

DRAFT



Community Health Needs Assessment 2016

Supported by Mercer Health.

Written in partnership with Illuminology and the Center for Public Health Practice
at Ohio State University's College of Public Health.



Overview

Mercer Health is pleased to provide its 2016 Community Health Needs Assessment. This report is the result of an effort intended to help Mercer Health and community stakeholders better understand the health needs and priorities of Mercer County residents.

Characterizing and understanding the prevalence of acute and chronic health conditions, access to care barriers, health disparities, and other health issues can help direct community resources to where they will have the biggest impact. To that end, Mercer Health will use the data reported in its 2016 Community Health Needs Assessment, in collaboration with community stakeholders, to track health outcomes over time and to inform the development and implementation of strategic plans that meet the community's health needs.

We hope this report serves as a guide to target and prioritize limited resources, a vehicle for strengthening community relationships, and a source of information that contributes to keeping people healthy.

About The Community Health Needs Assessment Process

The process followed by the 2016 Community Health Needs Assessment reflected an adapted version of Robert Wood Johnson Foundation's County Health Rankings and Roadmaps: Assess Needs and Resources process.¹ This process is designed to help stakeholders "understand current community strengths, resources, needs, and gaps," so that they can better focus their efforts and collaboration.

Mercer Health contracted with Illuminology, a central Ohio-based research firm, and the Center for Public Health Practice, within The Ohio State University College of Public Health, to assist with this work. The primary phases of the Assess Needs and Resources process, as adapted for use in Mercer County, included the following steps.

(1) Prepare to assess / Generate questions. A working group of Mercer Health employees and community partners, representing diverse areas of expertise and service to the community, discussed a wide range of potential indicators for possible inclusion in its 2016 Community Health Needs Assessment. The questions for the primary data collection survey were also generated by this group.

(2) Collect secondary data. Secondary data for this health assessment came from national sources (e.g., U.S. Department of Health and Human Services: Healthy People 2020; U.S.

¹ See <http://www.countyhealthrankings.org/roadmaps/action-center/assess-needs-resources>.

Census Bureau), state sources (e.g., Ohio Department of Health's Data Warehouse), and local sources (e.g., Mercer Health). Rates and/or percentages were calculated when necessary. All data sources are identified in the References section at the end of the report.

To ensure community stakeholders are able to use this report to make well-informed decisions, only the most recent data available at the time of report preparation are presented. To be considered for inclusion in the [2016 Community Health Needs Assessment](#), secondary data for the health indicators must have been collected or published in 2011 or later.

(3) Collect primary data. Primary data for this health assessment came from the 2016 Mercer County Health Survey, a representative survey of Mercer County adult residents, who represent the primary population served by Mercer Health. Fielded in multiple waves from May 9, 2016 through June 10, 2016, the questionnaire could be completed via Internet or by mail (see Appendix A for a hard-copy version).

A total of 2,500 addresses were randomly selected from the universe of residential addresses in Mercer County. A notification letter was sent to each of these households asking the adult in the household who most recently had a birthday to complete the survey online. Approximately 14 days after the initial mailing, a hard copy of the survey was sent to households that had not yet completed the survey online. Each mailing included a cover letter and a Business Reply Mail envelope so respondents could complete the survey and mail it back at no cost to them.

In total, 492 residents completed the survey, representing 20% of the total number of valid addresses (i.e., addresses that were not vacant or otherwise able to be surveyed) that were invited to participate. With a random sample of this size, the margin of error is $\pm 4.4\%$ at the 95% confidence level.

(4) Analyze the data. Before analyzing responses to the 2016 Mercer County Health Survey, the data were weighted. The survey weights were created in two steps. First, a base weight was created, which adjusted for unequal probabilities of selection into the survey (i.e., compensating for the number of adults in the household). Then, the base weight was adjusted so that respondents' demographic characteristics (i.e., age, gender, educational attainment, household income, and children under 18 years old in the household) aligned with population benchmarks for Mercer County. Population benchmarks were obtained from the most recent data available from the U.S. Census Bureau's American Community Survey

(i.e., 2014 5-year estimates). This adjusted base weight was calculated via an iterative proportional fitting procedure within the STATA v14 software package. Analyses of weighted data were conducted using complex survey [svy] commands within STATA v14.

(5) Prioritize the results and begin strategic planning. Representatives from Mercer Health, the Mercer County-Celina City Health Department, and other community stakeholders participated in a group session that identified the priority health issues facing Mercer County residents and outlined the key elements of a strategic plan to address these issues. More information about this prioritization and planning session and its results can be found in Appendix B.

(6) Share results with the community. This report presents the analysis and synthesis of both the secondary and primary data collected during this effort. This report will be posted on Mercer Health's website and widely distributed to organizations that serve and represent Mercer County residents.

How To Read This Report

As shown on the next page, Mercer Health's 2016 Community Health Needs Assessment is organized into multiple, distinct sections. Each section begins with a sentence that briefly describes the section, and is then followed by a "call-out box" that highlights and summarizes the key findings of the data compilation and analysis, from the researchers' perspectives. For some indicators, the related U.S. Department of Health and Human Services Healthy People 2020 goals are included with Mercer County's status indicated as "met" or "not met."

Readers who are interested in understanding how key health indicators have changed over time should consult the Comparison of Key Health Indicators Over Time section, located at the end of this report. That section presents the results of a comparison of data from Mercer Health's 2012 Community Health Needs Assessment to the data reported here.

Sources for all secondary data included in this document are marked by an endnote and described in the report's References section. The reader is cautioned against drawing strong conclusions when secondary data are sparse (e.g., counts less than 10). Primary data (i.e., from the 2016 Mercer County Health Survey) are marked throughout the report with the following endnote symbol: §.

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Community Profile

This section describes the demographic and household characteristics of Mercer County's population.

Residents¹

		Mercer County	Ohio	United States
Total Population	Total population	40,789	11,560,380	314,107,084
Gender	Male	50.1%	48.9%	49.2%
	Female	49.9%	51.1%	50.8%
Age	Under 5 years	6.7%	6.1%	6.4%
	5-17 years	18.9%	17.1%	17.1%
	18-64 years	58.2%	62.1%	62.8%
	65 years and over	16.0%	14.7%	13.7%
Race	White	97.5%	82.6%	73.8%
	Black or African American	0.4%	12.2%	12.6%
	American Indian/Alaska Native	0.1%	0.2%	0.8%
	Asian	0.3%	1.8%	5.0%
	Native Hawaiian/Pacific Islander	0.5%	0.03%	0.2%
	Other	0.3%	0.8%	4.7%
	Two or more races	0.8%	2.4%	2.9%
Ethnicity	Hispanic or Latino	1.6%	3.3%	16.9%
	Not Hispanic or Latino	98.4%	96.7%	83.1%
Marital Status	Never married	23.8%	31.1%	32.5%
	Now married (except separated)	58.7%	48.5%	48.4%
	Divorced or separated	9.7%	13.9%	13.1%
	Widowed	7.7%	6.5%	5.9%
Veterans	Civilian veterans	9.3%	9.4%	8.7%
Disability Status	Total with a disability	11.1%	13.5%	12.3%
	< 18 Years	2.6%	4.9%	4.1%
	18 to 64 Years	9.0%	11.6%	10.2%
	65 Years and over	33.4%	35.7%	36.3%

Note: above percentages may not sum to 100% due to rounding.

