smokers, all known risk factors for cardiovascular diseases.

Women's Health Screenings

- Seventy percent (70%) of women had a mammogram at some time in their life, and almost two-fifths (37%) had this screening in the past year.
- Over half (55%) of women ages 40 and over had a mammogram in the past year, and 68% had one in the past two years.
- Most (94%) of Sandusky County women had a clinical breast exam at some time in their life, and 52% had one within the past year. Fifty-nine percent (59%) of women ages 40 and over had a clinical breast exam in the past two years.
- Ninety-one percent (91%) of women ages 21-65 had a Pap smear at some time in their life, and 44% reported having had the exam in the past year. Two-thirds (66%) of women ages 21-65 had a Pap smear in the past three years.

Sandusky County Female Leading Causes of Death 2015–2017

Total Female Deaths: 1,024

- Heart Diseases (23% of all deaths)
- Cancers (19%)
- Chronic Lower Respiratory Diseases (6%)
- Stroke (5%)
- Accidents, Unintentional injuries (5%)

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

Ohio Female Leading Causes of Death 2015–2017

Total Female Deaths: 180,539

- Heart Diseases (22% of all deaths)
- Cancers (20%)
- Chronic Lower Respiratory Diseases (6%)
- Stroke (6%)
- Alzheimer's Disease (6%)

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

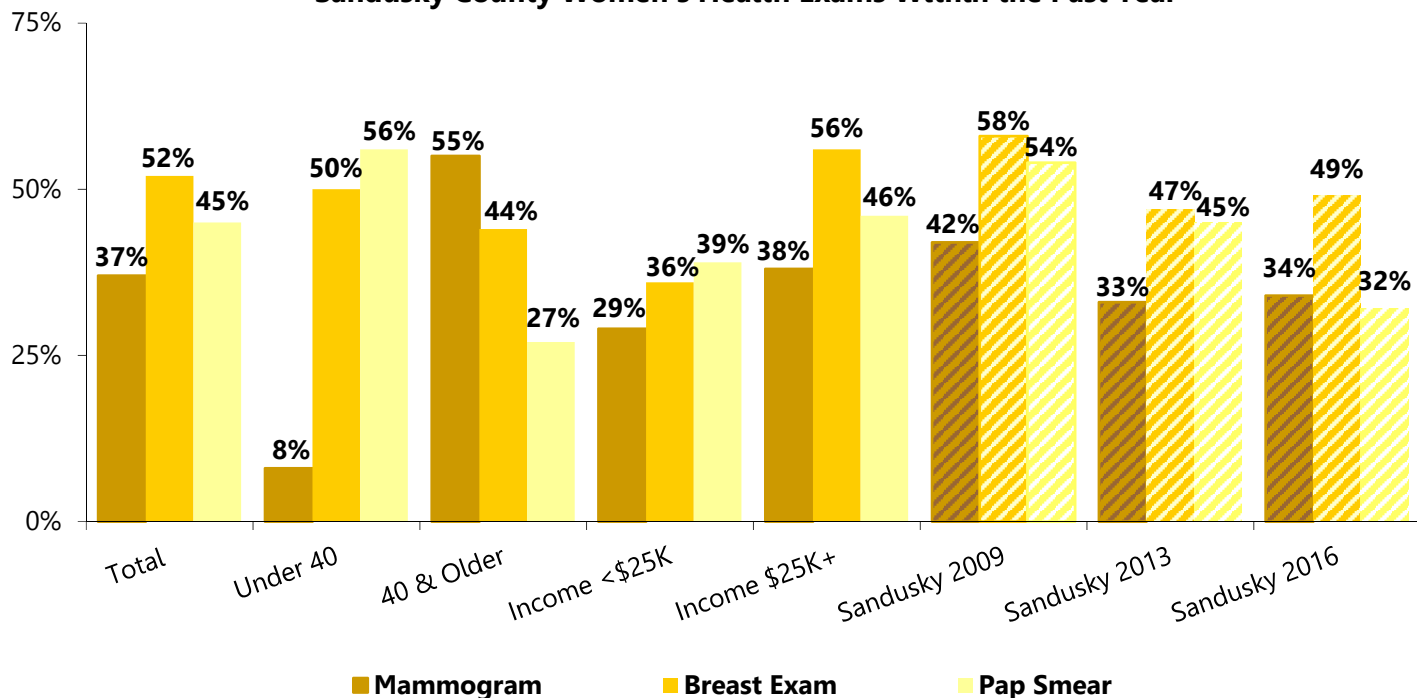
Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Had a mammogram within the past two years (ages 40 and over)	68%	68%	69%	68%	74%	72%
Had a pap test in the past three years (ages 21-65)	66%‡	67%‡	71%‡	66%	79%	80%
Had a clinical breast exam in the past two years (ages 40 and older)	68%	66%	66%	59%	N/A	N/A

N/A – Not Available

‡Pap smear was reported for women ages 19 and over

The following graph shows the percentage of Sandusky County female adults that had various health exams in the past year. An example of how to interpret the information shown on the graph includes: 37% of Sandusky County females had a mammogram within the past year, 52% had a clinical breast exam, and 45% had a pap smear.

Sandusky County Women's Health Exams Within the Past Year



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.

Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (59%), general or family physician (22%), community health center (4%), family planning clinic (4%), multiple places (1%), and some other place (<1%). Ten percent (10%) of women 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. The 2019 health assessment has identified that:
 - 75% of women were overweight or obese (2018 BRFSS reports 64% for Ohio and 61% for U.S.)
 - 31% were diagnosed with high blood pressure (2017 BRFSS reports 33% for Ohio and 31% for U.S.)
 - 27% were diagnosed with high blood cholesterol (2017 BRFSS reports 33% for Ohio and 32% for U.S.)
 - 19% of all women were current smokers (2018 BRFSS reports 19% for Ohio and 14% for U.S.)
 - 11% had been diagnosed with diabetes (2018 BRFSS reports 13% for Ohio and 11% for U.S.)

Pregnancy

- Twenty-seven percent (27%) of Sandusky County women were pregnant in the past five years.
- During their last pregnancy within the past five years, women: got prenatal care within the first three months (69%), took a multi-vitamin with folic acid (50%), got a dental exam during pregnancy (31%), received WIC services (19%), and experienced depression (during or after pregnancy) (11%).

Healthcare Access: Men's Health

Key Findings

Nearly one-third (31%) of Sandusky County males performed a self-testicular exam in the past year. Nearly half (47%) of men had high blood cholesterol, 44% had been diagnosed with high blood pressure, and 15% were identified as smokers, which, along with obesity (41%), are known risk factors for cardiovascular diseases.

Men's Health Screenings

- Nearly one-third (31%) of Sandusky County males performed a self-testicular exam in the past year.
- More than three-fourths (76%) of men had never been taught by a health care professional how to perform a self-testicular exam.
- Sandusky County males reported experiencing the following:
 - Erectile dysfunction (32%)
 - Low testosterone (13%)
 - Enlarged prostate/benign prostatic hyperplasia (BPH) (12%)
 - Incontinence (not having control of bladder) (6%)
 - A concerning test result from a colonoscopy (5%)

Men's Health Concerns

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. The 2019 health assessment identified:
 - 83% of men were overweight or obese (2018 BRFSS reports 73% for Ohio and 71% for U.S.)
 - 47% were diagnosed with high blood cholesterol (2017 BRFSS reports 34% for Ohio and 35% for U.S.)
 - 44% were diagnosed with high blood pressure (2017 BRFSS reports 37% for Ohio and 35% for U.S.)
 - 16% had been diagnosed with diabetes (2018 BRFSS reports 12% for Ohio and 12% for U.S.)
 - 15% of all men were current smokers (2018 BRFSS reports 22% for Ohio and 18% for U.S.)

Sandusky County Male Leading Causes of Death 2015–2017

Total Male Deaths: 1,002

1. Cancers (26% of all deaths)
2. Heart Disease (23%)
3. Accidents, Unintentional Injuries (9%)
4. Chronic Lower Respiratory Diseases (6%)
5. Diabetes (4%)

(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)

Healthcare Access: Oral Health

Key Findings

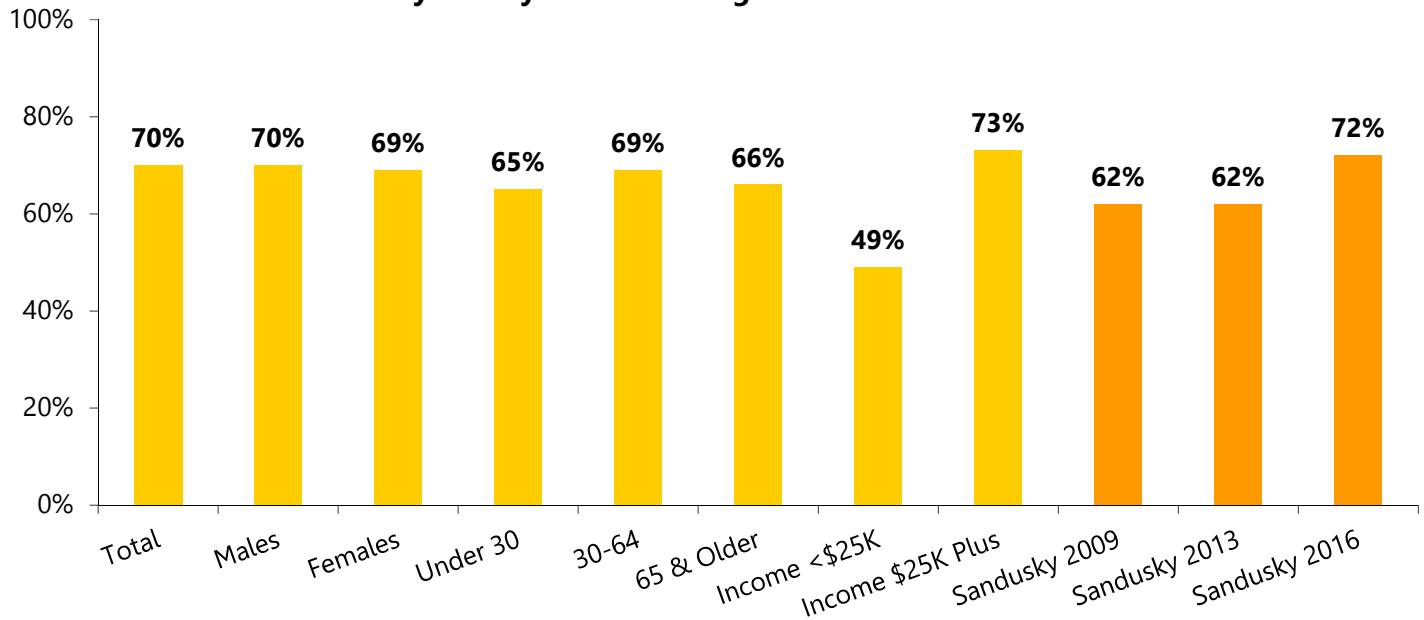
Seventy percent (70%) of Sandusky County adults visited a dentist or dental clinic in the past year. Thirty percent (30%) of adults did not see a dentist in the past year due to cost.

Oral Health

- In the past year, 70% of Sandusky County adults had visited a dentist or dental clinic, decreasing to 49% of those with incomes less than \$25,000.
- Sixty-eight percent (68%) of Sandusky County adults with health insurance had been to the dentist in the past year, compared to 50% of those without health insurance.

The following graph provides information about the frequency of Sandusky County adult dental visits. An example of how to interpret the information includes: 70% of Sandusky County adults had been to the dentist in the past year, including 70% of males and 49% of those with incomes less than \$25,000.

Sandusky County Adults Visiting a Dentist in the Past Year



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.

Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Visited a dentist or a dental clinic (within the past year)	62%	62%	72%	70%	67%	68%

- Sandusky County adults who did not visit a dentist in the past year gave the following reasons: cost (30%); had no reason to go/had not thought of it (18%); had dentures (14%); other reasons (10%); fear, apprehension, nervousness, pain, and dislike going (7%); used the emergency room for dental issues (6%); did not have/know a dentist (4%); could not get into a dentist (1%); dentist did not accept their medical coverage (1%); and multiple reasons (10%)
- Over one-quarter (26%) of Sandusky County adults had the following oral health issues: pain (7%), problems with dentures (4%), oral bleeding (4%), difficulty eating/chewing (3%), loose teeth (3%), skipped meals due to pain (3%), no teeth (2%), missed work due to mouth pain (<1%) and other (11%).

Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never	Don't Know
Time Since Last Visit to Dentist/Dental Clinic						
Males	70%	8%	8%	12%	1%	1%
Females	69%	6%	11%	13%	1%	1%
Total	70%	7%	9%	12%	1%	1%

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

Adults without Recent Dental Exam, 2006-2010

	Total Population Age 18+	Without Recent Dental exam in Past year	Percent Adults with No Dental Exam
Sandusky County	46,163	12,315	26.7%
Ohio	8,781,360	2,426,123	27.6%
United States	235,375,690	70,965,788	30.2%

(Source: CARES, 2006-2010, as provided by Great Lakes Community Action Partnership)

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

Over two-fifths (44%) of Sandusky County adults rated their health status as excellent or very good. Conversely, 13% of adults described their health as fair or poor, increasing to 25% of those with incomes less than \$25,000.

General Health Status

- Over two-fifths (44%) of Sandusky County adults rated their health as excellent or very good. Adults with higher incomes (50%) were most likely to rate their health as excellent or very good, compared to 21% of those with incomes less than \$25,000.
- Thirteen percent (13%) of adults rated their health as fair or poor.
- Sandusky County adults were most likely to rate their health as fair or poor if they:
 - Had high blood cholesterol (63%)
 - Had high blood pressure (63%)
 - Had been diagnosed with diabetes (33%)
 - Were divorced (31%)
 - Had an annual household income under \$25,000 (25%)

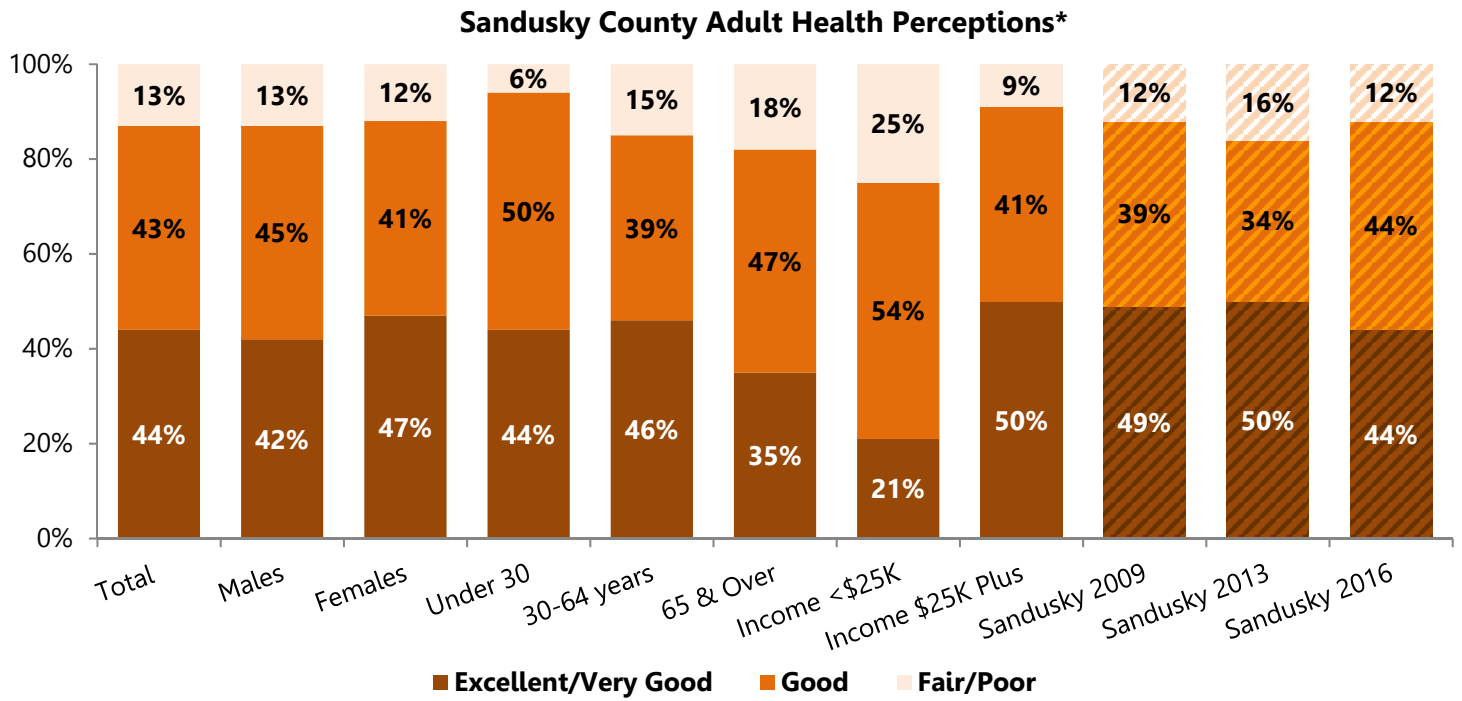
Physical Health Status

- One-fifth (20%) of Sandusky County adults rated their physical health as not good on four or more days in the previous month.
- Sandusky County adults reported their physical health as not good on an average of 3.9 days in the previous month.
- Sandusky County adults were most likely to rate their physical health as not good if they:
 - Had an annual household income less than \$25,000 (67%)
 - Were 65 years of age or older (55%)
 - Were male (20%)

Mental Health Status

- Thirty percent (30%) of Sandusky County adults rated their mental health as not good on four or more days in the previous month.
- Sandusky County adults reported their mental health as not good on an average of 5.0 days in the previous month.
- Sandusky County adults were most likely to rate their mental health as not good if they:
 - Were under the age of 30 (69%)
 - Had an annual household income less than \$25,000 (62%)
 - Were female (37%)

The following graph shows the percentage of Sandusky County adults who described their personal health status as excellent/very good, good, and fair/poor. An example of how to interpret the information includes: 44% of all Sandusky County adults, 47% of females, and 35% of those ages 65 and older rated their health as excellent or very good.



*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.

The table shows the percentage of adults with poor physical and mental health in the past 30 days.

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
Physical Health Not Good in Past 30 Days*					
Males	52%	20%	7%	2%	11%
Females	49%	17%	6%	1%	15%
Under 30	41%	24%	0%	0%	12%
30-64 Years	52%	17%	7%	1%	15%
65 & Over	45%	15%	6%	3%	19%
Total	50%	19%	6%	1%	13%
Mental Health Not Good in Past 30 Days*					
Males	61%	11%	9%	0%	12%
Females	41%	14%	11%	2%	23%
Under 30	31%	19%	13%	0%	25%
30-64 Years	50%	13%	11%	1%	19%
65 & Over	62%	7%	6%	2%	15%
Total	49%	12%	10%	1%	19%

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

Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Rated general health as excellent or very good	49%	50%	44%	44%	49%	51%
Rated general health as fair or poor	12%	16%	12%	13%	19%	18%
Rated mental health as not good on four or more days (in the past month)	19%	22%	27%	30%	26%	24%
Average number of days that mental health was not good (in the past month)	N/A	4.2	4.5	5.0	4.3*	3.8*
Rated physical health as not good on four or more days (in the past month)	19%	22%	21%	20%	24%	23%
Average number of days that physical health was not good (in the past month)	N/A	4.3	3.8	3.9	4.0*	3.7*

N/A – Not Available

*2016 BRFSS as compiled by 2019 County Health Rankings

Health Behaviors: Adult Weight Status

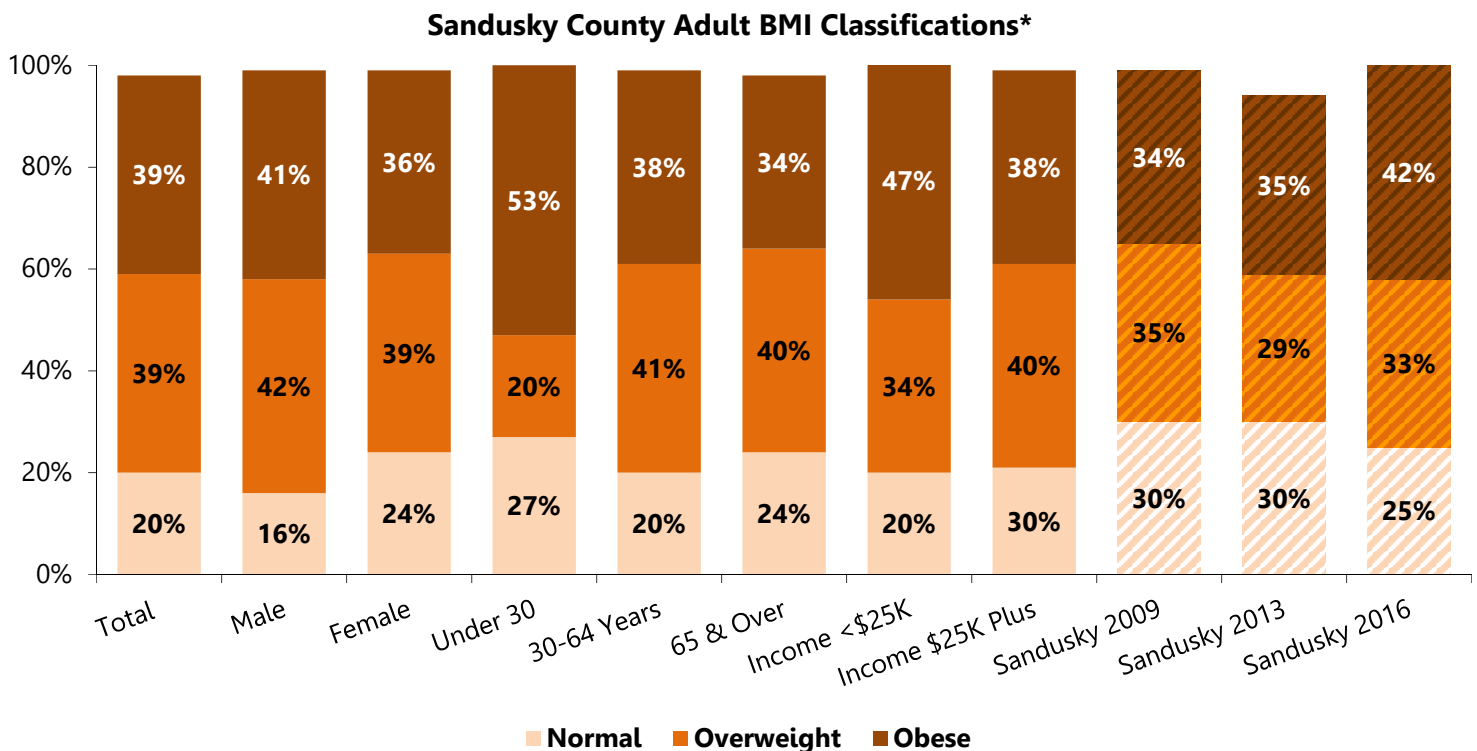
Key Findings

More than three-fourths (78%) of Sandusky County adults were overweight or obese based on body mass index (BMI). Over one-fifth (23%) of adults did not participate in any physical activity in the past week, including 1% who were unable to exercise.

Adult Weight Status

- Seventy-eight percent (78%) of Sandusky County adults were either overweight (39%) or obese (39%) by body mass index (BMI). This puts them at elevated risk for developing a variety of diseases.
- Sandusky County adults did the following to lose weight or keep from gaining weight: drank more water (47%); exercised (44%); ate less food, fewer calories, or foods low in fat (41%); ate a low-carb diet (18%); used a weight loss program (4%); went without eating 24 or more hours (4%); health coaching (4%); took diet pills, powders, or liquids without a doctor's advice (4%); smoked cigarettes (3%); participated in a prescribed dietary or fitness program (3%); took prescribed medications (1%); bariatric surgery (1%); vomit after eating (1%); and took laxatives (<1%).

The following graph shows the percentage of Sandusky County adults who were normal weight, overweight or obese by body mass index (BMI). An example of how to interpret the information includes: 20% of all adults were classified as normal weight, 39% were overweight, and 39% were obese.



*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	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Overweight	35%	29%	33%	39%	34%	35%
Obese	34%	35%	42%	39%	34%	31%

Adult Physical Activity

- In Sandusky County, 56% of adults engaged in some type of physical activity or exercise for at least 30 minutes three or more days per week. Thirty-one percent (31%) of adults exercised five or more days per week. Over one-fifth (23%) of adults did not participate in any physical activity in the past week, including 4% who were unable to exercise.
- Adults spent the most time doing the following physical activities in the past year: walking (26%), strength training (4%), running/jogging (4%), exercise machines (3%), cycling (3%), exercise through their occupation (3%), exercise videos (3%), group exercise classes (1%), other (9%), and multiple types (32%). Eleven percent (11%) of adults did not exercise in the past year.
- Sandusky County adults reported they use or visit the parks, bike trails, and walking paths in their community: very often (14%), somewhat often (21%), not very often (40%), and not at all (25%).
- Sixty-nine percent (69%) of adults reported parks, bike trails and walking paths are easily accessible by walking or biking to.
- Adults reported the following would help them use community parks, bike trails and walking paths more frequently: more available parks, bike trails, and walking paths (19%); designated safe routes (13%); improvements to existing parks, trails, and paths (10%); better promotion and advertising of existing parks, trails, and paths (10%); and more public events and programs involving parks, trails, and paths (10%).

Adult Nutrition

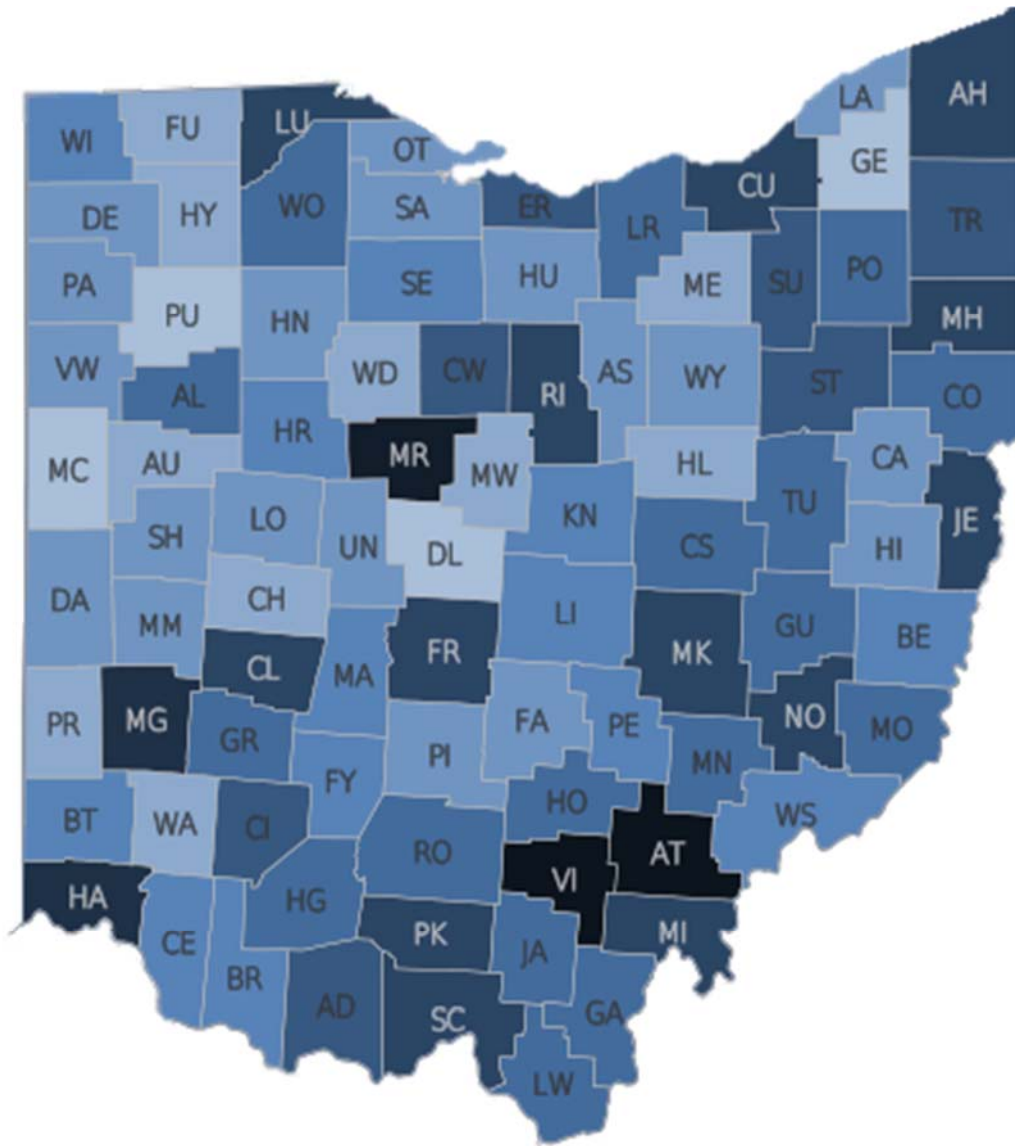
The table below indicates the number of servings of fruit, vegetables, sugar-sweetened beverages, and caffeinated beverages Sandusky County adults consumed daily.

	5 or more servings	3-4 servings	1-2 servings	0 servings
Fruit	1%	10%	75%	14%
Vegetables	6%	20%	72%	2%
Sugar-sweetened beverages	2%	11%	38%	49%
Caffeinated beverages	10%	19%	47%	24%

- In 2019, 41% of adults ate between 1-to-2 servings of fruits and/or vegetables per day. Thirty-seven percent (37%) ate 3-to-4 servings per day, and 19% ate 5 or more servings per day. Three percent (3%) of adults ate 0 servings of fruits and/or vegetables per day.
- Sandusky County adults reported they obtained their fresh fruits and vegetables from the following: large grocery store (such as Wal-Mart) (91%); farmer's market (42%); grow their own/garden (30%); local grocery store (23%); dollar general/dollar store (4%); veggie mobile/mobile produce (3%); corner/convenience stores (1%); food pantry (1%); group purchasing or community supported agriculture (<1%); and other (2%). One percent (1%) of adults reported they did not purchase fruits and vegetables.
- Adults reported the following barriers in consuming fruits and vegetables: too expensive (17%), did not like the taste (3%), did not know how to prepare them (1%), no access (1%), transportation (1%), no variety (<1%), stores did not take EBT (<1%), and other reasons (3%). Seventy-nine percent (79%) of adults reported no barriers in consuming fruits and vegetables.

The Food Environment Index measures the quality of the food environment in a county on a scale from 0 to 10 (zero being the worst value in the nation and 10 being the best). The two variables used to determine the measure are limited access to healthy foods (i.e., the percentage of the population who are low income and do not live close to a grocery store) & food insecurity (i.e., the percentage of the population who did not have access to a reliable source of food during the past year).

- The food environment index in Sandusky County is 8.4.
- The food environment index in Ohio is 6.7.



BEST WORST MISSING

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

Health Behaviors: Adult Tobacco Use

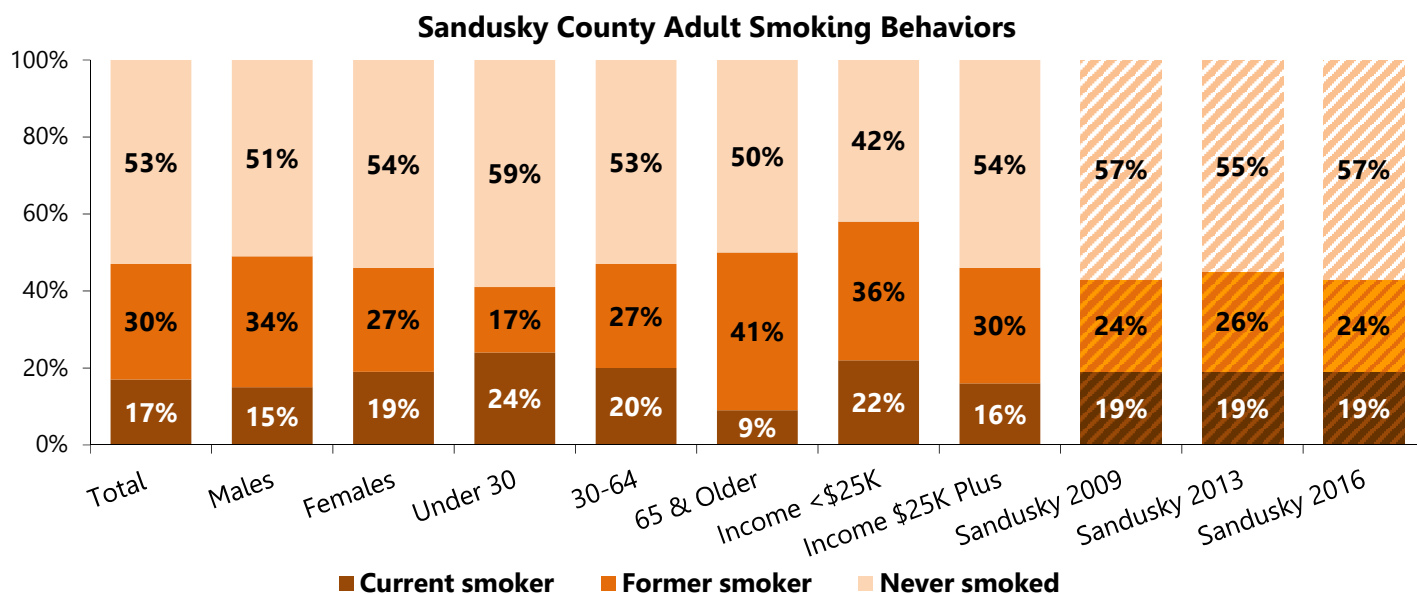
Key Findings

In 2019, 17% of Sandusky County adults were current smokers and 30% were considered former smokers. Six percent (6%) of adults were current electronic vapor product users.

Adult Tobacco Use

- About one-in-five (17%) Sandusky County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- Almost one-third (30%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- Sandusky County adult smokers were more likely to have:
 - Been divorced (31%)
 - An annual income less than \$25,000 (22%)
- Sixty percent (60%) 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.
- Sandusky County adults used the following tobacco products in the past year: cigarettes (20%); e-cigarettes or other electronic vaping products (7%); cigars (5%); hookah (4%), chewing tobacco, snuff or snus (3%); little cigars (2%); cigarillos (2%); and pipes (<1%).

The following graph shows the percentage of Sandusky County adults' cigarette smoking behaviors. An example of how to interpret the information includes: 17% of all Sandusky County adults were current smokers, 30% of all adults were former smokers, and 53% had never smoked.



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

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 Electronic Vapor Product Use

- Six percent (6%) of adults were current electronic vapor product users (those who indicated using an electronic vapor product in their lifetime and currently used it some or all days).
- Fifteen percent (15%) of adults indicated they were former electronic vapor product users.
- Adults that had used e-cigarettes/vapes in the past 12 months reported putting the following in them:
 - E-liquid or e-juice with nicotine (40%)
 - Marijuana or THC in the e-liquid (36%)
 - E-liquid or e-juice without nicotine (0%)
 - Homemade e-liquid or e-juice (0%)

Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Current smoker (smoked on some or all days)	19%	19%	19%	17%	21%	16%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	24%	26%	24%	30%	25%	25%
Tried to quit smoking (on at least one day in the past year)	41%	60%	39%	60%	N/A	N/A
Current e-cigarette user (vaped on some or all days)	N/A	N/A	N/A	6%	5%*	5%*
Former e-cigarette user	N/A	N/A	N/A	15%	19%*	16%*

*2017 BRFSS

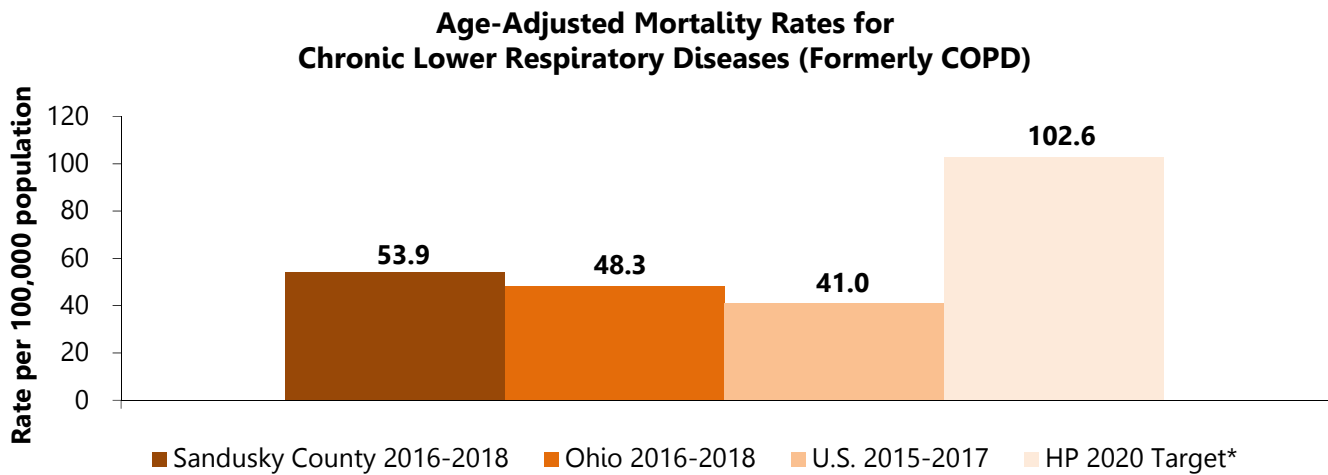
E-Cigarette Health Effects

- **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 e-cigarette 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)

The following graph shows the Sandusky County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD). The graph shows:

- The Sandusky County’s age-adjusted mortality rate for chronic lower respiratory disease was higher than the Ohio and U.S. rate but lower than the Healthy People 2020 target objective.



**Healthy People 2020’s target rate and the U.S. rate is for adults aged 45 years and older.
(Sources: Ohio Public Health Data Warehouse 2016-2018, CDC Wonder, 2015-2017, Healthy People 2020)*

Smoking and COPD

- Chronic obstructive pulmonary disease (COPD) refers to a group of diseases that cause airflow blockage and breathing-related problems. COPD includes emphysema, chronic bronchitis, and in some cases, asthma.
- COPD is usually caused by cigarette smoking. Smoking accounts for as many as 8 out of 10 COPD-related deaths nationwide. However, as many as 1 out of 4 Americans with COPD never smoked cigarettes.
- The best way to prevent COPD is to never start smoking, and if you do smoke, quit. Additionally, stay away from secondhand smoke, which is smoke from burning tobacco products, such as cigarettes, cigars, or pipes, as well as smoke that has been exhaled, or breathed out, by a person smoking.

(Source: Tips from Former Smokers, Chronic Obstructive Pulmonary Disease (COPD), Centers for Disease Control and Prevention, 2019)

Health Behaviors: Adult Alcohol Consumption

Key Findings

Fifty-six percent (56%) of Sandusky County adults had at least one alcoholic drink in the past month and would be considered current drinkers. Twenty-nine percent (29%) of all 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.

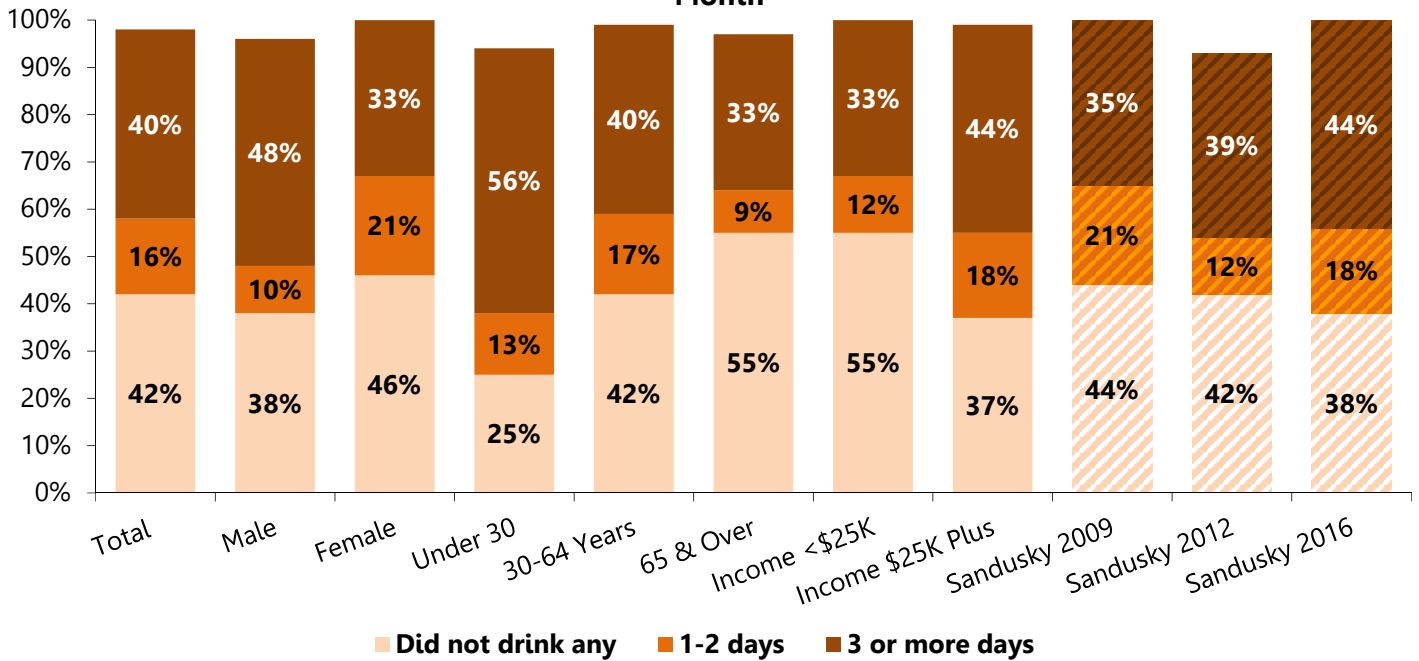
Adult Alcohol Consumption

- In 2019, 56% of Sandusky County adults had at least one alcoholic drink in the past month, increasing to 62% those with incomes greater than \$25,000.
- Of those who drank, Sandusky County adults drank 3.1 drinks on average.
- Twenty-nine percent (29%) of Sandusky 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. Of those who drank in the past month, 51% had at least one episode of binge drinking.
- Nearly one-fifth (17%) of adults reported driving after drinking any alcoholic beverage in the past month, increasing to 25% of males.
- Sandusky County adults reported they or an immediate family member experienced the following in the past six months: drove a vehicle or other equipment after having any alcoholic beverages (10%); drank more than they expected (8%); used prescription drugs while drinking (5%); spent a lot of time drinking (3%); continued to drink despite problems caused by drinking (2%); tried to quit or cut down but could not (2%); failed to fulfill duties at work, home, or school (2%); gave up other activities to drink (1%); drank to ease withdrawal symptoms (1%); placed themselves or their family in harm (1%); drank more to get the same effect (1%); and had legal problems (1%).
- Sandusky County adults reported the following reasons for drinking alcohol: social events (41%); taste/enjoyment (35%); helps them relax/relieve stress (24%); it's normal/part of the culture (8%); they like the way it makes them feel (5%); social expectations (5%); their parents drank alcohol (4%), not much else to do (3%); and other reasons (2%).

Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Current drinker (had at least one drink of alcohol within the past month)	56%	51%	62%	56%	52%	54%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion)	21%	22%	29%	29%	16%	16%

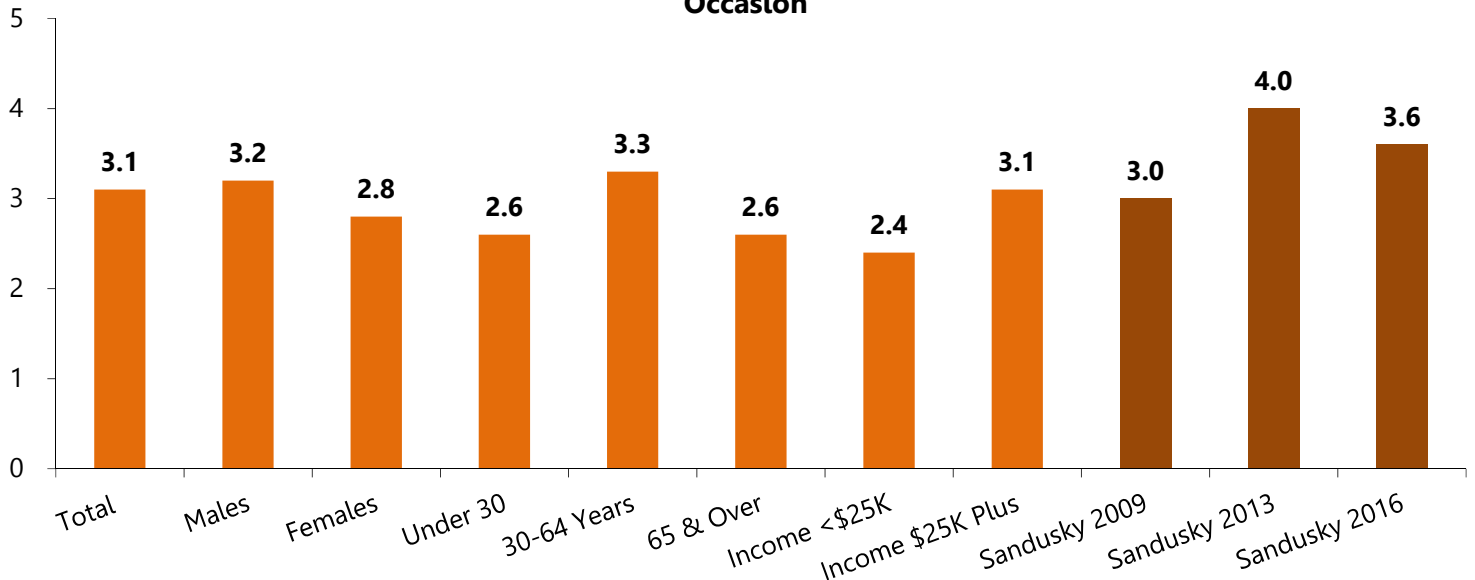
The following graphs show the percentage of Sandusky County adults consuming alcohol and the amount consumed on average in the past month. An example of how to interpret the information shown on the first graph includes: 42% of all adults did not drink alcohol in the past month, including 38% of males and 46% of females.

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



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

Sandusky County Adults Average Number of Drinks Consumed Per Drinking Occasion



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.

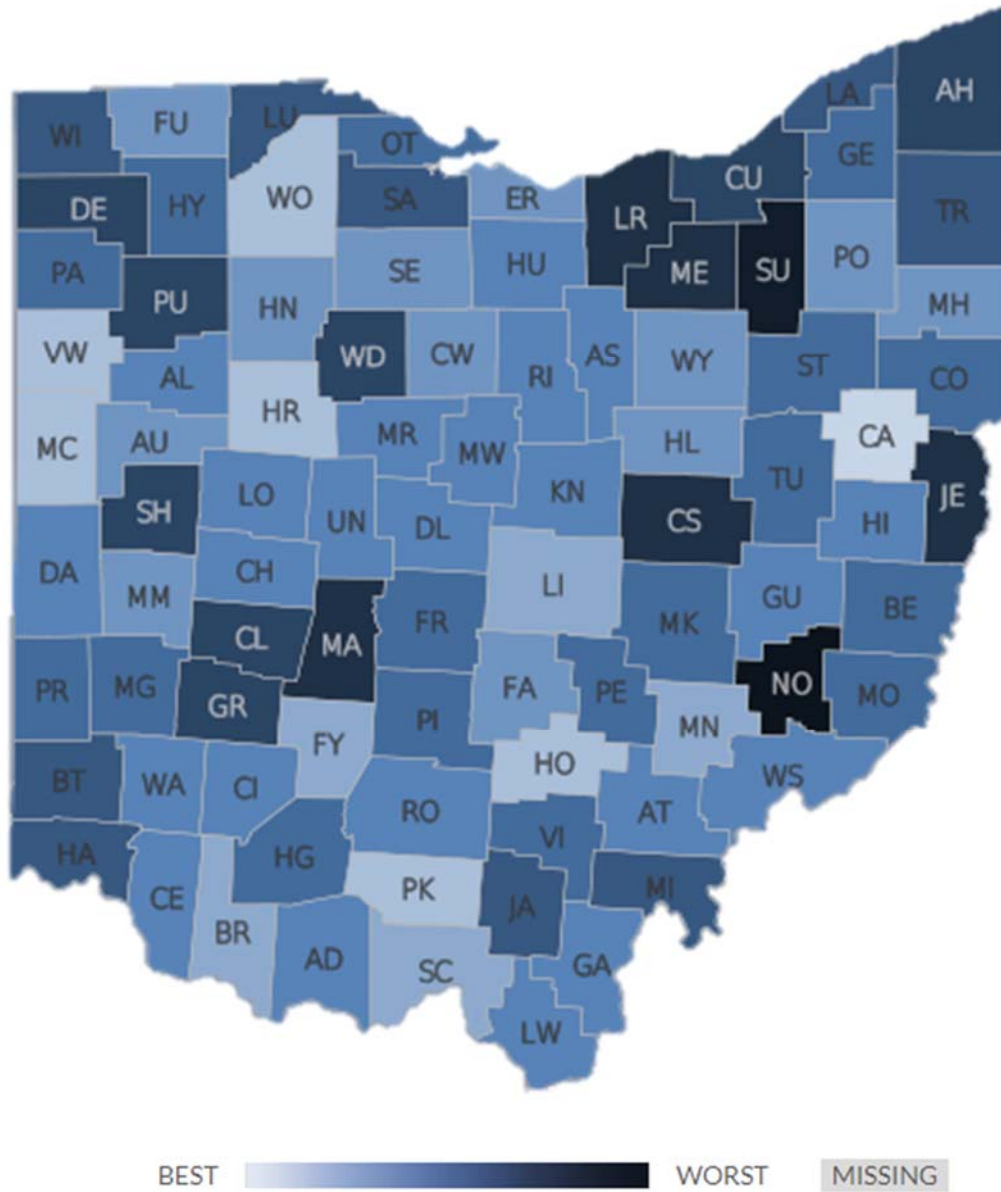
Alcohol Consumption, 2006-2012

	Total Population Age 18+	Estimated Adults Drinking Excessively	Estimated Adults Drinking Excessively (Crude Percentage)	Estimated Adults Drinking Excessively (Age-Adjusted %)
Sandusky County	46,213	9,474	20.5%	24.5%
Ohio	8,781,360	1,536,738	17.5%	18.4%
United States	232,556,016	38,248,349	16.4%	16.9%

(Source: Center for Disease Control and Prevention, 2006-2012, as provided by Great Lakes Community Action Partnership)

Alcohol-Impaired Driving Deaths measures the relationship between alcohol and motor vehicle crash deaths. **Alcohol-Impaired Driving Deaths** is the percentage of motor vehicle crash deaths with alcohol involvement.

- The alcohol-impaired driving deaths in Sandusky County is 33%.
- The alcohol-impaired driving deaths in Ohio is 33%.



(Source: Fatality Analysis Reporting System, 2013-2017, as compiled by County Health Rankings, 2019)

Health Behaviors: Adult Drug Use

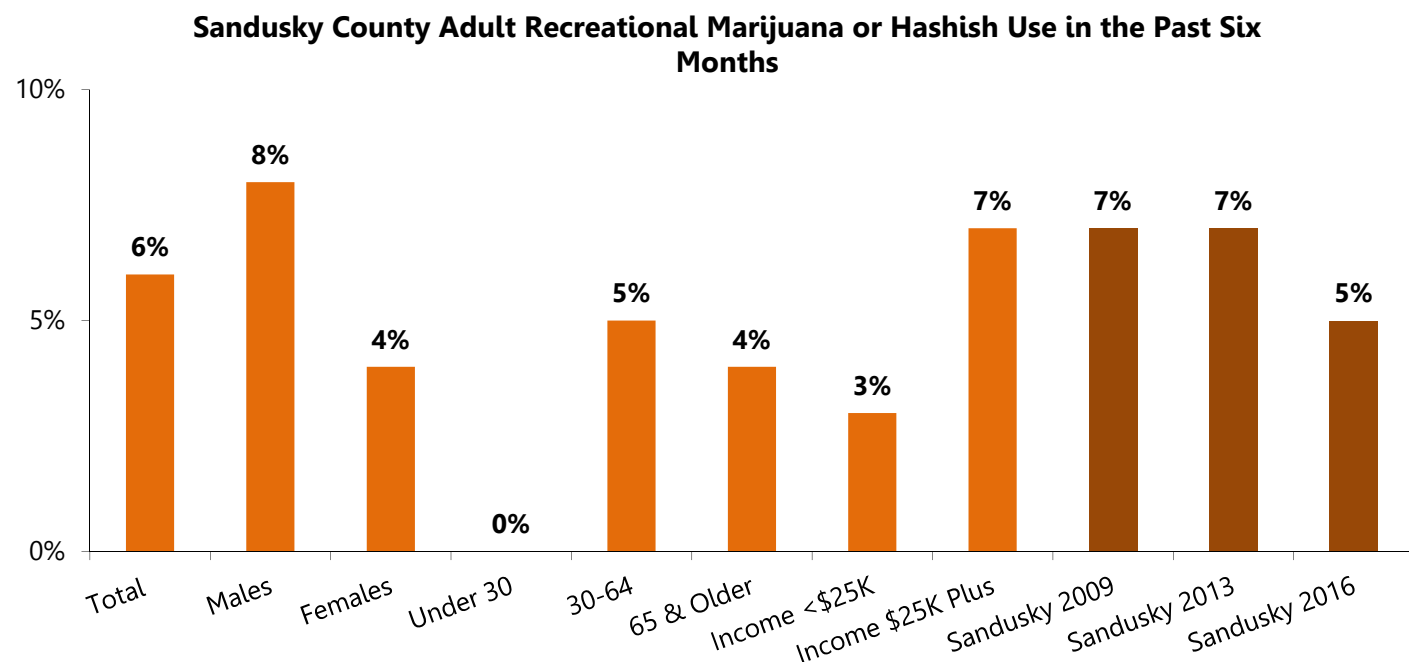
Key Findings

Six percent (6%) of Sandusky County adults had used recreational marijuana or hashish during the past 6 months. Sixteen percent (16%) 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.

