

2022



Seneca County **Community Health Status Assessment**

Examining the health of Seneca County

Released December 31, 2022

Foreword

Dear Community Member,

On behalf of the Seneca County Health Alliance, I am pleased to present our 2022 Community Health Status Assessment. It presents data contributed by Seneca County youth and adults about their health this year. Additional information from the Ohio Department of Health and relevant national, state, and local data sources are also included.

Monitoring the health status of local residents is an essential public health service. This Community Health Status Assessment is the fifth community assessment undertaken by the Seneca County Health Alliance, which is a broad group of community agencies and partners that care about our county's health. It serves as a guide for local strategic planning and decision-making. It helps our community identify new health concerns, measure the impact of current health improvement efforts, and guide the wise use of local resources.

While data is useful, this report is only one planning tool. A true plan of action for community health improvement requires taking a closer look at these survey results; seeking additional information from community residents, service providers, and others; identifying groups of people at increased risk for specific health conditions; and choosing effective strategies that can truly make a difference when put into action.

I encourage community members to join the Seneca County Health Alliance as we work together to improve the health and well-being of local residents. I also urge you to remain optimistic and positive about the excellent work this community can do together.

Yours in good health,

Anne Goon, MS, RD, LD
Health Commissioner, Seneca County General Health District
Chairperson, Seneca County Health Alliance

Acknowledgements

This report would not be possible without the assistance of multiple community leaders and organizations. We thank them for their support in making this health assessment a reality. We especially thank the residents of Seneca County who responded to our community survey.

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Mercy Health – Tiffin Hospital
ProMedica Fostoria Community Hospital
Seneca County Department of Job and Family Services
Seneca County General Health District
Seneca County Juvenile Court

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Seneca County General Health District
Seneca County Juvenile Court
Seneca County Sheriff's Office
Tiffin City Schools
Tiffin-Seneca United Way
Tiffin Community YMCA

Contact Information:

Anne Goon, MS, RD, LD
Health Commissioner
Email agoon@senecahealthdept.org

Leslie Shaffer, PhD, MPH
Health Planning and Accreditation Manager
Email lshaffer@senecahealthdept.org

Seneca County General Health District, 92 E. Perry St., Tiffin, OH 44883; Phone (419) 447-3691

Project Management, Secondary Data, Data Collection, and Report Development

Hospital Council of Northwest Ohio

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.

Gabrielle MacKinnon, MPH

Community Health Improvement Manager

Emily Gensler, MPH

Community Health Improvement Manager

Mallory Ohneck, MPH, CHES

Community Health Improvement Data Manager

Jodi Franks, MPH, CHES

Community Health Improvement Coordinator

Data Collection & Analysis

Joseph A. Dake, Ph.D., MPH

Professor and Chair
School of Population Health
University of Toledo

Aaron J Diehr, PhD, CHES

Consultant

Samantha Schroeder, MPA

Consultant

The 2022 Seneca County Health Assessment is available on the following websites:

Seneca County General Health District

www.Senecahealthdept.org

Hospital Council of Northwest Ohio

<http://www.hcno.org/community-services/community-health-assessments/>

Table of Contents

Executive Summary	Pages 5-31
Public Health Accreditation Board (PHAB)	Pages 5
Primary Data Collection Methods	Pages 5-7
Secondary Data Collection Methods	Page 7
Key Report Sections	Pages 8
Mobilizing for Action Through Planning & Partnerships (MAPP) Process Overview	Page 9
2019 Ohio State Health Assessment (SHA)	Page 10
Data Summary	Pages 11-25
Trend Summary	Pages 26-31
HEALTH CARE ACCESS	
Health Care Coverage	Pages 32-34
Access and Utilization	Pages 35-37
Preventive Medicine	Pages 38-39
Women's Health	Pages 40-42
Men's Health	Pages 43-45
Oral Health	Pages 46-47
HEALTH BEHAVIORS	
Adult Health Status Perceptions	Pages 48-50
Adult Weight Status	Pages 51-54
Adult Tobacco Use	Pages 55-58
Adult Alcohol Consumption	Pages 59-60
Adult Drug Use	Pages 61-67
Adult Sexual Behavior	Pages 68-71
Adult Mental Health	Pages 72-75
CHRONIC DISEASE	
Cardiovascular Health	Pages 76-80
Cancer	Pages 81-84
Arthritis	Page 85
Asthma	Pages 86-87
Diabetes	Pages 88-89
Quality of Life	Pages 90-91
SOCIAL CONDITIONS	
Adult Social Determinants of Health	Pages 92-97
Environmental Conditions	Pages 98-99
Parenting	Page 100
YOUTH (OHYES!) HEALTH	
Youth Weight Status	Pages 101-103
Youth Tobacco/Electronic Vapor Product Use	Pages 104-106
Youth Alcohol Consumption	Pages 107-109
Youth Drug Use	Pages 110-114
Youth Sexual Behavior	Pages 115-116
Youth Mental Health	Pages 117-119
Youth Social Determinants of Health	Pages 120-124
Youth Violence	Pages 125-127
Youth Perceptions	Pages 128-135
APPENDICES	
APPENDIX I — Health Assessment Information Sources	Pages 136-138
APPENDIX II — Acronyms and Terms	Pages 139-140
APPENDIX III — Weighting Methods	Pages 141-142
APPENDIX IV — Sample Demographic Profile	Page 143
APPENDIX V — Demographics and Household Information	Pages 144-149
APPENDIX VI — 2022 County Health Rankings	Pages 150-152
APPENDIX VII — Community Stakeholder Perceptions	Pages 153-155

Executive Summary

This executive summary provides an overview of health-related data for Seneca County adults (ages 19 and older) who participated in a county-wide health assessment survey during March through June 2022. 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). 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 2022 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.

**Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks (Source: Social Determinants of Health, Healthy People 2030).*

Primary Data Collection Methods

DESIGN

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

INSTRUMENT DEVELOPMENT

One survey instrument was designed for this study. 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. The investigators decided to derive most of the survey items from the BRFSS. This decision was based on being able to compare local data with state and national data.

The project coordinator from the Hospital Council of Northwest Ohio conducted a series of meetings with the Seneca County Health Alliance. During these meetings, HCNO and the Seneca County Health Alliance reviewed and discussed banks of potential survey questions. Based on input from the Seneca County Health Alliance, the project coordinator composed a draft survey containing 115 items. Institutional Review Board (IRB) approval is granted to HCNO from Advarra in Columbia, Maryland.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and older living in Seneca County. There were 42,204 persons ages 19 and older living in Seneca 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 6% (i.e., we can be 95% sure that the “true” population responses are within a 6% margin of error of the survey findings.) A sample size of at least 265 adults was needed to ensure this level of confidence.

The random sample of mailing addresses was obtained from Melissa Global Intelligence in Rancho Santa Margarita, California. Surveys were mailed in March 2022 and returned through June 2022.

PROCEDURE | Adult Survey

Prior to mailing the survey, an advance letter was mailed in February of 2022 to 2,000 adults in Seneca County. This advance letter was personalized, printed on Seneca County Health Alliance letterhead, and signed by Anne Goon, Health Commissioner, Seneca County General Health District. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents’ confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

In March of 2022 (six weeks following the advance letter), a two-wave mailing procedure was implemented to maximize the survey return rate. The mailing included a personalized hand signed cover letter (on Seneca County Health Alliance letterhead) describing the purpose of the study, a questionnaire printed on white paper, a self-addressed stamped return envelope, and a \$2 incentive, which were included in a large colored envelope. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the mailing was 18% (n=350 CI=± 5.22). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

Note: “n” refers to the total sample size, “CI” refers to the confidence interval.

PROCEDURE | Adolescent (OHYES!) Survey

The Ohio Healthy Youth Environments Survey (OHYES!) is a youth health survey offered by the Ohio Department of Mental Health and Addiction Services, Ohio Department of Health, and Ohio Department of Education. OHYES! was administered to Seneca County youth in grades 7-12 in 2022. HCNO obtained this data through the Ohio Department of Health’s Ohio Public Health Data Warehouse, a self-service online tool where anyone can obtain the most recent public health data available about Ohio. The results of the survey reflect student responses from the middle schools and high schools that voluntarily participated during spring of 2022.

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 Statistical Product and Service Solutions 28.0 (SPSS). Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Seneca County, the adult data collected was weighted by age, gender, race, and income using Census data (Note: income data throughout the report represents annual household income). Multiple weightings were created based on this information to account for different types of analyses. For more information on how the adult weightings were created and applied, see Appendix III.

SPECIFIC POPULATIONS THAT EXPERIENCE DISPARITIES

Health disparities (including age, gender, and income-based disparities) can be identified throughout each section of the 2022 Seneca County Health Assessment. Income-based disparities are particularly prevalent in Seneca County. For example, those most likely to rate their general health as fair or poor were adults with annual household incomes under \$25,000 (27%) compared to the general population (14%). Additionally, the prevalence of chronic conditions (e.g., diabetes, high blood pressure, high blood cholesterol, etc.), were higher among those with annual household incomes under \$25,000 compared to the general population.

As part of the community health improvement plan (CHIP) process, the Seneca County Health Alliance will identify specific populations that face disparities as part of the prioritization phase of the process.

INEQUITIES IN THE FACTORS THAT CONTRIBUTE TO HEALTH CHALLENGES (INCLUDING SOCIAL DETERMINANTS OF HEALTH):

Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks (Source: Social Determinants of Health, Healthy People 2030). The Seneca County Health Alliance created an entire section within survey development to focus on SDOH specific questions. For example, the SDOH section includes information relating to housing, transportation, and food insecurity, which all contribute to health challenges among Seneca's County adults. For example, those with low household incomes (\$25K). Please see page 91 for further breakdowns of SDOH data.

RESOURCES TO ADDRESS NEEDS

Numerous resources will be identified through the MAPP planning process, resulting in a comprehensive community health improvement plan (CHIP).

LIMITATIONS

As with all county health assessments, it is important to consider the findings with respect to all possible limitations. 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 Seneca 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 Seneca County, those responding to the survey were more likely to be older. While weightings are applied during calculations to help account for this, it still presents a potential limitation (to the extent that the responses from these individuals are substantively different than the majority of Seneca County adult residents younger than 30). Therefore, the age ranges are broken down by 19 to 64 years old and 65 years and older.

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

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, including county-level data, from multiple sources whenever possible. HCNO utilized sources such as the Behavioral Risk Factor Surveillance System (BRFSS), numerous CDC webpages, U.S. Census data, Healthy People 2030, and other national and local sources. All primary data in this report is from the 2022 Seneca County Health Assessment (CHA). All other data is cited accordingly.

Key Reports Sections

The following sections throughout the report are clarified below. Detailed information regarding definitions (i.e., binge drinker) can be found in appendix II (Acronyms and Terms) of this report.

Data Summary: The data summary consists of key findings from each individual section within the report. This section offers a quick snapshot of data that can be found within the corresponding section of the report. A more comprehensive list of indicators can be found further in the report. Please refer to the table of contents regarding placement of the full section.

Adult & Youth (OHEYES!) Trend Summary: The adult trend summary consists of data from the previous 2019 Seneca County Community Health Assessment. Additionally, state and national adult and youth data is included for comparison purposes. The trend summary highlights all sections found in the report.

Adult Individual Sections: Each individual adult section consists of data from adults ages 19 and older in Seneca County. The adult individual sections fall under four main categories: health care access, health behaviors, chronic disease, and social conditions. The adult social conditions section consists of topics such as food insecurity, housing, parenting, etc. Please reference the table of contents to review placement of individual sections.

Youth (OHEYES!) Individual Section: The youth section consists of data from youth in grades 7th through 12th living in Seneca County. The youth section consists of the following topics: weight status, tobacco use, alcohol consumption, drug use, mental health, social determinants of health, violence, and perceptions. Please reference the table of contents to review placement of individual sections.

Appendix: The appendices is included at the end of this report. Detailed information is included in the appendix regarding information sources, demographics of survey respondents, acronyms and terms, etc.

Mobilizing for Action through Planning & Partnerships (MAPP) Process Overview

National Public Health Accreditation status through the Public Health Accreditation Board (PHAB) requires Community Health Assessments (CHAs) to be completed at least every five years. The purpose of the community health assessment is to learn about the health of our community, including health issues and disparities, contributing factors that impact health outcomes, and community assets and resources that can be mobilized to improve population health.

This 2022 CHA was developed using the Mobilizing Action through Partnerships and Planning (MAPP) process, which is a nationally adopted framework developed by the National Association of County and City Health Officials (NACCHO) (see Figure 1.1). MAPP is a community-driven planning process for improving community health and is flexible in its implementation, meaning that the process does not need to be completed in a specific order. This process was facilitated by HCNO in collaboration with a broad range of local agencies representing a variety of sectors of the community. This process involved the following six phases:

1. Organizing for success and partnership development

During this first phase, community partners organize the planning process and develop the planning partnership. The purpose of this phase is to structure a planning process that builds commitment, engages participants' as partners, and uses participant's time well, and results in a plan that can be realistically implemented.

2. Visioning

During the second phase, visioning guides the community through a collaborative process that leads to a shared community vision and common values.

3. The four assessments

While each assessment yields valuable information, the value of the four MAPP assessments is multiplied considering results as a whole. The four assessments include: The Community Health Status Assessment (CHSA), the Local Public Health System Assessment (LPHSA), the Forces of Change (FOC) Assessment, and the Community Themes and Strengths Assessment (CTSA).

4. Identifying strategic issues

The process to formulate strategic issues occurs during the prioritization process of the CHA/CHIP. The committee considers the results of the assessments, including data collected from community members (primary data) and existing statistics (secondary data) to identify key health issues. Upon identifying the key health issues, an objective ranking process is used to prioritize health needs for the CHIP.

5. Formulate goals and strategies

Following the prioritization process, a gap analysis is completed in which committee members identify gaps within each priority area, identify existing resources and assets, and potential strategies to address the priority health needs. Following this analysis, various goals, objectives, and strategies are presented to the committee to meet the prioritized health needs.

6. Action cycle

The committee begins implementation of strategies as part of the next community health improvement cycle. Both progress data to track actions taken as part of the CHIP's implementation and health outcome data (key population health statistics from the CHA) are continually tracked through ongoing meetings. As the end of the CHIP cycle, partners review progress to select new and/or updated strategic priorities based on progress and the latest health statistics.

Figure 1.1 The MAPP Framework



2019 Ohio State Health Assessment (SHA)

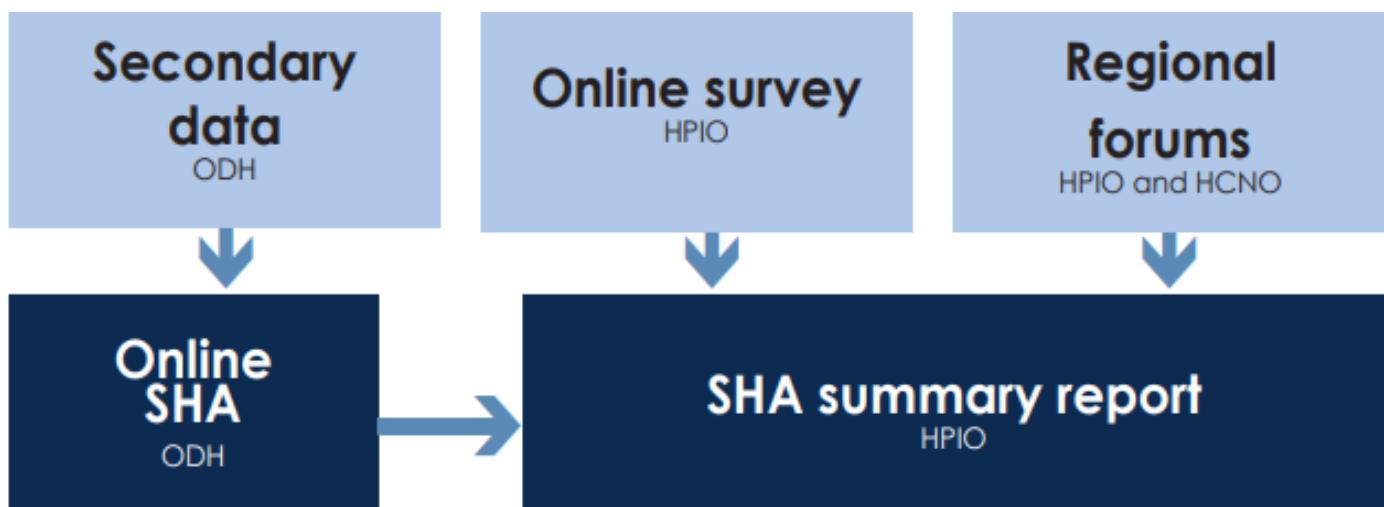
The 2019 Ohio State Health Assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, online surveys completed by over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

Similar to the 2019 Ohio SHA, the 2022 Seneca 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 among 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 Seneca County Health Alliances hope that this CHA will serve as a foundation for such collaboration.

To view the full 2019 Ohio State Health Assessment, please visit: <https://odh.ohio.gov/wps/portal/gov/odh/about-us/sha-ship/>

FIGURE 1.1 | Components of the 2019 State Health Assessment (SHA)



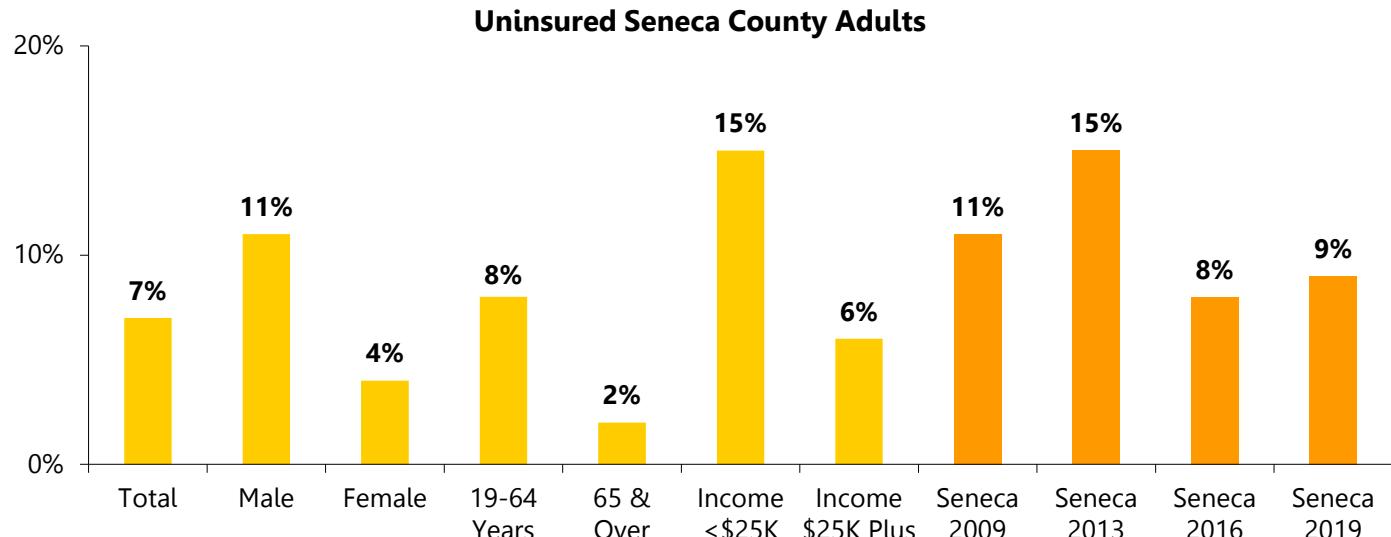
2022 Seneca County Data Summary | Adult Health Care Access

The data summary consists of key findings from each individual section within the report. This section offers a quick snapshot of data that can be found within the corresponding section of the report. A more comprehensive list of indicators can be found within the individual section. Please refer to the table of contents regarding placement of the full section.

"Adults" are defined throughout the report as those ages 19 and older living in Seneca County.

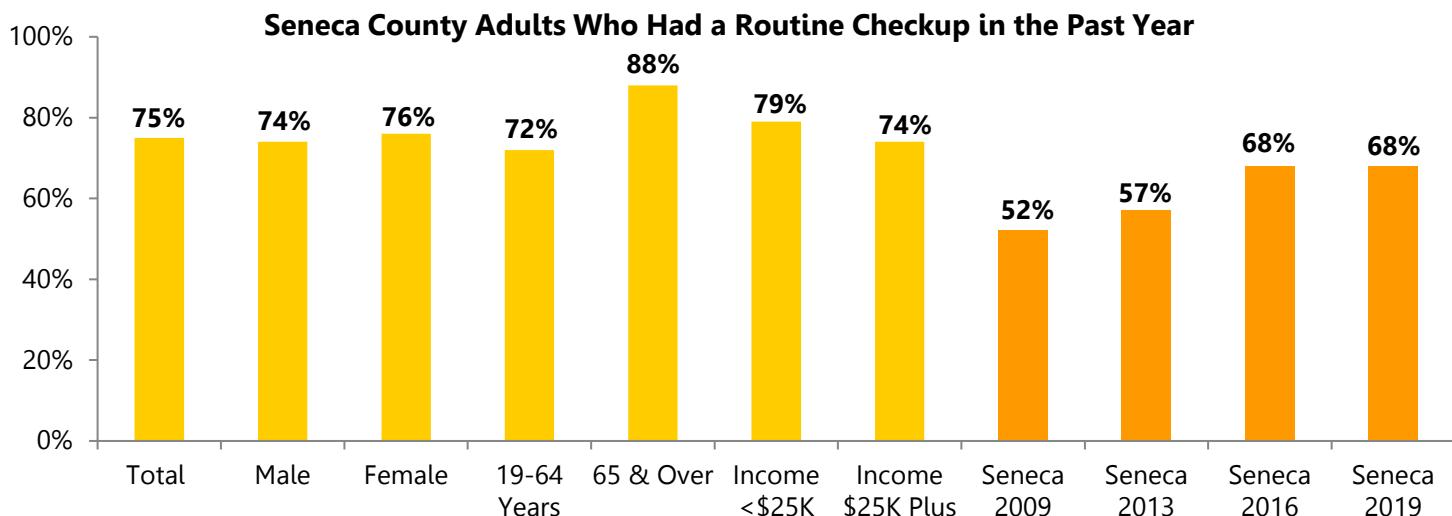
HEALTH CARE COVERAGE

Seven percent (7%) of Seneca County adults were without health care coverage. Those most likely to be uninsured were adults with an income level under \$25,000 (15%). The main reason adults gave for being without health care coverage were because of cost/could not afford to pay the premiums (45%).



ACCESS AND UTILIZATION

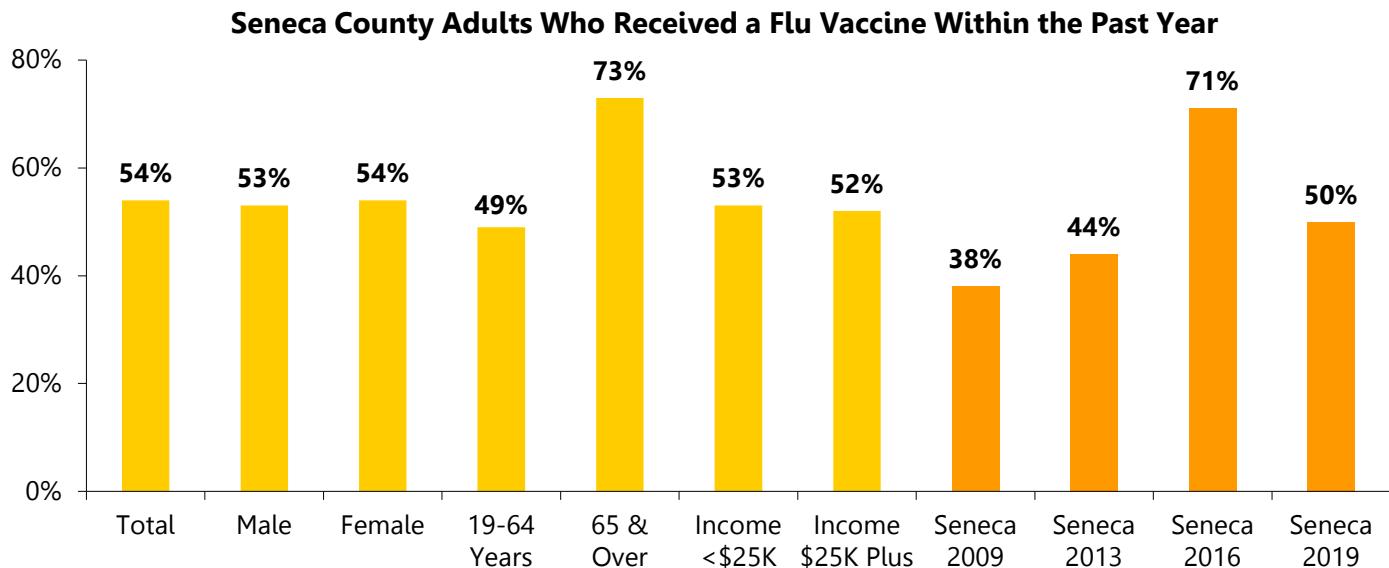
Three-fourths (75%) of Seneca County adults had visited a doctor for a routine checkup in the past year. Eighty-seven percent (87%) of adults reported they had one person they thought of as their personal doctor or health care provider.



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.

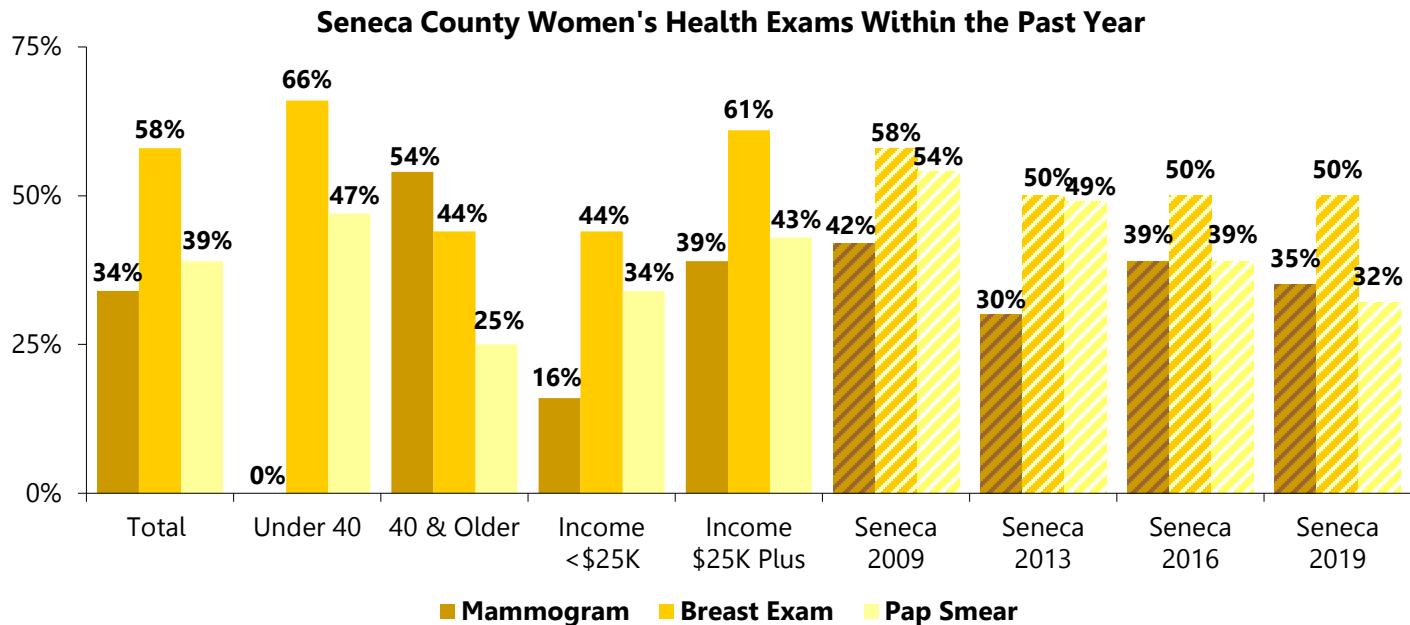
PREVENTIVE MEDICINE

Sixty-seven percent (67%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Over half (54%) of Seneca County adults had a flu vaccine during the past 12 months, increasing to 73% of adults ages 65 and over.



WOMEN'S HEALTH

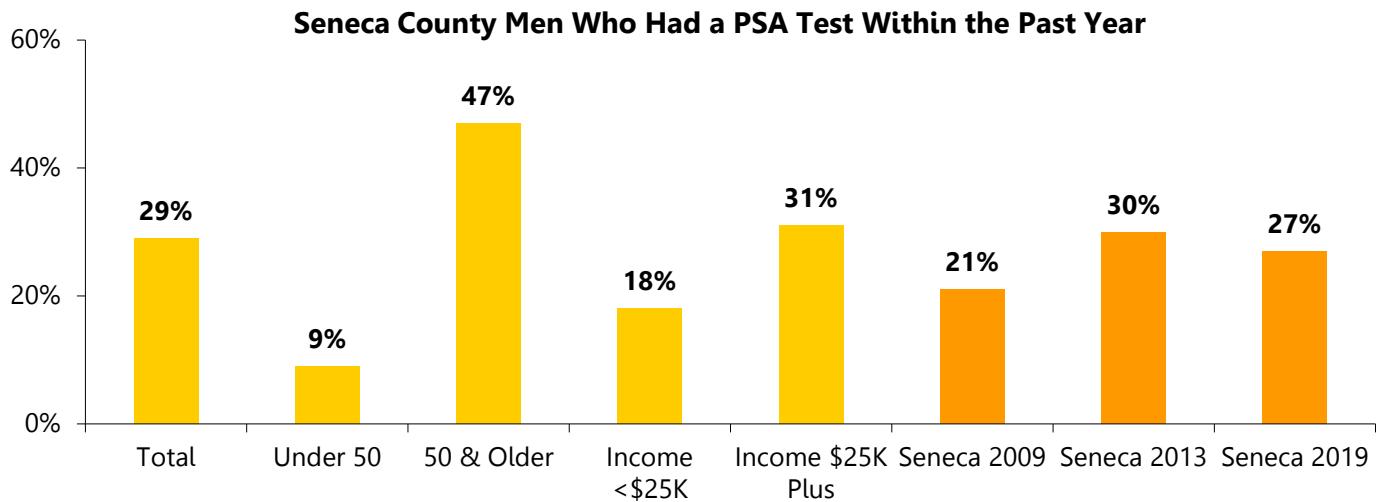
Over half (54%) of Seneca County women over the age of 40 reported having a mammogram in the past year. Fifty-eight percent (58%) of women had a clinical breast exam and 39% had a Pap smear to detect cancer of the cervix in the past year. Seventy-five percent (75%) of Seneca County women were overweight or obese, 36% had high blood pressure, 28% had high blood cholesterol, and 16% were identified as current smokers, known risk factors for cardiovascular diseases.



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.

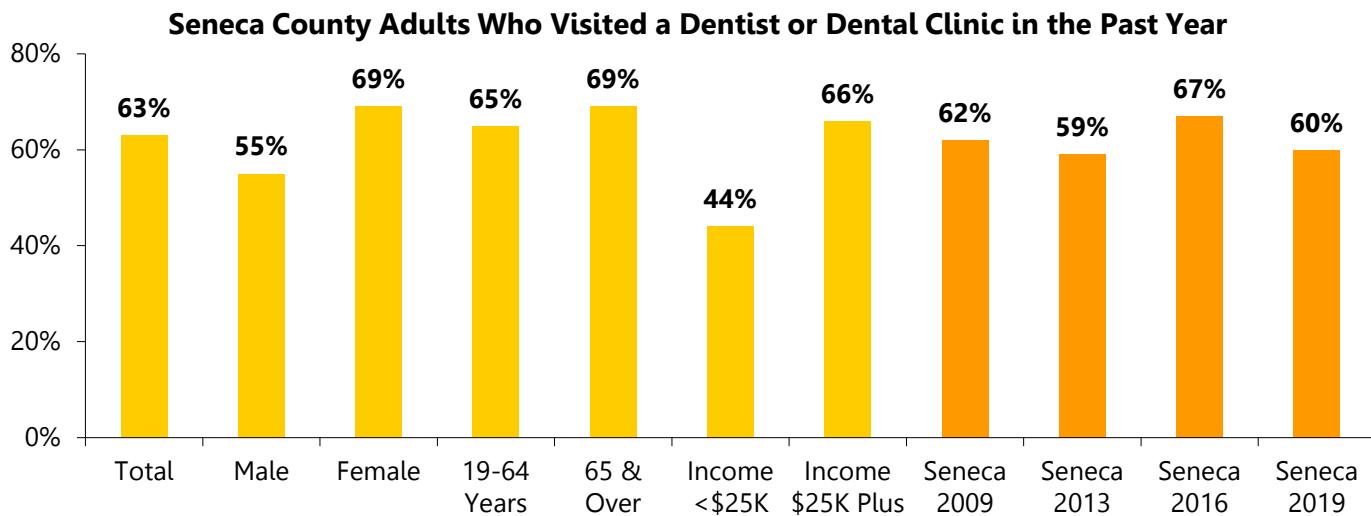
MEN'S HEALTH

Almost half (47%) of Seneca County males over the age of 50 had a prostate-specific antigen (PSA) test in the past year. Eighty percent (80%) of men were overweight or obese, 44% had been diagnosed with high blood cholesterol, 39% had high blood pressure, and 15% were identified as current smokers, known risk factors for cardiovascular diseases.



ORAL HEALTH

Sixty-three percent (63%) of Seneca County adults had visited a dentist or dental clinic in the past year. The top three reasons adults gave for not visiting a dentist or dental clinic in the past year were cost (20%); had no reason to go/had not thought of it (19%); and fear, nervousness, pain, dislike going (17%).

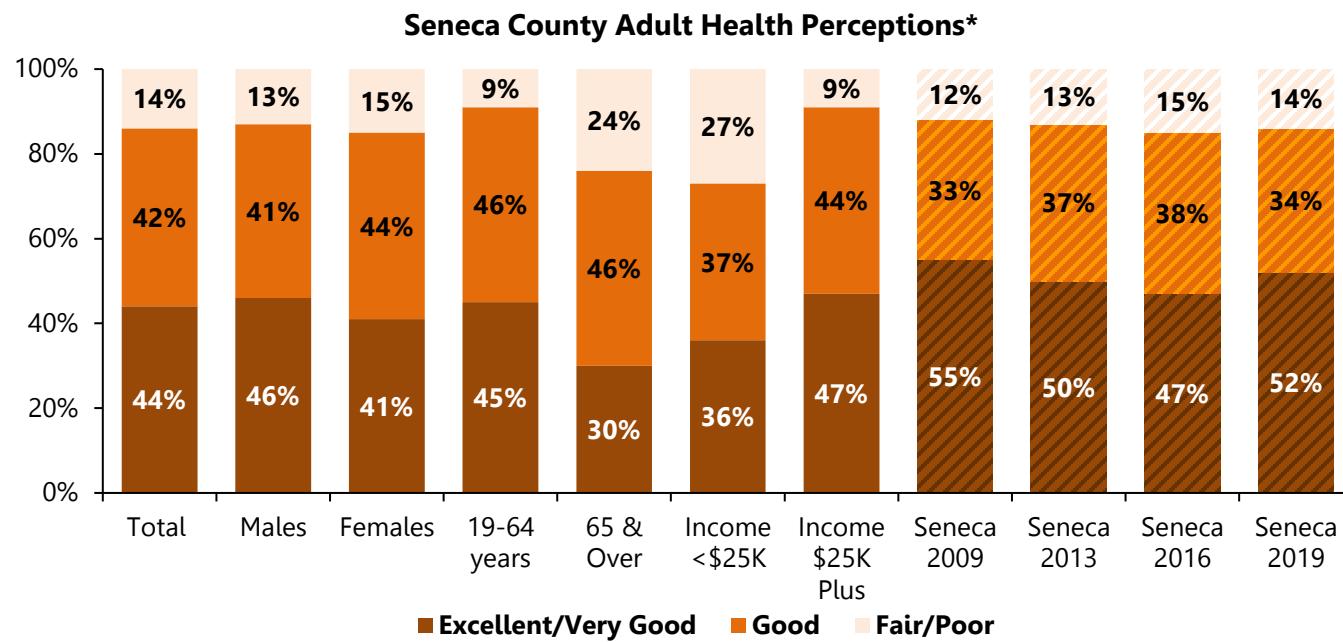


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

2022 Seneca County Data Summary | Adult Health Behaviors

HEALTH STATUS PERCEPTIONS

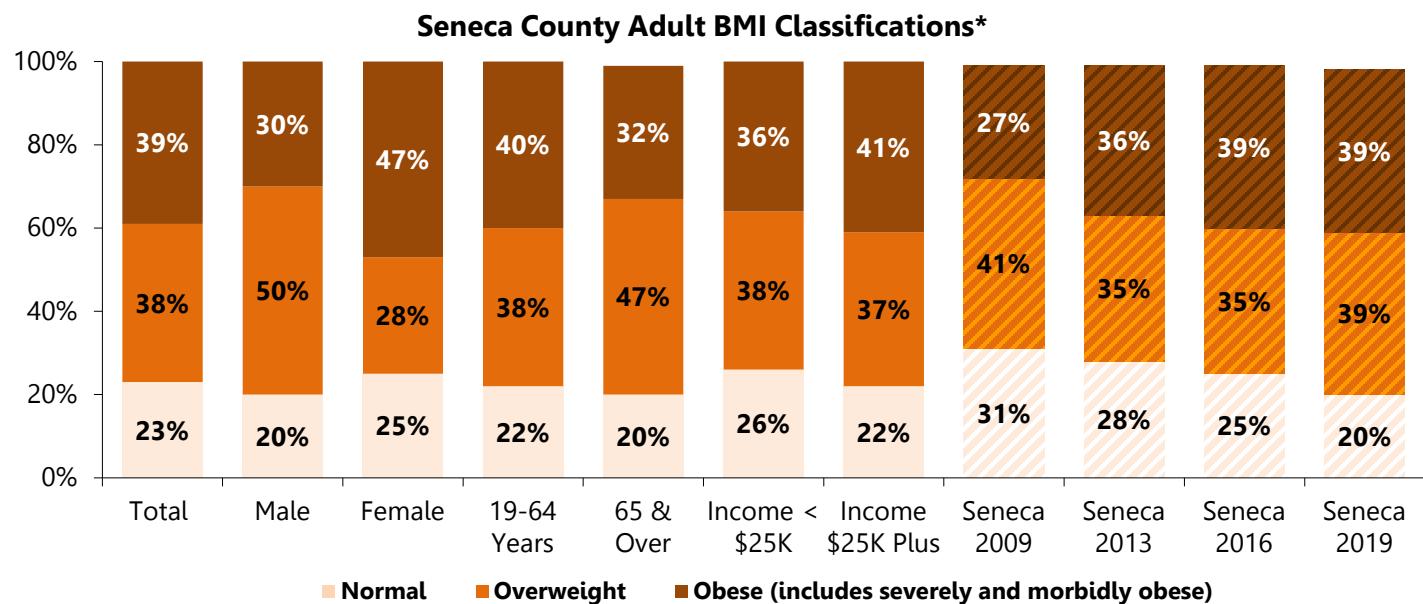
Almost half (44%) of Seneca County adults rated their health status as excellent or very good. Conversely, 14% of adults described their health as fair or poor, increasing to 27% of those with incomes less than \$25,000.



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

ADULT WEIGHT STATUS

Over three-fourths (77%) of Seneca County adults were overweight or obese based on body mass index (BMI). Seventeen percent (17%) of adults were not participating in any physical activity in the past week, including 4% who were unable to exercise.

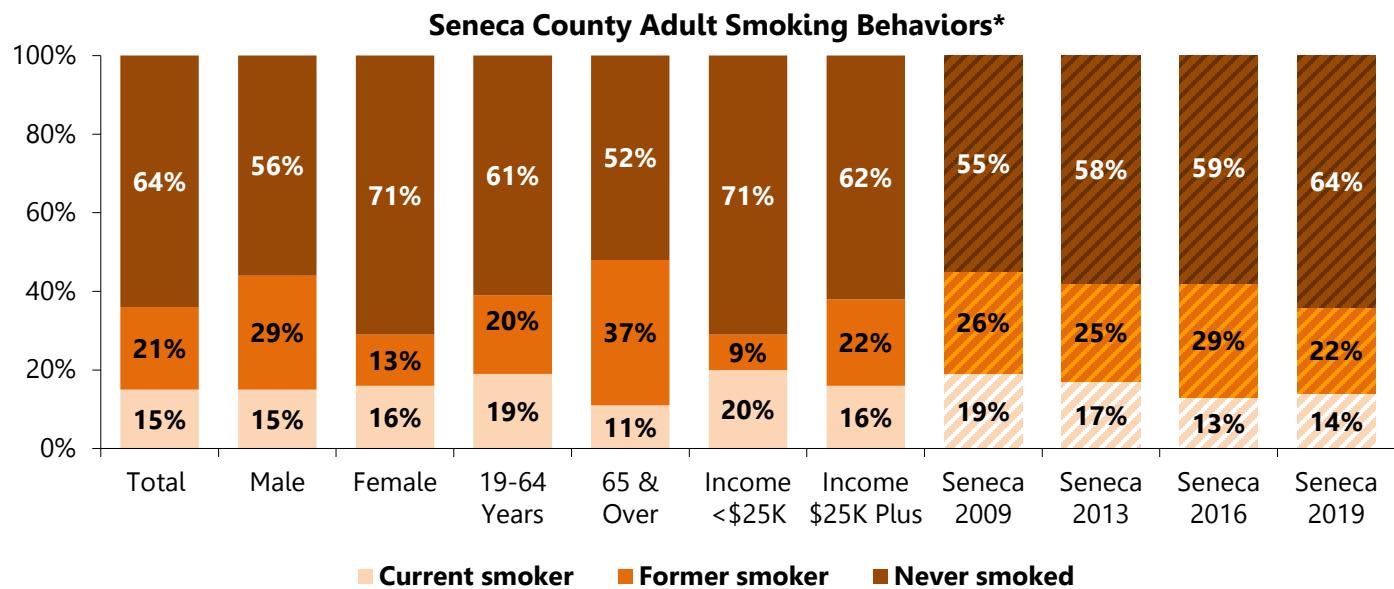


*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight

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

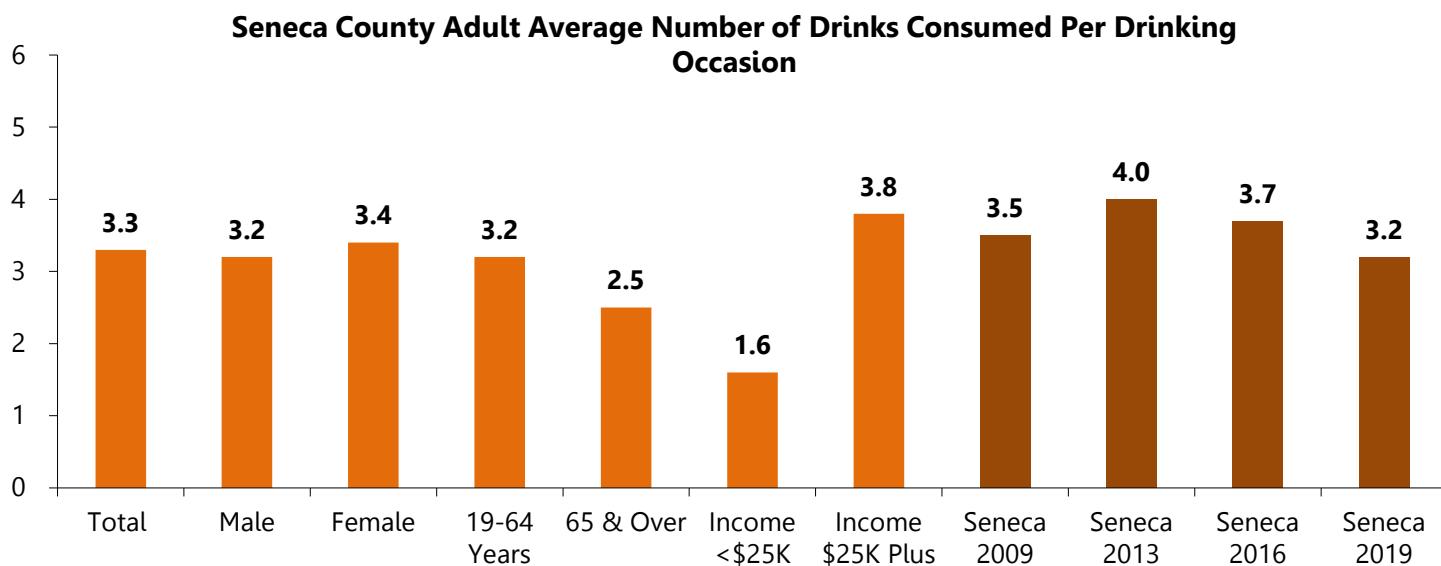
ADULT TOBACCO USE

Fifteen percent (15%) of Seneca County adults were current smokers, and 21% were considered former smokers. Nineteen percent (19%) of adults used e-cigarettes in the past year. Nineteen percent (19%) of adults did not believe e-cigarette vapor was harmful to anyone.