Households¹

		Mercer County	Ohio	United States
Total Households	Number of households	15,923	4,570,015	116,211,092
Household Type	Family households	70.0%	64.4%	66.2%
	Nonfamily households	30.0%	35.6%	33.8%
Household Size	Average household size	2.53	2.46	2.63
	Average family size	3.05	3.06	3.23
Grandparents as Caregivers	Grandparents responsible for own grandchildren (<18 years)	55.1%	46.1%	38.0%

A statistical portrait of the 492 respondents who completed the Mercer County Health Survey is shown in the table below.

Mercer County Health Survey Respondents⁵

Gender	Male	49%
	Female	51%
Age	18-34	25%
	35-44	16%
	45-54	19%
	55-64	18%
	65+	22%
Education	High school diploma / GED or less	57%
	Associate's degree / some college	28%
	Bachelor's degree or more	15%
Household Income	Less than \$24,999	21%
	\$25,000 - \$49,999	27%
	\$50,000 - \$74,999	21%
	\$75,000 - \$99,999	16%
	\$100,000 or more	15%
Children Under 18 In Household	0 children	69%
	1-2 children	21%
	3 or more children	10%

Note: above percentages may not sum to 100% due to rounding error.

Social Determinants Of Health

This section describes situational and socioeconomic factors that can affect the health of Mercer County residents.

Health Care Access Indicators

Key Findings - Health Care Access Indicators

Most Mercer County residents currently have health insurance, with over two-thirds receiving private, employment based health coverage. However, Mercer County does not currently meet the national Healthy People 2020 goal for 100% of residents under age 65 to have health insurance.

This section reports the population’s access to medical insurance and health care. Most Mercer County residents have health insurance coverage, especially those under age 18. Note: these data were collected prior to the full implementation of the Affordable Care Act.

Health Insurance¹

	Mercer County	Ohio	United States
Total with insurance	92.0%	89.1%	85.8%
With Health Insurance			
Private health insurance	79.1%	69.3%	65.8%
Public health coverage	27.0%	32.1%	31.1%
Under 65 years	90.6%	87.4%	83.7%
Under 18 years	94.6%	94.7%	92.9%
Age 18-64	88.8%	84.7%	80.2%

Healthy People 2020 Goal

How does Mercer County match up with national objectives? As part of its *Healthy People 2020* initiative, the Department of Health and Human Services set a goal that 100% of Americans under age 65 would have health insurance by the year 2020. Currently, Mercer County does not achieve this target.

% with medical insurance (< age 65)

HP2020 target...	100%
Mercer County...	90.6%
HP2020 Status:	X (not met)

Among Mercer County residents with health insurance, employment-based insurance was the most common. Note that residents with health insurance could have more than one type of insurance. For example, someone with “Direct-Purchase Insurance” may also have “Medicare coverage.”

Type Of Health Insurance In Mercer County¹

		Mercer County	Ohio	United States
Private Health Insurance Coverage	Total with private health insurance	79.1%	69.3%	65.8%
	Employment-based health insurance	67.9%	60.5%	54.7%
	Direct-purchase health insurance	14.2%	11.1%	12.4%
Public Health Insurance Coverage	Total with public health insurance	27.0%	32.1%	31.1%
	Medicare coverage	17.0%	16.5%	15.5%
	Medicaid/means-tested public coverage	11.4%	17.3%	17.8%

The ratio of Mercer County physicians (both MDs and DOs) is 1 to every 833 Mercer County residents. This rate is much higher than the ratio of dentists, which is 1 per 2,722 residents.

Licensed Practitioners²

	Mercer County		Ohio	
	Count	Ratio*	Count	Ratio*
Dentists	15	1:2,722	7,322	1:1,583
Physicians: MDs & DOs	49	1:833	46,285	1:251

**Ratio per population*

Education, Income, Employment, And Poverty Indicators

This section describes socioeconomic factors that can affect health.

Key Findings - Education, Income, Employment, And Poverty Indicators

Over half of adult residents in Mercer County have a high school education or less. Rates of families and those under the age of 18 who fall below the federal poverty level are lower in Mercer County compared to Ohio and the U.S. Still, a fifth of children in Mercer County are classified as food insecure. Unemployment is lower than the Ohio and U.S. average.

As shown in the table below, 16% of Mercer County adult residents have a Bachelor's degree or higher; another 27.1% have an Associate's degree or "some college" (no degree).

Education Indicators¹

		Mercer County	Ohio	United States
Educational Attainment	No high school	2.1%	3.2%	5.8%
	Some high school/no diploma	6.7%	8.0%	7.8%
	High school graduate	48.3%	34.5%	28.0%
	Some college/no degree	16.9%	20.7%	21.2%
	Associate's degree	10.2%	8.1%	7.9%
	Bachelor's degree	10.1%	16.1%	18.3%
	Graduate/professional degree	5.9%	9.5%	11.0%

In Mercer County, 10% of children are below the 100% federal poverty level (FPL), more than ten percentage points lower than the rates of Ohio and the United States.

Income And Poverty¹

		Mercer County	Ohio	United States
Household Income	Per capita income	\$24,362	\$26,520	\$28,555
	Median household income	\$52,033	\$48,849	\$53,482
	Mean household income	\$62,314	\$65,491	\$74,596
Poverty Status of Families	< 100% FPL	6.2%	11.7%	11.5%
	100% - 199% FPL	16.0%	15.7%	16.4%
	At or above 200% FPL	77.8%	72.6%	72.2%
Poverty Status of Those < 18 Years Old	Below 100% FPL	10.0%	23.1%	21.9%
	100% - 199% FPL	23.5%	21.3%	22.3%
	At or above 200% FPL	66.5%	55.7%	55.8%

The ability to access nutritious food can also affect health. Food insecurity is defined by the United States Department of Agriculture as a lack of access to enough food for an active, healthy life and a limited availability of nutritionally adequate foods. In Mercer County, 11.5% of all residents are food insecure; however, one in five children in Mercer County are estimated to be food insecure.

Food Access

		Mercer County	Ohio	United States
Food Insecure Households³	Total residents	11.5%	16.9%	15.8%
	Children	20.0%	24.2%	21.4%
Total households		8.4%	15.0%	13.0%
Food Stamp Households¹	With one or more people 60 years and over	21.5%	24.9%	26.8%
	With children under 18 years	54.9%	50.7%	54.6%
Low income not living near grocery store⁴		2.0%	5.9%	5.7%

As shown below, Mercer County's 2014 unemployment rate (3.8%) is lower than that for Ohio (5.7%) and the United States (6.2%).