Marijuana and Other Drug Use

- Six percent (6%) of Sandusky County adults had used recreational marijuana or hashish in the past 6 months, increasing to 8% of males.
- Nearly one-third (31%) of Sandusky County adults did not agree with legalization of marijuana, in any form. One-quarter (25%) of adults agreed with the legalization of medical marijuana, 2% agreed with the legalization of recreational marijuana, and 42% of adults agreed with the legalization of both types of marijuana.
- One-fifth (20%) of adults thought there was great risk in harming themselves physically or in other ways if they smoked marijuana. About one-third (32%) of adults thought that there was no risk if they smoked marijuana.
- Twelve percent (12%) of Sandusky County adults reported they plan on getting a medical marijuana card.
- One percent (1%) of adults reported using other recreational drugs in the past 6 months such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- As a result of using drugs, Sandusky County adults indicated they or an immediate family member: had legal problems (3%), failed a drug screen (2%), regularly failed to fulfill obligations at work or home (2%), placed themselves in dangerous situations (2%), overdosed and required EMS/hospitalization (1%), and administered Narcan or nasal Naloxone (<1%).

The following graph shows adult recreational marijuana or hashish use in the past 6 months. An example of how to interpret the information in the graph includes: 6% of Sandusky County adults used recreational marijuana or hashish in the past 6 months, including 8% of males.



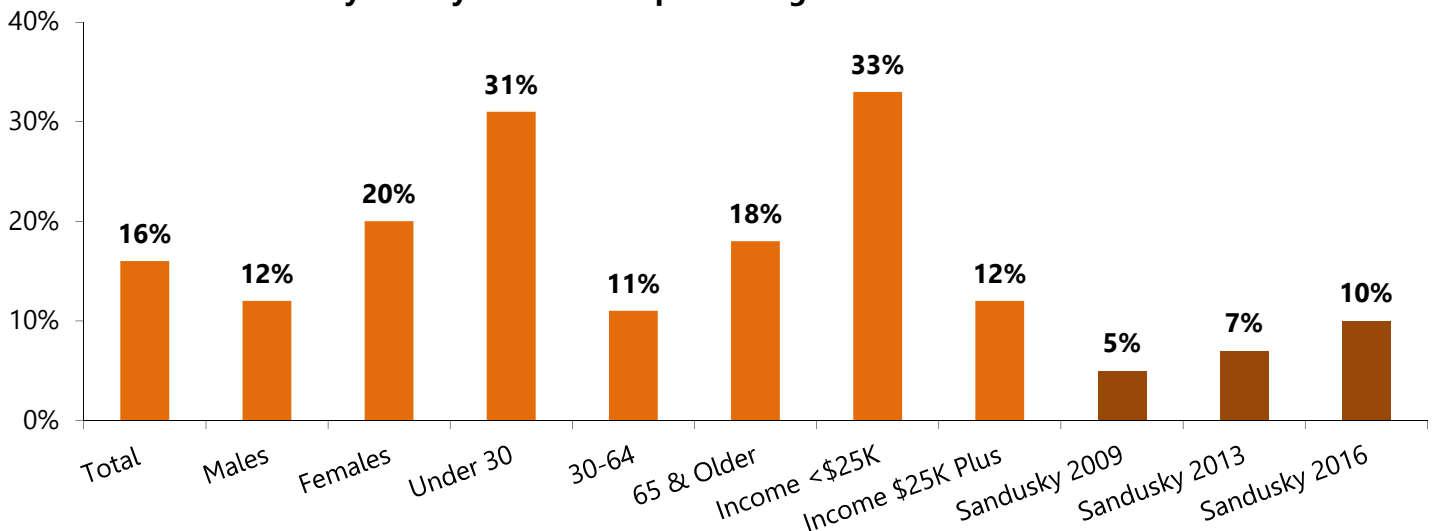
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Prescription Drug Misuse

- In the past six months, 16% of adults had used drugs not prescribed for them or took more than prescribed to feel good, high, and/or more active or alert, increasing to 33% of those with incomes less than \$25,000.
- Adults reported that they, an immediate family member, or someone in their household took the following medications not prescribed to them to feel good, high, and/or more active or alert during the past 6 months: Over-the-counter medications (20%); steroids (5%); Ritalin, Adderall, Concerta, or other ADHD medication (4%); Vicodin (4%); Suboxone or Methadone (3%); Tramadol/Ultram (2%); Codeine, Demerol, Morphine, Percocet, Dilaudid or Fentanyl (2%); OxyContin (2%); Tranquilizers such as Valium or Xanax, sleeping pills, barbiturates, Seconal, Ativan, or Klonopin (2%); and Neurontin (1%).
- Sandusky County adults who misused prescription medications in the past six months obtained them from the following sources: primary care physician (68%), free from a friend or family member (20%), multiple doctors (8%), and bought from a friend or family member (4%).
- Sandusky County adults indicated they did the following with their unused prescription medication: took it to the medication collection program (19%), took as prescribed (18%), kept it (16%), flushed it down the toilet (13%), threw it in the trash (12%), kept in a locked cabinet (5%), took it to the sheriff's office (5%), took it back on Drug Take Back Days (4%), used drug deactivation pouches (<1%), sold it (<1%), and some other method (2%). Thirty-six percent (36%) of adults did not have unused medication.
- Less than one percent (<1%) of adults used a program or service to help with an alcohol or drug problem for them or a loved one. Reasons for not using such a program included the following: stigma of seeking alcohol services (2%), could not afford to go (1%), insurance did not cover it (1%), fear (1%), had not thought of it (1%), no openings available (<1%), did not know how to find a program (<1%), no program available (<1%), did not want to get in trouble (<1%), wait time (<1%), did not want to miss work (<1%), could not get to the office or clinic (<1%), stigma of seeking drug services (<1%), transportation (<1%), and other reason (1%). Ninety-seven percent (97%) of adults indicated such a program was not needed.

The following graph shows Sandusky County adult prescription medication misuse in the past 6 months. An example of how to interpret the information includes: 16% of adults used misused medication in the past 6 months, including 33% of those with incomes less than \$25,000.

Sandusky County Adult Prescription Drug Misuse in the Past Six Months



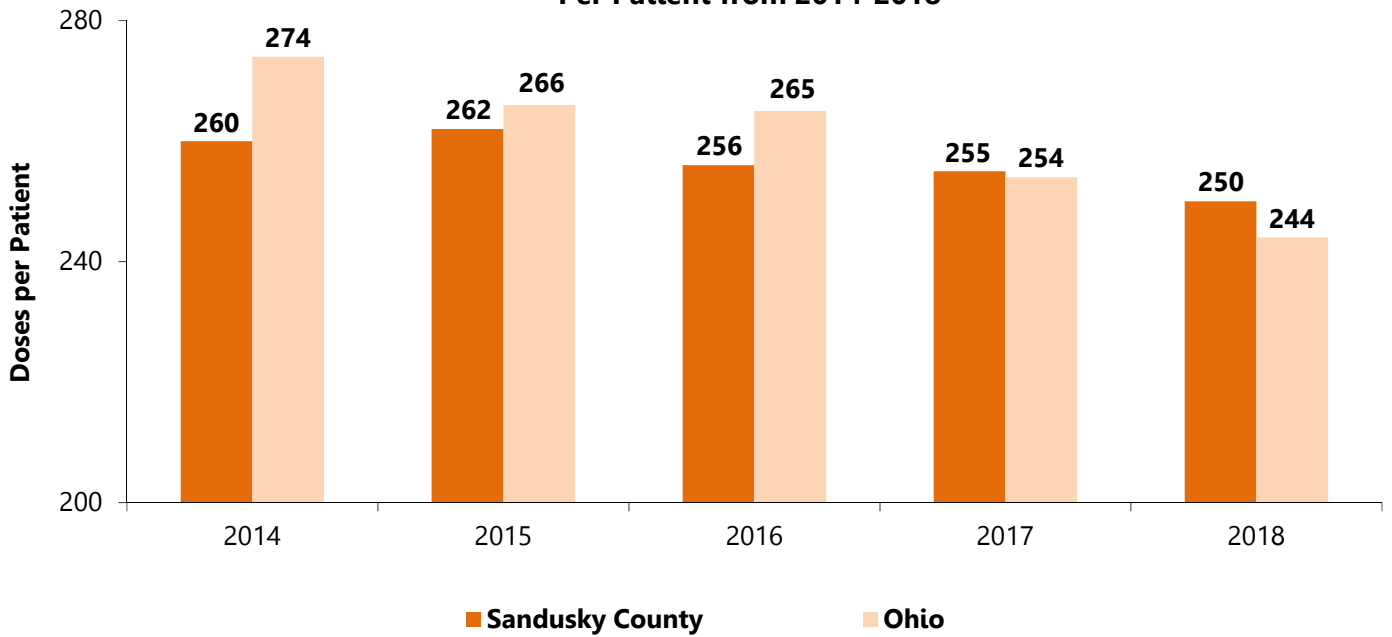
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Used recreational marijuana or hashish in the past six months	7%	7%	5%	6%	N/A	N/A
Misused prescription drugs in the past six months	5%	7%	10%	16%	N/A	N/A
Used recreational drugs in the past six months	7%	1%	2%	1%	N/A	N/A

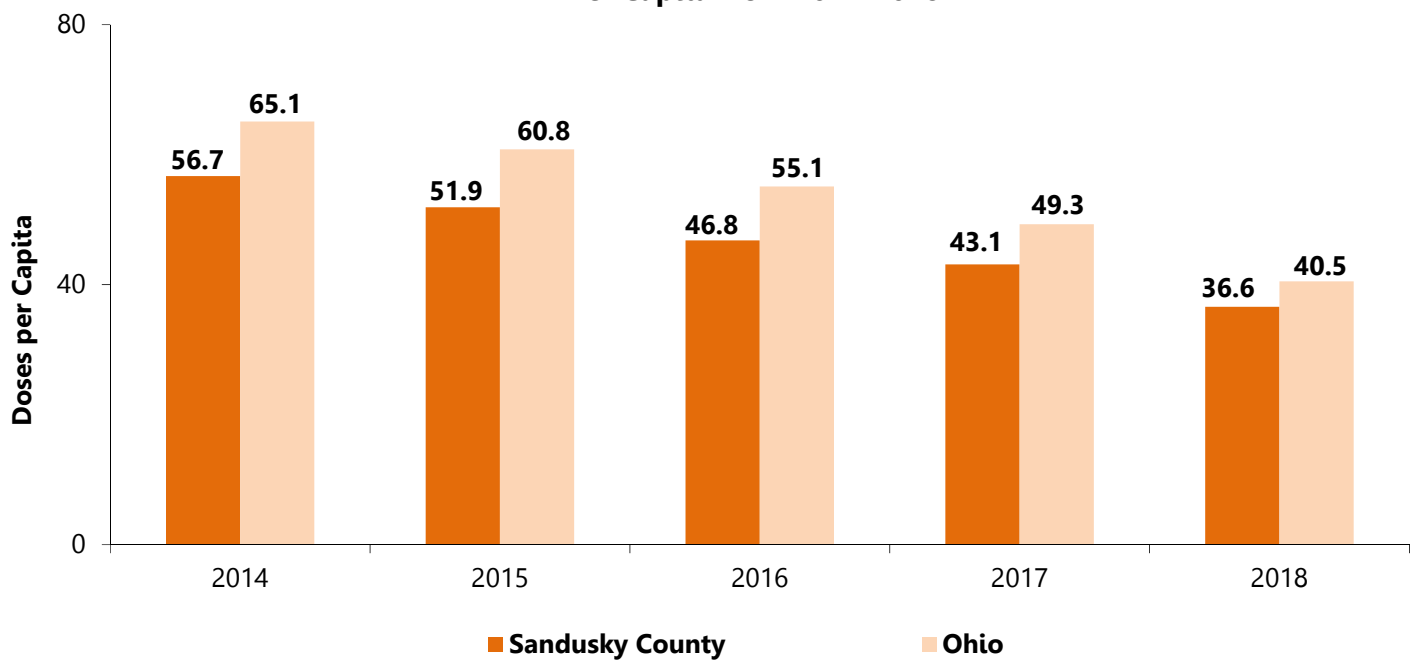
N/A – Not Available

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

Sandusky County and Ohio Number of Opiate and Pain Reliever Doses Per Patient from 2014-2018



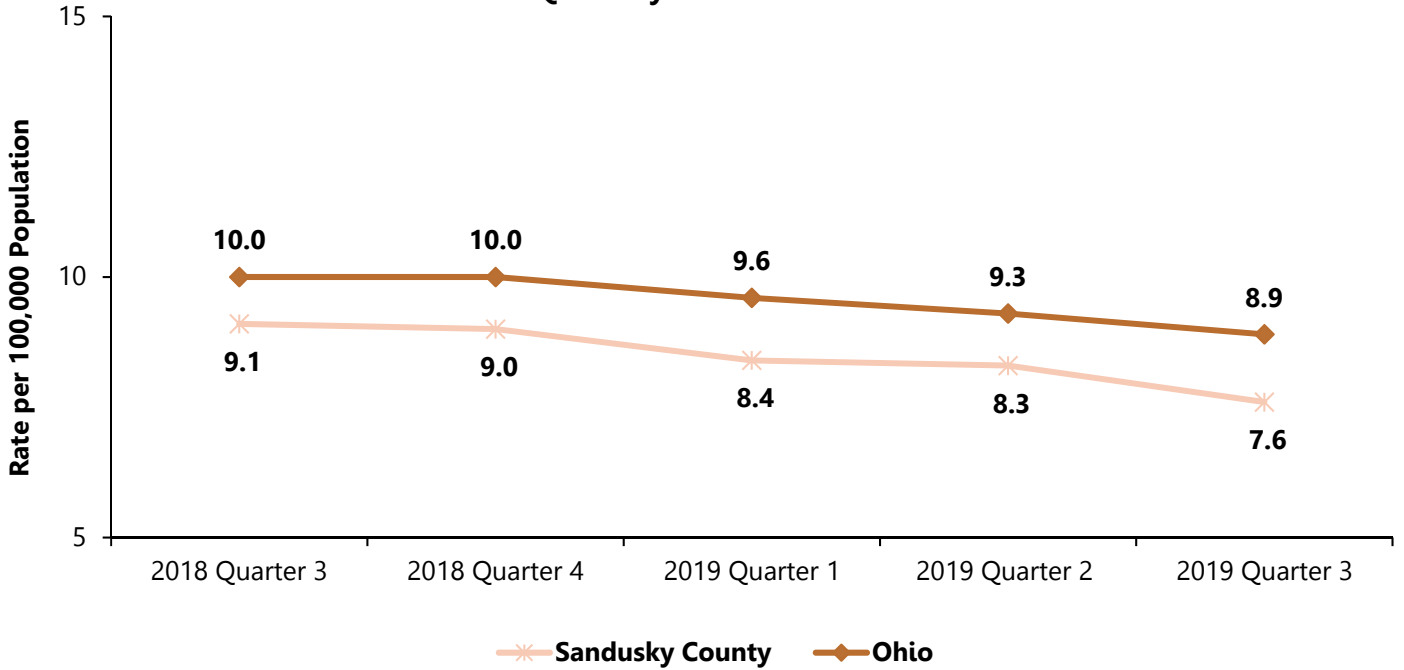
Sandusky County and Ohio Number of Opiate and Pain Reliever Doses Per Capita from 2014-2018



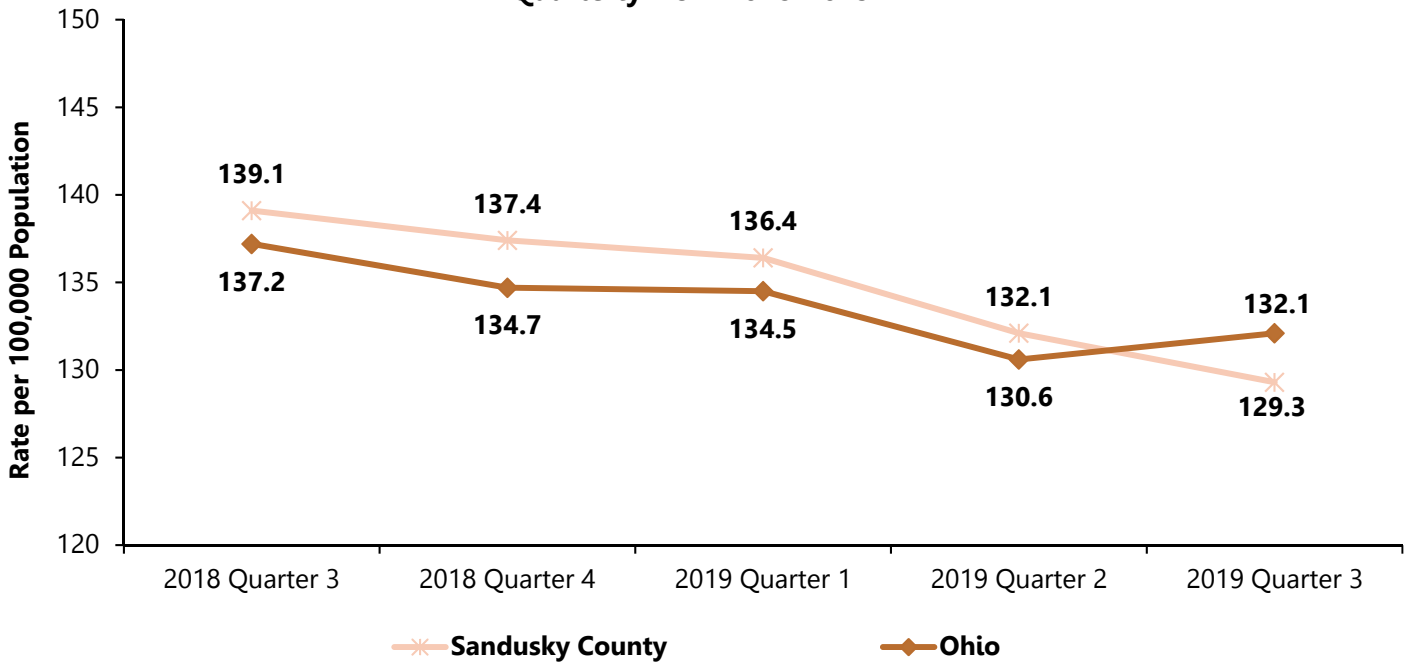
(Source: Ohio Automated Rx Reporting System, Quarterly County Data, 2014-2018)

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

Sandusky County and Ohio Number of Opioid Doses Per Capita Quarterly from 2018-2019



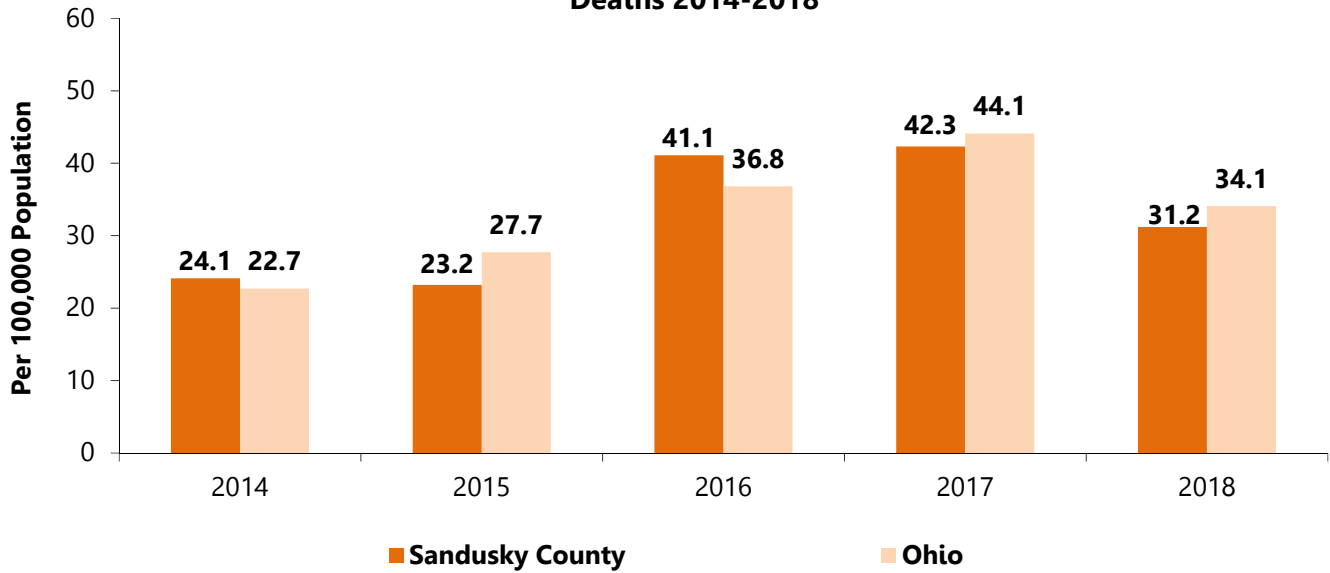
Sandusky County and Ohio Number of Opioid Doses Per Patient Quarterly from 2018-2019



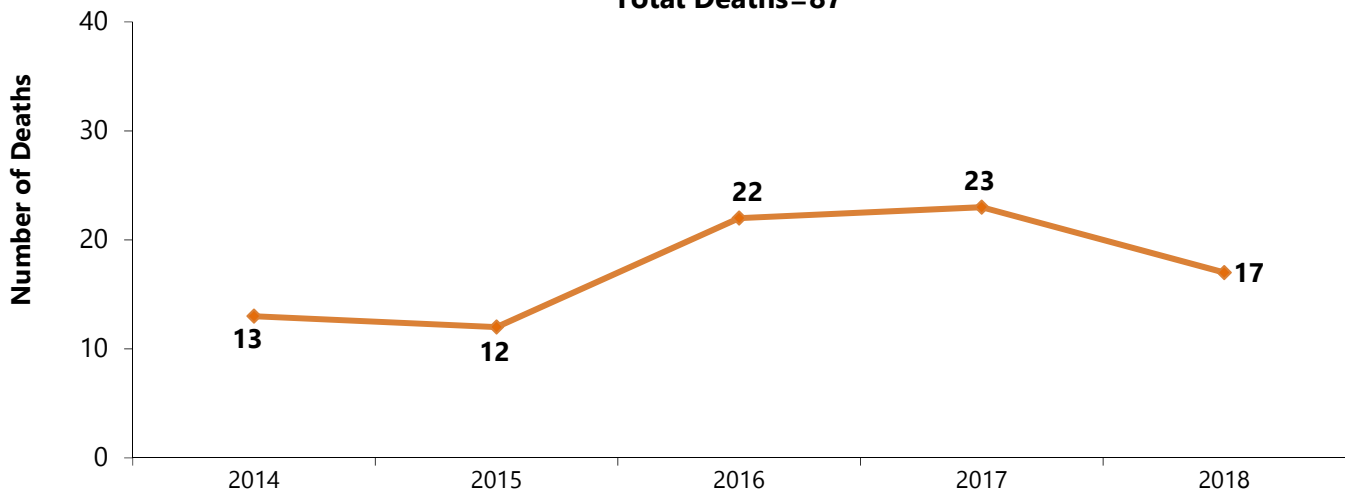
(Source: Ohio's Automated Rx Reporting System, 2018-2019)

The following graphs show the Sandusky County and Ohio age-adjusted unintentional drug overdose deaths and the number of unintentional drug overdoses from 2014 to 2018.

Sandusky County and Ohio Age-Adjusted Unintentional Drug Overdose Deaths 2014-2018



Sandusky County Unintentional Drug Overdose Deaths, 2014-2018
Total Deaths=87

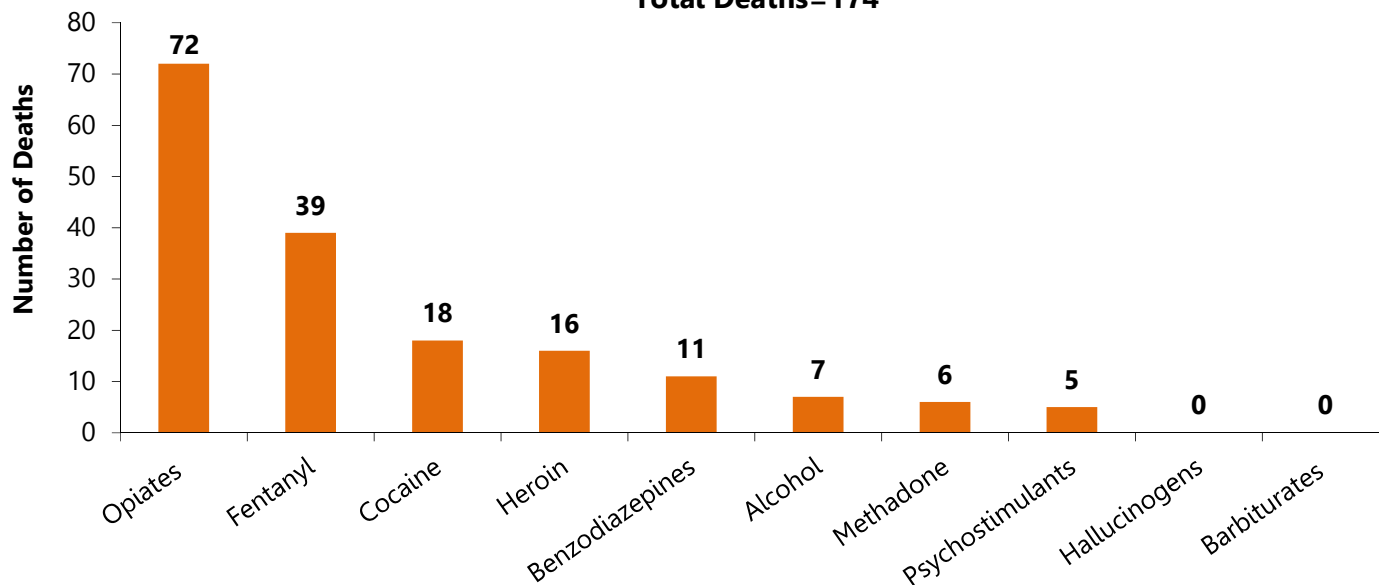


(Source for graphs: Ohio Public Health Data Warehouse, 2014-2018, Updated 1/13/20)

The following graph shows the number of unintentional drug overdose deaths by specific drug from 2009 to 2018 in Sandusky County.

Sandusky County Unintentional Drug Overdose Death by Specific Drug, 2009-2018

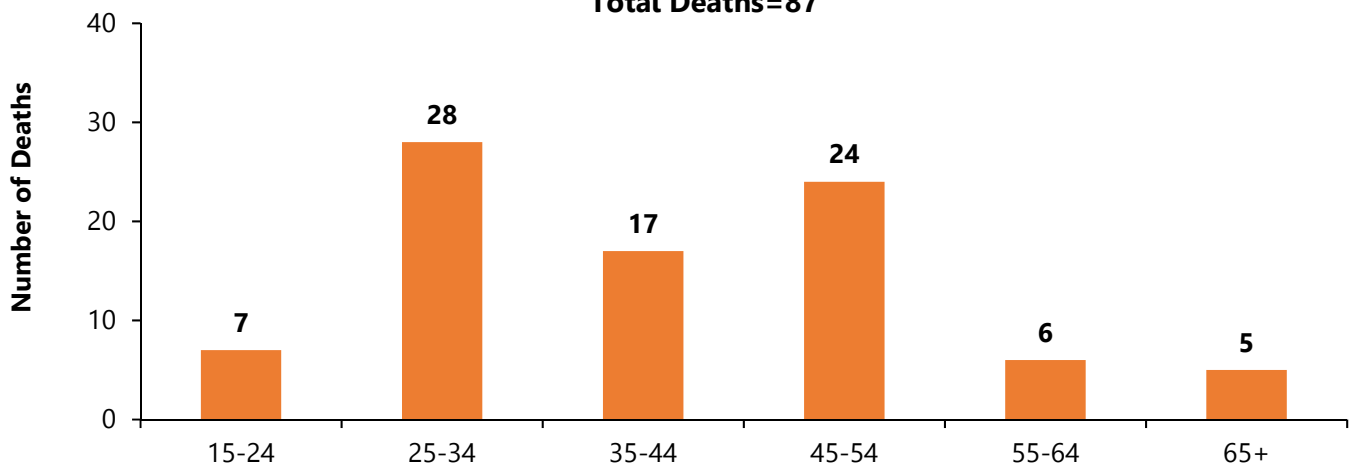
Total Deaths=174



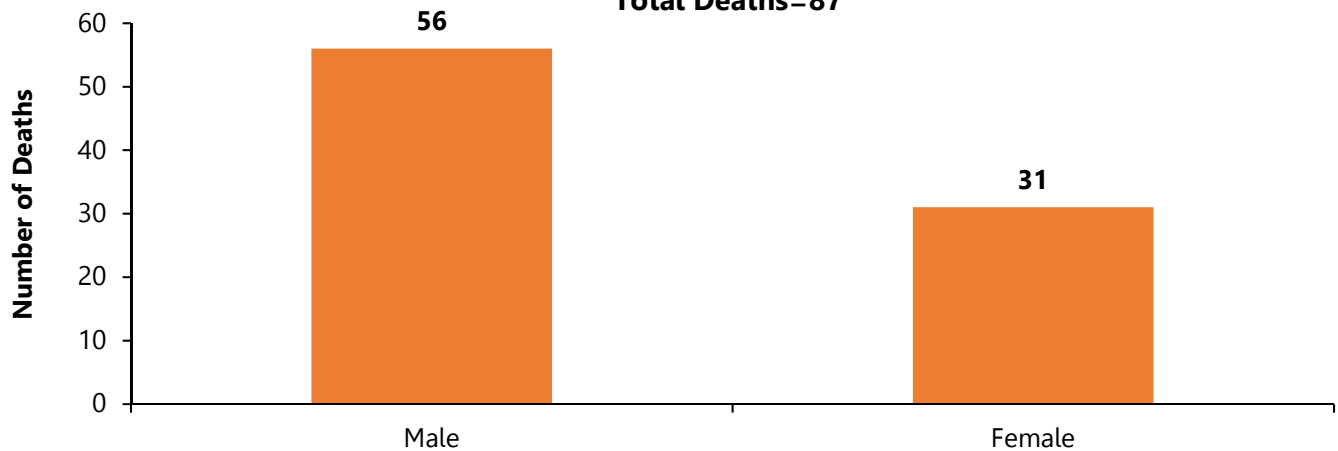
(Source: Ohio Public Health Data Warehouse, 2009-2018 updated 1/15/20)

The following graphs show the number of unintentional drug overdose deaths by age and gender from 2014-2018.

**Sandusky County Unintentional Drug Overdose Deaths by Age
2014-2018
Total Deaths=87**



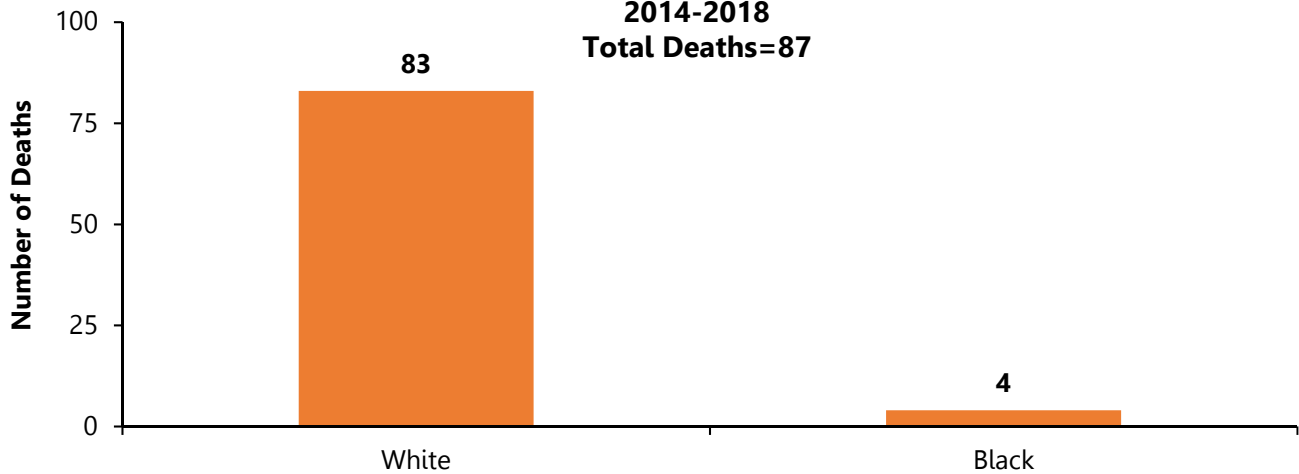
**Sandusky County Unintentional Drug Overdose Deaths by Gender
2014-2018
Total Deaths=87**



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Unintentional Drug Overdose Data, updated 1/15/20)

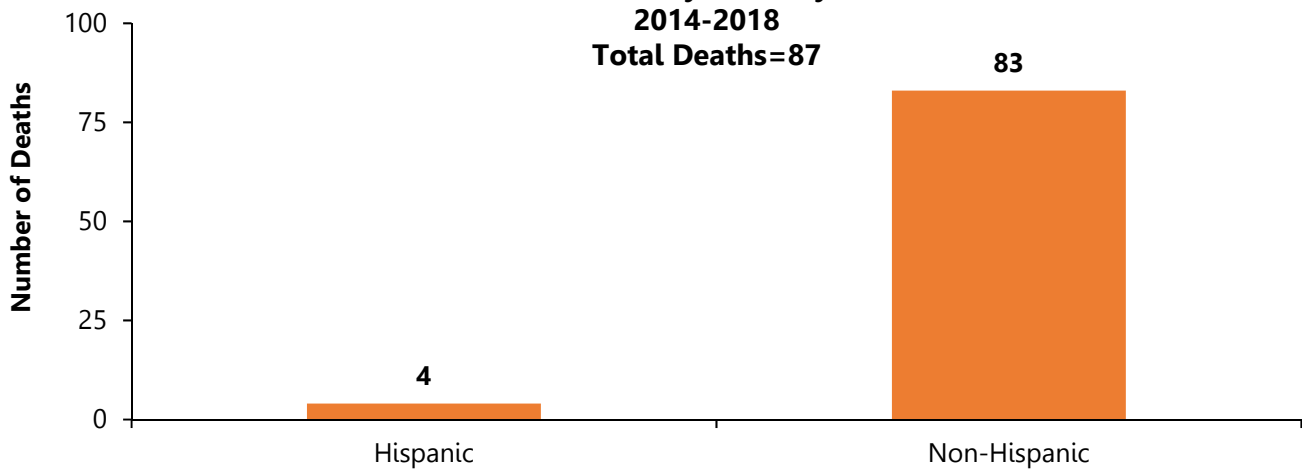
The following graphs show the number of unintentional drug overdose deaths by race and ethnicity from 2014-2018.

Sandusky County Age-Adjusted Unintentional Drug Overdose Mortality Rates by Race* 2014-2018
Total Deaths=87



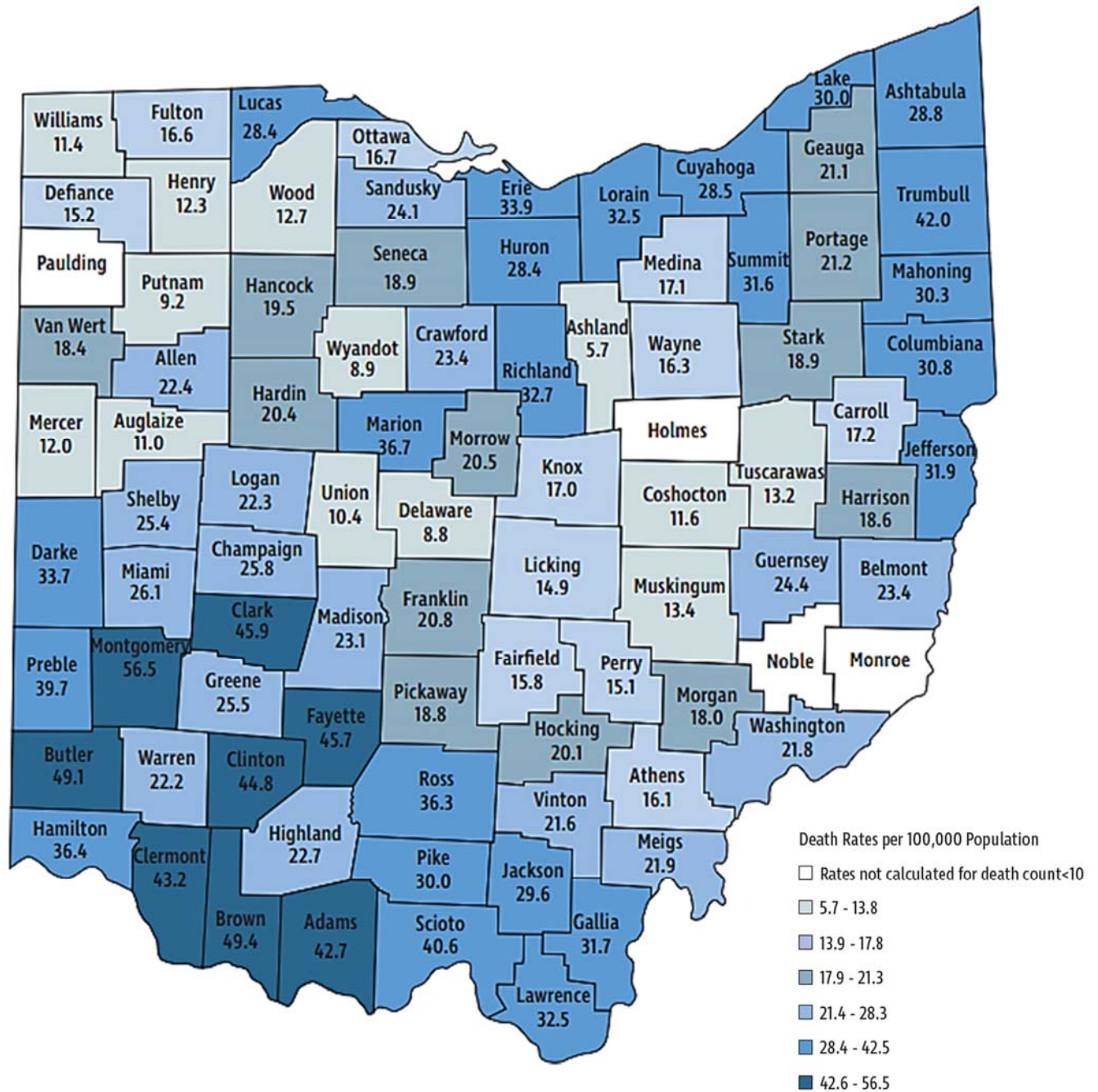
*Races represented are white and black. All other races were N/A due to low rates.

Sandusky County Age-Adjusted Unintentional Drug Overdose Mortality Rates by Ethnicity 2014-2018
Total Deaths=87



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Unintentional Drug Overdose Data, updated 1/15/20)

The following map illustrates the average age-adjusted drug overdose death rate per 100,000 population, by county from 2012-2017.



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

Health Behaviors: Adult Sexual Behavior

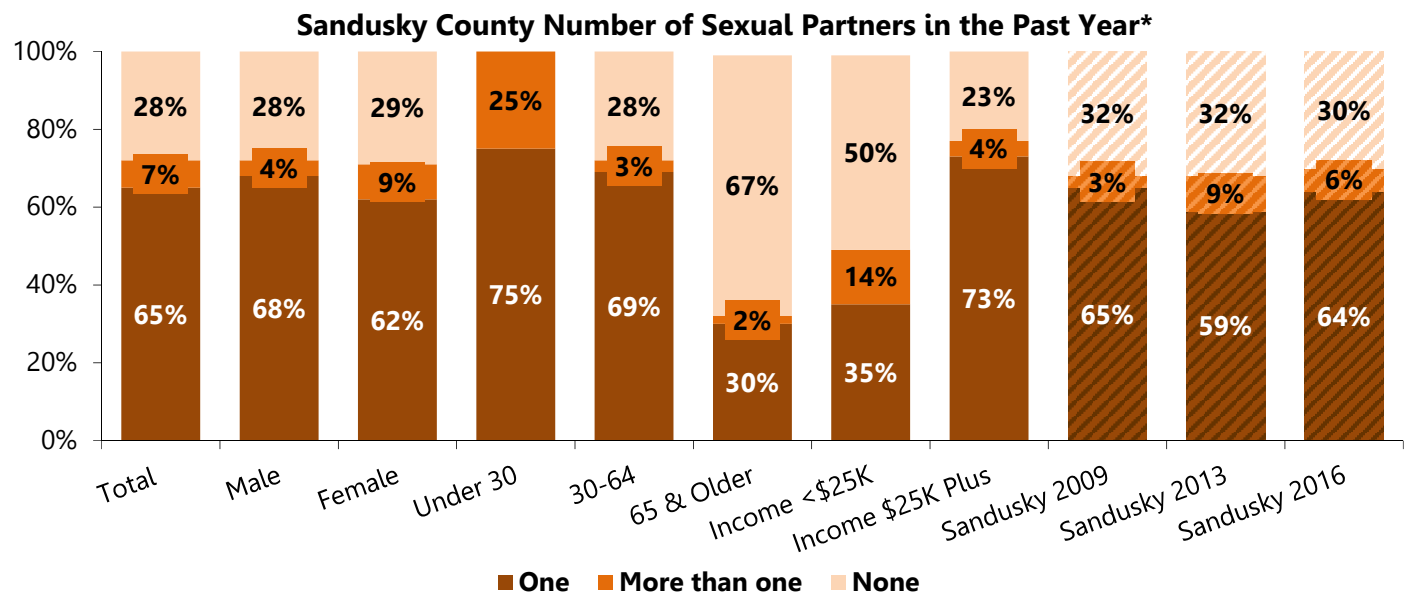
Key Findings

Seventy-two percent (72%) of Sandusky County adults had sexual intercourse in the past year. Seven percent (7%) of adults had more than one sexual partner in the past year.

Adult Sexual Behavior

- Seventy-two percent (72%) of Sandusky County adults had sexual intercourse in the past year. Seven percent (7%) of adults reported they had intercourse with more than one partner in the past year.
- Twenty-nine percent (29%) of adults had been tested for HIV.

The following graph shows the number of sexual partners that Sandusky County adults had in the past year. An example of how to interpret the information includes: 65% of all Sandusky County adults had one sexual partner in the past year, 7% had more than one partner, and 28% did not have a sexual partner.



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

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	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Had more than one sexual partner in past year	3%	9%	6%	7%	N/A	N/A
Ever been tested for HIV	25%	20%	23%	29%	N/A	N/A

N/A – Not Available

- Sandusky County adults used the following methods of birth control: abstinence (18%); vasectomy (17%); they or their partner were too old (16%); tubes tied (11%); hysterectomy (10%); condoms (7%); infertility (7%); birth control pill (4%); IUD (5%); withdrawal (4%); rhythm method (2%); diaphragm, cervical ring or cap (<1%); and other methods (3%). Two percent (2%) of adults reported they and their partner were trying to get pregnant. Fourteen percent (14%) of Sandusky County adults were not using any method of birth control.
- Sandusky adults reported the following situations applied to them:
 - Had sex without a condom in the past year (29%)
 - Had anal sex without a condom in the past year (6%)
 - Had sexual activity with someone of the same gender (5%)
 - Had sex with someone they met on social media (4%)
 - Tested positive for HPV (4%)
 - Had four or more sexual partners in the past year (4%)
 - Following alcohol or other drug use, they engaged in sexual activity that they would not have done if sober (3%)
 - Had sex with someone they did not know (2%)
 - Had been treated for a sexually transmitted disease (STD) in the past year (1%)
 - Given or received money or drugs in exchange for sex in the past year (1%)
 - Injected any drug other than those prescribed in the past year (<1%)
 - Knew someone involved in sex trafficking (<1%)
 - Had been forced to have sex (<1%)
 - Tested positive for HIV (<1%)
 - Tested positive for Hepatitis C (<1%)
- Ten percent (10%) of adults were forced or coerced to have any sexual activity when they did not want to. One percent (1%) of those who were forced or coerced to have any sexual activity reported it.
- Sandusky County adults had been diagnosed with the following sexually transmitted diseases (STDs) in the past five years: human papilloma virus (HPV) (2%), genital herpes (1%), gonorrhea (<1%), hepatitis c (<1%), and other STDs (2%).

Scope of the Problem: Sexual Violence

- 1 out of every 6 American women has been the victim of an attempted or completed rape in her lifetime (14.8% completed, 2.8% attempted).
- About 3% of American men—or 1 in 33—have experienced an attempted or completed rape in their lifetime.
- From 2009-2013, Child Protective Services agencies substantiated, or found strong evidence to indicate that, 63,000 children a year were victims of sexual abuse.
- A majority of child victims are 12-17. Of victims under the age of 18: 34% of victims of sexual assault and rape are under age 12, and 66% of victims of sexual assault and rape are age 12-17.
- Every 98 seconds another American is sexually assaulted.
- Number of people victimized each year:
 - 80,600 were sexually assaulted or raped
 - 60,000 were victims of “substantiated or indicated” sexual abuse
 - 321,500 Americans 12 and older were sexually assaulted or raped
 - 18,900 experienced unwanted sexual contact

(Source: RAINN 25 years, Scope of the Problem: Statistics, 2019)

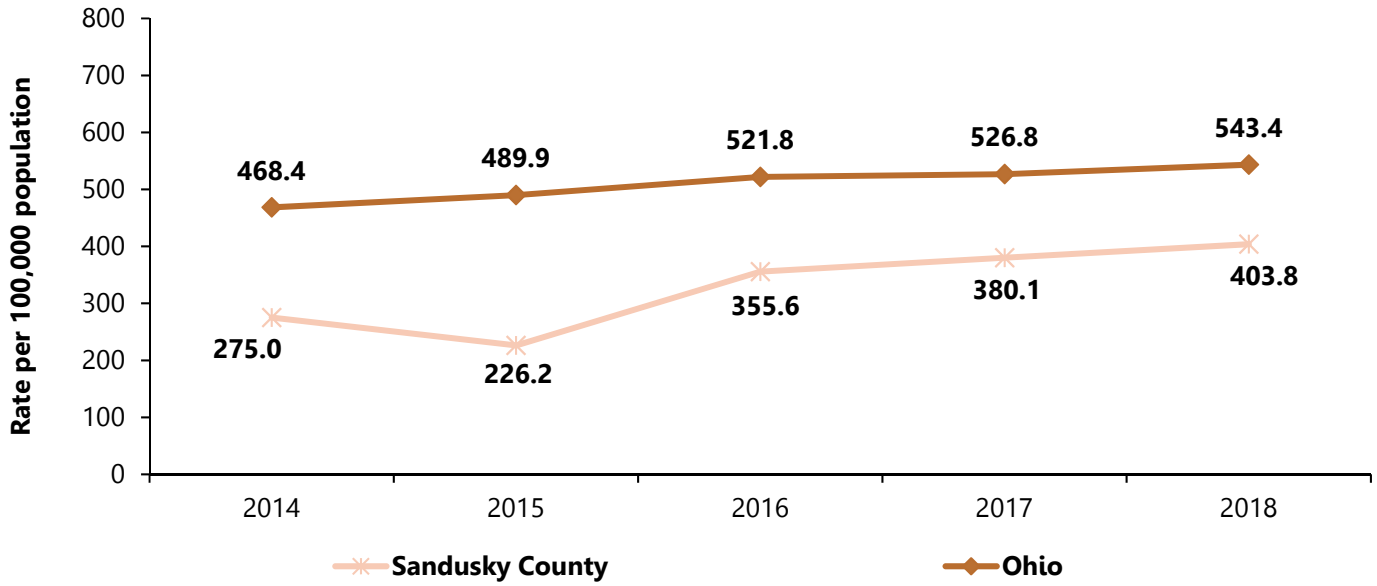
Reproductive Health and Wellness Communicable Disease Reported Cases, 2018

Reproductive Health and Wellness Communicable Disease Reported Cases	
Disease	Number of Cases
Gonorrhea	52
Chlamydia	253
Syphilis	3
HIV	0

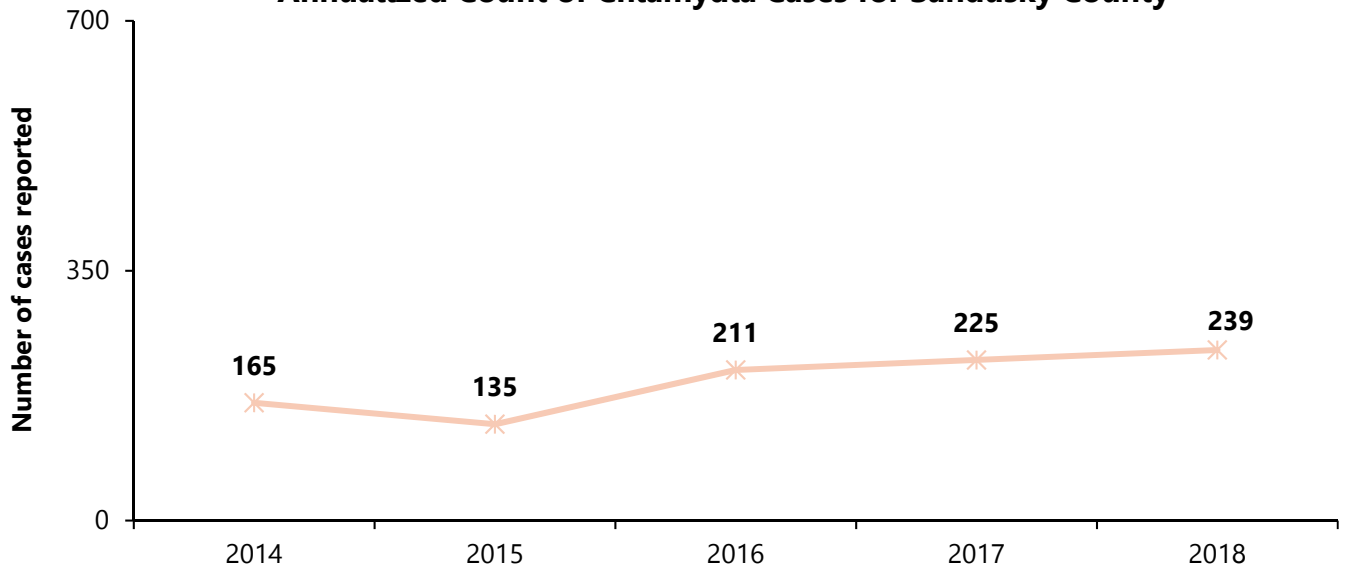
(Source: Sandusky County Public Health, 2018)

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

Chlamydia Annualized Disease Rates for Sandusky County and Ohio

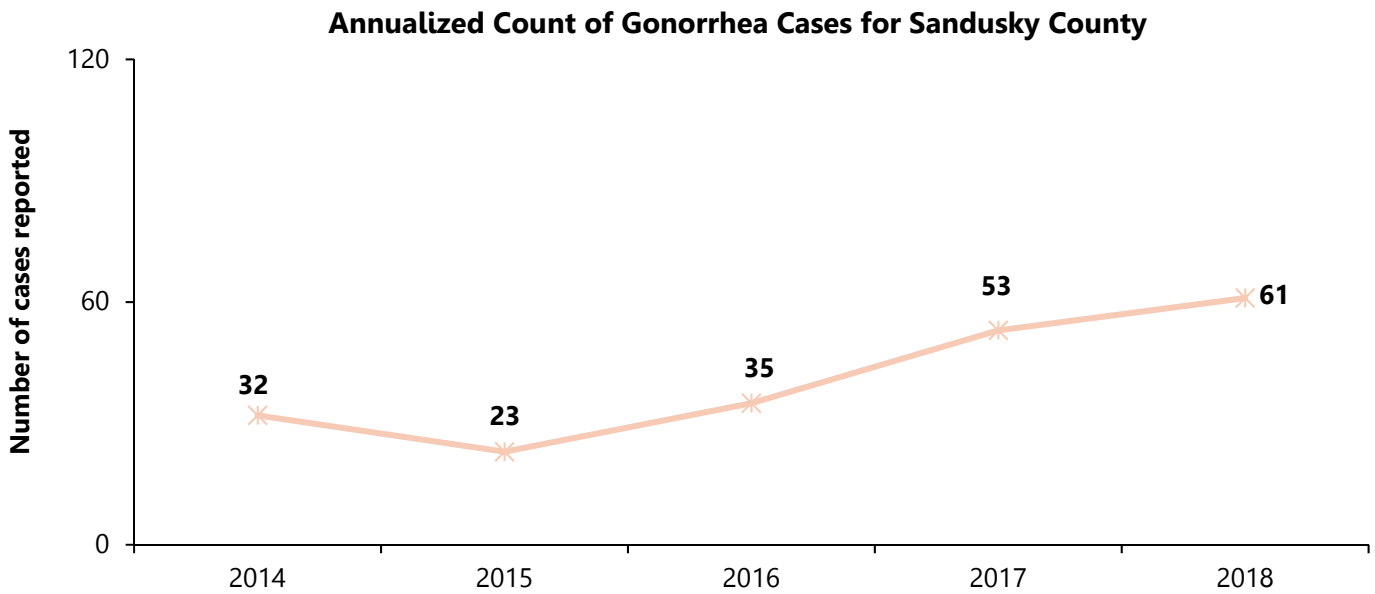
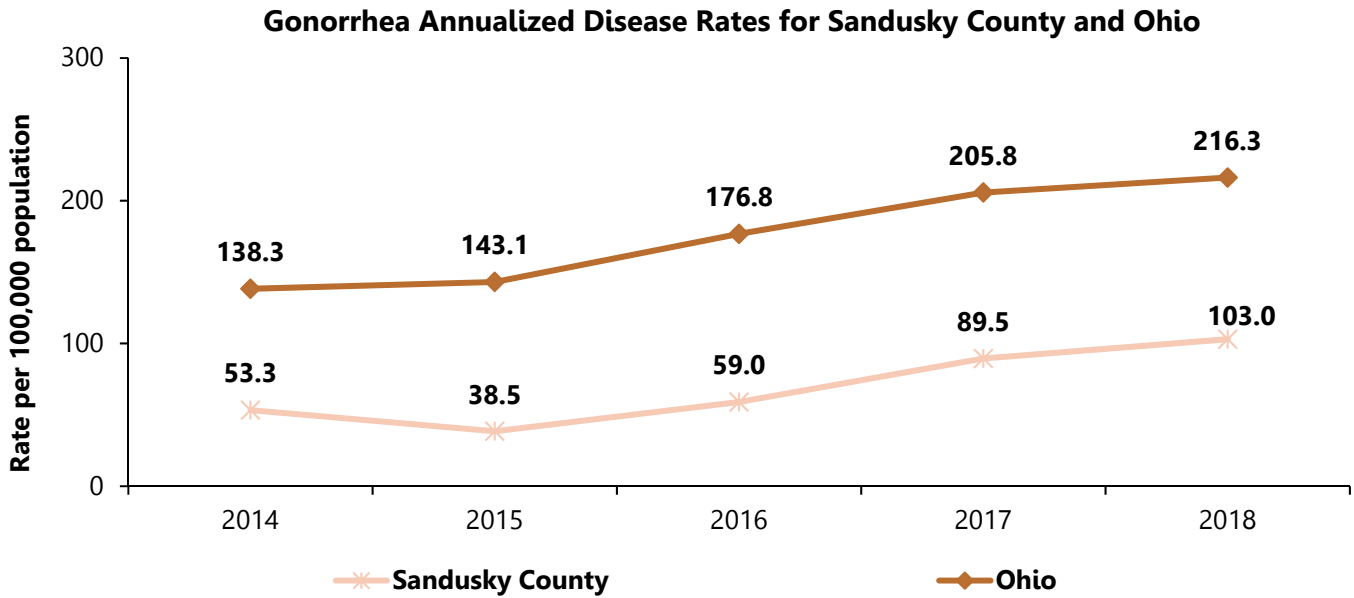