ADULT ALCOHOL CONSUMPTION

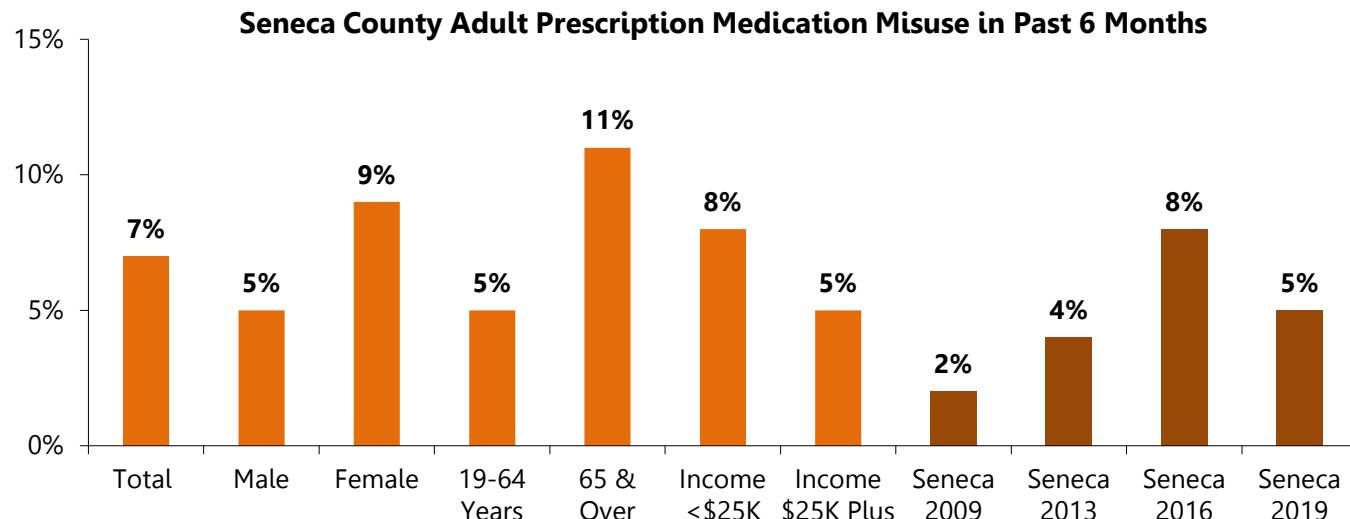
Fifty-eight percent (58%) of Seneca County adults had at least one alcoholic drink in the past month and would be considered current drinkers. More than one-quarter (27%) of all adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.



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.

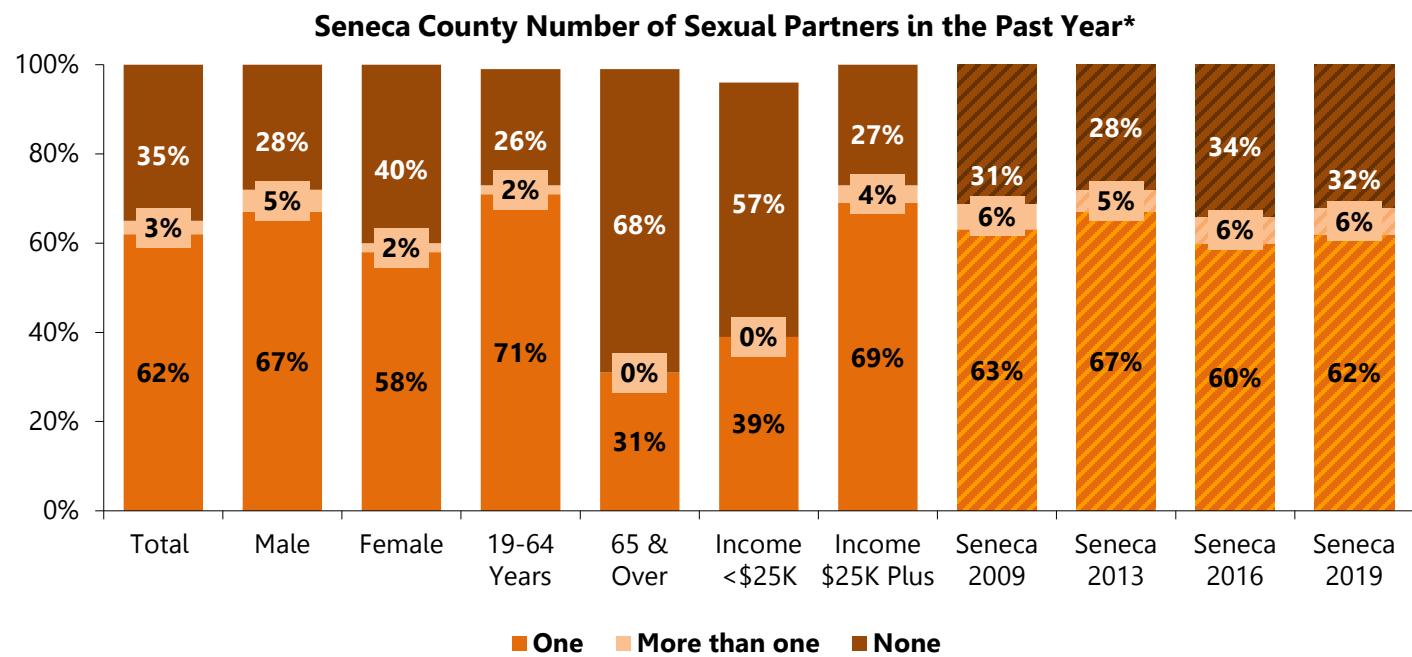
ADULT DRUG USE

Seven percent (7%) of Seneca County adults had used recreational marijuana or hashish during the past 6 months. Seven percent (7%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past six months.



ADULT SEXUAL BEHAVIOR

Sixty-five percent (65%) of Seneca County adults had sexual intercourse in the past year. Three percent (3%) of adults had more than one partner in the past year.

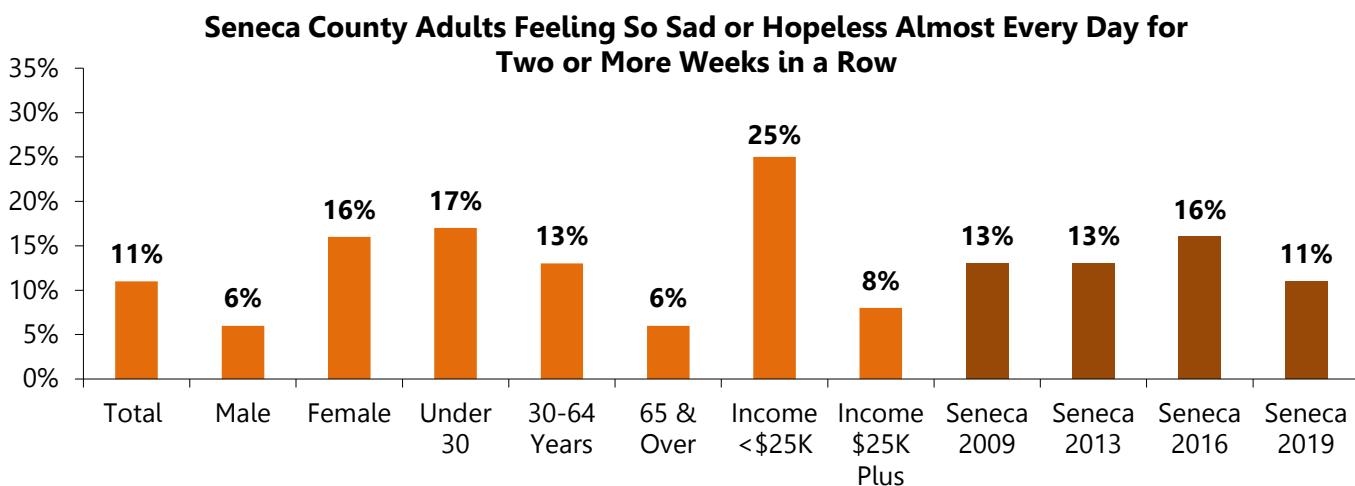


*Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"

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 MENTAL HEALTH

Three percent (3%) of Seneca County adults considered attempting suicide in the past year. Twenty-seven percent (27%) of adults reported they or family member were diagnosed with or treated for anxiety or emotional problems in the past year.

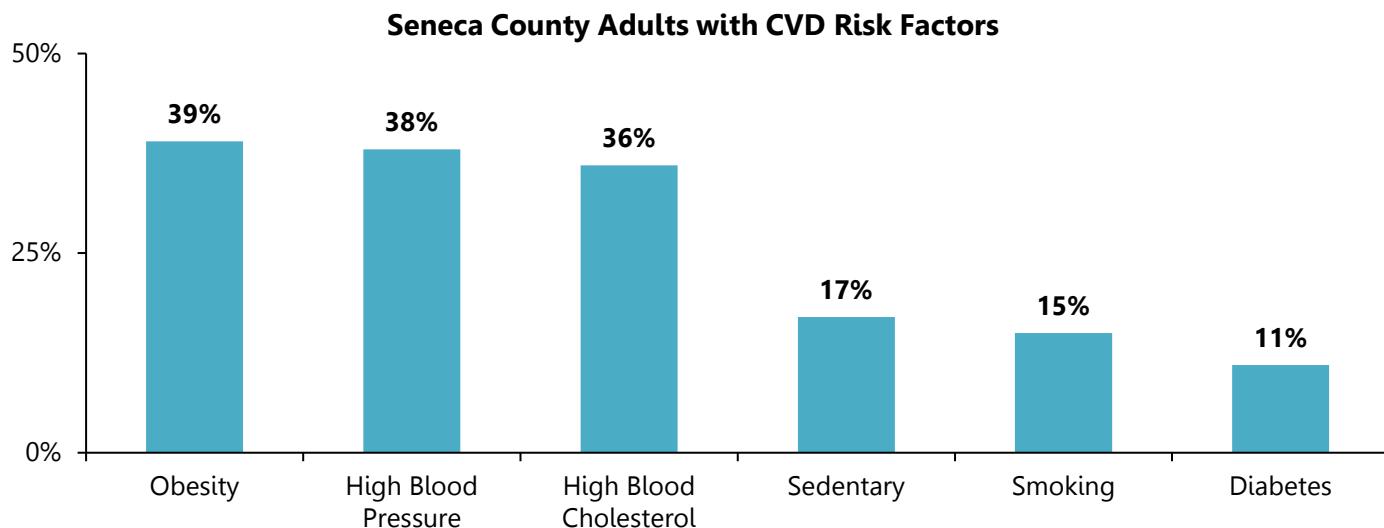


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

2022 Seneca County Data Summary | Adult Chronic Disease

CARDIOVASCULAR HEALTH

Six percent (6%) of adults had survived a heart attack and 4% had survived a stroke at some time in their life. Thirty-eight percent (38%) of Seneca County adults had high blood pressure, 36% had high blood cholesterol, 39% were obese, and 15% were current smokers, four known risk factors for heart disease and stroke.

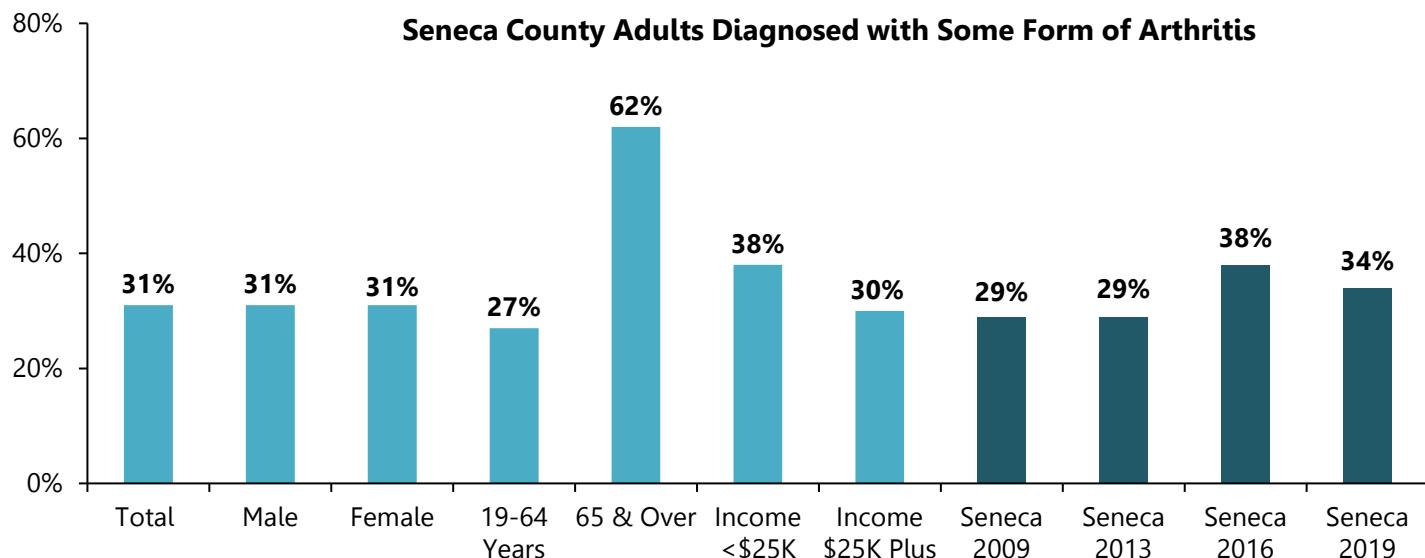


CANCER

Fifteen percent (15%) of Seneca County adults had been diagnosed with cancer at some time in their life. Twenty-nine percent (29%) of adults had been screened for colorectal cancer in the past five years.

ARTHRITIS

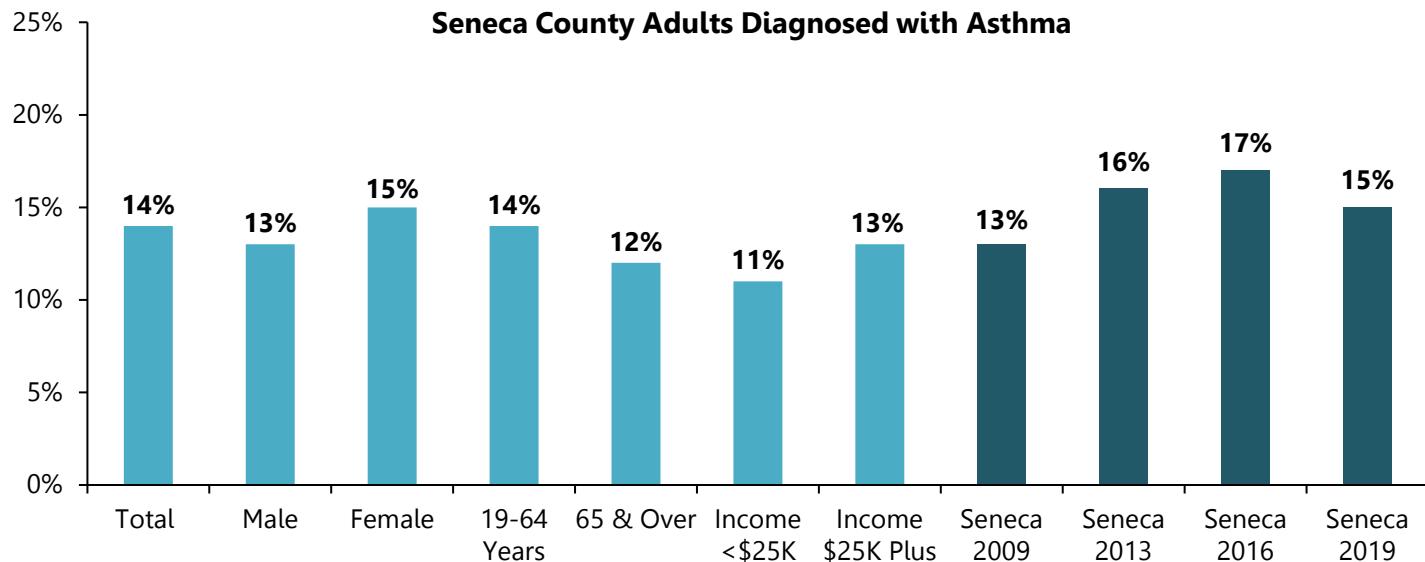
Thirty-one percent (31%) of Seneca County adults were told by a doctor or other health professional that they had some form of arthritis.



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.

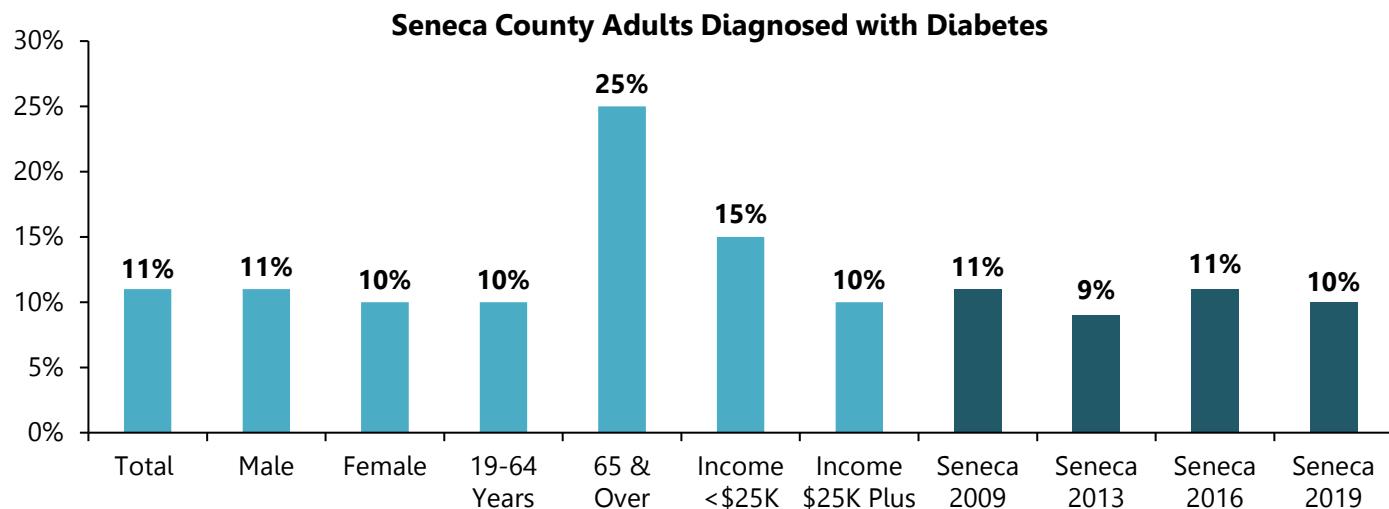
ASTHMA

Fourteen percent (14%) of Seneca County adults had been told by a doctor, nurse, or other health professional that they had asthma.



DIABETES

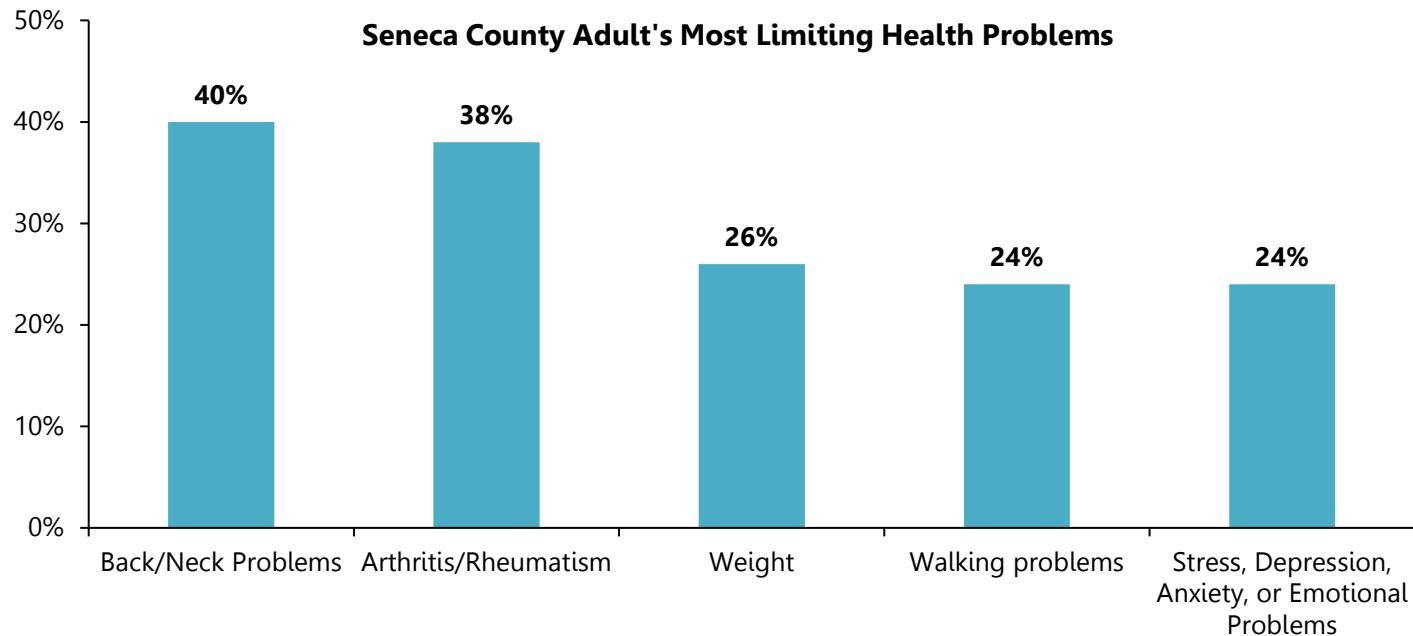
Eleven percent (11%) Seneca County adults had ever been diagnosed with diabetes. One percent (1%) of adults had only been diagnosed with diabetes during pregnancy.



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.

QUALITY OF LIFE

Forty-five percent (45%) of Seneca County adults reported they were limited by any impairment or health problem. The most limiting health problems were back or neck problems (40%); arthritis/rheumatism (38%); and weight (26%).

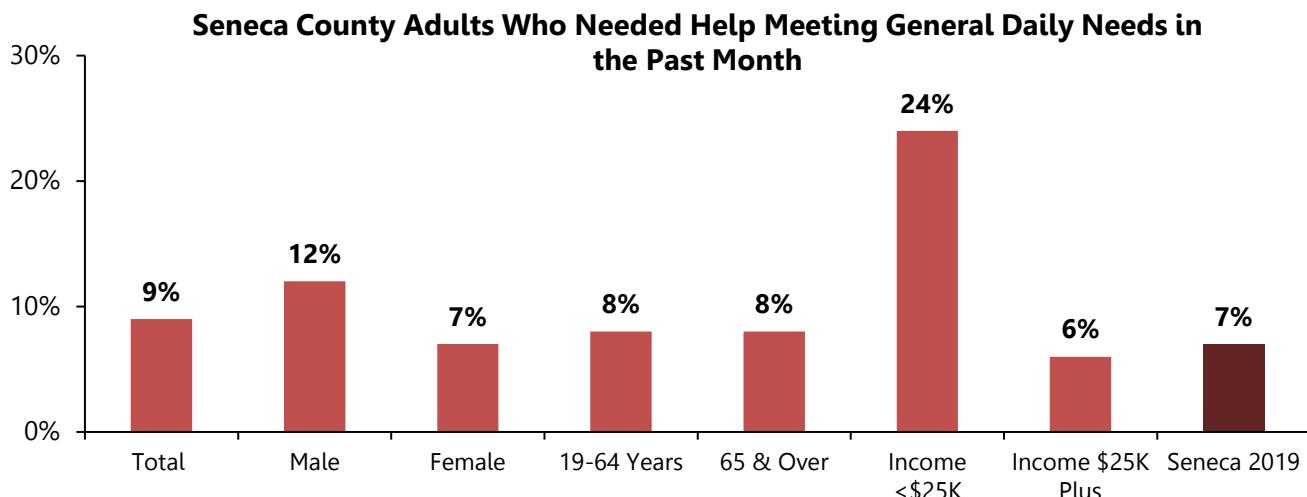


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

2022 Seneca County Data Summary | Adult Social Conditions

SOCIAL DETERMINANTS OF HEALTH

Six percent (6%) of Seneca County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Thirteen percent (13%) of Seneca County adults had four or more adverse childhood experiences (ACEs) in their lifetime. Thirteen percent (13%) of adults had experienced at least one issue related to hunger/food insecurity 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.

ENVIRONMENTAL HEALTH

The top two environmental health issues for Seneca County adults that threatened their health in the past year were mold (7%) and insects (6%). Over half (56%) of adults had a 3-day supply of prescription medication for each person who takes prescribed medicines.

PARENTING

Forty-one percent (41%) of Seneca County parents talked to their 12-to-17-year-old about dating and relationships in the past year. Thirty-six percent (36%) of adults reported their entire family in their home at a meal together every day of the week.

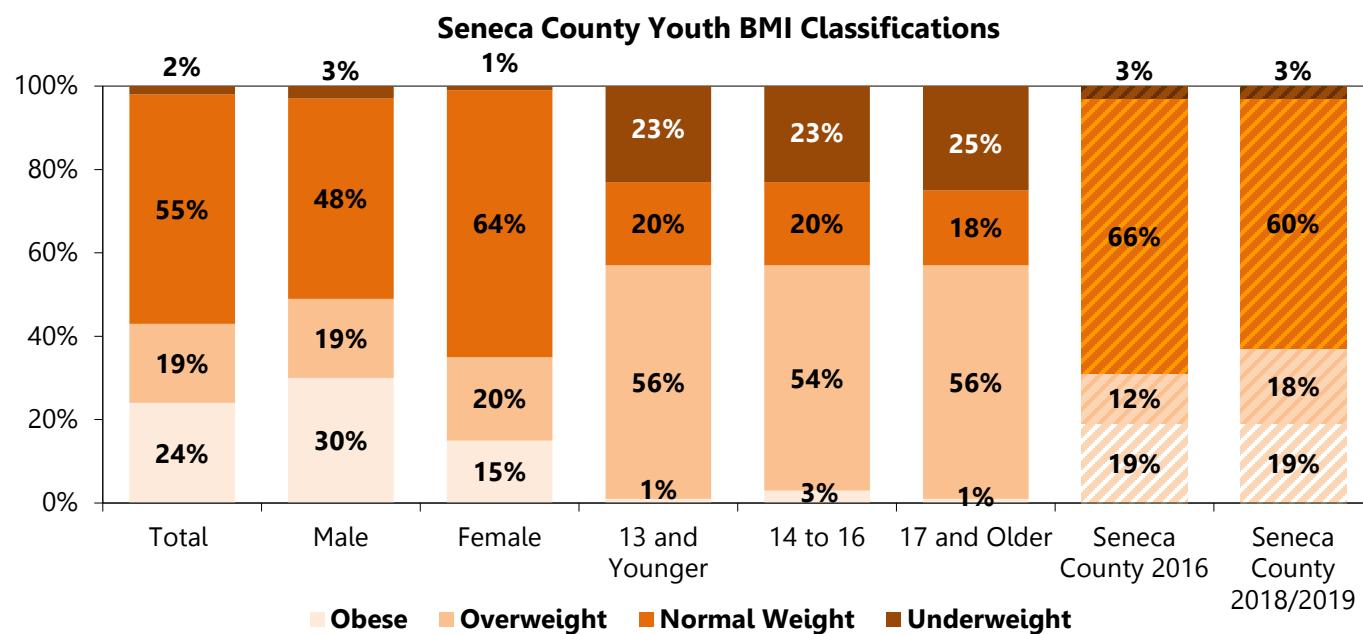
2022 Seneca County Data Summary | Youth (OYES!) Health

The data summary consists of key findings from each individual section within the report. This section offers a quick snapshot of data that can be found within the corresponding section of the report. A more comprehensive list of indicators can be found within the individual section. Please refer to the table of contents regarding placement of the full section.

"Youth" is defined throughout the report as those in grades 7th through 12th living in Seneca County.

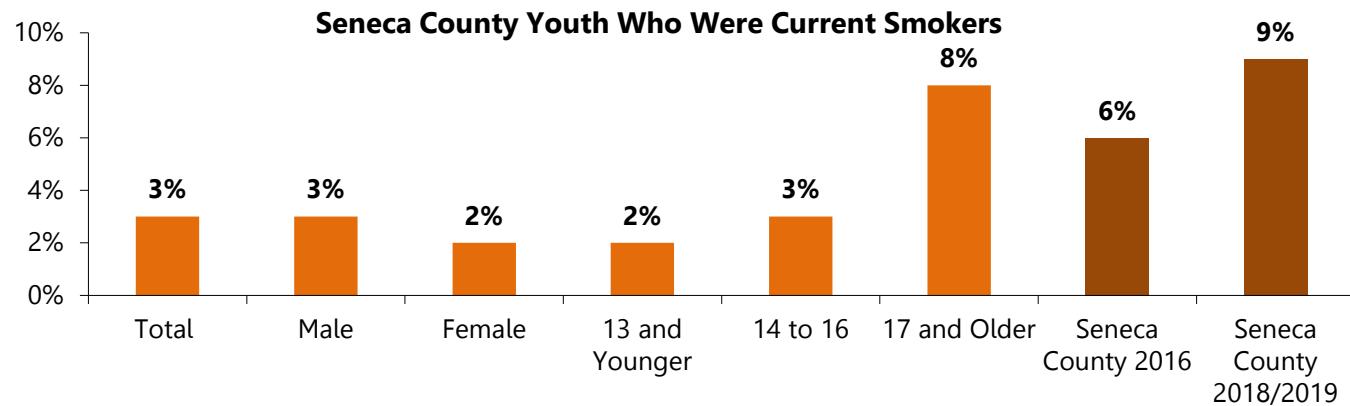
YOUTH WEIGHT STATUS

Twenty-four percent (24%) of Seneca County youth were obese, according to body mass index (BMI) by age. Thirteen percent (13%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week.



YOUTH TOBACCO/ELECTRONIC VAPOR PRODUCT USE

Three percent (3%) of Seneca County youth were current smokers. Fourteen percent (14%) of youth were current electronic vapor product users, having vaped at some time in the past 30 days.

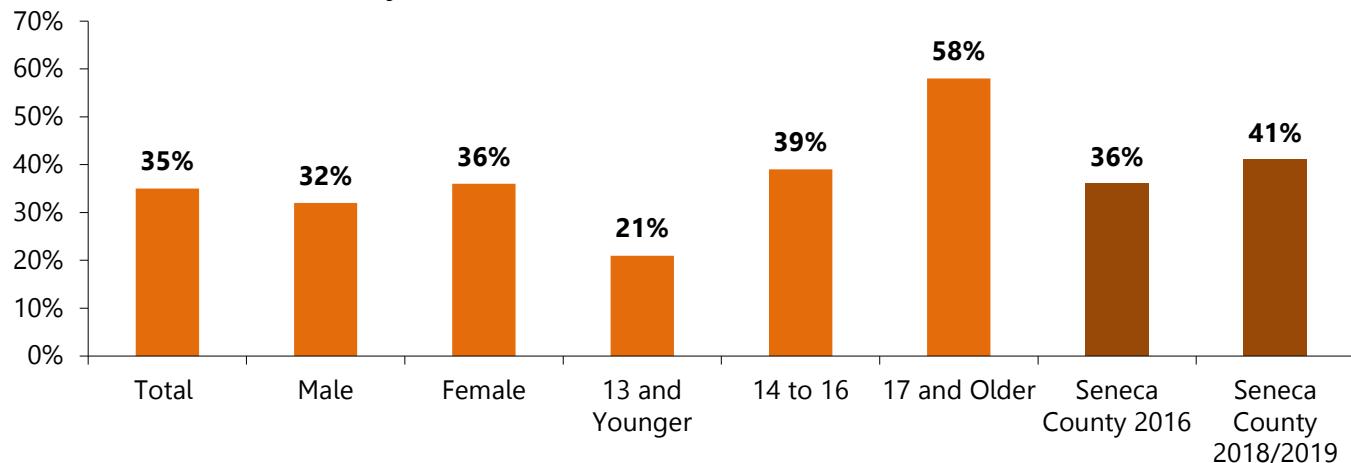


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

YOUTH ALCOHOL CONSUMPTION

Twelve percent (12%) of youth had at least one drink of alcohol in the past 30 days, defining them as a current drinker. During the past 30 days, 15% of all Seneca County youth had ridden in a car driven by someone who has been drinking alcohol.

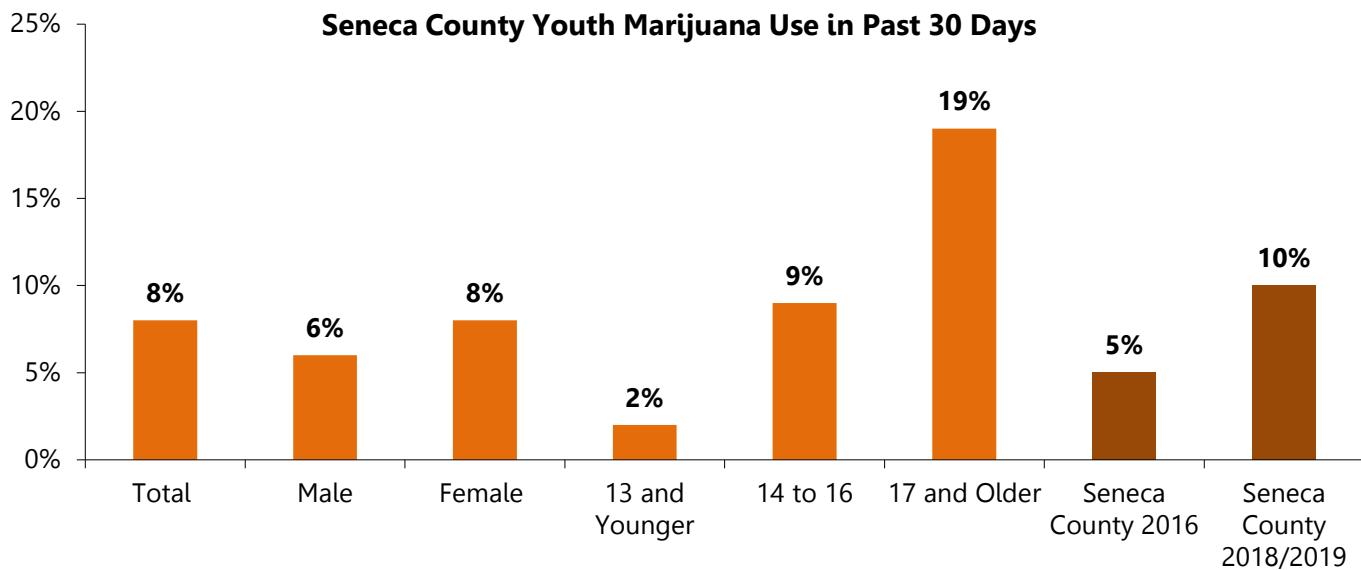
Seneca County Youth Who Had At Least One Drink In Their Lifetime



YOUTH DRUG USE

Eight percent (8%) of Seneca County youth had used marijuana at least once in the past 30 days, increasing to 14% of those ages 17 and older. Two percent (2%) of youth used prescription drugs not prescribed for them in the past month.

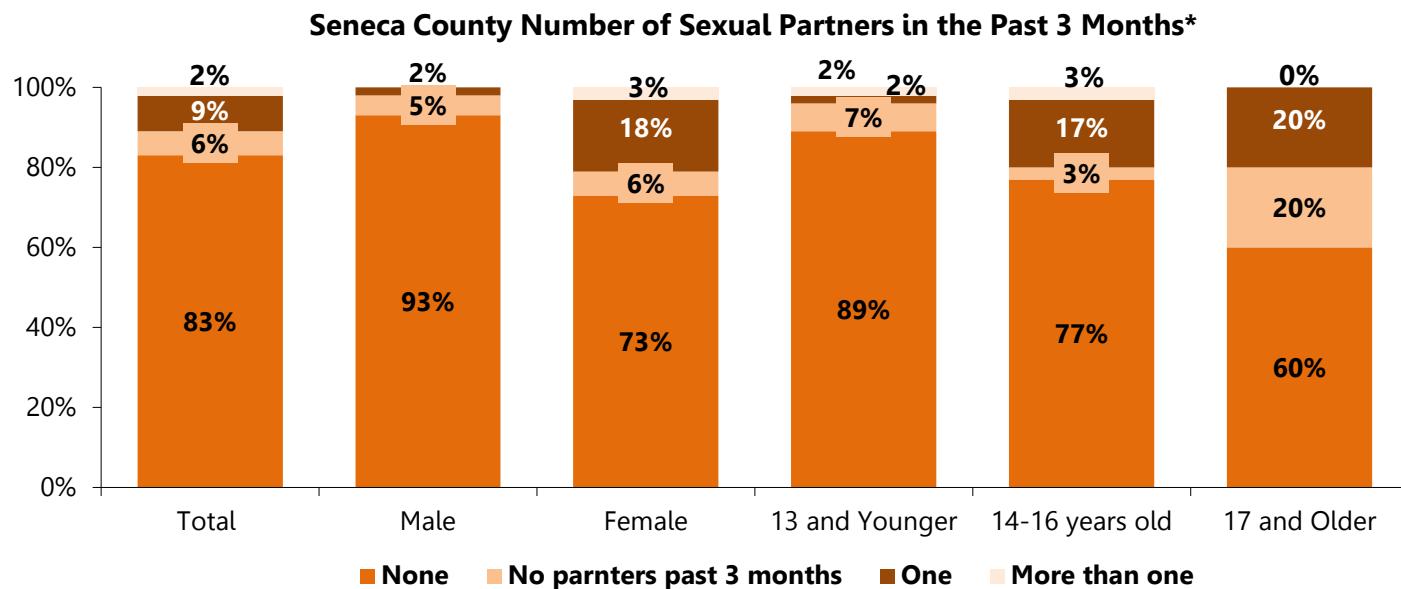
Seneca County Youth Marijuana Use in Past 30 Days



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

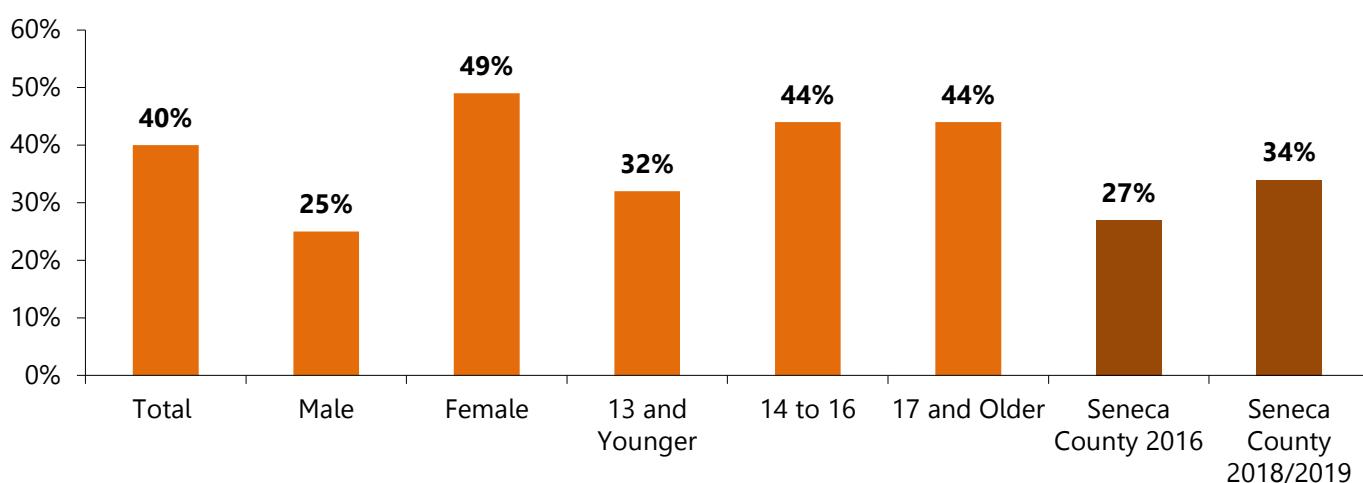
Seventeen percent (17%) of all Seneca County youth ever had sexual intercourse, increasing to 60% of those ages 17 to 19 years old. Among those who ever had sex, 67% of youth had sexual intercourse with one or more persons during the past 3 months.



YOUTH MENTAL HEALTH

Nineteen percent (19%) of youth had seriously considered attempting suicide in the past year, and 9% attempted suicide in the past 12 months. Among all youth in Seneca County, 43% had ever visited a doctor, nurse, therapist, social worker, or counselor for a mental health problem.

Seneca County Youth Who Felt Sad or Hopeless for Two or More Weeks in a Row

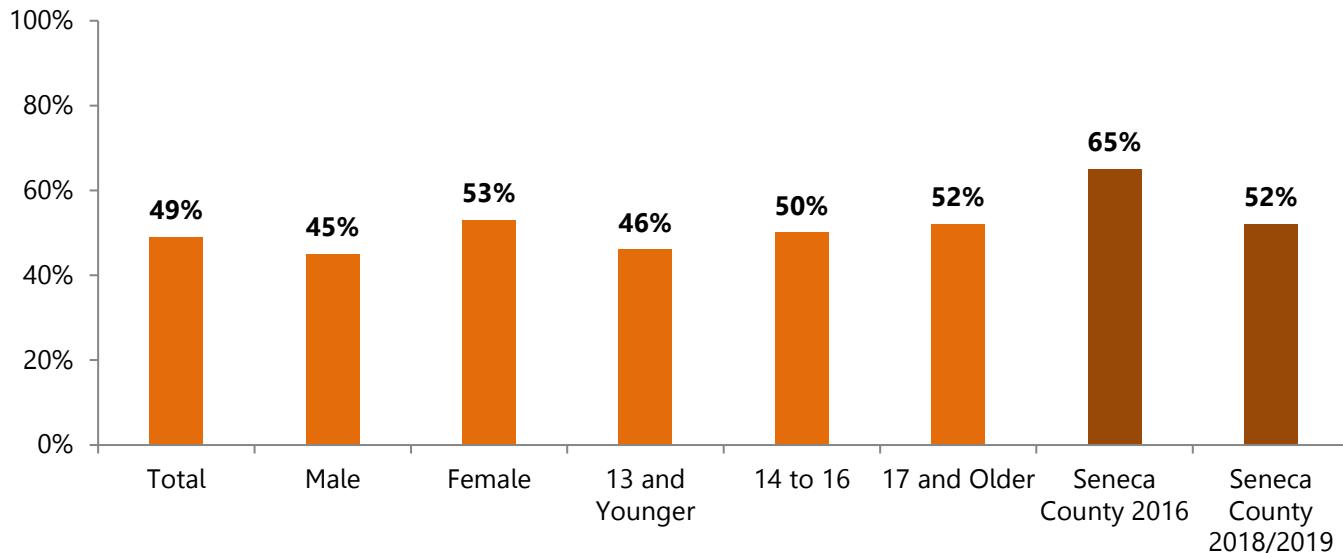


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

YOUTH SOCIAL DETERMINANTS OF HEALTH

Almost one-third (32%) of youth had three or more adverse childhood experiences (ACEs). Nine percent (9%) of Seneca County youth drivers had texted while driving in the past 30 days.

Seneca County Youth Who Visited a Doctor 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.

YOUTH VIOLENCE

Eighteen percent (18%) of youth had been involved in a physical fight, increasing to 24% of males. Forty-three percent (43%) of youth had been bullied in the past year.