Employment Status⁵

		Mercer County	Ohio	United States
Employment Rate Of Civilian Labor Force	Employed	96.2%	94.3%	93.8%
	Unemployed	3.8%	5.7%	6.2%

Other Indicators

This section describes other factors that can affect health.

Key Findings - Other Indicators

Rates of violent crime and property crime are relatively low in Mercer County. Residents say cancer is the most important health problem in Mercer County, followed by drug abuse, heart disease, and obesity.

A “family household” includes two or more people related by birth, marriage, or adoption who live in the same dwelling; in Mercer County, 70% of households are considered family ones.

Household Type¹

	Mercer County	Ohio	United States
Family households	70.0%	64.4%	66.2%
Married-couple (family)	58.1%	47.1%	48.4%
Male householder, no wife present (family)	4.3%	4.4%	4.8%
Female householder, no husband present (family)	7.6%	12.9%	13.0%
Nonfamily households	30.0%	35.6%	33.8%

Other Household Types¹

	Mercer County	Ohio	United States
Household with own children under 18	28.8%	27.5%	29.2%
Householder living alone	25.6%	29.8%	27.6%
65 years of age and older	13.1%	11.0%	10.0%

Recent statistics regarding violent and property crimes in Mercer County are shown below.

Crime And Safety

	Mercer County ⁶		Ohio ⁷		United States ⁷	
	Count	Rate*	Count	Rate*	Count	Rate*
Violent crime	22	0.5	33,030	2.8	1,197,987	3.8
Property crime	602	14.8	324,528	28.0	8,277,829	26.0

*Rate per 1,000 population

Perceived Health Problems

This section describes the responses of Mercer County adults to an open-ended question that asked them to identify the most important health problem in the county.

Key Findings - Perceived Health Problems

Over half of Mercer County residents view cancer as the most important problem affecting the health of people who live in this county, and nearly a quarter view drug abuse as the most important problem.

Respondents to the 2016 Mercer County Health Survey reported what they believe to be the most important health problems affecting Mercer County residents. Substantive responses from 414 individuals were coded by a researcher and grouped into categories. The most frequently mentioned problem was cancer, listed by over half (54%) of respondents. Other important health problems were drug abuse, cardiovascular problems, and obesity.

Most Important Health Problems^s

	n=414
Cancer	53.9%
Drug abuse	23.4%
Cardiovascular disease / problems	13.8%
Obesity / weight problems	12.6%
Alcohol	7.0%
Diabetes	3.4%
Mental health	3.1%
Neurodegenerative disease and stroke	2.9%
Lack of health care services / resources / access	2.7%
Diet / lack of exercise	2.2%
Cost	1.7%
Other	6.5%

Multiple responses were accepted, so the total percentage will be greater than 100%.

Note: percentages are unweighted.

Behavioral Risk Factors

This section describes behaviors of Mercer County adults that affect their health.

Key Findings - Behavioral Risk Factors

While 13% of Mercer County residents are currently smokers, over 40% report binge drinking in the past month. Although reported illegal and prescription drug use rates are low, five unintentional drug overdose deaths were recorded in 2014 in Mercer County. Finally, over a third of Mercer County residents are considered obese.

About 13% of Mercer County adults report they are currently smokers, and about 15% Mercer County adults report recently using some form of tobacco (e.g., cigarettes, chewing tobacco, snuff, or snus). Regarding alcohol use, 42% of Mercer County adults identify themselves as binge drinkers (i.e., five or more drinks on one occasion in the past month for men; four or more drinks on one occasion in the past month for women).

Tobacco And Alcohol Use[§]

		Mercer County
Cigarette Use	Current smokers	12.9%
Tobacco Use	Current users of chewing tobacco, snuff or snus	5.8%
Cigarette and/or Tobacco Use	Current users of cigarettes, chewing tobacco, snuff and/or snus	14.7%
Drinking	Binge drinkers	41.6%

Healthy People 2020 Goal

How does Mercer County match up with national objectives? As part of its *Healthy People 2020* initiative, the Department of Health and Human Services set a goal that the percent of adults who are current smokers would decrease to 12.0% by the year 2020. Currently, Mercer County does not achieve this target.

% of adults who are current cigarette smokers

HP2020 target... 12.0%

Mercer County... 12.9%

HP2020 Status: ✘
(not met)

Healthy People 2020 Goal

How does Mercer County match up with national objectives? As part of its *Healthy People 2020* initiative, the Department of Health and Human Services set a goal that the percent of adults who binge drink in the previous month would decrease to 24.4% by the year 2020. Currently, Mercer County does not achieve this target, as data suggest 41.6% of adults binge drank in the previous month.

% of adults who binge drank in past 30 days

HP2020 target... 24.4%

Mercer County... 41.6%

HP2020 Status: ✘
(not met)

With regard to drug use, 2% of survey respondents reported using prescription medication that was not prescribed to them or taking more than prescribed to feel good, high, more active, or alert. Less than 1% of respondents admitted to using marijuana, methamphetamines, or bath salts in the past six months.¹

Drug Use During The Past Six Months^s

	Mercer County
Used prescription medication not prescribed or took more than prescribed to feel good, high, more active or alert	2.1%
Marijuana or hashish	0.8%
Amphetamines, methamphetamines, or speed	0.1%
Bath salts	0.2%
Heroin	0%
LSD, mescaline, peyote, psilocybin, DMT, or mushrooms	0%
Inhalants such as glue, toluene gasoline, or paint	0%
Ecstasy or E	0%
Cocaine, crack, or coca leaves	0%

Five unintentional overdose deaths were recorded in 2014. Of course, these statistics do not indicate the overall prevalence of illicit drug use or abuse among adults in Mercer County;

¹ Because this survey was not anonymous, social desirability factors or fears of criminal prosecution may have influenced some respondents to not answer these drug use questions honestly. As such, the survey estimates may underestimate the actual level of drug use in Mercer County, and should be interpreted with caution.

rather, they only measure the extent to which such use results in death. Because rates calculated based on counts of less than ten may be unreliable, such rates are not presented.

Drug Mortality And Convictions

	Mercer County		Ohio		United States	
	Count	Rate*	Count	Rate*	Count	Rate*
Unintentional drug poisonings ^{1,2}	5	N/A	2,482	21.4	35,663	11.3
Drug convictions ³	98	240	34,684	300.3	N/A	N/A

*Rate per 100,000 population

N/A = not available or unreliable due to small number of cases

Body mass index was calculated from weight and height provided by survey participants. In Mercer County, two-thirds of residents (67%) are overweight or obese.