Annualized Count of Chlamydia Cases for Sandusky County



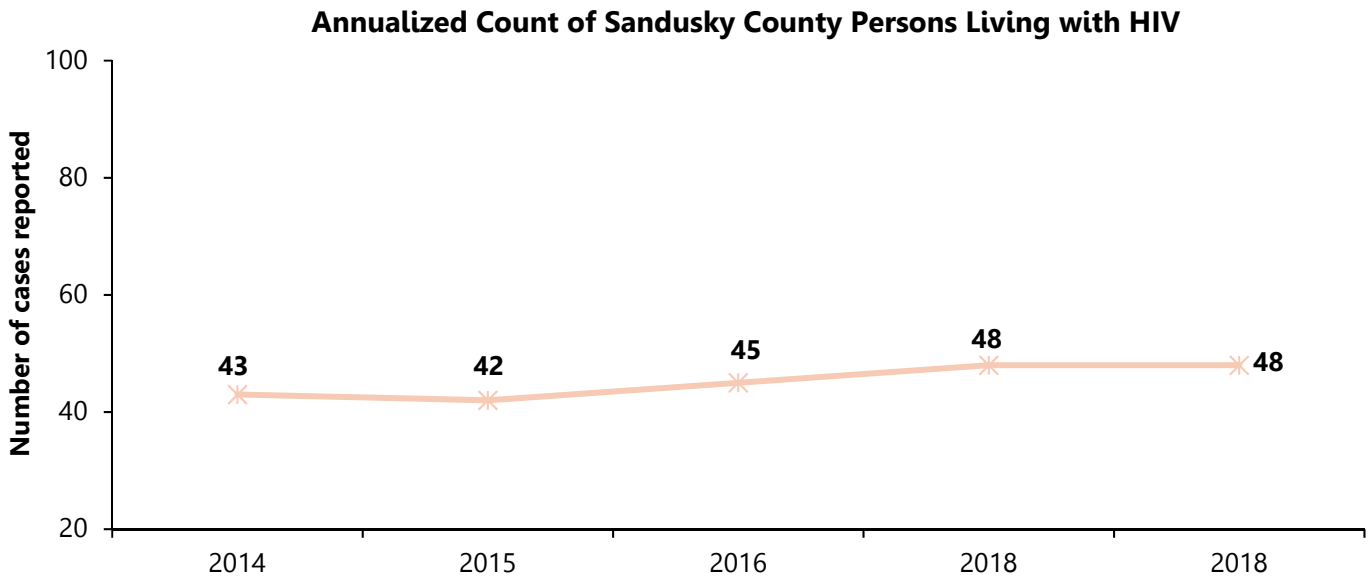
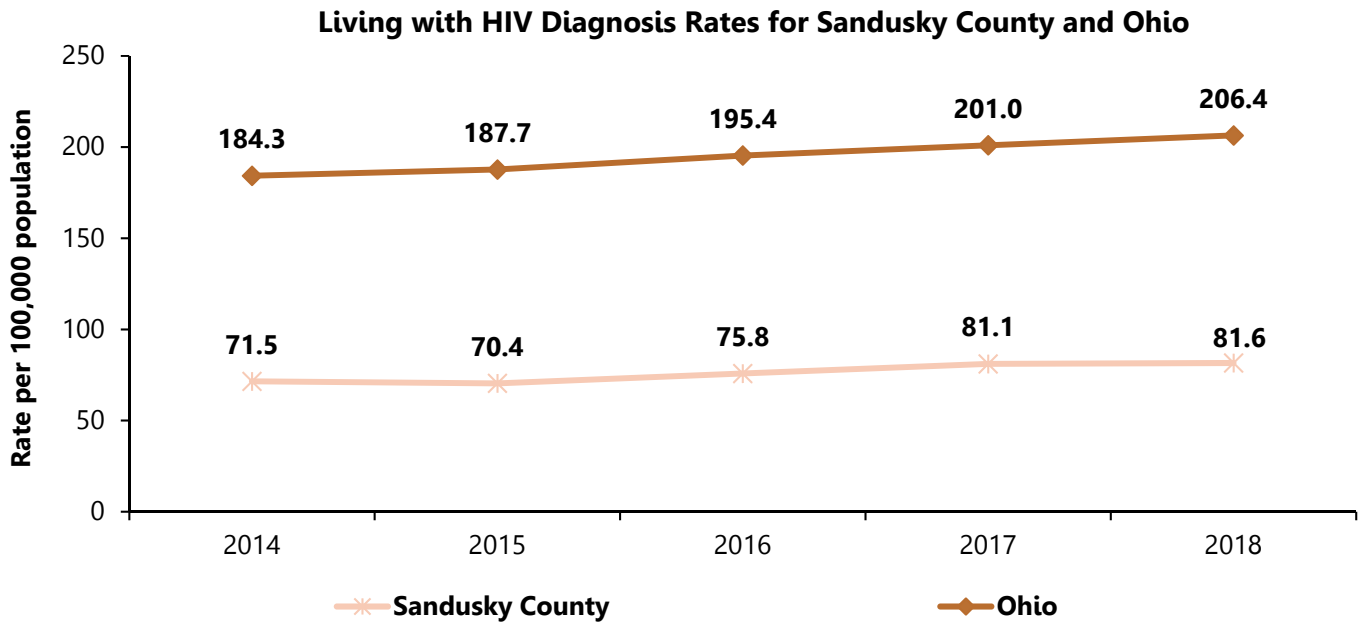
(Source: Ohio Department of Health, STD Surveillance Program, Data reported through 5/2/19)

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



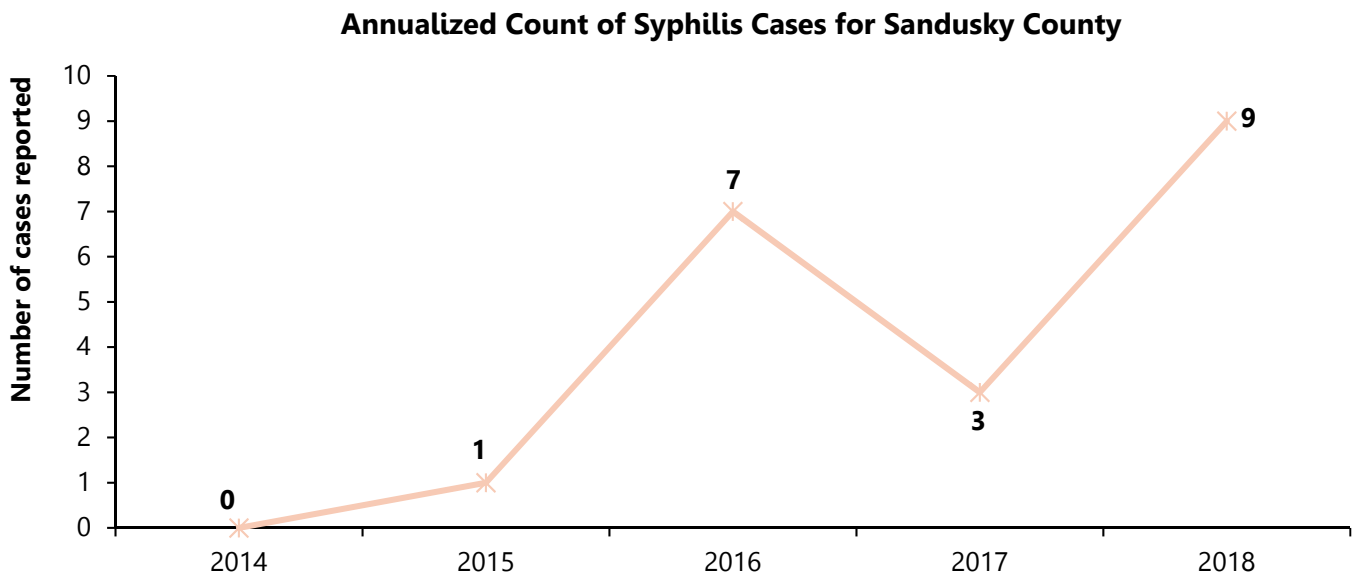
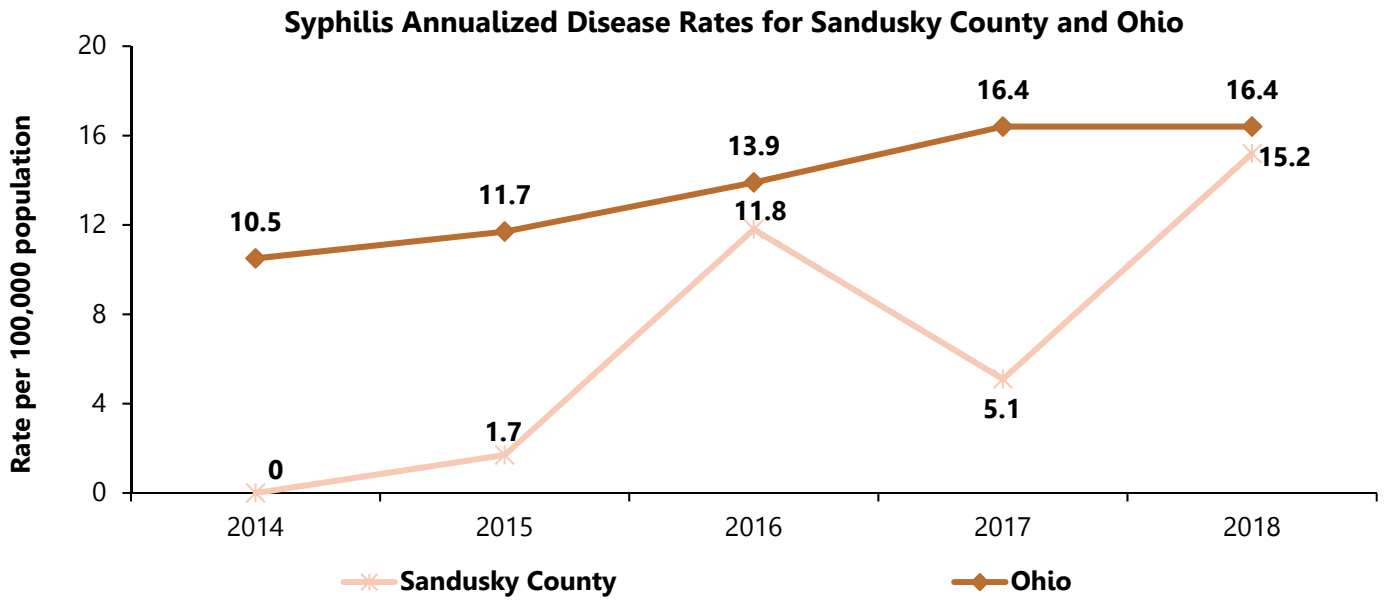
(Source for graphs: Ohio Department of Health, STD Surveillance Program, Data Reported through 5/2/19)

The following graphs show Sandusky County HIV diagnosis rates per 100,000 population for Sandusky County and Ohio residents living with HIV and the number of adults living with a HIV diagnosis in Sandusky County.



(Source: Ohio Department of Health, HIV Surveillance Program, Data Reported through 6/30/19)

The following graphs show Sandusky County syphilis disease rates per 100,000 population and the number of syphilis disease cases.



(Source: Ohio Department of Health, STD Surveillance Program, Data Reported through 5/2/19)

Health Behaviors: Adult Mental Health

Key Findings

In the past year, 12% of Sandusky 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. Six percent (6%) of Sandusky County adults considered attempting suicide, and 2% actually attempted suicide.

Adult Mental Health

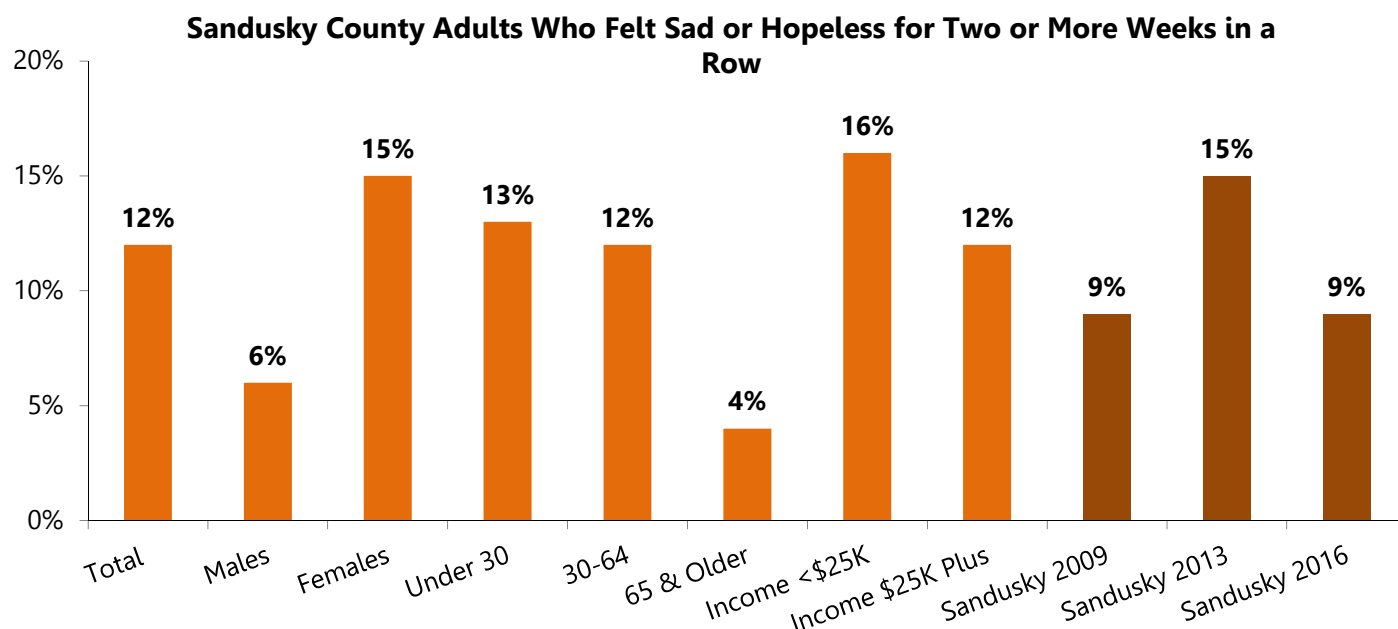
- In the past year, 12% of Sandusky County adults had a period of two or more weeks when they felt so sad or hopeless nearly every day that they stopped doing usual activities, increasing to 16% of those with incomes less than \$25,000.
- Six percent (6%) of all Sandusky County adults seriously considered attempting suicide in the past year.
- Three percent (3%) of adults made a plan about attempting suicide in the past year.
- Two percent (2%) of adults attempted suicide in the past year.
- Adults reported they would do the following if someone they knew was suicidal: talk to them (74%), try to calm them down (55%), call 9-1-1 (49%), call a crisis line (48%), take them to the ER (31%), call a friend (20%), call a spiritual leader (19%), and text a crisis line (8%). Two percent (2%) of adults reported they would do nothing if someone they knew was severely depressed, in crisis or suicidal.
- Adults were aware of the following warning signs of someone who was suicidal:
 - Threatening to hurt or kill oneself (70%)
 - Talking or writing about death, dying or suicide (70%)
 - Looking for ways to kill oneself (weapons, pills or other means) (67%)
 - Feelings of hopelessness, worthlessness, self-reproach, or excessive or inappropriate guilt (65%)
 - Made plans or preparations for a potentially serious attempt (64%)
 - Recurrent thoughts of suicide (63%)
 - Intense anxiety, agitation or restlessness (62%)
 - Fatigue or loss of energy (58%)
 - Decreased concentration, indecisiveness, or poorer memory (57%)
 - Changes in appetite or weight (54%)
 - Changes in sleeping patterns (54%)
- Sandusky County adults reported they or a family member were diagnosed with, or treated for, the following mental health issues in the past year: anxiety or emotional problems (31%), depression (30%), an anxiety disorder (23%), attention deficit disorder (ADD/ADHD) (13%), bipolar disorder (8%), post-traumatic stress disorder (PTSD) (7%), alcohol and illicit drug abuse (7%), other trauma (6%), autism spectrum (5%), developmental disability (4%), life-adjustment disorder/issue (2%), eating disorder (1%), gambling problem (1%), psychotic disorder (1%), and some other mental health disorder (5%). Twenty-seven percent (27%) of adults indicated that they or a family member had taken medication for one or more mental health issues.
- Sixty-three percent (63%) of adults believed that prescription medications help with mental health disorders.
- Sandusky County adults reported the following caused them anxiety, stress, or depression: financial stress (42%), job stress (40%), poverty/no money (21%), death of close family member or friend (21%), other stress at home (20%), marital/dating relationships (19%), family member sick (14%), fighting in the home (12%), caring for a parent or others (10%), family member with a mental illness (9%), unemployment (6%), divorce/separation (5%), not having enough to eat (4%), sexual orientation/gender identity (3%), not feeling safe at home (2%), not feeling safe in the community (2%), not having a place to live (1%), and other (12%).

- Adults dealt with stress in the following ways: engaged in prayer/meditation (39%), talked to someone they trust (36%), listened to music (33%), exercised (30%), slept (29%), ate more or less than normal (26%), worked on a hobby (25%), worked (18%), drank alcohol (14%), smoked tobacco (9%), took it out on others (7%), called a professional (7%), used prescription drugs as prescribed (6%), used illegal drugs (1%), self-harmed (1%), and other ways (14%).
- Sandusky County adults gave the following reasons for not using a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems: not needed/not necessary (59%), a program has been used (14%), had not thought of it (9%), could not afford to go (6%), stigma of seeking mental health services (5%), co-pay/deductible too high (4%), fear (3%), other priorities (2%), did not know how to find a program (2%), took too long to get in to see a doctor (2%), could not find mental health provider (2%), transportation (1%), could not get to the office/clinic (1%), and other reasons (5%).

Adult Gambling

- Sandusky County adults engaged in some form of gambling: daily (1%), every few days (<1%), weekly (4%), every few weeks (3%), monthly (3%), every few months (11%), once or twice a year (32%), or never (46%).

The following graph shows adults who felt sad or hopeless for two or more weeks in a row. An example of how to interpret the information includes: 12% of Sandusky County adults felt sad or hopeless for two or more weeks in a row, including 6% 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	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Felt sad or hopeless for two or more weeks in a row in the past year	9%	15%	9%	12%	N/A	N/A
Seriously considered attempting suicide in the past year	2%	6%	1%	6%	N/A	N/A
Attempted suicide in the past year	0%	1%	0%	2%	N/A	N/A

N/A – Not Available

Access to Mental Health Providers, 2018

	Estimated Population	Number of Mental Health Providers	Ratio of M.H Providers to Population (1 provider per x persons)	Mental health Care providers Per 100,000 Population
Sandusky County	60,182	43	1,399.6	71.4
Ohio	11,594,095	17,953	645.8	154.8
United States	317,105,555	643,219	493.0	202.8

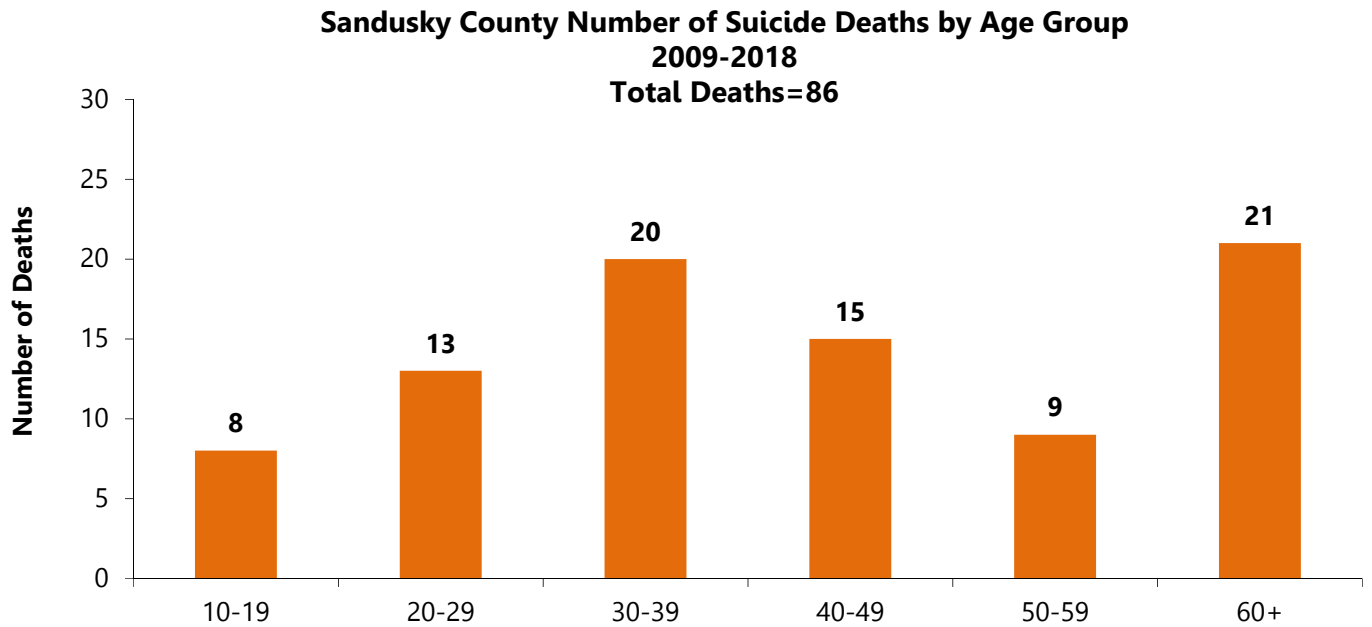
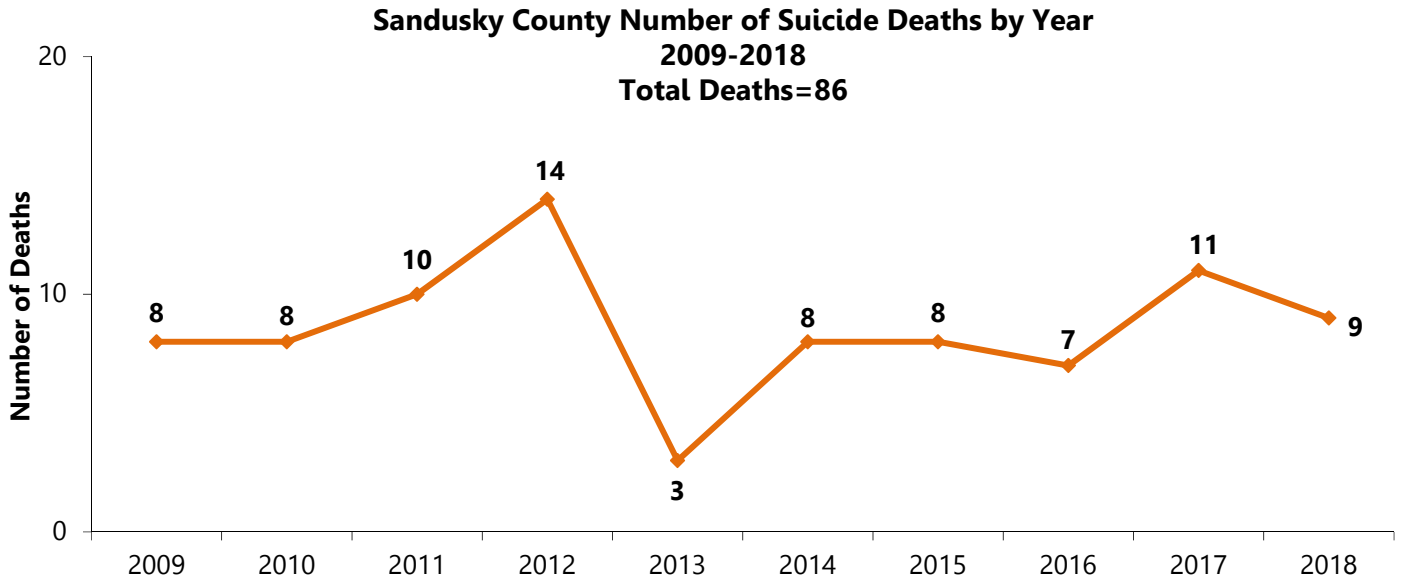
(Source: University of Wisconsin Population Health Institute, 2018, as provided by Great Lakes Community Action Partnership)

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 (54%) half 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.

(Source: CDC, Centers for Disease Control and Prevention, Rural Health, Suicide in Rural America, Updated on May 2, 2019)

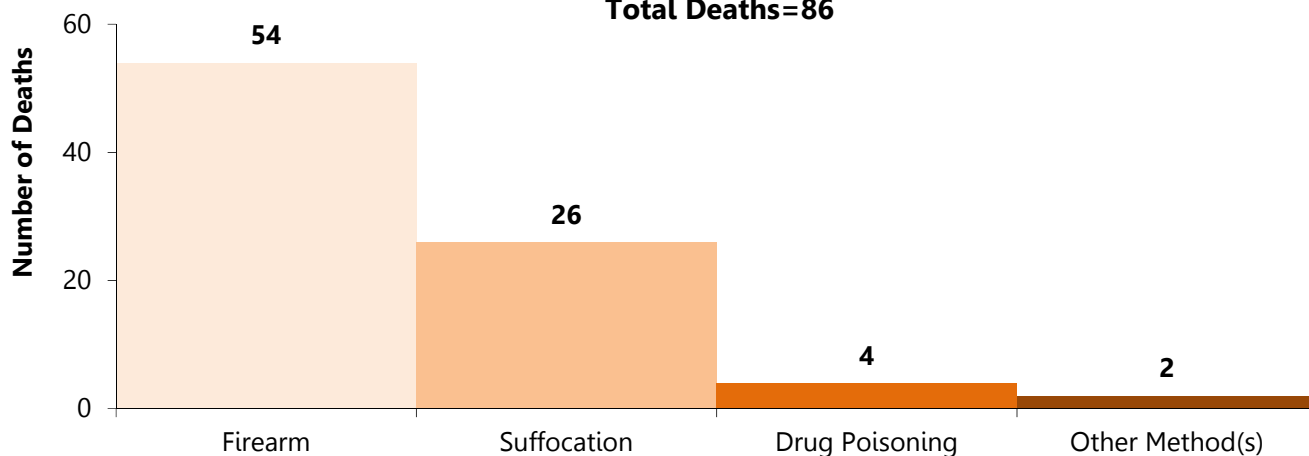
The graphs below show the Sandusky County suicide counts by year and by age group from 2009 to 2018.



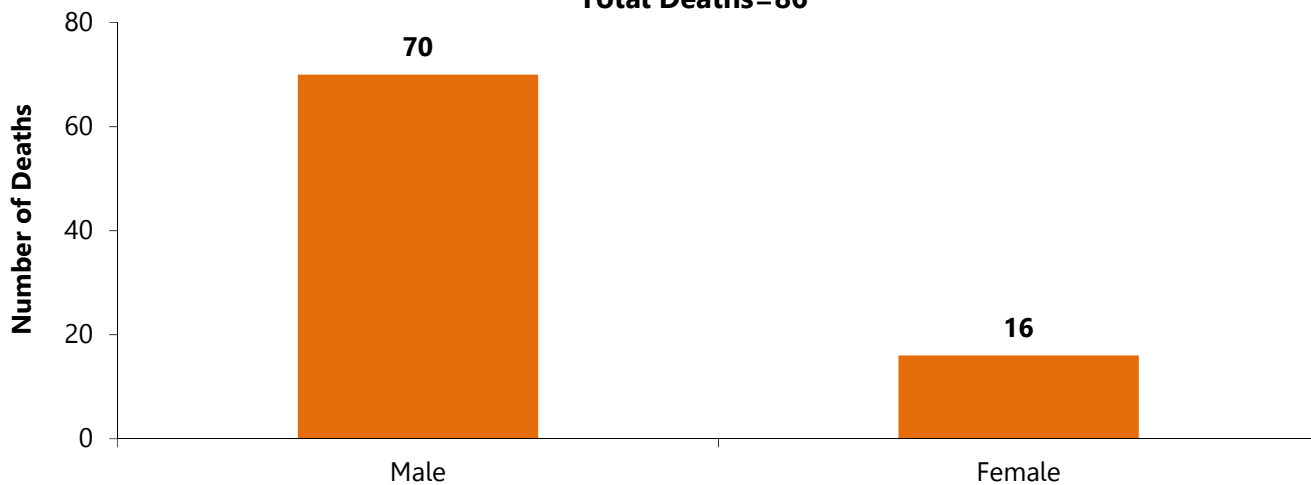
(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 1/12/2020)

The graphs below show the number of suicide deaths by mechanism and gender in Sandusky County from 2009 to 2018.

**Sandusky County Number of Suicide Deaths by Mechanism
2009-2018
Total Deaths=86**



**Sandusky County Number of Suicide Deaths by Gender
2009-2018
Total Deaths=86**



(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 1/12/2020)

Chronic Disease: Cardiovascular Health

Key Findings

More than one-third (38%) of adults had high blood pressure and 37% had high blood cholesterol. Three percent (3%) of adults survived a heart attack and 3% survived a stroke.

Heart Disease and Stroke

- According to the Sandusky County Coroner, the top 5 causes of death in Sandusky County for 2018 were:
 - Heart
 - Cancer
 - Pulmonary
 - Dementia
 - Renal
- Three percent (3%) of adults reported they had survived a heart attack or myocardial infarction, increasing to 8% of those over the age of 65.
- Three percent (3%) of adults reported they had survived a stroke, increasing to 5% of those with incomes less than \$25,000.
- Four percent (4%) of adults reported they had angina or coronary heart disease, increasing to 8% of those over the age of 65.
- Two percent (2%) of adults reported they had congestive heart failure, increasing to 7% of those over the age of 65 and 4% of those with incomes less than \$25,000.

High Blood Pressure (Hypertension)

- More than one-third (38%) of adults had been diagnosed with high blood pressure.
- Seventy-five percent (75%) of adults had their blood pressure checked within the past year.
- Sandusky County adults diagnosed with high blood pressure were more likely to have:
 - Been ages 65 years or older (69%)
 - Been classified as obese by body mass index (54%)
 - Rated their overall health as fair or poor (20%)
- Seven percent (7%) of adults were told they were pre-hypertensive/borderline high

High Blood Cholesterol

- More than one-third (37%) of adults had been diagnosed with high blood cholesterol.
- Eighty-four percent (84%) of adults had their blood cholesterol checked within the past 5 years.
- Sandusky County adults with high blood cholesterol were more likely to have:
 - Been ages 65 years or older (60%)
 - Been classified as obese by body mass index (47%)
 - Have rated their overall health as fair or poor (22%)

Sandusky County Leading Causes of Death, 2016-2018

Total Deaths: 2,076

1. Heart Disease (23% of all deaths)
2. Cancer (22%)
3. Accidents, Unintentional Injury (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (4%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

Ohio Leading Causes of Death, 2016-2018

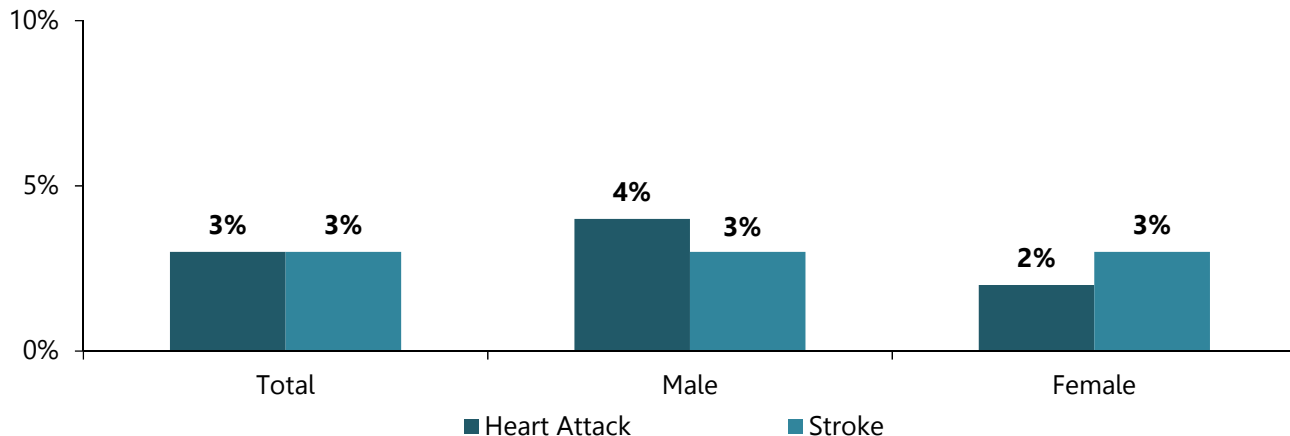
Total Deaths: 367,518

1. Heart Diseases (23% of all deaths)
2. Cancer (21%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2016-2018)

The following graph shows the percentage of Sandusky County adults who had survived a heart attack or stroke in their lifetime by gender. An example of how to interpret the information includes: 4% of Sandusky County males survived a heart attack compared to 2% of females.

Sandusky County Adults Who Had Survived a Heart Attack or Stroke In Their Lifetime



(Source: 2019 Sandusky County Health Assessment)

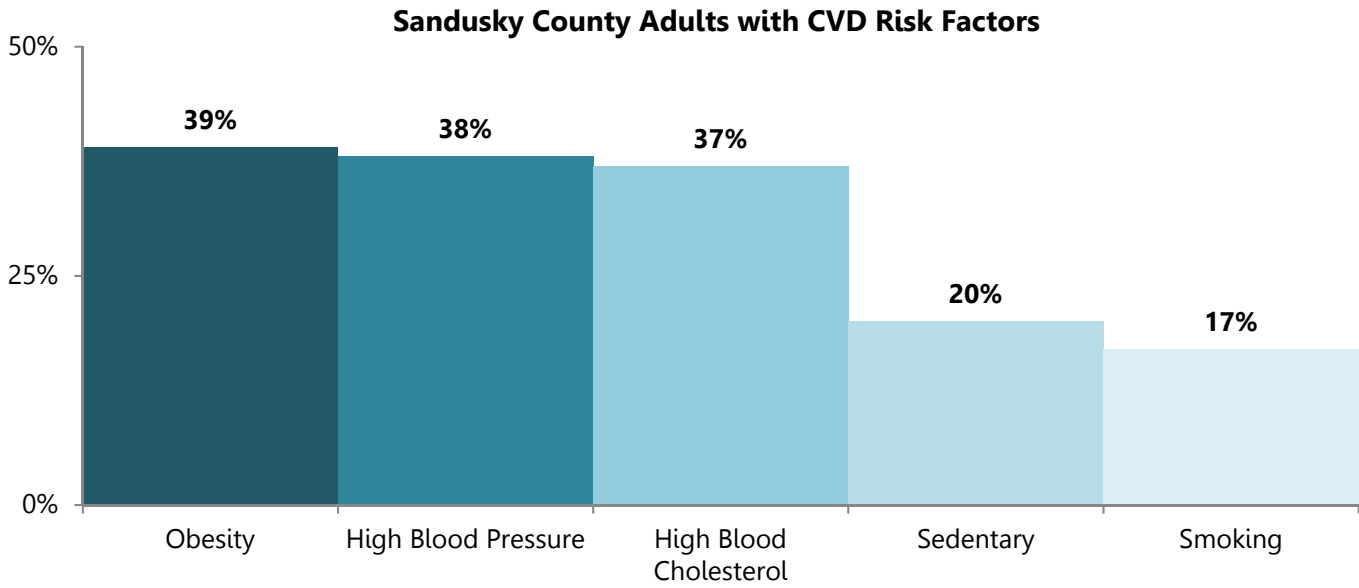
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Ever diagnosed with angina or coronary heart disease	4%	8%	4%	4%	5%	4%
Ever diagnosed with a heart attack or myocardial infarction	4%	5%	6%	3%	6%	4%
Ever diagnosed with a stroke	4%	3%	2%	3%	4%	3%
Had been told they had high blood pressure	34%	31%	33%	38%	35%*	33%*
Had been told their blood cholesterol was high	27%	35%	34%	37%	33%*	33%*
Had their blood cholesterol checked within the last five years	N/A	80%	75%	84%	85%*	87%*

N/A-Not Available

*2017 BRFSS

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



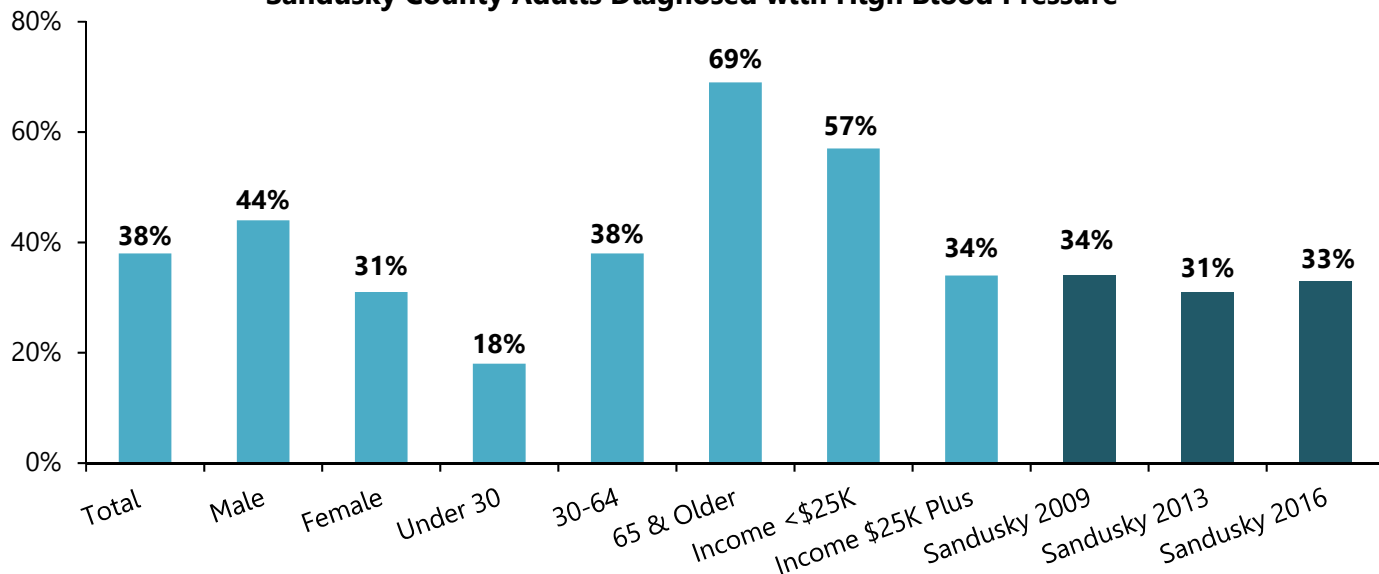
**Healthy People 2020 Objectives
Heart Disease and Stroke**

Objective	2019 Sandusky Survey Population Baseline	2017 U.S. Baseline	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	38%	33% Adults age 18 and up	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	37%	86% Adults age 18 and up	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC) levels	37%	33% Adults age 20+ with TBC > 240 mg/dl	14%

(Source: Healthy People 2020, 2017 BRFSS, 2019 Sandusky County Community Health Assessment)

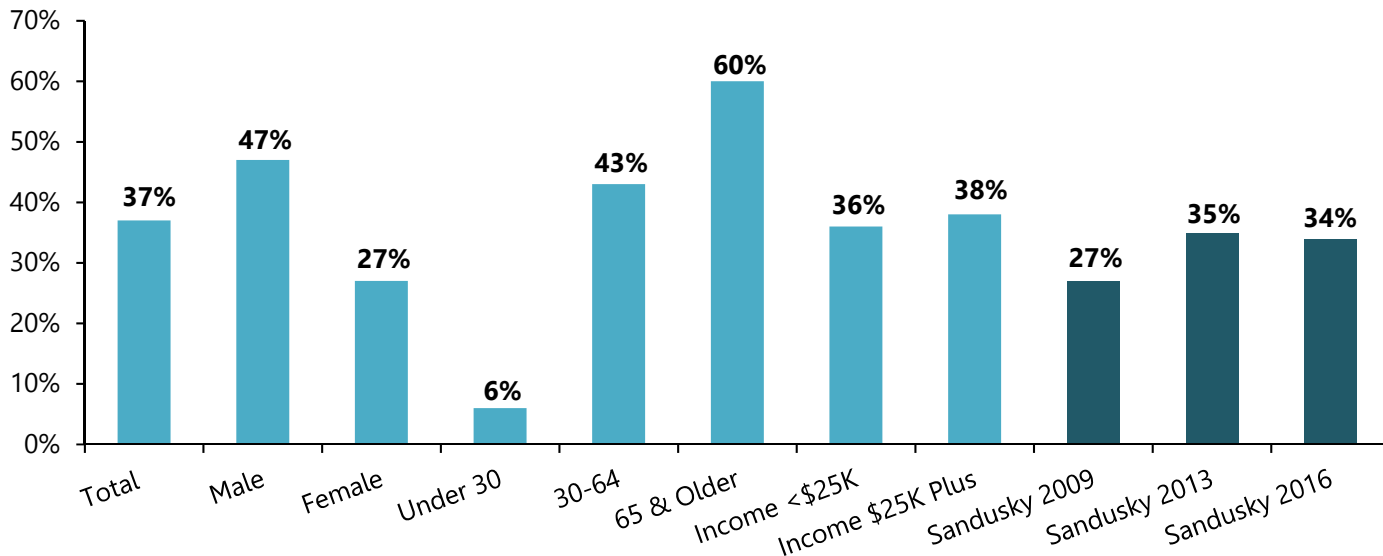
The following graphs shows the percentage of Sandusky County adults who have been diagnosed with high blood pressure and high blood cholesterol. An example of how to interpret the information on the first graph includes: 38% of all Sandusky County adults have been diagnosed with high blood pressure, including 44% of males and 69% of those ages 65 and older.

Sandusky County Adults Diagnosed with High Blood Pressure*



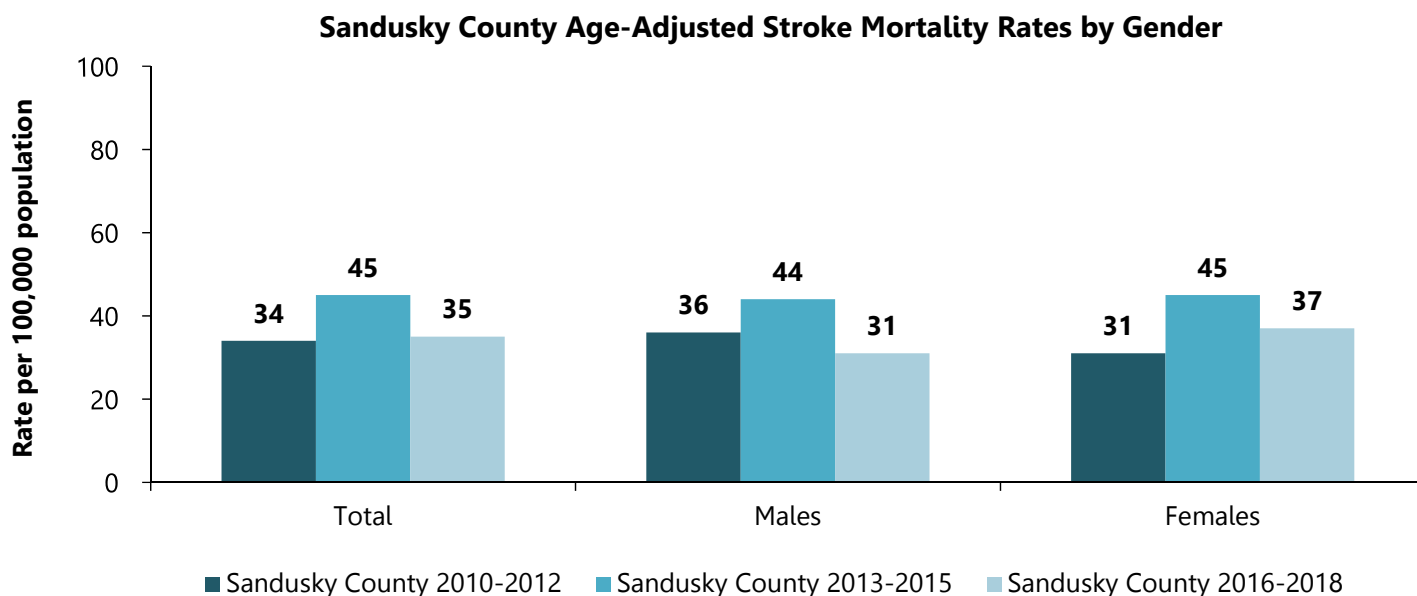
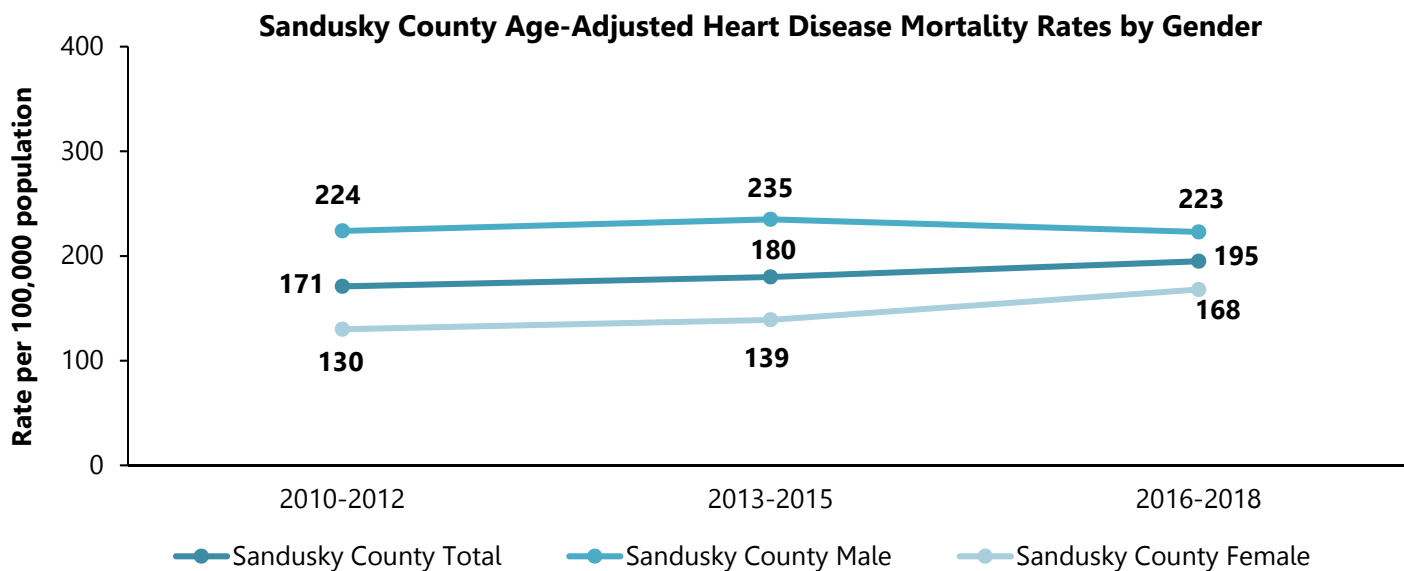
**Does not include respondents who indicated high blood pressure during pregnancy only.*

Sandusky County Adults 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.

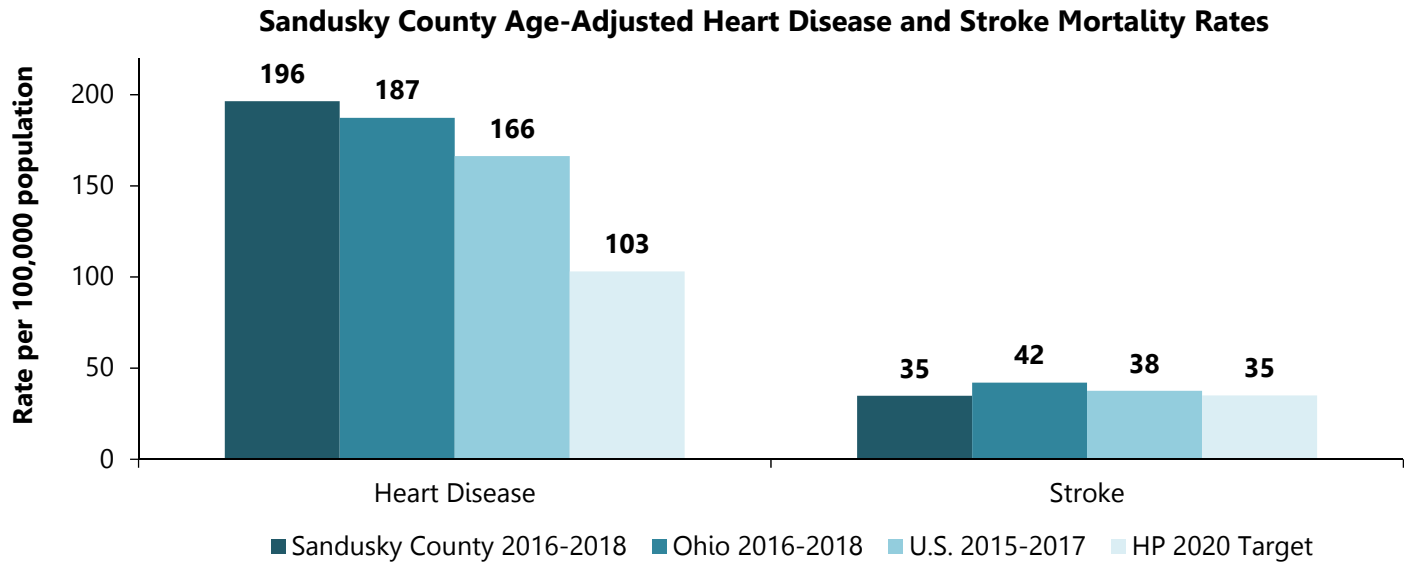
The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender.



(Source for graphs: Ohio Public Health Data Warehouse, 2010-2018)

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

- When age differences are accounted for, the statistics indicate that the Sandusky County heart disease mortality rate was higher than the Ohio and U.S. rate and the Healthy People 2020 target objective.
- The Sandusky County age-adjusted stroke mortality rate was lower than the state and U.S. rate.



(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder, 2015-2017 and Healthy People 2020)

Chronic Disease: Cancer

Key Findings

Eleven percent (11%) of Sandusky County adults were diagnosed with cancer at some point in their lives, increasing to 31% of those over the age of 65.

Cancer

- Eleven percent (11%) of Sandusky County adults were diagnosed with cancer at some point in their lives, increasing to 31% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: breast cancer (30%), other skin cancer (28%), prostate cancer (25%), melanoma (15%), cervical cancer (9%), testicular cancer (5%), leukemia (blood) cancer (4%), liver cancer (2%), lung cancer (2%), pancreatic cancer (2%), bladder cancer (2%), Hodgkin's Lymphoma (2%), and other type of cancer (6%).

Sandusky County Incidence of Cancer, 2012-2016

All Types: 1,842 cases

- Breast: 279 cases (15%)
- Lung and Bronchus: 278 cases (15%)
- Colorectal: 193 cases (10%)
- Prostate: 178 cases (10%)

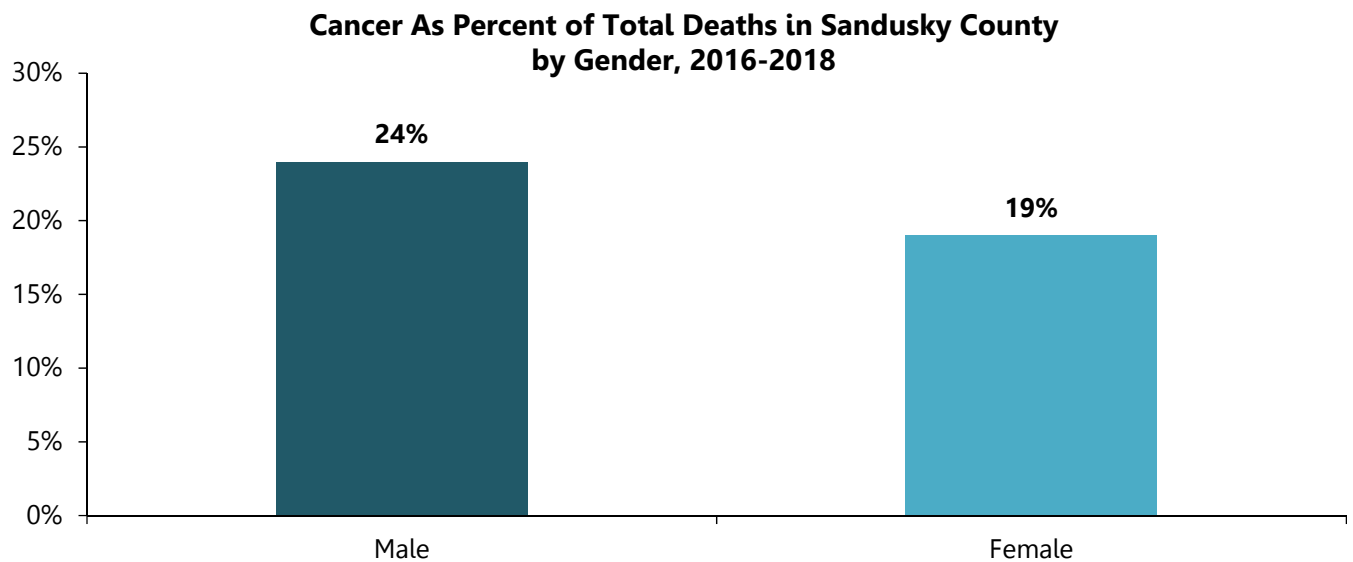
In 2016-2018, there were 449 cancer deaths in Sandusky County.