Adult Trend Summary

Adult Variables	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Healthcare Coverage, Access, and Utilization							
Uninsured	11%	15%	8%	9%	7%	9%	9%
Visited a doctor for a routine checkup (in the past 12 months) 	52%	57%	68%	68%	75%	77%	76%
Unable to see a doctor due to cost 	16%	19%	12%	12%	N/A	9%	10%
Had at least one person they thought of as their personal doctor or health care provider	86%	88%	81%	90%	87%	79%	77%
Preventive Medicine							
Had a pneumonia vaccination (age 65 and over)	N/A	46%	58%	80%	67%	72%	72%
Had a flu shot within the past year (age 65 and older)	38%	44%	71%	72%	73%	65%	68%
Ever had a shingles or zoster vaccine	N/A	5%	13%	19%	20%	29% [†]	29% [†]
Had a clinical breast exam in the past two years (age 40 and over)	N/A	65%	64%	60%	56%	N/A	N/A
Had a mammogram in the past two years (age 40 and over)	N/A	68%	69%	69%	66%	71%	72%
Had a Pap smear in the past three years (ages 21-65)	N/A	72%	67%	67%	70%	77%	78%
Had a PSA test in within the past two years (age 40 and over)	N/A	52%	N/A	53%	51%	32%	32%
Health Status Perceptions							
Rated general health as good, very good, or excellent	88%	87%	85%	87%	86%	85%	86%
Rated general health as excellent or very good	55%	50%	47%	52%	44%	55%	57%
Rated general health as fair or poor 	12%	13%	15%	14%	14%	16%	13%
Rated physical health as not good on four or more days (in the past 30 days)	21%	20%	22%	23%	18%	24%*	23%*
Average number of days that physical health not good (in the past 30 days) (County Health Rankings) 	N/A	3.7	3.8	3.1	3.7	4.1**	4.7**
Rated mental health as not good on four or more days (in the past 30 days)	16%	23%	27%	25%	35%	29%*	26%*
Average number of days that mental health not good (in the past 30 days) (County Health Rankings) 	N/A	4.6	3.8	3.3	4.9	4.8**	4.1**
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past 30 days)	12%	23%	26%	24%	30%	N/A	N/A

N/A - Not Available

[†]2017 BRFSS Data

^{*}2019 BRFSS Data

^{**}2018 BRFSS as compiled by 2021 County Health Rankings

 Indicates alignment with Ohio State Health Assessment (SHA)

Adult Variables	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Weight Status							
Obese (includes severely and morbidly obese, BMI of 30.0 and above) 	27%	36%	39%	39%	39%	36%	32%
Overweight (BMI of 25.0 – 29.9)	41%	35%	35%	39%	38%	34%	35%
Normal weight (BMI of 18.5 – 24.9)	31%	28%	25%	20%	23%	29%	31%
Tobacco Use							
Current smoker (currently smoke some or all days) 	19%	17%	13%	14%	15%	19%	16%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	26%	25%	29%	22%	21%	24%	25%
Alcohol Consumption							
Current drinker (drank alcohol at least once in the past month)	56%	47%	56%	58%	58%	51%	53%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days) 	21%	19%	19%	26%	25%	16%	16%
Drove after having perhaps too much alcohol to drink	N/A	N/A	7%	4%	6%	3%	2%
Drug Use							
Adults who used marijuana in the past 6 months	5%	5%	4%	5%	7%	N/A	N/A
Adults who used recreational drugs in the past 6 months	0%	<1%	1%	6%	7%	N/A	N/A
Adults who misused prescription medication in the past 6 months	2%	4%	8%	5%	7%	N/A	N/A
Sexual Behavior							
Had more than one sexual partner in past year	6%	5%	6%	6%	3%	N/A	N/A
Mental Health							
Considered attempting suicide in the past year	4%	4%	6%	3%	3%	N/A	N/A
Attempted suicide in the past year	<1%	<1%	3%	<1%	<1%	N/A	N/A
Felt so sad or hopeless almost every day for two weeks or more in a row	13%	13%	16%	11%	13%	N/A	N/A
Cardiovascular Health							
Had angina or coronary heart disease 	N/A	6%	5%	8%	6%	5%	4%
Had a heart attack	5%	7%	6%	3%	6%	5%	4%
Had a stroke	3%	2%	2%	3%	4%	4%	3%
Had high blood pressure 	33%	30%	28%	37%	38%	35%*	33%*
Had high blood cholesterol	31%	36%	37%	37%	36%	33%*	33%*
Had blood cholesterol checked within past 5 years	N/A	79%	79%	83%	78%	85%*	87%*

N/A - Not Available

*2019 BRFSS Data

 Indicates alignment with Ohio SHA

Adult Variables	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Arthritis, Asthma, and Diabetes							
Ever diagnosed with some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia	29%	29%	38%	34%	31%	31%*	25%*
Had been diagnosed with asthma	13%	16%	17%	15%	14%	14%	14%
Had been diagnosed with diabetes 	11%	9%	11%	10%	11%	12%	11%
Had been diagnosed with pre-diabetes or borderline diabetes	N/A	6%	7%	8%	11%	2%	2%
Ever diagnosed with pregnancy related diabetes	N/A	N/A	5%	3%	1%	1%	1%
Oral Health							
Visited a dentist or dental clinic (within the past year)	62%	59%	67%	60%	63%	65%	67%
Visited a dentist or dental clinic (5 or more years ago)	11%	13%	10%	9%	14%	N/A	N/A

*2019 BRFSS Data

N/A - Not Available

 Indicates alignment with Ohio SHA

Youth (OHYES!) Trend Summary

Youth Variables	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES (7 th -12 th)	Seneca County 2022 OHYES (7 th -12 th)	Seneca County 2022 OHYES (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 (9 th -12 th)
Weight Status								
Obese	13%	17%	19%	19%	24%	24%	17%	16%
Overweight	14%	14%	12%	18%	19%	18%	12%	16%
Physically active at least 60 minutes per day on every day in past week	29%	21%	32%	26%	26%	22%	24%	23%
Physically active at least 60 minutes per day on 5 or more days in past week	54%	43%	53%	60%	50%	49%	43%	44%
Did not participate in at least 60 minutes of physical activity on any day in past week	8%	16%	9%	10%	13%	12%	21%	17%
Tobacco/Electronic Vapor Product Use								
Current smoker (smoked on at least 1 day during the past 30 days)	11%	9%	6%	9%	3%	4%	5%	6%
Current cigar smoker (cigars, cigarillos, or little cigars, on at least 1 day during the 30 days)	N/A	N/A	N/A	8%	3%	4%	7%	6%
Current electronic vapor product user (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on at least 1 day during the 30 days)	N/A	N/A	N/A	22%	14%	17%	30%	33%
Current smokeless tobacco user (chewing tobacco, snuff, dip, snus, or dissolvable tobacco products—such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, Copenhagen, Camel Snus, Marlboro Snus, General Snus, Ariva, Stonewall, or Camel Orbs—not counting any electronic vapor products, on at least 1 day during the 30 days)	N/A	N/A	N/A	4%	3%	2%	10%	4%

N/A – Not Available

Youth Variables	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES (7 th -12 th)	Seneca County 2022 OHYES (7 th -12 th)	Seneca County 2022 OHYES (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 (9 th -12 th)
Alcohol Consumption								
Ever drank alcohol (at least one drink of alcohol on at least 1 day during their life)	60%	50%	36%	41%	35%	45%	N/A	N/A
Current drinker (at least one drink of alcohol on at least 1 day during the past 30 days)	29%	20%	11%	14%	12%	16%	26%	29%
Binge drinker (drank five or more drinks within a couple of hours on at least 1 day during the past 30 days)	18%	11%	5%	7%	5%	8%	13%	14%
Drank for the first time before age 13 (of all youth)	25%	17%	11%	16%	18%	16%	16%	15%
Drank and drove (of youth drivers)	4%	5%	2%	2%	2%	3%	N/A	5%
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)	19%	21%	14%	14%	15%	15%	N/A	17%
Drug Use								
Currently use marijuana (in the past 30 days)	10%	9%	5%	10%	8%	12%	16%	22%
Tried marijuana for the first time before age 13	N/A	3%	4%	3%	6%	7%	N/A	6%
Ever took prescription drugs without a doctor's prescription (in their lifetime)	10%	7%	4%	11%*	10%	11%	12%	14%
Ever used methamphetamines (in their lifetime)	N/A	N/A	N/A	N/A	<1%	1%	N/A	2%
Ever used cocaine (in their lifetime)	N/A	N/A	N/A	N/A	1%	1%	4%	4%
Ever used heroin (in their lifetime)	N/A	N/A	N/A	N/A	1%	1%	2%	2%
Ever used inhalants (in their lifetime)	N/A	N/A	N/A	N/A	2%	3%	8%	6%
Ever took steroids without a doctor's prescription (in their lifetime)	N/A	N/A	N/A	N/A	<1%	<1%	N/A	2%
Ever used ecstasy (also called MDMA in their lifetime)	N/A	N/A	N/A	N/A	<1%	1%	N/A	4%
Were offered, sold, or given an illegal drug on school property (in the past 12 months)	9%	5%	2%	5%	7%	9%	15%**	22%**
Sexual Behavior								
Ever had sexual intercourse	N/A	N/A	N/A	N/A	17%	26%	37%	N/A
Currently sexually active (had sexual intercourse with at least one person, during the past 3 months)	N/A	N/A	N/A	N/A	12%	21%	27%	27%

N/A – Not Available

*OHYES questionnaire asked this question slightly different from the YRBSS. Please compare with caution.

**YRBS is for youth who were ever offered, sold, or given an illegal drug on school property

Youth Variables	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES (7 th -12 th)	Seneca County 2022 OHYES (7 th -12 th)	Seneca County 2022 OHYES (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 (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)	21%	23%	27%	34%	40%	44%	33%	37%
Seriously considered attempting suicide (in the past 12 months)	N/A	N/A	N/A	N/A	19%	24%	16%	19%
Attempted suicide (in the past 12 months)	N/A	N/A	N/A	N/A	9%	11%	7%	9%
Social Determinants of Health								
Visited a doctor or other healthcare professional (for a routine check-up in the past year)	66%	68%	65%	52%	49%	51%	N/A	N/A
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work)	74%	74%	70%	67%	64%	66%	N/A	N/A
Unintentional Injuries and Violence								
Were in a physical fight (in the past 12 months)	N/A	N/A	N/A	20%	17%	15%	19%	22%
Were in a physical fight on school property (in the past 12 months)	N/A	N/A	N/A	8%	8%	6%	N/A	8%
Threatened or injured with a weapon on school property (in the past 12 months)	7%	5%	5%	11%	17%	19%	N/A	7%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)	4%	5%	4%	8%	22%	21%	N/A	9%
Bullied on school property (in the past year)	N/A	33%	26%	25%	27%	27%	14%	20%
Electronically bullied (bullied through e-mail, chat rooms, instant messaging, websites or texting in the past year)	10%	13%	9%	10%	19%	19%	13%	16%
Experienced physical dating violence (including being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with in the past 12 months)	N/A	N/A	N/A	N/A	9%	10%	10%	8%

N/A – Not Available

Health Care Access: Health Care Coverage

Key Findings

Seven percent (7%) of Seneca County adults were without health care coverage. Those most likely to be uninsured were adults with an income level under \$25,000 (15%). The main reason adults gave for being without health care coverage were because of cost/could not afford to pay the premiums (45%).

Health Coverage

- In 2022, 93% Seneca County adults had health care coverage, leaving 7% of adults uninsured.
- Adults used the following types of health coverage: employer (46%); Medicare (20%); Medicaid or medical assistance (12%); someone else's employer (9%); self-paid plan (4%); multiple, including private sources (3%); military, CHAMPUS, TriCare, CHAMPVA, or the VA (3%); Health Insurance Marketplace (2%); and multiple, including government sources (1%).
- Seneca County adult health care coverage included the following: medical (94%), prescription coverage (92%), immunizations (88%), preventive health (78%), vision/eyeglasses (72%), dental (71%), outpatient therapy (71%), mental health (64%), durable medical equipment (41%), alcohol and drug treatment (31%), skilled nursing/assisted living (27%), home care (24%), hospice (22%), tobacco cessation (22%), and transportation (16%).

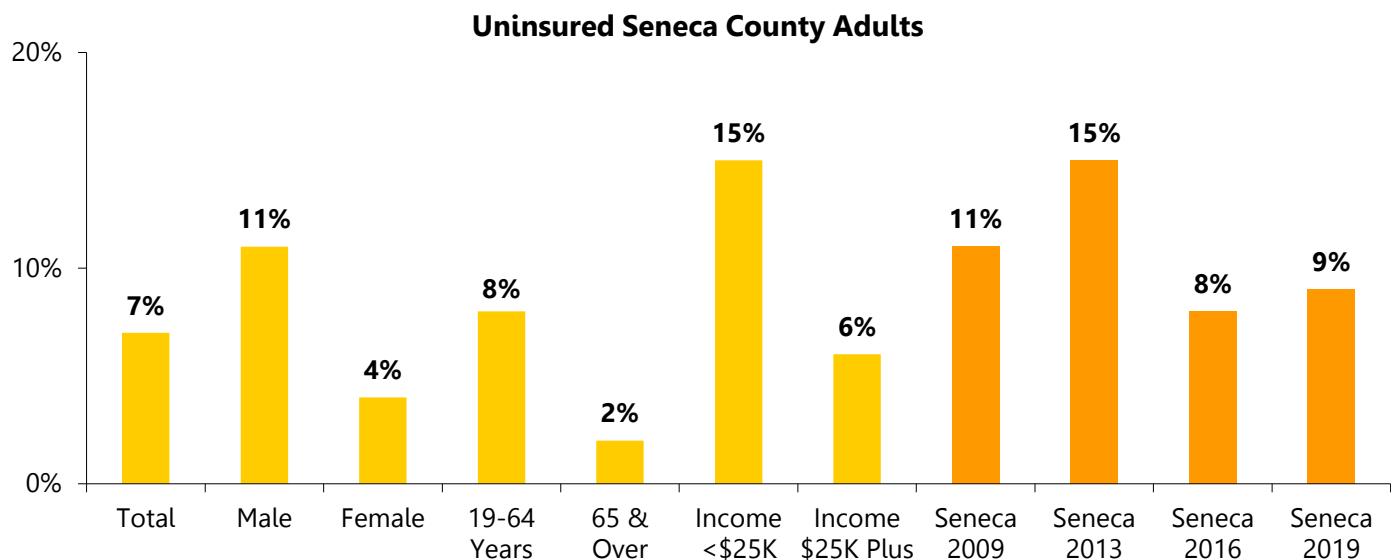
2,954 Seneca County adults were uninsured.

- Seneca County adults had the following issues regarding their health care coverage:
 - Cost (37%)
 - Opted out of certain coverage because they could not afford it (12%)
 - Service not deemed medically necessary (9%)
 - Could not understand their insurance plan (8%)
 - Working with their insurance company (7%)
 - Opted out of certain coverage because they did not need it (6%)
 - Provider no longer covered (5%)
 - Limited visits (4%)
 - Pre-existing conditions (3%)
 - Service no longer covered (1%)
- The top 3 reasons uninsured adults gave for being without health care coverage were:
 - 1) Cost/could not afford to pay the premiums (45%)
 - 2) Lost their job or changed employers (42%)
 - 3) Became ineligible (21%)

Note: Percentages do not equal 100% because respondents could select more than one reason

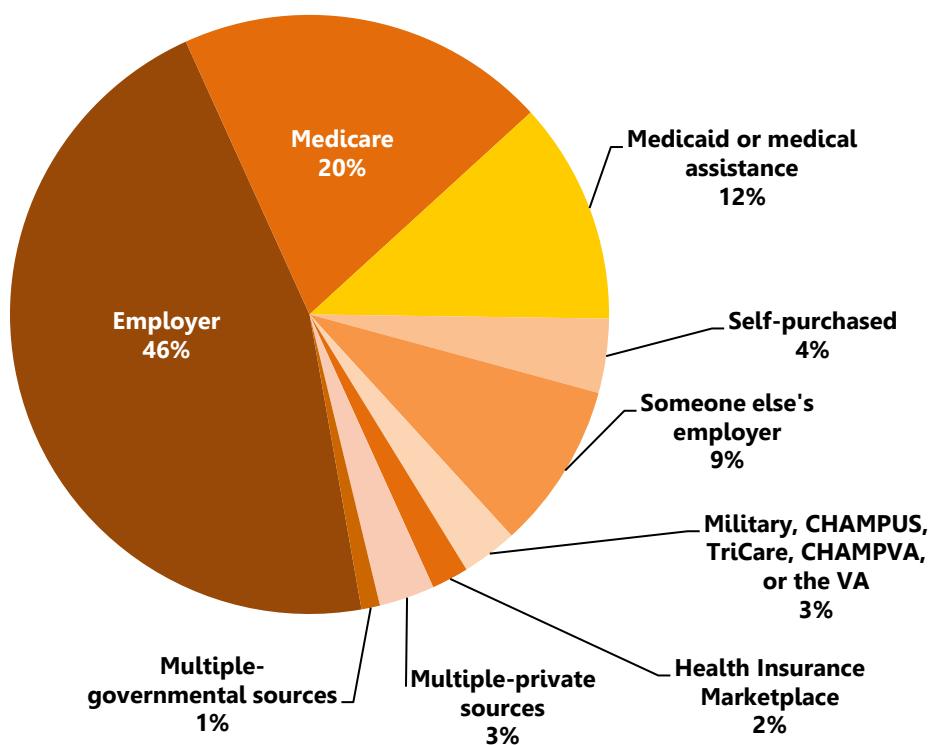
Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Uninsured	11%	15%	8%	9%	7%	9%	11%

The following graph shows the percentage of Seneca County adults who were uninsured. An example of how to interpret the information in the graph includes: 7% of all adults were uninsured, including 15% of those with an income less than \$25,000. The pie chart shows sources of Seneca County adults' health care coverage.



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

Source of Health Coverage for Seneca County Adults



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

Health Coverage Includes:	Yes	No	Don't Know
Medical	94%	3%	3%
Prescription Coverage	92%	4%	4%
Immunizations	88%	3%	9%
Preventive Health	78%	2%	20%
Vision/Eye Glasses	72%	23%	5%
Dental	71%	24%	5%
Outpatient Therapy (ex: occupational therapy, physical therapy)	71%	2%	27%
Mental Health	64%	5%	41%
Durable Medical Equipment	41%	10%	49%
Alcohol and Drug Treatment	31%	9%	60%
Skilled Nursing/Assisted Living (ex: inpatient rehab/therapy)	27%	5%	68%
Home Care	24%	12%	64%
Hospice	22%	9%	69%
Tobacco cessation	22%	8%	70%
Transportation	16%	16%	68%

Healthy People 2030 Access to Health Services (AHS)

Objective	Seneca County 2022	Ohio 2020	U.S. 2020	Healthy People 2030 Target
AHS-1.1: Persons under age of 65 years with health insurance	75% age 20-24 94% age 25-34 91% age 35-44 91% age 45-54 94% age 55-64	86% age 18-24 85% age 25-34 89% age 35-44 90% age 45-54 92% age 55-64	82% age 18-24 80% age 25-34 84% age 35-44 86% age 45-54 91% age 55-64	92%

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

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.

(Sources: Healthy People 2030 Objectives, 2020 BRFSS, 2022 Seneca County Health Assessment)

Health Care Access: Access and Utilization

Key Findings

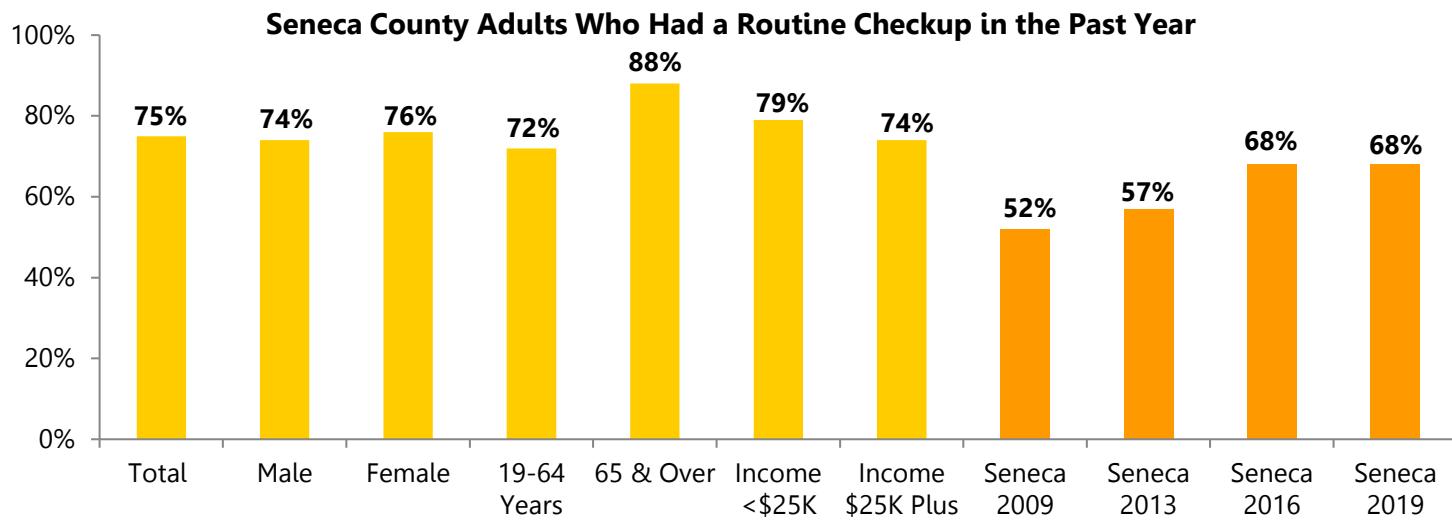
Three-fourths (75%) of Seneca County adults had visited a doctor for a routine checkup in the past year. Eighty-seven percent (87%) of adults reported they had one person they thought of as their personal doctor or health care provider.

Health care Access

- Three-fourths (75%) of Seneca County adults visited a doctor for a routine checkup in the past year, increasing to 88% of those over the age of 65.
- Fifty-two percent (52%) of adults reported they had one person they thought of as their personal doctor or health care provider. Thirty-five percent (35%) of adults had more than one person they thought of as their personal health care provider, and 13% did not have one at all.
- Thirty-five percent (35%) of adults indicated they had no usual place for health care services.
- Reasons for **not** having a usual source of medical care included: had two or more usual places (17%), had not needed a doctor (8%), no insurance (3%), previous doctor unavailable/moved (2%), do not like/trust/believe in doctors (2%), cost (1%), outstanding bills (1%), did not accept Medicare or Medicaid (1%), and not accepting new patients (<1%).
- Adults visited the following places for health care services or advice:
 - Doctor's office (67%)
 - Multiple places, including a doctor's office (7%)
 - Family and friends (6%)
 - Urgent care center (5%)
 - Internet (4%)
 - Hospital emergency room (3%)
 - Multiple places, not including a doctor's office (1%)
 - Community health center (1%)
 - Department of Veteran's Affairs (VA) (1%)
 - Chiropractor (<1%)
 - Health department (<1%)
- Seneca County adults did **not** get the following major or preventive care because of cost: medication (11%), doctor/health care provider (9%), lab testing (6%), mental health services (6%), weight loss program (6%), surgery (5%), Pap smear (4%), mammogram (4%), colonoscopy (4%), family planning services (4%), smoking cessation (3%), alcohol or drug treatment (2%), prostate-specific antigen (PSA) test (2%), and immunizations (1%).
- One-quarter (25%) of adults did **not** get their prescriptions from their doctor filled in the past year. Of those who did not get their prescriptions filled, they gave the following reasons: too expensive (32%), they did not think they needed it (28%), they did not have insurance (11%), there was no generic equivalent (7%), side effects (7%), they were taking too many medications (5%), they stretched their current prescription by taking less than prescribed (1%), and medication was not available/on backorder (1%). Thirty percent (30%) of adults had no prescriptions to be filled.
- Seneca County adults had the following transportation issues when they needed services: could not afford gas (4%), no car (3%), cost of public or private transportation (2%), did not feel safe to drive (2%), no public transportation available or accessible (2%), no driver's license/suspended license (1%), limited public transportation available or accessible (1%), disabled (1%), no car insurance (1%), no transportation before or after 8 a.m.- 4:30 p.m. (1%), and other car issues/expenses (3%).
- Four percent (4%) of adults reported two or more transportation issues when they needed services.

- Seneca County adults used the following alternative therapies in their lifetime:
 - Massage (22%)
 - Yoga or tai chi (9%)
 - Acupuncture (4%)
 - Aromatherapy (4%)
 - Herbalism (3%)
 - Hypnosis (2%)
 - Reiki (2%)
 - Reflexology (<1%)
 - Another alternative therapy (5%)

The following graph shows the percentage of Seneca County adults who had a routine checkup in the past year. An example of how to interpret the information in the graph includes: 75% of all adults had a routine check-up in the past year, including 74% of males and 88% of those ages 65 and older.



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

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Visited a doctor for a routine checkup (in the past 12 months)	52%	57%	68%	68%	75%	77%	76%
Had at least one person they thought of as their personal doctor or health care provider	86%	88%	81%	90%	87%	79%	77%

Availability of Services

- Seneca County adults reported they had looked for the following programs: depression, anxiety or mental health (14%); weight problems (7%); disability (7%); marital or family problems (7%); nutritional services (5%); assist in care for the disabled (5%); cancer support group/counseling (3%); family planning (3%); end-of-life/hospice care (3%); tobacco cessation (2%); detoxification for opiates/heroin (2%); gambling abuse (1%); alcohol abuse (1%); and drug abuse (1%).

Seneca County Adults Able to Access Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Seneca County adults who have looked but have <u>NOT</u> found a specific program	Seneca County adults who have looked and have found a specific program
Depression, anxiety, or some other mental health problem (14% of all adults looked)	30%	70%
Weight problem (7% of all adults looked)	52%	48%
Disability (7% of all adults looked)	35%	65%
Marital/family problems (7% of all adults looked)	9%	91%
Nutritional services (5% of all adults looked)	76%	24%
Assist in care for the disabled (5% of all adults looked)	27%	73%
Cancer support group/counseling (3% of all adults looked)	44%	56%
Family planning (3% of all adults looked)	10%	90%
End of life/hospice care (3% of all adults looked)	9%	91%
Tobacco cessation (2% of all adults looked)	60%	40%
Detoxification for opiates/heroin (2% of all adults looked)	20%	80%
Gambling abuse (1% of all adults looked)	50%	50%
Alcohol abuse (1% of all adults looked)	25%	75%
Drug abuse (1% of all adults looked)	25%	75%

Health Care Access: Preventive Medicine

Key Findings

Sixty-seven percent (67%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Over half (54%) of Seneca County adults had a flu vaccine during the past 12 months, increasing to 73% of adults ages 65 and over.

Preventive Medicine

- Over half (54%) of Seneca County adults had a flu vaccine during the past 12 months, increasing to 73% of adults ages 65 and over.
- Over one-fourth (27%) of adults had a pneumonia vaccine in their life, increasing to 67% of those ages 65 and over.
- Seneca County adults had the following vaccines:
 - MMR (measles) in their lifetime (81%)
 - Tetanus, diphtheria, and pertussis (Tdap or Td) in the past 10 years (75%)
 - COVID-19 (72%)
 - Chicken pox in their lifetime (65%)
 - Hepatitis B in their lifetime (43%)
 - Hepatitis A in their lifetime (32%)
 - Haemophilus influenzae or Influenza type B (Hib) vaccine in their lifetime (30%)
 - Zoster (shingles) vaccine in their lifetime (20%)
 - Meningococcal vaccine in their lifetime (19%)
 - Human papillomavirus (HPV) vaccine in their lifetime (13%)
- Adults reported **not** getting the COVID-19 vaccine for the following reasons: did not want it (21%), did not think it worked (13%), did not think they needed it (12%), concerned about getting sick (7%), religious beliefs (6%), and other reasons (8%).

Preventive Health Screenings and Exams

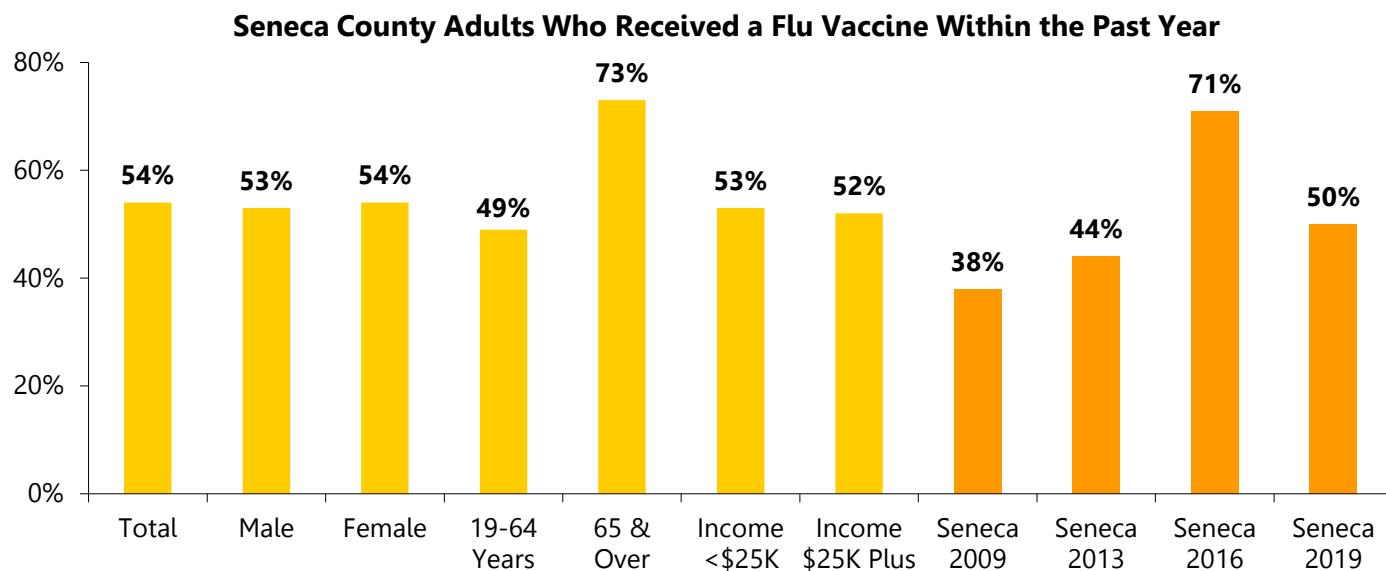
- In the past year, 54% of Seneca County women ages 40 and over had a mammogram.
- Sixty-four percent (64%) of males age 50 and over had a PSA test at some time in their life, and 47% had one in the past year.
- See the Women and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Seneca County adults.

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Had a pneumonia vaccination (age 65 and over)	N/A	46%	58%	80%	67%	72%	72%
Had a flu shot within the past year (age 65 and older)	38%	44%	71%	72%	73%	65%	68%
Ever had a shingles or zoster vaccine	N/A	5%	13%	19%	20%	29%*	29%*

N/A – Not Available

**2017 BRFSS Data*

The following graph shows the percentages of Seneca County adults who received a flu vaccine within the past year. An example of how to interpret the information in the graph includes: 54% of all adults received the flu vaccine in the past year, including 53% of males and 73% 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 2030
Immunization and Infectious Diseases (IID)**

Objective	Seneca County 2022	Healthy People 2030 Target
IID-09: Increase the proportion of persons who are vaccinated annually against seasonal influenza	54%	70%

(Sources: Healthy People 2030 Objectives, 2022 Seneca County Community Health Assessment)

Health Care Access: Women's Health

Key Findings

Over half (54%) of Seneca County women over the age of 40 reported having a mammogram in the past year. Fifty-eight percent (58%) of women had a clinical breast exam and 39% had a Pap smear to detect cancer of the cervix in the past year. Seventy-five percent (75%) of Seneca County women were overweight or obese, 36% had high blood pressure, 28% had high blood cholesterol, and 16% were identified as current smokers, known risk factors for cardiovascular diseases.

Women's Health Screenings

- Fifty-eight percent (58%) of women had a mammogram at some time in their life, and 34% had this screening in the past year.
- Over half (54%) of women ages 40 and over had a mammogram in the past year and 66% had one in the past two years.
- Ninety-two percent (92%) of Seneca County women had a clinical breast exam at some time in their life, and 58% had one within the past year. Fifty-six percent (56%) of women ages 40 and over had a clinical breast exam in the past two years.
- Ninety percent (90%) of Seneca County women have had a Pap smear and 39% reported having had the exam in the past year. Seventy percent (70%) of women ages 21-to-65 had a Pap smear in the past three years.

Women's Health Concerns

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Seneca County, the 2022 health assessment identified that:
 - 75% of women were overweight or obese (65% Ohio, 62%* U.S., 2020 BRFSS)
 - 36% were diagnosed with high blood pressure (32% Ohio, 31% U.S., 2019 BRFSS)
 - 28% were diagnosed with high blood cholesterol (32% Ohio, 32% U.S., 2019 BRFSS)
 - 16% of all women were current smokers (19% Ohio, 14%* U.S., 2020 BRFSS)
 - 10% had been diagnosed with diabetes (13% Ohio, 11%* U.S., 2020 BRFSS)

*2019 BRFSS Data

Pregnancy

- Twenty-four percent (24%) of Seneca County women had been pregnant in the past 5 years.
- During their last pregnancy within the past five years, Seneca County women: got prenatal care within the first 3 months (77%), took a multi-vitamin with folic acid (65%), had a dental exam (37%), experienced depression (33%), received WIC services (21%), and smoked cigarettes or use other tobacco products (5%).

Seneca County Female Leading Causes of Death, 2017 – 2019

Total female deaths: 976

1. Heart Disease (28% of all deaths)
2. Cancer (18%)
3. Alzheimer's Disease (8%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (6%)

(Source: Ohio Public Health Data Warehouse, 2017-2019)

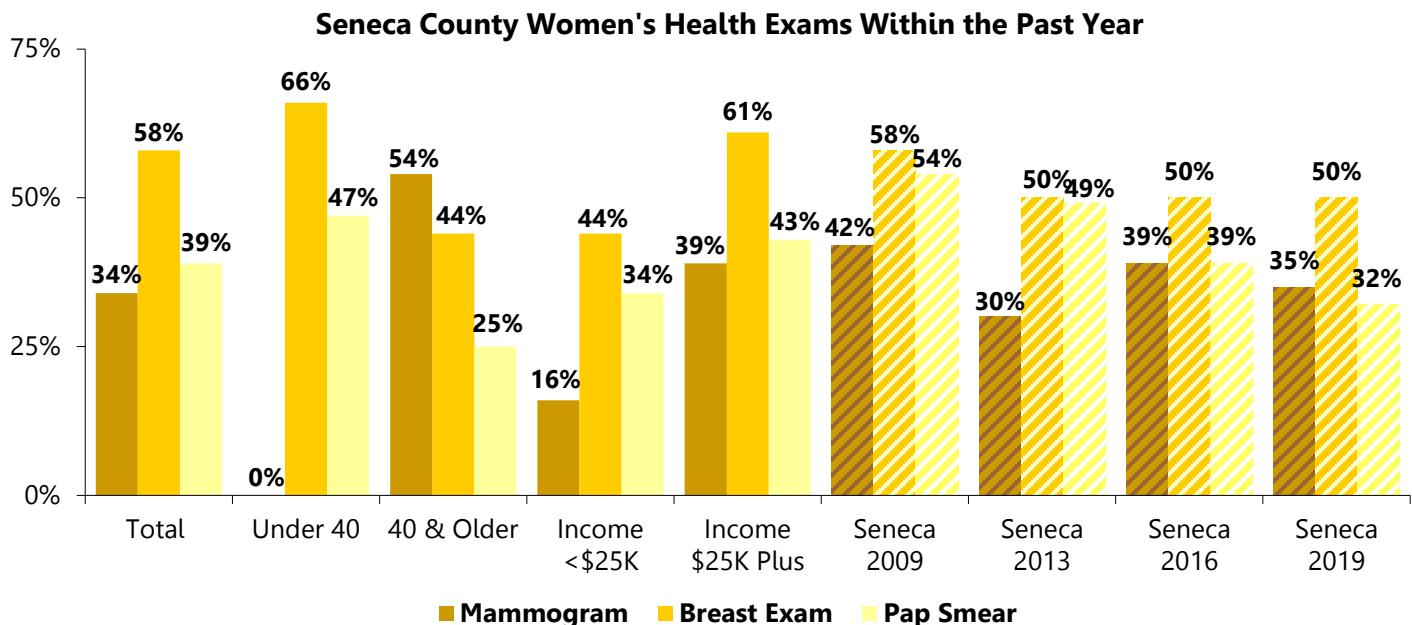
Ohio Female Leading Causes of Death, 2017 – 2019

Total Female Deaths: 183,975

1. Heart Diseases (22% of all deaths)
2. Cancers (20%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (6%)
5. Alzheimer's disease (6%)

(Source: Ohio Public Health Data Warehouse, 2017-2019)

The following graph shows the percentage of Seneca County female adults who had various health exams in the past year. An example of how to interpret the information shown on the graph includes: 34% of Seneca County females had a mammogram within the past year, 58% had a clinical breast exam, and 39% had a Pap smear.



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

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Had a clinical breast exam in the past two years (age 40 and over)	N/A	65%	64%	60%	56%	N/A	N/A
Had a mammogram in the past two years (age 40 and over)	N/A	68%	69%	69%	66%	71%	72%
Had a Pap smear in the past three years	N/A	72%	67%	67%*	70%*	77%	78%

N/A – Not Available

*Reported for women ages 21-65

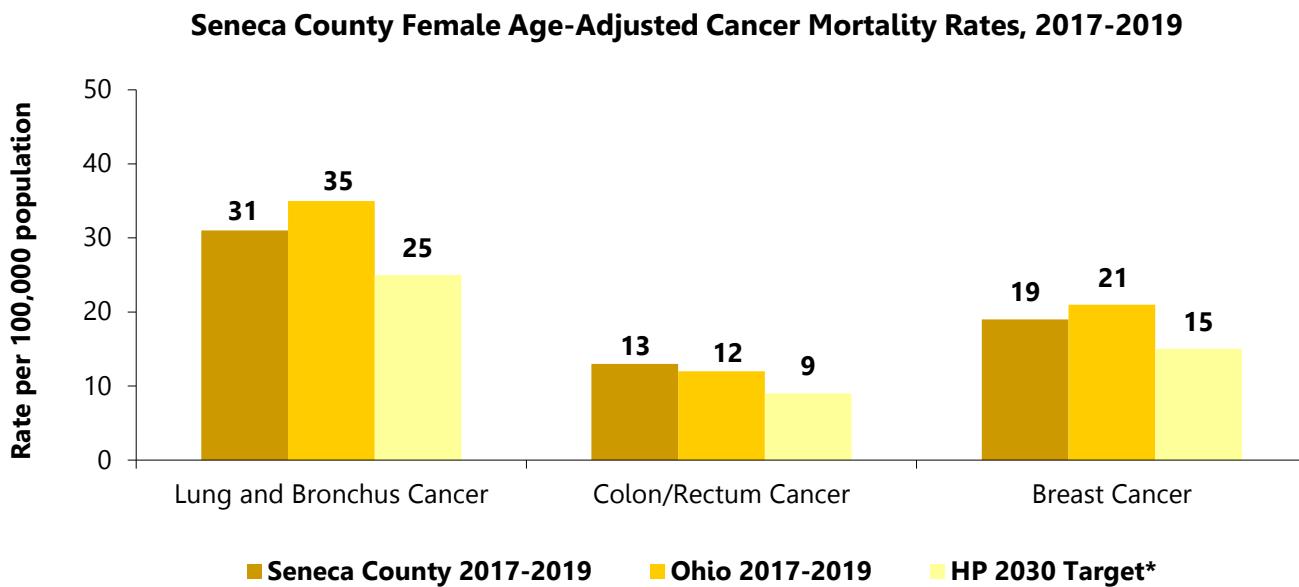
Women's Health Data

- Approximately 14% of adult females ages 18 years or older reported fair or poor health.
- 11% of adult females in the U.S. currently smoke.
- Of the adult females in the U.S., 20% had four or more drinks in one day at least once in the past year.
- Only 49% of adult females in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- 42% of females ages 20 years and older are obese.
- 45% of females ages 20 and older have hypertension.
- There are 11% of females under the age of 65 without healthcare coverage.
- The leading causes of death for females in the United States are heart disease, cancer, and COVID-19.

(Source: CDC, National Center for Health Statistics, Women's Health, Fast Stats, February 1, 2022)

The following graph shows the Seneca County and Ohio age-adjusted cancer mortality rates per 100,000 population for women with comparison to Healthy People 2030 objectives. The graph shows:

- From 2017-to-2019, the Seneca County age-adjusted mortality rate for breast cancer was lower than the Ohio rate but higher than the Healthy People 2030 target objective.



(Source: Ohio Public Health Data Warehouse 2017-2019 and Healthy People 2030)

*Note: The Lung and Colon/Rectum Cancer Healthy People 2030 target rates are not gender specific

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

Many factors over the course of a lifetime can influence your breast cancer risk. You can't change some factors, such as getting older or your family history, but you can help lower your risk of breast cancer by taking care of your health in the following way:

- Keep a healthy weight
- Exercise regularly.
- Don't drink alcohol, or limit alcoholic drinks.
- If you are taking, or have been told to take, hormone replacement therapy or oral contraceptives (birth control pills), ask your doctor about the risks and find out if it is right for you.
- Breastfeed your children, if possible.
- If you have a family history of breast cancer or inherited changes in your BRCA1 and BRCA2 genes, talk to your doctor about other ways to lower your risk:

Staying healthy throughout your life will lower your risk of developing cancer and improve your chances of surviving cancer if it occurs.

(Source: Centers for Disease Control and Prevention, *What Can I Do to Reduce My Risk of Breast Cancer?* Updated September 20, 2021)

Health Care Access: Men's Health

Key Findings

Almost half (47%) of Seneca County males over the age of 50 had a prostate-specific antigen (PSA) test in the past year. Eighty percent (80%) of men were overweight or obese, 44% had been diagnosed with high blood cholesterol, 39% had high blood pressure, and 15% were identified as current smokers, known risk factors for cardiovascular diseases.

Men's Health Screenings

- Forty-three percent (43%) of Seneca County males had a prostate-specific antigen (PSA) test at some time in their life and 29% had one in the past year.
- Fifty-seven percent (57%) of males age 40 and over had a PSA test at some time in their life, and 51% had one in the past two years.
- Sixty-four percent (64%) of males age 50 and over had a PSA test at some time in their life, and 47% had one in the past year.
- One-fourth (25%) of men had done a self-testicular exam in the past year, decreasing to 24% of men ages 50 and over.