Body Mass Index[§]

	Mercer County
Underweight (BMI < 18.5)	1.2%
Normal weight (BMI = 18.5 - 24.9)	31.6%
Overweight (BMI= 25 - 29.9)	28.8%
Obese (BMI > 29.9)	38.4%

Healthy People 2020 Goal

How does Mercer County match up with national objectives? As part of its *Healthy People 2020* initiative, the Department of Health and Human Services set a goal that the percent of adults who are obese would decrease to 30.5% by the year 2020. Currently, Mercer County does not achieve this target.

% of adults who are obese

HP2020 target... 30.5%

Mercer County... 38.4%

HP2020 Status: ✗
(not met)

Demographic differences observed (2016 Mercer County Health Survey)

Additional analyses were conducted on the data obtained from the 2016 Mercer County Health Survey, looking for the presence of statistically significant differences in the responses across various demographic groups (i.e., age, gender, household income, educational attainment, and children in the household). The following patterns were observed:

Binge drinking

- Males were more likely than females to report binge drinking at least once in the past month (47% and 37%, respectively).
- Individuals with household incomes of \$25,000 or more were more likely than those with household incomes less than \$25,000 to report binge drinking at least once in the past month (49% and 14%, respectively)
- Individuals 65 and older were less likely than those under age 65 to report binge drinking at least once in the past month (16% and 48%, respectively).
- Finally, individuals age 35-44 were more likely than those of other ages to report binge drinking at least once in the past month (59% and 38%, respectively). Many of those aged 18-34 also reported binge drinking at least once in the past month (52%)

Wellness Care

This section describes early disease detection practices among Mercer County residents.

Key Findings - Wellness Care

Many Mercer County adult female residents engage in wellness care behaviors appropriate for their age. For example, over three-fourths of women had a Pap test in the past three years, and over two-thirds of women received a mammogram in the past two years.

Specific to women, over 80% have had a cervical cancer screening (pap smear) within the past three years and over two-thirds have had a breast cancer screening (mammogram) within the past two years. Specific to men, 41% have had a PSA test to screen for prostate cancer in the past two years.

Wellness Care Behaviors^s

		Mercer County
Cervical Cancer Screening	Pap smear within past three years (women aged 21-65)	76.9%
Breast Cancer Screening	Mammogram within past two years (women aged 40+)	69.8%
Prostate Cancer Screening	PSA test within past two years (men aged 40+)	41.4%

Some of the survey participants also answered questions about recent colorectal cancer screening. Specifically, online survey participants were asked whether they had ever had a sigmoidoscopy or colonoscopy, and for those who had, how long ago they had one of these tests performed. Overall, 47.4% of adults aged 50-75 reported receiving one of these tests in the past 10 years. (Because of space limitations on the hard copy of the survey, only those who answered the online version of the survey were asked these colorectal cancer screening questions. As such, these colorectal cancer screening estimates should be interpreted with caution.)

Maternal And Child Health

Health issues facing mothers and their children in Mercer County are described in this section.

Key Findings - Maternal And Child Health

In Mercer County, about 7.4% of infants are born preterm, or before 37 weeks gestation, meeting the national target of 11.4% (Healthy People 2020). In addition, less than 4% are low birth weight babies. Among children and adolescents in Mercer County, about 60% are of a normal weight, and 10% are considered obese.

Rates of pregnancies and live births among 18-19 year olds in Mercer County are slightly higher than Ohio rates. Among all live births, 3.6% are considered low birth weight and 7.4% are born before 37 weeks gestation, both lower percentages than Ohio overall. Because rates calculated based on counts of less than ten may be unreliable, such rates are not presented.

Maternal And Child Health

		Mercer County		Ohio		United States	
		Count	Rate	Count	Rate	Count	Rate
Infant Mortality Rate^{1,2}		1	N/A	1,024	7.4	N/A	5.96
Adolescent Pregnancies^{3,4}	10-14 years*	0	N/A	192.7	0.5	N/A	N/A
	15-17 years*	8.3	N/A	3,582.3	15.8	N/A	N/A
	18-19 years*	32.3	72.6	9,746.4	64.7	N/A	N/A
Adolescent Live Births^{2,3}	10-14 years*	N/A	N/A	90	0.2	2,771	0.3
	15-17 years*	6	N/A	2,295	10.1	66,788	10.9
	18-19 years*	26	58.4	6,747	44.8	182,279	43.8
		Count	Rate	Count	Percent	Count	Percent
Low Birth Weight^{2,3}	Low birth weight babies (<2500 grams)	20	3.6%	11,806	8.5%	316,597	8.1%
Preterm Birth Rate^{2,3}	Preterm births (<37 weeks)	41	7.4%	17,062	12.2%	447,361	11.4%

*Rate per 1,000 females in same age group N/A = 0, not available, or unreliable due to small number of cases


Healthy People 2020 Goal

How does Mercer County match up with national objectives? The Healthy People 2020 goal is for only 11.4% of all live births to occur before 37 weeks gestation by the year 2020. Currently, Mercer County achieves this target, as 7.4% of live births are considered preterm.

Total preterm live births

HP2020 target... 11.4%

Mercer County... 7.4%

HP2020 Status: 
(met)

Survey respondents entered the age, gender, weight, and height of the three oldest children living in their household between the ages of 2 and 18. Based on this information, body mass index was calculated for a total of 229 children. In Mercer County, the majority of children are a “normal weight,” 17.5% are overweight, and 10% are considered obese.

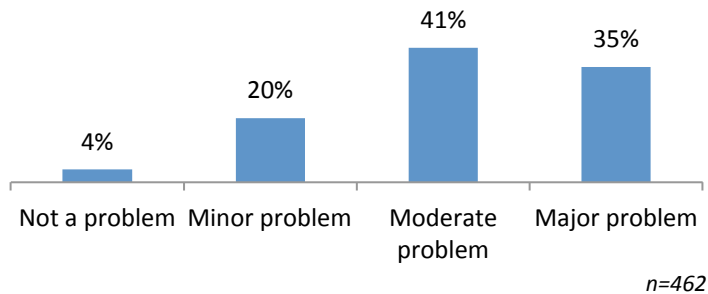
Body Mass Index Of Children^s

	Mercer County
Underweight	11.8%
Normal weight	60.3%
Overweight	17.5%
Obese	10.4%

Survey respondents also reported the extent to which they believed four issues (related to children’s exposure to and use of alcohol) were a problem in Mercer County. Graphs displaying how Mercer County perceive each of these issues as a problem in Mercer County are shown on the next two pages.

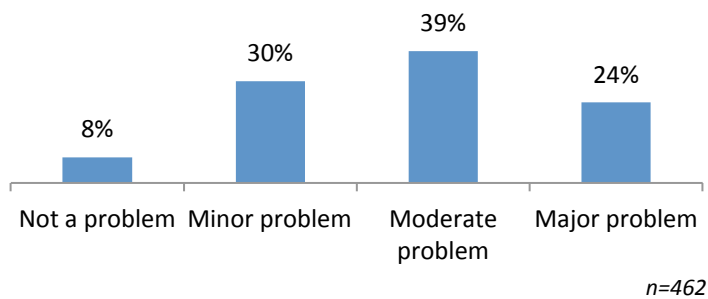
Three-fourths believed children under age 17 drinking alcohol was a “moderate” or “major problem.”