(Source: Ohio Cancer Incidence Surveillance System, ODH Ohio Public Health Data Warehouse)

Cancer Facts

- The Ohio Public Health Data Warehouse indicates that from 2016-2018, cancers caused 22% (449 of 2,076 total deaths) of all Sandusky County resident deaths. *(Source: Ohio Public Health Data Warehouse, 2016-2018).*
- The American Cancer Society states that about 606,880 Americans are expected to die of cancer in 2019, which translates to about 1,660 deaths per day. 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).*

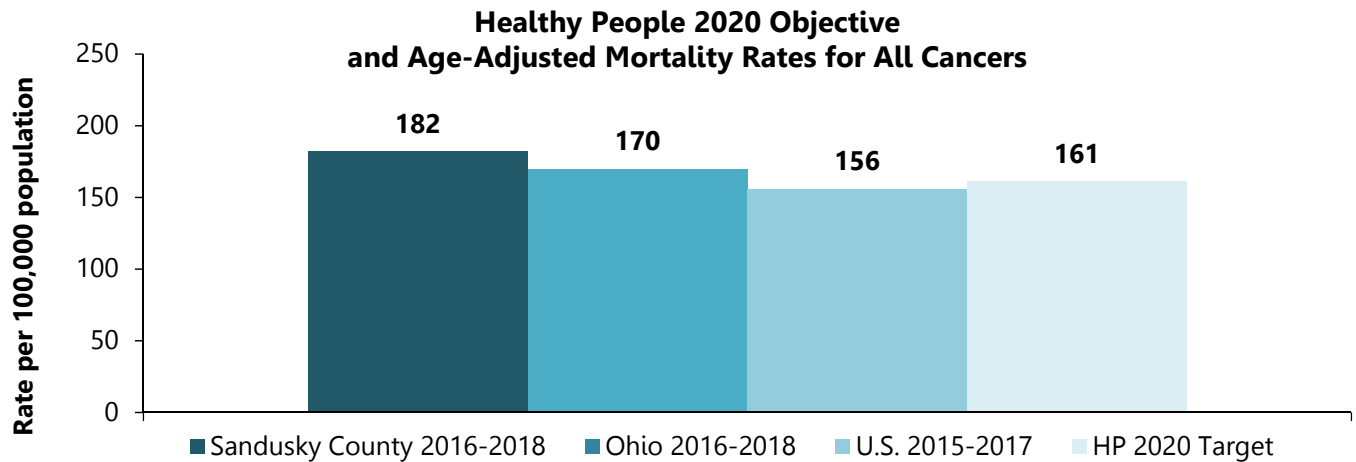
The following graph shows cancer as a percent of total deaths in Sandusky County by gender.



(Source: Ohio Public Health Data Warehouse, 2016-2018)

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

- The Sandusky County age-adjusted cancer mortality rate was higher than the Ohio and U.S. rate and the Healthy People 2020 target objective.



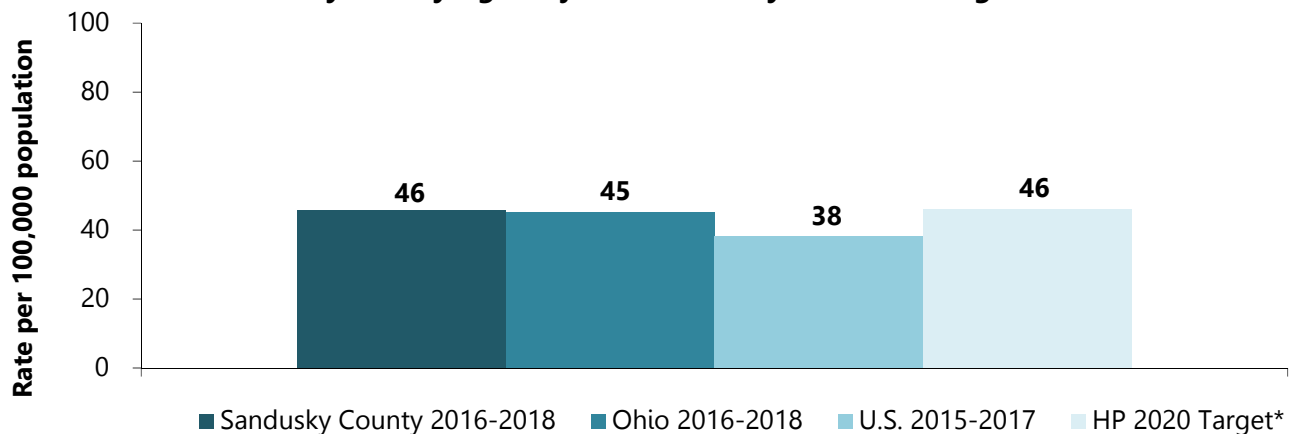
(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder, 2015-2017, Healthy People 2020)

Lung Cancer

- About one-in-five (17%) Sandusky County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- Almost one-third (30%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- The Ohio Department of Health (ODH) reports that lung and bronchus cancer was the leading cause of male cancer deaths (n=69) and female cancer deaths (n=45) from 2016 to 2018 in Sandusky County. (Source: Ohio Public Health Data Warehouse, 2016-2018).
- 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).

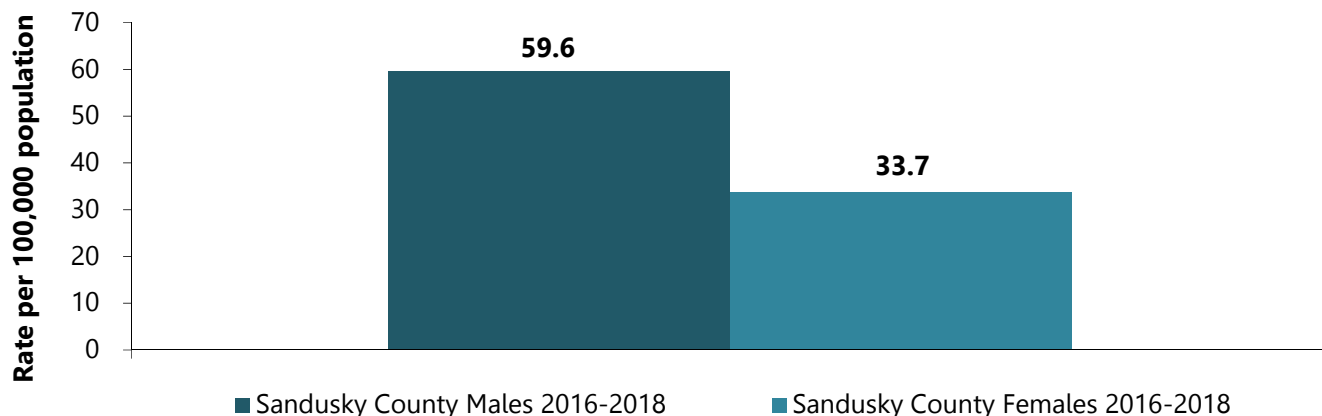
The following graphs show the Sandusky County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for lung and bronchus cancer in comparison with the Healthy People 2020 objective, as well as by gender.

Sandusky County Age-Adjusted Mortality Rates for Lung and Bronchus Cancer



*Healthy People 2020 Target data is for lung cancer only
 (Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)

Sandusky County Age-Adjusted Mortality Rates by Gender for Lung and Bronchus Cancer

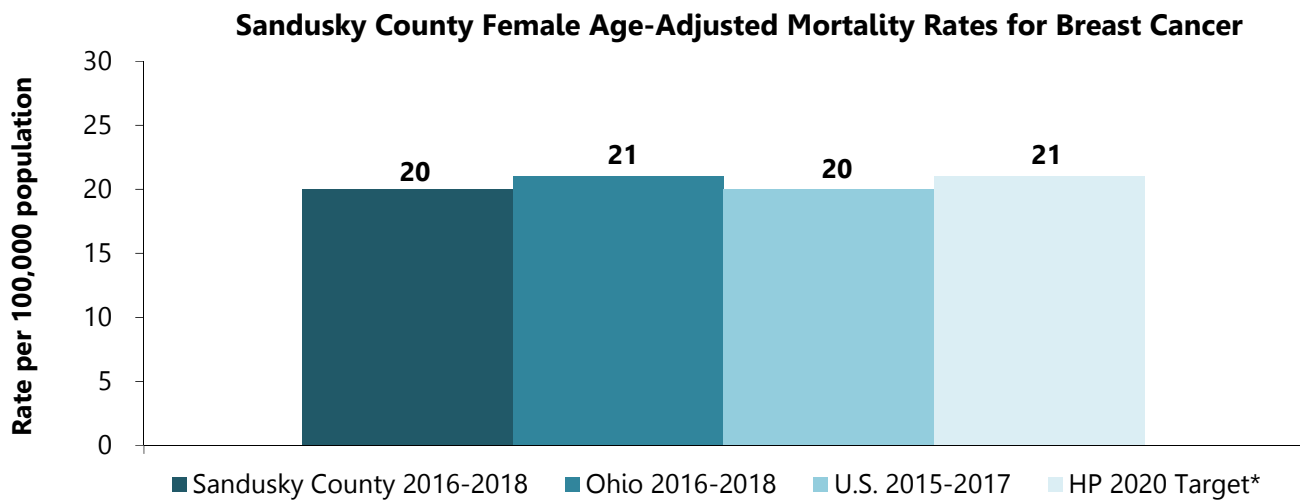


(Source: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018)

Breast Cancer

- Forty-five percent (45%) of Sandusky County females reported having had a clinical breast examination in the past year.
- Over half (55%) of Sandusky County females over the age of 40 had a mammogram in the past year.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommend that those 40 to 44 years of age have the option to begin annual mammography, those 45 to 54 should undergo annual mammography, and those 55 years of age and older may transition to biennial mammography or continue annual mammography. Women should continue mammography as long as overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual magnetic resonance imaging (MRI) is recommended in addition to mammography, typically starting at age 30.
 (Source: American Cancer Society, Facts & Figures 2019).

The following graph shows the Sandusky County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for breast cancer in comparison with the Healthy People 2020 objective.

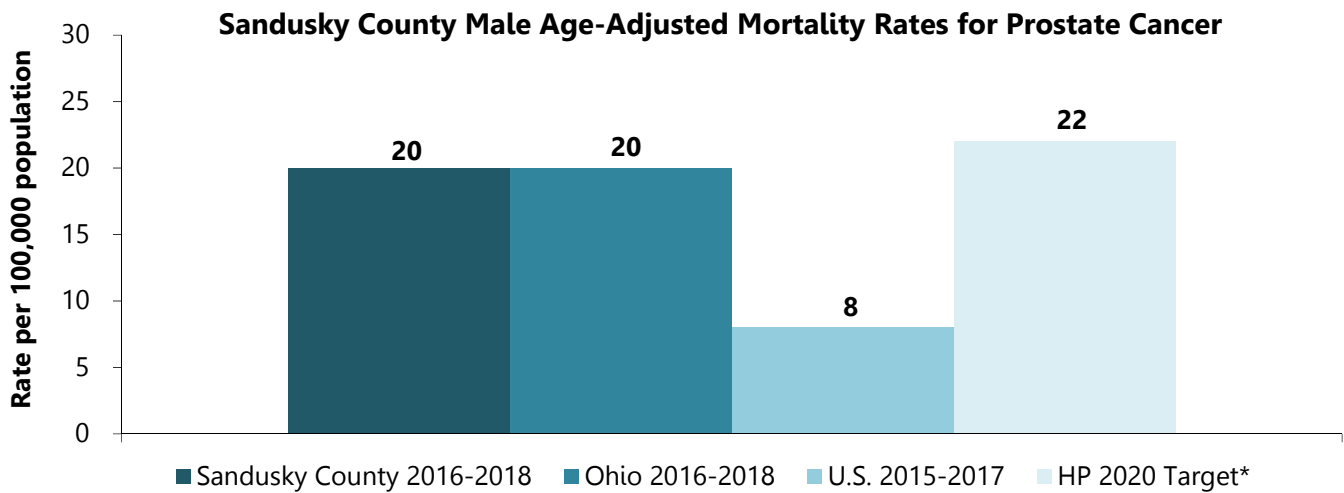


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)

Prostate Cancer

- ODH statistics indicate that prostate cancer deaths accounted for 9% of all male cancer deaths from 2016-2018 in Sandusky County. (Source: Ohio Public Health Data Warehouse, 2016-2018).
- 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).

The following graph shows the Sandusky County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for prostate cancer in comparison with the Healthy People 2020 objective.

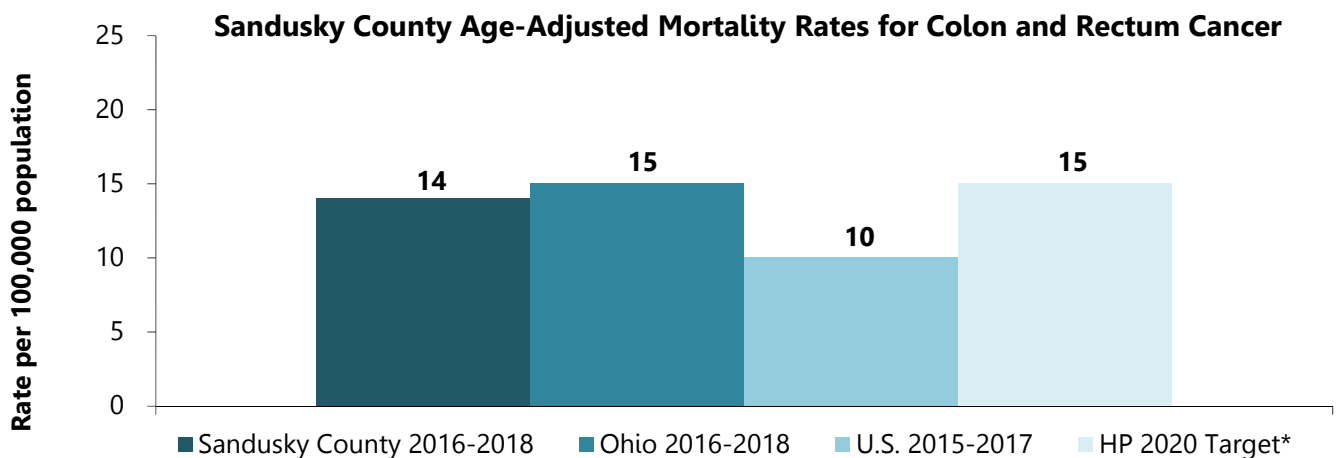


(Sources: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)

Colon and Rectum Cancers

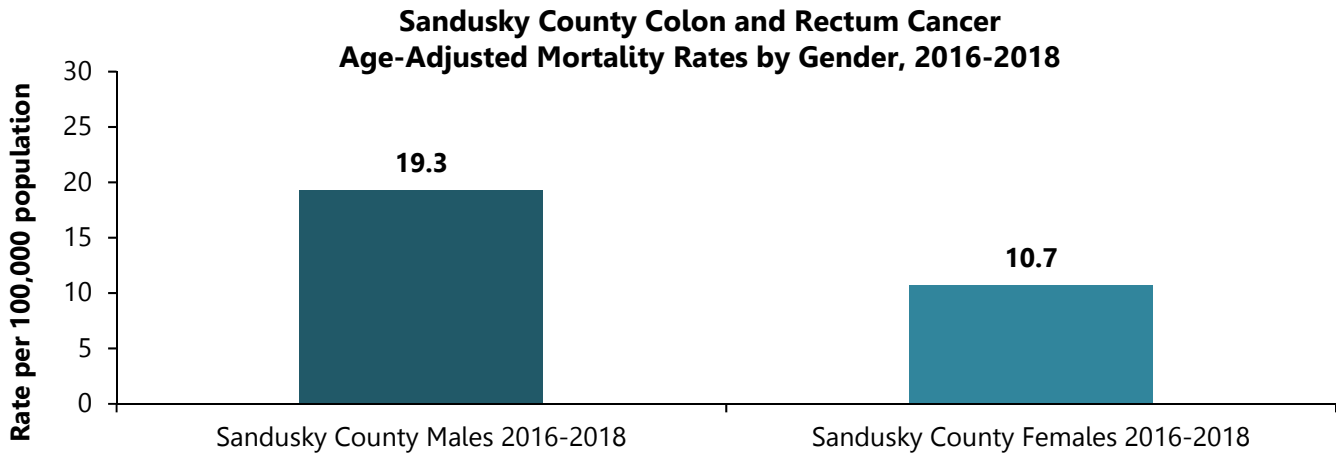
- One-quarter (25%) of adults had a colorectal cancer screening in the past five years.
- ODH indicates that colon and rectum cancer deaths accounted for 8% of all male and female cancer deaths from 2016-2018 in Sandusky County. (Source: Ohio Public Health Data Warehouse, 2016-2018).
- Modifiable factors that increase colon and rectum 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).

The following graphs show Sandusky County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for colon and rectum cancer in comparison with the Healthy People 2020 objective, as well as by gender.



(Source: Healthy People 2020, Ohio Public Health Data Warehouse 2016-2018, CDC Wonder 2015-2017)

The following graph shows the Sandusky County age-adjusted mortality rates per 100,000 populations for colon and rectum cancer by gender.



(Source: Ohio Public Health Data Warehouse 2016-2018)

Sandusky County Incidence of Cancer, 2012-2016

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer	Age-Adjusted Rate
Breast	279	15%	72.1
Lung and Bronchus	278	15%	70.2
Colon & Rectum	193	10%	49.9
Prostate	178	10%	88.7
Other Sites/Types	126	7%	32.9
Bladder	106	6%	27
Non-Hodgkin's Lymphoma	98	5%	24.8
Melanoma of Skin	92	5%	26.3
Kidney & Renal Pelvis	68	4%	17.9
Uterus	62	3%	30.3
Oral Cavity & Pharynx	53	3%	13.3
Leukemia	52	3%	14
Thyroid	47	3%	14.5
Pancreas	40	2%	10.2
Esophagus	29	2%	7.2
Liver & Intrahepatic Bile Duct	27	1%	6.5
Multiple Myeloma	22	1%	5.6
Stomach	19	1%	4.9
Larynx	18	1%	4.5
Brain and Other CNS	17	1%	4.5
Cervix	14	1%	7.4
Ovary	14	1%	6.1
Hodgkins Lymphoma	5	<1%	1.5
Testis	5	<1%	4.3
Total	1,842		474.6

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 1/19/20)

Sandusky County African American Incidence of Cancer, 2012-2016

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer	Age-Adjusted Rate
Lung and Bronchus	11	22%	130.9
Breast	9	18%	120.5
Prostate	7	14%	129.3
Colon & Rectum	4	8%	N/A
Total	51	100%	593.4

Note: N/A-indicates where rates may be unstable for case counts less than five or where population counts are not available.
 (Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 2/7/19)

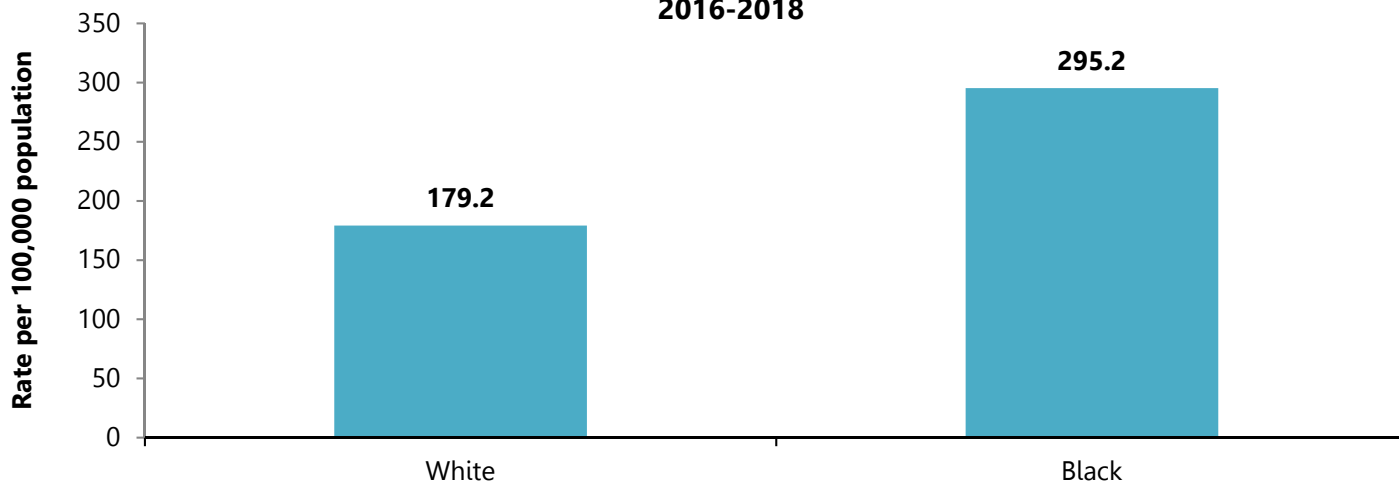
Sandusky County Hispanic Incidence of Cancer, 2012-2016

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer	Age-Adjusted Rate
Lung and Bronchus	6	20%	26.2
Colon & Rectum	4	13%	N/A
Liver & Intrahepatic Bile Duct	4	13%	N/A
Leukemia	3	10%	N/A
Prostate	3	10%	N/A
Total	30	100%	142.0

Note: N/A-indicates where rates may be unstable for case counts less than five or where population counts are not available.
 (Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 2/7/19)

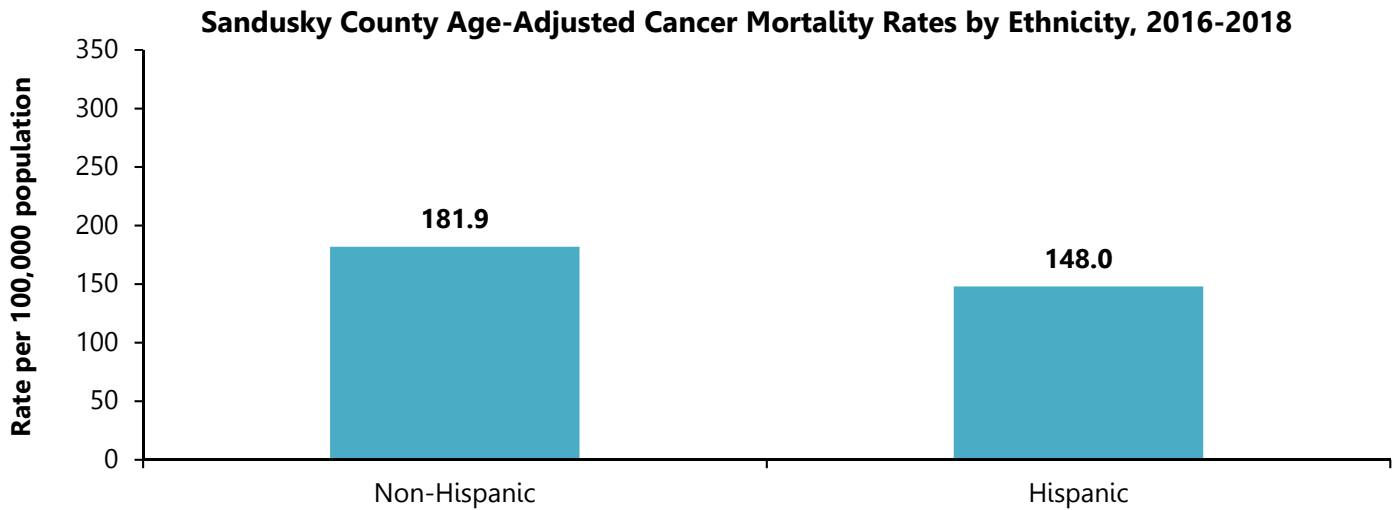
The following graph shows the Sandusky County age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer by race from 2016-2018.

**Sandusky County Age-Adjusted Cancer Mortality Rates by Race*
2016-2018**



*Races represented are white and black. All other races were not available due to low rates.
 (Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Cancer Deaths of Ohio Residents, updated 1/14/2020)

The following graph shows the Sandusky County age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer by ethnicity from 2016-2018.



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Cancer Deaths of Ohio Residents, updated 1/14/2020)

2019 Cancer Estimates

- In 2019, more than 1.7 million new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about eighteen percent (18%) of the new cancer cases expected to occur in the U.S. in 2018 will be related to overweight or obesity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 606,880 Americans are expected to die of cancer in 2019.
- Eighty-one percent (81%) of lung cancer deaths in the U.S are attributed to smoking.
- In 2019, estimates predict that there will be 67,150 new cases of cancer and 25,440 cancer deaths in Ohio.
- Of the new cancer cases in Ohio, approximately 9,680 (14%) will be from lung and bronchus cancers and 3,750 (6%) will be from melanoma (skin) cancer.
- About 10,240 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to increase to 5,340 (8%).

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

Cancer Disparities Among Racial and Ethnic Minorities

- According to the American Cancer Society, black males overall have the highest cancer incidence and death rates of the major racial/ethnic groups. Cancer mortality in black males is twice that in Asians and Pacific Islanders, who have the lowest rates.
- Prostate cancer death rates in black men are more than double those of every other race and ethnicity in the United States.
- Despite similar incidence rates, black females have 40% higher breast cancer death rates than non-Hispanic white females.
- US Hispanics have lower rates for the most common cancers (female breast, colorectum, lung, and prostate), but among the highest rates for cancers associated with infectious agents, reflecting the risk profile in immigrant countries of origin. For example, Hispanic women have cervical cancer incidence rates that are about 35% higher than those in non-Hispanic white women, and liver and stomach cancer incidence rates that are about double. However, incidence rates vary substantially by country of origin, generation, and duration of residence due to acculturation and other factors.

(Source: American Cancer Society, Cancer Facts and Figures 2020)

Chronic Disease: Diabetes

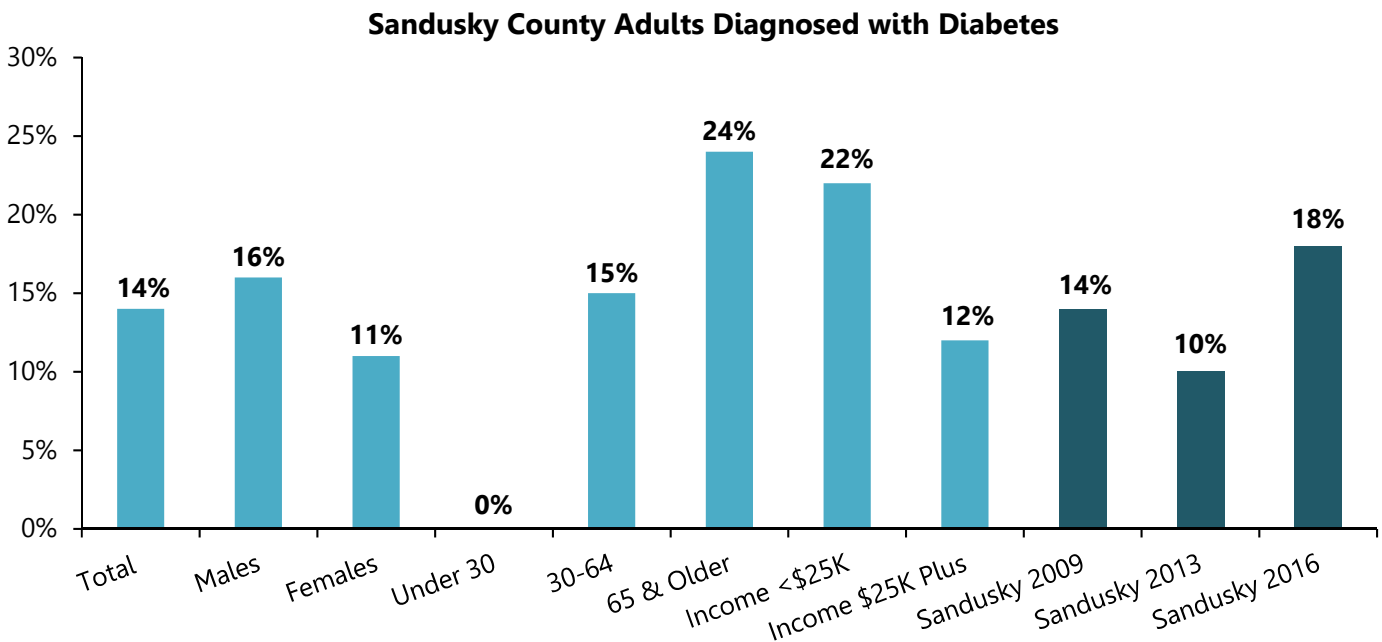
Key Findings

Fourteen percent (14%) of Sandusky County adults had been diagnosed with diabetes. Eight percent (8%) of adults had been diagnosed with pre-diabetes or borderline diabetes.

Diabetes

- Fourteen percent (14%) of Sandusky County adults had been diagnosed with diabetes, increasing to 24% of those over the age of 65.
- Eight percent (8%) of adults had been diagnosed with pre-diabetes or borderline diabetes.
- Ten percent (10%) of adults with diabetes rated their overall health as fair or poor.
- Sandusky County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 90% were obese or overweight
 - 79% had been diagnosed with high blood pressure
 - 76% had been diagnosed with high blood cholesterol

The following graph shows the percentage of Sandusky County adults who were diagnosed with diabetes. An example of how to interpret the information includes: 14% of adults were diagnosed with diabetes, including 16% of males and 24% of those ages 65 and older.

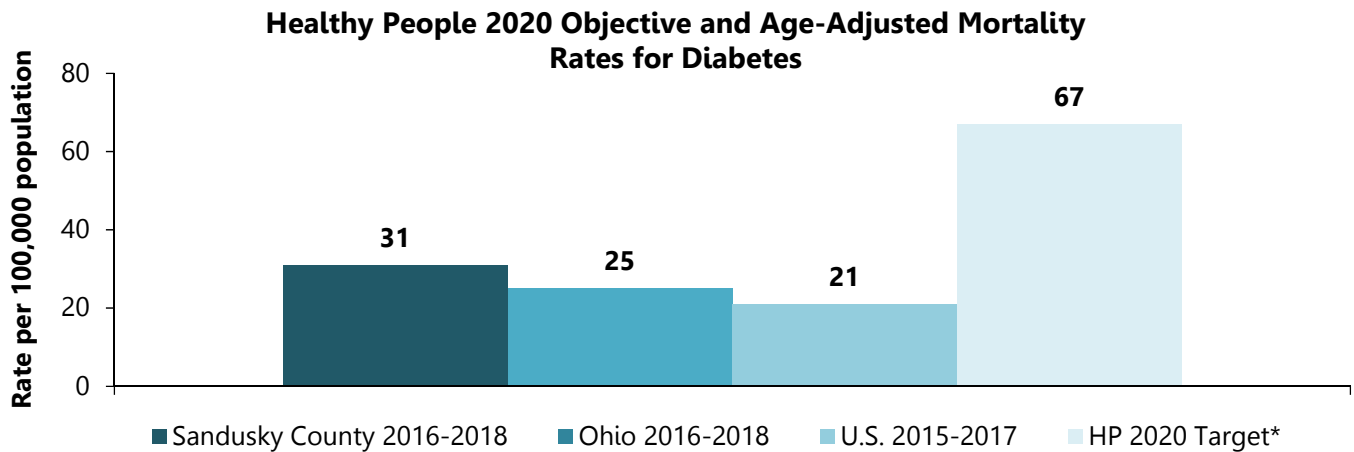


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Comparisons	Sandusky County 2009	Sandusky County 2013	Sandusky County 2016	Sandusky County 2019	Ohio 2018	U.S. 2018
Ever been told by a doctor they have diabetes (not pregnancy-related)	14%	10%	18%	14%	12%	11%
Had been diagnosed with pre-diabetes or borderline diabetes	N/A	6%	N/A	8%	2%	2%

N/A – Not Available

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



*Note: The Healthy People 2020 rate is for all diabetes-related deaths
 (Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder, 2015-2017, Healthy People 2020)

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, there is no cure for 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)

Chronic Disease: Quality of Life

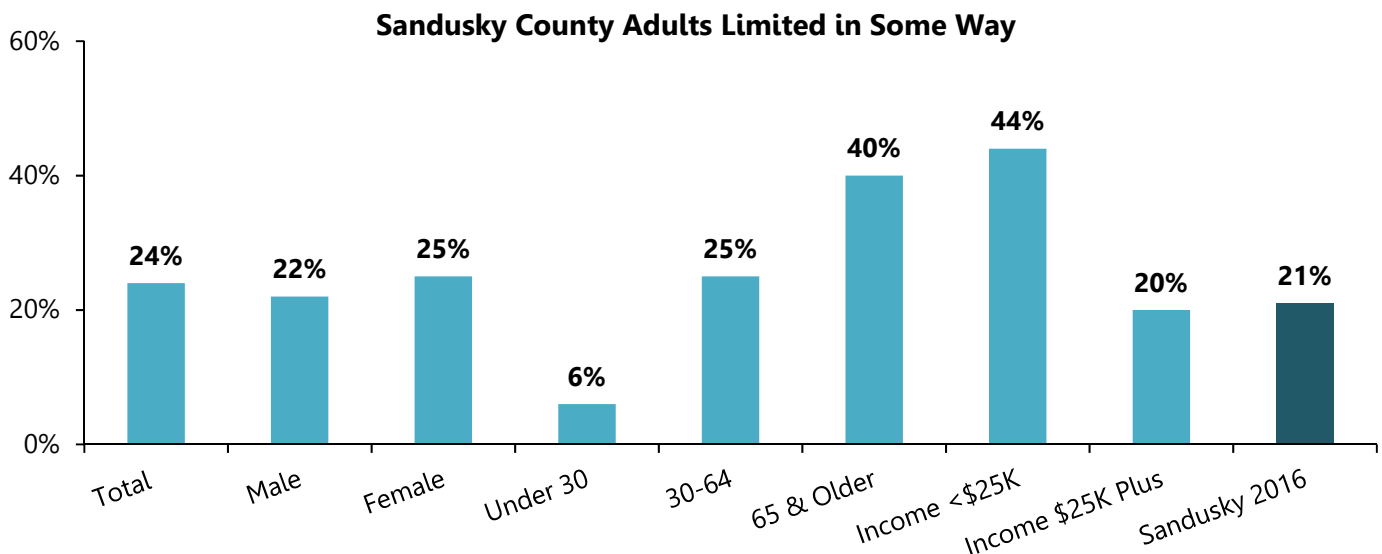
Key Findings

In 2019, 24% of Sandusky County adults were limited in some way because of a physical, mental or emotional problem. Seven percent (7%) of adults were responsible for providing regular care or assistance to a friend, family member or spouse with a health problem.

Impairments and Health Problems

- Sandusky County adults were responsible for providing regular care or assistance to the following: multiple children (25%); an elderly parent or loved one (9%); a friend, family member or spouse with a health problem (7%); grandchildren (6%); an adult child (5%); family member or spouse with a mental health issue (4%); someone with special needs (4%); children with discipline issues (2%); a friend, a friend, family member or spouse with dementia (2%), children whose parent(s) use drugs and/or are unable to care for their child(ren) (1%); children whose parent(s) lost custody due to other reasons (1%); and foster children (<1%).
- More than one-fifth (24%) of Sandusky County adults were limited in some way because of a physical, mental or emotional problem, increasing to 44% of those with incomes less than \$25,000.
- Among those who were limited in some way, the following most limiting problems or impairments were reported: back or neck problems (45%); arthritis/rheumatism (42%); chronic pain (33%); walking problems (33%); stress, depression, anxiety, or emotional problems (28%); sleep problems (22%); chronic illness (20%); fitness level (18%); fractures, bone/joint injuries (17%); other physical disability (16%); lung/breathing problems (15%); mental health illness/disorder (13%); eye/vision problems (13%); hearing problems (11%); memory loss (8%); dental problems (6%); confusion (5%); learning disability (5%); and other impairments/problems (5%).

The following graph shows the percentage of Sandusky County adults who were limited in some way. An example of how to interpret the information shown in the graph includes: 24% of Sandusky County adults were limited in some way, including 22% of males and 40% 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.

Healthy People 2020
Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Sandusky 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	42%	36%

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

Social Conditions: Adult Social Determinants of Health

Key Findings

In the past month, 15% of Sandusky County adults reported needing help meeting general daily needs such as food, clothes, shelter, or paying for utility bills. About one in six (16%) adults experienced four or more adverse childhood experiences (ACEs).

Economic Stability

- In the past month, 15% of Sandusky County adults reported needing help meeting general daily needs such as food, clothes, shelter, or paying for utility bills.
- Sandusky County adults experienced the following food insecurity issues during the past year: had to choose between paying bills and buying food (10%), food assistance was cut (6%), loss of income led to food insecurity issues (4%), worried food would run out (3%), went hungry/ate less to provide more food for their family (3%), and were hungry but did not eat because they did not have money for food (2%).
- Adults reported the following percent of their household income goes to their housing: less than 30% (38%), 30-50% (27%), 50% or higher (19%), don't know (16%).
- Sandusky County adults received assistance for the following in the past year: Medicare or Medicaid (15%), health care (9%); mental illness issues, including depression (8%); food (7%); dental care (6%); prescription assistance (6%); utilities (5%); free tax preparation (4%); employment (3%); credit counseling/budgeting money (2%); transportation (2%); home repair (2%); affordable child care (1%); clothing (1%); rent/mortgage (1%); drug or alcohol addiction (<1%); emergency shelter or temporary living arrangements (<1%); gambling addiction (<1%); legal aid services (<1%); and septic/well repairs (<1%).
- The median household income in Sandusky County was \$50,370. The U.S. Census Bureau reports median income levels of \$52,407 for Ohio and \$57,652 for the U.S. (Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-year Estimates).
- The unemployment rate for Sandusky County was 4.2 as of December 2019 (Source: Bureau of Labor Statistics, Local Area Unemployment Statistics).
- There were 26,332 housing units. The owner-occupied housing unit rate was 90%. Rent in Sandusky County cost an average of \$666 per month (Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-year Estimates).

Food Insecurity

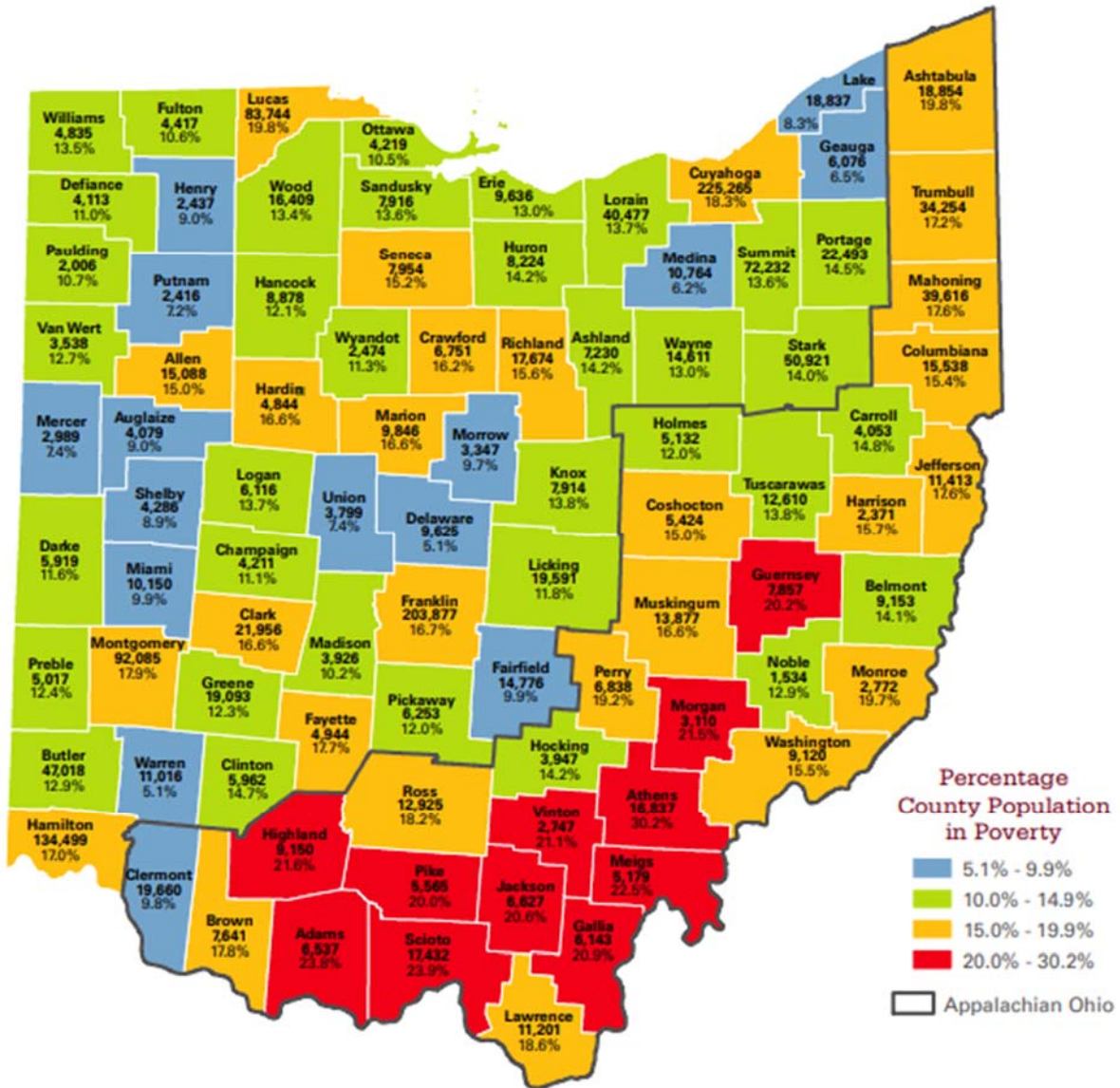
- Food secure households had access, at all times, to enough food for an active, healthy life for all household members. 88.2 percent (112.3 million) of U.S. households were food secure throughout 2017.
- Food-insecure households are uncertain of having, or unable to acquire, at some time during the year, enough food to meet the needs of all their members because they had insufficient money or other resources for food. 11.8 percent (15.0 million) of U.S. households were food insecure at some time during 2017.
- Food-insecure households include those with low food security and very low food security.
 - 7.3 percent (9.3 million) of U.S. households had low food security in 2017.
 - 4.5 percent (5.8 million) of U.S. households had very low food security at some time during 2017.
- Households with very low food security are food insecure to the extent that normal eating patterns of some household members were disrupted at times during the year, with self-reported food intake below levels considered adequate.

(Source: United States Department of Agriculture (USDA), Food Insecurity in the U.S., Interactive Charts and Highlights, Updated on September 5, 2018)

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

- The 2013-2017 American Community Survey 5-year estimates that approximately 1,683,890 Ohio residents, or 14.9% of the population, were in poverty.
- From 2013-2017, 13.6% of Sandusky 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

- Ninety percent (90%) of Sandusky County adults 25 years and over had a high school diploma or higher *(Source: U.S. Census Bureau, American Community Survey, 2013-2017)*.
- Fifteen percent (15%) of Sandusky County adults 25 years and over had at least a bachelor's degree *(Source: U.S. Census Bureau, American Community Survey, 2013-2017)*.

Health and Health Care

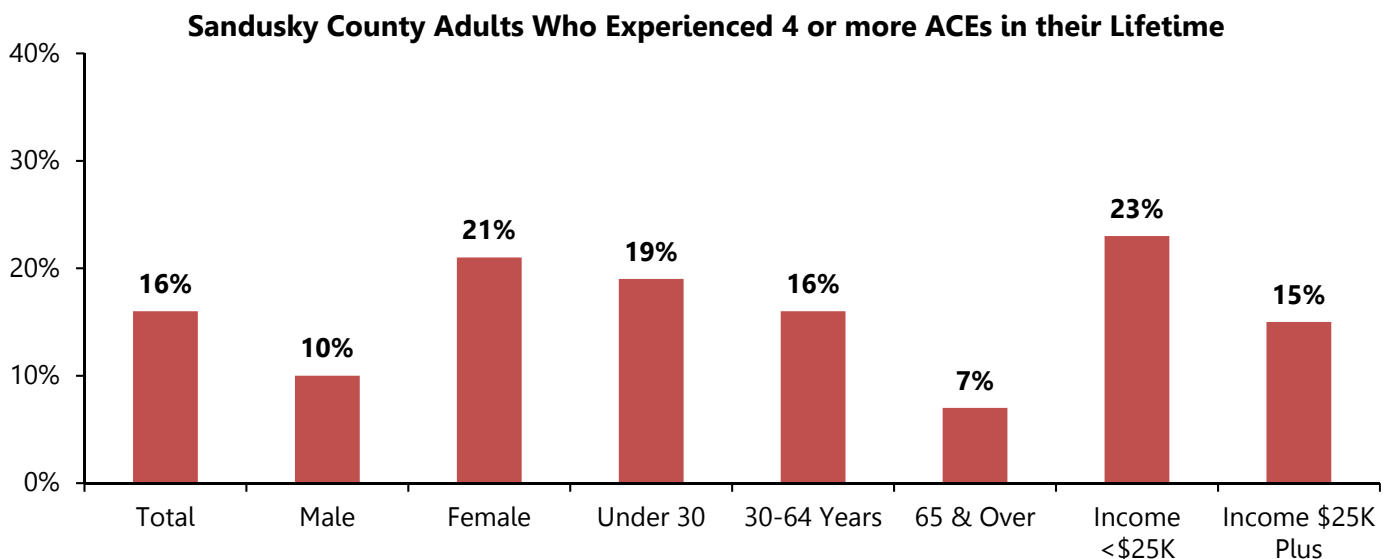
- In the past year, 4% of adults were uninsured.
- Nearly three-quarters (74%) of Sandusky County adults visited a doctor for a routine checkup in the past year, increasing to 93% of those ages 65 and older.
- Ninety percent (90%) of adults indicated they had at least one person they thought of as their personal doctor or health care provider, increasing to 94% of those ages 65 and older.
- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Sandusky County adults.

Social and Community Context

- Five percent (5%) of Sandusky County adults were abused in the past year (including physical, sexual, emotional, or financial and verbal abuse). They were abused by the following: a spouse or partner (33%), another person outside the home (21%), someone else (46%), a child (8%), and a parent (4%).
- Sandusky County adults who reported being abused were emotionally abused (76%), verbally abused (56%), financially abused (52%), physically abused (16%), and any of the above through electronic methods (such as texts, Facebook, etc.) (20%).
- Two percent (2%) of adults reported engaging in any form of sexual activity in exchange for something of value such as food, drugs, shelter or money.
- Zero percent (0%) of adults reported ever being forced or manipulated to sell sex and give part or all of the money to someone else.
- Five percent (5%) of Sandusky County adults reported feeling upset, angry, sad, or frustrated as a result of how they were treated based on their race in the past month.
- Sandusky County adults did the following while driving: talked on hands-free cell phone (35%); ate (31%); talked on hand-held cell phone (23%); drove without a seatbelt (11%); texted (9%); used internet on their cell phone (4%); were under the influence of alcohol (2%); were under the influence of prescription drugs (2%); were under the influence of recreational drugs (1%); read (< 1%); and other activities (such as applying makeup, shaving, etc.) (1%). Thirty-one percent (31%) of adults had two or more distractions while driving.
- Adverse Childhood Experiences (ACEs) are stressful or traumatic events, including abuse and neglect. They also include household dysfunction such as witnessed domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development of depression, alcoholism and alcohol abuse; depression; illicit drug use; chronic obstructive pulmonary disease; suicide attempts; and many other health problems throughout a person's lifespan *(SAMHA, Adverse Childhood Experiences, Updated on 7/2/2019)*.

- Sandusky County adults experienced the following adverse childhood experiences (ACEs):
 - Lived with someone who was a problem drinker or alcoholic (29%)
 - Their parents became separated or were divorced (24%)
 - A parent or adult in their home swore at, insulted, or put them down (22%)
 - Someone at least five years older than them or an adult touched them sexually (16%)
 - 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 (11%)
 - Their family did not look out for each other, feel close to each other, or support each other (9%)
 - A parent or adult in their home hit, beat, kicked, or physically hurt them (8%)
 - Someone at least five years older than them or an adult tried to make them touch them sexually (8%)
 - Lived with someone who used illegal stress drugs, or who abused prescription medications (8%)
 - Lived with someone who served time or was sentenced to serve time in prison, jail or correctional facility (8%)
 - They didn't have enough to eat, had to wear dirty clothing, and had no one to protect them (5%)
 - Their parents were not married (5%)
 - Someone at least five years older than them or an adult forced them to have sex (4%)
- Nearly one-in-six (16%) of adults experienced four or more adverse childhood experiences (ACEs).

The following graph shows the percentage of Sandusky County adults who had experienced 4 or more adverse child experiences (ACEs) in their lifetime. An example of how to interpret the information on the graph includes: 16% of all adults had experienced 4 or more ACEs in their lifetime, including 23% 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.

The table below indicates correlations between those who experienced four or more ACEs in their lifetime and participating in risky behaviors, as well as other experiences. An example of how to interpret the information includes: 59% of those who experienced four or more ACEs were binge drinkers, compared to 47% of those who did not experience any ACEs.

Behaviors of Sandusky County Adults
Experienced four or more ACEs vs. Did Not Experience Any ACEs

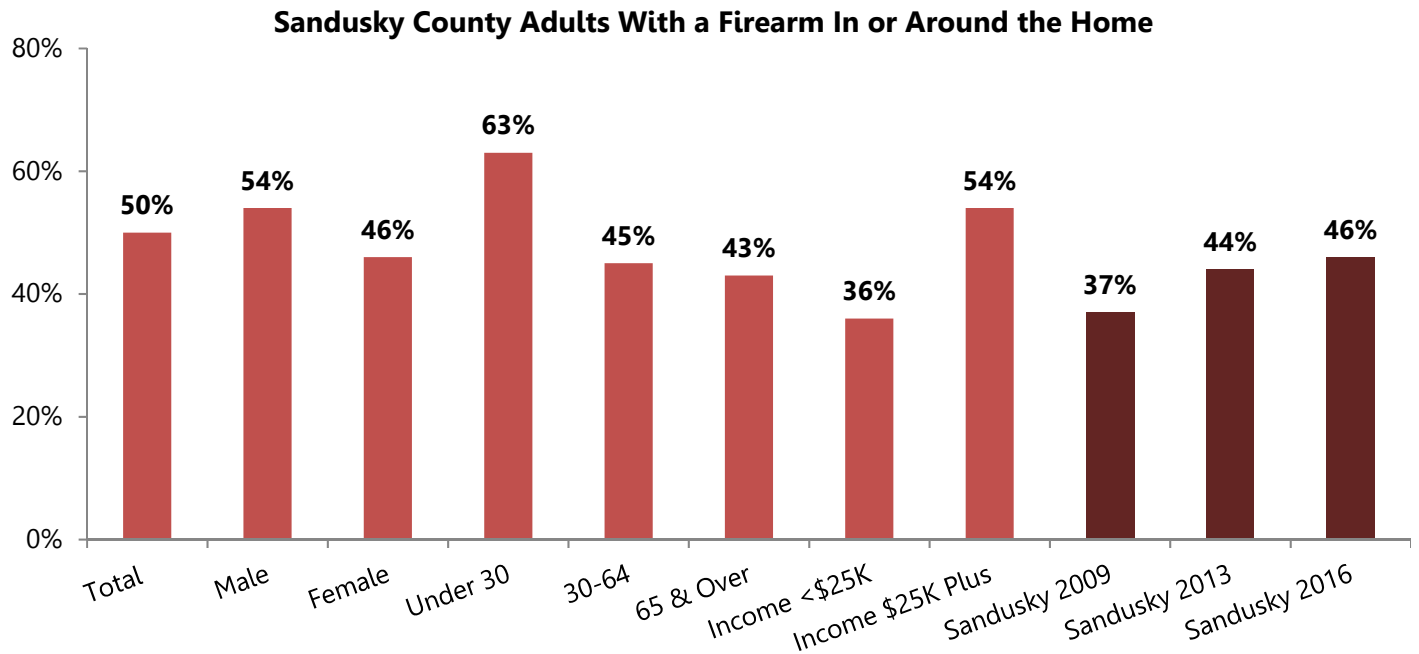
Adult Behaviors	Experienced four or more ACEs	Did Not Experience Any ACEs
Binge drinker (drank five or more drinks for males and four or more for females on an occasion in the past month)	59%	47%
Current drinker (had at least one alcoholic beverage in the past month)	53%	57%
Had an annual household income less than \$25,000	28%	16%
Used medications not prescribed	26%	11%
Depressed (felt sad or hopeless for two or more weeks in a row)	15%	5%
Seriously considered attempting suicide (in the past year)	10%	2%
Had sexual intercourse with more than one person (in the past year)	6%	1%
Attempted suicide (in the past year)	1%	0%

"ACEs" indicate adults who self-reported having experienced four or more adverse childhood experiences in their lifetime.