Men's Health Concerns

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Seneca County, the 2022 health assessment identified:
 - 80% of men were overweight or obese (73% Ohio, 71%* U.S. 2020 BRFSS)
 - 44% were diagnosed with high blood cholesterol (34% Ohio, 34% U.S., 2019 BRFSS)
 - 39% were diagnosed with high blood pressure (38% Ohio, 35% U.S., 2019 BRFSS)
 - 15% of all men were current smokers (20% Ohio, 17%* U.S. 2020 BRFSS)
 - 11% had been diagnosed with diabetes (12% Ohio, 12%* U.S., 2020 BRFSS)

*2019 BRFSS Data

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Had a PSA test within the past two years (age 40 and over)	N/A	52%	N/A	53%	51%	32%	32%

N/A – Not Available

Seneca County Male Leading Causes of Death, 2017 – 2019

Total male deaths: 908

- Heart Diseases (31% of all deaths)
- Cancer (22%)
- Accidents, Unintentional Injuries (7%)
- Chronic Lower Respiratory Diseases (5%)
- Intentional Self-Harm (Suicide) (3%)

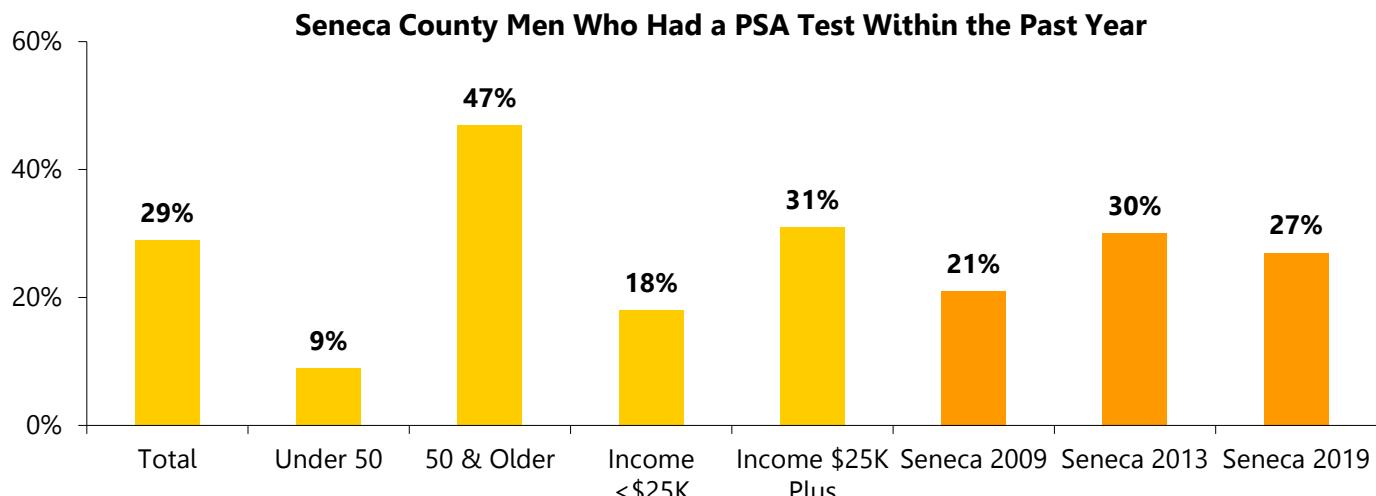
Ohio Male Leading Causes of Death, 2017 – 2019

Total Male Deaths: 187,665

- Heart Diseases (24% of all deaths)
- Cancers (21%)
- Accidents, Unintentional Injuries (9%)
- Chronic Lower Respiratory Diseases (6%)
- Stroke (4%)

(Source: Ohio Public Health Data Warehouse, 2017-2019)

The following graph shows the percentage of Seneca County male adults who had a PSA test in the past year. An example of how to interpret the information shown on the graph includes: 29% of Seneca County males had a PSA test within the past year, increasing to 47% of men ages 50 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.

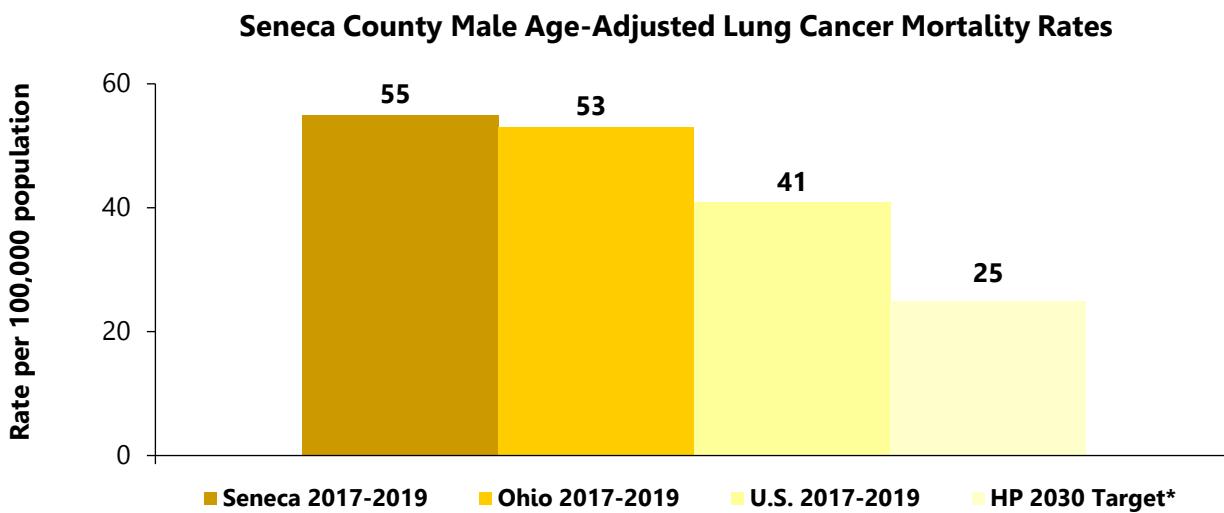
Prostate Cancer Awareness

- The prostate is a walnut-sized organ located just below the bladder and in front of the rectum in men. It produces fluid that makes up a part of semen. The prostate gland surrounds the urethra (the tube that carries urine and semen through the penis and out of the body).
- Prostate cancer is the most common non-skin cancer among American men. Prostate cancers usually grow slowly. Most men with prostate cancer are older than 65 years and do not die from the disease. Finding and treating prostate cancer before symptoms occur may not improve your health or help you live longer.
- Men can have different symptoms for prostate cancer. Some men do not have symptoms at all. Some symptoms of prostate cancer are difficulty starting urination, frequent urination (especially at night), weak or interrupted flow of urine, and blood in the urine or semen.
- There is no way to know for sure if you will get prostate cancer. The older a man is, the greater his risk for getting prostate cancer. Men also have a greater chance of getting prostate cancer if they are African-American or have a father, brother, or son who has had prostate cancer.
- Two tests are commonly used to screen for prostate cancer:
 - **Digital rectal exam (DRE):** A doctor or nurse inserts a gloved, lubricated finger into the rectum to estimate the size of the prostate and feel for lumps or other abnormalities.
 - **Prostate specific antigen test (PSA):** Measures the level of PSA in the blood. PSA is a substance made by the prostate. The levels of PSA in the blood can be higher in men who have prostate cancer. The PSA level may also be elevated in other conditions that affect the prostate.

(Source: Centers for Disease Control and Prevention, Prostate Cancer Awareness, August 23, 2021)

The following graph shows the Seneca County, Ohio and U.S. age-adjusted lung cancer mortality rates per 100,000 population for men with comparison to the Healthy People 2030 objective. The graph shows:

- From 2017-to-2019, the Seneca County age-adjusted mortality rate for male lung cancer was higher than the Ohio rate, U.S. rate, as well as the Healthy People 2030 target objective.



*Note: The Healthy People 2030 target rates are not gender specific.

(Sources: CDC Wonder 2017-2019, Ohio Public Health Data Warehouse 2017-2019, and Healthy People 2030)

Men's Health Data

- Approximately 13% of adult males ages 18 years or older reported fair or poor health.
- 14% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 31% had 5 or more drinks in 1 day at least once in the past year.
- Only 58% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- 41% of men 20 years and over are obese.
- There are 12% of males under the age of 65 without health care coverage.
- The leading causes of death for males in the United States are heart disease, cancer and COVID-19.

(Source: CDC, National Center for Health Statistics, Men's Health, Fast Stats, February 1, 2022)

Health Care Access: Oral Health

Key Findings

Sixty-three percent (63%) of Seneca County adults who had visited a dentist or dental clinic in the past year. The top three reasons adults gave for not visiting a dentist or dental clinic in the past year were cost (20%); had no reason to go/had not thought of it (19%); and fear, nervousness, pain, dislike going (17%).

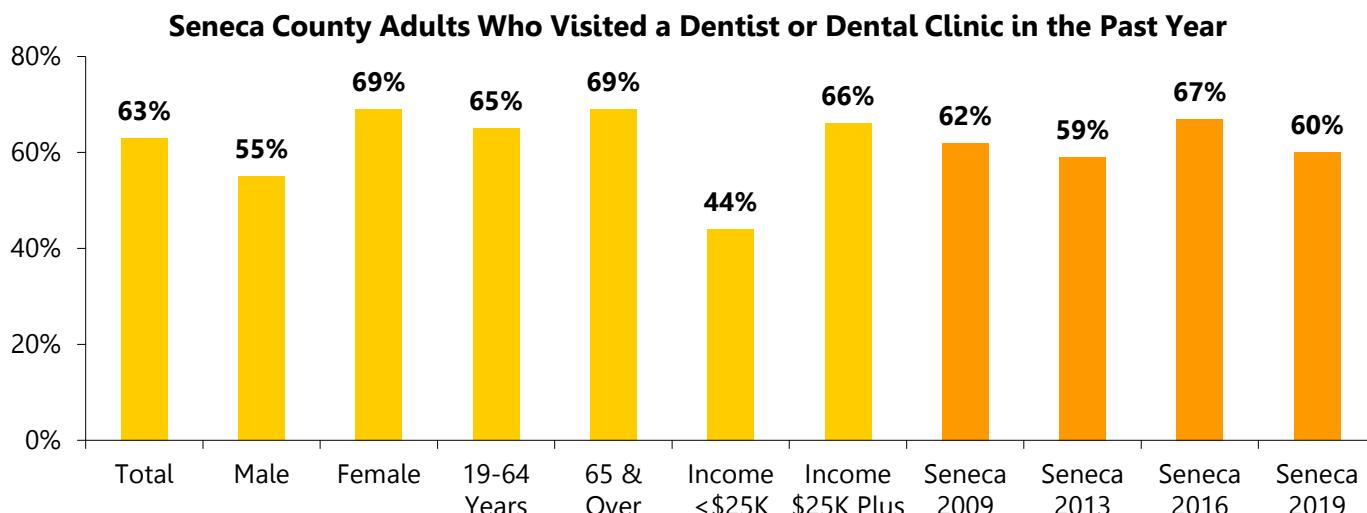
Access to Dental Care

- In the past year, 63% of Seneca County adults had visited a dentist or dental clinic, decreasing to 44% of those with incomes less than \$25,000.
- Seventy percent (70%) of Seneca County adults with dental insurance had been to the dentist in the past year.
- Seneca County adults reported the following reasons for **not** visiting a dentist or dental clinic in the past year:
 - Cost (20%)
 - No reason to go/had not thought of it (19%)
 - Fear, apprehension, nervousness, pain, dislike going (17%)
 - Have dentures (11%)
 - Did not have or know a dentist (7%)
 - Dentist did not accept their medical coverage (2%)
 - Could not find a dentist that takes Medicaid (1%)
 - Could not get into their dentist (1%)
- Nine percent (9%) of adults reported multiple reasons, including cost, for not visiting a dentist in the past year.
- Adults reported they had the following oral health issues: permanent teeth have been removed because of tooth decay or gum disease (11%), oral pain (7%), oral bleeding (6%), difficulty eating/chewing (5%), problems with dentures (4%), loose teeth (4%), no teeth (3%), skipped meals due to pain (2%), missed work due to oral pain (<1%), and other oral health issues (6%).
- Seneca County adults reported they did the following at least daily: brushed their teeth (92%), flossed their teeth (45%), and used mouth wash (44%). Six percent (6%) of adults reported they did none of the above at least daily.

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Visited a dentist or dental clinic (within the past year)	62%	59%	67%	60%	63%	65%	67%
Visited a dentist or dental clinic (5 or more years ago)	11%	13%	10%	9%	14%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Seneca County adults who had visited a dentist or dental clinic in the past year. An example of how to interpret the information on the graph includes: 63% of adults had been to the dentist or dental clinic in the past year, including 44% 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.

Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	55%	13%	9%	18%	2%
Females	69%	10%	8%	11%	2%
Total	63%	11%	8%	14%	2%

*Percentages may not equal 100% due to the exclusion of data for those who answered "Don't know"

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 conditions in the United States. Among adults aged 20 and older, approximately 90% have had at least one cavity in their lifetime. One-in-four adults aged 20-to-64 currently has at least one cavity, and more than 40% of adults reported having felt mouth pain in the past year. On average, the nation spends more than \$124 billion a year on costs related to dental care. More than \$45 billion of productivity is lost each year due to untreated dental disease.
- 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: Centers for Disease Control and Prevention, Division of Oral Health, National Center for Chronic Disease Prevention and Health Promotion, November 9, 2021)

Health Behaviors: Adult Health Status Perceptions

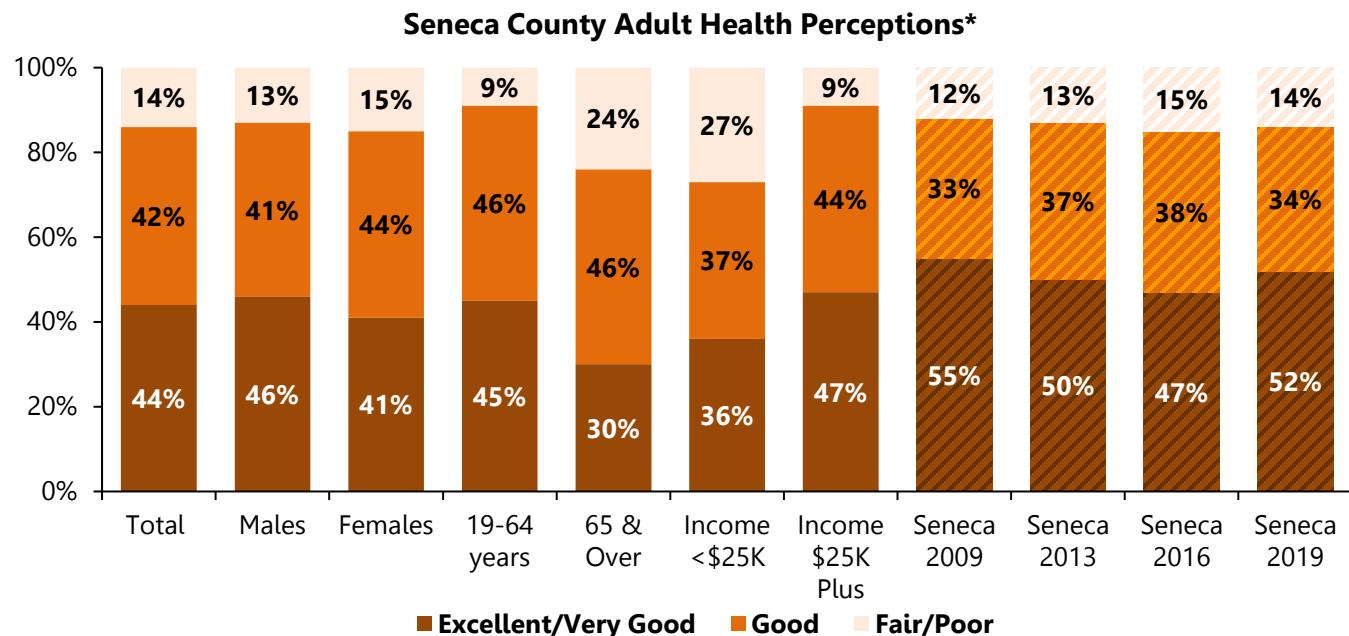
Key Findings

Almost half (44%) of Seneca County adults rated their health status as excellent or very good. Conversely, 14% of adults described their health as fair or poor, increasing to 27% of those with incomes less than \$25,000.

General Health Status

- Almost half (44%) of Seneca County adults rated their health as excellent or very good. Adults with higher incomes (47%) were most likely to rate their health as excellent or very good, compared to 36% of those with incomes less than \$25,000.
- Fourteen percent (14%) of adults rated their health as fair or poor.
- Seneca County adults were most likely to rate their health as fair or poor if they:
 - Had been diagnosed with diabetes (39%)
 - Had an annual household income under \$25,000 (27%)
 - Were widowed (26%)
 - Had been diagnosed with high blood pressure (25%)
 - Had been diagnosed with high blood cholesterol (17%)
- In the past month, 30% of adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.

The following graph shows the percentage of Seneca 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 adults, 46% of males and 30% 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.

Physical Health Status

- Eighteen percent (18%) of Seneca County adults rated their physical health as not good on four or more days in the previous month.
- Seneca County adults reported their physical health as not good on an average of 3.7 days in the previous month.
- Seneca County adults were most likely to rate their physical health as not good if they:
 - Were 65 years of age or older (31%)
 - Were female (20%)
 - Had an annual household income under \$25,000 (16%)

Mental Health Status

- Thirty-five percent (35%) of Seneca County adults rated their mental health as not good on four or more days in the previous month.
- Seneca County adults reported their mental health as not good on an average of 4.9 days in the previous month.
- Seneca County adults were most likely to rate their mental health as not good if they:
 - Had an annual household income under \$25,000 (60%)
 - Were female (42%)
 - Were 19 to 64 years of age (33%)

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	60%	14%	6%	1%	10%
Females	45%	26%	3%	1%	16%
Total	51%	21%	4%	1%	13%
Mental Health Not Good in Past 30 Days*					
Males	51%	15%	8%	8%	10%
Females	33%	20%	10%	4%	28%
Total	41%	18%	9%	6%	20%

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

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Rated general health as good, very good, or excellent	88%	87%	85%	87%	86%	85%	86%
Rated general health as excellent or very good	55%	50%	47%	52%	44%	55%	57%
Rated general health as fair or poor	12%	13%	15%	14%	14%	16%	13%
Rated physical health as not good on four or more days (in the past 30 days)	21%	20%	22%	23%	18%	24%*	23%*
Average number of days that physical health not good (in the past 30 days) (County Health Rankings)	N/A	3.7	3.8	3.1	3.7	4.1**	4.7**
Rated mental health as not good on four or more days (in the past 30 days)	16%	23%	27%	25%	35%	29%*	26%*
Average number of days that mental health not good (in the past 30 days) (County Health Rankings)	N/A	4.6	3.8	3.3	4.9	4.8**	4.1**
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past 30 days)	12%	23%	26%	24%	30%	N/A	N/A

N/A – Not Available

*2019 BRFSS

**2018 BRFSS as compiled by 2021 County Health Rankings

Health Behaviors: Adult Weight Status

Key Findings

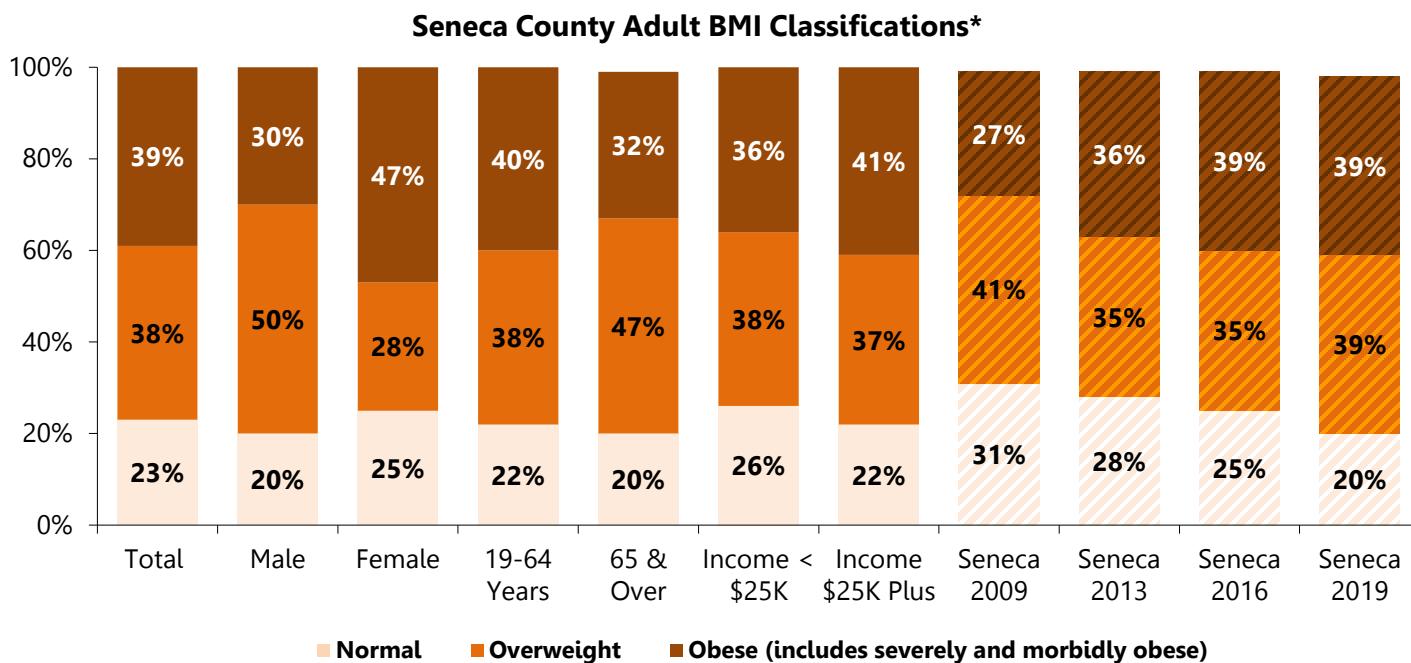
Over three-fourths (77%) of Seneca County adults were overweight or obese based on body mass index (BMI). Seventeen percent (17%) of adults were not participating in any physical activity in the past week, including 4% who were unable to exercise.

16,460 Seneca County adults were obese.

Adult Weight Status

- Seventy-seven percent (77%) of Seneca County adults were either overweight (38%) or obese (includes severely and morbidly obese) (39%) by body mass index (BMI).
- Half (50%) of adults were trying to lose weight, 29% were trying to maintain their current weight or keep from gaining weight, and 1% were trying to gain weight.
- Seneca County adults did the following to lose weight or keep from gaining weight: drank more water (47%); ate less food, fewer calories, or foods low in fat (46%); exercised (44%); ate a low-carb diet (13%); fasting/intermittent fasting (7%); received health coaching (3%); smoked cigarettes (2%); took diet pills, powders or liquids without a doctor's advice (2%); participated in a prescribed dietary or fitness program (2%); went without eating 24 or more hours (1%); used a weight loss program (1%); and took prescribed medications (<1%).

The following graph shows the percentage of Seneca County adults who were normal weight, overweight or obese by Body Mass Index (BMI). An example of how to interpret the information includes: 23% of all adults were classified as normal weight, 38% 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	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	27%	36%	39%	39%	39%	36%	32%
Overweight (BMI of 25.0 – 29.9)	41%	35%	35%	39%	38%	34%	35%
Normal weight (BMI of 18.5 – 24.9)	31%	28%	25%	20%	23%	29%	31%

Nutrition

- Seneca County adults reported the following reasons they chose the types of food they ate:
 - Taste/enjoyment (60%)
 - Cost (53%)
 - Healthiness of food (44%)
 - Ease of preparation/time (40%)
 - Food they were used to (39%)
 - What their family prefers (35%)
 - Availability (28%)
 - Nutritional content (24%)
 - Calorie content (18%)
 - If it was lactose free (8%)
 - Artificial sweetener content (7%)
 - If it was organic (7%)
 - Other food sensitivities (7%)
 - If it was gluten free (6%)
 - Health care provider's advice (5%)
 - If it was genetically modified (5%)
 - Availability of food at the food pantry (3%)
 - Limitations due to dental issues (2%)
 - Limitations set by WIC (1%)
 - Other reasons (3%)
- Adults reported the following barriers to consuming fruits and vegetables: too expensive (15%), did not like the taste (9%), did not know how to prepare (1%), transportation (1%), stores do not take Electronic Benefit Transfer (<1%), no variety (<1%), and other barriers (4%).
- Seventy-eight percent (78%) of adults ate out in a restaurant or brought home take-out at the following frequencies in the past week: 1-to-2 meals (63%), 3-to-4 meals (11%), and 5 or more meals (4%). Twenty-two percent (22%) of adults did not eat out or bring takeout home to eat in the past week.
- Thirty-six percent (36%) of adults ate 1-to-2 servings of fruits **and/or** vegetables per day, 42% ate 3-to-4 servings per day, and 19% ate 5 or more servings per day. Three percent (3%) of adults ate no servings of fruits **and/or** vegetables per day.

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

	5 or more servings	3-4 servings	1-2 servings	0 servings
Fruit	4%	11%	74%	11%
Vegetables	6%	14%	74%	6%
Sugar-sweetened beverages	4%	10%	37%	49%
Caffeinated beverages	8%	20%	55%	17%

Physical Activity

- Over half (52%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week; 31% of adults exercised 5 or more days per week; and 17% of adults were not participating in any physical activity in the past week, including 4% who were unable to exercise.

Employee Wellness

- Seneca County adults had access to wellness programs through their employer or spouse's employer with the following features:
 - Free/discounted gym membership (13%)
 - Health risk assessment (12%)
 - Lower insurance premiums for participation in wellness program (12%)
 - On-site fitness facility (9%)
 - Gift cards or cash for participation in wellness program (8%)
 - On-site health screenings (7%)
 - Free/discounted smoking cessation program (3%)
 - Healthier food options in vending machines or cafeteria (3%)
 - Lower insurance premiums for positive changes in health status (3%)
 - On-site health education classes (2%)
 - Gift cards or cash for positive changes in health status (2%)
 - Free/discounted weight loss program (1%)
- Seventeen percent (17%) of Seneca County adults did not have access to any wellness programs.

Body Mass Index (BMI) Measurements

- Body Mass Index (BMI) is a person's weight in kilograms divided by the square of height in meters. A high BMI can be an indicator of high body fat.
- BMI does not measure body fat directly, but BMI is moderately correlated with more direct measures of body fat. Furthermore, BMI appears to be as strongly correlated with various metabolic and disease outcome as other more direct measures of body fatness.

BMI	Weight Status
Below 18.5	Underweight
18.5-24.9	Normal or Healthy Weight
25.0-29.9	Overweight
30.0 and Above	Obese

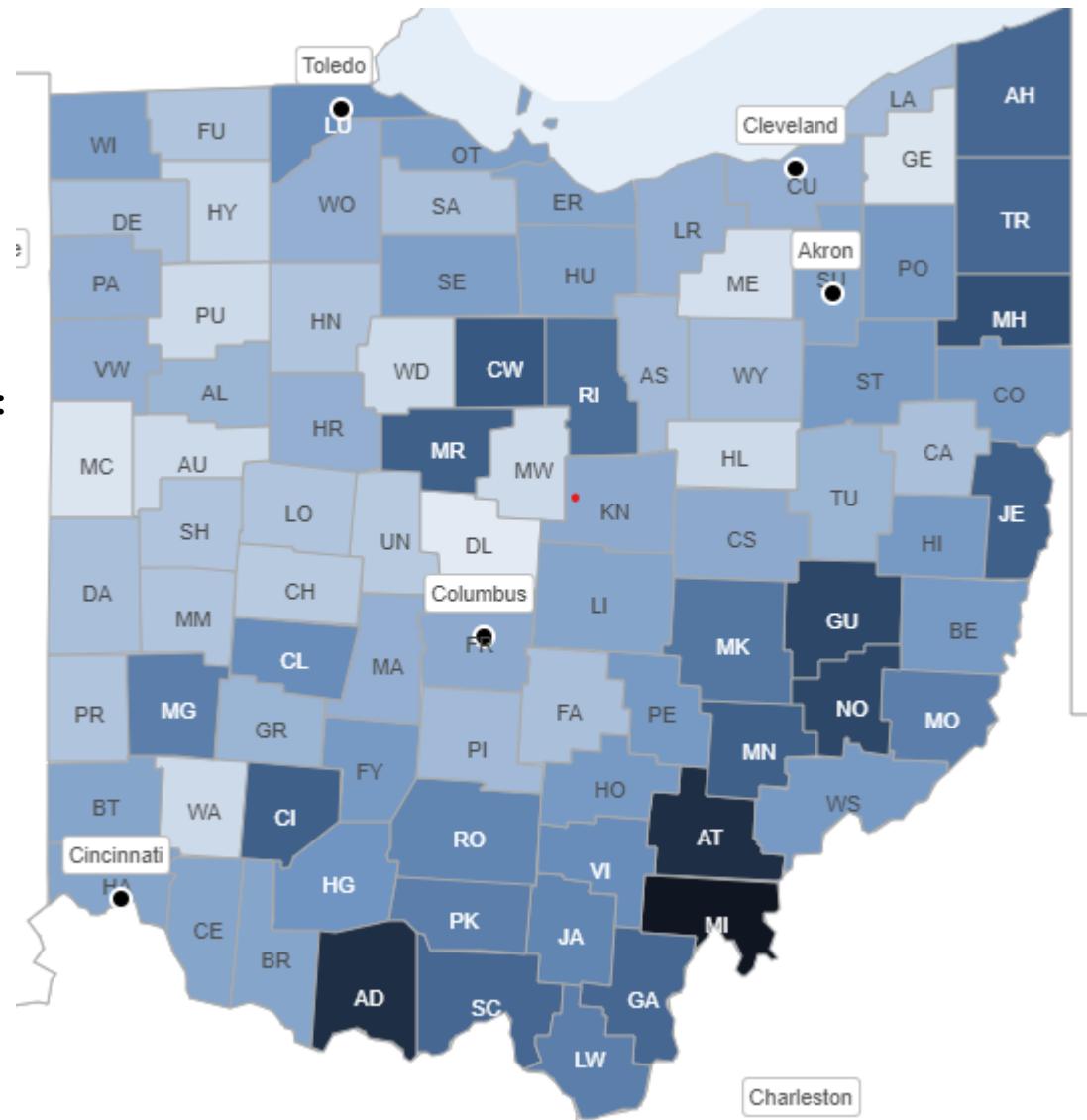
(Source: CDC, *About Adult BMI*, updated August 27, 2021)

The Food Environment Index measures the quality of the food environment in a county on a scale from zero 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 Seneca County is 7.5.
- The food environment index in Ohio is 6.8.

Seneca County had a food index measure of:

7.5



(Source: USDA Food Environment Atlas, as compiled by County Health Rankings 2022)

BEST



WORST

MISSING

Health Behaviors: Adult Tobacco Use

Key Findings

Fifteen percent (15%) of Seneca County adults were current smokers, and 21% were considered former smokers. Nineteen percent (19%) of adults used e-cigarettes in the past year. Nineteen percent (19%) of adults did not believe e-cigarette vapor was harmful to anyone.

Adult Tobacco Use Behaviors

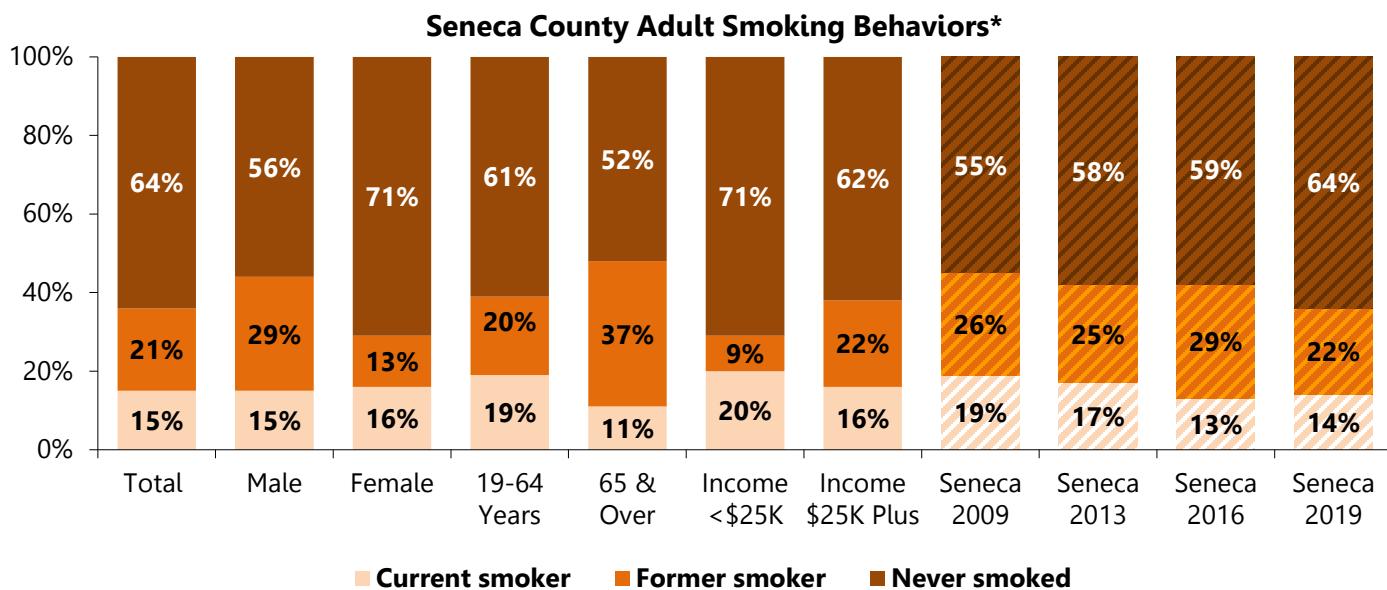
- Fifteen percent (15%) of Seneca County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days).
- Twenty-one percent (21%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).

6,331 Seneca County adults were current smokers.

- Seneca County adult smokers were more likely to have:
 - Had children under the age of 18 (50%)
 - Been married (46%)
 - Incomes less than \$25,000 (20%)
 - Been ages 19-to-64 (19%)
 - Rated their overall health as fair or poor (19%)
 - Been diagnosed with asthma (13%)
- Seneca County adults used the following tobacco products in the past year: e-cigarettes or other electronic vaping products (19%); cigarettes (9%); cigars (3%); chewing tobacco, snuff, dip, Betel quid (3%); little cigars (2%); and cigarillos (2%).
- Forty-four percent (44%) of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit.
- Adults who used e-cigarettes in the past 12 months put the following in their e-cigarette: e-liquid or e-juice with nicotine (20%), marijuana or THC in their e-liquid (13%), and e-liquid or e-juice without nicotine (6%).
- Seventy-one percent (71%) of adults believed e-cigarette vapor was harmful to themselves, and 56% believed it was harmful to others. Nineteen percent (19%) of adults did not believe e-cigarette vapor was harmful to anyone. Four percent (4%) of adults did not know if e-cigarette vapor was harmful.

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Current smoker (currently smoke some or all days)	19%	17%	13%	14%	15%	19%	16%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	26%	25%	29%	22%	21%	24%	25%

The following graph shows the percentage of Seneca County adults' smoking behaviors. An example of how to interpret the information includes: 15% of all adults were current smokers, 21% of all adults were former smokers, and 64% had never smoked.



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.

*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?"

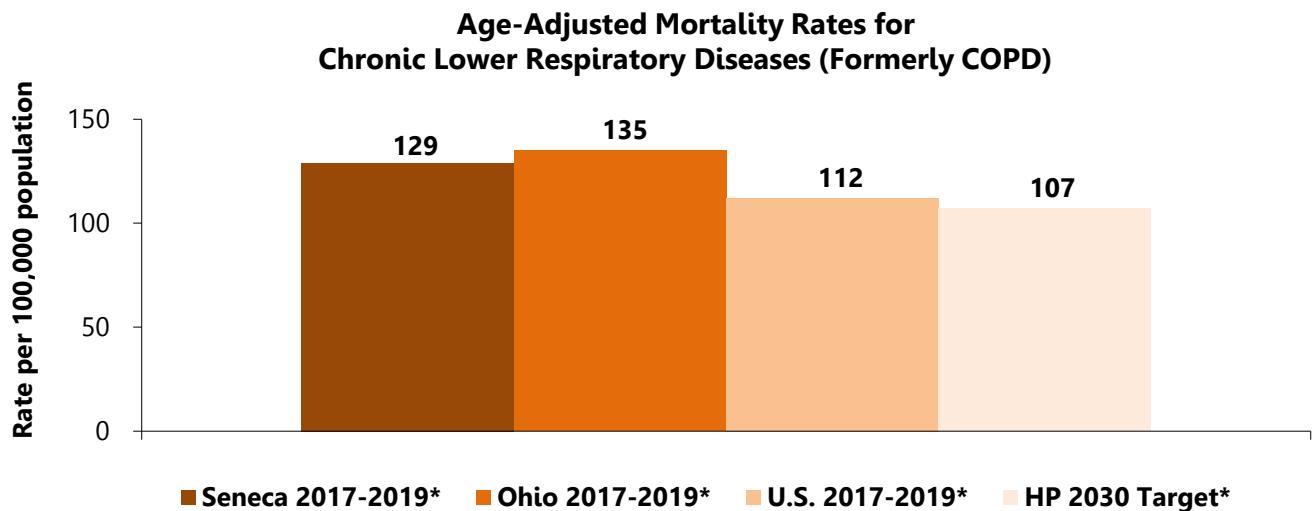
E-Cigarette Health Effects

- **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.
 - 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.

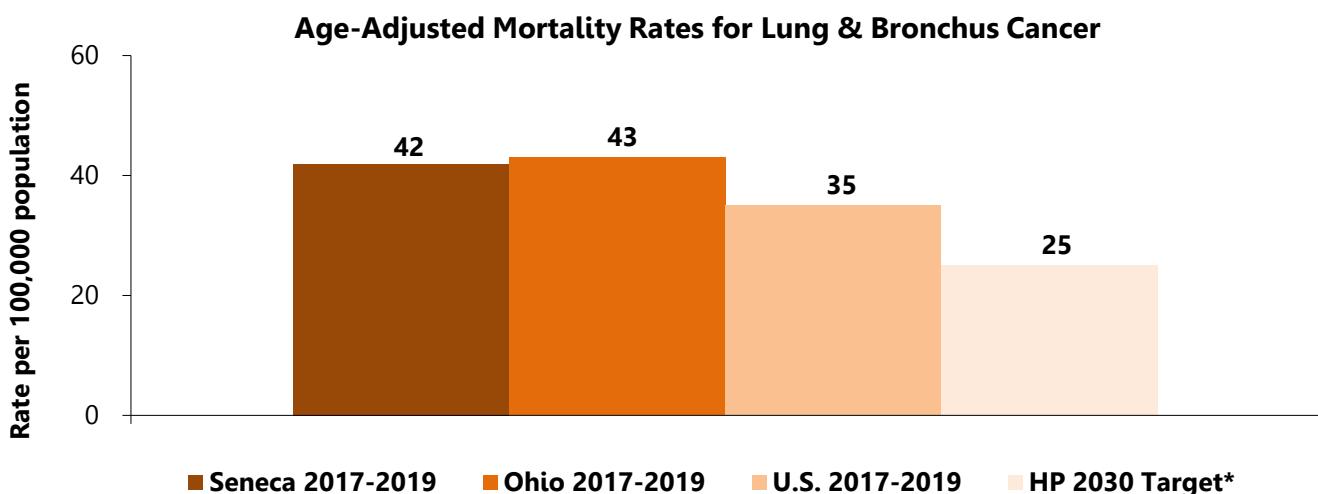
(Source: CDC, Smoking & Tobacco Use, About Electronic Cigarettes (E-Cigarettes), updated March 21, 2022)

The following graphs show Seneca County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD), as well as lung and bronchus cancer in comparison with the Healthy People 2030 objective. These graphs show:

- From 2017-to-2019, Seneca County's age-adjusted mortality rate for chronic lower respiratory disease was lower than the Ohio rate and the Healthy People 2030 target objective rate, but higher than the U.S. rate.
- Seneca County's age-adjusted mortality rate for lung and bronchus cancer was lower than the Ohio rate, but higher than the U.S. rate as well as the Healthy People 2030 target objective.



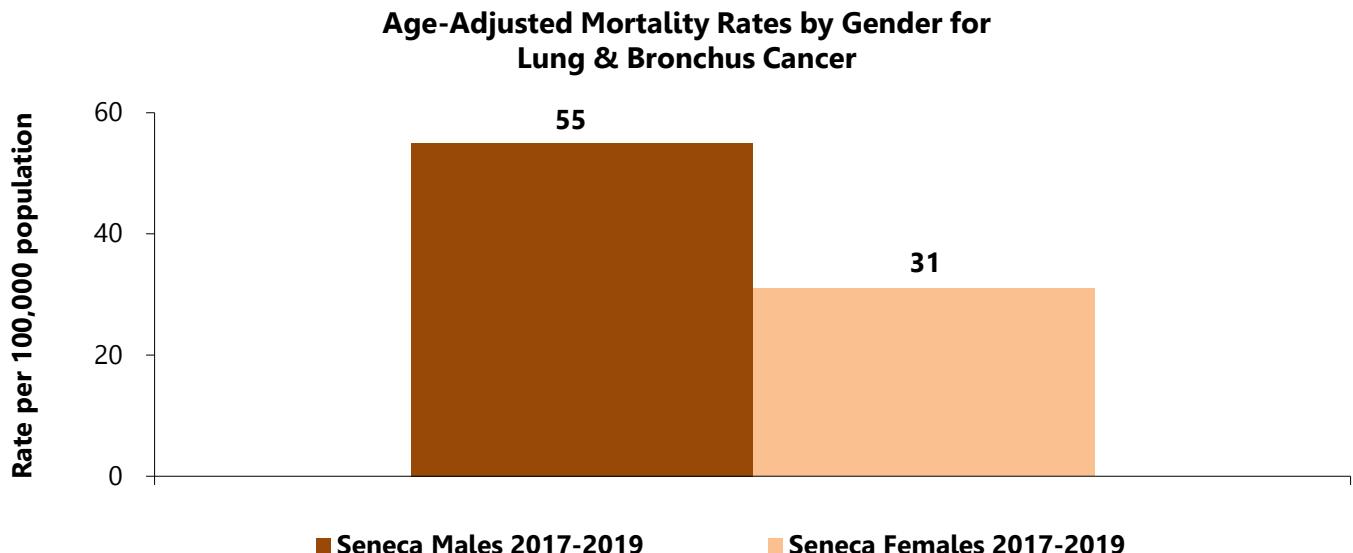
*The Healthy People 2030's target rate, U.S. rate, Ohio rate, and Seneca rate is for adults ages 45 years and older.
(Source: Ohio Public Health Data Warehouse 2017-2019, CDC Wonder 2017-2019, and Healthy People 2030)



*The Healthy People 2030 target objective only includes the age-adjusted lung cancer death rate
(Source: Ohio Public Health Data Warehouse 2017-2019, CDC Wonder 2017-2019, and Healthy People 2030)

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

- Disparities existed by gender for Seneca County lung and bronchus cancer age-adjusted mortality rates. The Seneca County male rate was higher than the female rate.



Smoking and Other Health Risks

- Smoking can make it harder for a woman to become pregnant and can affect her baby's health before and after birth. Smoking increases risks for:
 - Preterm (early) delivery
 - Stillbirth (death of the baby before birth)
 - Low birth weight
 - Sudden infant death syndrome (known as SIDS or crib death)
 - Ectopic pregnancy
 - Orofacial clefts in infants
- Smoking can also affect men's sperm, which can reduce fertility and also increase risks for birth defects and miscarriage (loss of the pregnancy).
- Smoking can affect bone health.
 - Women past childbearing years who smoke have lower bone density (weaker bones) than women who never smoked and are at greater risk for broken bones.
- Smoking affects the health of your teeth and gums and can cause tooth loss.
- Smoking can increase your risk for cataracts (clouding of the eye's lens that makes it hard for you to see) and age-related macular degeneration (damage to a small spot near the center of the retina, the part of the eye needed for central vision).
- Smoking is a cause of type 2 diabetes mellitus and can make it harder to control. The risk of developing diabetes is 30-40% higher for active smokers than nonsmokers.
- Smoking causes general adverse effects on the body, including inflammation and decreased immune function.
- Smoking is a cause of rheumatoid arthritis.

(Source: CDC, Effects of Cigarette Smoking, Smoking and Other Health Risks, October 29, 2021)

Health Behaviors: Adult Alcohol Consumption

Key Findings

Fifty-eight percent (58%) of Seneca County adults had at least one alcoholic drink in the past month and would be considered current drinkers. More than one-quarter (27%) 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.

24,478 Seneca County adults had at least one alcoholic drink in the past month.