Children Drinking Alcohol[§]



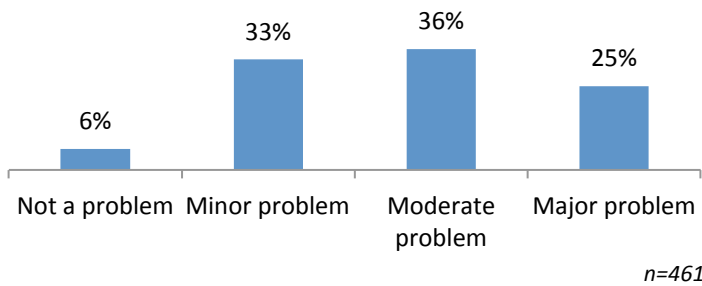
When asked about children drinking and driving, nearly a quarter (24%) said children under age 17 drinking alcohol and driving was a “major problem.”

Children Drinking Alcohol And Driving[§]



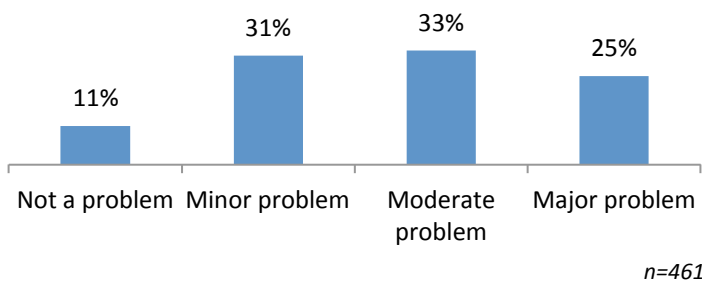
Similarly, one-quarter thought adults drinking alcohol and then driving children somewhere was a "major problem."

Adults Drinking Alcohol And Driving Children^s



Finally, one-quarter believed adults allowing children to drink alcohol in their homes was a "major problem."

Adults Allowing Children To Drink Alcohol^s



Mental And Social Health

This section describes issues associated with the mental and social health of Mercer County residents.

Key Findings - Mental And Social Health

Mercer County residents report a number of factors that may affect their mental and social health. For example, over a quarter say poor physical or mental health kept them from doing usual activities at least once in the past 30 days. Although most residents feel they typically get the social and emotional support they need, a small percentage do not. Mercer County's homicide rate meets the Healthy People 2020 national goal.

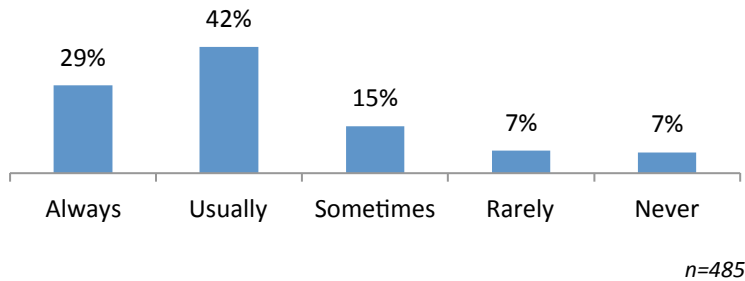
In the past 30 days, nearly half of Mercer County residents said they had at least one day during which their mental health was not good, and 42% said they had at least one day during which their physical health was poor. Over a quarter of residents say poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation, at least one day in the past month. Finally, 10% said they felt sad enough for two weeks in a row (in the past year) that they stopped doing their usual activities.

Recent Days Of Poor Mental And Physical Health^s

			Mercer County
Days in which resident had poor mental health	% reporting at least one day like this in the past 30		48.0%
	Average # of days like this in the past 30		5.2
Days in which resident had poor physical health	% reporting at least one day like this in the past 30		41.6%
	Average # of days like this in the past 30		4.7
Days in which poor physical or mental health kept resident from doing usual activities, such as self-care, work, or recreation	% reporting at least one day like this in the past 30		28.5%
	Average # of days like this in the past 30		3.1
Stopped doing usual activities because felt sad or hopeless	% felt sad enough for two weeks that stopped usual activities in the past year		9.8%

Over two-thirds (71%) of Mercer County residents say they "always" or "usually" get the social or emotional support they need. Fourteen percent of Mercer County residents say they "rarely" or "never" get this support.

How Often Residents Get Social Or Emotional Support They Need[§]



The table below shows reported cases of suicide, murder, domestic violence, and child abuse in Mercer County in recent years. Because rates calculated based on counts of less than ten may be unreliable, such rates are not shown.

Mental And Social Health Indicators

		Mercer County		Ohio		United States	
		Count	Rate	Count	Rate	Count	Rate
Suicides	Suicides	5 ¹	N/A	4,446 ²	13.5**	118,461 ²	13.2**
Homicides	Homicides	0 ³	0.0	648.0 ²	5.9	16,121 ²	5.2
Domestic violence	Domestic violence incidents	196 ⁴	N/A	64,531 ⁴	N/A	1,411,330 ⁵	N/A
Child abuse cases	Physical abuse	66 ⁶	N/A	11,901 ⁷	N/A	122,159 ⁷	N/A

** Rate per 100,000 population, age-adjusted

N/A = not available or unreliable due to small number of cases


Healthy People 2020 Goal

How does Mercer County match up with national objectives? As part of its Healthy People 2020 initiative, the Department of Health and Human Services aims for the homicide rate in the U.S. to decrease to 5.5 per 100,000. Currently, Mercer County achieves this target.

Homicide rate

HP2020 target... 5.5

Mercer County... <1

HP2020 Status: 
(met)

Demographic differences observed (2016 Mercer County Health Survey)

Additional analyses were conducted on the data obtained from the 2016 Mercer County Health Survey, looking for the presence of statistically significant differences in the responses across various demographic groups (i.e., age, gender, household income, educational attainment, and children in the household). The following patterns were observed:

Days in which resident had poor physical health

- Those with household incomes less than \$25,000 had nearly four times days like this, on average, as compared to those with household incomes of \$25,000 or more (11.1 and 3.0 days, respectively).

Days in which resident had poor mental health

- Those with household incomes less than \$25,000 had nearly four times more days like this, on average, as compared to those with household incomes of \$25,000 or more (13.0 and 3.7 days, respectively).

Days in which poor physical or mental health kept resident from doing usual activities, such as self-care, work, or recreation

- Those with household incomes less than \$25,000 had more than five times more days like this, on average, as compared to those with household incomes of \$25,000 or more (9.0 and 1.6 days, respectively).