Neighborhood and Built Environment

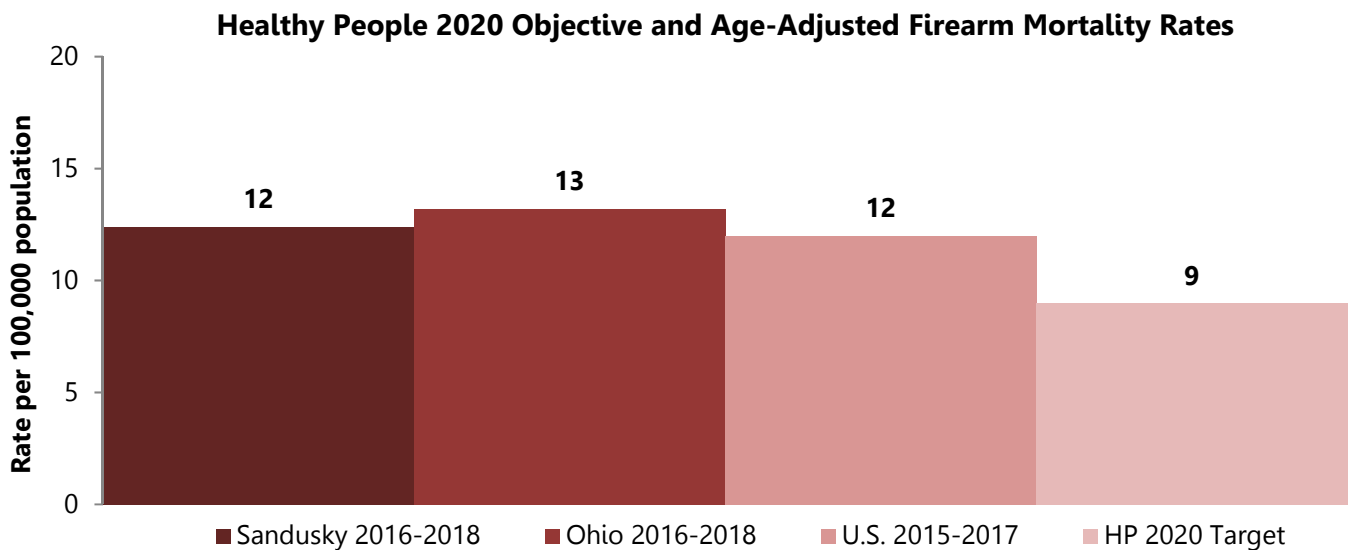
- Eight percent (8%) of Sandusky County adults had the following transportation issues: could not afford gas (43%), other car issues/expenses (40%), did not feel safe to drive (37%), disabled (29%), suspended/no driver's license (14%), no car insurance (11%), cost of public or private transportation (6%), limited public transportation available or accessible (6%), no public transportation available or accessible (3%), and no car (11%).
- Sandusky County adults described the social and physical environment in which you live, work, and play as: parks and trails are available (67%); fresh, healthy food is easy to get (56%); there are many ways to get involved within the community (52%); it is a great place to raise children (51%); sidewalks are prevalent and accessible (50%); sidewalks, parks and trails are used frequently (50%); neighborhoods are safe (46%); healthcare services are easy to find and use (46%); there are adequate transportation services available (44%); housing is safe and affordable (42%); working conditions are safe (41%); there are good employment opportunities (31%); there is economic opportunity/there is room to grow financially (30%); and people are often treated differently based on the color of their skin (18%).
- Half (50%) of Sandusky County adults kept a firearm in or around their home. Three percent (3%) of adults reported they were unlocked and loaded.

The following graph shows the percentage of Sandusky County adults that have a firearm in or around the home. An example of how to interpret the information shown on the graph includes: 50% of all Sandusky County adults have a firearm in or around the home, including 54% of males and 46% 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 following graph shows the Sandusky County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) due to firearms in comparison to the Healthy People 2020 objective.



(Source: Ohio Public Health Data Warehouse, 2016-2018, CDC Wonder 2015-2017, Healthy People 2020)

Victims of Gun Violence in America

- More than 124,000 people are shot in murders, assaults, suicides & suicide attempts, accidents or by police intervention in America in an average year.
 - 35,141 people die from gun violence and 89,620 people survive gun injuries.
- Every day, an average of 342 people is shot in America. Of those 342 people, 96 people die and 246 are shot, but survive.
 - Of the 342 people who are shot every day, an average of 47 are children and teens.
 - Of the 96 people who die, 34 are murdered, 59 are suicides, 1 die accidentally and 1 with an unknown intent and 1 by legal intervention.
 - Of the 246 people who are shot but survive, 183 are from assault, 49 are shot accidentally, 11 are suicide attempts, and 4 are legal interventions.
- Despite more than 90% of Americans across the political spectrum agreeing that a background check should be conducted for every gun sale, a least one in five (or 20%) of guns are sold without a background check.
- Approximately 1.7 million children live in homes with unlocked, loaded guns, leading to tragic accidental, unintentional or self-inflicted shootings, particularly of youth.
- Two out of three (66%) of hate crimes nationally are never reported to law enforcement

(Source: Brady Campaign and Brady Center to Prevent Gun Violence, August 23, 2018)

Veterans' Affairs

- As a result of military service, the following have affected veterans' immediate family members: post-traumatic stress disorder (PTSD) (11%), access to medical care at a VA facility (9%), major health problems due to injury (7%), had problems getting VA benefits (6%), access to medical care at a non-VA facility (5%), housing issues (3%), had problems getting information on VA eligibility and applying (2%), could not find/keep a job (2%), marital problems (2%), and access to mental health treatment (1%).
- Approximately 4,720 residents, or 9% of the civilian population 18 years and over living in Sandusky County, are veterans (*Source: U.S. Census Bureau, American Community Survey, 2013-2017*).
- Eight percent (8%) of Sandusky County veterans ages 25 years and over had less than a high school diploma and 13% had at least a bachelor's degree (*Source: U.S. Census Bureau, American Community Survey, 2013-2017*).
- Eight percent (8%) of Sandusky County veterans were living below the poverty level (*Source: U.S. Census Bureau, American Community Survey, 2013-2017*).

Key Facts About Veteran Suicide

There is no single cause of suicide. Suicide deaths reflect a complex interaction of risk and protective factors at the individual, community, and societal levels.

- Risk factors are characteristics associated with a greater likelihood of suicidal behaviors. Some risk factors for suicide include: prior suicide attempt; mental health conditions; stressful life events such as divorce, job loss, or the death of a loved one; and availability of lethal means.
- Protective factors can help offset risk factors. These are characteristics associated with a lesser likelihood of suicidal behaviors. Some protective factors for suicide include: positive coping skills, having reasons for living or a sense of purpose in life, feeling connected to other people, and access to mental health care.
- In addition to the protective factors described above, Veterans may possess unique protective factors related to their service, such as resilience or a strong sense of belonging to a unit. They may also possess risk factors related to their military service, such as service-related injury or a recent transition from military service to civilian life. Preventing Veteran suicide requires strategies that maximize protective factors while minimizing risk factors at all levels throughout communities nationwide.
- Veteran suicide rates and numbers of deaths vary across regions and demographics. Recent data suggest that:
 - **An average of 20 Veterans die by suicide each day.** About six of the 20 are recent users of Veterans Health Administration services. On average, there are 93 suicides among the general U.S. non-Veteran adult population per day.
 - **The burden of suicide resulting from firearm injuries is high.** About 67 percent of all Veteran deaths by suicide were the result of firearm injuries
 - **Rates of suicide are highest among younger Veterans** (ages 18–29) and lowest among older Veterans (ages 60 and older)
 - **Despite comparatively lower rates, the largest number of deaths by suicide is among middle-age and older adult Veterans.** Approximately 65 percent of all Veterans who died by suicide were age 50 or older

(Source: U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention, National Strategy for Preventing Suicide, 2018)

Veteran Population, 2012-2016

	Sandusky	Ohio	U.S.
Number of Veterans	4,186	--	--
Percentage Veterans	9.1%	8.7%	8.0%
No. Veterans in Poverty	270	--	--
% of Veterans in Poverty	6.5%	7.4%	7.1%

(Source: American Community Survey, 2012-2016, as provided by Great Lakes Community Action Partnership)

Commuting to Work, 2012-2016

	Sandusky	Ohio	U.S.
Workers, 16 years and over	827,814	--	--
Car, truck, van-drove alone	86.5%	83.4%	76.4%
Car, truck, can – carpoled	7.5%	7.8%	9.3%
Public transportation – not cab	0.5%	1.7%	5.1%
Walked	2.3%	2.3%	2.8%
Other means	0.7%	1.1%	1.8%
Worked at home	2.6%	3.7%	4.6%
Mean travel time to work (min.)	19.8	23.3	26.1

(Source: American Community Survey, 2012-2016, as provided by Great Lakes Community Action Partnership)

Public Assistance Income, 2012-2016

	Households Receiving Public Assistance Income	Aggregate Assistance \$ Received	Average Public Assistance Received
Sandusky County	593	2,008,300	\$3,386
Ohio	146,543	430,458,100	\$2,937
United States	3,147,577	10,499,747,500	\$3,335

(Source: American Community Survey, 2012-2016, as provided by Great Lakes Community Action Partnership)

Children Eligible for Free/Reduced Price Lunch, 2015-2016

	Total Students	Free/Reduced Price Lunch Eligible	Free/Reduced Price Lunch Eligible
Sandusky County	9,720	5,149	52.97%
Ohio	1,715,148	766,460	44.88%
United States	50,611,787	25,893,504	52.61%

(Source: Great Lakes Community Action Partnership, 2015-2016)

Food Insecurity Rate, 2014

	Total Population	Food Insecure Population, Total	Food Insecurity	Child Food Insecurity
Sandusky County	60,498	7,820	12.93%	23.87%
Ohio	11,594,163	1,943,340	16.8%	24.67%
United States	318,198,163	47,448,890	14.91%	23.49%

(Source: Feeding America, 2014, as provided by Great Lakes Community Action Partnership)

United Way of Sandusky County Statistical Report, May 2017 – May 2018

Clothing/Personal/Household Needs	29.16
Information Services	28.43
Transportation	15.85
Utility Assistance	7.66
Housing	7.12
Volunteers/Donations	4.79
Healthcare	3.73
Food/Meals	2.60
Individual, Family, and Community Support	1.86
Mental Health/Addictions	1.33
Legal, Consumer and Public Safety Services	0.87
Income Support/Assistance	0.67
Education	0.40
Disaster Services	0.13
Employment	0.13
Not Recorded	0.07
Other Government/Economic Services	0.07
TOTAL CONTACTS IN DATE RANGE: 1,502	

Social Conditions: Environmental Conditions

Key Findings

Sandusky County adults indicated that insects (9%) and mold (8%) threatened their health in the past year.

Environmental Health

- Sandusky County adults thought the following threatened their health in the past year:
 - Insects (9%)
 - Mold (8%)
 - Rodents (6%)
 - Moisture issues (4%)
 - Temperature regulation (3%)
 - Agricultural chemicals (3%)
 - Air quality (2%)
 - Trash/waste disposal (1%)
 - Bed bugs (1%)
 - Lice (1%)
 - Unsafe water supply/wells (1%)
 - Plumbing problems (1%)
 - Sewage/wastewater problems (1%)
 - Cockroaches (<1%)
 - Safety hazards (<1%)
 - Chemicals found in household products (<1%)
 - Lyme disease (<1%)
- In 2018, there were 420 food service combined inspections made, 12 licensed campgrounds, 24 well permits issued, and 42 sewage permits issued (*Source: Sandusky County Public Health, 2018*).

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 which 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.
 - 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.

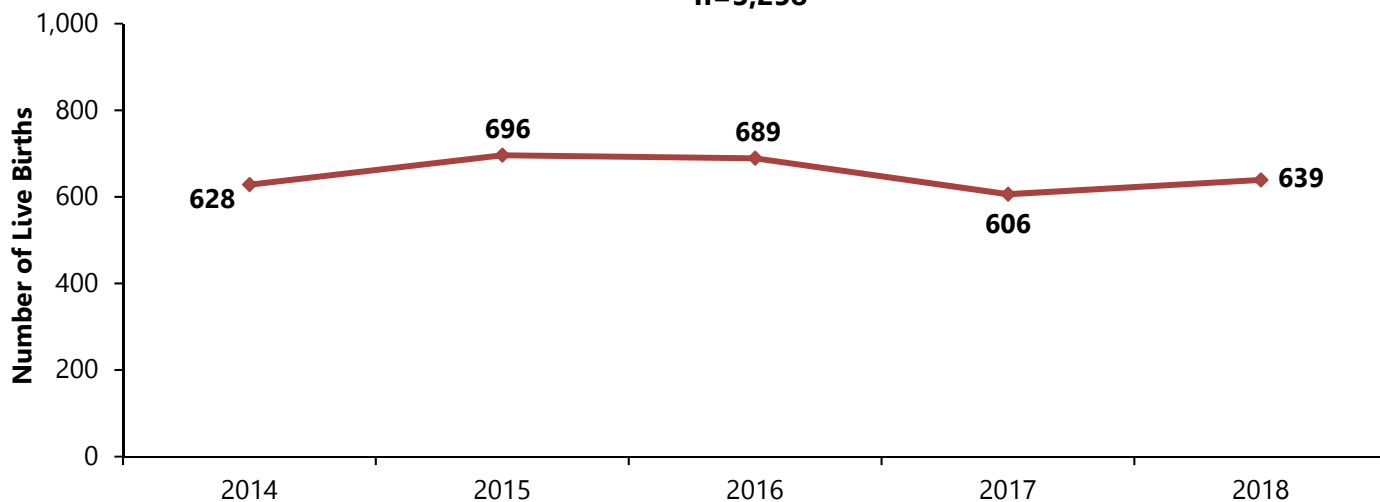
(Source: CDC, Facts about Mold and Dampness, Updated August 2017)

Social Conditions: Maternal and Infant Health

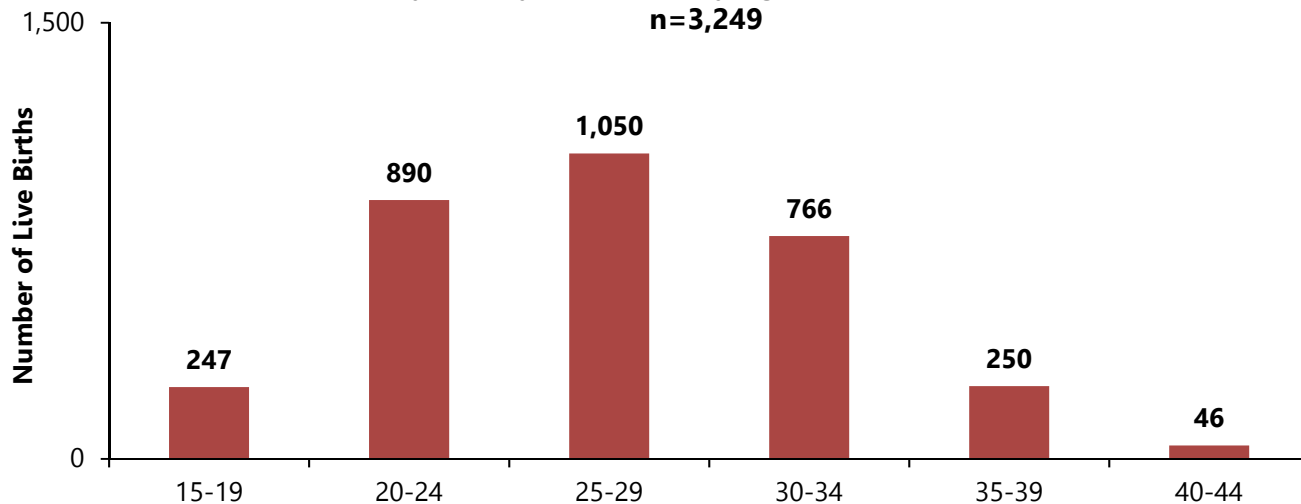
Birth Data

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

Sandusky County Total Live Births n=3,258



Sandusky County Live Births by Age of Mother, 2014-2018* n=3,249

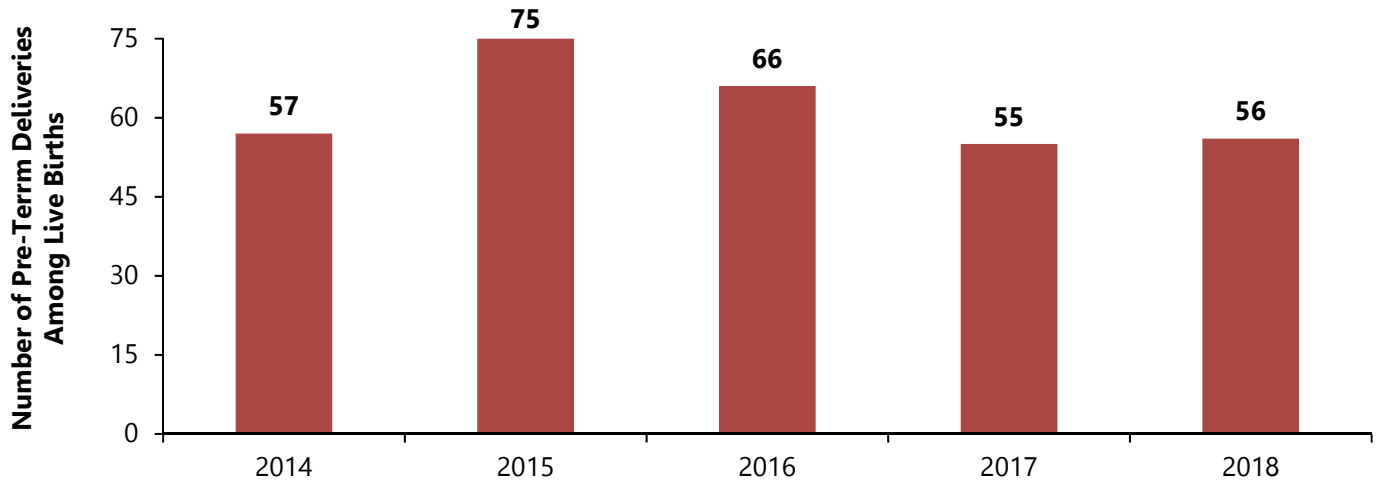


**Some data had been blinded to protect confidentiality
Note for graphs: Births occurring in Ohio to non-Ohio residents are not included.
(Source: ODH Information Warehouse, updated 1/13/20)*

Pre-Term Births

The following graph shows Sandusky County pre-term deliveries (<37 weeks) among live births by year.

Sandusky County Pre-Term Deliveries Among Resident Live Births by Year

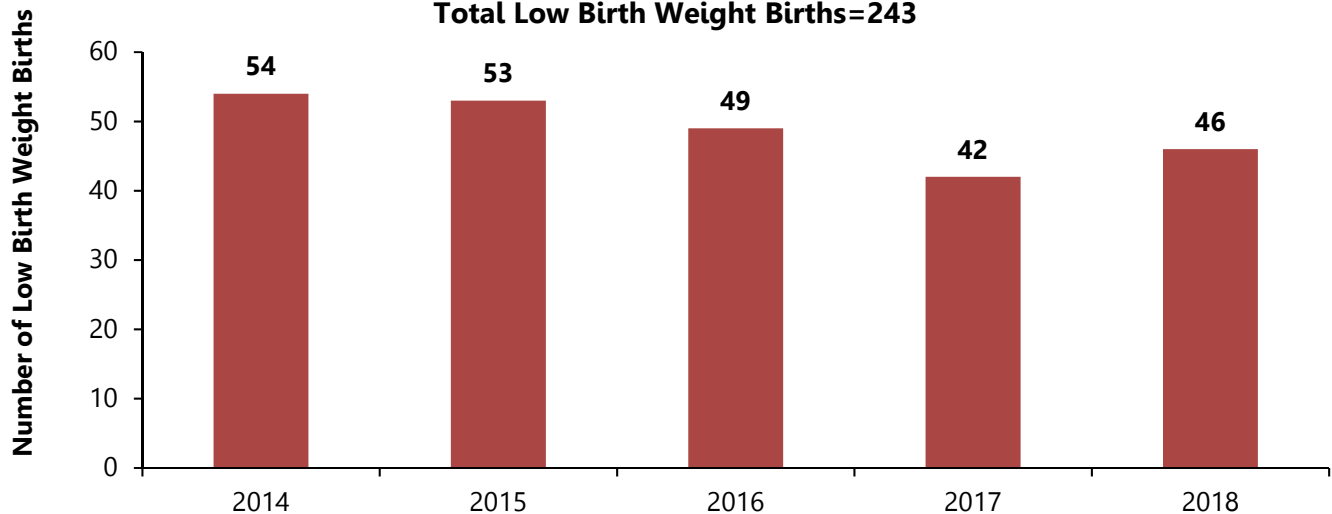


Note: birth data includes all births to adolescents and adults.
(Source: ODH Information Warehouse, updated 1/13/2020)

Low Birth Weight

The following graph shows the number of live births in Sandusky County that were low birthweight by year. Low birth weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces, but greater than 3 pounds, 4 ounces.

Sandusky County Number of Low Birth Weight Births, 2014-2018
Total Low Birth Weight Births=243

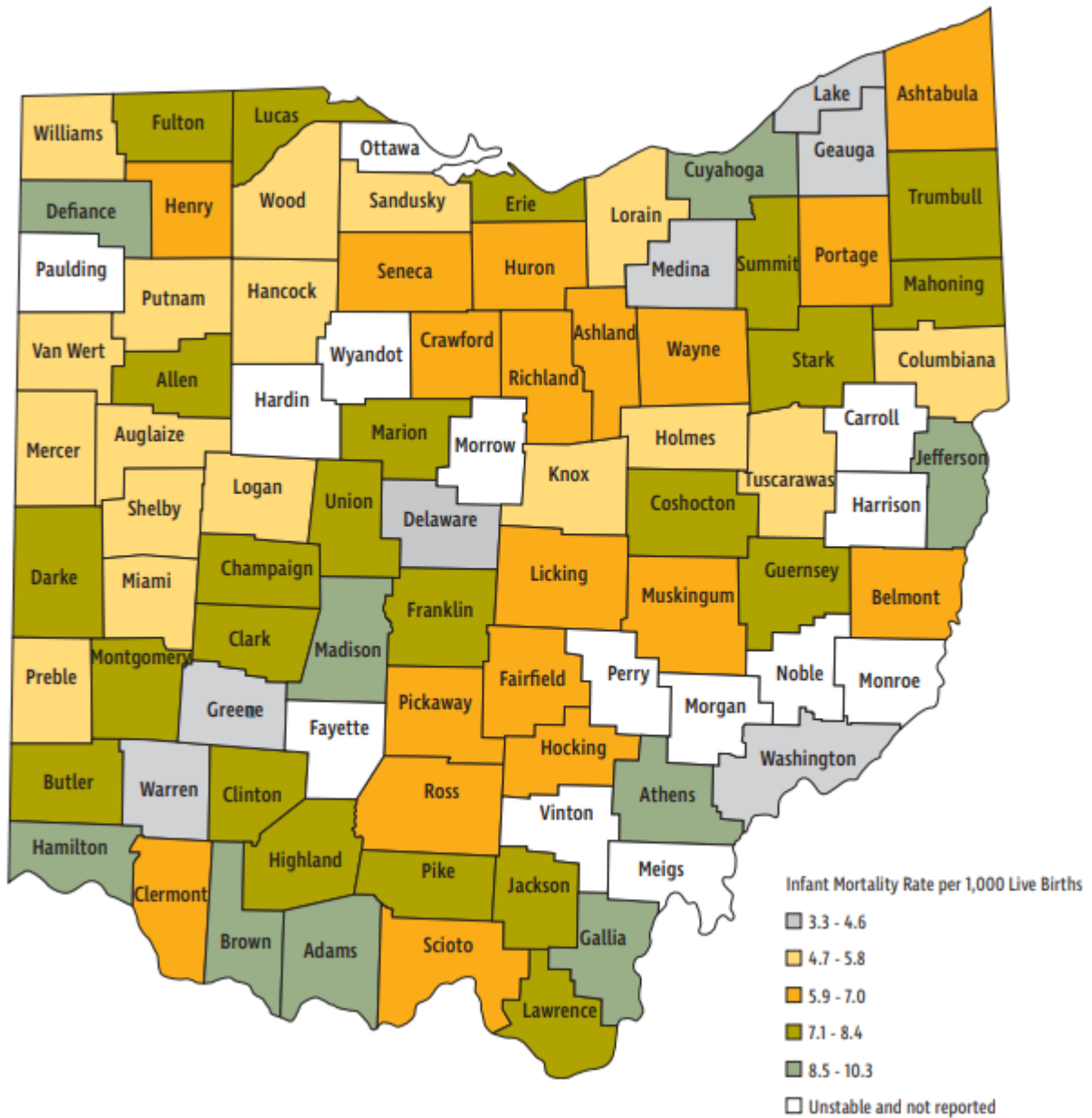


Note: birth data includes all births to adolescents and adults.
(Source: ODH Information Warehouse, updated 1/13/2020)

The following map shows the Ohio 5-year average infant mortality rate, by county from 2013 to 2017.

- From 2013 to 2017, the Ohio infant mortality rate was 7.2 per 1,000 live births.
- The Sandusky County infant mortality rate from 2013 to 2017 was 8.3** per 1,000 live births.

Ohio Infant Mortality Average 5-Year Rate by County, 2013 to 2017



**Rates based on fewer than 20 infant deaths should be interpreted with caution.
 (Source: Ohio Department of Health, Bureau of Vital Statistics, 2017 Ohio Infant Mortality Data: General Findings)

Youth Health: Weight Status

Key Findings

In 2019, 7% of Sandusky County youth were obese, according to body mass index (BMI) by age. When asked how they would describe their weight, 33% of Sandusky County youth reported that they were slightly or very overweight. Sixty-four percent (64%) of youth exercised for 60 minutes on 3 or more days per week.

Youth Weight Status

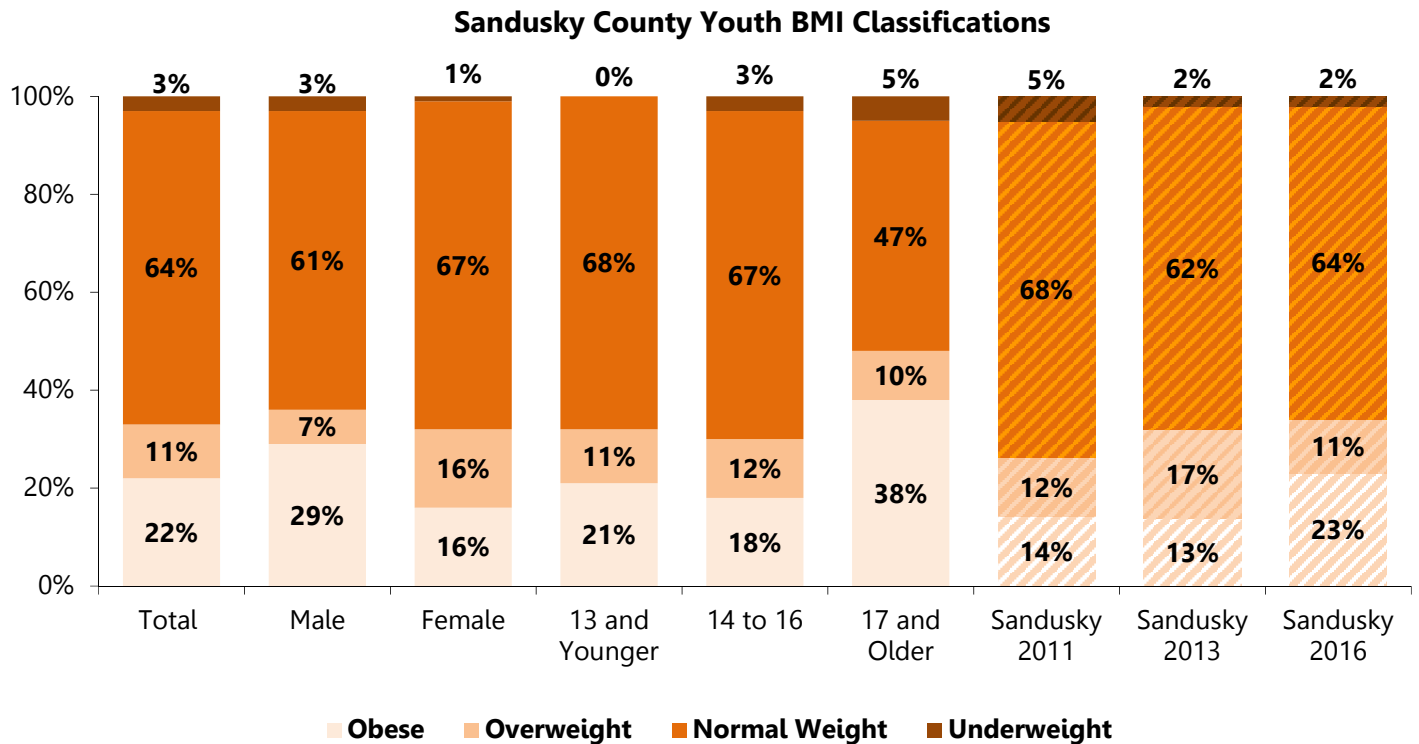
- BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific as children’s body fat changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- Twenty-two percent (22%) of Sandusky County youth were classified as obese by body mass index (BMI) calculations. Eleven percent (11%) of youth were classified as overweight. Sixty-four percent (64%) were normal weight, and 3% were underweight.
- One-third (33%) of youth described themselves as being either slightly or very overweight.
- Over half 51% of all youth were trying to lose weight, increasing to 60% of Sandusky County female youth (compared to 41% of males).
- Youth did the following to lose or keep from gaining weight in the past 30 days:
 - Drank more water (47%)
 - Exercised (46%)
 - Ate less food, fewer calories, or foods lower in fat (31%)
 - Ate more fruits and vegetables (28%)
 - Skipped meals (22%)
 - Went without eating for 24 hours or more (8%)
 - Smoked cigarettes or e-cigarettes to lose weight (2%)
 - Took diet pills, powders, or liquids without a doctor’s advice (2%)
 - Used illegal drugs (1%)
 - Vomited or took laxatives (1%)
- Thirty-five percent (35%) of youth did not do anything to lose or keep from gaining weight.

Healthy People 2020 Nutrition and Weight Status (NWS)

Objective	Sandusky 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	22% (6-12 Grade)	15% (9-12 Grade)	15%
	23% (9-12 Grade)		

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

The following graph shows the percentage of Sandusky County youth who were classified as obese, overweight, normal weight or underweight according to body mass index (BMI) by age. An example of how to interpret the information includes: 64% of all Sandusky County youth were classified as normal weight, 22% were obese, 11% were overweight, and 3% were 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.

Youth Nutrition

- Eleven percent (11%) of youth reported they went to bed hungry because their family did not have enough money for food at least one night per week. Two percent (2%) of youth went to bed hungry every night of the week.
- Twenty-seven percent (27%) of youth ate five or more servings of fruits **and/or** vegetables per day, 30% of youth ate three to four servings, and 37% of youth ate one to two servings. Six percent (6%) of youth ate zero servings of fruits and/or vegetables per day.

The table below indicates the number of servings Sandusky County youth had of fruit, vegetables, sugar-sweetened beverages and caffeinated beverages per day.

	5 or more servings	3-4 servings	1-2 servings	0 servings
Fruit	4%	20%	66%	10%
Vegetables	4%	18%	62%	16%
Sugar-sweetened beverage	9%	22%	51%	18%
Caffeinated beverage	7%	10%	45%	38%

Youth Physical Activity

- During the past week, youth participated in at least 60 minutes of physical activity at the following frequencies:
 - Every day (28%)
 - Five or more days (47%)
 - Three or more days (64%)
 - Zero days (18%)
- Sandusky County youth spent an average of 4.1 hours on their cell phone, 1.5 hours watching TV, 1.4 hours playing video games, and 1.2 hours on their computer/tablet.
- Nineteen percent (19%) of youth spent 3 or more hours watching TV on an average school day.

Youth Comparisons	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Obese	14%	13%	23%	22%	23%	15%
Overweight	12%	17%	11%	11%	11%	16%
Described themselves as slightly or very overweight	27%	29%	33%	33%	33%	32%
Trying to lose weight	52%	48%	48%	51%	48%	47%
Exercised to lose weight (in the past 30 days)	32%	50%	42%	46%	43%	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight (in the past 30 days)	12%	31%	25%	31%	31%	N/A
Went without eating for 24 hours or more (in the past 30 days)	2%	9%	4%	8%	7%	N/A
Took diet pills, powders, or liquids without a doctor's advice (in the past 30 days)	0%	3%	1%	2%	3%	N/A
Vomited or took laxatives (in the past 30 days)	0%	2%	1%	1%	2%	N/A
Physically active at least 60 minutes per day on every day in past week	62%	69%	30%	28%	27%	26%
Physically active at least 60 minutes per day on five or more days in past week	38%	43%	49%	47%	46%	46%
Did not participate in at least 60 minutes of physical activity on any day in past week	8%	12%	13%	18%	17%	15%
Watched TV three or more hours per day (on an average school day)	39%	27%	24%	19%	16%	21%

N/A – Not Available

Youth Health: Tobacco Use

Key Findings

In 2019, 7% of Sandusky County youth were current smokers. Fourteen percent (14%) of youth used an electronic vapor product in the past 30 days and 17% of youth used an electronic vapor product in the past year. Of youth who had used electronic vapor products in the past 12 months, (60%) put e-liquid or e-juice with nicotine in them.

Youth Tobacco Use

- Seven percent (7%) of Sandusky youth were current smokers, having smoked at some time in the past 30 days.
- Seven percent (7%) of all youth had tried cigarette smoking for the first time before the age of 13.
- One-fifth (20%) of those who tried cigarette smoking did so at 10 years old, or younger, and another 20% had done so by 12 years old. The average age of onset for smoking was 12.7 years old.
- Sixty-four percent (64%) of youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.
- Youth reported the following ways of obtaining cigarettes: took them from a family member (39%), person 18 years or older gave it to them (39%), borrowed/bummed them from someone else (33%), vending machine (8%), bought it from a store or gas station (6%), and some other way (31%).
- Sandusky youth used the following forms of tobacco in the past year: electronic vapor products (17%); Black and Milds (8%); Swishers (7%); cigarettes (6%); chewing tobacco, snuff, or dip (3%); cigars (2%); cigarillos (2%); pouch [Snus] (2%); hookah (1%); little cigars (<1%); Bidis (<1%); and dissolvable tobacco products (<1%).

Youth Electronic Vaping Product Use

- Fourteen percent (14%) of youth used an electronic vapor product, such as JUUL, Vuse, MarkTen, blu, e-cigarettes, vape pens, hookah pens, mods, in the past 30 days, increasing to 21% of those 17 and older.
- Of youth that had used e-cigarettes/vapes in the past 12 months, they reported putting the following in them:
 - E-liquid or e-juice with nicotine (60%)
 - E-liquid or e-juice without nicotine (39%)
 - Marijuana or THC in the e-liquid (35%)
 - Homemade e-liquid or e-juice (4%)

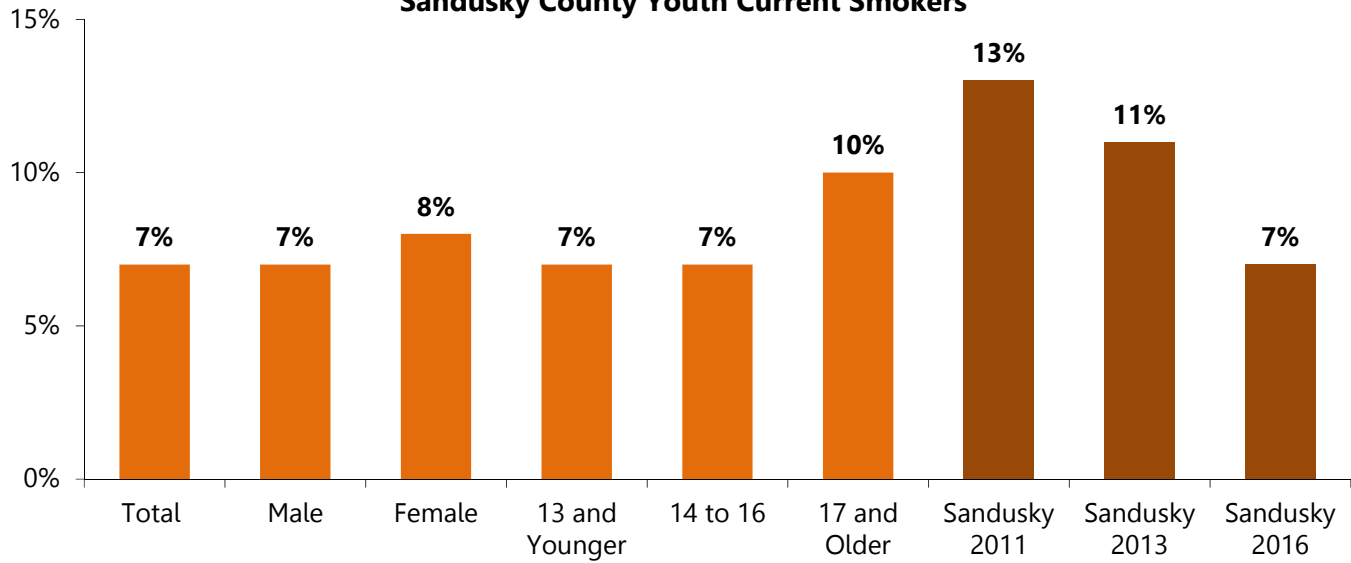
Healthy People 2020 Tobacco Use (TU)

Objective	Sandusky County 2019	U.S. 2017	Healthy People 2020 Target
TU-2.2 Reduce use of cigarettes by adolescents (past month)	7% (6-12 Grade) 8% (9-12 Grade)	9% (9-12 Grade)	16% (9-12 Grade)

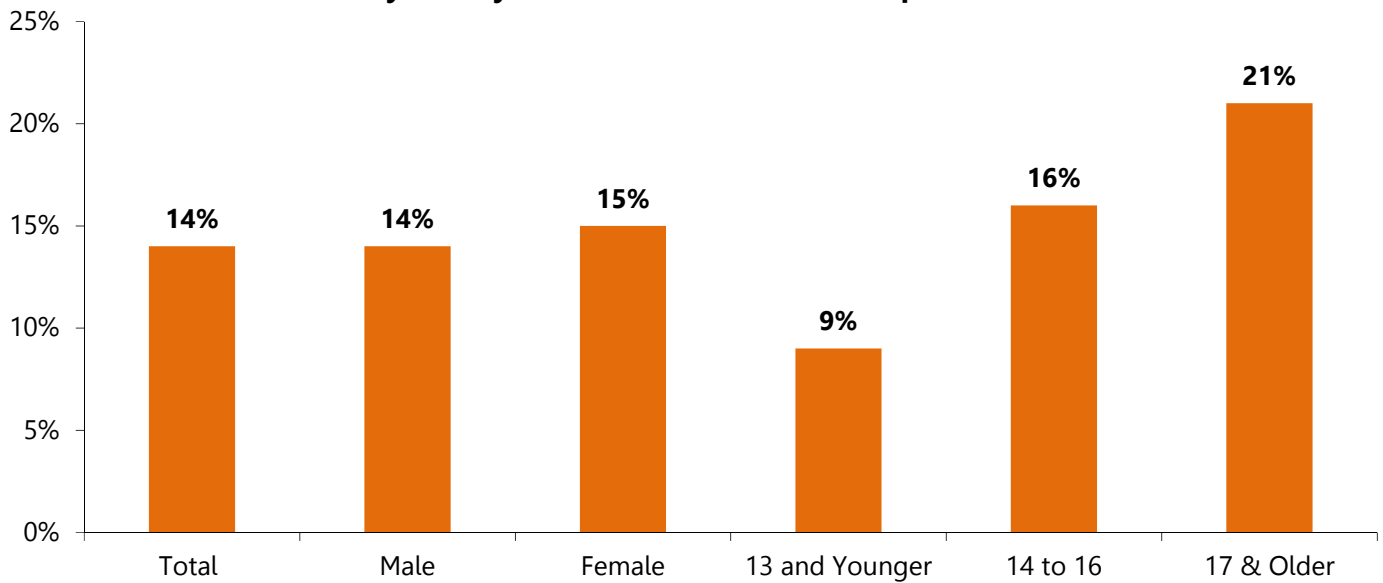
(Sources: Healthy People 2020 Objectives, 2017 U.S. YRBSS, 2019 Sandusky County Health Assessment)

The following graphs show the percentage of Sandusky County youth who were current smokers and current electronic vapor users. An example of how to interpret the information includes: 7% of all Sandusky County youth were current smokers, including 7% of males and 8% of females.

Sandusky County Youth Current Smokers



Sandusky County Youth Current Electronic Vapor Product Users



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 table below indicates correlations between current tobacco smokers and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 64% of current tobacco smokers had at least one drink of alcohol in the past 30 days, compared to 12% of non-current tobacco smokers.

Behaviors of Sandusky County Youth
Current Smokers vs. Non-Current Smokers

Youth Behaviors	Current Tobacco Smoker	Non-Current Tobacco Smoker
Currently participate in extracurricular activities	88%	85%
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)	76%	31%
Bullied (in the past 12 months)	68%	35%
Used marijuana (in the past 30 days)	67%	7%
Had at least one drink of alcohol (in the past 30 days)	64%	12%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	64%	27%
Had sexual intercourse (in their lifetime)	62%	22%
Attempted suicide (in the past 12 months)	36%	8%
Misused prescription medication (in the past 30 days)	27%	3%

“Current smokers” indicate youth who self-reported smoking at any time during the past 30 days.

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	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Current smoker (smoked on at least 1 day during the past 30 days)	13%	11%	7%	7%	8%	9%
First tried cigarette smoking before age 13 years (even one or two puffs)	N/A	N/A	6%	7%	4%	10%
Currently used an electronic vapor product (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pends, e-hookahs, and hookah pens on at least 1 day during the past 30 days)	N/A	N/A	N/A	14%	16%	13%
Used electronic vapor products frequently (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on 20 or more days during the past 30 days)	N/A	N/A	N/A	3%	4%	3%
Used electronic vapor products daily (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on all 30 days during the past 30 days)	N/A	N/A	N/A	3%	3%	2%

N/A – Not Available

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

In 2019, 49% of Sandusky County youth had at least one drink of alcohol in their life. Sixteen percent (16%) of youth had at least one drink in the past month, defining them as a current drinker. Of those who drank, 70% were defined as binge drinkers.

Youth Alcohol Consumption

- Almost half (49%) of Sandusky County youth had at least one drink of alcohol in their life, increasing to 61% of those ages 17 and older.
- Sixteen percent (16%) of youth had at least one drink in the past month, increasing to 24% of those ages 17 and older.
- Based on all youth surveyed, 11% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers, increasing to 21% of those ages 17 and older. Of those who were current drinkers, 70% were defined as binge drinkers.
- Of all youth, 17% had drunk alcohol for the first time before the age of 13.
- Thirty-seven percent (37%) of youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 34% took their first drink between the ages of 13 and 14, and 29% started drinking between the ages of 15 and 18. The average age of onset was 12.6 years old.
- Youth drinkers reported the following ways of obtaining their alcohol: parent gave it to them (40%); someone gave it to them (39%); friend's parent gave it to them (19%); someone older bought it (18%); older friend or sibling bought it for them (16%); took it from a store or family member (16%); bought it in a liquor store/convenience store/gas station (5%); bought it with a fake id (4%); and some other way (25%).
- During the past month, 17% of all Sandusky County youth had ridden in a car driven by someone who had been drinking alcohol.
- Three percent (3%) of youth drivers had driven a car in the past month after they had been drinking alcohol.
- Youth reported the last time a parent or guardian talked to them about the dangers of underage drinking or drug use was less than a month ago (26%), 2-3 months ago (12%), 4-6 months ago (7%), 7-12 months ago (4%), and more than a year ago (20%). About one-third (31%) of youth reported their parent never talked to them about this subject.

Healthy People 2020 Substance Abuse (SA)

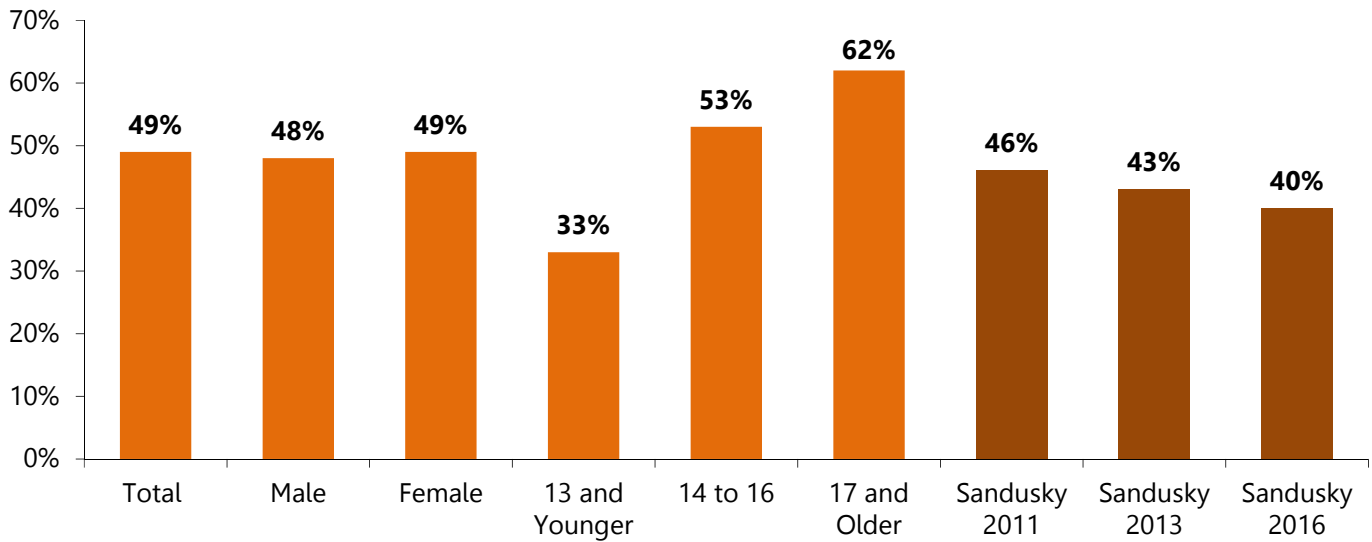
Objective	Sandusky County 2019	U.S. 2017	Healthy People 2020 Target
SA-14.4 Reduce the proportion of persons engaging in binge drinking during the past month	11% (6-12 Grade) 14% (9-12 Grade)	14% (9-12 Grade)	9%*

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

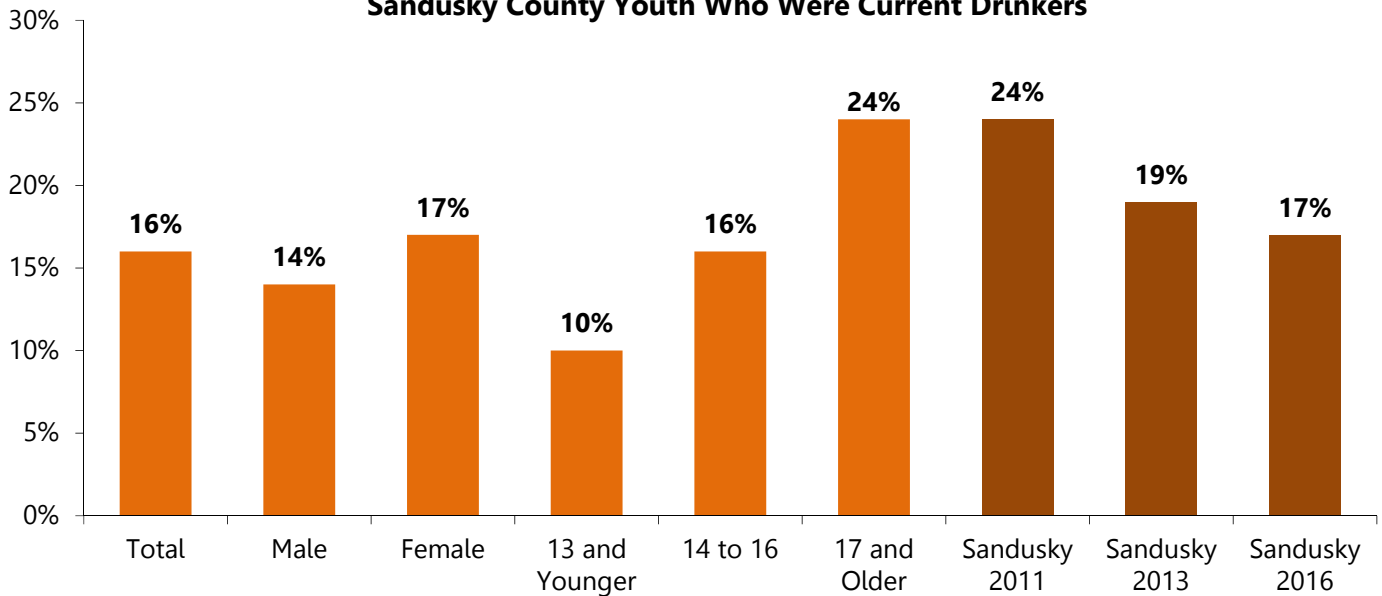
(Sources: Healthy People 2020 Objectives, 2017 YRBS, 2019 Sandusky County Health Assessment)

The following graphs show the percentage of Sandusky County youth who drank in their lifetime and were current drinkers. An example of how to interpret the information includes: 49% of all Sandusky County youth had drunk at some time in their life, including 48% of males and 49% of females.

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



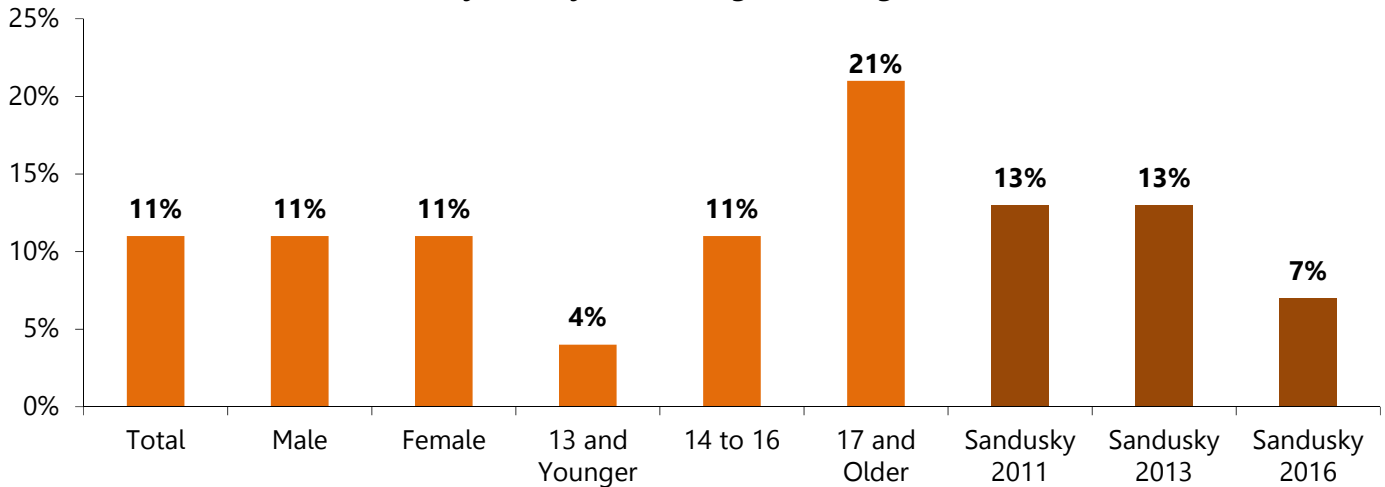
Sandusky County Youth Who Were Current Drinkers



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 Sandusky County youth who were binge drinkers. An example of how to interpret the information on the graph includes: 11% of all Sandusky County youth were binge drinkers, including 21% of those ages 17 and older.

Sandusky County Youth Binge Drinking in 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	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky 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 1 day during their life)	46%	43%	40%	49%	56%	60%
Current Drinker (at least one drink of alcohol on at least 1 day during the past 30 days)	24%	19%	17%	16%	19%	30%
Binge drinker (drank 5 or more drinks within a couple of hours on at least 1 day during the past 30 days)	13%	13%	7%	11%	14%	14%
Drank for the first time before age 13 (of all youth)	N/A	25%	12%	17%	12%	16%
Obtained the alcohol they drank by someone giving it to them (of current drinkers)	N/A	58%	41%	39%	34%	44%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on 1 or more occasion during the past 30 days)	20%	20%	16%	17%	14%	17%
Drove when they had been drinking alcohol (in a car or vehicle, 1 or more times during the 30 days before the survey, among youth who had driven a car or other vehicle)	4%	6%	7%	3%	4%	6%

N/A – Not Available

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: 55% of current drinkers had sexual intercourse in their lifetime, compared to 18% of non-current drinkers.

Behaviors of Sandusky County Youth
Current Drinkers vs. Non-Current Drinkers

Youth Behaviors	Current Drinker	Non-Current Drinker
Currently participate in extracurricular activities	86%	86%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	57%	24%
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%	30%
Had sexual intercourse (in their lifetime)	55%	18%
Bullied (in the past 12 months)	53%	34%
Used marijuana (in the past 30 days)	41%	6%
Had at least one drink of alcohol (in the past 30 days)	30%	3%
Attempted suicide (in the past 12 months)	27%	7%
Misused prescription medication (in the past 30 days)	24%	1%

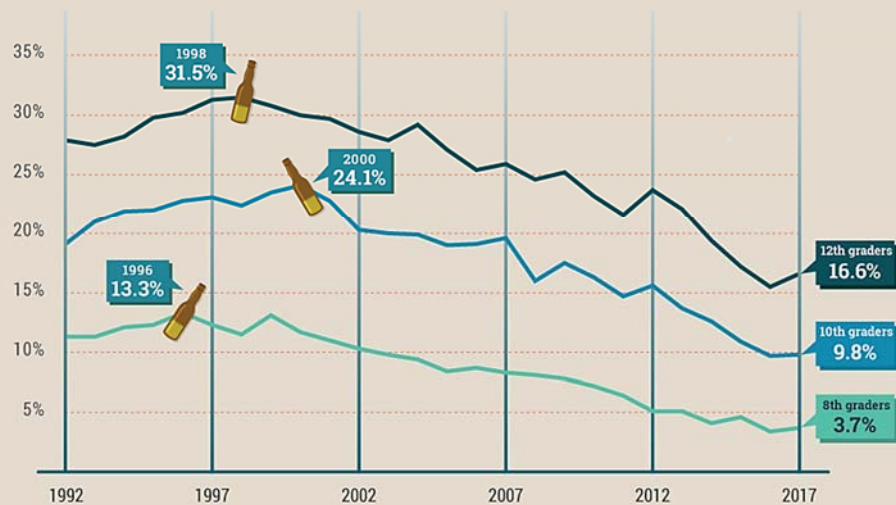
"Current drinkers" indicate youth who self-reported having had at least one drink of alcohol during the past 30 days.