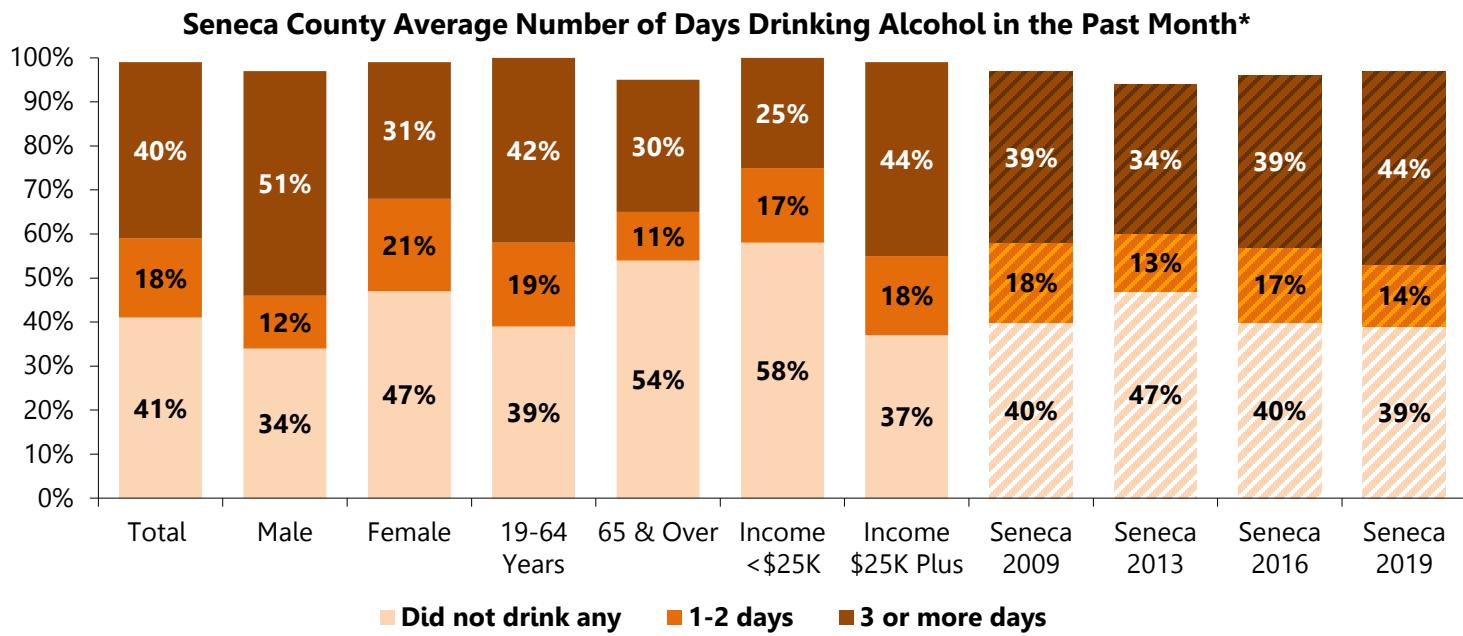
Adult Alcohol Consumption

- Fifty-eight percent (58%) of Seneca County adults had at least one alcoholic drink in the past month, increasing to 62% of those with incomes more than \$25,000.
- Of those who drank, Seneca County adults drank 3.3 drinks on average, increasing to 3.8 drinks for those with incomes less than \$25,000.
- One-quarter (25%) of Seneca County adults reported they had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers. Of those who drank in the past month, 43% had at least one episode of binge drinking.
- During the past month, 6% of adults reported driving after having perhaps too much alcohol to drink.
- During the past month, adults reported driving the following motor vehicles after having 5 or more drinks:
 - Motor-vehicle (3%)
 - ATV (1%)
 - Gator or other utility vehicle (1%)

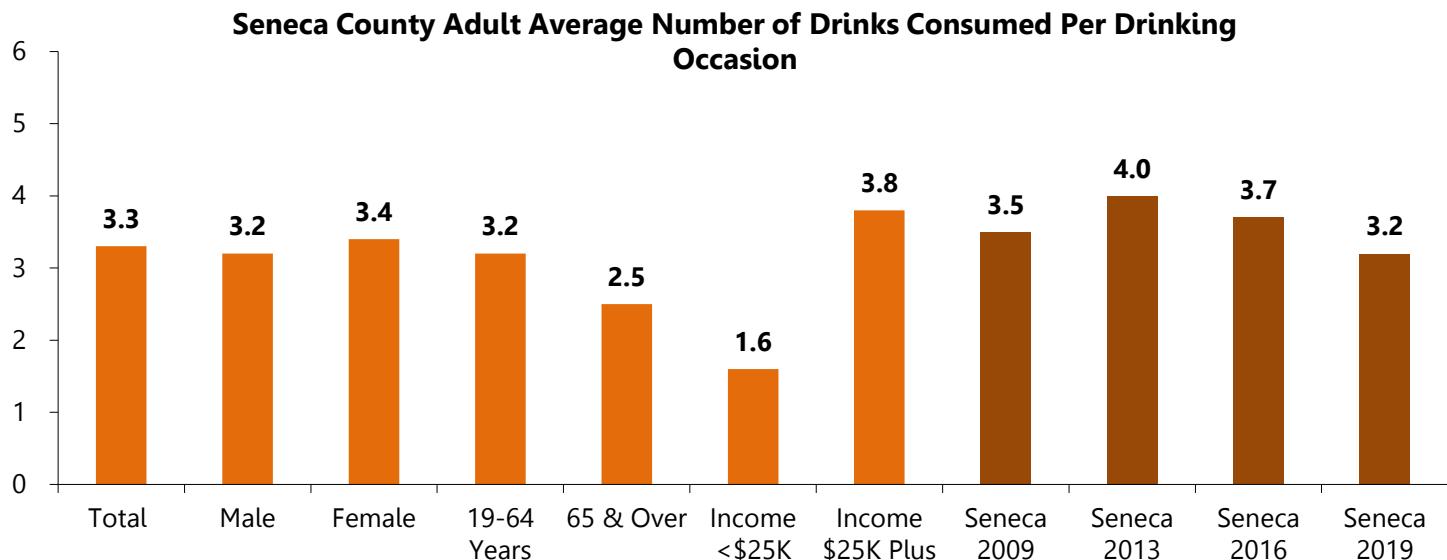
Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Current drinker (drank alcohol at least once in the past month)	56%	47%	56%	58%	58%	51%	53%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days)	21%	19%	19%	26%	25%	16%	16%
Drove after having perhaps too much alcohol to drink	N/A	N/A	7%	4%	6%	3%	2%

N/A- Not Available

The following graphs show the percentage of Seneca County adults who consumed 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: 41% of all adults did not drink alcohol in the past month, including 34% of males and 47% of females.



*Percentages may not equal 100% as some respondents answered, "Don't Know"



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

Health Behaviors: Adult Drug Use

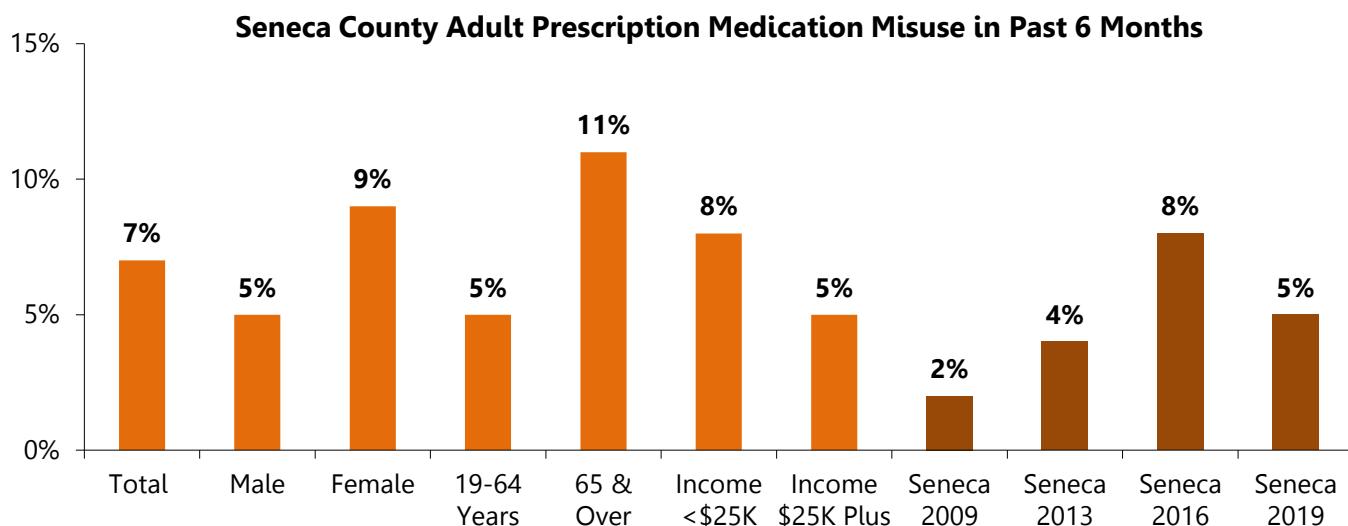
Key Findings

Seven percent (7%) of Seneca County adults had used recreational marijuana or hashish during the past 6 months. Seven percent (7%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past six months.

Adult Prescription Drug Misuse

- Seven percent (7%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.
- Fifteen percent (15%) of adults who misused prescription medication did so to alleviate physical or psychological pain, increasing to 24% of those ages 65 and older.
- Adults who misused prescription medication obtained their medication from the following:
 - Primary care physician (70%)
 - From multiple doctors/health care providers (26%)
 - Free from friend or family member (9%)
 - Bought from a drug dealer (4%)
- When asked about their frequency of medication use not prescribed for them, 49% of adult drug users did so almost every day, and 14% did so less than once a month.
- Seneca County adults indicated they did the following with their unused prescription medication: took it to the medication collection program (18%), took it to the sheriff's office (6%), threw it in the trash (16%), flushed it down the toilet (10%), kept it (10%), took all medication as prescribed (8%), took it in on drug take back days (4%), kept in a locked cabinet (1%), used a drug deactivation pouch (1%), and some other method (1%). Thirty-six percent (36%) of adults did not have unused medication.

The following graph shows adult medication misuse in the past six months. An example of how to interpret the information in the graph includes: 7% of adults used misused medication in the past six months, increasing to 11% of those ages 65 and older.

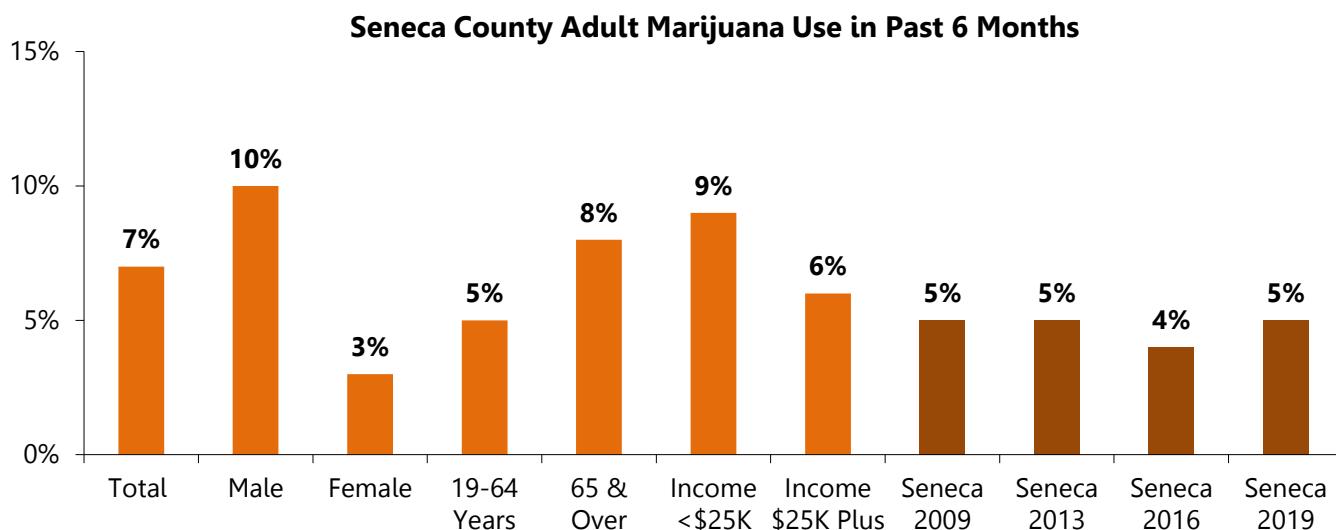


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Marijuana and Other Drug Use

- Seven percent (7%) of Seneca County adults had used recreational marijuana or hashish in the past 6 months.
- Adult reported using the following recreational drugs in the past 6 months:
 - Wax, oil, with CBD, or THC edibles (15%)
 - Marijuana recommended by a physician (4%)
 - Heroin/Fentanyl (2%)
 - Methamphetamines (1%)
 - Bath salts (1%)
 - Cocaine (1%)
 - Ecstasy/E/GHB (1%)
 - Over-the-counter-medication (1%)
 - Inhalants (1%)
 - LSD (1%)
 - Synthetic marijuana/K2 (1%)
- When asked about their frequency of marijuana and other recreational drug use in the past 6 months, 28% of adult drug users did so almost every day, and 15% did so less than once a month.
- Adults indicated the following risk levels to people harming themselves by using marijuana once or twice per week: no risk (31%), slight risk (26%), moderate risk (20%), and great risk (23%).
- Seneca County adults believed marijuana use was harmful to: themselves (45%), others (43%), did not know (28%), and not harmful anyone (23%).
- One percent (1%) of adults used a program or service to help with an alcohol or drug problem for themselves or a loved one. Reasons for **not** using such a program included the following: had not thought of it (2%), could not afford to go (1%), stigma of seeking alcohol services (1%), stigma of seeking drug services (<1%), and other reasons (<1%). Ninety-six percent (96%) of adults indicated such a program was not needed.

The following graph shows adult recreational marijuana or hashish use in the past six months. An example of how to interpret the information in the graph includes: 7% of Seneca County adults used recreational marijuana or hashish in the past six months, including 10% of males and 9% of those ages 65 and older.



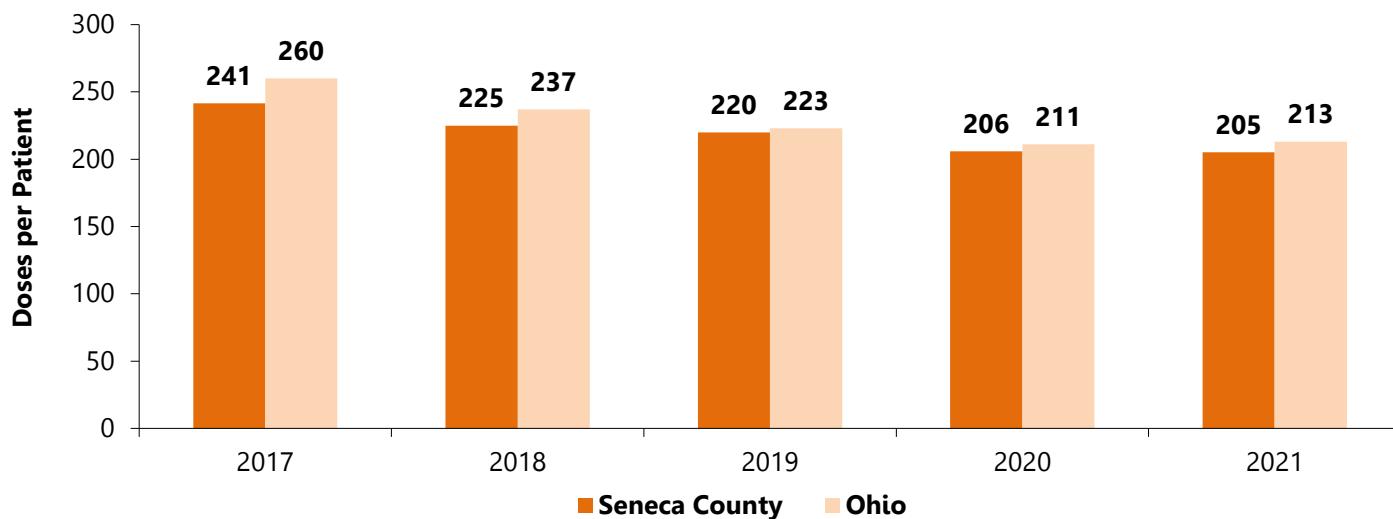
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Adults who used marijuana in the past 6 months	5%	5%	4%	5%	7%	N/A	N/A
Adults who used recreational drugs in the past 6 months	0%	<1%	1%	6%	7%	N/A	N/A
Adults who misused prescription medication in the past 6 months	2%	4%	8%	5%	7%	N/A	N/A

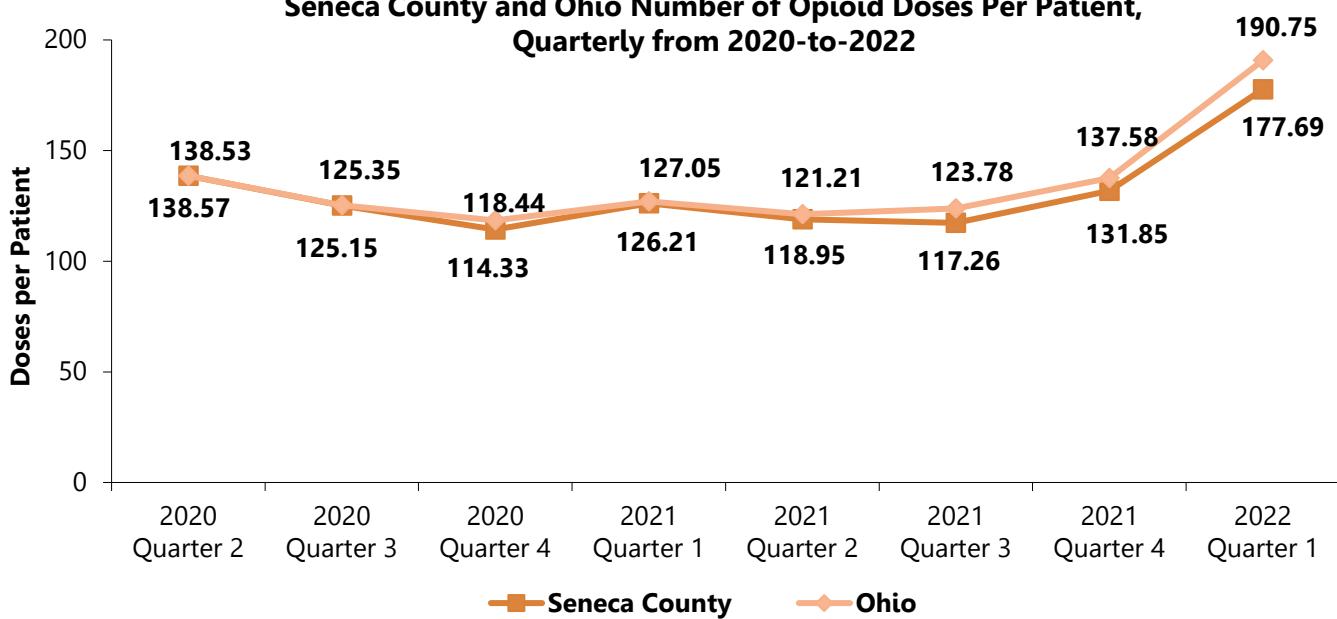
N/A – Not Available

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

Seneca County and Ohio Number of Opiate and Pain Reliever Doses Per Patient, 2017-2021

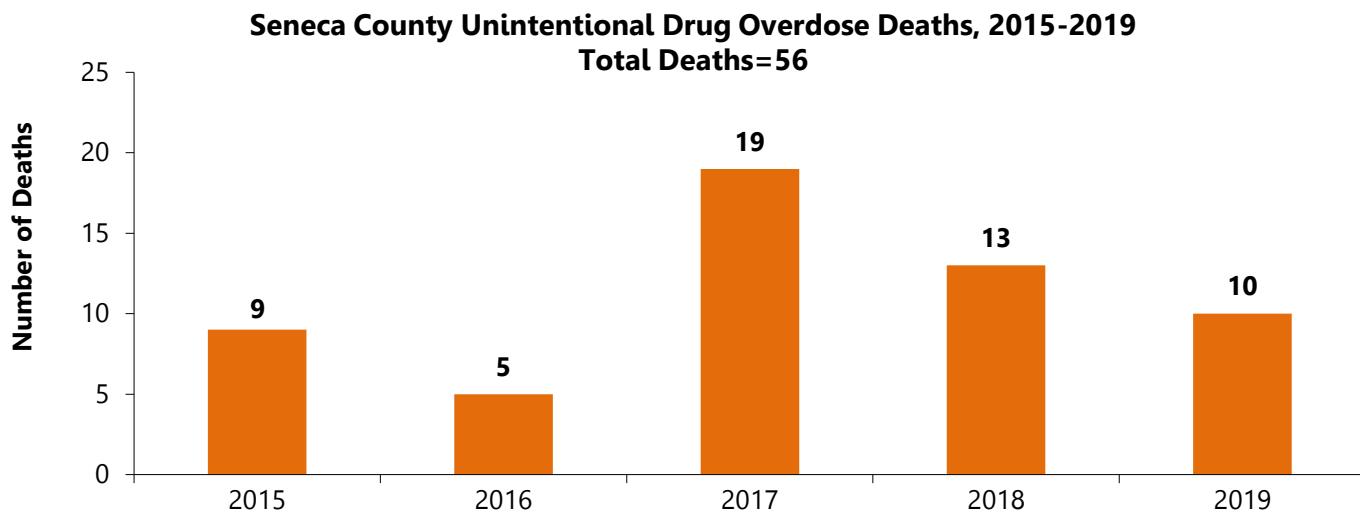


Seneca County and Ohio Number of Opioid Doses Per Patient, Quarterly from 2020-to-2022



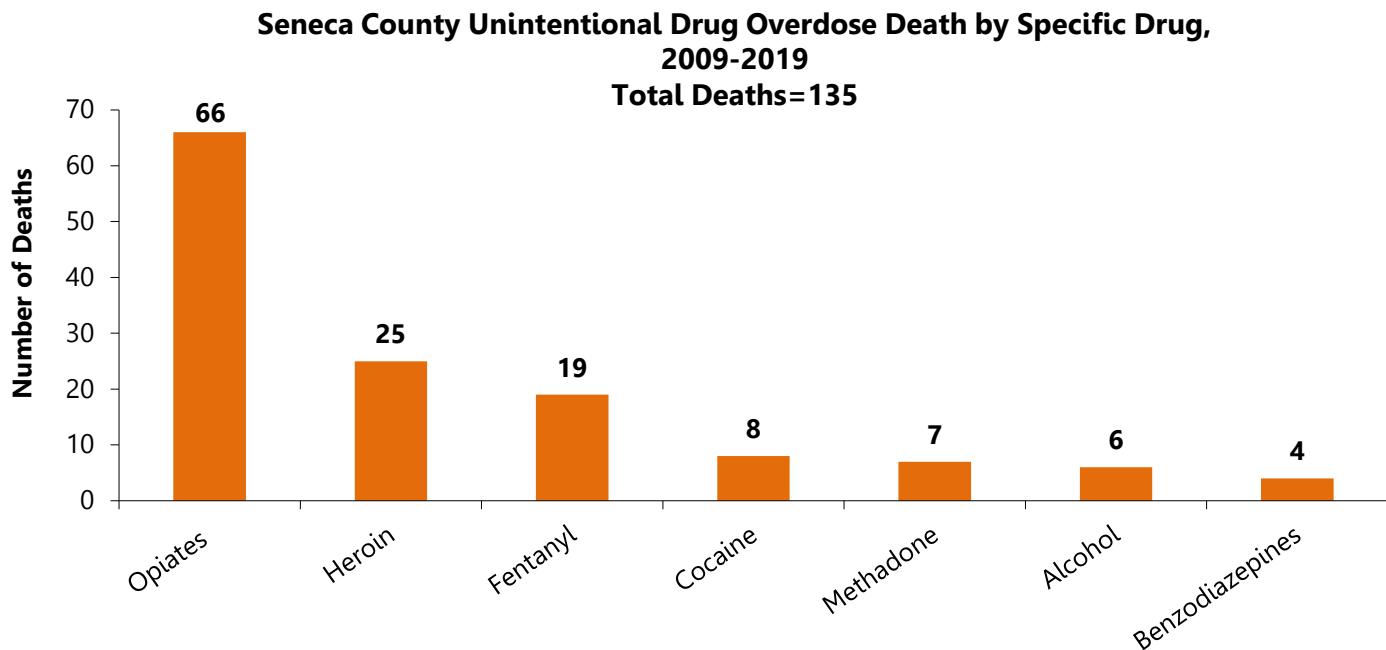
(Source: Ohio's Automated Rx Reporting System, 2017-2022)

The following graph shows the number of unintentional drug overdose deaths from 2015-to-2019 in Seneca County.



(Source for graphs: Ohio Public Health Data Warehouse, 2015-2019, Updated 5/3/2022)

The following graph shows the number of unintentional drug overdose deaths by specific drug from 2009-to-2019 in Seneca County.



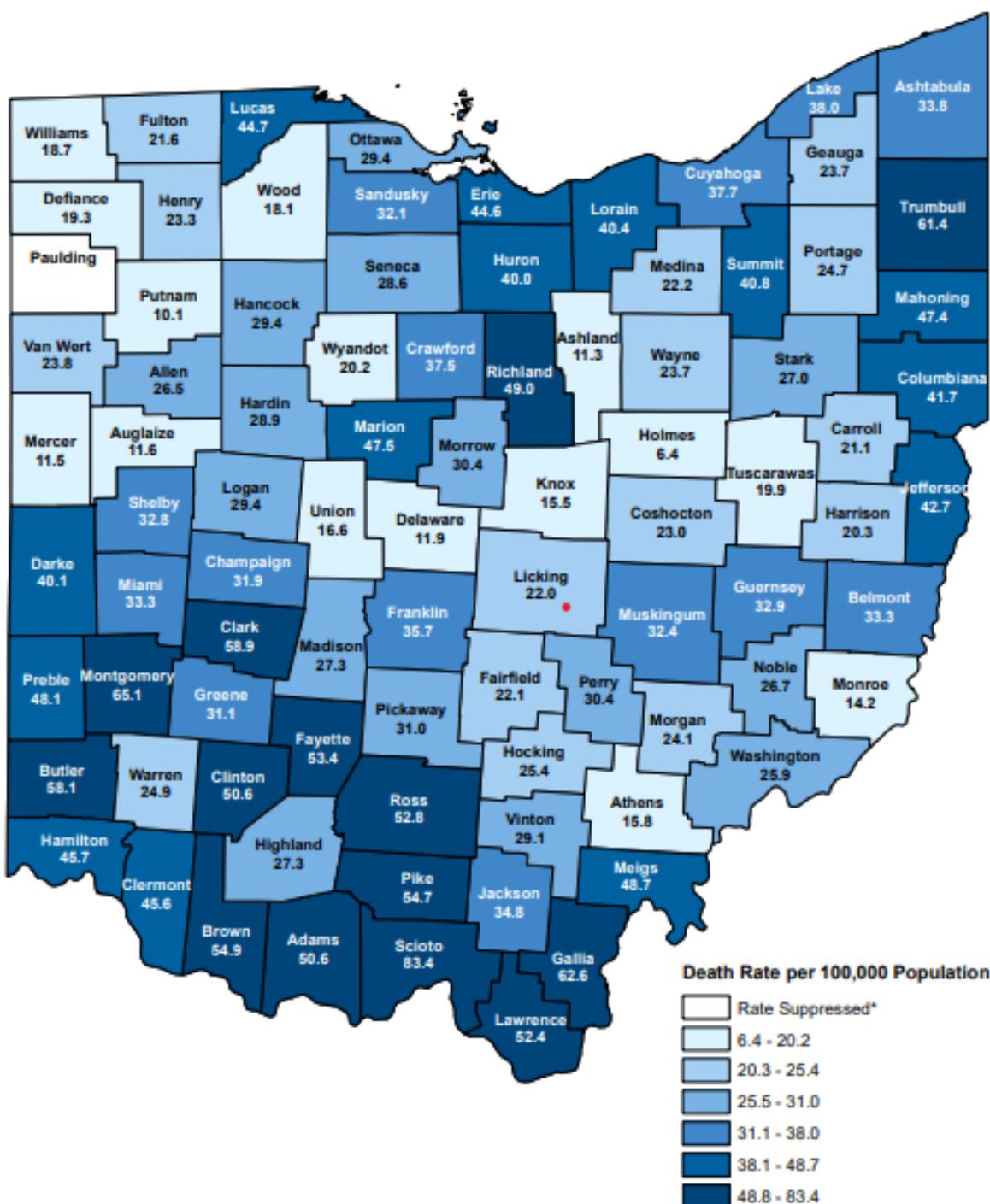
(Source: Ohio Public Health Data Warehouse, 2009-2019 updated 5/3/2022)

Ohio Automated Rx Reporting System (OARRS)

- OARRS has been collecting information from all Ohio-licensed pharmacies and Ohio personal licensed prescribers regarding outpatient prescriptions for controlled substance since 2006.
 - All data reported is updated every 24 hours and is maintained in a secure database.
- OARRS aims to be a reliable tool in addressing prescription drug diversion and abuse.
- With many features such as a patient care tool, epidemic early warning system, drug diversion and insurance fraud investigation tool, OARRS is the only statewide electronic database that helps prescribers and pharmacists avoid potential life-threatening drug interactions.
 - OARRS also works in limiting patients who “doctor shop” which refers to individuals fraudulently obtaining prescriptions from multiple health care providers for the same or multiple prescription for abuse or illegal distribution.
- Additionally, OARRS is also used for investigating and identifying health care professionals with continual inappropriate prescribing and dispensing to patients, and then aids in law enforcement cases against such acts.
- Starting in November 2017, Ohio drug court programs have access to OARRS to provide judges and court personnel with critical information regarding a participant’s use of controlled substance medications.

(Source: Ohio Automated RX Reporting System; What is OARRS?, Retrieved January 2022)

The following map illustrates the average age-adjusted unintentional drug overdose death rate per 100,000 population, by county from 2015-2020.



(Source: Ohio Department of Health, 2020 Ohio Drug Overdose Report)

Health Behaviors: Adult Sexual Behavior

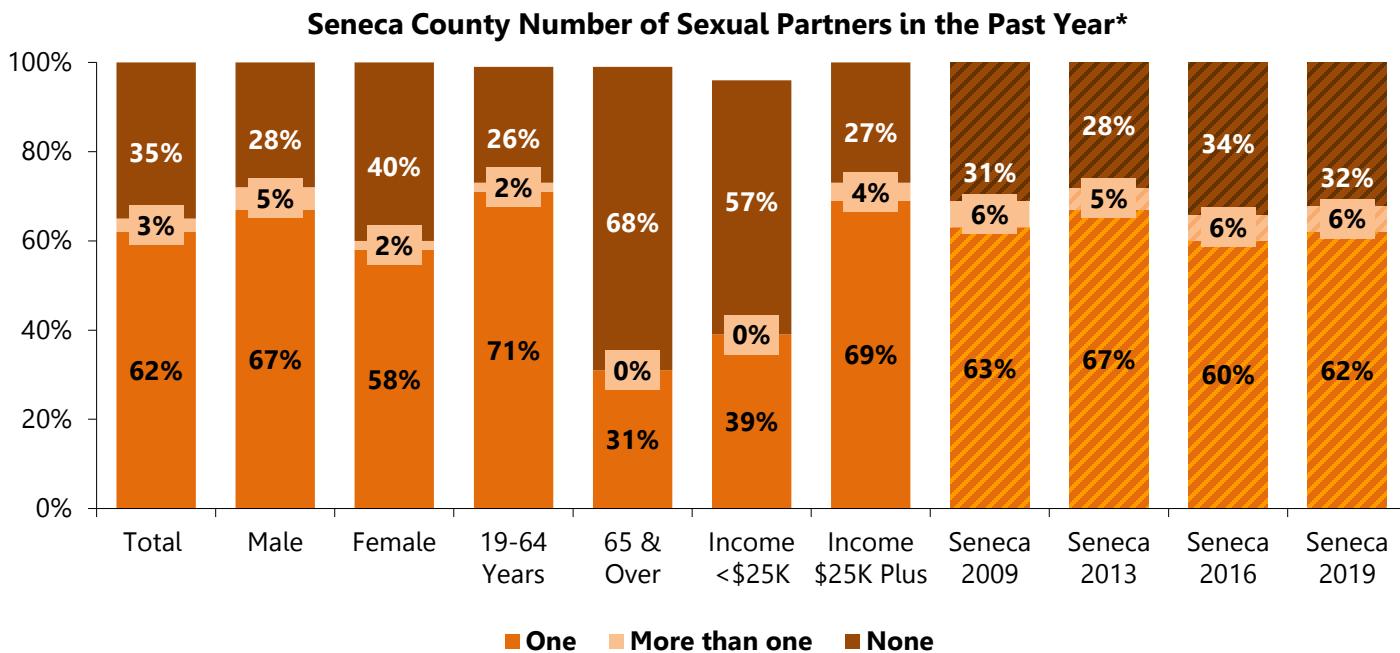
Key Findings

Sixty-five percent (65%) of Seneca County adults had sexual intercourse in the past year. Three percent (3%) of adults had more than one partner in the past year.

Adult Sexual Behavior

- Sixty-five percent (65%) of Seneca County adults had sexual intercourse in the past year.
- Three percent (3%) of adults reported they had intercourse with more than one partner in the past year.
- Seneca County adults used the following methods of birth control: no partner/not sexually active (26%); they or their partner were too old (16%); vasectomy (13%); hysterectomy (9%); condoms (9%); tubes tied (8%); birth control pill (5%); withdrawal (5%); infertility (4%); ovaries or testicles removed (3%); rhythm method (2%); gay or lesbian (2%); emergency contraception (2%); contraceptive implants (2%); IUD (1%); and other methods (1%). Nine percent (9%) of adults were currently trying to get pregnant and 3% were currently pregnant.
- Nine percent (9%) of Seneca County adults were **not** using any method of birth control.
- Seneca County adults did **not** use birth control for the following reasons:
 - They or their partner had a hysterectomy/vasectomy/tubes tied (31%)
 - They or their partner were too old (23%)
 - They did not care if they or their partner got pregnant (7%)
 - They did not want to use birth control (6%)
 - They did not think they or their partner could get pregnant (5%)
 - They wanted to get pregnant (5%)
 - Religious preferences (4%)
 - They or their partner did not like birth control/fear of side effects (3%)
 - They or their partner had just had a baby (3%)
 - They or their partner were breastfeeding (3%)
 - No regular partner/not sexually active (2%)
 - They had a same-sex partner (2%)
 - Lapse in use of method (<1%)
- The following situations applied to Seneca County adults: had sex without a condom in the past year (22%), had sex with someone they met on social media (2%), had 4 or more sexual partners in the past year (2%), had anal sex without a condom in the past year (2%), had sexual activity with someone of the same gender (2%), engaged in sexual activity that they would not have done if sober (2%), were forced to have sex (2%), treated for an STD in the past year (2%), tested positive for HPV (1%), had sex with someone they did not know (1%), and injected any drug other than those prescribed in the past year (<1%).
- Seneca County adults were diagnosed with the following sexually transmitted diseases in the past five years: genital herpes (2%), human papilloma virus (HPV) (1%), chlamydia (1%), and other STDs (1%).

The following graph shows the number of sexual partners Seneca County adults had in the past year. An example of how to interpret the information in the graph includes: 62% of all adults had one sexual partner in the past 12 months and 3% had more than one.



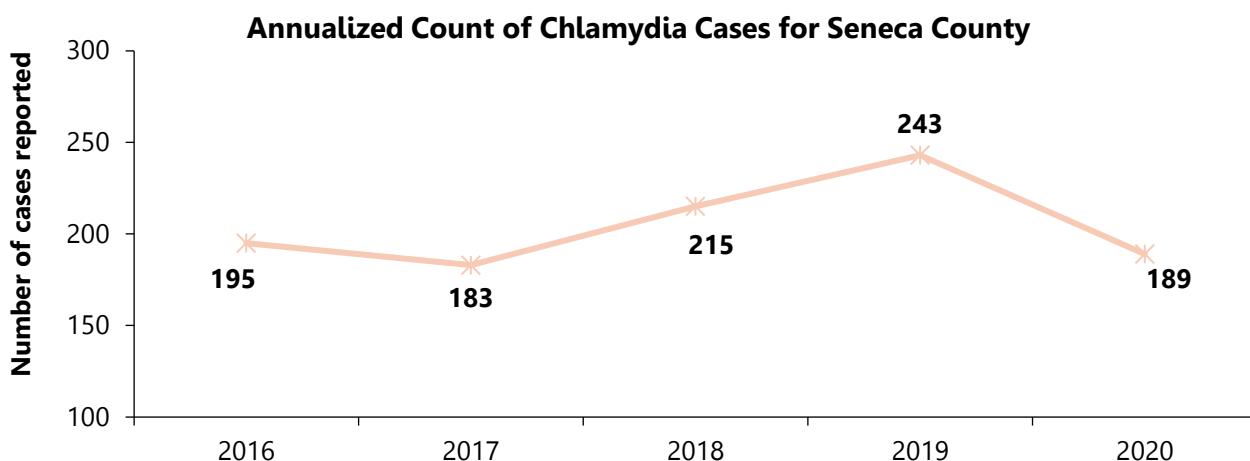
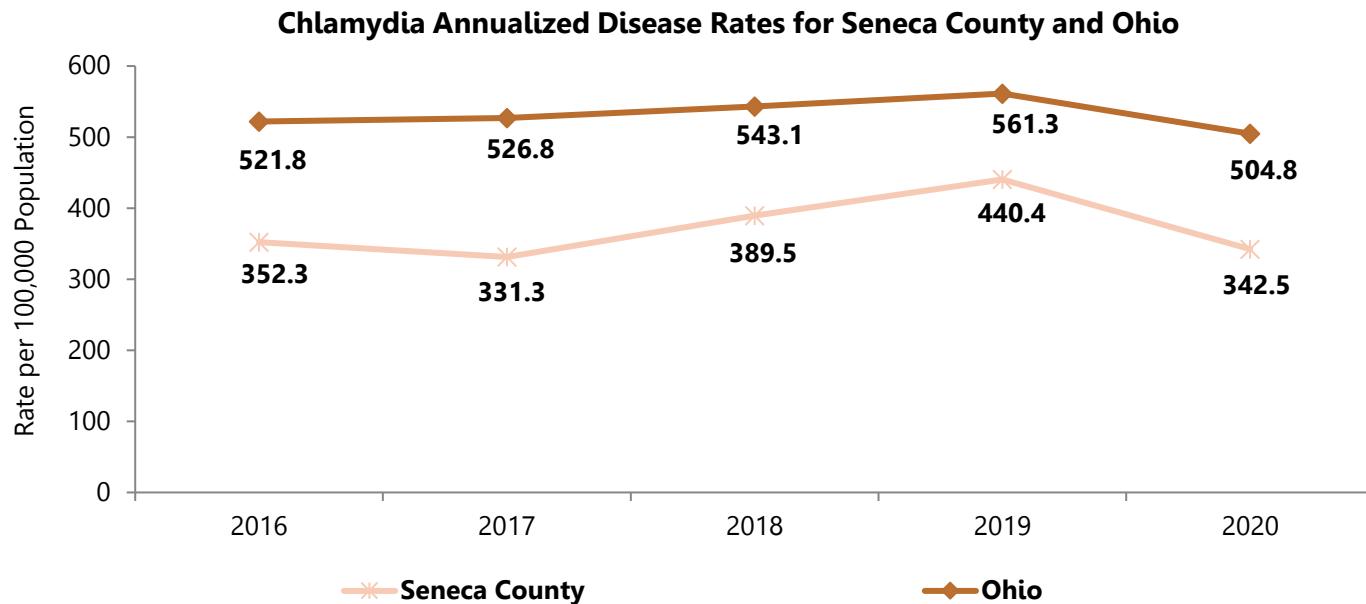
*Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"
 Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Had more than one sexual partner in past year	6%	5%	6%	6%	3%	N/A	N/A

N/A – Not Available

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

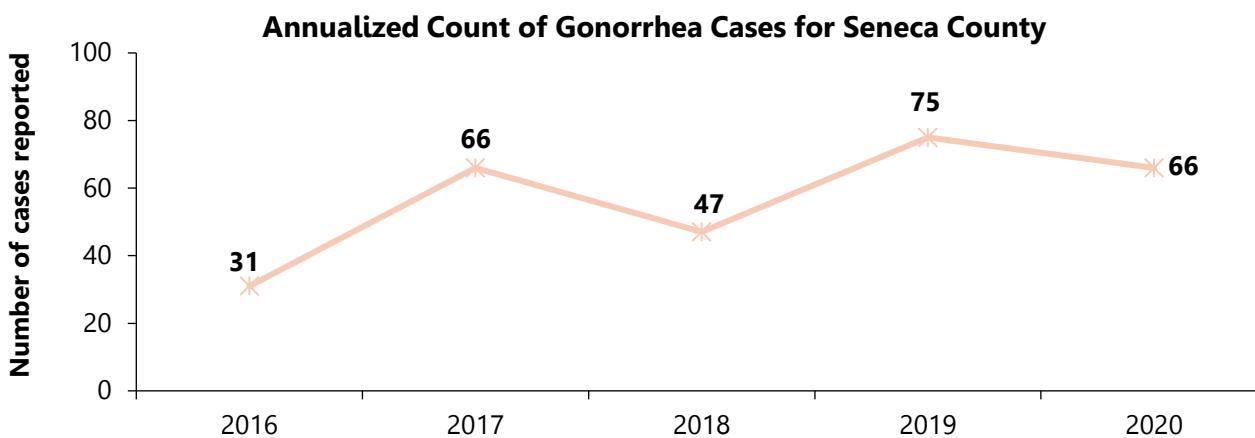
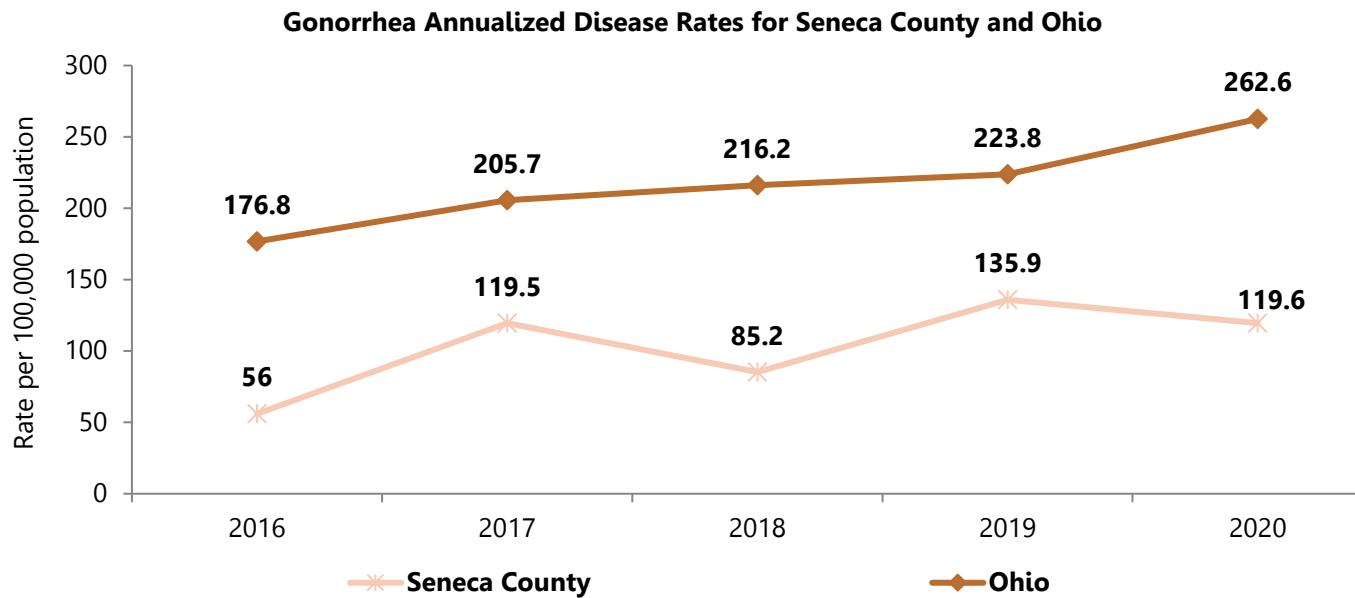
- Seneca County chlamydia rates increased from 2016-to-2019 but decreased significantly in 2020.
- The number of chlamydia cases in Seneca County increased from 2016-to 2019 but decreased in 2020.



(Source: Ohio Department of Health, STD Surveillance Program. Data reported through 12/9/2021)

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

- The Seneca County gonorrhea rate fluctuated from year-to-year but increased overall from 2016-to-2020.
- The number of gonorrhea cases in Seneca County increased overall from 2016-to-2020.



(Source: Ohio Department of Health, STD Surveillance Program. Data reported through 12/9/2021)

Health Behaviors: Adult Mental Health

Key Findings

Three percent (3%) of Seneca County adults considered attempting suicide in the past year. Twenty-seven percent (27%) of adults reported they or family member were diagnosed with or treated for anxiety or emotional problems in the past year.