How often get the social and emotional support needed

- Females were more likely to say they “usually” or “always” get the social and emotional support they need, as compared to males (75% and 66%, respectively).
- Those with household incomes of \$75,000 and above were more likely to say they “usually” or “always” get the social and emotional support they need, as compared to those with household incomes less than \$75,000 (80% and 65%, respectively).

Death, Illness, And Injury

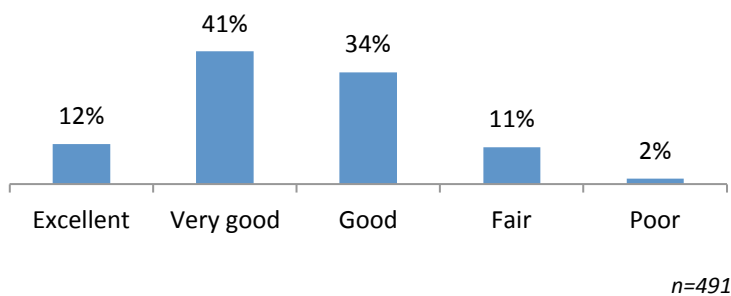
This section describes leading causes of death, illness, and injury among the residents of Mercer County.

Key Findings - Death, Illness, And Injury

Just over half of Mercer County Health Survey respondents consider themselves to be in “very good” or “excellent” health. The leading causes of death in Mercer County are heart attack, lung or bronchial cancer, and heart disease - the rate of death by heart attack, in particular, is well above the rate calculated for Ohio and the United States. The rate of prostate cancer also suggests this is more prevalent in Mercer County than in Ohio or the United States. Over a third of Mercer County residents have been diagnosed with high blood pressure, and 29% have been diagnosed with arthritis.

As shown below, the majority of Mercer County residents (87%) report their overall health is “good,” “very good,” or “excellent.”

Perceptions Of Health Status[§]



The leading causes for hospitalization at Mercer Health are shown in the table on the following page.

Leading Causes Of Hospitalizations (Mercer County)¹

	Count	Rate*
Chest pain	194	4.8
Pneumonia, organism	82	2.0
Atrial fibrillation	56	1.4
Syncope and collapse	52	1.3
Urinary tract infection	46	1.1
Obstructive chronic bronchitis with acute exacerbation	38	0.9
Noninfectious gastroenteritis	36	0.9
Osteoarthritis, leg	32	0.8
Dehydration	30	0.7
Cerebral artery occlusion, unspecified with cerebral infarction (stroke)	29	0.7

*Rate per 100,000 population

The eight leading causes of death in Mercer County are shown below. Heart attack (myocardial infarction), and lung cancer are the top causes of death, followed by heart disease and dementia. Because rates calculated based on counts of less than ten may be unreliable, such rates are not presented.

Mortality - Leading Causes²

	Mercer County		Ohio		United States	
	Count	Rate*	Count	Rate*	Count	Rate*
Myocardial infarction	75	130.9	5,208	36.5	116,644	32.4
Lung or bronchial cancer	29	51.3	7,234	51.1	155,381	43.1
Atherosclerotic heart disease	28	47.7	7,753	53.9	165,029	45.9
Dementia	20	31.3	6,255	42.6	129,215	35.6
Chronic obstructive pulmonary disease	15	N/A	4,978	35.3	107,614	30.3
Stroke	13	N/A	2,811	19.5	65,713	18.3
Breast cancer	10	N/A	1,796	12.8	41,313	11.6
Alzheimer's	10	N/A	3,692	25.3	82,348	22.9

*Rate per 100,000 population, age-adjusted N/A = not available or unreliable due to small number of cases

Considering cancer incidence, prostate and breast cancers have the highest incidence rate in Mercer County, followed by lung and bronchus, and colon and rectum cancers.

Cancer Incidence Rates - Top Cancers

	Mercer County ³		Ohio ⁴		United States ⁴	
	Count	Rate*	Count	Rate*	Count	Rate*
Prostate	38	145.1	6,988	105.4	178,764	105.1
Breast	29	60.4	8,786	65.4	225,801	122.1
Lung and bronchus	27	50.1	9,463	68.2	212,493	60.4
Colon and rectum	25	49.7	5,496	40.0	135,866	38.9
Other sites/types	17	35.4	4,861	36.0	N/A	N/A
Melanoma of skin	12	21.0	3,022	21.8	70,554	20.2

*Rate per 100,000 population, age-adjusted. Rates are sex specific for cancers of the breast and prostate.

N/A = not available

With regard to chronic health conditions, 38% of adult Mercer County residents have at some point been told that they have high blood pressure, and 29% have been told that they have high blood cholesterol. In addition, 29% of Mercer County residents have been diagnosed with arthritis.

Diagnoses Of Chronic Health Conditions[§]

	Mercer County
High blood pressure	37.8%
High blood cholesterol	28.8%
Arthritis	28.7%
Diabetes	11.8%
Any type of cancer	10.2%
Asthma	6.0%

The most common infectious disease diagnosis in Mercer County is chlamydia. With much lower incidence rates, the next most common infectious diseases in the county are influenza and cryptosporidiosis. Because rates calculated based on counts of less than ten may be unreliable, such rates are not presented.

Incidence Of Infectious Disease

	Mercer County ^{5,6}		Ohio ^{5,6}		United States ⁷	
	Cases	Rate*	Cases	Rate*	Cases	Rate*
Chlamydia	80	196.2	54,332	469.6	1,401,906	443.0
Influenza associated hospitalization	21	51.5	7,506	64.9	N/A	N/A
Cryptosporidiosis	13	31.9	324	2.8	9,056	2.9
Salmonellosis	8	N/A	1,199	10.4	50,634	16.0
Gonorrhea	8	N/A	16,667	144.2	333,004	105.2
Varicella	6	N/A	535	4.6	11,362	3.6
Streptococcus pneumonia (INV, drug susceptible)	5	N/A	710	6.1	17,193	5.4

*Rate per 100,000 population N/A = not available or unreliable due to small number of cases

Demographic differences observed (2016 Mercer County Health Survey)

Additional analyses were conducted on the data obtained from the 2016 Mercer County Health Survey, looking for the presence of statistically significant differences in the responses across various demographic groups (i.e., age, gender, household income, educational attainment, and children in the household). The following patterns were observed:

Perceptions of health status

- Those with household incomes less than \$25,000 were less likely to say their general health was very good or excellent compared to those with household incomes of \$25,000 or more (37% and 57%, respectively).
- Individuals between the ages of 18 and 34 were more likely than those 35 and older to say their health was very good or excellent (71% and 47%, respectively).
- Individuals between the ages of 55 and 64 were less likely than those of all other age groups to say their health was very good or excellent (34% vs. 57% respectively).
- Those with some college or an associate’s degree were more likely to say their health was very good or excellent (74%), as compared to all other education levels (45%).

Adult diagnoses









- Those with a household income of less than \$50,000 were more likely than those with a household income of at least \$50,000 to have been diagnosed with arthritis (45% and 14%, respectively).