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.

Teen Binge Drinking: On the Decline

- According to the 2018 Monitoring the Future (MTF) survey, alcohol consumption continues to show significant longer-term declines among the nation's 8th, 10th and 12th graders. For the three grades combined (8th, 10th and 12th) the proportion of students reporting lifetime, annual, past month alcohol consumption, and binge drinking are at the lowest levels since the study began
- Seventy-seven percent (77%) 8th graders report they have never consumed alcohol, down 66% proportionally from 70% in 1991 to 24% in 2018. Lifetime consumption of alcohol among tenth graders and twelfth graders declined proportionally 49% and 36%, respectively, since 1991
- One in five eighth grade students (19%), 38% of tenth graders, and 53% of twelfth graders report they consumed alcohol in the past year.

BINGE DRINKING RATES STEADY AFTER DECADES OF DECLINE



*Binge drinking is defined as having 5 or more drinks in a row in the last 2 weeks.

BINGE DRINKING APPEARS TO HAVE LEVELED OFF THIS YEAR, BUT IS SIGNIFICANTLY LOWER THAN PEAK YEARS.



DRUGABUSE.GOV

(Source: Foundation for Advancing Alcohol Responsibility, *Underage Drinking Statistics, 2018* and National Institute of Drug Abuse; *Monitoring the Future 2017 Survey Results, 2017*)

Youth Health: Drug Use

Key Findings

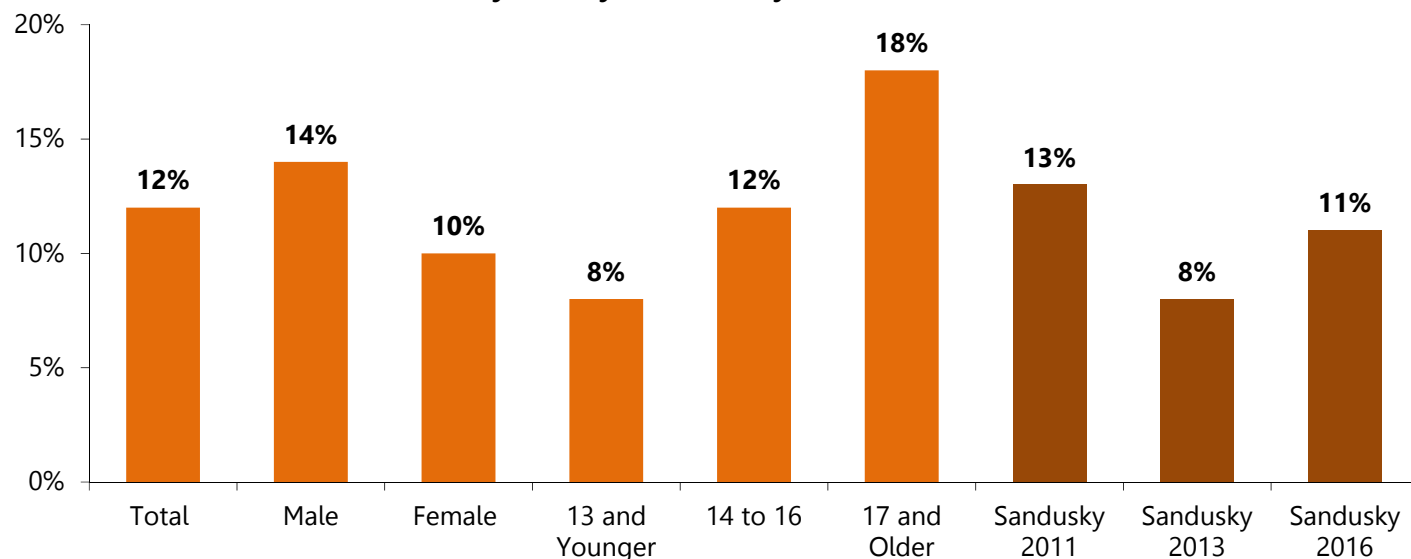
In 2019, 12% of Sandusky County youth had used marijuana at least once in the past 30 days. Five percent (5%) of youth used prescription drugs not prescribed for them in the past 30 days.

Youth Drug Use

- Twelve percent (12%) of Sandusky County youth used marijuana at least once in the past 30 days, increasing to 18% of those ages 17 and older.
- Sandusky County youth had tried the following one or more times in their life: liquid THC (8%); inhalants (6%); pouch/saliva/synthetic marijuana (5%); misused cough syrup (4%); medication without doctor's prescription (4%); misused hand sanitizer (2%); misused over-the-counter medications (1%); pharm party/skittles (1%); bath salts (1%); K2/spice (1%); cocaine (1%); methamphetamines (1%); steroids without doctor's prescription (1%); ecstasy/MDMA/Molly (1%); GhB (<1%); and heroin (<1%).
- During the past month, 5% of youth reported using prescription drugs not prescribed for them.
- In the past 12 months, 5% of youth reported being offered, sold, or given an illegal drug on school property.
- Youth agreed with the following statements:
 - Medical marijuana should be legalized (48%)
 - Marijuana is addictive (43%)
 - Using marijuana leads to using other drugs (39%)
 - Recreational marijuana should be legalized (33%)

The following graph shows youth marijuana use in the past 30 days. An example of how to interpret the information includes: 12% of youth used marijuana in the past 30 days, including 14% of males and 18% of those 17 and older.

Sandusky County Youth Marijuana Use in Past Month



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	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Used marijuana (in the past month)	13%	8%	11%	12%	13%	20%
Ever used methamphetamines (in their lifetime)	1%	1%	0%	1%	1%	3%
Ever used cocaine (in their lifetime)	3%	4%	1%	1%	2%	5%
Ever used heroin (in their lifetime)	<1%	2%	0%	<1%	1%	2%
Ever used inhalants (in their lifetime)	10%	10%	5%	6%	5%	6%
Ever used ecstasy (also called MDMA in their lifetime)	5%	3%	1%	1%	2%	4%
Misused medications that were not prescribed to them or took more to get high and/or feel more alert (in the past month)	12%	9%	6%	4%	4%	N/A
Ever took steroids without a doctor's prescription (in their lifetime)	N/A	1%	1%	1%	2%	3%
Were offered, sold, or given an illegal drug on school property (in the past 12 months)	7%	6%	4%	5%	4%	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: 55% of current marijuana users had at least one drink of alcohol in the past 30 days, compared to 10% of non marijuana users.

Behaviors of Sandusky County Youth Current Marijuana Use vs. Non-Current Marijuana Use

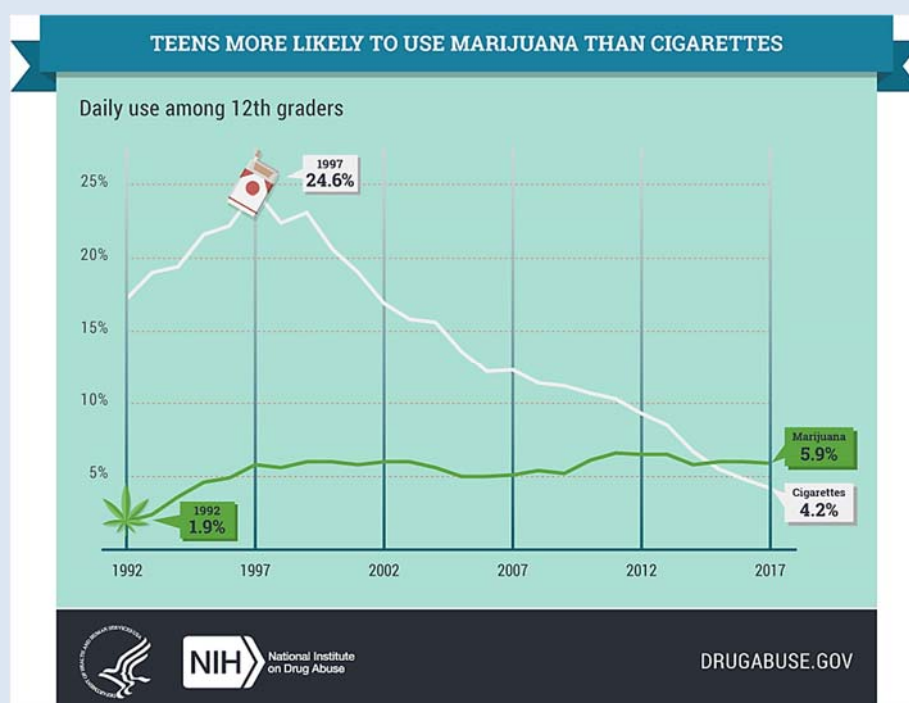
Youth Behavior	Current Marijuana User	Non-Current Marijuana User
Had sexual intercourse (in their lifetime)	70%	18%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	60%	25%
Had at least one drink of alcohol (in the past 30 days)	55%	10%
Bullied (in the past 12 months)	49%	36%
Misused prescription medication (in the past 30 days)	25%	2%
Attempted suicide (in the past 12 months)	23%	8%

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

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.

Marijuana Use and Teens

- Marijuana remains the most used illicit substance among youth. Recent public discussions about medical marijuana and the public debate over its legal status is leading to a reduced perception of harm among young people. However, using marijuana can have harmful and long-lasting effects on a teen's health and well-being. Consider these facts:
 - Research suggests that the effects on attention, memory, and learning can be long-term and even permanent in people who begin using marijuana regularly as teens.
 - Marijuana use has been linked to a range of mental health problems in teens such as depression or anxiety. Psychosis (loss of reality) has also been seen in teens at higher risk like those with a family history of marijuana use.
 - Drugs, including marijuana, affect the way teens drive, which puts them, their passengers, and other drivers on the road at risk. Drugs can alter a teen's perception, attention, balance, coordination, reaction time, and other skills they need to stay alert and safe.
 - Research shows that about 1 in 6 teens who repeatedly use marijuana can become addicted, which means they may make unsuccessful efforts to quit using marijuana or give up important activities with friends and family in favor of using marijuana.
- Various factors can contribute to teen marijuana use, from a family history of drug abuse to hanging around people who use marijuana. However, research has shown that parents do have a big influence on their teens even when it doesn't appear that way. In fact, teens are more likely to use marijuana if their parents or friends use it, and less likely to use marijuana if their parents do not approve of it.
- The bottom line: using marijuana can have harmful and long-lasting effects on a teen's health and well-being. Unlike adults, the teen brain is actively developing and often will not stop until the mid-20s. Marijuana use during this period can have a detrimental impact, affecting a teen's brain and their ability to progress and grow.



(Source: Marijuana Use and Teens, Centers for Disease Control and Prevention 2017 and National Institute of Drug Abuse; Monitoring the Future 2017 Survey Results, 2017)

Youth Health: Sexual Behavior

Key Findings

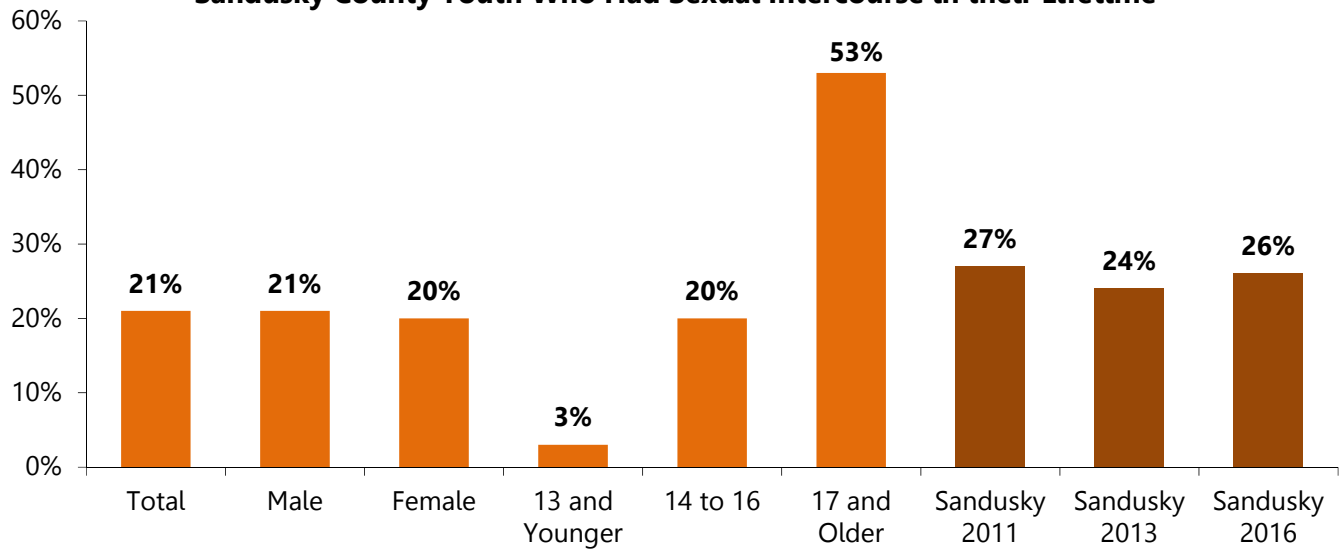
In 2019, 21% of Sandusky County youth reported having had sexual intercourse in their lifetime. Twenty-one percent (21%) of sexually active youth had four or more sexual partners. Nine percent (9%) of youth engaged in intercourse without a reliable method of protection, and 27% reported they were unsure if they used a reliable method.

Youth Sexual Behavior

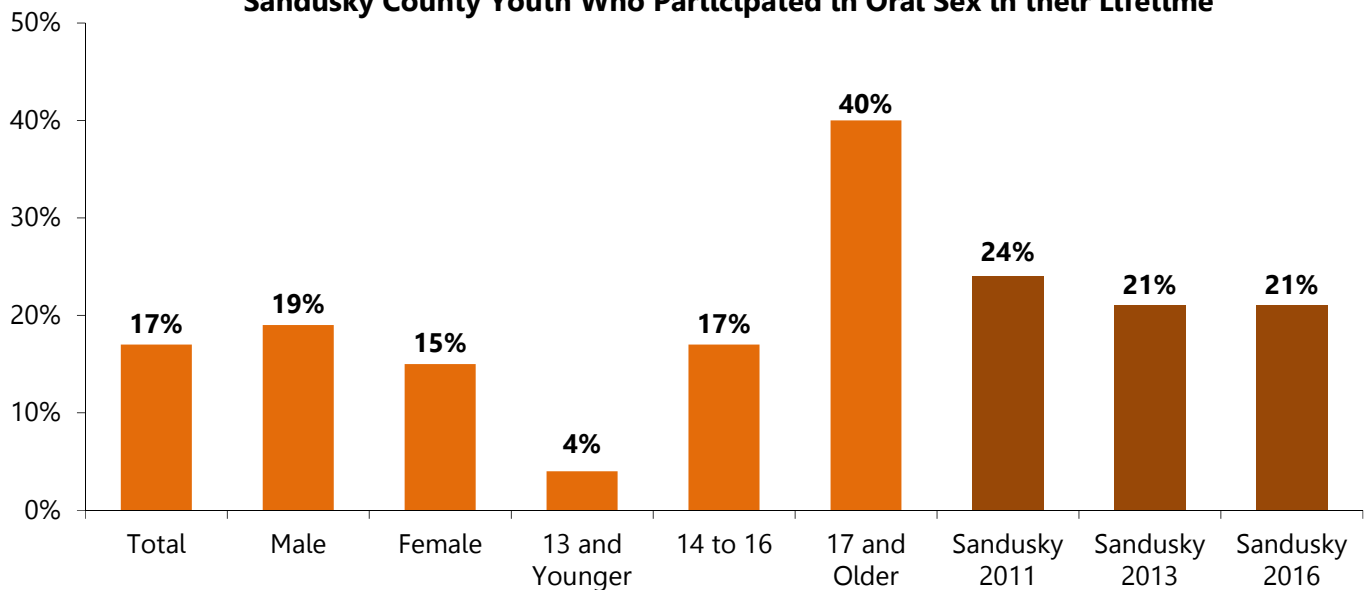
- Over one-fifth (21%) of Sandusky County youth had sexual intercourse in their lifetime, increasing to 53% of those ages 17 and older.
- Seventeen percent (17%) of youth had participated in oral sex in their lifetime, increasing to 40% of those ages 17 and over.
- Five percent (5%) of youth had participated in anal sex in their lifetime, increasing to 16% of those ages 17 and over.
- Over one-fifth (22%) of youth had participated in sexting in their lifetime, increasing to 46% of those ages 17 and over.
- One-quarter (25%) of youth had viewed pornography in their lifetime, increasing to 35% of males and 49% of those ages 17 and over.
- Of sexually active youth, 46% had one sexual partner and 54% had multiple partners.
- Twenty-one percent (21%) of sexually active youth had four or more sexual partners in their lifetime.
- Six percent (6%) of all Sandusky County youth had four or more sexual partners in their lifetime.
- Of those youth who were sexually active, 28% had done so by the age of 13. Another 47% had done so by the age of 15. The average age of onset was 14.2 years old.
- Of all youth, 4% were sexually active before the age of 13.
- Sandusky County youth reported they or their partner using the following methods to prevent pregnancy the last time they had sexual intercourse: condoms (46%); birth control pills (19%); withdrawal method (7%); an IUD or implant (6%); a shot, patch or birth control ring (5%); and used some other method (5%). Thirteen percent (13%) of youth reported they were gay or lesbian. However, 9% engaged in intercourse without a reliable method of protection, and 27% reported they were unsure.
- Sandusky County youth had experienced the following in their lifetime: had sexual contact with a female (14%); had sexual contact with a male (11%); wanted to get pregnant (3%); treated for and STD (2%); had a miscarriage (1%); had a child (1%); been pregnant (1%); gotten someone pregnant (1%); had an abortion (1%); tried to get pregnant (1%); and had sex in exchange for something of value (<1%).
- In the past month, Sandusky County youth reported they experienced the following:
 - They received a text or an e-mail with a revealing or sexual photo of someone (16%)
 - They texted, emailed, or posted electronically a revealing or sexual photo of themselves (9%)
 - A revealing or sexual photo of them was texted, e-mailed, or posted electronically without their permission (4%)

The following graphs show the percentage of Sandusky County youth who participated in sexual intercourse and oral sex. An example of how to interpret the information includes: 21% of all youth had sexual intercourse, including 53% of those 17 and older.

Sandusky County Youth Who Had Sexual Intercourse in their Lifetime



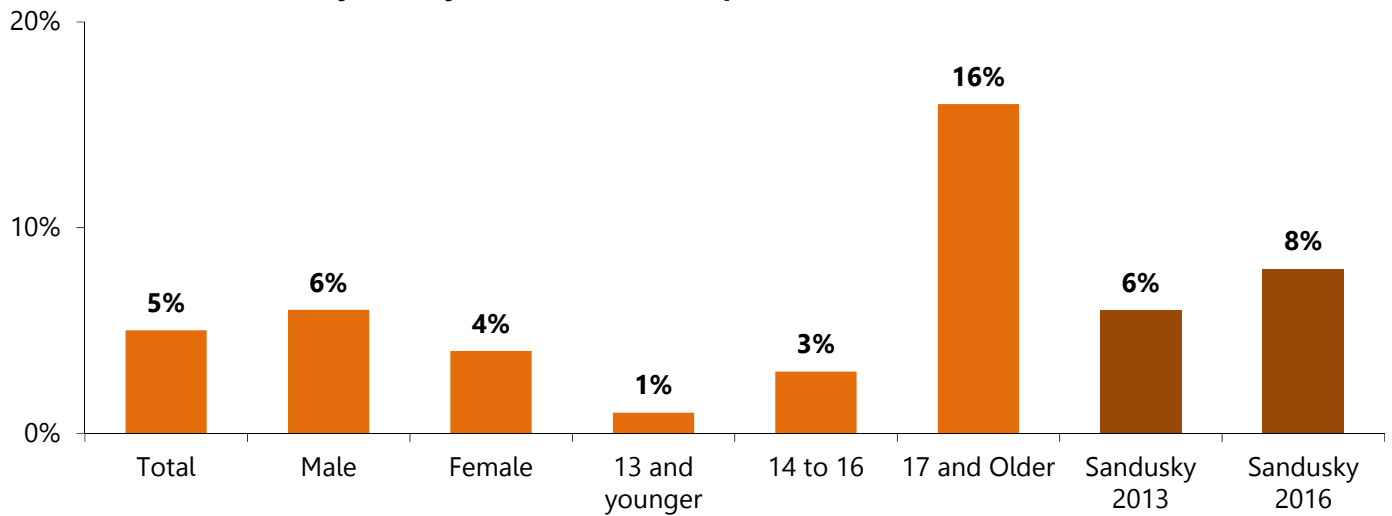
Sandusky County Youth Who Participated in Oral Sex in their Lifetime



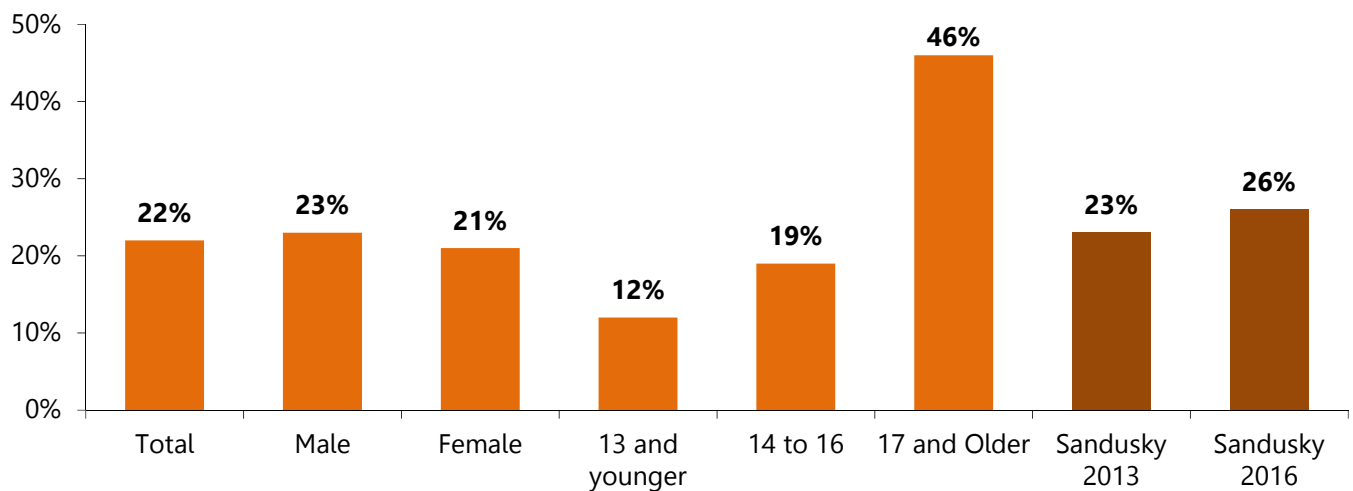
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show the percentage of Sandusky County youth who participated in anal sex and sexting. An example of how to interpret the information includes: 5% of all youth had anal sex, including 6% of males and 16% of those 17 and older.

Sandusky County Youth Who Participated in Anal Sex in their Lifetime



Sandusky County Youth Who Participated in Sexting 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.

Youth Comparisons	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Had sexual intercourse (in their lifetime)	27%	24%	26%	21%	28%	40%
Had sexual intercourse with four or more persons (of all youth during their life)	15%	6%	7%	6%	7%	10%
Had sexual intercourse before the age 13 (for the first time of all youth)	13%	4%	3%	4%	3%	3%
Used a condom (during last sexual intercourse)	69%	69%	59%	46%	54%	54%
Used birth control pills (during last sexual intercourse)	36%	33%	29%	19%	22%	21%
Used an IUD (during last sexual intercourse)	N/A	N/A	2%	1%	7%	4%
Used a shot, patch or birth control ring (during last sexual intercourse)	8%	N/A	7%	<1%	6%	5%
Did not use any method to prevent pregnancy (during last sexual intercourse)	N/A	8%	7%	9%	7%	14%

N/A –Not Available

Youth Health: Mental Health

Key Findings

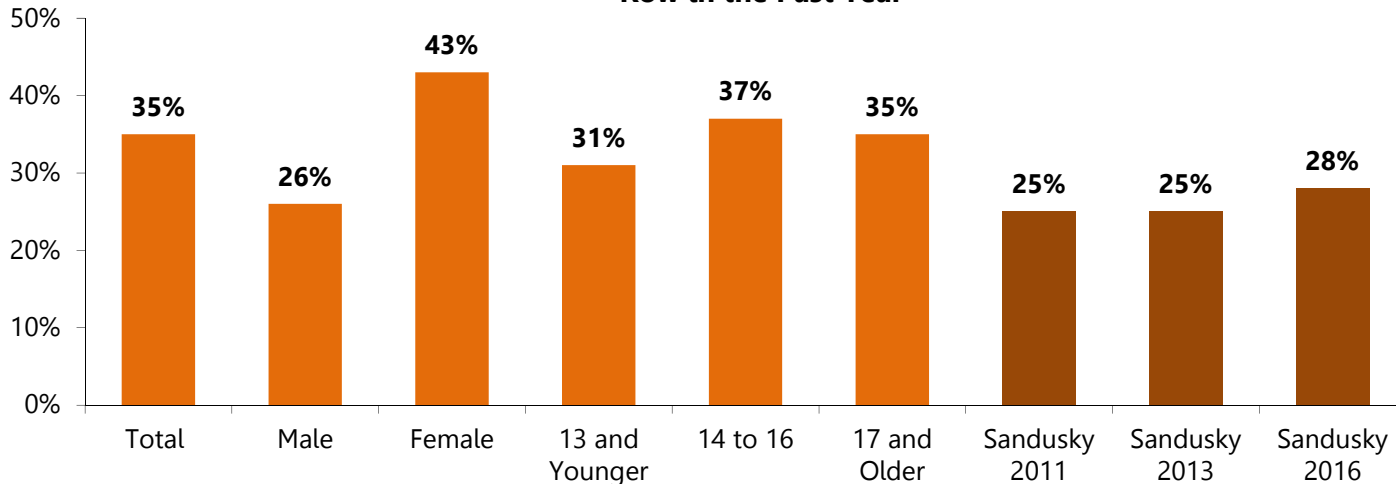
Thirty-five percent (35%) of Sandusky County youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. Forty-four percent (44%) of youth reported academic success caused them anxiety, stress, or depression.

Youth Mental Health

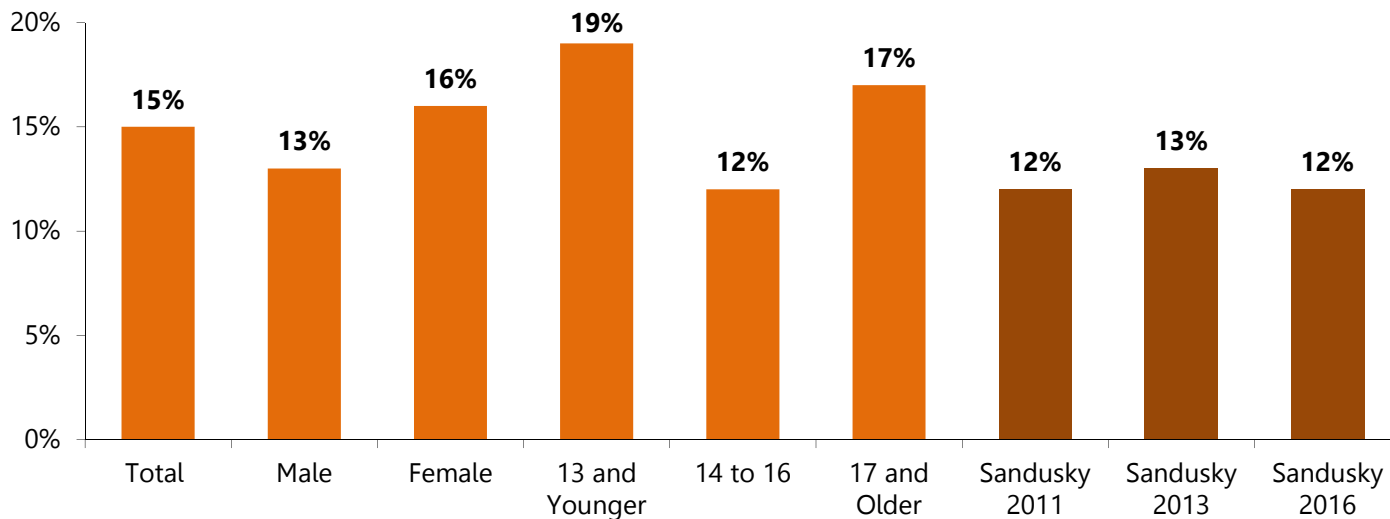
- Thirty-five percent (35%) of Sandusky County youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 43% of females.
- Fifteen percent (15%) of youth reported they had made a plan to attempt suicide in the past 12 months, increasing to 19% of those 13 and younger.
- In the past year, 10% of youth had attempted suicide. Five percent (5%) of youth had made more than one attempt.
- Sandusky County youth reported the following likeliness of seeking help if they were feeling depressed or suicidal: very likely (13%), somewhat likely (17%), somewhat unlikely (12%), and very unlikely (19%).
- Youth reported the following caused them anxiety, stress or depression: academic success (44%), self-image (37%), death of close family member or friend (36%), fighting with friends (35%), sports (31%), stress at home (31%), peer pressure (29%), breakup (25%), dating relationship (25%), fighting at home (23%), being bullied (20%), parent divorce/separation (16%), social media (15%), poverty/no money (14%), parent is sick (12%), caring for younger siblings (10%), current world news/politics (8%), alcohol or drug use in the home (8%), sexual orientation (6%), not having enough to eat (4%), not having a place to live (3%), and other (17%).
- Youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (53%); hobbies (39%); texting someone (36%); eating (31%); exercise/sports (25%); talking to someone in their family (23%); talking to a peer (20%); using social media (17%); breaking something (13%); praying/religion (13%); shopping (11%); drink alcohol/smoke/use tobacco/use illegal drugs (9%); and write in a journal (8%). Fifteen percent (15%) of youth reported they did not have anxiety, stress, or depression.
- When youth had feelings of depression or suicide, they talked to the following: best friend (35%); girlfriend or boyfriend (19%); parents (16%); brother/sister (9%); adult friend (6%); an adult relative such as a grandparent, aunt or uncle (5%); caring adults (5%); school counselor (5%); coach (4%); professional counselor (4%); teacher (3%); pastor/priest (1%); youth minister (1%); Teen Line or First Call for Help (1%); and other (4%). Seventeen percent (17%) of youth reported they had no one to talk to when they had feelings of depression or suicide.
- Youth reported the following reasons for not seeking help if they were dealing with anxiety, stress, depression or thoughts of suicide: they can handle it themselves (36%), worried what others might think (29%), no time (14%), did not know where to go (11%), cost (9%), their family would not support them (8%), their friends would not support them (4%), and transportation (2%). Three percent (3%) of youth reported they were currently in treatment.

The following graphs show Sandusky County youth who felt sad or hopeless for two or more weeks in a row and made a plan about attempting suicide. An example of how to interpret the information on the first graph includes: 35% of youth felt sad or hopeless for two or more weeks in a row, including 26% of males, and 43% of females.

Sandusky County Youth Who Felt Sad or Hopeless for Two or More Weeks in a Row in the Past Year

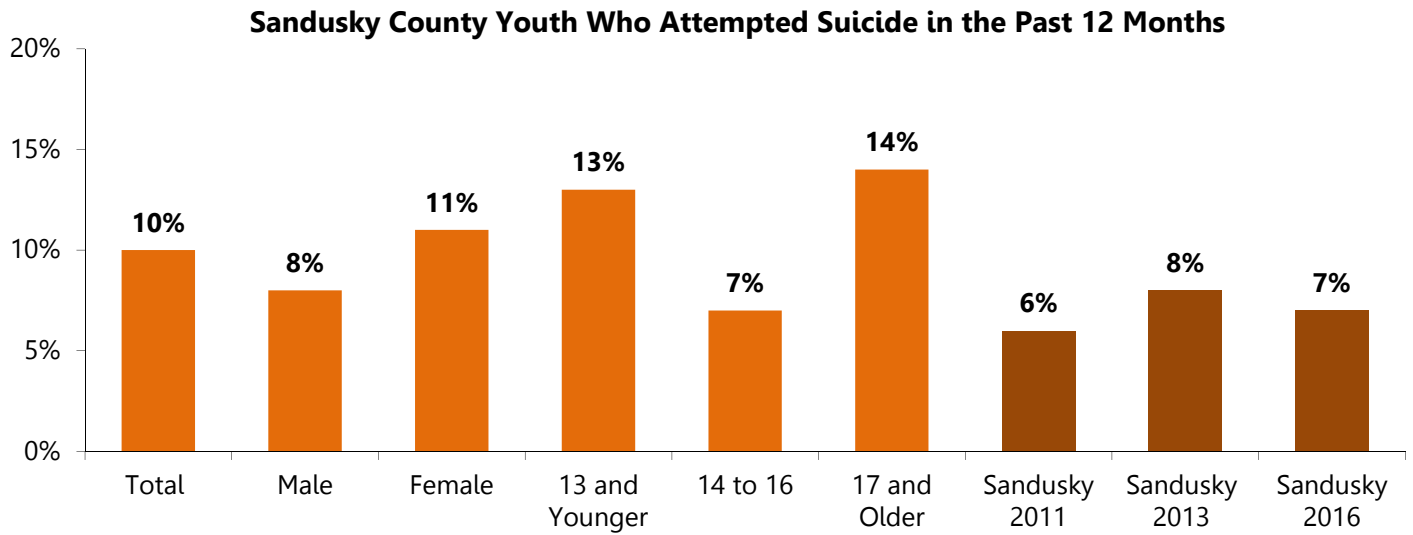


Sandusky County Youth Who Had Made a Plan About Attempting Suicide in the Past 12 Months



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 overall survey.

The following graphs show Sandusky County youth who had attempted suicide in the past year. An example of how to interpret the information on the graph includes: 10% of youth had attempted suicide, including 13% of youth 13 and younger, and 14% of youth 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	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
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 12 months)	25%	25%	28%	35%	35%	32%
Made a plan to attempt suicide (in the past 12 months)	12%	13%	12%	15%	13%	17%
Attempted suicide (in the past 12 months)	6%	8%	7%	10%	8%	7%

The table below indicates correlations between those who attempted suicide in the past 12 months and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 73% of those who attempted suicide were bullied in the past 12 months, compared to 33% of those who did not attempt suicide.

Behaviors of Sandusky County Youth
Attempted Suicide vs. Did Not Attempt Suicide

Youth Behaviors	Attempted Suicide	Did Not Attempt Suicide
Bullied (in the past 12 months)	73%	33%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	67%	26%
Had sexual intercourse (in their lifetime)	44%	23%
Had at least one drink of alcohol (in the past 30 days)	43%	13%
Used marijuana (in the past 30 days)	27%	10%
Smoked cigarettes (in the past 30 days)	27%	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.

Youth Depression: Signs and Symptoms

- Occasionally being sad or feeling hopeless is a part of every child’s life. However, some children feel sad or uninterested in things that they used to enjoy, or feel helpless or hopeless in situations where they could do something to address the situations. When children feel persistent sadness and hopelessness, they may be diagnosed with depression.
- Examples of behaviors often seen when children are depressed include
 - Feeling sad, hopeless, or irritable a lot of the time
 - Not wanting to do or enjoy doing fun things
 - Changes in eating patterns – eating a lot more or a lot less than usual
 - Changes in sleep patterns – sleeping a lot more or a lot less than normal
 - Changes in energy – being tired and sluggish or tense and restless a lot of the time
 - Having a hard time paying attention
 - Feeling worthless, useless, or guilty
 - Self-injury and self-destructive behavior
- Extreme depression can lead a child to think about suicide or plan for suicide. For youth ages 10-24 years, suicide is the leading form of death.
- Some children may not talk about helpless and hopeless thoughts, and they may not appear sad. Depression might also cause a child to make trouble or act unmotivated, so others might not notice that the child is depressed or may incorrectly label the child as a troublemaker or lazy.

(Source: CDC, Children’s Mental Health: Anxiety and Depression, April 15, 2019)

Youth Health: Social Determinants of Health

Key Findings

Thirty percent (30%) of Sandusky County youth had three or more adverse childhood experiences (ACEs) in their lifetime. Eighty-four percent (84%) of youth participated in extracurricular activities. Sixty-six percent (66%) of youth had been to the doctor for a routine check-up in the past year.

Personal Health

- Youth had last saw a doctor or healthcare professional for a routine checkup at the following frequencies: less than a year ago (64%), one to two years ago (12%), three to four years ago (2%), five or more years ago (1%), and never (2%). Nineteen percent (19%) of youth did not know.
- 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 (71%), one to two years ago (10%), more than two years ago (5%), and never (2%). Twelve percent (12%) of youth did not know.

Youth Comparisons	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Visited a doctor for a routine checkup in the past year	67%	73%	64%	64%	67%	N/A
Visited a dentist in the past year (for a check-up, exam, teeth cleaning, or other dental work)	74%	74%	66%	71%	73%	N/A

N/A – Not Available

Personal Safety

- In the past month, youth drivers did the following while driving: wore a seatbelt (97%), ate (33%), drove while tired or fatigued (30%), talked on their cell phone (22%), used their cell phone other than for talking or texting (20%), texted (20%), used marijuana (7%), drank alcohol (5%), used illegal drugs (3%), applied makeup (2%), misused prescription drugs (2%), and read (1%).
- In the past year, Sandusky County youth reported gambling money or personal items at the following frequencies: daily (1%), about once a week (2%), about once a month (3%), and less than once a month (5%). Eighty-nine percent (89%) of youth did not gamble money or personal items in the past year.

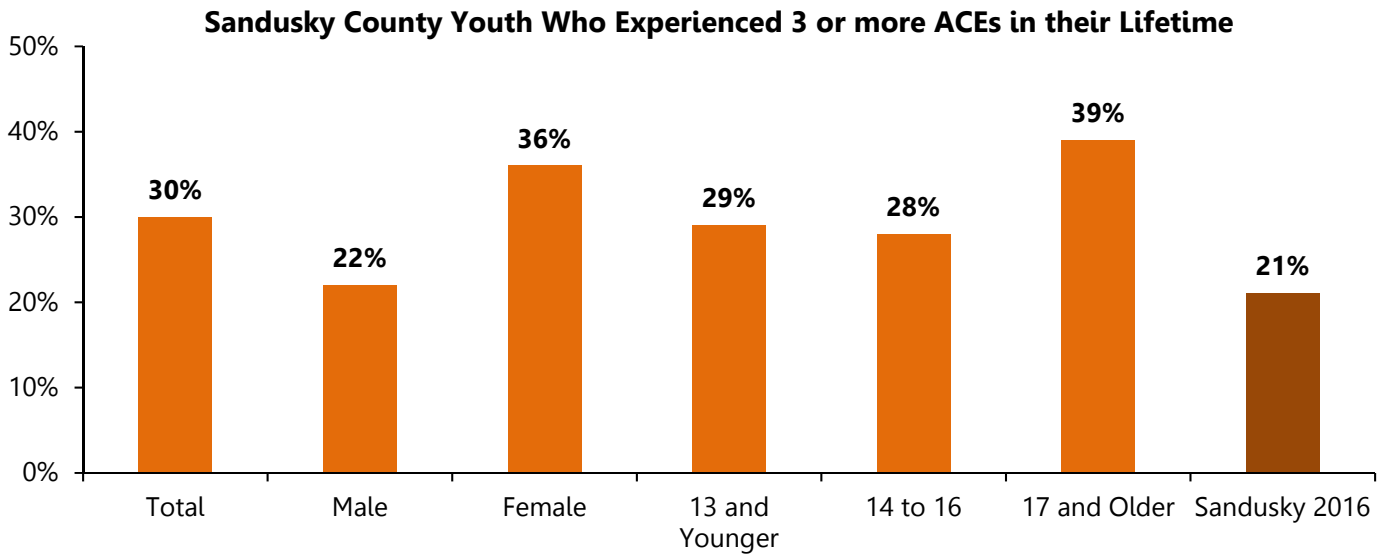
Neighborhood and Built Environment

- Sandusky County youth lived with the following: both parents (52%), one parent (20%), mother and step-father (14%), parents have joint custody (8%), grandparents (7%), father and step-mother (4%), mother and partner (4%), another relative (3%), guardians/foster parents (2%), on their own or with friends (1%), and father and partner (<1%).
- Youth reported their parent or guardian regularly did the following: talked to them about school (70%); asked about homework (69%); made the family eat a meal together (55%); went to school meetings or events at school (51%); talked about healthy choices (45%); helped with school work (50%); talked about social media (37%); and talked about alcohol use, drug use or sex (36%). Nine percent (9%) of youth reported their parent or guardian never did any of those things.

Social and Community Context

- Sandusky County youth reported having at least one adult they could talk to and look up to in the following places: home (83%), school (69%), and their community (59%).
- Eighty-four percent (84%) of youth participated in extracurricular activities. They participated in the following:
 - Sports or intramural program (45%)
 - School club or social organization (36%)
 - Exercise outside of school (32%)
 - Part-time job (20%)
 - Take care of siblings after school (20%)
 - Babysit for other kids (15%)
 - Church or religious organization (14%)
 - Church youth group (14%)
 - Volunteer in the community (13%)
 - Take care of parents or grandparents (4%)
 - Some other organized activity (9%)
- Sandusky County youth reported the following reasons for not participating in extracurricular activities:
 - Not interested (30%)
 - Don't fit in/feel comfortable (16%)
 - Had a job (12%)
 - Watch their younger siblings (7%)
 - Transportation (7%)
 - Cost (6%)
 - Parents would not take them (3%)
 - Program(s) do not exist/not offered (3%)
 - Taking care of parent or grandparent (1%)
- Sixty percent (60%) of youth reported the following adverse childhood experiences (ACEs):
 - Parents became separated or divorced (36%)
 - Parents or adults in the home swore at them, insulted them or put them down (28%)
 - Lived with someone who was a problem drinker or an alcoholic (19%)
 - Parents were not married (18%)
 - Family did not look out for each other, feel close to each other, or support each other (18%)
 - Lived with someone who served time in jail or was sentenced to serve time in a prison, jail, or other correctional facility (17%)
 - Lived with someone who was depressed, mentally ill, or suicidal (17%)
 - Lived with someone who used illegal street drugs, or who abused prescription medication (11%)
 - Parents or adults in home slapped, hit, kicked, punched, or beat up each other (10%)
 - 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 (4%)
 - Did not have enough to eat, had to wear dirty clothes, and had no one to protect you (4%)
 - 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 (1%)
- Thirty percent (30%) of youth had experienced three or more adverse childhood experiences (ACEs) in their lifetime.

The following graph shows the percentage of Sandusky County youth who had experienced three or more adverse child experiences (ACEs) in their lifetime. An example of how to interpret the information includes: 30% of all Sandusky County youth had experienced three or more ACEs in their lifetime, including 39% 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 those who experienced three or more ACEs, as well as other activities and experiences. An example of how to interpret the information includes: 57% of those who experienced three or more ACEs in their lifetime had been bullied in the past year, compared to 16% of those who did not experience any ACEs.

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

Youth Behaviors	Experienced 3 or More ACEs	Did Not Experience Any ACEs
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 12 months)	57%	16%
Bullied (in the past 12 months)	57%	27%
Had sexual intercourse (in their lifetime)	38%	17%
Have had at least one drink of alcohol (in the past month)	31%	8%
Used marijuana (in the past 30 days)	25%	3%
Attempted suicide (in the past 12 months)	23%	2%
Smoked cigarettes (in the past 30 days)	16%	2%
Misused prescription medication (in the past 30 days)	11%	1%

"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: Violence

Key Findings

Eight percent (8%) of Sandusky County youth carried a weapon (such as a gun, knife, or club) in the past month. Twenty percent (20%) of youth had been involved in a physical fight in the past year. Thirty-seven percent (37%) of youth had been bullied in the past year.

Violence-Related Behaviors

- Eight percent (8%) of youth had carried a weapon (such as a gun, knife, or club) in the past month, increasing to 12% of males.
- Two percent (2%) of youth had carried a weapon (such as a gun, knife, or club) on school property in the past month.
- Six percent (6%) of youth did not go to school on one or more days in the past month because they did not feel safe at school or on their way to or from school.
- Eleven percent (11%) of youth were threatened or injured with a weapon on school property in the past year.

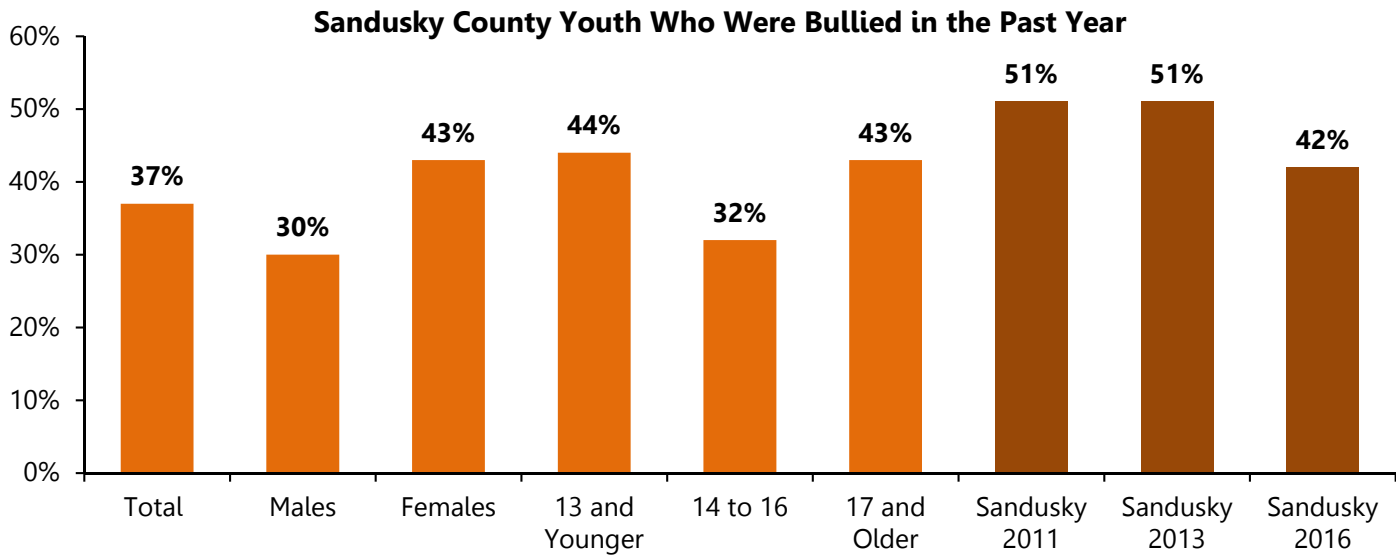
Physical and Sexual Violence

- In the past year, 20% of youth had been involved in a physical fight, increasing to 26% of males.
- Of those who had been in a physical fight, 49% had been in a fight on more than one occasion.
- Thirty-four percent (34%) of youth purposefully hurt themselves in their life by cutting, scratching, burning, hitting or biting, increasing to 40% of females.
- Sandusky County youth had been forced to engage in the following: touched in an unsafe (sexual) way (8%), other sexual activity (2%), sexual intercourse (2%), and oral sex (1%).
- Eight percent (8%) of youth reported someone they were dating or going out with forced them to do sexual things that they did not want to do.

Bullying

- Thirty-seven percent (37%) of Sandusky County youth had been bullied in the past year. The following types of bullying were reported:
 - 26% of youth were verbally bullied (teased, taunted or called harmful names)
 - 22% youth were indirectly bullied (spread mean rumors about them or kept them out of a “group”)
 - 12% of youth were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
 - 8% of youth were physically bullied (were hit, kicked, punched or people took their belongings)
 - 4% of youth were sexually bullied (used nude or semi-nude pictures to pressure someone to have sex that did not want to, blackmail, intimidate, or exploit another person)
- Twenty-six percent (26%) reported being bullied on school property in the past year.

The following graph shows the percentage of Sandusky County youth who were bullied in the past year. An example of how to interpret the information includes: 37% of youth were bullied in the past year, including 43% of females and 44% of those ages 13 or younger.



Note 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 table below indicates correlations between those who were bullied in the past 12 months and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 51% of those who were bullied 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 12 months, compared to 25% of those who were not bullied.

Behaviors of Sandusky County Youth Bullied vs. Non-Bullied

Youth Behavior	Bullied	Non-Bullied
Currently participate in extracurricular activities	88%	84%
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 12 months)	51%	25%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	45%	20%
Classified as overweight or obese by body mass index (BMI)	43%	28%
Had sexual intercourse (in their lifetime)	30%	21%
Had at least one drink of alcohol (in the past 30 days)	22%	12%
Attempted suicide (in the past 12 months)	20%	4%
Used marijuana (in the past 30 days)	16%	10%
Smoked cigarettes (in the past 30 days)	14%	4%
Carried a weapon (in the past 30 days)	9%	8%
Misused prescription medication (in the past 30 days)	8%	2%

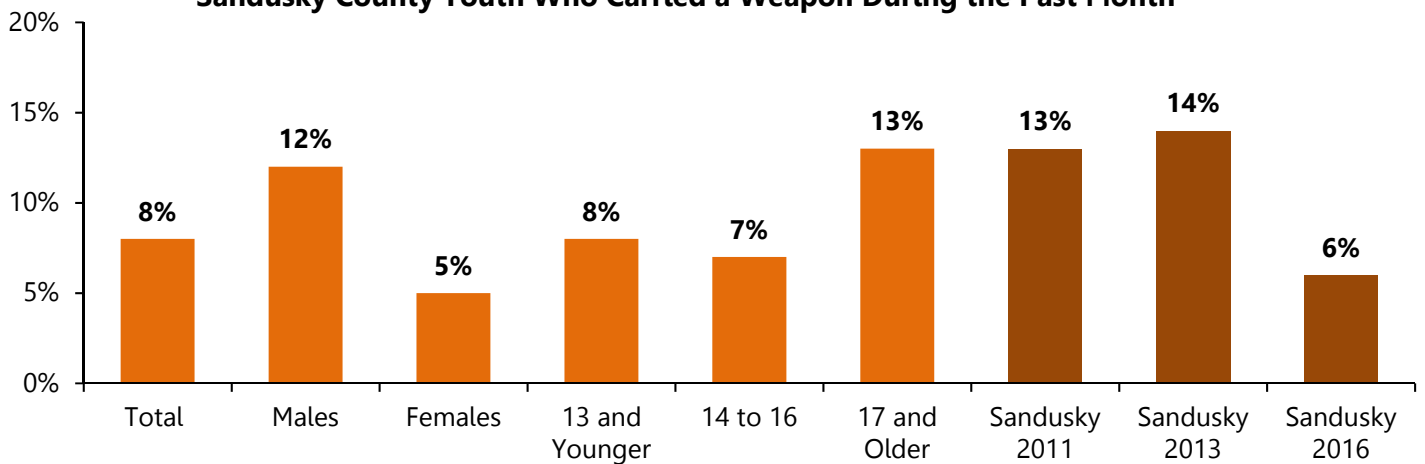
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey

Types of Bullying Sandusky County Youth Experienced in the Past Year

Youth Behaviors	Total	Male	Female	13 and Younger	14-16 Years Old	17 and Older
Verbally Bullied	26%	21%	30%	30%	22%	32%
Indirectly Bullied	22%	11%	31%	25%	19%	26%
Cyber Bullied	12%	9%	15%	10%	10%	22%
Physically Bullied	8%	7%	9%	14%	5%	8%
Sexually Bullied	4%	1%	5%	5%	3%	3%

The following graph shows the percentage of Sandusky County youth who carried a weapon in the past month. An example of how to interpret the information includes: 8% of youth carried a weapon in the past month, including 12% of males and 5% of females.

Sandusky County Youth Who Carried a Weapon During the Past Month



Youth Comparisons	Sandusky County 2011 (6 th -12 th)	Sandusky County 2013 (6 th -12 th)	Sandusky County 2016 (6 th -12 th)	Sandusky County 2019 (6 th -12 th)	Sandusky County 2019 (9 th -12 th)	U.S. 2017 (9 th -12 th)
Carried a weapon (in the past 30 days)	13%	14%	6%	8%	9%	16%
Carried a weapon on school property (in the past 30 days)	1%	4%	1%	2%	1%	4%
Threatened or injured with a weapon on school property (in the past 12 months)	6%	7%	8%	11%	7%	6%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)	6%	5%	6%	6%	4%	7%
Bullied (in past year)	51%	51%	42%	37%	33%	N/A
Bullied on school property (in past year)	N/A	36%	27%	26%	21%	19%
Electronically bullied (in past year)	11%	13%	15%	12%	12%	15%

N/A – Not Available

Youth Health: Perceptions

Key Findings

In 2019, 45% of Sandusky County youth thought that there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Forty-nine (49%) percent of youth thought there was great risk in harming themselves physically or in other ways if they used prescription drugs that were not prescribed for them. Twenty-nine percent (29%) of youth thought there was no risk in harming themselves physically or in other ways if they smoked marijuana once or twice a week.

Perceived Risk of Drug Use

- Forty-five percent (45%) of Sandusky County youth thought there was a great risk in harming themselves physically or in other ways if they smoked one or more packs of cigarettes per day. Eight percent (8%) of youth thought that there was no risk in smoking one or more packs of cigarettes per day.
- Over one-fourth (27%) of youth thought there was a great risk in harming themselves physically or in other ways if they drank five or more alcoholic beverages once or twice a week. Nine percent (9%) of youth thought that there was no risk in drinking five or more alcoholic beverages once or twice a week.
- Fourteen percent (14%) of youth thought there was great risk in harming themselves physically or in other ways if they smoked marijuana once or twice a week. Twenty-nine percent (29%) of youth thought that there was no risk if they smoked marijuana once or twice a week.
- Forty-nine percent (49%) of youth thought there was a great risk in harming themselves physically or in other ways if they used prescription drugs that were not prescribed for them. Five percent (5%) of youth thought that there was no risk in misusing prescription drugs.