Adult Mental Health

- Thirteen percent (13%) of Seneca County adults felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities, increasing to 34% of those with incomes less than \$25,000.
- Three percent (3%) of Seneca County adults considered attempting suicide in the past year.
- Less than one percent (<1%) of adults reported attempting suicide in the past year.
- Seneca 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 (27%)
 - Depression (21%)
 - An anxiety disorder (e.g., panic attacks, phobia, obsessive compulsive disorder) (20%)
 - Post-traumatic stress disorder (PTSD) (8%)
 - Attention Deficit Disorder (ADD/ADHD) (7%)
 - Bipolar Disorder (7%)
 - Autism spectrum (6%)
 - Other trauma (5%)
 - Alcohol and illicit drug abuse (3%)
 - Some other mental health disorder (3%)
 - Developmental disability (cognitive/intellectual) (2%)
 - Eating disorder (2%)
 - Life-adjustment disorder/issue (2%)
 - Psychotic disorder (e.g., schizophrenia, schizoaffective disorder) (2%)
 - Problem gambling (1%)
- Twenty-one percent (21%) of adults have taken medication for one or more of the mental health issues above.
- On a typical day, adults rated their stress level as: very low (19%), low (38%), moderate (36%), high (6%), and very high (1%).
- Adults indicated the following caused them anxiety, stress or depression: job stress (37%), financial stress (33%), current news/political environment (31%), death of close family member or friend (21%), raising/caring for children (21%), sick family member (17%), COVID-19 (16%), fighting at home (15%), marital/dating relationship (14%), poverty/no money (13%), caring for a parent or others (10%), other stress at home (9%), family member with mental illness (8%), social media (7%), unemployment (5%), divorce/separation (4%), not having enough to eat (3%), bullying (3%), sexual orientation/gender identity (2%), not feeling safe at home (2%), not having a place to live (1%), not feeling safe in the community (1%), and other causes (10%).

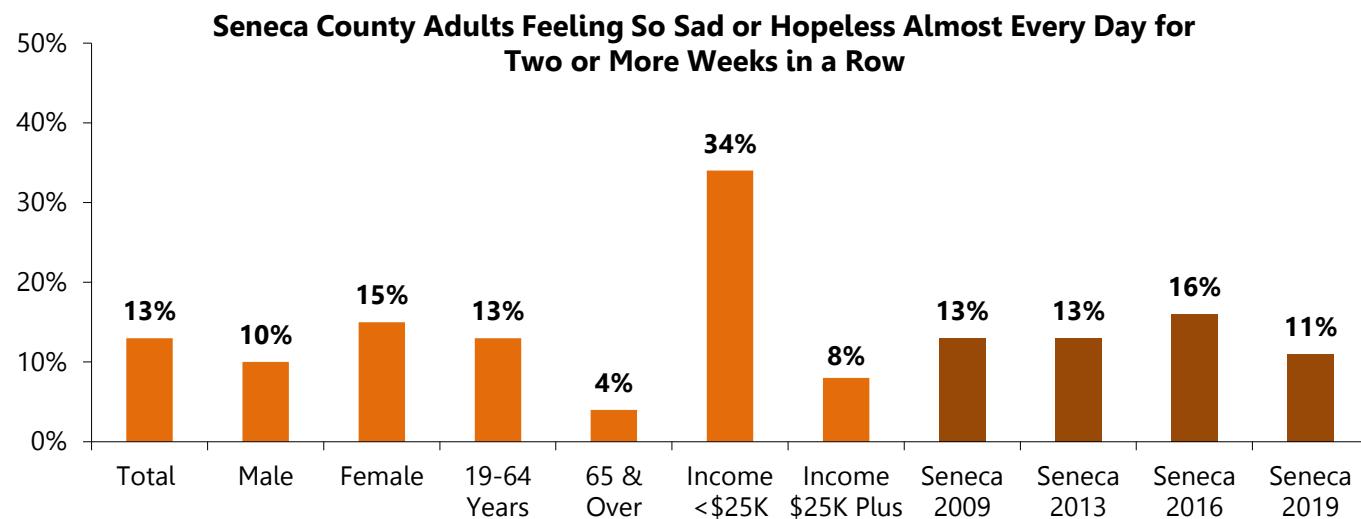
National Suicide Statistics

- 47,511 people in the U.S. died from suicide, and 1,187,775 people attempted suicide in 2019.
- An average of one person killed themselves every 11.1 minutes.
- Suicide is the 10th ranking cause of death in the U.S.
- For every female death by suicide, there are 3.6 male deaths.
- In 2019, there were 1,806 suicide deaths in Ohio.
- The leading suicide methods included:
 - Firearm suicides (50.4%)
 - Suffocation/Hanging (28.5%)
 - Poisoning (12.9%)
 - Cutting/Piercing (1.9%)
 - Drowning (1.1%)

(Source: American Association of Suicidology, Facts & Statistics, 2019)

- Thirteen percent (13%) of adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems. Reasons for **not** using such a program included: had not thought of it (10%), fear (6%), did not know how to find a program (6%), could not afford to go (5%), embarrassed to seek mental health services (5%), stigma of seeking mental health services (4%), other priorities (3%), could not find a mental health doctor or provider (3%), co-pay/deductible too high (2%), could not find a provider who accepts my insurance (2%), could not find a provider to address both mental health and disability (1%), transportation (1%), took too long to get in to see a doctor (1%), could not get to the office/clinic (1%), clinic insurance covers is too far away (<1%), and other reasons (6%). Sixty-four percent (64%) of adults indicated they did not need such a program.

The following graph shows Seneca County adults who felt sad or hopeless for two or more weeks in a row in the past year. An example of how to interpret the information includes: 13% of all adults felt sad or hopeless for two or more weeks in a row, including 15% of females and 34% of those with incomes less than \$25,000.



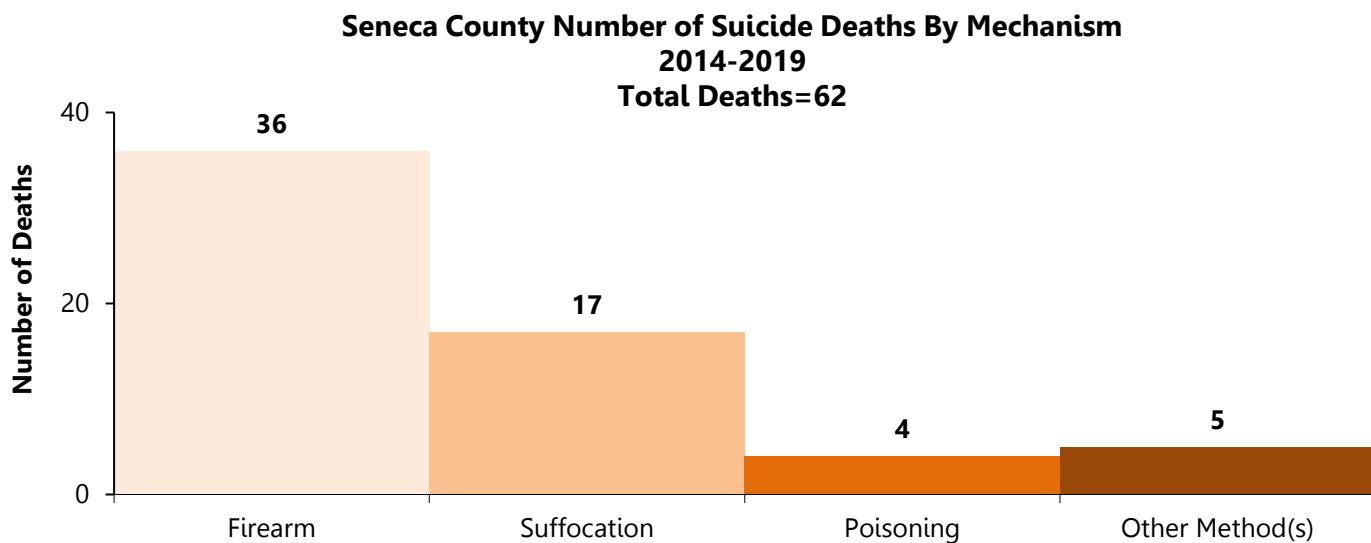
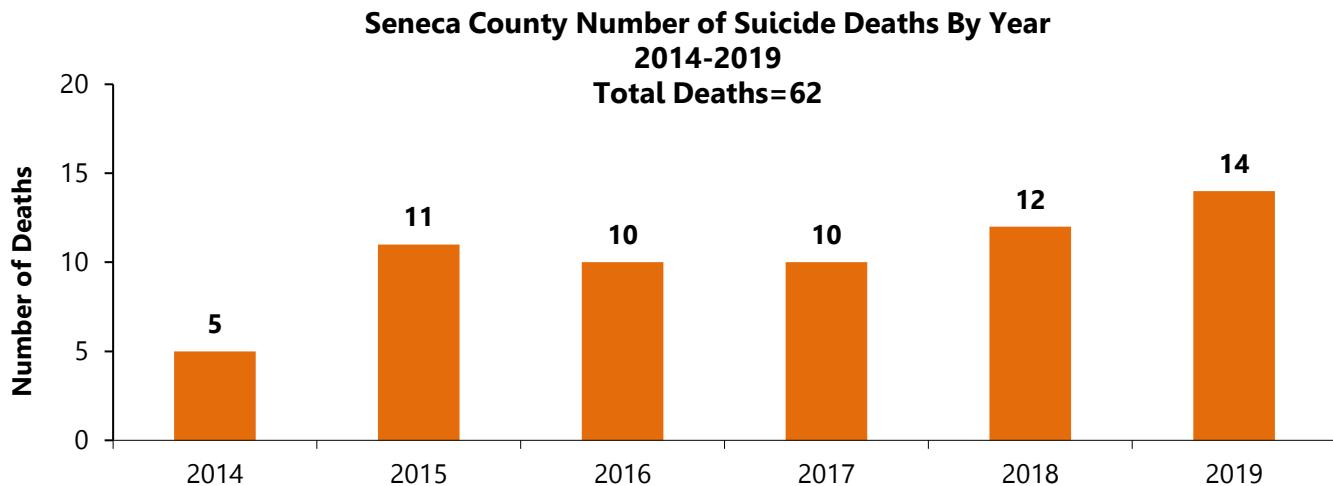
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Considered attempting suicide in the past year	4%	4%	6%	3%	3%	N/A	N/A
Attempted suicide in the past year	<1%	<1%	3%	<1%	<1%	N/A	N/A
Felt so sad or hopeless almost every day for two weeks or more in a row	13%	13%	16%	11%	13%	N/A	N/A

N/A-Not Available

The graphs below show the number of suicide deaths by year and means from 2014-2019 in Seneca County
The graphs shows:

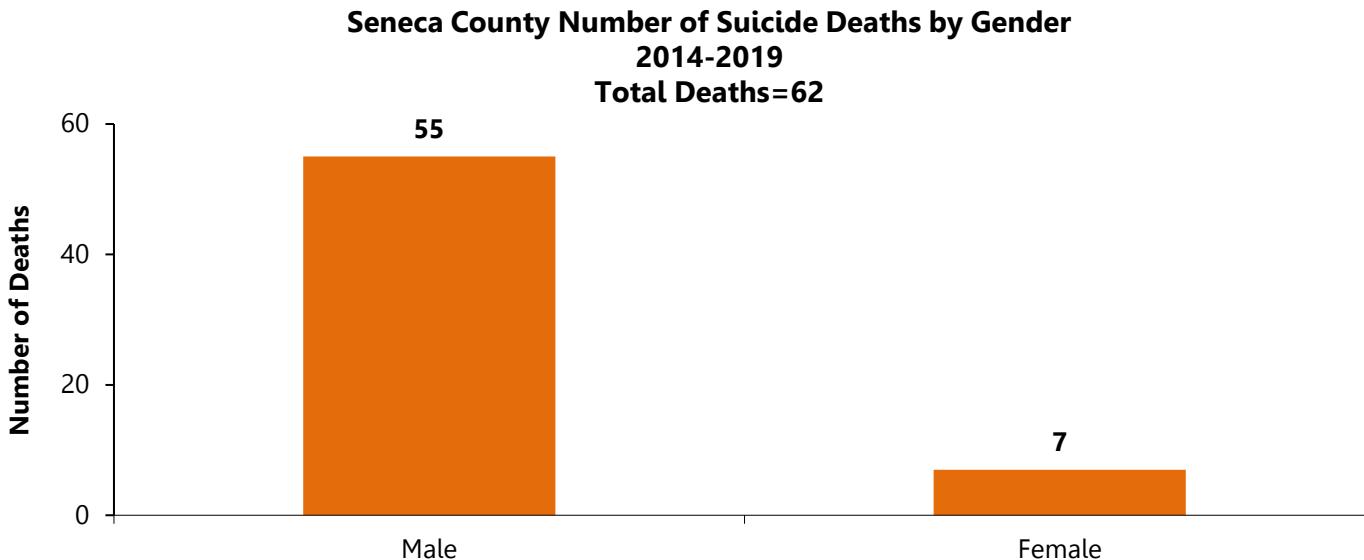
- From 2014-to-2019, there was an average of 10 suicide deaths per year in Seneca County.
- Fifty-eight percent (58%) of deaths by suicide in Seneca County from 2014-to-2019 were completed by firearms.



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 5/3/2022)

The graphs below show the number of suicide deaths by gender from 2014-to-2019 in Seneca County. The graphs show:

- From 2014-to-2019, Seneca County males were significantly more likely to die by suicide than females.



(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 5/3/2022)

Common Signs of Mental Illness in Adults

- Trying to tell the difference between what expected behaviors are and what might be the signs of a mental illness isn't always easy. There's no easy test that can let someone know if there is mental illness or if actions and thought might be typical behaviors of a person or the result of a physical illness.
- Each illness has its own symptoms, but common signs of mental illness in adults can include:
 - Excessive worrying or fear
 - Feeling excessively sad or low
 - Extreme mood changes
 - Prolonged or strong feelings of irritability or anger
 - Avoiding friends and social activities
 - Changes in sleeping habits or feeling tired and low energy
 - Changes in eating habits, such as increased hunger or lack of appetite
 - Abuse of substances like alcohol or drugs
 - Inability to carry out daily activities or handle daily problems and stress

(Source: National Alliance on Mental Illness, Know the Warning Signs, Retrieved January 2022)

Chronic Disease: Cardiovascular Health

Key Findings

Six percent (6%) of adults had survived a heart attack and 4% had survived a stroke at some time in their life. Thirty-eight percent (38%) of Seneca County adults had high blood pressure, 36% had high blood cholesterol, 39% were obese, and 15% were current smokers, four known risk factors for heart disease and stroke.

Heart Disease and Stroke

- Six percent (6%) of adults reported they had survived a heart attack or myocardial infarction, increasing to 16% of those over the age of 65.
- Four percent (4%) of Seneca County adults reported they had survived a stroke, increasing to 9% of those over the age of 65.
- Six percent (6%) of adults reported they had angina or coronary heart disease, increasing to 15% of those over the age of 65.
- Four percent (4%) of adults reported they had congestive heart failure, increasing to 9% of those over the age of 65.

High Blood Pressure (Hypertension)

- More than one-third (38%) of adults had been diagnosed with high blood pressure.
- Six percent (6%) of adults were told they were pre-hypertensive/borderline high.
- Ninety percent (90%) of adults had their blood pressure checked within the past year.
- Seneca County adults diagnosed with high blood pressure were more likely to have:
 - Been ages 65 years or older (60%)
 - Been classified as obese by Body Mass Index (51%)
 - Incomes less than \$25,000 (48%)

High Blood Cholesterol

- Thirty-six percent (36%) of adults had been diagnosed with high blood cholesterol.
- Over three-fourths (78%) of adults had their blood cholesterol checked within the past 5 years.
- Seneca County adults with high blood cholesterol were more likely to have:
 - Been ages 65 years or older (63%)
 - Incomes less than \$25,000 (40%)
 - Been classified as obese by Body Mass Index (40%)

Seneca County Leading Causes of Death 2017 - 2019

Total Deaths: 1,884

1. Heart Disease (29% of all deaths)
2. Cancer (20%)
3. Accidents, Unintentional Injuries (6%)
4. Chronic Lower Respiratory Diseases (5%)
5. Alzheimer's Disease (5%)

(Source: Ohio Public Health Data Warehouse, 2017-2019)

Ohio Leading Causes of Death, 2017 - 2019

Total Deaths: 371,649

1. Heart Disease (23% of all deaths)
2. Cancers (20%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Information Warehouse, 2017-2019)

Ohio

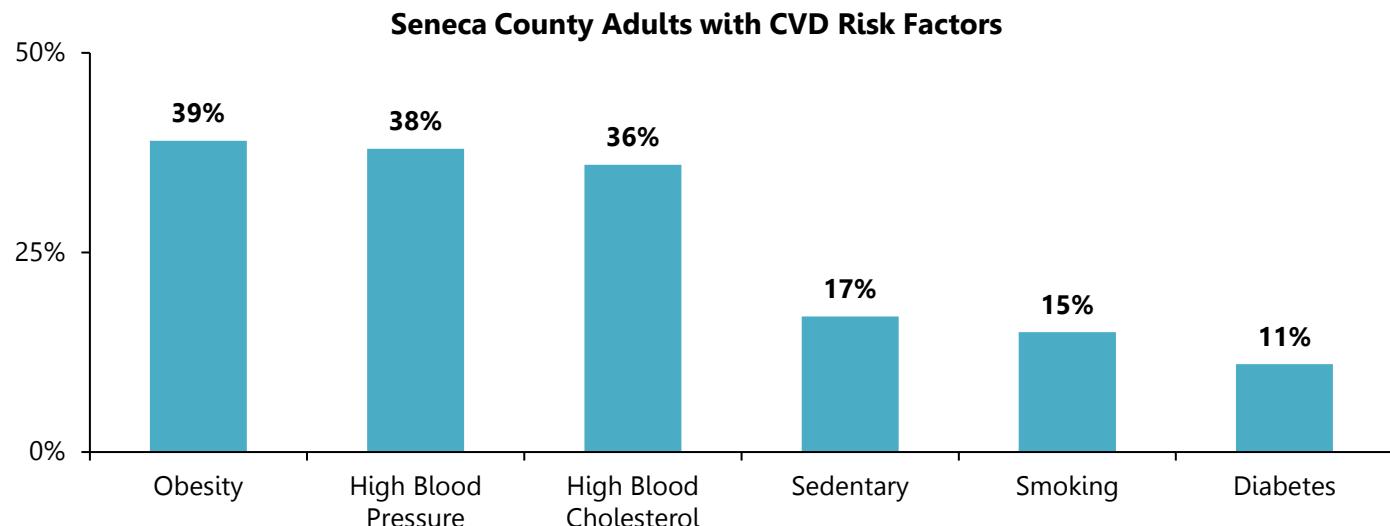
Leading Causes of Death, 2017 - 2019

Total Deaths: 371,649

1. Heart Disease (23% of all deaths)
2. Cancers (20%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Information Warehouse, 2017-2019)

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

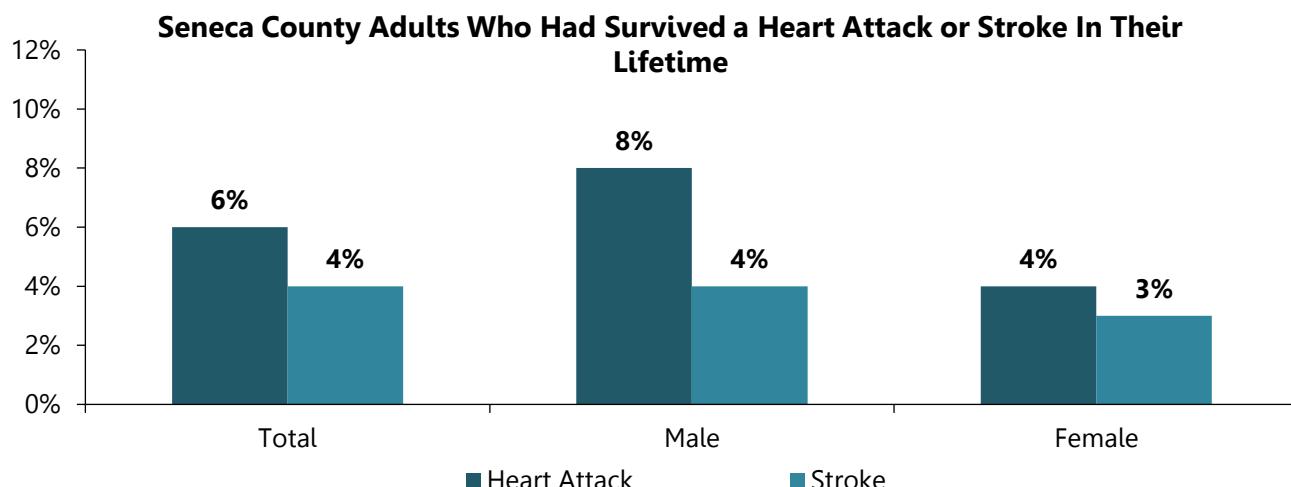


Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Had angina or coronary heart disease	N/A	6%	5%	8%	6%	5%	4%
Had a heart attack	5%	7%	6%	3%	6%	5%	4%
Had a stroke	3%	2%	2%	3%	4%	4%	3%
Had high blood pressure	33%	30%	28%	37%	38%	35%*	33%*
Had high blood cholesterol	31%	36%	37%	37%	36%	33%*	33%*
Had blood cholesterol checked within past 5 years	N/A	79%	79%	83%	78%	85%*	87%*

N/A – Not Available

*2019 BRFSS Data

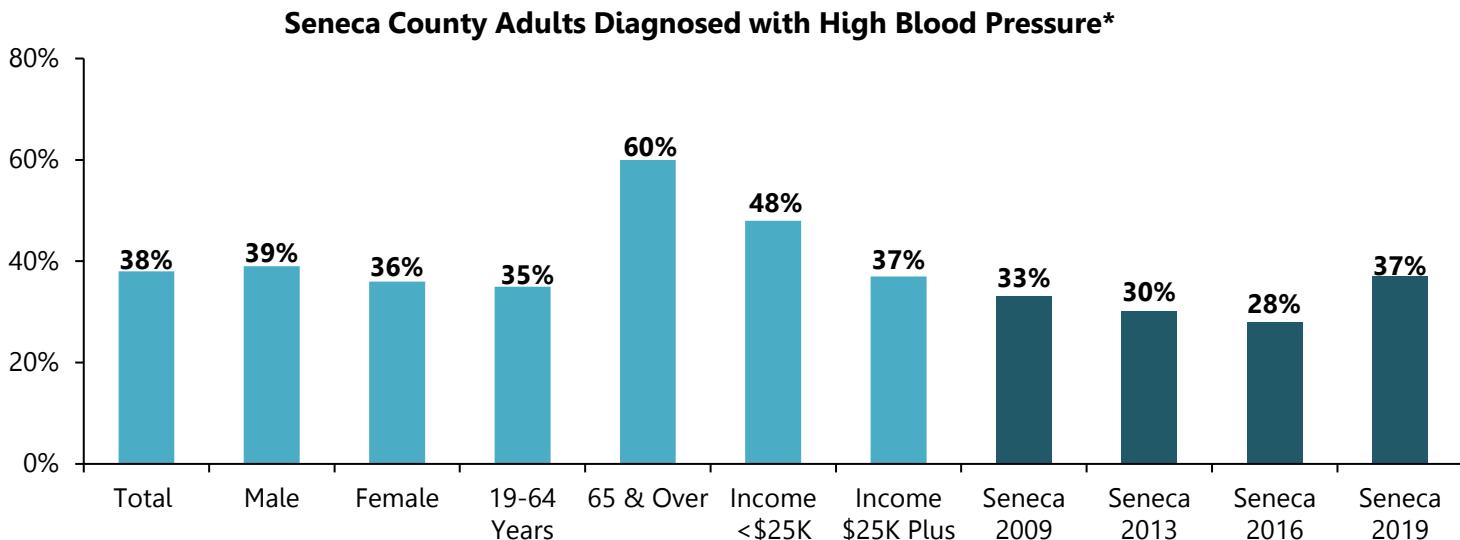
The following graph shows the percentage of Seneca County adults who had survived a heart attack or stroke in their lifetime by gender. An example of how to interpret the information includes: 8% of Seneca County males survived a heart attack compared to 4% of females.



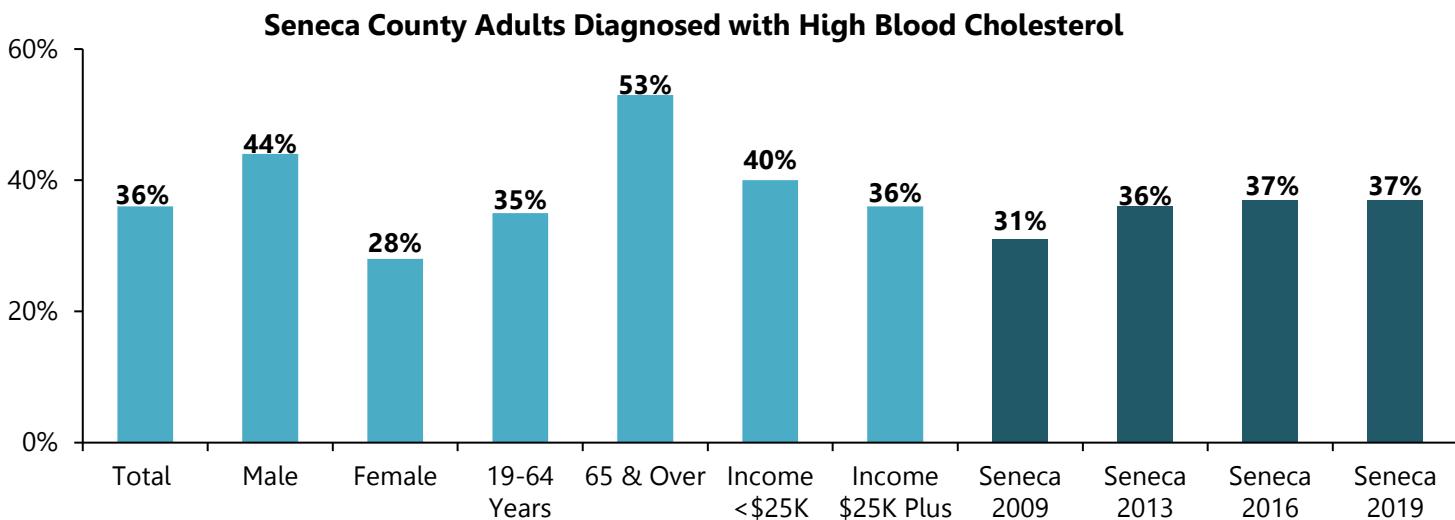
(Source: 2022 Seneca County Health Assessment)

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.

The following graphs show the percentage of Seneca County adults who had 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 Seneca County adults had been diagnosed with high blood pressure, including 39% of males and 60% of those over the age of 65.



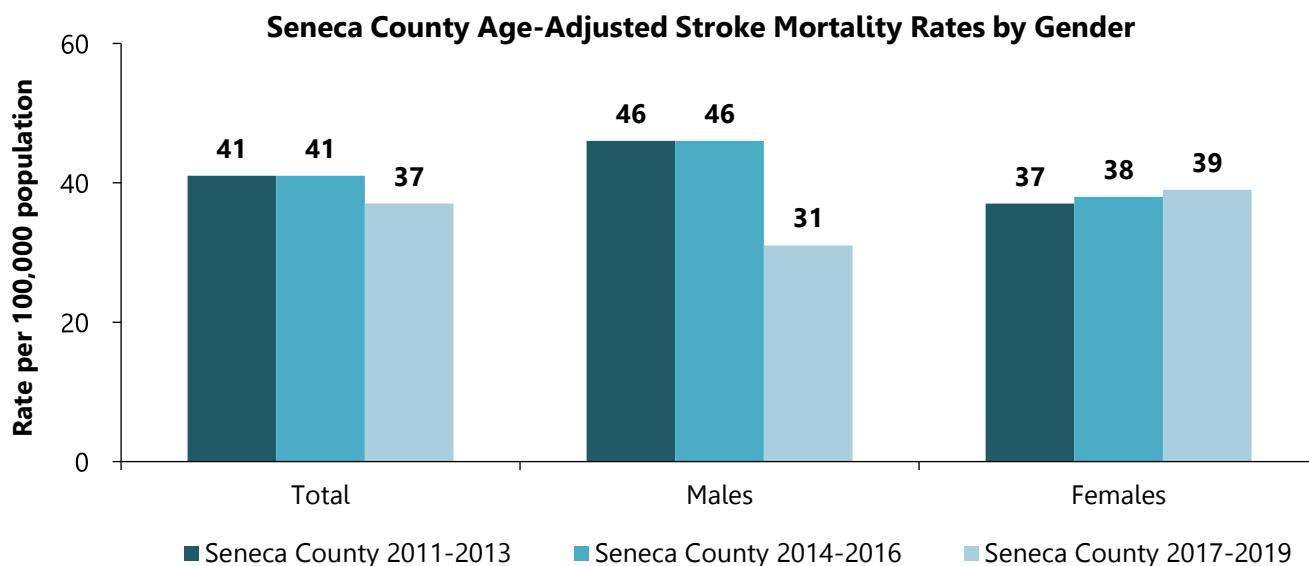
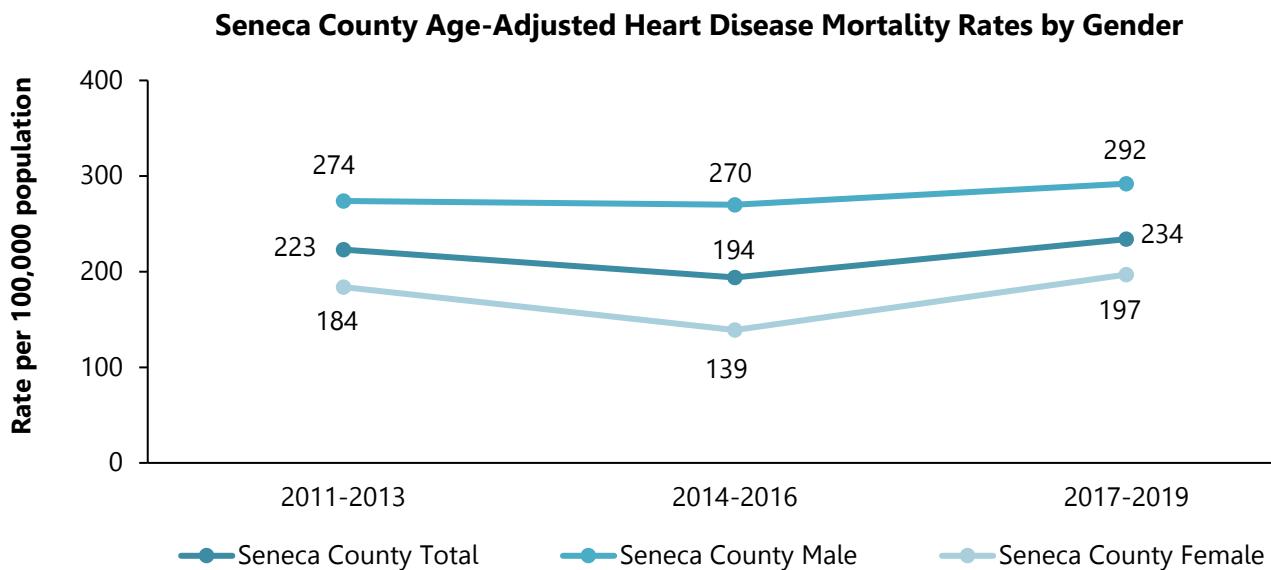
*Does not include respondents who indicated high blood pressure during pregnancy only.



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 shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender.

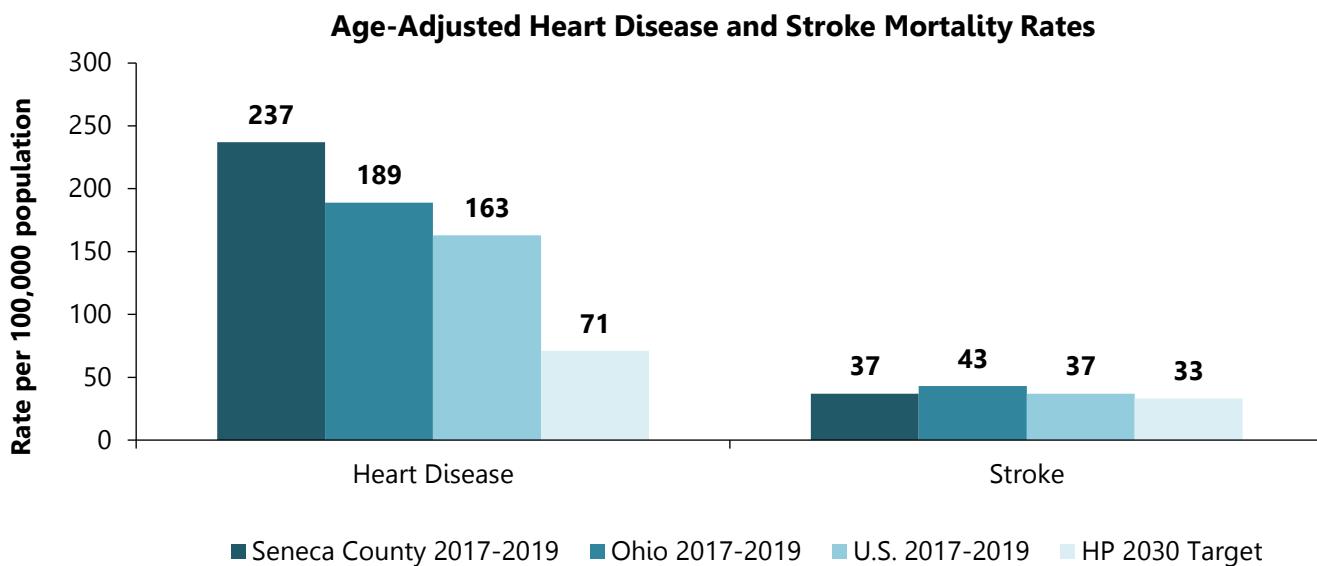
- From 2011-to-2019, the total Seneca County age adjusted heart disease mortality rate increased overall.
- From 2011-to-2019, the Seneca County stroke mortality rate fluctuated for both genders but decreased overall.



(Source for graphs: Ohio Public Health Data Warehouse, 2011-2019)

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 from 2017-to-2019 the Seneca County heart disease mortality rate was higher than the Ohio rate, the U.S. rate and the Healthy People 2030 target objective.
- The Seneca County age-adjusted stroke mortality rate was lower than the Ohio rate, equal to the U.S. rate, and higher the Healthy People 2030 target objective from 2017-to-2019.



(Source: Ohio Public Health Data Warehouse, 2017-2019, CDC Wonder, 2017-2019 and Healthy People 2030)

Healthy People 2030 Objectives Heart Disease and Stroke

Objective	Seneca Survey Population Baseline	2020 Ohio Baseline	2020 U.S. Baseline*	Healthy People 2030 Target
HDS-04: Reduce proportion of adults with hypertension	38% (2022)	35%	33% Adults age 18 and up	28%

*Note: All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2030, 2020 BRFSS, 2022 Seneca County Health Assessment)

Chronic Disease: Cancer

Key Findings

Fifteen percent (15%) of Seneca County adults had been diagnosed with cancer at some time in their life. Twenty-nine percent (29%) of adults had been screened for colorectal cancer in the past five years.

Cancer

- Fifteen percent (15%) of Seneca County adults were diagnosed with cancer at some point in their lives, increasing to 23% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: breast (35%), melanoma (16%), cervical (15%), other skin cancer (14%), prostate (10%), endometrial (10%), Non-Hodgkin's Lymphoma (8%), testicular (7%), Hodgkin's Lymphoma (4%), oral (4%), rectal (4%), Leukemia (2%), thyroid (2%), colon (2%), and other types of cancer (8%).
- Adults reported being screened for the following: colorectal cancer in the past five years (29%), oral cancer in the past year (21%), skin cancer in the past year (15%), and lung cancer in the past 3 years (6%).

Cancer Facts

- The Ohio Public Health Data Warehouse indicates that from 2017-2019, cancers caused 20% (382 of 1,884 total deaths) of all Seneca County resident deaths (Source: Ohio Public Health Data Warehouse, 2017-2019).
- The American Cancer Society reports that smoking tobacco is associated with cancers of the mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with cancers of the lung, colorectal, stomach, pancreas, kidney, bladder, uterine cervix, ovary (mucinous) and acute myeloid leukemia (Source: American Cancer Society, Facts & Figures 2022).
- The American Cancer Society states that about 609,360 Americans are expected to die of cancer in 2022. Cancer is the second leading cause of death in the U.S. exceeded only by heart disease (Source: American Cancer Society, Facts & Figures 2022).

Lung Cancer

- The largest percent (25%) of cancer deaths in Seneca County were from lung and bronchus cancers (Source: Ohio Public Health Data Warehouse, 2017-2019).
- According to the American Cancer Society, smoking causes approximately 80% of lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers (American Cancer Society, Facts & Figures 2022).

Breast Cancer

- Fifty-eight percent (58%) of Seneca County females reported having had a clinical breast examination in the past year.
- Fifty-four percent (54%) of Seneca County females over the age of 40 had a mammogram in the past year.
- The 5-year relative survival for women diagnosed with localized breast cancer (cancer that has not spread to lymph nodes or other locations outside the breast) is 99% (Source: American Cancer Society, Facts & Figures 2022).

Seneca County Incidence of Cancer, 2015 - 2019

All Types: 1,677 cases

- Breast: 254 cases (15%)
- Lung and Bronchus: 250 (15%)
- Colon and Rectum: 163 cases (10%)
- Prostate: 158 cases (9%)

From 2017-2019, there were 382 cancer deaths in Seneca County.

(Source: Ohio Cancer Incidence, ODH Ohio Public Health Data Warehouse, Updated 3/31/2022)

- 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 2022*).

Prostate Cancer

- Forty-three percent (43%) of Seneca County males had a prostate-specific antigen (PSA) test at some time in their life and 29% had one in the past year.
- Prostate cancer deaths accounted for 9% of all male cancer deaths from 2017-2019 in Seneca County (*Source: Ohio Public Health Data Warehouse, 2017-2019*).
- Incidence rates for prostate cancer are 73% higher in African Americans than in whites, and they are twice as likely to die of prostate cancer. Other risk factors include strong familial predisposition, smoking, and obesity. African American men and Caribbean men of African descent have the highest documented prostate cancer incidence rates in the world (*Source: American Cancer Society, Facts & Figures 2022*).

Colon and Rectum Cancers

- ODH indicates that colon and rectum cancer deaths accounted for 10% of all male and female cancer deaths from 2017-2019 in Seneca County (*Source: Ohio Public Health Data Warehouse, 2017-2019*).
- The American Cancer Society reports several risk factors for colorectal cancer, including age; personal or family history of colorectal cancer, polyps, or inflammatory bowel disease; obesity; physical inactivity; a diet high in red or processed meat; alcohol use; and long-term smoking. Very low intake of fruits and vegetables is also potentially a risk factor for colorectal cancer.
- In the U.S., 88% of colon cancers occur in individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings. (*Source: American Cancer Society, Facts & Figures 2022*).

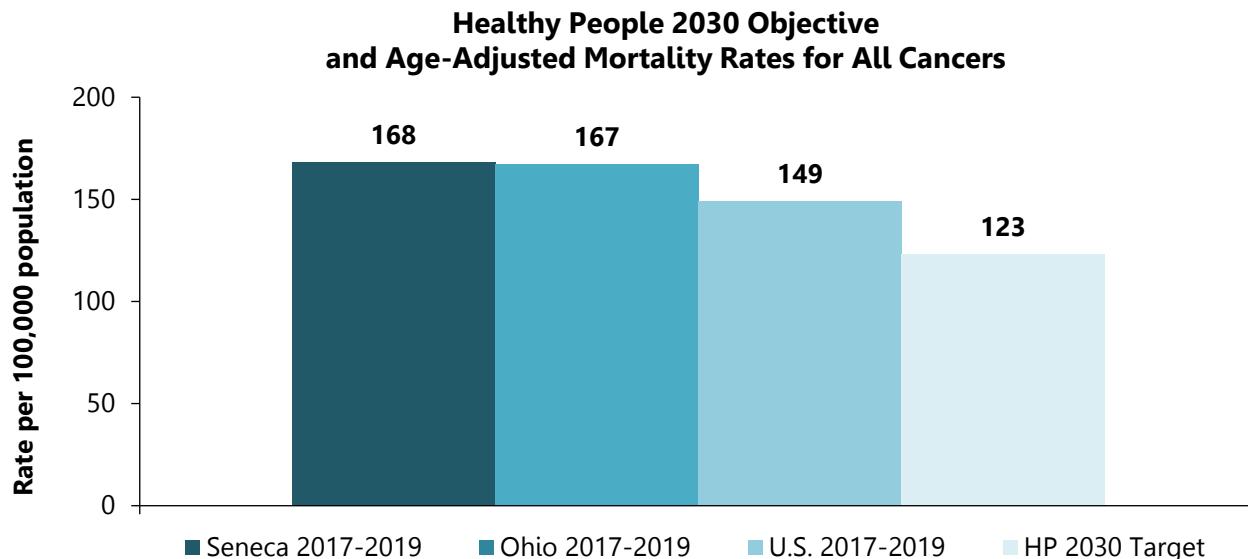
2022 Cancer Estimates

- In 2022, more than 1.9 million new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about 18% of the new cancer cases expected to occur in the U.S. will be related to being overweight or obesity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 609,360 Americans are expected to die of cancer in 2022.
- 80% of lung cancer deaths in the U.S are attributed to smoking.
- In 2022, estimates predict that there will be 73,700 new cases of cancer and 25,120 cancer deaths in Ohio.
- Of the new cancer cases in Ohio, approximately 10,430 (14%) will be from lung and bronchus cancers and 5,870 (8%) will be from colon and rectum cancers.
- About 10,610 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to be 9,530 (13%).

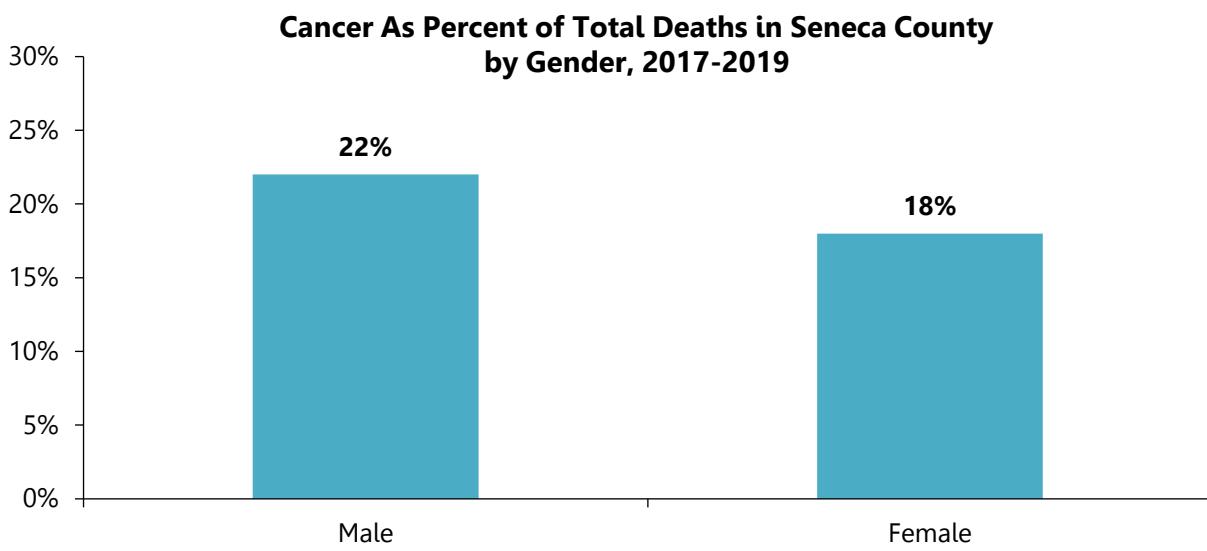
(Source: American Cancer Society, Facts and Figures 2022)

The following graphs show the Seneca 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 2030 objective and the percent of total cancer deaths in Seneca County. The graphs show:

- The Seneca County age-adjusted cancer mortality rate was higher than the Ohio rate, U.S. rate, and the Healthy People 2030 target objective.
- The percentage of Seneca County males who died from all cancers was higher than the percentage of Seneca County females who died from all cancers.