- Those age 55 and older were more likely than those younger than 55 to have been diagnosed with arthritis (54% and 12%, respectively).
- The likelihood of being diagnosed with high blood pressure increases with age, with those 55 years of age or older being more likely than those younger than 55 to have at some point been told that they have high blood pressure (61% vs. 22%).
- Individuals 45 years of age or older were more likely to have been told that they have high blood cholesterol levels (41%) than were individuals younger than 45 (11%).

Comparison Of Key Health Indicators Over Time

This section of this report presents an overview of changes in key health indicators over time in Mercer County, comparing data from Mercer Health's 2012 Community Health Needs Assessment to the data reported in this document. Health indicators were included in this section if (1) they were identified as priority health issues in Mercer County's previous Community Health Improvement Plan or (2) they were identified as one of the "top health priorities", either for Ohio generally or for northwest Ohio more specifically, by the regional stakeholders who participated in the creation of Ohio's Draft 2016 State Health Assessment (<http://www.healthpolicyohio.org/sha-ship/>).

Progress Over Time Key:  Improving¹  Little or no detectable change²  Getting worse³

Progress Over Time	Key Health Indicator	Baseline	Most Recent
		(Year)	(Year)
	Obesity (BMI>29.9)	33% (2012)	38% (2016)
	Binge drinkers	25% (2012)	42% (2016)
	Took prescription medication that was not prescribed or took more than prescribed to feel good, high, more active or alert	10% (2012)	2% (2016)
	Marijuana users	2% (2012)	0.8% (2016)
	Current smokers (currently smoke some or all days)	14% (2012)	13% (2016)
	Insured adults ages 18-64	81% (2010) ⁴	89% (2014)
	Dentist/population ratio	1:3128 (2012)	1:2722 (2016)
	General health status is "excellent" or "very good"	58% (2012)	53% (2016)

¹ When the magnitude of the difference between the baseline data and the most recent data is at least |10%| and the direction of this difference suggests a more healthy population.







² When the magnitude of the difference between the baseline data and the most recent data is less than |10%| or when the baseline value was ≤5%.

³ When the magnitude of the difference between the baseline data and the most recent data is at least |10%| and the direction of this difference suggests a less healthy population. For example, consider obesity:

$$|((.33 - .384)/.33)*100| = 16\%$$

⁴ The source for this value (Ohio Family Health Survey, 2010) is different from the source for the 2014 value for this indicator.

Death, Illness, And Injury, continued

	Average days in which residents had poor mental health	2.4 (2012)	5.2 (2016)
	Told by a doctor that they had high blood pressure	26% (2012)	38% (2016)
	Told by a doctor that they had high blood cholesterol	33% (2012)	29% (2016)
	Told by a doctor that they had diabetes	10% (2012)	12% (2016)
	Unemployment rates	3.8% (2012)	3.9% (2014)
	Median household income	\$54,741 ¹ (2010)	\$52,033 (2014)

¹ The 2010 value for this indicator (\$50,422) was adjusted for inflation to 2014 dollars.

Summary

Mercer Health's [2016 Community Health Needs Assessment](#) provides a comprehensive overview of the community's health status, illuminating areas of strength as well as areas in which there could be improvement.

Mercer Health will use this report to inform the development and implementation of strategies to address its findings. It is intended that a wide range of community stakeholders and other organizations within Mercer County will also use this report for their own planning efforts.

Users of Mercer Health's [2016 Community Health Needs Assessment](#) are encouraged to send feedback and comments that can help to improve the usefulness of this information when future editions are developed. Questions and comments may be directed to:

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References

§ : This symbol indicates primary data gathered by the 2016 Mercer County Health Survey.

Community Profile

¹ U.S. Census Bureau, American Community Survey 5 Year Estimates (2010-2014)

Social Determinants Of Health

¹ U.S. Census Bureau, American Community Survey 5 Year Estimates (2010-2014)

² Ohio Department of Administrative Services (2015)

³ Feeding America, "Map the Meal Gap" (2013)

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⁵ Ohio Department of Jobs and Family Services, Ohio Labor Market Information, Civilian Labor Force Estimates (2014)

⁶ Office of Criminal Justice Services, Crime by County 2014 Statistics (2013)

⁷ Office of Criminal Justice Services, Special Report: Crime in the United States 2014 (2014)

Behavioral Risk Factors

¹ Ohio Department of Health, 2014 Ohio Drug Overdose Preliminary Data General Findings (MC & OH 2014)

² Centers for Disease Control and Preventions, WISQARS Fatal Injury Data (US 2013)

³ Ohio Mental Health and Addiction Services (2014)

Maternal And Child Health

¹ Ohio Department of Health, 2013 Ohio Infant Mortality Data General Findings (2013)

² National Center for Health Statistics, National Vital Statistics Reports; vol 64 no 9 (2013)

³ Ohio Department of Health, Public Health Data Warehouse (2014)

⁴ Ohio Department of Health, 2014 Annual Induced Abortions in Ohio Report (2014)

Mental And Social Health

¹ Ohio Department of Health, Injury Data Highlight Suicides in Ohio 2012 (2010-2012)

² Centers for Disease Control and Preventions, WISQARS Fatal Injury Data (2010-2012)

³ Office of Criminal Justice Services, Crime by County 2013 Statistics (2013)

⁴ Ohio Bureau of Criminal Identification and Investigation, Domestic Violence Report (2014)

⁵ U.S. Department of Justice, Nonfatal Domestic Violence Special Report (2003-2012)

⁶ Mercer County Department of Job & Family Services, Annual Report to the Community (2013)

⁷ U.S. Department of Health and Human Services, Child Maltreatment (2013)

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¹ Mercer Health (2015)

² Centers for Disease Control and Prevention, National Center for Health Statistics. Compressed Mortality File 1999-2013 on CDC WONDER Online Database (2013)

³ Ohio Department of Health, Public Health Data Warehouse (2012)

⁴ Center for Disease Prevention and Control, National Program of Cancer Registries Cancer Surveillance System, State Cancer Profiles (2012)

⁵ Ohio Department of Health, Quarterly 4 Summary of Selected Notifiable Diseases (2014)

⁶ Ohio Department of Health, STD Surveillance Program (2014)

⁷ Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report 62:53 (2013)



Mercer Health

Mercer County Community Hospital

Community Health Needs Assessment 2016

Appendix A: 2016 Mercer County Health Survey

MERCER COUNTY HEALTH SURVEY

This survey should be completed by the adult aged 18 or over at this address who MOST RECENTLY had a birthday. All responses will remain confidential, so please answer honestly.

YOUR OVERALL HEALTH

These questions ask about your physical and mental health.