Degree of Disapproval of Use by Parents/Guardians

- Seventy-two percent (72%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day, decreasing to 61% of those ages 17 and older.
- Ninety percent (90%) of Sandusky County youth reported their parents would disapprove of them smoking tobacco.
- Seventy-eight (78%) of youth reported their parents would disapprove of them drinking alcohol.
- Eighty-six percent (86%) of youth reported their parents would disapprove of them using e-cigarettes.
- Eighty percent (80%) of youth reported their parents would disapprove of them smoking marijuana.
- Ninety percent (90%) of youth reported their parents would disapprove of them to misusing prescription drugs.

Degree of Disapproval of Use by Peers

- Thirty-six percent (36%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day, decreasing to 31% of those ages 17 and older.
- Three-fourths (75%) of Sandusky County youth reported their peers would disapprove of them smoking tobacco.
- Half (50%) of youth reported their peers would disapprove of them drinking alcohol.
- Fifty-eight percent (58%) of youth reported their peers would disapprove of them using e-cigarettes.
- Fifty-six percent (56%) of youth reported their peers would disapprove of them smoking marijuana.
- Eighty-one percent (81%) of youth reported their peers would disapprove of them misusing prescription drugs.

Perceived Risk of Drug Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	8%	17%	30%	45%
Have five or more drinks of an alcoholic beverage once or twice a week	9%	28%	36%	27%
Smoke marijuana once or twice a week	29%	30%	26%	15%
Misusing prescription drugs	5%	15%	31%	49%

Perceived Great Risk of Drug Use

How much do you think people <u>greatly</u> risk harming themselves if they:	Total	Female	Male	13 and Younger	14-16	17 and Older	Middle School 6 th -8 th	High School 9 th -12 th
Smoke one or more packs of cigarettes per day	45%	47%	43%	46%	42%	55%	45%	45%
Have five or more drinks of an alcoholic beverage once or twice a week	27%	32%	22%	31%	26%	28%	31%	25%
Smoke marijuana once or twice a week	14%	15%	14%	26%	9%	13%	23%	10%
Misusing prescription drugs	49%	53%	43%	51%	48%	47%	52%	47%

Degree of Disapproval by Parents/Guardians

Would your parent(s) disapprove of you doing any of the following:	Total	Female	Male	13 and Younger	14-16	17 and Older	Middle School 6 th -8 th	High School 9 th -12 th
Smoke cigarettes	90%	93%	88%	88%	93%	82%	90%	91%
Drink alcohol	78%	78%	78%	79%	84%	57%	81%	77%
Use e-cigarettes	86%	88%	83%	86%	89%	75%	86%	86%
Use marijuana	80%	83%	76%	85%	82%	63%	83%	78%
Misuse prescription drugs	90%	94%	86%	86%	93%	85%	87%	92%

Degree of Disapproval by Peers

Would your friends disapprove of you doing any of the following:	Total	Female	Male	13 and Younger	14-16	17 and Older	Middle School 6 th -8 th	High School 9 th -12 th
Smoke cigarettes	75%	79%	70%	81%	76%	61%	80%	72%
Drink alcohol	50%	52%	47%	72%	47%	22%	68%	40%
Use e-cigarettes	58%	62%	53%	72%	58%	35%	69%	52%
Use marijuana	56%	61%	49%	75%	54%	26%	72%	47%
Misusing prescription drugs	81%	84%	77%	82%	82%	74%	82%	80%

Child Health: Health and Functional Status

Key Findings

In 2019, 94% of Sandusky County parents rated their child's health as excellent (58%) or very good (36%). Twenty percent (20%) of children were classified as obese by body mass index (BMI) calculations. More than three-quarters (78%) of Sandusky County parents had taken their child to the dentist in the past year.

General Health Status

- In 2019, 94% of Sandusky County parents rated their child's health as excellent (58%) or very good (36%). Six percent (6%) of parents rated their child's health as fair, and <1% of parents rated their child's health as poor.
- Seventy-eight percent (78%) of children had been to the dentist in the past year, decreasing to 72% of those with incomes less than \$25,000.
- One-fourth (25%) of parents indicated their child did not get all the dental care they needed for the following reasons: child was not old enough to go/dentist would not see child yet because of their age (65%), cost (5%), could not find dentist who accepts child's insurance (5%), inconvenient times/could not get an appointment (5%), no referral (5%), no insurance (3%), not available in area/transportation problems (3%), did not know where to go for treatment (3%), treatment is ongoing (3%), missed an appointment and not allowed back (2%), child refused to go (2%), health plan problem (2%), and other reasons (8%).
- Nearly half (44%) of parents reported their child had been tested for lead poisoning, and the results were within normal limits. Two percent (2%) reported the levels were elevated and medical follow-up was needed. One percent (1%) reported the levels were elevated, but no medical follow-up was needed. Thirty-eight percent (38%) of parents had not had their child tested for lead poisoning, and 16% of parents did not know if their child had been tested for lead poisoning.

Weight Status and Nutrition

- Twenty percent (20%) of children were classified as obese by body mass index (BMI) calculations. Fourteen percent (14%) of children were classified as overweight, 54% were normal weight, and 12% were underweight.
- Ninety-two percent (92%) of parents reported their child was physically active for at least 60 minutes on three or more days per week. Seventy-one percent (71%) were physically active on five or more days, and 46% were physically active for at least 60 minutes every day per week. One percent (1%) reported not engaging in any physical activity in the past week, and 1% were unable to be physically active.
- Sandusky County children spent an average of 1.3 hours watching TV, 1.2 hours playing games on a cellphone, 1.2 hour on a computer on an average day of the week, and 1.0 hours playing video games.
- In a typical week, parents reported that their child ate the following number of meals from a restaurant or takeout food: one to two meals (72%), three to four meals (9%), and five or more meals (1%). Eighteen percent (18%) of parents reported they did not eat out or bring takeout home to eat in a typical week.
- Sandusky County children usually ate the following breakfast: cereal (73%), milk (58%), eggs (42%), toast (37%), yogurt (30%), pop tart/donut/pastry (26%), oatmeal (25%), bacon/sausage/ham (23%), fruit/fruit juice (21%), child eats at school breakfast program (18%), breast milk/formula (3%), nothing (3%), pizza (1%), and other (11%).
- Parents reported their child received their source of calcium from milk (83%), yogurt (57%), lactose free calcium fortified juice (6%), milk/lactose intolerant (3%), calcium supplements (3%), other dairy products (44%), and other calcium sources (9%).

- Twenty-eight percent (28%) of children consumed 5 or more servings of fruits **and/or** vegetables per day, 48% of children ate 3-4 servings, and 23% of children ate 1-2 servings. One percent (1%) of children ate 0 servings of fruits and/or vegetables per day.

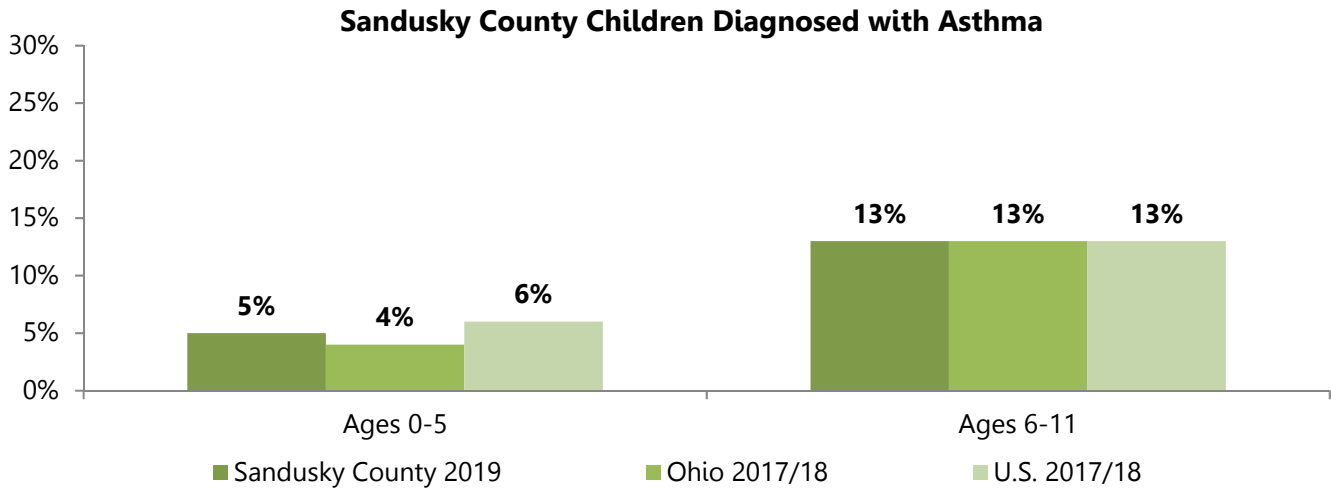
The table below indicates the number of servings Sandusky County children had of fruit, vegetables, sugar-sweetened beverages and caffeinated beverages per day.

	5 or more servings	3-4 servings	1-2 servings	0 servings
Fruits	2%	25%	72%	1%
Vegetables	1%	17%	77%	5%
Sugar-sweetened beverages	0%	4%	51%	45%
Caffeinated beverages	0%	1%	10%	89%

Health Conditions

- A doctor, health professional, or health educator told Sandusky County parents their child had the following conditions:
 - Asthma (10%)
 - Speech and language delay (8%)
 - ADD/ADHD (7%)
 - Anxiety problems (6%)
 - Learning disability (5%)
 - Behavioral/conduct problems (5%)
 - Developmental delay (4%)
 - Genetic or inherited condition (3%)
 - Overweight/obese (2%)
 - Autism or Autism Spectrum Disorder (ASD) (2%)
 - Obsessive-compulsive disorder (1%)
 - Depression (1%)
 - Epilepsy/seizure disorder (1%)
 - Diabetes (1%)
 - Brain injury, concussion or head injury (<1%)
 - Fetal Alcohol Syndrome (<1%)
 - Neonatal Abstinence Syndrome (<1%)
- Eighteen percent (18%) of Sandusky County children ages 0-11 had one or more health conditions.
- Parents reported their child took prescription medications for the following conditions: attention deficit disorder or attention deficit hyperactivity disorder (ADD/ADHD) (4%), anxiety problems (2%), autism or autism spectrum disorder (ASD) (2%), obsessive-compulsive disorder (OCD) (<1%), and depression (<1%). Forty-seven percent (47%) reported their child did not have any of these behavioral conditions.
- Five percent (5%) of Sandusky County parents whose child had been diagnosed with autism/Autism Spectrum Disorder or a developmental delay received therapy services to meet their child’s developmental needs, such as early intervention, occupational therapy, or behavioral therapy.

The following graph shows the percent of Sandusky County, Ohio and U.S. children who had been diagnosed with asthma.



Asthma and Children

- Asthma is the most common chronic conditions among children, currently affecting an estimated 6.2 million children under years old, of which 3.1 million suffered from an asthma attack or episode in 2015.
- An asthma episode is a series of events that results in constricted airways. These include swelling of the airway lining, tightening of the muscle around the airways and increased secretion of mucus inside the airway. This narrowed airway causes difficulty breathing with the familiar “wheeze.”
- When a child has asthma, their lungs are extra sensitive to certain “triggers.” Each child reacts differently to the factors that may trigger asthma, including:
 - Excitement/stress
 - Indoor and outdoor air pollutants
 - Exposure to cold air or sudden temperature change
 - Allergic reactions to allergens such as pollen, dust, or mold
 - Respiratory infections and colds
 - Cigarette smoke
- Secondhand smoke can cause serious harm to children. An estimated 400,000 to one million children with asthma have their condition worsened due to secondhand smoke.
- Asthma can be life-threatening if not properly managed. In 2014, 161 children under 15 years old died from asthma.
- Asthma is the third leading cause of hospitalization among children under the age of 15.
- Asthma is one of the leading causes of school absenteeism. In 2013, asthma accounted for 13.8 million lost school days in school-aged children with an asthma episode in the previous year.

(Source: American Lung Association, Asthma & Children Fact Sheet, 2017)

Child 0-5 Comparisons	Sandusky County 2013 Ages 0-5	Sandusky County 2016 Ages 0-5	Sandusky County 2019 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Rated health as excellent or very good	89%	97%	92%	92%	93%
Dental care visit (in the past year)	46%	59%	45%	51%**	61%**
Diagnosed with asthma	10%	7%	5%	4%	6%
Diagnosed with diabetes	1%	0%	1%	N/A	<1%
Diagnosed with ADHD/ADD	1%	1%	1%	1%*	2%*
Diagnosed with behavioral or conduct problems	2%	3%	4%	3%*	5%*
Diagnosed with epilepsy or a seizure disorder	1%	1%	1%	N/A	1%
Diagnosed with a brain injury, concussion, or head injury	1%	1%	0%	N/A	1%
Diagnosed with depression	0%	0%	0%	0%*	<1%*
Diagnosed with cerebral palsy	0%	1%	0%	N/A	<1%
Diagnosed with anxiety problems	1%	0%	3%	1%*	2%*
Diagnosed with intellectual disability/mental retardation	1%	5%	0%	N/A	1%*
Diagnosed with learning disability	4%	5%	3%	1%*	2%*
Diagnosed with speech or language disorder	7%	8%	9%	6%*	10%*
Child had one or more health conditions	9%	17%	13%	N/A	N/A

N/A – Not Available

*Ages 3-5

**Ages 1-5

Child 6-11 Comparisons	Sandusky County 2013 Ages 6-11	Sandusky County 2016 Ages 6-11	Sandusky County 2019 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Rated health as excellent or very good	89%	96%	95%	89%	90%
Dental care visit (in the past year)	91%	89%	94%	90%	90%
Diagnosed with asthma	15%	17%	13%	13%	13%
Diagnosed with diabetes	0%	0%	1%	N/A	<1%
Diagnosed with ADHD/ADD	8%	9%	10%	14%	10%
Diagnosed with behavioral or conduct problems	5%	4%	5%	13%	10%
Diagnosed with epilepsy or a seizure disorder	1%	1%	1%	N/A	1%
Diagnosed with a brain injury, concussion, or head injury	3%	4%	1%	N/A	3%
Diagnosed with depression	1%	1%	2%	1%	2%
Diagnosed with cerebral palsy	1%	1%	0%	N/A	<1%
Diagnosed with anxiety problems	5%	7%	7%	9%	9%
Diagnosed with intellectual disability/mental retardation	2%	1%	0%	N/A	2%
Diagnosed with learning disability	6%	5%	5%	11%	9%
Diagnosed with speech or language disorder	10%	8%	7%	10%	10%
Child had one or more health conditions	18%	17%	21%	N/A	N/A

N/A – Not Available

Child Health: Health Care Access

Key Findings

In 2019, 82% of children had one or more people they think of as their child's personal doctor or nurse. Seventeen percent (17%) of parents reported their child did not get all of the prescription medications they needed in the past year. Eighty-nine percent (89%) of children had visited their health care provider for preventive care in the past year.

Health Insurance

- Sandusky County children were covered by the following types of health insurance: parent's employer (82%); Medicaid, Buckeye, Paramount, Molina, United, Care Source, or State Children's Health Insurance Program (S-CHIP) (16%); insurance purchased directly from an insurance company (2%); TRICARE or other military health care (1%); Medicare (<1%); and some other source of insurance (<1%).
- Parents reported their child's health insurance covered the following: well visits (98%); immunizations (97%); doctor visits (96%); prescription coverage (95%); hospital stays (94%); dental (90%); vision (86%); mental health (75%); and therapies (speech, occupational therapy, physical therapy, etc.) (67%).

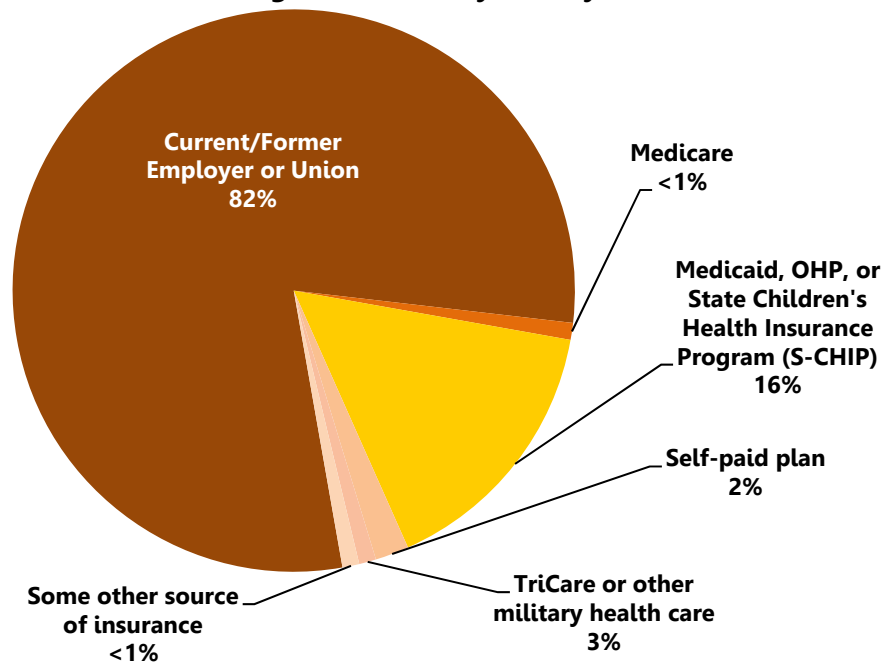
2017/18 National Survey of Children's Health

- Thirty-two percent (32%) of Ohio 0-5-year old's and 25% of Ohio 6-11-year old's had public insurance.
- Ninety-two percent (92%) of Ohio 0-5-year old's and 81% of Ohio 6-11-year old's had been to the doctor for preventive care in the past year.

(Source: National Survey of Children's Health, 2016/17 and 2017/18)

The following pie chart shows the sources of Sandusky County children's health care coverage.

Source of Health Coverage for Sandusky County Children



Medical Home

- Eighty-two percent (82%) of parents reported they had one or more people they think of as their child's personal doctor or nurse, decreasing to 61% of parents with incomes less than \$25,000.
- Eighty-nine percent (89%) of children had visited their health care provider for preventive care in the past year, increasing to 92% of 0-5 year olds.

Access and Utilization

- Fifteen percent (15%) of parents reported that their child visited a hospital emergency room in the past year. Six percent (6%) visited a hospital emergency room on more than one occasion in the past year, increasing to 17% of those with incomes less than \$25,000.
- Parents reported at least one emergency room visit due to the following: accidents, injury or poisonings (36%); fever/cold/flu (33%); ear infections (19%); doctor's office told them to go (14%); broken bones (7%); asthma (2%); dental issues (2%); and other sick visits (18%). No one reported they went to the emergency room for addiction or mental health.
- Five percent (5%) of children did not get all of the medical care they needed in the past year. They reported the following reasons: cost (27%), treatment is ongoing (18%), no convenient times/could not get appointment (18%), no insurance (9%), missed an appointment and now not allowed back (9%), dissatisfaction with doctor (9%), could not find doctor that accepts child's insurance (9%), no referral (9%), too long of a wait for an appointment (9%), did not know where to go for treatment (9%), and other reasons (18%).
- Fourteen percent (14%) of parents reported their child did not get all of the prescription medications they needed in the past year for the following reasons: their child was not prescribed medication (97%), cost (13%), no insurance (3%), health plan problem (3%), treatment is ongoing (3%), no referral (3%), and other reasons (3%).
- Seventeen percent (17%) of parents reported their child did not get all the mental health care they needed in the past year for the following reasons: no referral (69%), cost (6%), no convenient times/could not get appointment (3%), and other reasons (22%).
- Thirteen percent (13%) of parents reported their child had an emotional, developmental, or behavioral problem that required treatment or counseling.
- Fifteen percent (15%) of parents reported their child needed the following special services in the past year for the following reasons: speech therapy (7%); counseling (6%); medical equipment, such as a wheelchair (5%); physical therapy (4%); occupational therapy (3%); special education (3%); and other services (3%).
- Ninety-one percent (91%) of Sandusky County children received all of their recommended vaccinations.
- Nine percent (9%) of children did not get all of their recommended vaccinations for the following reasons: child had received some, but not all, recommended vaccinations (50%); parents chose to not vaccinate their child (27%); fear of negative effects (23%); alternate vaccination schedule used (18%); doctor advised against (18%); religious or cultural beliefs (14%); vaccine not available at child's doctor's office (9%); cost (5%); and other reasons (23%).

Child 0-5 Comparisons	Sandusky County 2013 Ages 0-5	Sandusky County 2016 Ages 0-5	Sandusky County 2019 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Had public insurance	19%	22%	18%	32%	33%
Been to doctor for preventive care (in the past year)	91%	96%	92%	92% [‡]	89% [‡]
Had a personal doctor or nurse	86%	84%	89%	72%	72%
Two or more visits to the ER (in the past year)	11%	6%	8%	5%	6%

[‡]2016/17 NSCH data

Child 6-11 Comparisons	Sandusky County 2013 Ages 6-11	Sandusky County 2016 Ages 6-11	Sandusky County 2019 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Had public insurance	13%	15%	15%	25%	32%
Been to doctor for preventive care (in the past year)	73%	74%	88%	81% [‡]	80% [‡]
Had a personal doctor or nurse	83%	90%	79%	77%	72%
Two or more visits to the ER (in the past year)	9%	6%	6%	5%	4%

[‡]2016/17 NSCH data

Child Health: Early Childhood (Ages 0-5)

Key Findings

The following information was reported by parents of 0-5 year olds. Ninety-five percent (95%) of mothers got prenatal care within the first three months during their last pregnancy. Nineteen percent (19%) of mothers received WIC services during their last pregnancy. Eighty-four percent (84%) of parents put their child to sleep on his/her back. Twelve percent (12%) of mothers never breastfed their child.

Early Childhood

- The following information was reported by Sandusky County parents of 0-5 year olds:
- During their last pregnancy, mothers did the following: received prenatal care with the first three months (95%), took a prenatal vitamin with folic acid during pregnancy (89%), took a prenatal vitamin with folic acid pre-pregnancy (68%), received a dental exam (60%), took folic during pregnancy (37%), took folic acid pre-pregnancy (30%), experienced depression during or after pregnancy (28%), received WIC services (19%), smoked cigarettes or other tobacco products (7%), consumed alcoholic beverages (2%), used e-cigarettes (2%), and used opioids (2%).
- Of those that experienced depression during or after their last pregnancy, 7% had household incomes of \$25,000 or less.
- When asked how parents put their child to sleep as an infant, 84% said on their back, 5% said on their side, 3% said on their stomach, and 1% said in bed with themselves or another person.
- Children were put to sleep in the following places: crib/bassinette without bumper, blankets, or stuffed animals (68%); pack n' play (50%); crib/bassinette with bumper, blankets, or stuffed animals (33%); in bed with parent or another person (22%); car seat (17%); swing (16%); and floor (11%).
- Sandusky County parents reported that they or another family member read to their child at the following frequencies: one to three days per week (31%), four to six days per week (32%), and every day (32%). Five percent (5%) of parents reported that they or another family member did not read to their child.
- In 2018, Women, Infants, and Children (WIC) had 643 new participants, 1,994 caseloads/month, and 179 referrals monthly made to prenatal/pediatric health care or other maternal and child health and human service programs (Source: Sandusky County Public Health, 2018).
- In 2018, Help Me Grow had 194 referrals and 928 home visits (Source: Sandusky County Public Health, 2018).

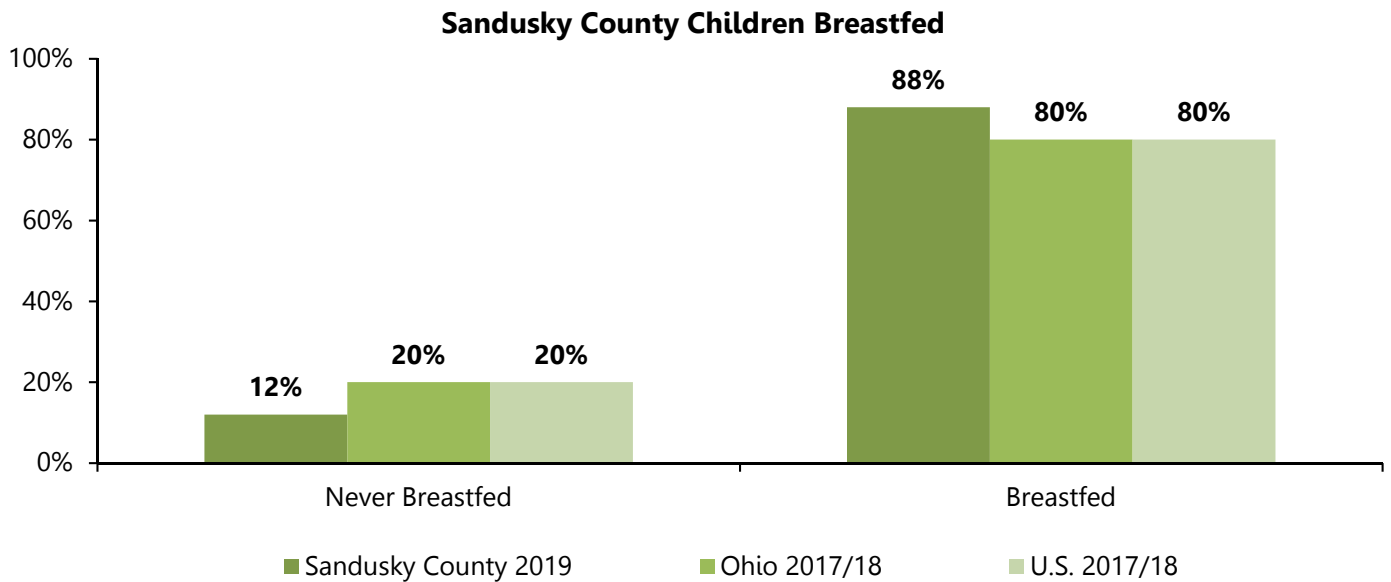
Breastfeeding

- Mothers breastfed their child less than three months (31%), four to six months (12%), seven to nine months (9%), ten months to year (12%), more than one year (15%), still breastfeeding (8%), and never breastfed (12%).

Child 0-5 Comparisons	Sandusky County 2013 Ages 0-5	Sandusky County 2016 Ages 0-5	Sandusky County 2019 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Never breastfed their child	21%	26%	12%	20%	20%
Parent or family members read to child every day (in the past week)	20% [±]	13% [±]	32%	44%	37%

[±] Only included parent read to child

The following graph shows the percent of infants who had been breastfed in Sandusky County, Ohio, and U.S.



(Sources: 2017-2018 National Survey of Children’s Health & 2019 Sandusky County Health Assessment)

Safe Sleep for Babies: What Can Be Done?

- **The Federal Government is:**
 - Promoting safe sleep recommendations from the American Academy of Pediatrics
 - Monitoring the use of safe sleep practices
 - Supporting educational campaigns, such as the Safe to Sleep® campaign
 - Supporting research to better understand sleep-related deaths and strategies to improve safe sleep practices
- **Healthcare providers can:**
 - Advise caregivers to place babies on their back for every sleep. Keep soft bedding such as blankets, pillows, and other soft objects out of their baby’s sleep area, and room share but not bed share with babies
 - Ask caregivers about how they place their baby to sleep, challenges to following recommendations, and help them find solutions
 - Model safe sleep practices in hospitals
 - Follow the latest recommendations from the American Academy of Pediatrics for safe sleep
- **State and local health departments are:**
 - Improving safe sleep practices in child-care and hospital settings by training providers
 - Using the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and other programs that serve mothers and babies to deliver culturally appropriate messaging about safe sleep for babies
 - Monitoring and evaluating safe sleep campaigns and programs
- **Caregivers can:**
 - Place babies on their back for every sleep
 - Room share, but not bed share with babies
 - Keep soft bedding such as blankets, pillows, bumper pads, and soft toys out of their baby’s sleep area

(Source: CDC, Safe Sleep for Babies, reviewed January 9, 2018)

Child Health: Middle Childhood (Ages 6-11)

Key Findings

The following information was reported by Sandusky County parents of 6-11-year old's. Ninety percent (90%) of children participated in extracurricular activities at some point in the past year. Forty-seven percent (47%) of parents reported their child was bullied at some point in time in the past year.

Middle Childhood

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

- Parents reported their child missed school because of illness or injury at the following frequencies: one to three days (55%), four to six days (8%), seven to ten days (2%), and eleven or more days (2%). Thirty-one percent (31%) of parents reported their child missed zero days of school because of illness or injury, 2% of children were home-schooled.
- Sandusky County children spent the following amount of time unsupervised after school on the average school day: no unsupervised time (70%), less than one hour (18%), one to two hours (10%), and three to four hours (2%).
- Parents reported their child felt unhappy, sad, or depressed at the following frequencies: sometimes (65%), never (34%), and usually (1%). One percent (1%) of parents reported they do not know how often their child feels unhappy, sad or depressed.
- Parents reported that when their child was not in school, they read at the following frequencies: almost every day (50%), a few times a week (35%), a few times a month (7%), a few times a year (2%), almost never because their child has no interest (5%), and almost never because their child cannot read (2%).
- Ninety percent (90%) of children participated in the following extracurricular activities in the past year: a sports team or sports lessons (74%); a club or organization after school or on weekends (43%); any other organized activities or lessons, such as music, dance, language, or other arts (28%); any type of volunteer work (29%); and any paid work (8%). Ten percent (10%) of parents reported their child did not participate in any extracurricular activities in the past year.
- Thirteen percent (13%) of parents felt their child was not safe for the following reasons: fear of bullying (75%), buildings are not secure (33%), bomb threats (8%), drug/alcohol activity (17%), gangs (17%), and afraid of other kids who show unusual behavior (46%).
- Sandusky County parents discussed the following topics with their 6-11 year old child in the past year: screen time (80%); bullying/violence (80%); eating habits (72%); cyber/internet safety (53%); gun safety (47%); body image (46%); negative effects of tobacco (45%); negative effects of alcohol (32%); cultural sensitivity (29%); negative effects of marijuana and other drugs (29%); negative effects of heroin/opiates (27%); respect for gender identity/sexual orientation (23%); refusal skills (16%); dating and relationships (16%); misuse of prescription drugs (13%); abstinence and how to refuse sex (11%); condoms/safe sex/std prevention (2%); and birth control (2%).
- Forty-seven percent (47%) of parents reported their child was bullied in the past year. The following types of bullying were reported:
 - 27% were verbally bullied (teased, taunted or called harmful names)
 - 9% were indirectly bullied (spread mean rumors about them or kept out of a "group")
 - 9% were physically bullied (they were hit, kicked, punched or people took their belongings)
 - 2% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
- Thirty-three percent (33%) of parents reported that they have met all their child's friends, 50% reported meeting most of their friends, 17% reported some of their friends, and 1% reported meeting none of their friends.

Child 6-11 Comparisons	Sandusky County 2013 Ages 6-11	Sandusky County 2016 Ages 6-11	Sandusky County 2019 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Child participated in one or more activities	83%	84%	90%	78%	78%
Child did not miss any days of school because of illness or injury	24%	27%	31%	28%	29%

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), 2017)

Child Health: Family and Community Characteristics

Key Findings

In 2019, 43% of parents reported that every family member who lived in their household ate a meal together every day of the week. Thirty-six percent (36%) of children never attended a religious service in the past month. One-fifth (20%) of children experienced one or more ACEs in their lifetime, increasing to 28% of those with incomes less than \$25,000.

Family Functioning

- Forty-three percent (43%) of parents reported that every family member who lived in their household ate a meal together every day of the week. Families ate a meal together an average of 5.2 days per week.
- Thirty-six percent (36%) of parents reported their child attended religious service one to three times per month, and 28% reported four or more times per month. Thirty-seven percent (37%) reported their child never attended a religious service.
- Five percent (5%) of parents reported their child went to bed hungry at least one day per week because they did not have enough money for food, increasing to 22% of those with incomes less than \$25,000.
- Parents reported their child got the following amounts of sleep on an average weeknight: 8 hours or less (28%), 9 hours (26%), 10 hours (31%), and 11 hours or more (15%).
- Sandusky County parents reported their child had experienced the following adverse childhood experiences (ACEs):
 - Parent or guardian divorced or separated (13%)
 - Lived with anyone who was mentally ill, suicidal, or severely depressed (5%)
 - Lived with anyone who had a problem with alcohol or drugs (5%)
 - Parent or guardian served time in jail (4%)
 - Parent or guardian died (2%)
 - Saw or heard any parents or adults slap, hit, kick, or punch one another in the home (2%)
 - Victim of violence or witnessed violence in neighborhood (1%)
 - Treated or judged unfairly because of his or her race/ethnic group (1%)
- Six percent (6%) of Sandusky County children experienced two or more ACEs in their lifetime.

2017/18 National Survey of Children's Health

- Fifty-seven percent (57%) of Ohio and 54% of U.S. parents of 0-5 year olds reported their family ate a meal together every night of the week.
- Twenty-one percent (21%) of Ohio and 16% of U.S. 6-11 year olds experienced 2 or more adverse childhood experiences (ACEs) in their lifetime.

(Source: National Survey of Children's Health, 2017/18)

Safety Characteristics

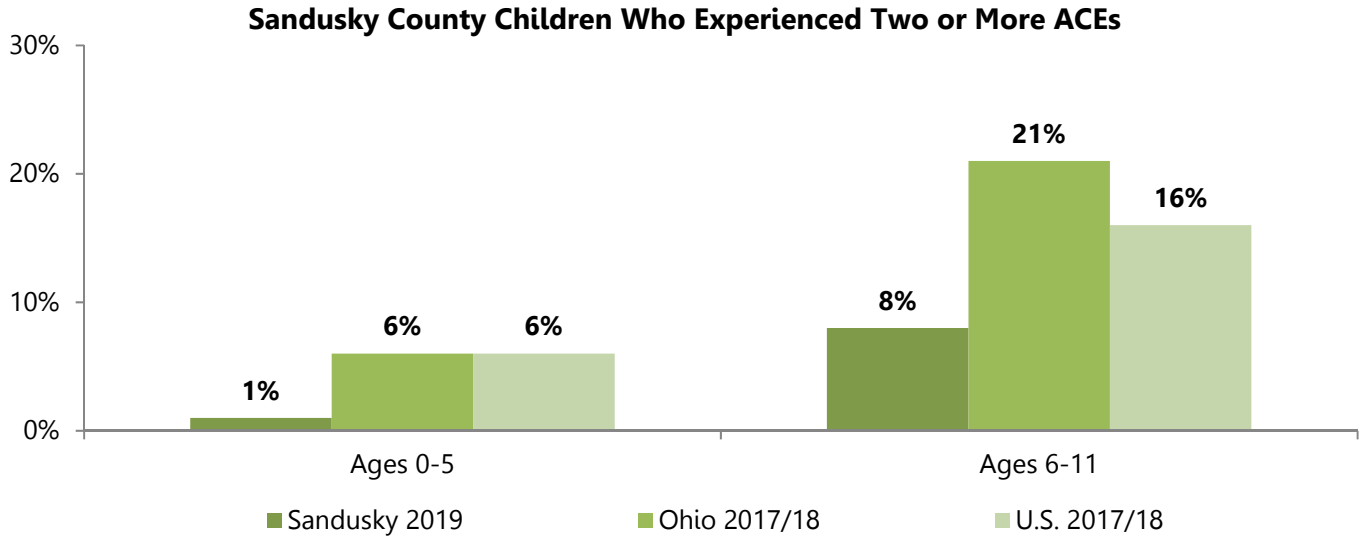
- Parents reported having the following safety items in their home: working smoke alarm/detector (96%), carbon monoxide detector (72%), fire extinguisher (69%), gun lock/safe (48%), Poison Control number by the phone (37%), and medication safe (17%). Ninety-one percent (91%) had two or more safety items in their home and 1% had none of these safety items in their home.
- Eighty-two percent (82%) of parents reported their child up to age five who met weight and/or height limits always rode in a car seat when a passenger in a car, and 14% reported their child never rode in a car seat when a passenger in a car.
- Fifty-three percent (53%) of parents reported their child who weighs less than 80 pounds and is under 4'9" always rode in a booster seat, as compared to 35% who never rode in a booster seat.

- Seventy-five percent (75%) of parents whose child was old enough and/or tall enough to not be in a booster seat reported their child always wore a seatbelt, and 18% reported their child never wore a seat belt.
- Parents reported their child always wore a helmet when riding the following: snow mobile (69%), ATV (59%), skateboard (18%), and a bike/scooter (17%).
- Parents reported their child never wore a helmet when riding the following: skateboard (52%), bike/scooter (36%), ATV (25%), and a snow mobile (19%).
- Sixteen percent (16%) of Sandusky County parents reported that someone living the household used cigarettes, cigars or pipe tobacco, increasing to 22% of those with incomes less than \$25,000.
- Parents had the following rules about smoking in their home: no one is allowed to smoke in their home at any time (80%), smoking is not allowed in their home when children are present (6%), smoking is allowed anywhere inside their home (2%), and smoking is allowed in some rooms only (2%).
- Parents had the following rules about smoking in their car: no one is allowed to smoke inside their car at any time (80%), smoking is not allowed when children are present (7%), smoking is allowed as long as a window is open (2%), and smoking is allowed anywhere (1%).
- Over half (55%) of Sandusky County parents kept a firearm in or around their home. Five percent (5%) of parents reported they were unlocked and loaded.

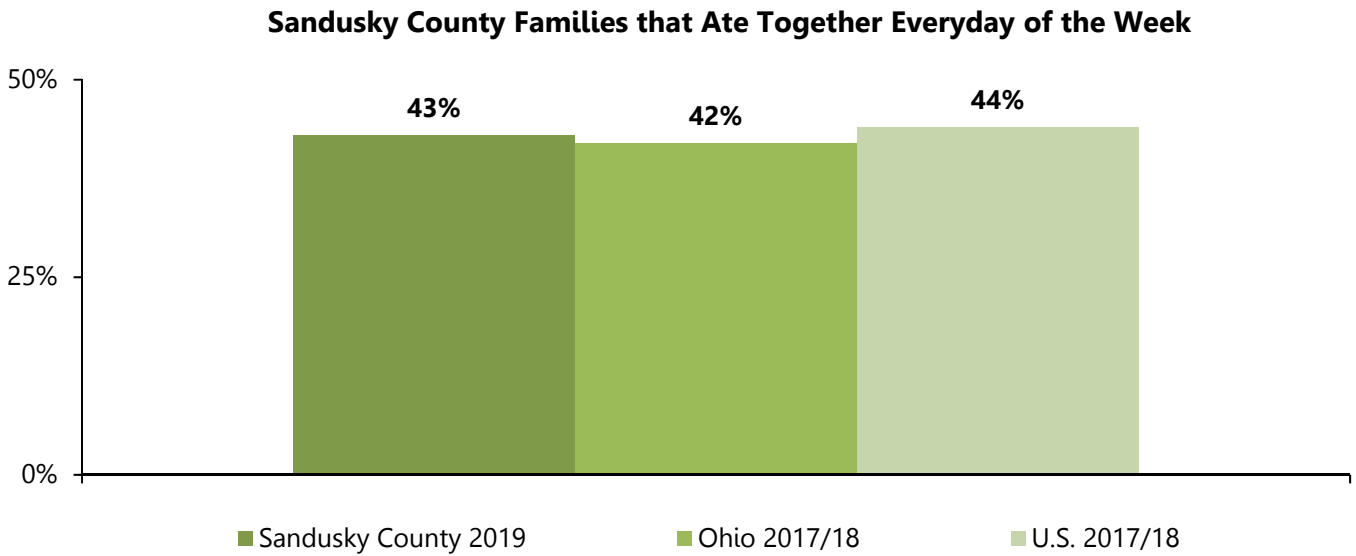
Neighborhood and Community Characteristics

- Parents reported their child regularly attended an elementary school (67%), child care outside of their home provided by a relative other than a parent or guardian (29%), child care in their home provided by a relative other than a parent or guardian (25%), family-based child care outside of home (22%), nursery school or preschool (10%), child care center (10%), child care in their home provided by a baby-sitter (10%), and Head Start or Early Start program (<1%).
- Thirteen percent (13%) of parents reported their neighborhood was unsafe due to the following reasons: heavy traffic area (55%), no sidewalks accessible (48%), no place for kids to play (39%), crime (29%), drug/alcohol activity (26%), weapons/firearms (16%), bullying (13%), loud/disrespectful noise levels (10%), bad weather conditions (3%), gangs (3%), and other (16%).
- Over half (53%) of children had never moved to a new address. Nine percent (9%) of children had moved to a new address three or more times in their lifetime.
- In the past year, parents reported that someone in the household received the following: free or reduced cost breakfast or lunches at school (21%), SNAP/food stamps (7%), benefits from WIC program (4%), Help Me Grow (4%), mental health/substance abuse treatment (4%), Job and Family Services (2%), Head Start/Early Head Start (1%), and cash assistance from state or county welfare program (<1%).

The following graph shows the percent of Sandusky County, Ohio, and U.S. children who experienced two or more ACEs in their lifetime.



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



(Source for graphs: 2017/18 National Survey of Children's Health & 2019 Sandusky County Health Assessment)

Child 0-5 Comparisons	Sandusky County 2013 Ages 0-5	Sandusky County 2016 Ages 0-5	Sandusky County 2019 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Family eats a meal together every day of the week	40%	33%	51%	57%	54%
Child never attends religious services	39%	50%	42%	N/A	N/A
Someone living in the household uses cigarettes, cigars, or pipe tobacco	31%	18%	15%	18%	14%
Two or more adverse childhood experiences (ACEs)	N/A	N/A	1%	6%	6%

N/A – Not Available

Child 6-11 Comparisons	Sandusky County 2013 Ages 6-11	Sandusky County 2016 Ages 6-11	Sandusky County 2019 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Family eats a meal together every day of the week	31%	34%	39%	44%	45%
Child never attends religious services	27%	32%	34%	N/A	N/A
Someone living in the household uses cigarettes, cigars, or pipe tobacco	20%	20%	16%	18%	15%
Two or more adverse childhood experiences (ACEs)	N/A	N/A	8%	21%	16%

N/A – Not Available

Five Ways That Family Meals Keep Kids Healthy

- 1. Family meals prevent excessive weight gain:** Eating 3 or more family meals (meaning at least one parent is present and the meal is prepared at home) results in a 12% lower likelihood of children being overweight.
- 2. Family meals teach healthy food choices:** The eating habits of childhood often last a lifetime. Families that ate at least three meals together each had a 20% decrease in unhealthy food choices. Teaching your children to enjoy healthy foods rather than junk foods is a gift that will stay with them through adulthood.
- 3. Family meals prevent eating disorders:** Children and adolescents who ate family meals at least three times per week had a 35% reduction in disordered eating habits such as anorexia and bulimia.
- 4. Family dinner improves social-emotional health, too:** The ability to understand emotions, express empathy, demonstrate self-regulation, and form positive relationships with peers and adults is called social-emotional health. Young children with high social-emotional health adapt well to the school environment and perform well academically, even in long term studies. Guess which kids had the best social-emotional health? The ones who ate family dinner together regularly and talked about their day, told stories, etc.
- 5. Family dinner can help kids deal with cyberbullying:** About one-fifth of adolescents are victims of cyberbullying, putting them at risk for depression, substance abuse, and a host of other concerns. But adolescents who eat regular family dinners handle cyberbullying better and are less likely to engage in substance abuse or develop psychiatric health concerns, even after their involvement in face-to-face bullying is taken into account.

(Source: *The Benefits & Tricks to Having a Family Dinner*, HealthyChildren.org, 2015)

Child Health: Parent Health

Key Findings

In 2019, 73% of parents rated their health as excellent or very good, decreasing to 50% of parents with incomes less than \$25,000. In the past year, 46% of parents missed work due to their child's illness or injuries.

Parent Health

- Those filling out the survey had the following relationship to the child: mother (69%), father (30%), grandparent (<1%), and other relative (<1%).
- Almost three-quarters (73%) of parents rated their health as excellent or very good, decreasing to 50% of parents with incomes less than \$25,000. Twenty-two percent (22%) of parents rated their health as good, and 5% of parents rated their health as fair or poor.
- Seventy-one percent (71%) of parents rated their mental and emotional health as excellent or very good, decreasing to 39% of parents with incomes less than \$25,000. One-fifth (20%) rated their mental and emotional health as good, and 9% of parents rated their mental and emotional health as fair or poor.
- Twelve percent (12%) of mothers and 6% of fathers of 0-5 years old rated their mental and emotional health as fair or poor. Nine percent (9%) of mothers and 6% of fathers of 6-11 years old rated their mental or emotional health as fair or poor.
- In the past year, 46% of parents missed work due to their child's illness or injuries. Thirty-eight percent (38%) of parents missed work due to their child's medical appointments, 7% missed work due to lack of or unreliable child care, 7% missed work due to their child's chronic illness, and 3% missed work due to their child's behavioral/emotional problems.
- Thirteen percent (13%) of parents were uninsured, increasing to 17% of those with incomes less than \$25,000.
- Parents reported the following challenges they face in regards to the day-to-day demands of parenthood/raising children: demands of multiple children (37%), working long hours (21%), financial challenges (19%), being a single parent (9%), managing child's behavior (7%), child has special needs (5%), mental health (4%), difficulty with lifestyle changes (3%), lack of parental support (2%), loss of freedom (2%), post-partum depression (2%), unemployment (1%), affordable housing (1%), and alcohol and/or drug abuse (<1%). Forty-three percent (43%) of parents reported no challenges associated with parenting.

Child 0-5 Comparisons	Sandusky County 2013 Ages 0-5	Sandusky County 2016 Ages 0-5	Sandusky County 2019 Ages 0-5	Ohio 2017/18 Ages 0-5	U.S. 2017/18 Ages 0-5
Mother's mental or emotional health is fair/poor	N/A	N/A	12%	9%	5%
Father's mental or emotional health is fair/poor	N/A	N/A	6%	7%	3%

N/A – Not Available

Child 6-11 Comparisons	Sandusky County 2013 Ages 6-11	Sandusky County 2016 Ages 6-11	Sandusky County 2019 Ages 6-11	Ohio 2017/18 Ages 6-11	U.S. 2017/18 Ages 6-11
Mother's mental or emotional health is fair/poor	N/A	N/A	9%	9%	5%
Father's mental or emotional health is fair/poor	N/A	N/A	6%	4%	3%

N/A – Not Available

Focus Group Qualitative Data

Introduction

In September 2019, the Hospital Council of Northwest Ohio (HCNO) conducted focus groups for Sandusky County. Focus groups are useful to find a range of opinions across groups of people and are used to gain insight for community needs. The community health assessment incorporated focus groups to uncover attitudes and factors that influence health behaviors that cannot be fully captured through survey research. The interaction between focus group participants is an important dynamic. Participants can share their thoughts and opinions, and others have a chance to reflect on the statements, offer alternative ideas, or build upon other participants' ideas. The qualitative data collected in these focus groups complement the quantitative data captured in the county health assessment survey. Qualitative data provides a deeper understanding as to why participants from the community feel and act a certain way, while quantitative data identifies the extent of a specific health issue.

Methods

PARTICIPANT RECRUITMENT

HCNO staff advised The Sandusky County Health Partners on recruitment methods for the focus groups. The Sandusky County Health Partners were responsible for identifying the populations they wanted to learn more information from, as well as identifying possible participants for each focus group. The Sandusky County Health Partners agreed to conduct one focus groups with African American residents and two with Hispanic/Latino residents. HCNO provided template recruitment flyers to use for advertising and recruitment. Strategies used to recruit participants included utilizing personal connections with organizations that served the populations of interest, advertising at locations that the populations frequently visited, and placing ads or announcements in the media. Potential participants were screened to ensure they lived in Sandusky County, identified with the respective populations of interest, were over the age of 18, and were English speaking.

MODERATOR GUIDE

A semi-structured moderator guide was used for the study. Seven key questions were asked with additional probing questions throughout as the moderator felt necessary. The questions asked were related to health priorities, strengths and barriers of the community, social determinants of health, awareness of programs or services within the community, advice for health agencies, and health inequities.

PROCEDURE

All materials including the moderator guide, recruitment flyers, consent forms, and procedures were approved by Advarra Institutional Review Board. Sandusky County Health Partners scheduled three focus groups and secured rooms for each focus group. The focus groups each had between six and nine participants. As participants entered the site of the focus groups, HCNO staff informed participants about the details of the study and verbally explained the informed consent forms. At the beginning of each focus group, participants were given time to read and sign the consent forms. During each focus group, there was one moderator and two notetakers. The notetakers' duties were to write down observations based on body language and other nonverbal activity of participants while the moderator kept participants engaged. Each focus group lasted one hour, and at the end, a \$30 cash incentive was offered to all participants as a thank-you for their travel and time. After each focus group, the moderator and notetakers had an informal debriefing of the discussions that occurred.

ANALYSIS

Focus groups were recorded using two voice recorders and, after completion of the focus groups, the MP3 recordings were uploaded to a computer. Talk-to-text software was used to prepare a full transcript of each focus group. During transcription, all personal identifiers were excluded from the documents. Notes taken by the notetakers were incorporated into the final transcripts. A staff member who was present at each focus group and

who had experience with thematic coding used Microsoft Word to identify and consolidate themes throughout several rounds of revisions.

LIMITATIONS

As with any research method, there are limitations to consider for focus groups. First, although participants were carefully selected, there may have been selection bias that limited the ability to expand the findings to other populations within the county. Second, while the moderator is trained in facilitating and analyzing focus groups, bias could occur. Steps to limit bias in the findings included having notetakers involved in the analysis, report writing, as well as having a debriefing session after each focus group.

FIRST HISPANIC/LATINO RESIDENT FOCUS GROUP

The first focus group with Hispanic or Latino residents of Sandusky County consisted of six participants. The focus group was held at the Birchard Public Library in a reserved meeting room.

Individual priorities

Participants identified the following as priority health topics Sandusky County should work to address or prevent:

- *Mental Health and Substance Abuse:* mental health was a topic many participants were passionate about. Specifically, suicide and the opioid epidemic were discussed when focusing on mental health.
- *Chronic Diseases:* for the Latino community, high blood pressure, heart disease, cancer, and diabetes were conditions the participants felt should be a priority.
- *Lack of Education and Resources:* participants thought that perhaps people who have chronic health conditions don't know how to manage it because they don't have a health education background. Additionally, participants felt that health education should start at a younger age to learn about preventing diseases. Improving childhood nutrition could impact the childhood obesity issue, especially among the people living in poverty in the county, along with providing the resources for families to purchase healthy foods for their kids.

Strengths

Participants identified the following strengths in Sandusky County surrounding health:

- *Physical Activity Opportunities:* the county has many facilities and opportunities for community members to exercise and walk. Participants were particularly interested in the parks, bike trails, and track because they are all free. Participants mentioned that the YMCA and Rec Center have programs where people can walk for one dollar at those locations.
- *Youth Resources:* there are programs for children that one parent enjoys, although the specific programs were not mentioned. Another participant was glad that the middle and high schools don't have sports teams that are pay-to-play which means more students can participate in sports that would otherwise not be able to afford. Participants discussed that providing youth with free sporting options not only allows them to be physically active, it also keeps them busy so they stay out of trouble because they have something to do with their time. Waiving the fee to play in sports at schools was also crucial for one parent with multiple children because they would have to alternate the children who are on teams each year if there was a fee. The parent whose children are not old enough for school teams yet, they participate in the Rec Center and YMCA teams which she said were great options for younger children. Lastly, the Hayes Presidential Center has periodic weekend activities for children that one participant listed as a community strength.
- *Community Resources:* Community assets like the farmer's market, a group that works on community members relationship with law enforcement, groups that adopt a school to provide additional resources to students in need, faith-based organizations, the library, and TRIPS were listed as community assets that can help improve the health of community members. The farmer's market has fresh produce and also has different organizations set up informational tables to inform the public of various resources. The county has a community relations commission that aims to improve the relationship between community members and law enforcement that the participants thought was valuable. Churches and other groups adopt a school to make sure the students have uniforms and their needs are being met. There is also a "Love Your Neighbor Day" for community engagement so that community members have a sense of social support. The library provides free activities for families that many participants enjoy and participate in. The faith-based community is very active in the community and has specific programs for the Latino community and food and nutrition programs that was described as a community strength. Although TRIPS has limitations, it does provide transportation to many people so participants discussed it as a community strength.

Social Determinants of Health

The following themes were identified by the group as factors that influence why some people may be healthier than others in Sandusky County:

- *Income:* people with higher income have more access to resources like healthy food and having health insurance due to likely having a better job than others. Conversely, people with entry-level positions might not have health insurance coverage or have a basic plan and then they don't have money to pay the co-pays. Having a financial burden leads people to have to choose between paying a co-pay to see a doctor to pay for groceries for the family. It also leaves people to decide on if they should pay for medication or if they should go without it. Lastly, the participants discussed how people with a higher income can afford memberships to facilities in the county to improve their physical activity.
- *Age:* People who are over the age of 65 and are enrolled in Medicare have access to memberships to facilities that improve physical activity. However, people under the age of 65 that may benefit from the same program may not have access to the same programs. Participants also talked about how if a person takes care of themselves while they are young, they may not have as much of a decline in their health as they get older.
- *Health Education:* a lot of people may not have the knowledge needed to make decisions about their health. The participants talked about how the county is lacking prevention messages or prevention education to learn about health screenings or free ways to be active in the community. The participants are interested in seeing more information about how to stay fit and how they can be active outdoors. They said there isn't a lot of information available about nutrition or exercise but they do oftentimes see drug commercials that advertise pills to help manage diseases. They thought it was unfortunate that there isn't enough messaging about prevention when they are inundated with commercials about pills that could be a quick fix to some chronic diseases. One participant mentioned that through the Head Start Program, families do get educational materials on nutrition, oral health, and other health topics so that is one population that may be getting some prevention education.