(Source: Ohio Public Health Data Warehouse, 2017-2019, CDC Wonder, 2017-2019, Healthy People 2030)



(Source: Ohio Public Health Data Warehouse, 2017-2019)

Seneca County Incidence of Cancer, 2015-2019

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer	Age-Adjusted Rate
Breast	254	15%	73.7
Lung and Bronchus	250	15%	64.4
Colon & Rectum	163	10%	44.4
Prostate	158	9%	84.1
Other Sites/Types	134	8%	37.7
Bladder	106	6%	28
Melanoma of Skin	86	5%	25.3
Non-Hodgkins Lymphoma	68	4%	18.7
Kidney & Renal Pelvis	58	3%	18.2
Uterus	55	3%	27.7
Pancreas	54	3%	14.5
Oral Cavity & Pharynx	42	3%	11.4
Thyroid	39	2%	13.4
Leukemia	38	2%	11.9
Multiple Myeloma	27	2%	7.3
Brain and Other CNS	23	1%	6.8
Stomach	22	1%	6.7
Esophagus	21	1%	5.3
Ovary	17	1%	8.8
Liver & Intrahepatic Bile Duct	15	1%	3.5
Cervix	14	1%	8.4
Larynx	13	1%	3.6
Testis	11	1%	8.7
Hodgkins Lymphoma	9	1%	3.1
Total	1,677	100%	465.3

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 3/31/2022)

Chronic Disease: Arthritis

Key Findings

Thirty-one percent (31%) of Seneca County adults were told by a doctor or other health professional that they had some form of arthritis.

Arthritis

- Thirty-one percent (31%) of Seneca County adults were told by a health professional that they had some form of arthritis, increasing to 62% of those over the age of 65.
- Seneca County adults reported they had been diagnosed with the following: gout (5%), fibromyalgia (4%), rheumatoid arthritis (4%), and lupus (1%).
- Over three-fourths (77%) of adults diagnosed with some form of arthritis were overweight or obese.

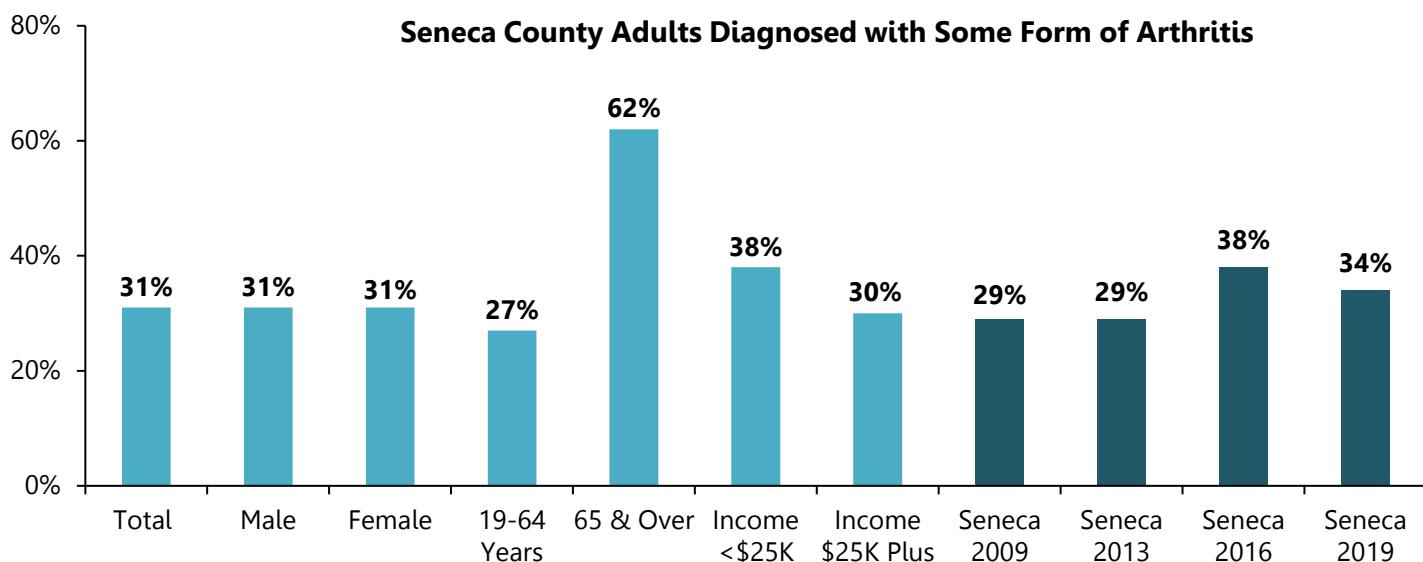
Arthritis in the U.S.

- An estimated over 58.5 million U.S. adults (about 24%) report having doctor-diagnosed arthritis.
- By 2040, over 78 million people will have arthritis.
- Arthritis is more common among women (24%) than men (18%), and it affects all racial and ethnic groups.
- Arthritis commonly occurs with other chronic diseases, like diabetes, heart disease, and obesity, and can make it harder for people to manage these conditions.

(Source: CDC, Arthritis at a Glance 2021)

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2019	U.S. 2019
Ever diagnosed with some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia	29%	29%	38%	34%	31%	31%	25%

The following graph shows the percentage of Seneca County adults who were diagnosed with arthritis. An example of how to interpret the information includes: 31% of adults were diagnosed with arthritis, including 62% of those 65 and older and, 38% of adults 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.

Chronic Disease: Asthma

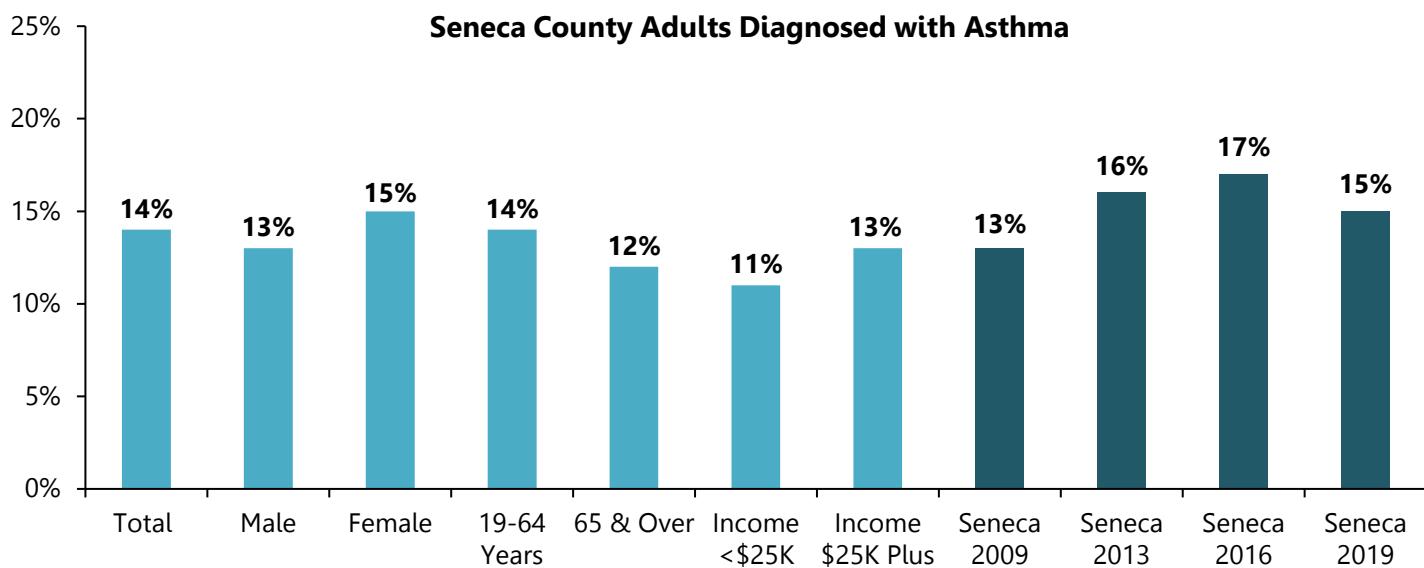
Key Findings

Fourteen percent (14%) of Seneca County adults had been told by a doctor, nurse, or other health professional that they had asthma.

Asthma

- Fourteen percent (14%) of Seneca County adults had been told by a doctor, nurse, or other health professional that they had asthma.

The following graph shows the percentage of Seneca County adults who were diagnosed with asthma. An example of how to interpret the information includes: 14% of adults were diagnosed with asthma, including 15% of females.

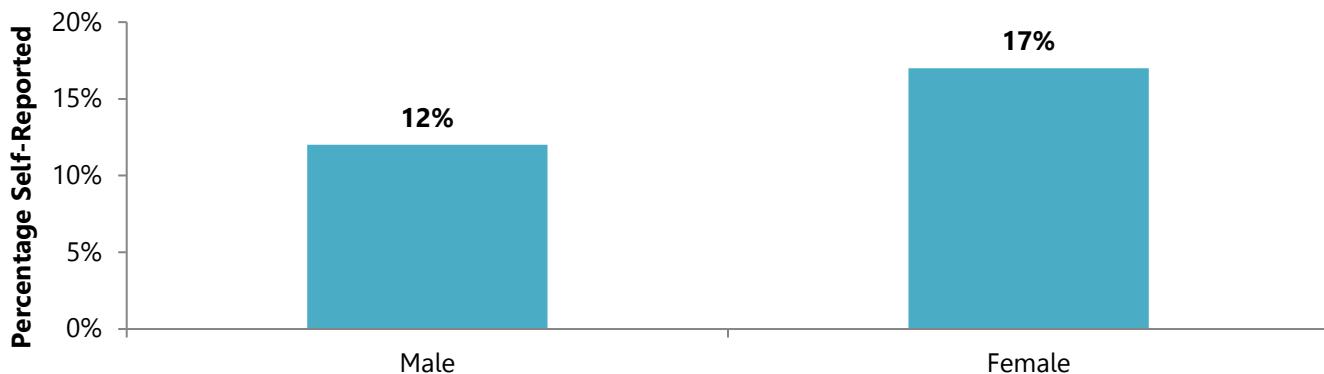


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

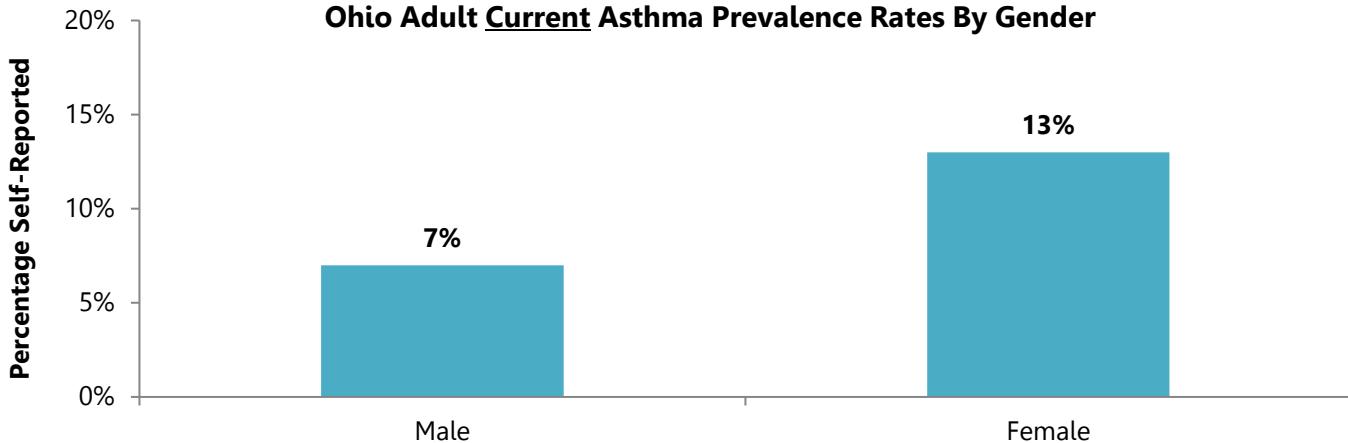
Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Had been diagnosed with asthma	13%	16%	17%	15%	14%	14%	14%

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

Ohio Adult Lifetime Asthma Prevalence Rates By Gender



Ohio Adult Current Asthma Prevalence Rates By Gender



(Source for graphs: 2020 BFRSS)

Asthma Facts

- The number of Americans with asthma grows every year. Currently, 25 million Americans have asthma.
- On average, 10 Americans die from asthma each day. In 2019, more than 3,500 people died from asthma. Adults are five times more likely to die from asthma than children and black Americans are three times more likely to die from asthma than white Americans.
- In 2018, asthma accounted for more than 175,000 discharges from hospital inpatient care and 1.6 million emergency room visits.
- Women (9.8%) are more likely than men (6.1%) to have asthma.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

(Source: Asthma and Allergy Foundation of America, Asthma Facts, and Figures, updated April 2021)

Chronic Disease: Diabetes

Key Findings

Eleven percent (11%) Seneca County adults had ever been diagnosed with diabetes. One percent (1%) of adults had only been diagnosed with diabetes during pregnancy.

Diabetes

- Eleven percent (11%) Seneca County adults had been diagnosed with diabetes, increasing to 26% of those over the age of 65.
- Eleven percent (11%) of adults had been diagnosed with pre-diabetes or borderline diabetes.
- One percent (1%) of adults had only been diagnosed with diabetes during pregnancy.
- Seneca County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 70% had been diagnosed with high blood cholesterol
 - 69% had been diagnosed with high blood pressure
 - 54% were obese
 - 34% were overweight

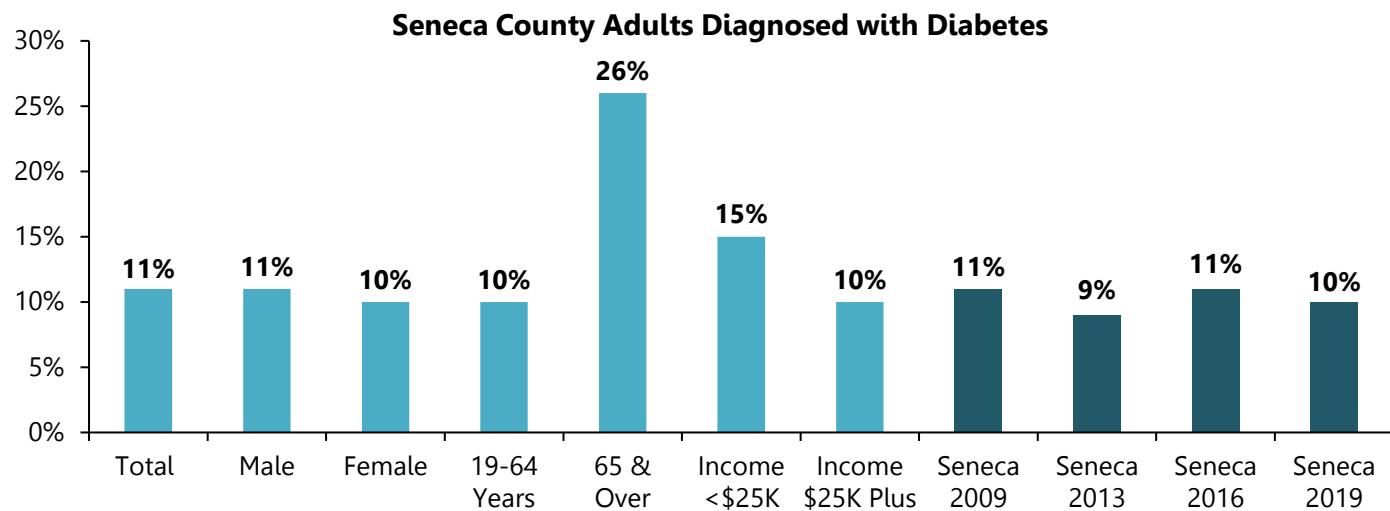
Diabetes Fast Facts

- More than **37 million** US adults have diabetes, and 1-in-5 of them do not know they have it.
- Diabetes is the **seventh leading cause of death** in the US.
- Type 2 diabetes** accounts for approximately **90-95%** of all diagnosed cases of diabetes.
- In the last **20 years**, the number of adults diagnosed with diabetes has more than **doubled** as the American population has aged and become more overweight or obese.
- Medical costs and lost work and wages for people with diagnosed diabetes total **\$327 billion** annually.

(Source: CDC, *About Diabetes*, Updated: December 2021)

4,642 adults had been diagnosed with diabetes in their lifetime.

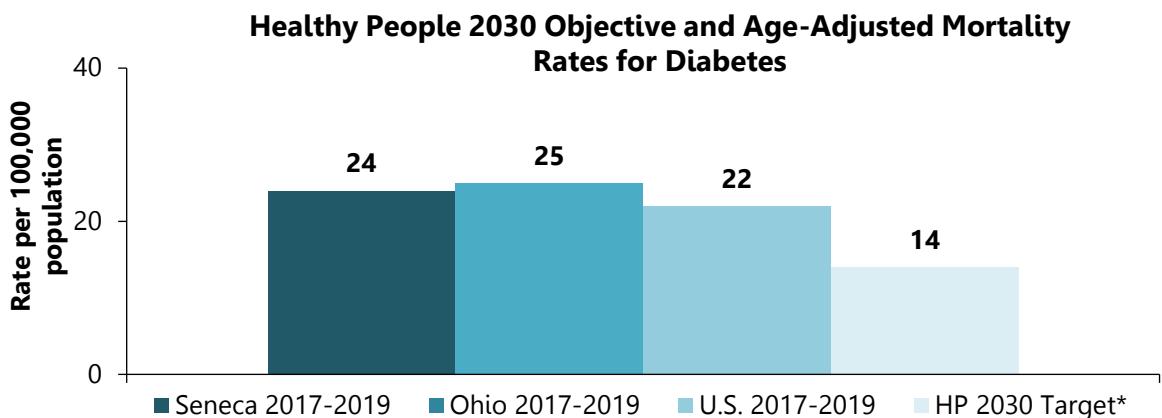
The following graph shows the percentage of Seneca County adults who were diagnosed with diabetes. An example of how to interpret the information includes: 11% of adults were diagnosed with diabetes, including 26% of adults ages 65 and older and 15% of those with incomes less than \$25,000.



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 following graph shows the Seneca County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) for diabetes in comparison to the Healthy People 2030 objective. The graph shows:

- When age differences are accounted for, the Seneca County diabetes mortality rate was higher than the U.S. rate and Healthy People 2030 objective, but lower than the Ohio rate.



*Note: The Healthy People 2030 rate is for all diabetes-related deaths
(Source: Ohio Public Health Data Warehouse, 2017-2019, CDC Wonder, 2017-2019, Healthy People 2030)

Adult Comparisons	Seneca County 2009	Seneca County 2013	Seneca County 2016	Seneca County 2019	Seneca County 2022	Ohio 2020	U.S. 2020
Had been diagnosed with diabetes	11%	9%	11%	10%	11%	12%	11%
Had been diagnosed with pre-diabetes or borderline diabetes	N/A	6%	7%	8%	11%	2%	2%
Ever been diagnosed with pregnancy-related diabetes	N/A	N/A	5%	3%	1%	1%	1%

N/A-Not Available

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 5-10% of the people who have diabetes have type 1. Symptoms of type 1 diabetes often develop quickly. It's usually diagnosed in children, teens, and young adults. If you have type 1 diabetes, you'll need to take insulin every day to survive. Currently, no one knows how to prevent type 1 diabetes.
- Type 2 diabetes** is when the body doesn't use insulin well and is unable to keep blood sugar at normal levels. Most people with diabetes—9 in 10—have type 2 diabetes. 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, healthy eating, 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 mother's 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.

(Source: CDC, What is Diabetes, Updated: November 16, 2021)

Chronic Disease: Quality of Life

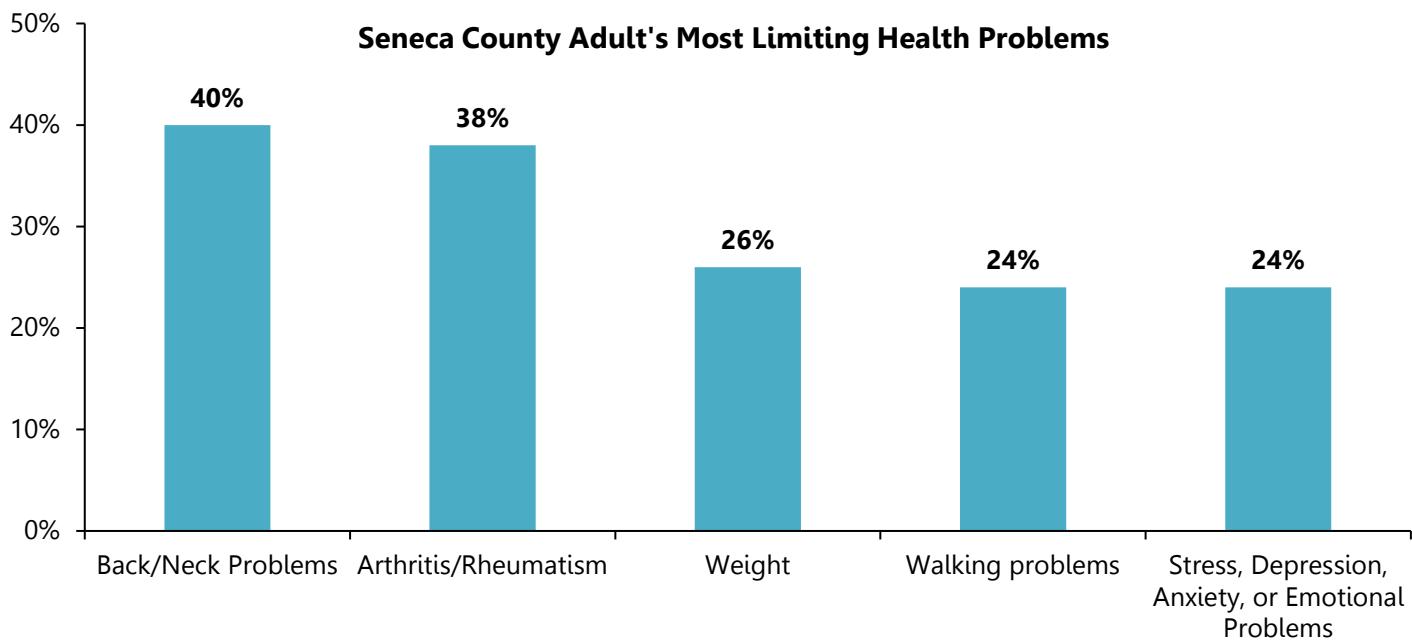
Key Findings

Forty-five percent (45%) of Seneca County adults reported they were limited by any impairment or health problem. The most limiting health problems were back or neck problems (40%), arthritis/rheumatism (38%), and weight (26%).

Impairments and Health Problems

- In 2022, 45% of Seneca County adults reported they were limited by an impairment or health problem. Among those who were limited, the following most limiting health problems or impairments were reported:
 - Back or neck problems (40%)
 - Arthritis/rheumatism (38%)
 - Weight (26%)
 - Walking problems (24%)
 - Stress, depression, anxiety, or emotional problems (24%)
 - Chronic pain (23%)
 - Sleep problems (21%)
 - Chronic illness (e.g., diabetes, cancer, heart and stroke related problems, high blood pressure) (17%)
 - Eye/vision problems (14%)
 - Fitness level (12%)
 - Lung/breathing problems (12%)
 - Fractures, bone/joint injuries (10%)
 - Hearing problems (8%)
 - Dental problems (6%)
 - Confusion (3%)
 - Memory loss (3%)
 - Learning disability (3%)
 - Drug addiction (<1%)
- Seneca County adults needed the following services or equipment in the past year:
 - Eyeglasses or vision (30%)
 - Pain management (7%)
 - Help with personal care needs (eating, bathing, dressing, getting around the house) (6%)
 - Walker (4%)
 - Cane (3%)
 - Hearing aids or hearing care (3%)
 - Help with routine needs (everyday household chores, doing necessary business) (3%)
 - Durable medical equipment (e.g., P.R. Medical Connection) (2%)
 - Medical supplies (2%)
 - Wheelchair (2%)
 - Personal emergency response system (1%)
 - Mobility aids or devices (1%)
 - Special bed (1%)
 - Oxygen or respiratory support (1%)
 - Wheelchair ramp (<1%)
- In the past year, 14% of adults fell resulting in injury that caused them to limit their regular activities for at least a day or caused them to go see a doctor, increasing to 23% of those over the age of 65.
- Seneca County adults were responsible for providing regular care or assistance to the following:
 - Multiple children (26%)
 - An elderly parent or loved one (11%)
 - A friend, family member or spouse with a health problem (8%)
 - An adult child (6%)
 - Grandchildren (5%)
 - Children with behavioral needs (4%)
 - A friend, family member or spouse with dementia (3%)
 - Someone with special needs (2%)
 - A friend, family member or spouse with a mental health issue (2%)
 - Children whose parent(s) use drugs and/or are unable to care for their child(ren) (2%)
 - Children whose parent(s) lost custody due to other reason (1%)
 - Foster children (<1%)

The following graph shows the most limiting health problems for Seneca County adults. An example of how to interpret the information shown on the graph includes: 40% of adults reported back or neck problems were their most limiting health problem.



**Healthy People 2030
Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)**

Objective	Seneca County 2022	Healthy People 2030 Target
A-02: Reduce the proportion of adults with provider-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	38%	39%

(Sources: Healthy People 2030 Objectives, 2022 Seneca County Health Assessment)

Social Conditions: Social Determinants of Health

Key Findings

Six percent (6%) of Seneca County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Thirteen percent (13%) of Seneca County adults had four or more adverse childhood experiences (ACEs) in their lifetime. Thirteen percent (13%) of adults had experienced at least one issue related to hunger/food insecurity in the past year.

Economic Stability

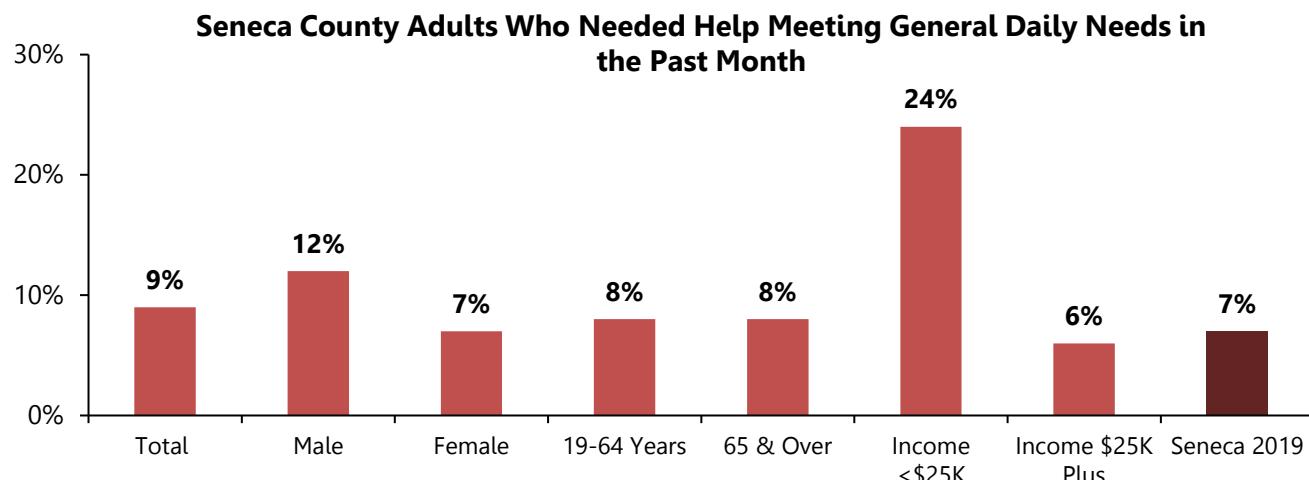
- Nine percent (9%) of Seneca County adults needed help meeting their general daily needs such as food, clothing, shelter or paying for utilities in the past month, increasing to 24% of those with incomes less than \$25,000.
- Thirteen percent (13%) adults had experienced at least one issue related to hunger/food insecurity in the past year. They experienced the following: had to choose between paying bills and buying food (5%), they were worried food might run out (5%), loss of income led to food insecurity issues (4%), their food assistance was cut (4%), went hungry/ate less to provide more food for their family (3%), and did not eat because they did not have enough money for food (1%).
- Six percent (6%) of adults experienced more than one issue related to hunger/food insecurity in the past year.
- Seneca County adults or a loved one received assistance for the following in the past year:
 - Medicare or Medicaid (14%)
 - Dental care (12%)
 - Health care (9%)
 - Food (7%)
 - Mental illness issues including depression (6%)
 - Acquiring disability benefits (6%)
 - Prescription assistance (4%)
 - Credit counseling/budgeting money (3%)
 - Home repair (3%)
 - Electric/gas/water bills (3%)
 - Employment (3%)
 - Free tax preparation (2%)
 - Affordable child care (2%)
 - Clothing (1%)
 - Septic/well repairs (1%)
 - Transportation (1%)
 - Legal aid services (1%)
 - Drug or alcohol addiction (1%)
 - Rent/mortgage/eviction (<1%)
- The median household income in Seneca County was \$58,129. The U.S. Census Bureau reports median income levels of \$60,360 for Ohio and \$67,340 for the U.S. (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2020).
- Ten percent (10%) of all Seneca County residents were living in poverty, and 13% of children and youth ages 0-17 were living in poverty (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2020).
- The unemployment rate for Seneca County was 4.8 as of March 2022 (Source: Ohio Department of Job and Family Services, March 2022).
- There were 24,157 housing units. The owner-occupied housing unit rate was 90%. Rent in Seneca County cost an average of \$699 per month (Source: U.S. Census Bureau, 2020 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. 89.5 percent (116.7 million) of U.S. households were food secure throughout 2020.
- 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. 10.5 percent (13.8 million) of U.S. households were food insecure at some time during 2020.
- 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 8, 2021)

The following graph shows the percentage of Seneca County adults who needed help meeting general daily needs such as food, clothing, shelter or paying utilities bills in the past 30 days. An example of how to interpret the information on the graph includes: 9% of all Seneca County adults needed help meeting their general daily needs, including 12% of males, and 24% 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.

Seneca County adults and their loved ones needed the following assistance in the past year:

Type of Assistance	Received Assistance	Did Not Know Where to Look	Did Not Need Assistance
Medicare or Medicaid	14%	1%	85%
Dental care	12%	3%	85%
Health care	9%	2%	89%
Food	7%	2%	91%
Mental illness issues including depression	6%	3%	91%
Acquiring disability benefits	6%	2%	92%
Prescription assistance	4%	1%	95%
Credit counseling/budgeting money	3%	4%	93%
Home repair	3%	3%	94%
Electric/gas/water bills	3%	3%	94%
Employment	3%	1%	96%
Free tax preparation	2%	5%	93%
Affordable child care	2%	4%	94%
Clothing	1%	2%	97%
Septic/well repairs	1%	1%	98%
Transportation	1%	1%	98%
Legal aid services	1%	1%	98%
Drug or alcohol addiction	1%	1%	98%
Rent/mortgage/eviction	<1%	<1%	99%
Diapers	0%	2%	98%
Emergency shelter or temporary living arrangements	0%	1%	99%
Gambling addiction	0%	1%	99%
Post incarceration transition issues	0%	1%	99%
Unplanned pregnancy	0%	1%	99%

Education

- Ninety-two percent (92%) of Seneca County adults 25 years and over had a high school diploma or higher (*Source: U.S. Census Bureau, 2020 American Community Survey 5-year Estimates*).
- Seventeen percent (17%) of Seneca County adults 25 years and over had at least a bachelor's degree (*Source: U.S. Census Bureau, 2020 American Community Survey 5-year Estimates*).

Health and Health Care

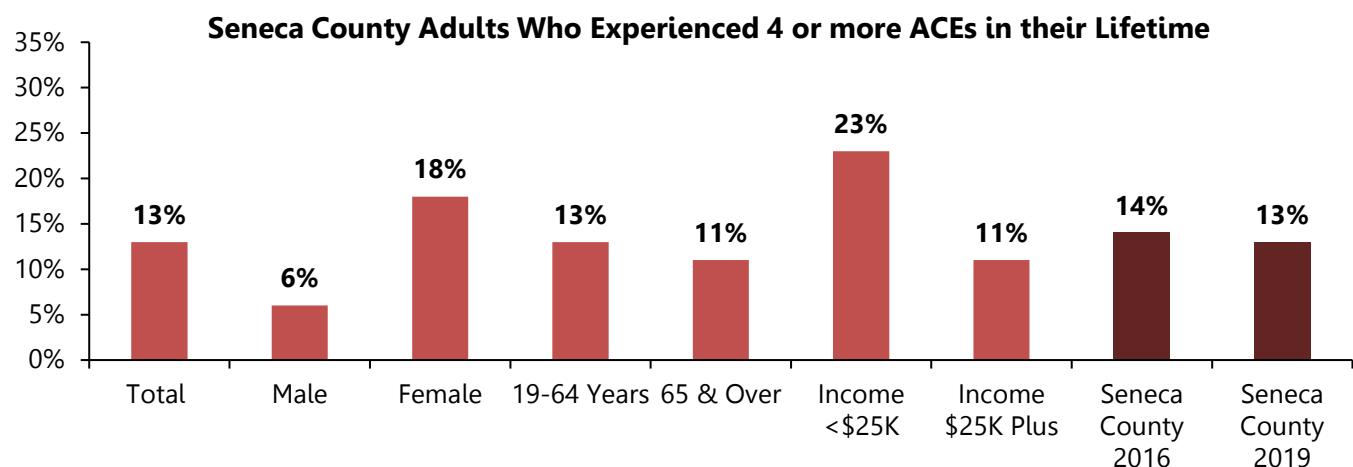
- In the past year, 7% of Seneca County adults were uninsured.
- More than two-thirds (75%) of Seneca County adults visited a doctor for a routine checkup in the past year, increasing to 88% of those over the age of 65.
- Eighty-seven percent (87%) of adults reported they had one person they thought of as their personal doctor or health care provider. Thirty-five percent (35%) of adults had more than one person they thought of as their personal health care provider, and 13% did not have one at all.
- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Seneca County adults.

Social and Community Context

- Seneca County adults reported experiencing the following situations as result of gambling: needed to gamble with larger amounts of money to get the same feeling of excitement (1%); felt the need to lie to hide the extent of their gambling (1%); consumed more alcohol or drugs while gambling (<1%); and tried to cut down or stop gambling (<1%).
- Seneca County adults experienced the following in the past 12 months: death of a family member or close friend (34%); a close family member went to the hospital (31%); had bills they could not pay (13%); were a caregiver (11%); someone in their household had their hours at work reduced (10%); decline in their own health (9%); moved to a new address (7%); someone close to them had a problem with drinking or drugs (6%); knew someone who lived in a hotel (5%); had someone homeless living with them (3%); household income was cut by 50% (2%); became separated or divorced (2%); were homeless (2%); were at risk for losing their home (2%); were abused by someone physically, emotionally, sexually or verbally (1%); witnessed someone in their family being hit or slapped (1%); and their child was threatened or abused by someone physically, emotionally, sexually, or verbally (<1%).
- Six percent (6%) of Seneca County adults were abused in the past year. They were abused by the following:
 - A parent (2%)
 - Someone else (2%)
 - A spouse or partner (2%)
 - Child (1%)
 - Someone outside their home (1%)
- As a result of military service during the past 15 years, the following have affected veterans' immediate family members: post-traumatic stress disorder (PTSD) (9%), had problems getting VA benefits (7%), access to medical care at a VA facility (7%), information on VA eligibility and applying (4%), access to medical care at a non-VA facility (2%), access to mental health treatment (2%), major health problems due to injury (2%), had marital problems (2%), problems getting suicide attempt (1%), suicide completion (1%), substance/drug abuse/overdose (1%), access to substance/drug use treatment (1%), housing issues (1%), and could not find or keep a job (1%).

- Seneca County adults experienced the following adverse childhood experiences (ACEs):
 - Lived with someone who was a problem drinker or alcoholic (21%)
 - Their parents became separated or were divorced (19%)
 - A parent or adult in their home swore at, insulted, or put them down (15%)
 - Lived with someone who was depressed, mentally ill, or suicidal (14%)
 - Someone at least 5 years older than them or an adult touched them sexually (10%)
 - Their parent passed away (9%)
 - Their family did not look out for each other, feel close to each other, or support each other (9%)
 - Their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (8%)
 - Someone at least 5 years older than them or an adult tried to make them touch them sexually (7%)
 - Their parents were not married (6%)
 - A parent or adult in their home hit, beat, kicked, or physically hurt them (6%)
 - Lived with someone who used illegal street drugs, or who abused prescription medications (6%)
 - Lived with someone who served time or was sentenced to serve time in prison, jail or correctional facility (6%)
 - Someone at least 5 years older than them or an adult forced them to have sex (4%)
 - They didn't have enough to eat, had to wear dirty clothing, and had no one to protect them (4%)
- Thirteen percent (13%) of Seneca County adults had experienced 4 or more ACEs in their lifetime, increasing to 23% of those with incomes less than \$25,000.

The following graph shows the percentage of Seneca 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: 13% of all Seneca County adults had experienced 4 or more ACEs in their lifetime, including 18% of females and 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 4 or more ACEs in their lifetime and participating in risky behaviors, as well as other activities and experiences. An example of how to interpret the information includes: 25% of those who experienced four or more ACEs were current smokers, compared to 14% of those who did not experience any ACEs.

Behaviors of Seneca County Adults
Experienced 4 or More ACEs vs. Did Not Experience Any ACEs

Adult Behaviors	Experienced 4 or More ACEs	Did Not Experience Any ACEs
Classified as overweight or obese by BMI	97%	72%
Current drinker (had at least one alcoholic beverage in the past month)	53%	58%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	40%	43%
Current smoker (currently smoke on some or all days)	25%	14%
Medication misuse in the past 6 months	11%	6%
Used recreational marijuana in the past 6 months	3%	7%

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.

Adverse Childhood Experiences (ACEs)

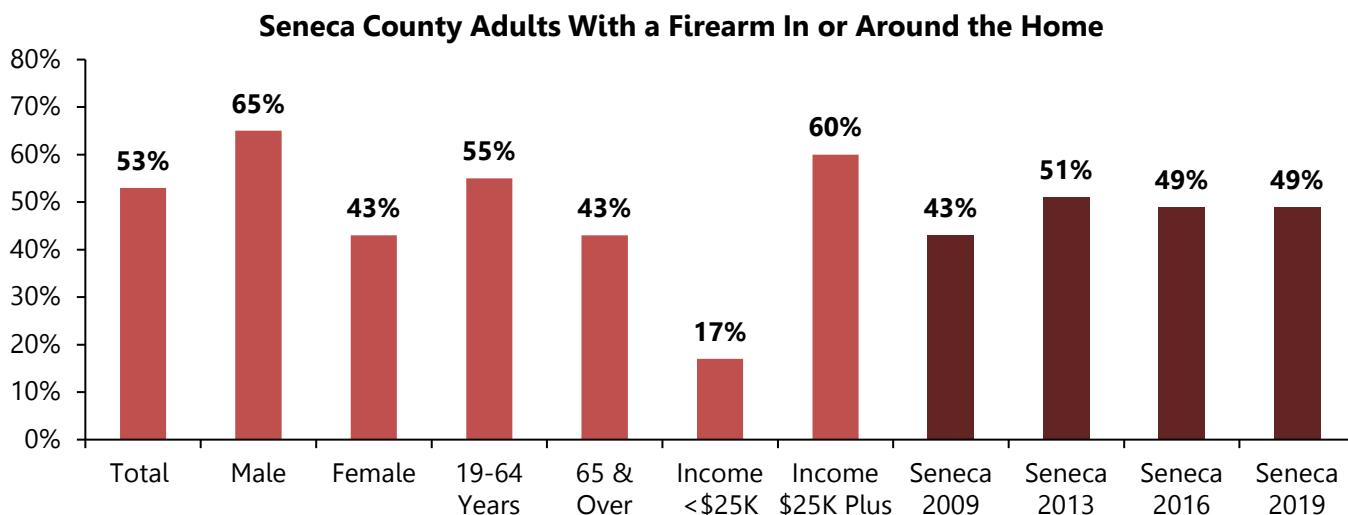
- Adverse childhood experiences, or ACEs, are potentially **traumatic events that occur in childhood** (0-17 years). Examples include:
 - Experiencing violence, abuse, or neglect
 - Witnessing violence in the home or community
 - Having a family member attempt or die by suicide
- Also included are aspects of a child's environment that can undermine their sense of safety, stability, and bonding, such as growing up in a household with:
 - Substance abuse problems
 - Mental health problems
 - Instability due to parental separation or household members being in jail or prison
- **ACEs are linked to chronic health problems, mental illness, and substance abuse problems.** ACEs can also negatively impact education, job opportunities, and earning potential.
- **How big is the problem?** Approximately 61% of adults surveyed across 25 states reported that they had experienced at least one type of ACE, and nearly 1-in-6 reported they had experienced four or more types of ACEs.
- Up to **1.9 million cases of heart disease** and **21 million cases of depression** could have been potentially avoided by preventing ACEs.
- **Women and several racial/ethnic minority groups are at greater risk** for having experienced 4 or more types of ACEs.

(Source: CDC, Adverse Childhood Experiences (ACEs), Preventing Adverse Childhood Experiences, Updated April 6, 2022)

Neighborhood and Built Environment

- Seneca County adults considered their neighborhood to be extremely safe (40%), quite safe (47%), slightly safe (11%), not at all safe (1%) from crime, and 1% do not know.
- Seneca County adults reported doing the following while driving: talking on hands-free cell phone (50%), eating (41%), talking on hand-held cell phone (37%), texting (25%), not wearing a seatbelt (19%), using Internet on their cell phone (16%), being under the influence of alcohol (3%), reading (3%), being under the influence of prescription drugs (2%), being under the influence of recreational drugs (1%), and other activities (such as applying makeup, shaving, etc.) (1%).
- Over half (51%) of adults reported they had more than one distraction while driving.
- Fifty-three percent (53%) of Seneca County adults kept a firearm in or around their home. Six percent (6%) of adults reported they were unlocked and loaded.

The following graph shows the percentage of Seneca County adults who had a firearm in or around the home. An example of how to interpret the information shown on the graph includes: 53% of all Seneca County adults had a firearm in or around the home, including 65% of males, and 43% 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.

Social Conditions: Environmental Conditions

Key Findings

The top two environmental health issues for Seneca County adults that threatened their health in the past year were mold (7%) and insects (6%). Over half (56%) of adults had a 3-day supply of prescription medication for each person who takes prescribed medicines.

Environmental Health

- Seneca County adults thought the following threatened their health or their family's health in the past year:
 - Mold (7%)
 - Insects (mosquitos, ticks, flies) (6%)
 - Air quality (3%)
 - Rodents (mice or rats) (3%)
 - Unsafe water supply/wells (3%)
 - Temperature regulation (heating and air conditioning) (3%)
 - Bed bugs (2%)
 - Moisture issues (2%)
 - Plumbing problems (2%)
 - Agricultural chemicals (2%)
 - Lead paint (1%)
 - Cockroaches (1%)
 - Trash/waste disposal (1%)
 - Sewage/waste water problems (1%)
 - Chemicals found in household products (1%)
 - Asbestos (<1%)
 - Radon (<1%)

Mold Prevention Tips

- Exposure to damp and moldy environments may cause a variety of health effects. Some people are sensitive to molds. For these people, exposure to molds can lead to symptoms such as stuffy nose, wheezing, and red or itchy eyes, or skin. Some people, such as those with allergies to molds or with asthma, may have more intense reactions.
- In your home, you can control mold growth by:
 - Keeping humidity levels as low as you can, no higher than 50%, all day long.
 - Making 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.
 - Fixing any leaks in your home's roof, walls, or plumbing so mold does not have moisture to grow.
 - Not using carpet in rooms or areas like bathrooms or basements that may have a lot of moisture.