1. In your opinion, what is the most important health problem affecting the people who live in Mercer County? [Please write your answer below]

2. Would you say that in general your health is... [Circle one answer]

Excellent	Very good	Good	Fair	Poor
-----------	-----------	------	------	------

3. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good? [Write a number] ___ ___

4. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? [Write a number] ___ ___

5. During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation? [Write a number] ___ ___

6. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities? [Circle one answer]

Yes	No
-----	----

7. How often do you get the social and emotional support you need? [Circle one answer]

Always	Usually	Sometimes	Rarely	Never
--------	---------	-----------	--------	-------

8. Has a doctor, nurse, or other health professional EVER told you that you had...

[For each question, circle one answer]

8a. Asthma	Yes	No
8b. Arthritis	Yes	No
8c. Any type of cancer	Yes	No
8d. Diabetes	Yes	No
8e. High blood pressure	Yes	No
8f. High blood cholesterol	Yes	No

{PLEASE TURN OVER AND COMPLETE THE BACK}

MEN'S HEALTH AND CHECKUPS

These questions ask about different kinds of health care men may have received recently.

NOTE: If you are female, please go to the next section of the survey (“Women’s Health And Checkups”).

9. The next questions are about prostate cancer screening. A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test? [Circle one answer]

Yes	No <i>(Go to Question 15)</i>
-----	----------------------------------

10. How long has it been since you had your last PSA test? [Circle one answer]

Within the past year (anytime less than 12 months ago) <i>(Go to Question 15)</i>	Within the past 2 years (1 year but less than 2 years ago) <i>(Go to Question 15)</i>	Within the past 3 years (2 years but less than 3 years ago) <i>(Go to Question 15)</i>	Within the past 5 years (3 years but less than 5 years ago) <i>(Go to Question 15)</i>	5 or more years ago <i>(Go to Question 15)</i>
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WOMEN'S HEALTH AND CHECKUPS

These questions ask about different kinds of health care women may have received recently.

11. The next questions are about breast and cervical cancer. A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram? [Circle one answer]

Yes	No <i>(Go to Question 13)</i>
-----	----------------------------------

12. How long has it been since you had your last mammogram? [Circle one answer]

Within the past year (anytime less than 12 months ago)	Within the past 2 years (1 year but less than 2 years ago)	Within the past 3 years (2 years but less than 3 years ago)	Within the past 5 years (3 years but less than 5 years ago)	5 or more years ago
--	--	---	---	---------------------

13. A Pap test is a test for cancer of the cervix. Have you ever had a Pap test? [Circle one answer]

Yes	No <i>(Go to Question 15)</i>
-----	----------------------------------

14. How long has it been since you had your last Pap test? [Circle one answer]

Within the past year (anytime less than 12 months ago)	Within the past 2 years (1 year but less than 2 years ago)	Within the past 3 years (2 years but less than 3 years ago)	Within the past 5 years (3 years but less than 5 years ago)	5 or more years ago
--	--	---	---	---------------------

OTHER HEALTH BEHAVIORS

These questions ask about a variety of other health behaviors.

15. Have you smoked at least 100 cigarettes in your entire life?

[Circle one answer]

Yes	No (Go to Question 17)
-----	---------------------------

16. Do you now smoke cigarettes every day, some days, or not at all? [Circle one answer]

Every day	Some days	Not at all
-----------	-----------	------------

17. Do you currently use cigars, chewing tobacco, snuff, or snus... [Circle one answer]

Every day	Some days	Not at all
-----------	-----------	------------

18. One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. Considering all types of alcoholic beverages, how many times during the past 30 days did you have (*if male, 5 drinks or more | if female, 4 drinks or more*) on an occasion?

[Write a number] — —

19. During the past 6 months, have you used any of the following? [For each question, circle one answer]

19a. Marijuana or hashish	Yes	No
19b. Amphetamines, methamphetamines, or speed	Yes	No
19c. Cocaine, crack, or coca leaves	Yes	No
19d. Heroin	Yes	No
19e. LSD, mescaline, peyote, psilocybin, DMT, or mushrooms	Yes	No
19f. Inhalants such as glue, toluene gasoline, or paint	Yes	No
19g. Ecstasy or E	Yes	No
19h. Bath salts	Yes	No

20. During the past 6 months, have you used prescription medication that was not prescribed for you, or took more medicine than was prescribed for you, in order to feel good, high, more active, or more alert? [Circle one answer]

Yes	No
-----	----

CHILDREN'S HEALTH

These questions ask about health issues that may affect children.

21. In your opinion, how much of a problem is each of the following issues in Mercer County?

[For each question, circle one answer]

21a. Children (under age 17) drinking alcohol	Not a problem	Minor problem	Moderate problem	Major problem
21b. Children (under age 17) drinking alcohol and driving	Not a problem	Minor problem	Moderate problem	Major problem
21c. Adults drinking alcohol and then driving children somewhere	Not a problem	Minor problem	Moderate problem	Major problem
21d. Adults allowing children to drink alcohol in their home	Not a problem	Minor problem	Moderate problem	Major problem

{PLEASE TURN OVER AND COMPLETE THE BACK}

22. Do any children live in your household who are between the ages of 2 and 17? [Circle one answer]

Yes	No (Go to Question 24)
-----	---------------------------

23. Thinking about the three oldest children who live in your household and who are between the ages of 2 and 17, please enter the following information about them. [Please complete the table below]

	Child 1	Child 2	Child 3
Child's age <small>[Write a number]</small>	__ __	__ __	__ __
Child's gender <small>[Circle one answer]</small>	Male Female	Male Female	Male Female
Child's weight <small>[Write a number]</small>	__ __ __ pounds	__ __ __ pounds	__ __ __ pounds
Child's height <small>[Write two numbers]</small>	__ feet / __ __ inches	__ feet / __ __ inches	__ feet / __ __ inches

OTHER QUESTIONS

These questions are for statistical purposes only. All responses will remain confidential.

24. What is your gender? [Circle one answer]

Male	Female
------	--------

25. What is your age? [Write a number] __ __

26. About how much do you weigh without shoes? [Write a number] __ __ __ pounds

27. And about how tall are you without shoes? [Write two numbers] __ feet / __ __ inches

28. Including yourself, how many people live in your household? [Write a number] __ __

29. And how many of these people are under age 18? [Write a number] __ __

30. What is the highest level of education you have completed? [Circle one answer]

Less than 12 th Grade (no diploma)	High School Diploma / GED	Some College (no degree)	Associate's Degree	Bachelor's Degree	Graduate or Professional Degree
---	---------------------------------	--------------------------------	-----------------------	----------------------	---------------------------------------

31. Which of the following categories includes the total income of everyone living in your home in 2015, before taxes? [Circle one answer]

Less than \$24,999	Between \$25,000 and \$49,999	Between \$50,000 and \$74,999	Between \$75,000 and \$99,999	\$100,000 or more
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{YOU ARE FINISHED! PLEASE USE THE ENVELOPE PROVIDED TO RETURN THIS SURVEY. THANK YOU!}



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Community Health Needs Assessment 2016

Appendix B: Prioritized Health Issues

<to be completed later>