Awareness

Focus group participants were aware of the following services and resources within Sandusky County that focused on improving health:

- *Hospital System and Health Department Resources:* participants described Firelands is used for mental health or drug use issues. WIC and Help Me Grow are two programs offered in the community that was useful for the participants and their families. Participants recognized that ProMedica conducts health screenings and other community health services.
- *Community-Based Resources:* health fairs and community events downtown are places where residents can get health-related information. There is also a clinic that does free dental checks and health screenings, and then patients get a referral to a doctor if needed. The Ohio Migrant Education Center also has health fairs for migrant children and their parents and they set up at different locations. Heartbeat, Jobs and Family Services, and Great Lakes Community Action Partnership are also agencies that provide support for parents.

Barriers

Participants identified the following barriers to people accessing programs, services, or resources in Sandusky County:

- *Language:* participants agreed that language is a barrier to accessing programs and services. Some people in the Hispanic or Latino population may not understand what a healthcare professional is saying, and they might need their kids to translate for them which may cause errors in translation. Also, the older Latinos may not have as much education as others and have difficulty reading and writing which can hinder their ability to seek out services.
- *Lack of Transportation:* many low-income community members may not have access to a vehicle, and they might not be able to afford TRIPS so they have to rely on walking or riding a bike. Some people have to walk to their jobs which limits their opportunities. One participant shared a story where a friend had to pick up a prescription after visiting the ER and they did not have access to transportation to pick up the medicine and ended up being admitted to the hospital. Another participant said that for farmworkers, they cannot go anywhere unless a specific person drives them to get to the city for services which limits their ability to access programs, services, and resources.
- *Lack of Income:* most of the participants discussed a lack of income in the community, especially for the Hispanic and Latino community members. Participants described that some of the lack of income can be attributed to immigration because farmers are switching from hiring families to hiring H2A workers. The quote below is how one participant explains how income can impact all aspects of a person's life.
- *Lack of Housing:* many participants were upset with how difficult housing is to find, especially affordable housing. For low-income housing, there are two-year-long waiting lists.

“There is large numbers of the Latino population that are poor. They just don’t have the money for better housing. Housing is a big issue in this community, or transportation, or any to accommodate them to come to all these free resources. So they are just living paycheck by paycheck to get through the week, to get their kids to school and back and whatever. So if there is anything a little extra they got to add, they can’t add it .”

Advice

Participants suggested the following advice to overcome barriers and help community members live a healthier lifestyle:

- *Increase Resources:* one participant advised that they wanted the Health Department and other community entities to provide more free resources on health for the community. They also would like to see more availability on the weekends and more bilingual staff. Another participant would like to have a weekend free clinic that provides education on diabetes. There is a program called Golden Threads at Memorial Hospital that helps seniors, and one participant wanted services that Golden Threads offers like help with insurance and answers to medical questions to be offered to younger citizens too. A different participant suggested promoting the service more that Medicaid and other insurance companies offer that provides free transportation for medical appointments.
- *Increase Mental Health Education for Children:* some participants wanted schools to start educating students earlier about mental health. It was important for participants that schools help students as they develop to learn how to handle the situations that they are growing up in. Churches have programs where volunteers greet the kids in the morning and stay with kids when they eat lunch so that students have a support system at school, especially for students who have needs at home, and it gives positive perspectives to the children.

- *Provide Professional Development Opportunities to Healthcare Providers:* participants think that agencies should be trained on how ethnicity, race, and poverty hinder people from living a healthy lifestyle. One participant summarized what training should include in the quote below.

“They really need to look at the community as a whole and I don’t mean just in ethnicity, I don’t just mean in race, but they need to look at poverty, how that impedes them from accessing, or doing, or eating better because sometimes counselors that would say they would get upset, ‘oh so and so didn’t show up for their appointment,’ without realizing that the patient did not have a ride there. Did not have money to pay for the trips. Did not have a neighbor to call upon. That there is more than just the obvious factors for health issues, health barriers and that more of the organizations that are here providing services need to be more cognizant of it, need more training on cultural diversity, and what does that mean things like that. Because I think those are the barriers, the families need the services but the service provider but doesn’t know really, truly understand their community so there are barriers for them that shouldn’t be there.”

Health Inequities

Participants described the following as factors that influence community member’s ability to access programs, services, or health care in Sandusky County:

- In general, there was a range of opinions regarding health inequities in the community. Some participants didn’t experience any inequities and didn’t know of any people who do experience differences in ability to access programs, services, or health care in the County. However, others agree that there are factors that impact them personally or people they know that impact their ability to access community services.
- *Race and Income:* of the participants that did experience health inequity throughout the county, race and income were discussed. They expressed that it is a complex issue that is generational. People of color frequently feel like they don’t have equal access compared to what the rest of the community has access to and there are segments of the communities that do not get the services to stay healthy. Negative comments over time can have a long term impact on how low-income or minority populations feel about what is available to them in the community.

SECOND HISPANIC/LATINO RESIDENT FOCUS GROUP

The second focus group with Hispanic/Latino residents of Sandusky County consisted of nine participants. The focus group was held at the Birchard Public Library in a reserved meeting room.

Individual priorities

Participants identified the following as priority health topics Sandusky County should work to address or prevent:

- *Affordability of Insurance:* participants discussed that in general, insurance policies have high deductibles, and it is hard to afford care. A person might reach their deductible at the end of the year and have to start over at the new year paying for care. There are also people in the county who don't have insurance or can't afford care, like senior citizens who are on fixed incomes. Sliding scales help but are still expensive, and many group members agreed that if a person owes money to a doctor's office, the office doesn't want to provide more care to them until the balance is paid.
- *Lack of Healthcare Professionals:* participants expressed their struggle with finding doctors, especially specialists, in Sandusky County. Participants may have to travel to Toledo, Cleveland, or Columbus to get their necessary care. They believe that doctors won't come into the area because of their county being a lower economic area, and it won't draw people in because they won't earn the same as other areas nearby.
- *Language Barriers:* participants agreed that a lack of bilingual staff was an issue in the county when receiving health care services. For example, one participant shared a story of her mom having a difficult time going to the doctor because she has to bring somebody with her to interpret for her. If there was a doctor or interpreter that spoke Spanish, she could go by herself and feel confident that the doctors understand what she is saying.

Strengths

Participants identified the following strengths in Sandusky County surrounding health:

- *Progress in Health Care:* participants that have lived in the county for their whole lives acknowledged that the number of doctors and facilities available now compared to the past has increased. They are hopeful that their children will have even better access than they do as the County improves the availability of doctors.
- *Language Support:* a few participants agreed that some technology that doctor's offices use for translation services work great. Some offices use iPads or other devices that have many languages, including sign language, and it seems to be efficient and eliminates the liability of staff serving as interpreters for others.

Social Determinants of Health

The following themes were identified by the group as factors that influence why some people may be healthier than others in Sandusky County:

- *Economic Stability:* community members that have income can live healthier lives. They have the ability to pay for medication and have access to a car to be able to access health care services. Participants mentioned it's not just the older population, it is people on a fixed income that are forced to make hard decisions about where to put their limited money. Some people are forced to choose between paying for something that would improve their health like prescription medications and other necessary things like feeding their kids.

- *Health Literacy:* participants recognized that having the background health knowledge to be able to make educated decisions will impact a person's health status. For example, participants mentioned having background knowledge of when someone should see a doctor and being educated on different health issues and symptoms. Another example discussed during the focus group was parents having education related to childhood vaccinations. Sometimes there is confusion or parents are unaware of the timeframe of receiving shots so parents might not schedule appointments resulting in their child missing school.
- *Transportation:* participants described that people who have access to cars or public transportation have better access to locations in the county that aim to improve health.

Awareness

Focus group participants were aware of the following services and resources within Sandusky County that focused on improving health:

- *Public Resources:* The Community Health Center and TRIPS were mentioned by participants as services available to community members that can help them live a healthy lifestyle. There is also a red resource book given at public events; however it does not fit the needs that many of the participants have.

Barriers

Participants identified the following barriers to people accessing programs, services, or resources in Sandusky County:

- *Program Accessibility:* participants mentioned qualifying for different programs and the confusion around qualification requirements as a barrier to receiving services. The guidelines do not allow for some people in the group to qualify for programs even though they consider themselves as high need. Further, the way income is calculated for seasonal workers creates a hardship for many people because if they only work during the summer or winter and those are the months that their annual income is based off, then they might not qualify for financial help even though the rest of the months they do not have an income. Being able to afford transportation to get to appointments is also a challenge for many. One participant told a scenario that many people use TRIPS, Uber, or a taxi to get to medical appointments but every few dollars they spend on transportation creates a hardship when they also need to afford food for themselves and their family.
- *Inefficient Resources:* some previous programs in the past tried to address the issue of community members not being able to afford transportation by providing \$5 and \$10 vouchers for TRIPS. However, this was inefficient because TRIPS couldn't give change back, so when people had a \$2-\$3 trip, they had to sacrifice their whole voucher. In addition, the wait time for TRIPS to pick a person up and to get to their appointment and back home was also an issue for many participants because it could take hours out of their day. Additionally, the services available within the county are lacking. Participants wanted services, physicians, and more professionals to stay in the county rather than driving 45 minutes away.
- *Provider Availability:* participants were frustrated with the turnover of physicians in the area. They expressed concern when newly graduated doctors come into the county because of the grants available to pay off their school loans, and they work in the county for three years, and when their training is up, they leave the county. A solution identified by the group was to extend the time that doctors could be incentivized to stay in the community and perhaps the doctor would open a practice or satellite office.

- *Cost of Medication:* the cost of prescription medications was a barrier to some participants. There are free samples available occasionally, but they had concern for the other months that they did not have a discount on their medications. It is especially frustrating for participants when they find a medication that works to control their health issues, and then they are unable to afford it. Another participant described a person that they know who only took half of the medication at a time to make it stretch out, and that wasn't helpful to them because they weren't getting the full dose.

“Especially when it works. Oh my God. You finally get your blood pressure under control, your diabetes is under control, this is really working and I can't afford it. That happens a lot especially like [name] said, the senior citizens... They would rather go without because they have no money. It is either feed your kids, feed your family, or get my medicine.”

- *Language Barriers:* participants listed language as a barrier to accessing or receiving health care. There was a lack of bilingual medical assistance in the county. However, some participants noted that having access to translation services through the iPad at doctors' offices was helping alleviate the barrier. Using translation services through iPads also benefited other participants who sometimes have to translate for other people, and it reduces their liability for not having to interpret for someone else. Another issue related to the language barrier is a perceived lack of privacy when talking with an interpreter at a doctor's office. One participant mentioned being with someone else at a medical appointment, and a lady was translating, but everyone could hear what was being said even though they were put in a booth, so the patient felt uncomfortable.

Advice

Participants suggested the following advice to overcome barriers and help community members live a healthier lifestyle:

- *Increase Awareness:* sending flyers through the mail in English and Spanish that provides information about services available and transportation opportunities were described by some participants. Others wanted more outreach at places like the library where agencies can post information and learn about upcoming events so that they can share it with others. Word of mouth was also an important way that the group receives a lot of community information. A centralized resource center was brought up that is grant-funded and if there was a need like medicine or transportation, community residents could visit one place to get the help they need.

“But also getting out there because I feel like the county has a lot of programs and things like that but people don't know. Places like the library have all of this information but if people don't come here, they don't have it. So a lot of it is like word of mouth like my neighbor told me or somebody that they know told them and if they don't hear it that way, they just don't know about it until it is too late and you're looking for someone to help and even that, it is like the word of mouth.”

- *Increase Transportation and Accessibility:* participants recommended that the county applies for grant funding to be able to offer transportation to residents to get to their appointments for free. They also suggested offering TRIP vouchers in 1\$ increments or for TRIPS to give back the remaining balance of a voucher instead of losing the balance.
- *Increase Accessible Hours:* having places like the Health Department and WIC start evening hours would be helpful along with weekend hours. Even if places were open late just one day a week, it would be beneficial.

- *Increase Access to Emergency Food Assistance:* there are some resources available for food assistance, but sometimes having access to perishable foods like milk and eggs is hard for some people. It is hard for pantries to give nutritious foods when they are limited to only giving non-perishable foods. Participants suggested working with grocery stores to create a partnership to provide access to nutritional foods or even making a package of food for those in need.
- *Increase Affordable Medical Care:* medications and medical equipment are costly for some people even with insurance. There are programs available to assist with the price of medications, for example one participant knew of a program at Meijer that helped them get free medications, but not many people know about it or have transportation to get there. One participant passionately advocated for programs like that to be promoted more, to apply for grants, and create partnerships to help reduce cost.
- *Increase Political Representation:* participants felt frustrated and upset that the Latino community does not have somebody local who is representing them the right way, which is translating to them being ignored when it comes to national policies. Participants identified that maybe if there were more people in the county speaking up, especially people speaking to their representatives, that more change can happen. They believe they have several barriers to living a healthy and productive life, and that the current administration has left their population behind.
- *Migrant Services:* there are limited services available within the county for migrants, especially in terms of accessing health care.
- *Coordination of Services:* participants wondered if there was a committee that discussed the services available that could help clients at different agencies. They thought that if agencies met regularly to coordinate services and share information, it would help families in need.

Health Inequities

Participants described the following as factors that influence community member's ability to access programs, services, or health care in Sandusky County:

- *Language Barriers:* lack of bilingual staff at health agencies limits the ability of residents to receive adequate care. One participant shared that their family member has a difficult time receiving health care because of the language barrier. Providing more accommodations like access to iPads with translation services for people with language barriers was necessary for the participants.
- *Income:* some participants have to make decisions about their health based on what they can afford, and that creates a situation where some people are not as healthy as others.

AFRICAN AMERICAN RESIDENT FOCUS GROUP

The focus group with African American residents of Sandusky County consisted of seven participants. The focus group was held at the Birchard Public Library in a reserved meeting room.

Individual priorities

Participants identified the following as priority health topics Sandusky County should work to address or prevent:

- *Drug Issues:* participants listed the community drug problem and overdoses as significant problems in the community.
- *Cost and Accessibility of Healthy Options:* participants were concerned over the prices of nutritious foods compared to unhealthy options. They compared the prices of fast-food restaurants with healthy choices and the price difference between them. Participants also discussed the unaffordability of some community resources that provide physical activity opportunities like the Y or rec center.
- *Aging Population:* participants thought that many seniors don't have access to information about health-promoting activities throughout the county or don't have access to them because they can't afford them. Some participants think it should be a priority to provide the aging population with affordable options to be healthy.
- *Lack of Transportation:* many people in the community struggle with having transportation options. Participants agree that the east side of the county lacks many resources and people who live there don't have a way to get to the other side of the county to access the county's resources. Additionally, sometimes people do have access to public transportation but due to the hours that they work, they can't get transportation after a specific time because the hour's public transportation is available.

Strengths

Participants identified the following strengths in Sandusky County surrounding health:

- *School System:* the school system in the county was perceived as a community strength.
- *Increased Healthy Food Options:* the county is starting to have more healthy restaurant options available, including options for vegetarians and vegans. The farmer's markets were also discussed as a community strength, and some participants were satisfied with the fresh vegetable options at the market along with the other community activities that are incorporated like having live music. Lastly, the food pantries available to those in need are a strength.
- *Caring Community:* participants agreed that the people in the community care about each other since it is so small.
- *Resources:* there are many community resources provided, especially with the Health Department. There are opportunities for the youth to be active like the Y and rec center for sports.

Social Determinants of Health

The group identified the following themes as factors that influence why some people may be healthier than others in Sandusky County:

- *Support Systems:* some people don't have the encouragement and support of others to be able to live a healthy lifestyle. Some people have to work really hard to provide for their family, which leads to burnout, and then they don't have the energy to take care of their health.
- *Nutrition:* some participants discussed that living a busy life can lead to people making a quick meal that is not as healthy as a homecooked healthy meal. The busy lifestyle can quickly turn into people making a habit out of making less nutritious foods.
- *Accessibility and Awareness:* a participant mentioned that Sandusky County is fortunate to have the Great Lakes Community Action Partnership. Many people are not aware of the resources available throughout the county. However, the participants thought that many resources were not accessible to many people and also, many were unaware of the programs available.
- *Safety:* many people are afraid to go outside of their homes due to fear of violence. One participant mentioned that they would rather stay home in the comfort of their home rather than going outside due to shootings, muggings, and other acts of violence. Participants were concerned about their safety at places of worship and malls. Additionally, some participants discussed that some parents might not want their children going to the parks in the county because of their concern for safety.
- *Bullying:* bullying is also an issue in Sandusky schools and across the nation. With the media sharing stories about suicide and commercials, no one wants to admit it is a problem in the county, but participants shared that it is a local problem that affects the mental health of the youth. Students sometimes are lacking a support system that can help them work through these issues that they have at school.
- *Lack of Activity:* kids are exposed to electronics now more than ever before, and participants think it is affecting the way children are actively playing and are social.

Awareness

Focus group participants were aware of the following services and resources within Sandusky County that focused on improving health:

- *Community Programs and Facilities:* participants discussed the opportunities provided in the Great Lakes Community Action Partnership newsletter or magazine. There are exercise opportunities, trips, resources for families, and financial assistance through the United Way that the participants didn't think many community members knew about. One participant enjoys playing Bingo at Valley View and going on trips that they offer. One person mentioned a facility that is working on launching a skating rink and basketball courts for youth to be physically active.
- *Community Trails:* the biking and walking trails in the county are appreciated by many of the participants. However, participants thought that many community members might not be aware that they exist.

Barriers

Participants identified the following barriers to people accessing programs, services, or resources in Sandusky County:

- *Time:* the time that programs or services are offered can be a barrier for some people. Participants discussed that senior programs and some programs offered through the hospital are often scheduled in the morning and nothing in the evening, which doesn't accommodate for the people who work during the day.
- *Race:* race was noted as a factor that impacts the daily lives of some participants. For example, participants discussed being discriminated against by the police or government, in comparison to their white counterparts. One participant described a scenario in which they heard of a white person and a black person committing the same crime, but the black person was punished more harshly. Social media also reinforces the perception of racism amongst this population, and can ultimately lead to distrust of those who are supposed to be serving the community
- *Politics:* the political landscape of the county can play a big part in people accessing programs, services, or resources.
- *Youth Activity:* participants believe that electronics like phones and videogames are taking away the time that children should be outside playing. Children are also learning a lot of information through the media and the participants perceive that it is a negative thing. Due to the electronics, children are also not getting enough sleep and are tired throughout the day.

Advice

Participants suggested the following advice to overcome barriers and help community members live a healthier lifestyle:

- *Increased Activity:* participants were hopeful that videogame designers are coming out with games to help increase physical activity and are more interactive. This could potentially help the children who typically play videogames and instead, they can choose an option that allows for more movement.
- *Increase Awareness:* the group brainstormed ways that agencies could increase awareness of their health-related programs and services to community members. Putting flyers in the mail was mentioned first, followed by social media, and then general advertising. Participants also said that social media could be used as a teaching tool for organizations to create a fun and engaging way to reach the younger population and educate them about health.
- *Increase Youth Activities and Programs:* there are not many options for youth to be outside and physically active, so the participants wanted to see more kids outside playing sports and interacting. The following quote illustrates one person's perspective of youth activity.
- *Increase Transportation:* the transportation options available do not entirely meet the needs of residents. Participants would like to see the routes be changed to allow better access for residents.

“There is not much like when we were coming up. There were a lot of things for teenagers to do. You hardly have anything for teenagers to do in this county. Hardly anything for the kids to do. I mean you got sports and school but when we were coming up, we had things we could do after school. You don't have that anymore for the children and I think that's a big health issue there because then that draws them getting into trouble.”

Health Inequities

Participants described the following as factors that influence community member's ability to access programs, services, or health care in Sandusky County:

- *Sex and Sexuality:* participants described a person's sex as a factor that can determine a person's ability to access programs or services. Participants said that programs would determine acceptance or lack of acceptance into a program based on the sexual preferences of a person. Other participants agreed that parents might be ashamed of their children based on their sexuality, which can influence their ability to receive services in the County.
- *Age:* Participants perceived that the aging population is treated differently in the healthcare system. Older people may feel as though they are placed in a different category and they are less important than other patients because they are older. Some participants felt that the elderly sometimes need to have someone else be their advocate because they think that health care providers view them as fragile and have a fragile state of mind.

Appendix I: Health Assessment Information Sources

Source	Data Used	Website
American Cancer Society, Cancer Facts and Figures, 2019. Atlanta: ACS, 2019	<ul style="list-style-type: none"> 2019 Cancer Facts, Figures, and Estimates 	www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2019/cancer-facts-and-figures-2019.pdf
American Lung Association	<ul style="list-style-type: none"> Asthma and Children 	www.lung.org/lung-health-and-diseases/lung-disease-lookup/asthma/learn-about-asthma/asthma-children-facts-sheet.html
Behavioral Risk Factor Surveillance System (BRFSS), National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, Centers for Disease Control and Prevention (CDC)	<ul style="list-style-type: none"> 2010 - 2018 Adult Ohio and U.S. Correlating Statistics 	www.cdc.gov/brfss/index.html
Brady Campaign to Prevent Gun Violence	<ul style="list-style-type: none"> Victims of Gun Violence 	www.bradycampaign.org/sites/default/files/Brady-Campaign-5Year-Gun-Deaths-Injuries-Stats_08-23-2018.pdf
CDC, Oral Health	<ul style="list-style-type: none"> Oral Health Basics 	www.cdc.gov/oralhealth/basics/adult-oral-health/index.html
CDC, Smoking and Tobacco Use	<ul style="list-style-type: none"> E-Cigarette Health Effects 	www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html
CDC, Smoking and COPD	<ul style="list-style-type: none"> Smoking and COPD 	www.cdc.gov/tobacco/campaign/tips/diseases/copd.html
CDC Wonder, About Underlying Cause of Death	<ul style="list-style-type: none"> U.S. Comparisons, 2015-2017 	wonder.cdc.gov/ucd-icd10.html
CDC, Children's Mental Health	<ul style="list-style-type: none"> Youth Depression: Signs and Symptoms 	https://www.cdc.gov/childrensmentalhealth/features/anxiety-depression-children.html
CDC, Vital Signs, Safe Sleep for Babies	<ul style="list-style-type: none"> Safe Sleep for Babies: What Can Be Done? 	https://www.cdc.gov/vitalsigns/safesleep/index.html
CDC, Suicide in Rural America	<ul style="list-style-type: none"> Suicide Rising Across the U.S. 	www.cdc.gov/ruralhealth/Suicide.html
CDC, Mold	<ul style="list-style-type: none"> Mold Prevention 	www.cdc.gov/mold/default.htm
County Health Rankings	<ul style="list-style-type: none"> Food Environment Index Alcohol-Impaired Driving Deaths 	countyhealthrankings.org
Foundation for Advancing Alcohol Responsibility, Underage Drinking Statistics	<ul style="list-style-type: none"> Teen Binge Drinking: On the Decline 	monitoringthefuture.org/pubs/monographs/mtf-overview2018.pdf

Source	Data Used	Website
Foundation for Advancing Alcohol Responsibility, 2017	<ul style="list-style-type: none"> • Underage Drinking Statistics 	www.responsibility.org/get-the-facts/research/statistics/underage-drinking-statistics/
Healthychildren.org	<ul style="list-style-type: none"> • The Benefits and Tricks to Having a Family Dinner 	https://www.healthychildren.org/English/family-life/family-dynamics/Pages/Mealtime-as-Family-Time.aspx
Healthy People 2020: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> • All Healthy People 2020 Target Data Points 	www.healthypeople.gov/2020/topicobjectives2020
National Survey of Children’s Health (NSCH), Data Resource Center for Child and Adolescent Health	<ul style="list-style-type: none"> • 2017 – 2018 Child Ohio and U.S. Correlating Statistics 	www.childhealthdata.org/browse/survey
Ohio Public Health Information Warehouse, 2010-2018	<ul style="list-style-type: none"> • 2016-2018 Sandusky County and Ohio Leading Causes of Death • 2014-2018 Sandusky County and Ohio Unintentional Drug Overdose Deaths • Chlamydia, Gonorrhea, and Syphilis Annualized Disease Rates for Sandusky County and Ohio, 2014-2018 • Chlamydia, Gonorrhea, and Syphilis Annualized County Cases for Sandusky County, 2014-2018 • Sandusky County Suicide Deaths, 2009-2018 • HIV/AIDS Surveillance Program, 2014-2018 • Sandusky County and Ohio Age-Adjusted Mortality Rates • Sandusky County and Ohio Age-Adjusted Cancer Mortality Rates, 2016-2018 • Sandusky County Cancer Incidence, 2012-2016 • Sandusky County and Ohio Birth Statistics, Pre-Term Births, Low Birth Weight 	http://publicapps.odh.ohio.gov/EDW/DataCatalog

Source	Data Used	Website
The Ohio Automated Rx Reporting System	<ul style="list-style-type: none"> Opiate and Pain Reliever Doses Per Capita, 2014-2019 Opiate and Pain Reliever Doses Per Patient, 2014-2019 	www.ohiopmp.gov/About.aspx
ODH, 2017 Ohio Drug Overdose Data: General Findings	<ul style="list-style-type: none"> Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population, by County, 2012-2017 (Map) 	https://odh.ohio.gov/wps/wcm/connect/gov/5deb684e-4667-4836-862b-cb5eb59acbd3/2017_OhioDrugOverdoseReport.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-5deb684e-4667-4836-862b-cb5eb59acbd3-moxPbu6
RAINN (Rape, Abuse and Incent National Network)	<ul style="list-style-type: none"> Scope of the Problem: Sexual Violence 	www.rainn.org/statistics/scope-problem
Stanford Children's Health	<ul style="list-style-type: none"> How to Help Increase Your School-Aged Child's Social Ability 	https://www.stanfordchildrens.org/en/topic/default?id=the-growing-child-school-age-6-to-12-years-90-P02278
United States Department of Agriculture (USDA), Food Insecurity in the U.S.	<ul style="list-style-type: none"> Food Insecurity 	www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/interactive-charts-and-highlights/#characteristics
U.S. Department of Health and Human Services, A Report of the Surgeon General	<ul style="list-style-type: none"> E-Cigarette Use Among Youth and Young Adults 	https://e-cigarettes.surgeongeneral.gov/documents/2016_SGR_Full_Report_non-508.pdf
U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention, National Strategy for Preventing Suicide, 2018	<ul style="list-style-type: none"> Key Facts About Veteran Suicide 	https://www.mentalhealth.va.gov/suicide_prevention/strategy.asp
Youth Risk Behavior Surveillance System (YRBSS), Centers for Disease Control and Prevention (CDC)	<ul style="list-style-type: none"> 2017 Youth U.S. Correlating Statistics 	https://nccd.cdc.gov/Youthonline/App/Default.aspx

Appendix II: Acronyms and Terms

AHS	Access to Health Services , Topic of Healthy People 2020 objectives
Adult	Defined as 19 years of age and older.
Age-Adjusted Mortality Rates	Death rate per 100,000 adjusted for the age 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
BMI	Body Mass Index is defined as the contrasting measurement/relationship of weight to height.
BRFSS	Behavior Risk Factor Surveillance System , an adult survey conducted by the CDC.
CDC	Centers for Disease Control and Prevention .
Current Smoker	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
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 ≥ 140 and Diastolic ≥ 90
IID	Immunizations and Infectious Diseases , Topic of Healthy People 2020 objectives
N/A	Data is not available.
ODH	Ohio Department of Health
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.
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 BMI Classifications	Underweight is defined as BMI-for-age $\leq 5^{\text{th}}$ percentile Overweight is defined as BMI-for-age 85 th percentile to $< 95^{\text{th}}$ percentile. Obese is defined as $\geq 95^{\text{th}}$ percentile.
YRBS	Youth Risk Behavior Survey , a youth survey conducted by the CDC

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

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

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population in order to gain an appropriate number of responses from that subgroup for appropriate data analysis when investigating them separately (this is often done for minority groups). Whether the over-sampling is done inadvertently or purposefully, the data needs to be weighted so that the proportioned characteristics of the sample accurately reflect the proportioned characteristics of the population. In the 2019 Sandusky County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Sandusky 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 Sandusky 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 Sandusky County Survey and the 2017 Census estimates.

2019 Sandusky Survey			2017 Census Estimate		Weight
<u>Sex</u>	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	251	53.97849	29,478	49.49378	0.91692
Female	214	46.02151	30,081	50.50622	1.09745

In this example, it shows that there was a larger portion of males in the sample compared to the actual portion in Sandusky County. The weighting for males was calculated by taking the percent of males in Sandusky County (based on Census information) (49.49378%) and dividing that by the percent found in the 2019 Sandusky County sample (56.5653.97849836%) [$49.49378/53.97849 =$ weighting of 0.91692 for males]. The same was done for females [$50.50622/ 46.02151\% =$ weighting of 1.09745 for females]. Thus, males' responses are weighted less by a factor of 0.91692 and females' responses weighted heavier by a factor of 1.09745.

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 2.47741 [1.09745 (weight for females) \times 0.92475 (weight for White) \times 2.39339 (weight for age 35-44) \times 1.01994 (weight for income \$50-\$75k)]. Thus, each individual in the 2019 Sandusky 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 each individual. When analyses were done comparing groups within one of the four weighting variables (e.g., smoking status by race/ethnicity), that specific variable was not used in the weighting score that was applied in the software package. In the example smoking status by race, the weighting score that was applied during analysis included only age, sex, and income. Thus, a total of eight weighting scores for each individual were created and applied depending on the analysis conducted. The weight categories were as follows:

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

Category	Sandusky Sample	%	Sandusky 2017 Census*	%	Weighting Value
Sex:					
Male	251	53.97849	29,478	49.49378	0.91692
Female	214	46.02151	30,081	50.50622	1.09745
Age:					
20 to 34 years	22	4.77223	9,984	22.45160	4.70463
35 to 44 years	31	6.72451	7,157	16.09436	2.39339
45 to 54 years	63	13.66594	8,206	18.45330	1.35031
55 to 59 years	47	10.19523	4,991	11.22355	1.10086
60 to 64 years	64	13.88286	3,751	8.43509	0.60759
65 to 74 years	151	32.75488	5,776	12.98882	0.39655
75 to 84 years	68	14.75054	3,244	7.29497	0.49456
85+ years	15	3.25380	1,360	3.05831	0.93992
Race:					
White	427	91.82796	50,576	84.91748	0.92475
Non-White	38	8.17204	8,983	15.08252	1.84562
Household Income:					
Less than \$25,000	102	23.83178	5,576	23.50660	0.98636
\$25,000 to \$34,999	52	12.14953	2,583	10.88909	0.89626
\$35,000 to \$49,999	80	18.69159	3,597	15.16378	0.81126
\$50,000 to \$74,999	89	20.79439	5,031	21.20906	1.01994
\$75,000 to \$99,999	53	12.38318	3,228	13.60820	1.09893
\$100,000 to \$149,999	36	8.41121	2,706	11.40761	1.35624
\$150,000 or more	16	3.73832	1,000	4.21567	1.12769

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

* Sandusky County population figures taken from the 2017 Census estimates.

Appendix IV: Sandusky County School Participation

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

Clyde-Greensprings Schools

McPherson Middle School

Fremont City Schools

Ross High School

Fremont Middle School

Gibsonburg Exempted Village Schools

Gibsonburg High School

Gibsonburg Middle School

Lakota Local Schools

Lakota High School

Lakota Middle School

Appendix V: Sandusky County Sample Demographic Profile*

Adult Variable	2019 Sandusky County Adult Survey Sample	Sandusky County Census 2013-2017 (5-year estimate)	Ohio Census 2017 (1-year estimate)
Age			
20-29	2.5%	11.2%	13.3%
30-39	5.5%	11.2%	12.5%
40-49	6.8%	12.9%	12.0%
50-59	19.7%	15.7%	13.7%
60 plus	63.1%	23.7%	23.4%
Race/Ethnicity			
White	91.9%	89.9%	81.3%
Black or African American	1.5%	2.8%	12.4%
Hispanic Origin (may be of any race)	4.0%	9.7%	0.2%
Asian	0.2%	0.3%	2.2%
Other	2.3%	4.1%	0.9%
American Indian and Alaska Native	0.4%	0.2%	3.7%
Marital Status†			
Married Couple	59.1%	50.7%	47.4%
Never been married/member of an unmarried couple	10.4%	28.9%	32.6%
Divorced/Separated	17.1%	14.1%	13.7%
Widowed	11.9%	6.3%	6.3%
Education†			
Less than High School Diploma	5.3%	10.5%	9.7%
High School Diploma	37.1%	42.3%	33.3%
Some college/College graduate	56.6%	47.3%	56.9%
Income (Families)			
\$14,999 and less	10.5%	9.0%	6.9%
\$15,000 to \$24,999	11.3%	5.4%	6.6%
\$25,000 to \$49,999	27.9%	23.1%	21.2%
\$50,000 to \$74,999	18.9%	24.3%	19.5%
\$75,000 or more	29.2%	38.0%	45.9%

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

† The Ohio and Sandusky 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 Youth Survey Sample*
Age	
12 years old or younger	14%
13 years old	16%
14 years old	15%
15 years old	21%
16 years old	18%
17 years old	11%
18 years old or older	5%
Gender	
Male	47%
Female	53%
School grades	
Mostly As	53%
Mostly Bs	27%
Mostly Cs	11%
Mostly Ds	3%
Race/Ethnicity	
White	83%
American Indian and Alaska Native	6%
Black or African American	12%
Hispanic or Latino	18%
Asian	1%
Native Hawaiian or Other Pacific Islander	<1%
Other	7%
Grade Level	
Middle School (6-8)	35%
High School (9-12)	64%
Individual Grade Level	
6 th grade	7%
7 th grade	13%
8 th grade	15%
9 th grade	15%
10 th grade	26%
11 th grade	11%
12 th grade	12%

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

Child Variable	2019 Child Survey Sample*
Gender	
Male	48%
Female	52%
Race/Ethnicity	
White	94%
American Indian and Alaska Native	1%
Biracial	6%
Black or African American	4%
Hispanic, Latino or Spanish origin	13%
Asian	<1%
Native Hawaiian or Other Pacific Islander	0%
Other	4%
Individual Schools	
Green Springs Elementary	13%
Clyde Elementary	9%
Lutz Elementary	9%
Sacred Heart Campus	9%
Bellevue Elementary School	8%
Croghan Elementary	7%
Hayes Elementary	7%
Fremont Middle School	5%
Otis Elementary	5%
Woodmore Elementary	4%
Private	4%
McPherson Middle School	3%
Atkinson Elementary	3%
Stamm Elementary	3%
Washington Elementary	3%
Lakota Elementary	2%
Lakota Middle School	1%
St. Joseph Campus	1%
Solomon Lutheran Elementary	1%
Bellevue Middle School	1%
Home-schooled	1%
Woodmore Middle School	0%
Child is not enrolled	0%

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

Appendix VI: Demographics and Household Information

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

Age	Total	Males	Females
Sandusky County	60,944	29,992	30,952
0-4 years	3,826	1,921	1,905
1-4 years	3,090	1,550	1,540
< 1 year	736	371	365
1-2 years	1,495	728	767
3-4 years	1,595	822	773
5-9 years	4,193	2,162	2,031
5-6 years	1,622	827	795
7-9 years	2,571	1,335	1,236
10-14 years	4,154	2,122	2,032
10-12 years	2,465	1,273	1,192
13-14 years	1,689	849	840
12-18 years	6,000	2,999	3,001
15-19 years	4,147	2,114	2,033
15-17 years	2,695	1,378	1,317
18-19 years	1,452	736	716
20-24 years	3,204	1,673	1,531
25-29 years	3,420	1,677	1,743
30-34 years	3,513	1,799	1,714
35-39 years	3,701	1,830	1,871
40-44 years	3,926	1,943	1,983
45-49 years	4,500	2,280	2,220
50-54 years	5,032	2,517	2,515
55-59 years	4,370	2,167	2,203
60-64 years	3,643	1,808	1,835
65-69 years	2,657	1,267	1,390
70-74 years	2,199	1,011	1,188
75-79 years	1,704	723	981
80-84 years	1,400	552	848
85-89 years	900	305	595
90-94 years	360	106	254
95-99 years	82	15	67
100-104 years	11	0	11
105-109 years	1	0	1
110 years & over	1	0	1
Total 85 years and over	1,355	426	929
Total 65 years and over	9,315	3,979	5,336
Total 19 years and over	45,254	22,006	23,248

SANDUSKY COUNTY PROFILE

(Source: U.S. Census Bureau, 2017)
2013-2017 ACS 5-year estimates

General Demographic Characteristics

	Number	Percent (%)
Total Population		
2017 Total Population	59,559	100%
Largest City – Fremont City		
2017 Total Population	16,265	100%
Population by Race/Ethnicity		
Total Population	59,559	100%
White	53,524	89.9%
African American	1,695	2.8%
Asian	191	0.3%
Hispanic or Latino (of any race)	5,777	9.7%
American Indian or Alaska Native	138	0.2%
Native Hawaiian and Pacific Islander	17	0.0%
Some other race	2,419	4.1%
Two or more races	1,575	2.6%
Population by Age		
Under 5 years	3,409	5.7%
5 to 19 years	11,681	19.6%
20 to 24 years	3,468	5.8%
25 to 44 years	13,673	23.0%
45 to 64 years	16,948	28.5%
65 years and more	10,380	17.4%
Median age (years)	41.7	N/A
Household by Type		
Total households	23,721	100%
Total families	15,737	66.3%
Households with children <18 years	6,455	27.2%
Married-couple family household	11,556	48.7%
Married-couple family household with children <18 years	3,848	16.2%
Female householder, no husband present	2,726	11.5%
Female householder, no husband present with children <18 years	1,736	7.3%
Nonfamily household (single person)	7,984	33.7%
Nonfamily household (single person) living alone	6,439	27.1%
Nonfamily household (single person) 65 years and >	2,885	12.2%
Households with one or more people <18 years	7,367	31.1%
Households with one or more people 65 years and >	7,087	29.9%
Average household size	2.46 people	N/A
Average family size	2.98 people	N/A

General Demographic Characteristics Continued

Housing Occupancy		
Median value of owner-occupied units	\$111,900	N/A
Median housing units with a mortgage	\$1,059	N/A
Median housing units without a mortgage	\$408	N/A
Median value of occupied units paying rent	\$666	N/A
Median rooms per total housing unit	6.1	N/A
Total occupied housing units	23,721	N/A
No telephone service available	528	2.2%
Lacking complete kitchen facilities	296	1.2%
Lacking complete plumbing facilities	51	0.2%

Selected Social Characteristics

School Enrollment		
Population 3 years and over enrolled in school	13,708	100%
Nursery & preschool	927	6.8%
Kindergarten	763	5.6%
Elementary School (Grades 1-8)	6,294	45.9%
High School (Grades 9-12)	3,106	22.7%
College or Graduate School	2,618	19.1%
Educational Attainment		
Population 25 years and over	41,001	100%
< 9 th grade education	1,377	3.4%
9 th to 12 th grade, no diploma	2,930	7.1%
High school graduate (includes equivalency)	17,328	42.3%
Some college, no degree	8,918	21.8%
Associate degree	4,228	10.3%
Bachelor's degree	4,178	10.2%
Graduate or professional degree	2,042	5.0%
Percent high school graduate or higher	N/A	89.5%
Percent Bachelor's degree or higher	N/A	15.2%
Marital Status		
Population 15 years and over	48,400	100%
Never married	N/A	28.9%
Now married, excluding separated	N/A	50.7%
Separated	N/A	1.5%
Widowed	N/A	6.3%
Widowed females	N/A	9.8%
Divorced	N/A	12.6%
Divorced females	N/A	13.8%
Veteran Status		
Civilian population 18 years and over	45,781	100%
Veterans 18 years and over	4,072	8.9%

Selected Social Characteristics, Continued

Disability Status of the Civilian Non-Institutionalized Population		
Total civilian noninstitutionalized population	58,686	100%
Civilian with a disability	9,002	15.3%
Under 18 years	13,730	100%
Under 18 years with a disability	686	5.0%
18 to 64 years	35,157	100%
18 to 64 years with a disability	4,781	13.6%
65 Years and over	9,799	100%
65 Years and over with a disability	3,535	36.1%

Selected Economic Characteristics

Employment Status		
Population 16 years and over	47,491	100%
16 years and over in labor force	30,070	63.3%
16 years and over not in labor force	17,421	36.7%
Females 16 years and over	24,377	100%
Females 16 years and over in labor force	14,370	58.9%
Population living with own children <6 years	3,852	100%
All parents in family in labor force	3,018	78.3%
Class of Worker		
Civilian employed population 16 years and over	28,434	100%
Private wage and salary workers	24,620	86.6%
Government workers	2,704	9.6%
Self-employed workers in own not incorporated business	1,025	3.6%
Unpaid family workers	49	0.2%
Occupations		
Civilian employed population 16 years and over	28,434	100%
Management, business, science, and arts occupations	7,206	25.3%
Sales and office occupations	5,594	19.7%
Service occupations	4,760	16.7%
Production, transportation, and material moving occupations	7,862	27.6%
Natural resources, construction, and maintenance occupations	3,012	10.6%
Leading Industries		
Civilian employed population 16 years and over	28,434	--
Agriculture, forestry, fishing and hunting, and mining	717	2.5%
Construction	1,571	5.5%
Manufacturing	8,188	28.8%
Wholesale trade	548	1.9%
Retail trade	2,639	9.3%
Transportation and warehousing, and utilities	1,796	6.3%
Information	259	0.9%
Finance and insurance, and real estate and rental and leasing	728	2.6%
Professional, scientific, and management, and administrative and waste management services	1,826	6.4%
Educational services, and health care and social assistance	5,657	19.9%
Arts, entertainment, and recreation, and accommodation and food services	2,390	8.4%
Other services, except public administration	1,470	5.2%
Public administration	645	2.3%

Selected Economic Characteristics, Continued

Income		
Total households	23,721	--
Less than \$10,000	1,710	7.2%
\$10,000 to \$14,999	1,159	4.9%
\$15,000 to \$24,999	2,707	11.4%
\$25,000 to \$34,999	2,583	10.9%
\$35,000 to \$49,999	3,597	15.2%
\$50,000 to \$74,999	5,031	21.2%
\$75,000 to \$99,999	3,228	13.6%
\$100,000 to \$149,999	2,706	11.4%
\$150,000 to \$199,999	615	2.6%
\$200,000 or more	385	1.6%
Median household income (dollars)	\$50,370	N/A
Income		
Families	15,737	--
Less than \$10,000	931	5.9%
\$10,000 to \$14,999	491	3.1%
\$15,000 to \$24,999	850	5.4%
\$25,000 to \$34,999	1,329	8.4%
\$35,000 to \$49,999	2,318	14.7%
\$50,000 to \$74,999	3,826	24.3%
\$75,000 to \$99,999	2,673	17.0%
\$100,000 to \$149,999	2,428	15.4%
\$150,000 to \$199,999	537	3.4%
\$200,000 or more	354	2.2%
Median family income (dollars)	\$59,753	N/A
Per capita income in 2018	\$25,219	N/A
Poverty Status in 2017		
Families	N/A	10.9%
Individuals	N/A	13.6%

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

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2014	\$36,561	45 th of 88 counties
BEA Per Capita Personal Income 2015	\$38,054	42 nd of 88 counties
BEA Per Capita Personal Income 2016	\$38,391	45 th of 88 counties
BEA Per Capita Personal Income 2017	\$39,827	45 th of 88 counties
BEA Per Capita Personal Income 2018	\$41,624	47 th of 88 counties

(Source: Bureau of Economic Analysis, https://apps.bea.gov/iTable/index_regional.cfm)

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

Poverty Rates, 2013-2017 5-year averages

Category	Sandusky County	Ohio
Population in poverty	13.6%	14.9%
< 125% FPL (%)	18.4%	19.3%
< 150% FPL (%)	22.8%	23.6%
< 200% FPL (%)	32.2%	32.5%
Population in poverty (2002)	7.9%	10.2%

(Source: *The Ohio Poverty Report*, Ohio Development Services Agency, February 2019, <http://www.development.ohio.gov/files/research/P7005.pdf>)

Employment Statistics

Category	Sandusky County	Ohio
Labor Force	30,000	5,807,100
Employed	28,700	5,588,100
Unemployed	1,300	219,000
Unemployment Rate* in December 2019	4.2	3.8
Unemployment Rate* in November 2019	4.3	3.8
Unemployment Rate* in December 2018	5.3	4.8

*Rate equals unemployment divided by labor force (Source: Ohio Department of Job and Family Services, December 2019, <http://ohiolmi.com/laus/OhioCivilianLaborForceEstimates.pdf>)

Estimated Poverty Status in 2017

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
Sandusky County				
All ages in poverty	6,477	5,471 to 7,483	11.1%	9.4 to 12.8
Ages 0-17 in poverty	2,043	1,625 to 2,461	15.6%	12.4 to 18.8
Ages 5-17 in families in poverty	1,428	1,112 to 1,744	14.7%	11.5 to 17.9
Median household income	\$53,058	\$48,980 to \$57,136		
Ohio				
All ages in poverty	1,575,401	1,551,281 to 1,599,521	13.9%	13.7 to 14.1
Ages 0-17 in poverty	507,119	493,056 to 521,182	19.8%	19.2 to 20.4
Ages 5-17 in families in poverty	339,888	328,221 to 351,555	18.2%	17.6 to 18.8
Median household income	\$54,077	\$53,670 to \$54,484		
United States				
All ages in poverty	42,583,651	42,342,619 to 42,824,683	13.4%	13.3 to 13.5
Ages 0-17 in poverty	13,353,202	13,229,339 to 13,477,065	18.4%	18.2 to 18.6
Ages 5-17 in families in poverty	9,120,503	9,033,090 to 9,207,916	17.3%	17.1 to 17.5
Median household income	\$60,336	\$60,250 to \$60,422		

(Source: U.S. Census Bureau, 2017 Poverty and Median Income Estimates, <https://www.census.gov/data/datasets/2017/demo/saipe/2017-state-and-county.html>)

Federal Poverty Thresholds in 2018 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	\$13,064					
1 Person 65 and >	\$12,043					
2 people Householder < 65 years	\$16,815	\$17,308				
2 People Householder 65 and >	\$15,178	\$17,242				
3 People	\$19,642	\$20,212	\$20,231			
4 People	\$25,900	\$26,324	\$25,465	\$25,554		
5 People	\$31,234	\$31,689	\$30,718	\$29,967	\$29,509	
6 People	\$35,925	\$36,068	\$35,324	\$34,612	\$33,553	\$32,925
7 People	\$41,336	\$41,594	\$40,705	\$40,085	\$38,929	\$37,581
8 People	\$46,231	\$46,640	\$45,800	\$45,064	\$44,021	\$42,696
9 People or >	\$55,613	\$55,883	\$55,140	\$54,516	\$53,491	\$52,082

(Source: U. S. Census Bureau, Poverty Thresholds 2018, <https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html>)

Appendix VII: County Health Rankings

	Sandusky 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)	8,500	8,500	6,900
Overall health. Percentage of adults reporting fair or poor health (age-adjusted) (2016)	18%	17%	16%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2016)	4.0	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)	19%	23%	17%
Obesity. Percentage of adults that report a BMI of 30 or more (2015)	35%	32%	29%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2015 and 2016)	8.4	6.7	7.7
Physical inactivity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2015)	26%	25%	22%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2018)	82%	84%	84%
Drug and alcohol abuse. Percentage of adults reporting binge or heavy drinking (2016)	17%	19%	18%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2013-2017)	33%	33%	29%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2016)	353.6	520.9	497.3
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2011-2017)	32	26	25

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

	Sandusky County 2019	Ohio 2019	U. S. 2019
Clinical Care			
Coverage and affordability. Percentage of population under age 65 without health insurance (2016)	6%	7%	10%
Access to health care/medical care. Ratio of population to primary care physicians (2016)	1,850:1	1,300:1	1,330:1
Access to dental care. Ratio of population to dentists (2017)	1,850:1	1,620:1	1,460:1
Access to behavioral health care. Ratio of population to mental health providers (2018)	1,000:1	470:1	440:1
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2016)	4,108	5,135	4,520
Mammography screening. Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening (2016)	39%	41%	41%
Flu vaccinations. Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination (2016)	47%	47%	45%
Social and Economic Factors			
Education. Percentage of ninth-grade cohort that graduates in four years (2017-2018)	96%	85%	85%
Education. Percentage of adults ages 25-44 years with some post-secondary education (2013-2017)	59%	65%	65%
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2017)	4.7%	5%	4.4%
Employment, poverty, and income. Percentage of children under age 18 in poverty (2017)	16%	20%	18%
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2013-2017)	4.3	4.8	4.9
Family and social support. Percentage of children that live in a household headed by single parent (2013-2017)	39%	36%	33%
Family and social support. Number of membership associations per 10,000 population (2016)	13.1	11.2	9.3
Violence. Number of reported violent crime offenses per 100,000 population (2014 & 2016)	185	293	386
Injury. Number of deaths due to injury per 100,000 population (2013-2017)	86	82	67

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

	Sandusky County 2019	Ohio 2019	U.S. 2019
Physical Environment			
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2014)	11.5	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%	18%
Transportation. Percentage of the workforce that drives alone to work (2013-2017)	86%	83%	76%
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2013-2017)	25%	30%	35%

(Source: 2019 County Health Rankings for Sandusky County, Ohio, and U.S. data)
N/A – Not Available

Appendix VIII: Community Stakeholder Perceptions

Sandusky County Community Event **Virtual Release in April/May 2020**

What surprised you the most?

- Increase in suicide attempts among adults and youth (8)
- Increase in obesity rates among adults and youth (8)
- Increase in substance use among adults and youth (7)
- Decrease in overall health perception among adults (4)
- Youth who got alcohol from parents (3)
- Increase in depression rates among adults (3)
- Low representation of minority population(s) among adults (3)
- Bullying rates among youth and children (3)
- Food insecurity rate among youth and children (3)
- Sexual behavior among adults and youth (3)
- Low marijuana usage among adults (2)
- Flu vaccine rates among adults (2)
- Correlation between extra-curricular activities and alcohol use (2)
- Behavioral therapy for autism among children (2)
- Differences in minority health data (2)
- Maternal depression
- Increase in prescription misuse by young adults
- Increase in marijuana use perceptions by youth
- Percentage of youth who do not use alcohol and drugs
- Binge drinking rate among youth
- Average age of smoking among youth
- Need for more dentist among adults
- Gambling problem among adults
- Decrease in tobacco use among adults
- Adults taking medication not prescribed to them
- Stress due to financial/work related issues among adults
- High sugar and caffeinated drinks data among children
- Low number of parents who discussed dangers of drugs and alcohol abuse among children
- Emotional health of mother and father
- Breastfeeding data among adults
- Seatbelt use among youth and children
- Lack of Medicaid among adults
- Strengths of the community
- Lack of transportation
- Healthy food sources
- ACEs among adults and youth

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

- Minority populations data (5)
- Pregnancy rates among adults and youth (3)
- Youth education (2)
- Bike helmet data among children (2)
- Parent involvement in youth life (2)
- Better breakdown of ages 13 and younger (2)
- Oral health data among adults and children (2)
- Screen time usage per day among youth and children (2)
- Sources of health information for both adults and youth (2)
- Correlation between two parent vs. one parent home
- People who sought mental health treatment
- HIV and PREP data among adults
- More comparison to state, national, and international data
- Migrant and seasonal farm worker population data among adults
- Correlation between socio-economic status
- Correlation between race
- More nutrition data among youth
- Car seat usage among children
- More gambling and gaming data among adults
- More vaccination data among children
- More mental health data on children 8-11 years old
- Developmental delay percentages for children 3 and under
- Insurance coverage among adults and children
- Use of birth control among adults and youth
- Expanded information on social disparities

What will you or your organization do with this data?

- Create prevention programming for adults, youth, and children (21)
- Education (9)
- Grant writing and funding (7)
- Shared planning (5)
- Improve mental health resources (3)
- Help families in need (2)
- Present data to youth and parents (2)
- Create and implement CHIP
- Economic development
- Share with board, administrators, and counselors
- Present to students
- Cessation services for youth
- Input findings into community assessment
- Incorporate data into school leadership groups
- Update community health needs strategies and objectives

Based on the community health assessment, what health topics do you see as the most important? Please list 2 or more choices.

- Mental health among adults, youth, and children (37)
- Physical health (diabetes, obesity, high blood pressure) among adults, youth, and children (24)
- Substance abuse (drugs & alcohol) among adults and youth (19)
- Oral health among adults and children (5)
- Vaping/e-cigarettes among youth (5)
- Food insecurity (4)
- ACEs among youth (4)
- Women's health (3)
- Sexual behaviors among adults and youth (3)
- Nutrition/diet among adults and children (3)
- Access to care (2)
- Cultural awareness (2)
- Youth driving behaviors (2)
- Quality of life among adults (2)
- COVID-19
- Transportation
- Language barriers
- Reading among children
- Physician visits among children
- Services for autism among children
- Safe sleep practices among children

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

- Schools (12)
- Health partners/organizations (11)
- Mental health board/agencies (10)
- Faith based (8)
- Minority community leaders (8)
- Local businesses (5)
- Service clubs (4)
- Bellevue Hospital (2)
- Community foundations (2)
- Counseling services (2)
- Parks and recreation departments
- Community college
- Heartbeat of Fremont
- Teen programs
- Law enforcement
- Parents
- Youth groups
- Health department
- Zepf Center
- Daycares
- Psychologists
- Mercy Health
- Family and Children Recovery Services

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

- Finances (15)
- Lack of education/knowledge (14)
- Lack of resources/services (9)
- Stigma (8)
- Access/Cost of care (7)
- Cultural barriers (5)
- Parent guidance/involvement among youth (5)
- Privacy (4)
- Transportation (4)
- Lack of insurance (4)
- Poverty (2)
- Family habits (2)
- Language barriers (2)
- Lack of motivation (2)
- Negative home environment
- Lack of job opportunities
- Peer pressure among youth
- Teen pregnancy
- Drug dependency among youth
- Communication
- Not addressing issues with low rates
- Limited services in rural communities
- Lack of parenting skills
- Generational trauma
- Need more input from community about potential programming

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

- Social media (35)
- Schools (10)
- Newsletter/Press release (8)
- Radio (6)
- Faith based (5)
- Forums (4)
- Social/community events (4)
- News (3)
- Email (3)
- Webinar (3)
- Parent groups (2)
- Health fairs (2)
- PSA
- Billboards
- Youth programs
- Health education
- Sporting events
- Minority community meetings
- Healthcare providers
- Civic groups
- Children programs
- Community leaders