(Source: CDC, Basic Facts about Mold and Dampness, Updated August 11, 2020)

Disaster Preparedness

- Seneca County adults indicated the following about fire safety in their home: checked smoke detectors at least every 6 months (62%), had the recommended amount of smoke detectors (54%), and had a fire escape plan (38%).
- Seneca County households had the following disaster preparedness supplies: cell phone (85%), cell phone with texting (83%), working smoke detector (81%), working flashlight and working batteries (81%), computer/tablet (75%), 3-day supply of nonperishable food for everyone in the household (63%), 3-day supply of prescription medication for each person who takes prescribed medicines (56%), 3-day supply of water for everyone in the household (1 gallon of water per person per day) (45%), working battery-operated radio and working batteries (41%), generator (35%), home land-line telephone (28%), communication plan (24%), and a disaster plan (11%). Six percent (6%) of adults had none of the above disaster preparedness supplies.
- Seneca County adults indicated the following as their main method or way of getting information from authorities in a large-scale disaster or emergency:

— Television (79%)	— Text messages (40%)
— Internet (78%)	— Smart phone app (30%)
— Friends/family (63%)	— Newspaper (24%)
— Radio (58%)	— Other social media (13%)
— Facebook (53%)	— Twitter (12%)
— Wireless emergency alerts (49%)	— Landline phone (9%)
— Seneca County Emergency Alert System (47%)	— Other methods (4%)
— Neighbors (40%)	

COVID-19

- Seneca County adults and their families were negatively affected by the COVID-19 pandemic in the following ways:

— Financial instability (10%)
— Change in mental health (10%)
— Loss of household income (10%)
— Changes to employment status (10%)
— Not seeking health care (9%)
— Not seeking dental care (6%)
— Change in physical health (6%)
— Educational challenges (i.e., children transitioned to online academics or home-schooling, or adults unable to pursue further education) (6%)
— Death or serious illness of loved one(s) (4%)
— Lack of child care (3%)
— Unable to afford food (3%)
— Housing instability (1%)
— Increased alcohol use (1%)
— Lack of Internet access (1%)
— Unable to afford medicine (1%)
— Unable to afford basic needs (personal, household, or baby care) (1%)

Social Conditions: Parenting

Key Findings

Forty-one percent (41%) of Seneca County parents talked to their 12-to-17-year-old about dating and relationships in the past year. Thirty-six percent (36%) of adults reported their entire family in their home at a meal together every day of the week.

Parenting

- In an average week, adults reported having a meal with their entire family in their home at the following frequencies: 1 day (6%), 2 days (3%), 3 days (12%), 4 days (7%), 5 days (20%), 6 days (5%), and 7 days (36%). Ten percent (10%) of parents reported they did not eat a meal together on any day in the past week.
- Ninety-six percent (96%) 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 4% reported their child **never** rode in a car seat when a passenger in a car.
- Three-fourths (75%) 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 17% who **never** rode in a booster seat.
- Ninety percent (90%) of parents whose child was old enough and/or tall enough to not be in a booster seat reported their child always wore a seat belt, and 4% reported their child **never** wore a seat belt.

Parents discussed the following health topics with their 5-11-year-old and/or their 12-17-year-old in the past year:

Topic Discussed With Child	5 to 11-Year-Old	12 to 17-Year-Old	Both Age Groups	Did Not Discuss
Family values	24%	30%	26%	20%
Bullying	40%	22%	23%	13%
Weight status	14%	22%	22%	42%
Social media issues	10%	30%	19%	41%
Refusal skills/peer pressure	14%	30%	18%	38%
Body image	14%	25%	16%	45%
School/legal consequences of alcohol, tobacco, or other drugs	3%	29%	15%	53%
Negative effects of alcohol, tobacco, illegal drugs, or misusing prescription drugs	9%	39%	15%	37%
Changes in the body	18%	26%	14%	42%
Education after high school or graduation	14%	42%	13%	31%
Volunteering	5%	32%	12%	51%
Human trafficking	1%	19%	10%	69%
Energy drinks	9%	25%	8%	58%
Dating and relationships	7%	41%	5%	47%
Depression, anxiety, suicide	3%	29%	5%	63%
Abstinence and how to refuse sex	0%	26%	3%	71%
Birth control/condoms/safe sex/STD prevention	0%	28%	1%	71%

Youth Health: Weight Status

Key Findings

Twenty-four percent (24%) of Seneca County youth were obese, according to Body Mass Index (BMI) by age. Seventy-three percent (73%) 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-four percent (24%) of Seneca County youth were classified as obese by Body Mass Index (BMI) calculations, 19% of youth were classified as overweight, 55% were normal weight, and 2% were underweight.

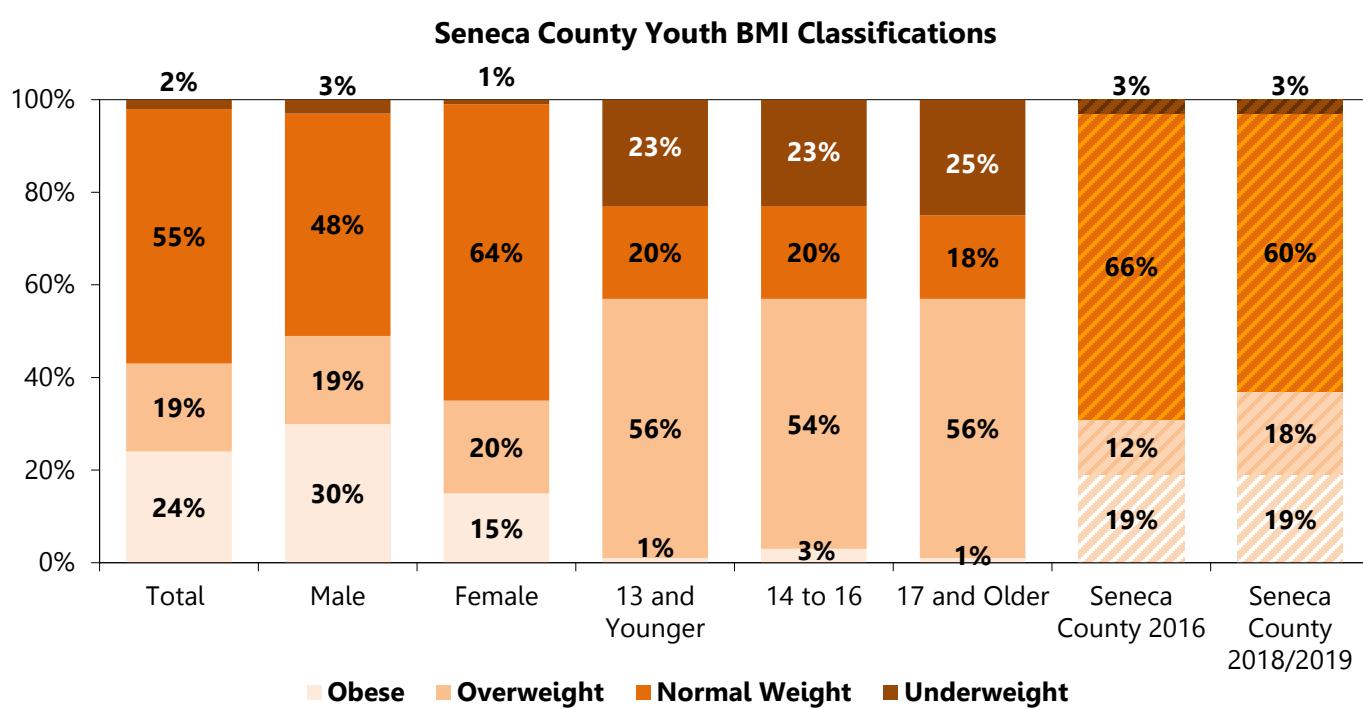
Nutrition

- During the past week, youth reported eating fruits and vegetables at the following frequencies per day: 1 to 4 servings (77%); 5 or more servings (12%); 0 servings because they did not like fruits or vegetables (7%); 0 serving, they could not afford fruits or vegetables (1%); and 0 servings because they did not have access to fruits or vegetables (3%).
- During the past week, youth reported drinking a can, bottle, or glass of soda or pop at the following frequencies: 1 to 3 times during the past week (36%), 4 to 6 times during the past week (10%), 1 time per day (8%), 2 times per day, (5%), 3 times per day (2%), and 4 or more times per day (3%). Over one-third (36%) of youth reported they did not drink soda or pop during the past week.
- During the past week, youth reported eating breakfast:
 - 0 days (22%)
 - 1 day (10%)
 - 2 days (10%)
 - 3 days (9%)
 - 4 days (9%)
 - 5 days (9%)
 - 6 days (5%)
 - 7 days (26%)

Physical Activity

- Seventy-three percent (73%) of youth participated in at least 60 minutes of physical activity on 3 or more days in the past week, 50% did so on 5 or more days in the past week, and 26% did so every day in the past week. Thirteen percent (13%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- The CDC recommends that children and adolescents participate in at least 60 minutes of physical activity per day. Aerobic activity, muscle strengthening, and bone strengthening are three distinct types of physical activity that children should engage in, appropriate to their age. Children should participate in each of these types of activity on at least three days per week (*CDC, 2021*).

The following graph shows the percentage of Seneca County youth who were classified as obese, overweight, normal weight or underweight according to Body Mass Index (BMI) by age. Examples of how to interpret the information in the graph include: 55% of all Seneca County youth were classified as normal weight, 24% were obese, 19% were overweight, and 2% were underweight for their age and gender.



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

Childhood Obesity Causes and Consequences

Obesity during childhood can harm the body in a variety of ways. Children who have obesity are more likely to have:

Immediate health risks:

- High blood pressure and high cholesterol, which are risk factors for cardiovascular disease
- Increased risk of impaired glucose tolerance, insulin resistance, and type 2 diabetes.
- Breathing problems, such as asthma and sleep apnea
- Joint problems and musculoskeletal discomfort
- Fatty liver disease, gallstones, and gastro-esophageal reflux (i.e., heartburn)

Future health effects:

- More likely to become adults with obesity. Adult obesity is associated with increased risk of several serious health conditions including heart disease, type 2 diabetes, and cancer.
- Obesity and disease risk factors in adulthood are likely to be more severe.

Childhood obesity is also related to psychological problems such as anxiety and depression, low self-esteem and lower self-reported quality of life, and social problems such as bullying and stigma.

(Sources: CDC, Childhood Overweight and Obesity, Updated: March 19, 2021)

Healthy People 2030
Nutrition and Weight Status (NWS)

Objective	Seneca County 2022 OHYES!	Ohio 2019	U.S. 2019	Healthy People 2030 Target
NWS-04 Reduce the proportion of children and adolescents with obesity	24% (7-12 Grade) 24% (9-12 Grade)	17% (9-12 Grade)	16% (9-12 Grade)	16%* (Youth 2-19 years)

*Note: The Healthy People 2030 target is for children and youth aged 2-19 years.
 (Sources: Healthy People 2030 Objectives, 2019 YRBS, 2022 Seneca County OHYES)

Youth Comparisons	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (9 th -12 th)
Obese	13%	17%	19%	19%	24%	24%	17%	16%
Overweight	14%	14%	12%	18%	19%	18%	12%	16%
Physically active at least 60 minutes per day on every day in past week	29%	21%	32%	26%	26%	22%	24%	23%
Physically active at least 60 minutes per day on 5 or more days in past week	54%	43%	53%	60%	50%	49%	43%	44%
Did not participate in at least 60 minutes of physical activity on any day in past week	8%	16%	9%	10%	13%	12%	21%	17%

Youth Health: Tobacco/Electronic Vapor Product Use

Key Findings

Three percent (3%) of Seneca County youth were current smokers. Almost one-fourth (24%) of youth had used an electronic vapor product in their life.

Youth Tobacco Use

- Four percent (4%) of youth had smoked all or part of a cigarette within the past 30 days.
- Three percent (3%) of youth were current smokers, having smoked sometime in the past 30 days.
- Of those who smoked in the past 30 days, youth reported getting their cigarettes from the following:
 - Borrowed (bunged) them from someone else (33%)
 - A person 18 years or older gave them (26%)
 - Bought them in a convenience store, supermarket, discount store, or gas station (22%)
 - Took them from a family member (19%)
 - Gave someone else money to buy them (19%)
 - Bought them on the Internet (11%)
 - Took them from a store (4%)
 - Bought them from a vending machine (4%)
 - Some other way (44%)
- Four percent (4%) of Seneca County youth had smoked cigars, cigarillos, or little cigars in the past 30 days.
- Three percent (3%) of youth in Seneca County had used chewing tobacco, snuff, dip, snus or dissolvable tobacco products in the past 30 days.

Youth Electronic Vapor Product Use

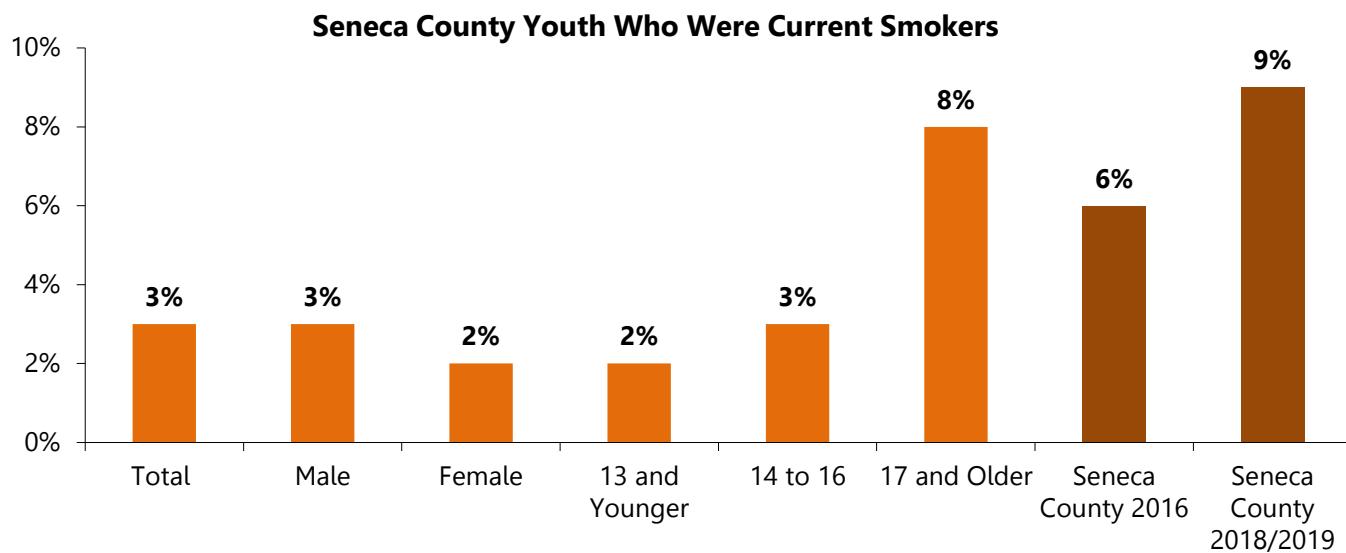
- Almost one-fourth (24%) of youth had used an electronic vapor product in their life.
- Fourteen percent (14%) had used an electronic vapor product in the past 30 days.
- Of youth who obtained electronic vapor products in the past 30 days, youth reported obtaining them the following ways:
 - Borrowed (bunged) them from someone else (69%)
 - Gave someone else money to buy them (33%)
 - Bought them from a vape shop or tobacco shop (25%)
 - Bought them in a convenience store, supermarket, discount store, gas station, or vape store (25%)
 - Bought them on the Internet (7%)
 - Stole them from a store or person (7%)
 - Some other way (47%)
- Youth reported the following as main reasons for using electronic vapor products:
 - Friend used them (43%)
 - Family member used them (24%)
 - Boredom (21%)
 - Their friends pressured them (18%)
 - Available in flavors, such as mint, candy, fruit, or chocolate (16%)
 - Less harmful than other forms of tobacco (11%)
 - They tried to quit using other tobacco products (8%)
 - Easier to get than other tobacco products (6%)
 - Cost less than other tobacco products (6%)
 - Some other reasons (44%)

The table below indicates the frequency in which youth in Seneca County used the following tobacco and electronic vapor products among current users.

Frequency of Tobacco/Electronic Vapor Product Use Among Current Seneca Users

Tobacco/Vapor Product	0 days	1 or 2 days	3 to 5 days	6 to 9 days	10 to 19 days	20 to 29 days	All 30 days
Cigarettes	0%	48%	11%	7%	4%	4%	26%
Electronic vapor products	41%	20%	5%	4%	4%	7%	19%

The following graph shows the percentage of Seneca County youth who were current smokers. Examples of how to interpret the information include: 3% of all Seneca County youth were current smokers, including 8% of those 17 and older.



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

Healthy People 2030 Tobacco Use (TU)

Objective	Seneca County 2022 OHYES!	Ohio 2019	U.S. 2019	Healthy People 2030 Target
TU-06 Reduce current cigarette smoking in adolescents (in the past month)	3% (7-12 Grade) 4% (9-12 Grade)	5% (9-12 Grade)	6% (9-12 Grade)	3% (6-12 Grade)

(Sources: Healthy People 2030 Objectives, 2019 Ohio YRBS, 2019 U.S. YRBS, 2022 Seneca County OHYES)

Youth Comparisons	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (9 th -12 th)
Current smoker (smoked on at least 1 day during the past 30 days)	11%	9%	6%	9%	3%	4%	5%	6%
Current cigar smoker (cigars, cigarillos, or little cigars, on at least 1 day during the 30 days)	N/A	N/A	N/A	8%	3%	4%	7%	6%
Current electronic vapor product user (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on at least 1 day during the 30 days)	N/A	N/A	N/A	22%	14%	17%	30%	33%
Current smokeless tobacco user (chewing tobacco, snuff, dip, snus, or dissolvable tobacco products—such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, Copenhagen, Camel Snus, Marlboro Snus, General Snus, Ariva, Stonewall, or Camel Orbs—not counting any electronic vapor products, on at least 1 day during the 30 days)	N/A	N/A	N/A	4%	3%	2%	10%	4%

N/A – Not Available

Youth Health: Alcohol Consumption

Key Findings

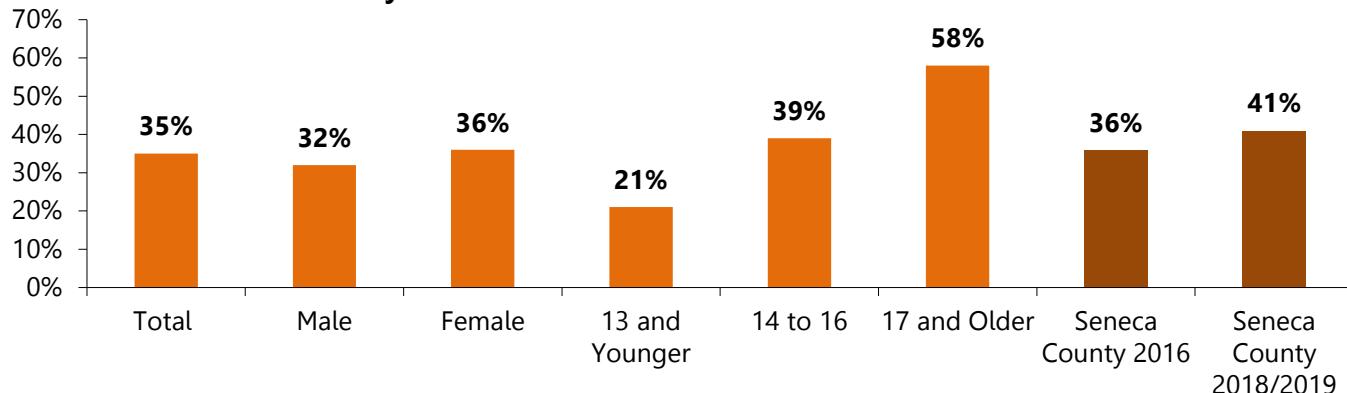
Twelve percent (12%) of youth had at least one drink in the past 30 days, defining them as a current drinker. During the past 30 days, 15% of all Seneca County youth had ridden in a car driven by someone who has been drinking alcohol.

Youth Alcohol Consumption

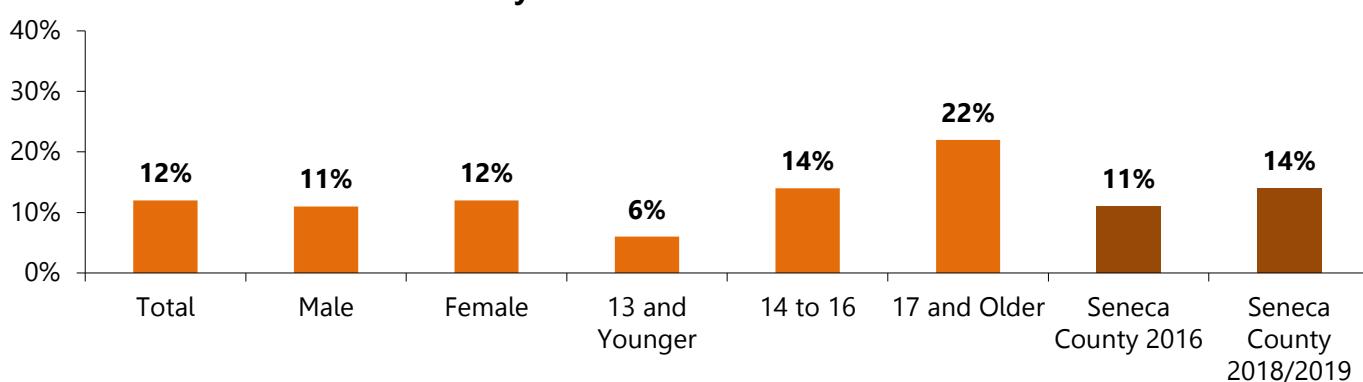
- Of all youth, 18% had their first drink of alcohol before the age of 13.
- Half (50%) of youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 25% took their first drink between the ages of 13 and 14, 22% took their first drink between the ages of 15 and 16, and 3% started drinking at the age of 17 or older.
- Twelve percent (12%) of youth had at least one drink of alcohol in the past 30 days, increasing to 22% of those ages 17 and older.
- Among current youth drinkers, Seneca County youth reported drinking at the following frequencies within the past 30 days:
 - 1 or 2 days (64%)
 - 3 to 5 days (11%)
 - 6 to 9 days (8%)
 - 10 to 19 days (10%)
 - 20 to 29 days (3%)
 - All 30 days (4%)
- Based on all youth surveyed, 5% had five or more alcoholic drinks (males) or four or more alcoholic drinks (females) on an occasion in the last 30 days and would be considered binge drinkers, increasing to 13% of those ages 17 and older.
- Youth drinkers reported they got their alcohol from the following:
 - Someone gave it to them (47%)
 - A parent gave it to them (42%)
 - Took it from a store or family member (29%)
 - Gave someone else money to buy it for them (29%)
 - A friend's parent gave it to them (16%)
 - Bought it in a liquor store, convenience store, supermarket, discount store, or gas station (8%)
 - Bought it at a public event (4%)
 - Some other way (30%)
- Ten percent (10%) of all youth reported drinking alcohol on the weekends.
- During the past 30 days, 15% of all youth had ridden in a car driven by someone who had been drinking alcohol.
- In the past 30 days, 2% of youth drivers had driven a car after they had been drinking alcohol

The following graphs show the percentage of Seneca County youth who drank in their lifetime, were current drinkers, and were binge drinkers. An example of how to interpret the information on the first graph includes: 35% of all Seneca County youth have drank at some time in their life, including 32% of males and 36% of females.

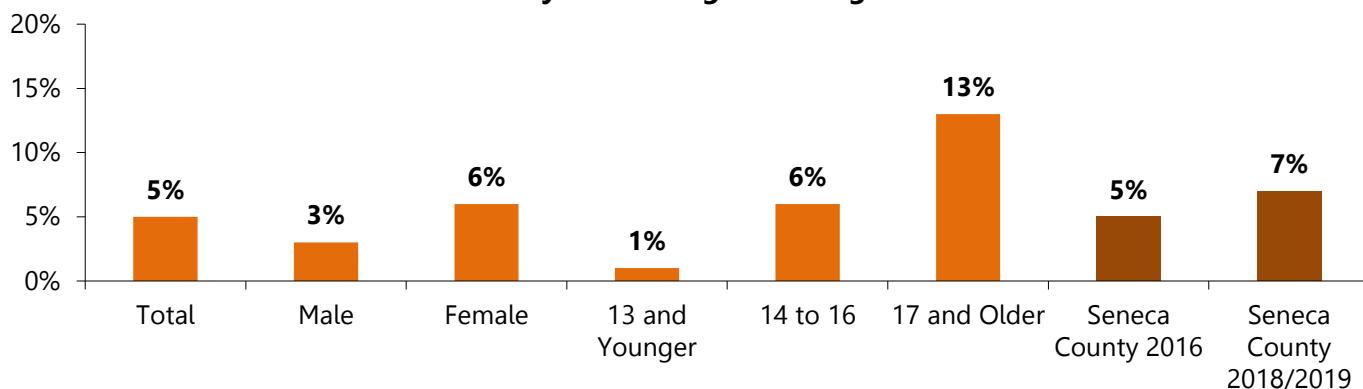
Seneca County Youth Who Had At Least One Drink In Their Lifetime



Seneca County Youth Who Were Current Drinkers



Seneca County Youth Binge Drinking 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.

Healthy People 2030 Substance Use (SU)

Objective	Seneca County 2022 OHYES!	Ohio 2019	U.S. 2019	Healthy People 2030 Target
SU-04 Reduce the proportion of adolescents who drank alcohol in the past month	12% (7-12 Grade) 16% (9-12 Grade)	26% (9-12 Grade)	29% (9-12 Grade)	6%*

Note: The Healthy People 2030 target is for youth aged 12-17 years.

(Sources: Healthy People 2030 Objectives, 2019 Ohio YRBS, 2019 U.S. YRBS, 2022 Seneca County OHYES)

Youth Comparisons	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (9 th -12 th)
Ever drank alcohol (at least one drink of alcohol on at least 1 day during their life)	60%	50%	36%	41%	35%	45%	N/A	N/A
Current drinker (at least one drink of alcohol on at least 1 day during the past 30 days)	29%	20%	11%	14%	12%	16%	26%	29%
Binge drinker (drank five or more drinks within a couple of hours on at least 1 day during the past 30 days)	18%	11%	5%	7%	5%	8%	13%	14%
Drank for the first time before age 13 (of all youth)	25%	17%	11%	16%	18%	16%	16%	15%
Drank and drove (of youth drivers)	4%	5%	2%	2%	2%	3%	N/A	5%
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)	19%	21%	14%	14%	15%	15%	N/A	17%

N/A – Not Available

Youth Health: Drug Use

Key Findings

Eight percent (8%) of Seneca County youth had used marijuana at least once in the past 30 days, increasing to 14% of those ages 17 and older. Two percent (2%) of youth used prescription drugs not prescribed for them in the past month.

Marijuana Use

- Eight percent (8%) of all Seneca County youth had used marijuana at least once in the past 30 days, increasing to 19% of those age 17 and older.
- Among those who tried marijuana, 50% of youth used marijuana or hashish in the past 30 days.
- Among current marijuana users, youth reported using marijuana in the following ways:
 - Smoked it in a joint, bong, pipe, or blunt (56%)
 - Vaporized it (27%)
 - Ate it in food such as brownies, cakes, cookies, or candy (11%)
 - Some other way (6%)
- Among current marijuana users, youth reported using marijuana:
 - On weekends (30%)
 - After school (24%)
 - On weeknights (24%)
 - Before school (16%)
 - During school (6%)
- Six percent (6%) of all Seneca County youth tried marijuana before the age of 13.
- Forty percent (40%) of youth who tried marijuana did so before the age of 13.
- Six percent (6%) of youth in Seneca County reported using marijuana 3 or more times in the past month, increasing to 71% of current youth marijuana users.

Prescription Drug Misuse and Abuse

- Ten percent (10%) of youth in Seneca County reported ever using prescription drugs (e.g., OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription or differently than how a doctor told them in their lifetime.
- In the past 30 days, 2% of all youth reported using prescription drugs not prescribed for them, increasing to 24% of youth who had ever used prescription drugs without a doctor's prescription or differently than how a doctor instructed.
- Five percent (5%) of youth in Seneca County reported ever using prescription pain medicine (e.g., codeine, Vicodin, OxyContin, Hydrocodone, and Percocet) without a doctor's prescription or differently than how a doctor told them in their lifetime.
- In the past 30 days, 2% of all youth reported using prescription pain medicine not prescribed for them, increasing to 43% of youth who had ever used prescription pain medicine without a doctor's prescription or differently than how a doctor instructed.

- Youth used the following types of prescription drugs without a doctor's prescription or differently than how a doctor told them how to use it:
 - Pain relievers or painkillers (e.g., OxyContin, Percocet, Vicodin, Lortab, or codeine) (36%)
 - Sleeping pills, sedatives, or other depressants (e.g., Ambien or phenobarbital) (13%)
 - Tranquilizers or anti-anxiety drugs (e.g., Xanax or Valium) (9%)
 - Stimulants or amphetamines (1%)
- Among current prescription drug users, youth reported using prescription drugs:
 - Before school (35%)
 - On weekends (24%)
 - On weeknights (23%)
 - After school (18%)

Other Drug Use

- Seneca County youth had used the following in their life:
 - Inhalants (2%)
 - Synthetic marijuana (2%)
 - Hallucinogenic drugs (2%)
 - Heroin (1%)
 - Cocaine (1%)
 - Methamphetamines (<1%)
 - Ecstasy/MDMA/Molly (<1%)
 - Steroids without a doctor's prescription (<1%)
- Seneca County youth had used the following in the 12 months:
 - Inhalants (1%)
 - Synthetic marijuana (1%)
 - Hallucinogenic drugs (1%)
 - Heroin (<1%)
 - Cocaine (<1%)
 - Methamphetamines (<1%)
 - Ecstasy/MDMA/Molly (<1%)
- Twelve percent (12%) of youth in Seneca County reported ever using over-the-counter medications such as cold medicines, allergy medicine, or pain relievers to get high in their lifetime.
- During the past 12 months, 7% of all Seneca County youth reported that someone had offered, sold, or given them an illegal drug on school property. Other places reported by youth included in their neighborhood (5%), at a friend's house (5%), and on the school bus (1%).
- Seventy-two percent (72%) of youth recalled hearing, reading, or watching an advertisement about the prevention of substance use in the past 12 months.
- Over half (56%) of youth reported they had talked with at least one parent about the dangers of tobacco, alcohol, or drug use in the past 12 months.

The table below indicates the frequency in which youth in Seneca County misused prescription drugs and over-the-counter medications.

Frequency of Youth Lifetime Medication Misuse and Abuse

Drug	0 times	1 or 2 times	3 to 9 times	10 to 19 times	20 to 39 times	40 or more times
Prescription drugs without a doctor's prescription or differently than how a doctor instructed	90%	4%	3%	1%	1%	1%
Prescription pain medication without a doctor's prescription or differently than how a doctor instructed	95%	2%	1%	<1%	<1%	1%
Over-the-counter medications such as cold medicine, allergy medicine, or pain reliever to get high	88%	4%	3%	1%	1%	3%

Youth High-Risk Drug Use

High-risk drug use refers to any use by adolescents of drugs with a high risk of adverse outcomes, such as injury, criminal justice involvement, school dropout, and loss of life. This includes:

- Misuse of prescription drugs
- Use of illegal drugs like cocaine, heroin, methamphetamines, inhalants, hallucinogens, or ecstasy
- Use of injection drugs, which have a high risk of transmitting HIV and hepatitis

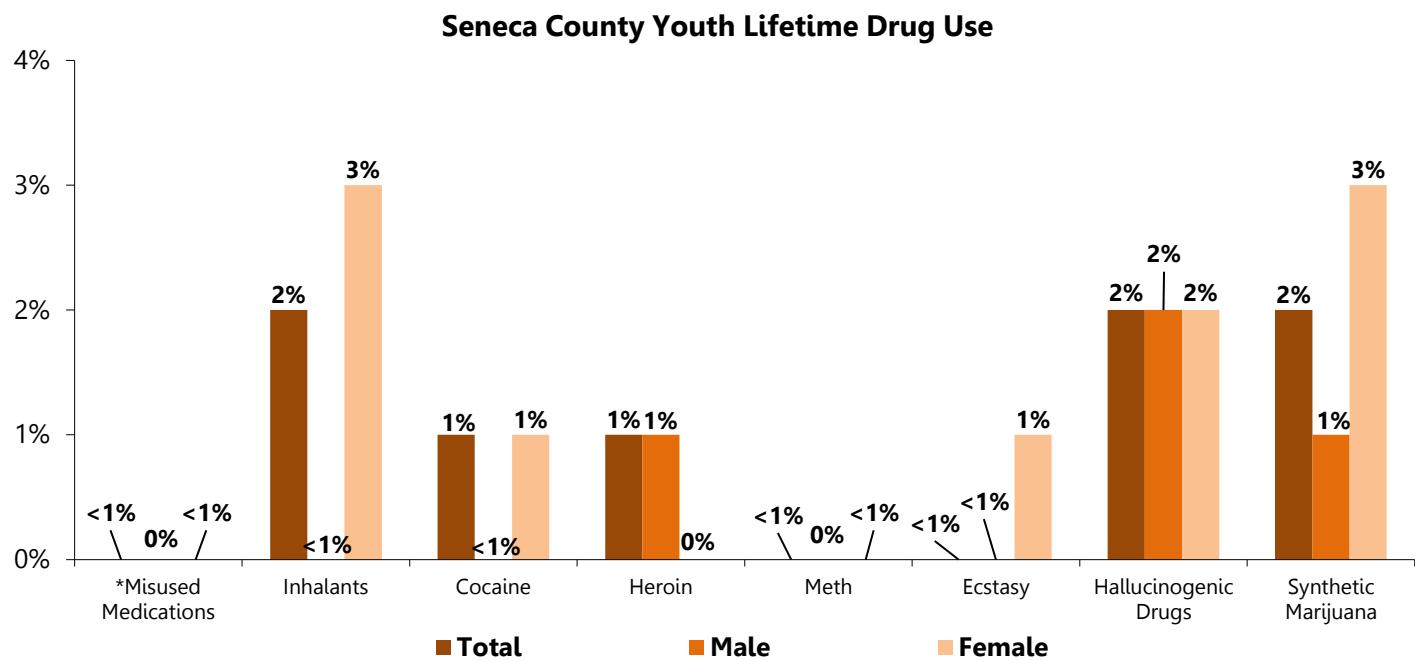
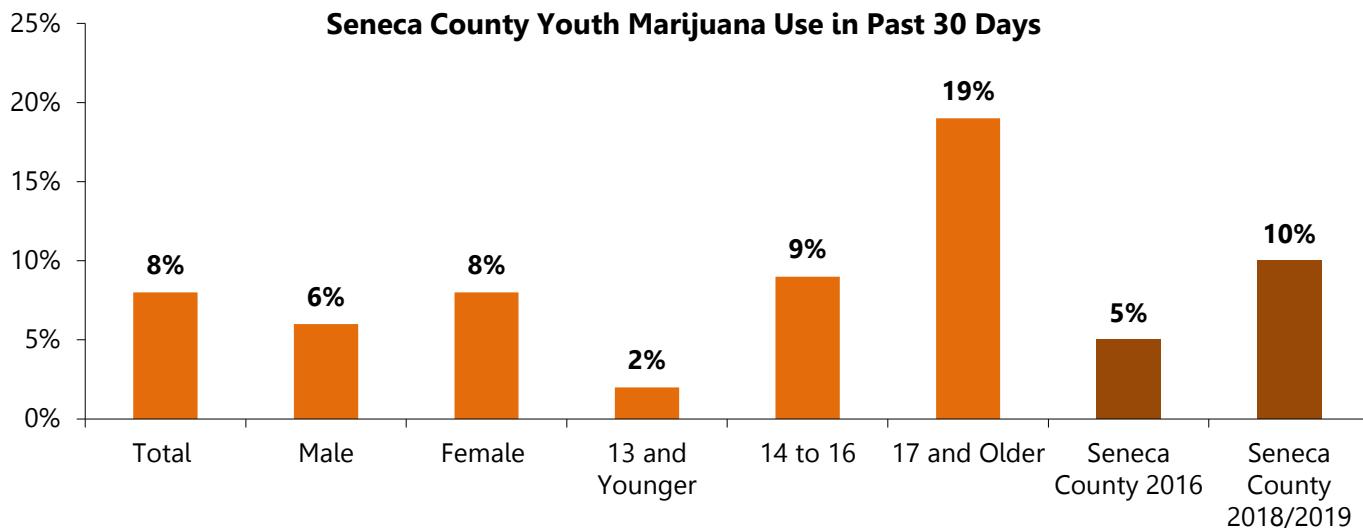
Youth who use high-risk drugs are more likely to also:

- Engage in risky sexual behaviors (not using a condom, multiple partners)
- Experience violence, such as physical and sexual dating violence, and being bullied, threatened, or injured
- Be at greater risk for mental health problems and suicide

These health risk behaviors and experiences put youth at greater risk for sexually transmitted infections, like HIV and other STDs, and unintended pregnancy. Some of these behaviors, like drug use and having sex at an early age, are also consistently linked to poor grades, test scores, and lower educational attainment.

(Source: CDC, High-Risk Substance Use Among Youth, updated on November 6, 2020)

The following graphs indicate youth marijuana use in the past 30 days and youth lifetime drug use. Examples of how to interpret the information include: 8% of youth have used marijuana in the past 30 days, including 8% of females and 19% of those 17 years of age and older.



*Referring to prescription drugs without a doctor's prescription for 2021 total, males, and females

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	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (9 th -12 th)
Currently use marijuana (in the past 30 days)	10%	9%	5%	10%	8%	12%	16%	22%
Tried marijuana for the first time before age 13	N/A	3%	4%	3%	6%	7%	N/A	6%
Ever took prescription drugs without a doctor's prescription (in their lifetime)	10%	7%	4%	11%*	10%	11%	12%	14%
Ever used methamphetamines (in their lifetime)	N/A	N/A	N/A	N/A	<1%	1%	N/A	2%
Ever used cocaine (in their lifetime)	N/A	N/A	N/A	N/A	1%	1%	4%	4%
Ever used heroin (in their lifetime)	N/A	N/A	N/A	N/A	1%	1%	2%	2%
Ever used inhalants (in their lifetime)	N/A	N/A	N/A	N/A	2%	3%	8%	6%
Ever took steroids without a doctor's prescription (in their lifetime)	N/A	N/A	N/A	N/A	<1%	<1%	N/A	2%
Ever used ecstasy (also called MDMA in their lifetime)	N/A	N/A	N/A	N/A	<1%	1%	N/A	4%
Were offered, sold, or given an illegal drug on school property (in the past 12 months)	9%	5%	2%	5%	7%	9%	15%**	22%**

N/A – Not Available

*OHYES questionnaire asked this question slightly different from the YRBSS. Please compare with caution.

**YRBS is for youth who were ever offered, sold, or given an illegal drug on school property

Youth Health: Sexual Behavior

Key Findings

Seventeen percent (17%) of all Seneca County youth ever had sexual intercourse, increasing to 60% of those ages 17 to 19 years old. Among those who ever had sex, 67% of youth had sexual intercourse with one or more persons during the past 3 months.

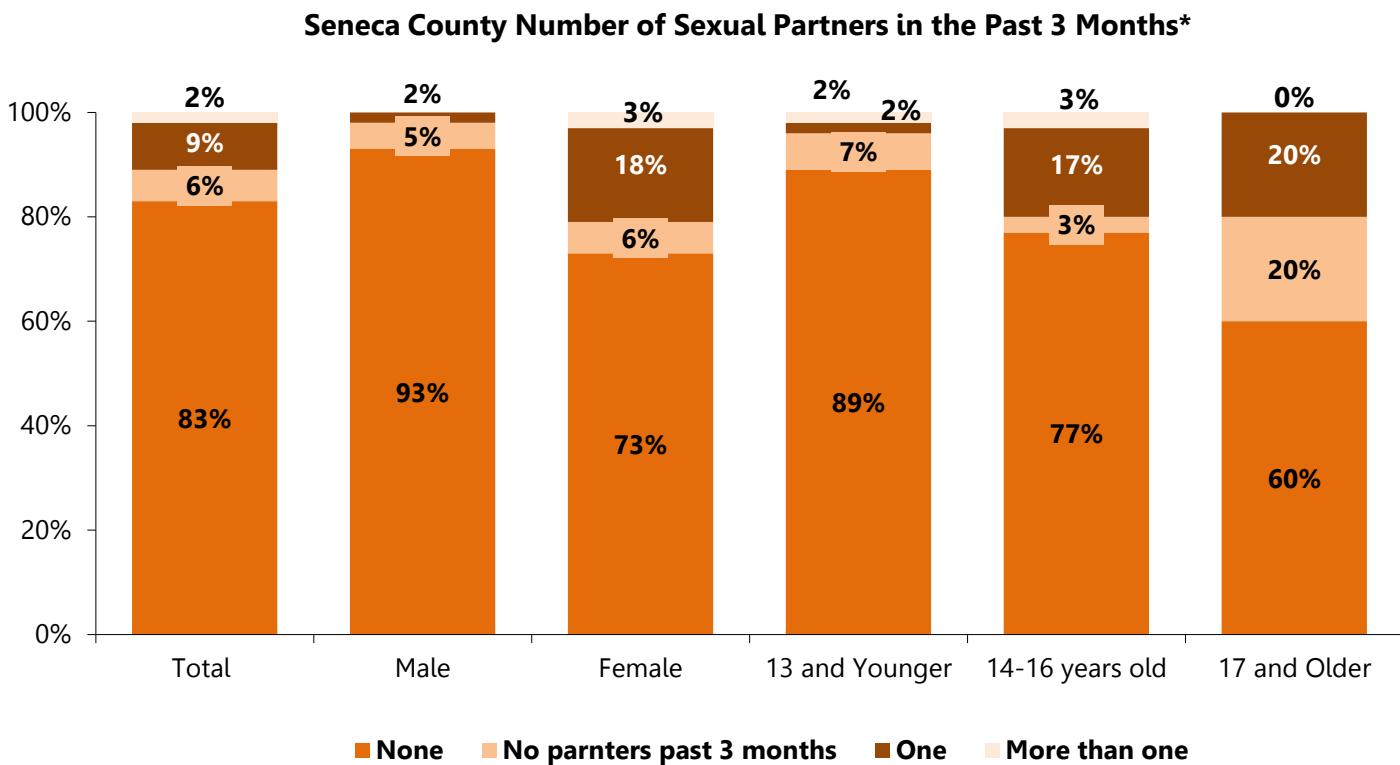
Youth Sexual Behavior

- Seventeen percent (17%) of all Seneca County youth had ever had sexual intercourse, increasing to 60% of those ages 17 and older.
- In the past 3 months, 12% of all youth had sexual intercourse with one or more persons, increasing to 21% of females.
- Among those who ever had sex, 67% of youth had sexual intercourse with one or more persons during the past 3 months.
- Four percent (4%) of all youth who had sexual intercourse, drank alcohol or used drugs before their last sexual encounter.
- Among those who were sexually active during the past 3 months, 30% of youth drank alcohol or used drugs during their last sexual encounter.
- One-third (33%) of all youth who had sexual intercourse used a condom during their last sexual encounter.
- Among those who ever had sexual intercourse, youth used the following methods to prevent pregnancy:
 - Condoms (27%)
 - Birth control pills (7%)
 - Shot, patch, or birth control ring (7%)

Youth Comparisons	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (9 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (9 th -12 th)
Ever had sexual intercourse	N/A	N/A	N/A	N/A	17%	26%	37%	N/A
Currently sexually active (had sexual intercourse with at least one person, during the past 3 months)	N/A	N/A	N/A	N/A	12%	21%	27%	27%

N/A – Not Available

The following graph shows the number of sexual partners Seneca County youth had in the past 3 months. An example of how to interpret the information in the graph includes: 9% of all adults had one sexual partner in the past 3 months and 2% had more than one.



*Respondents were asked: "During the past 3 months, 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.

Youth Health: Mental Health

Key Findings

Nineteen percent (19%) of youth who had seriously considered attempting suicide in the past year, and 9% attempted suicide in the past 12 months. Among all youth in Seneca County, 43% had ever visited a doctor, nurse, therapist, social worker, or counselor for a mental health problem.

Youth Mental Health

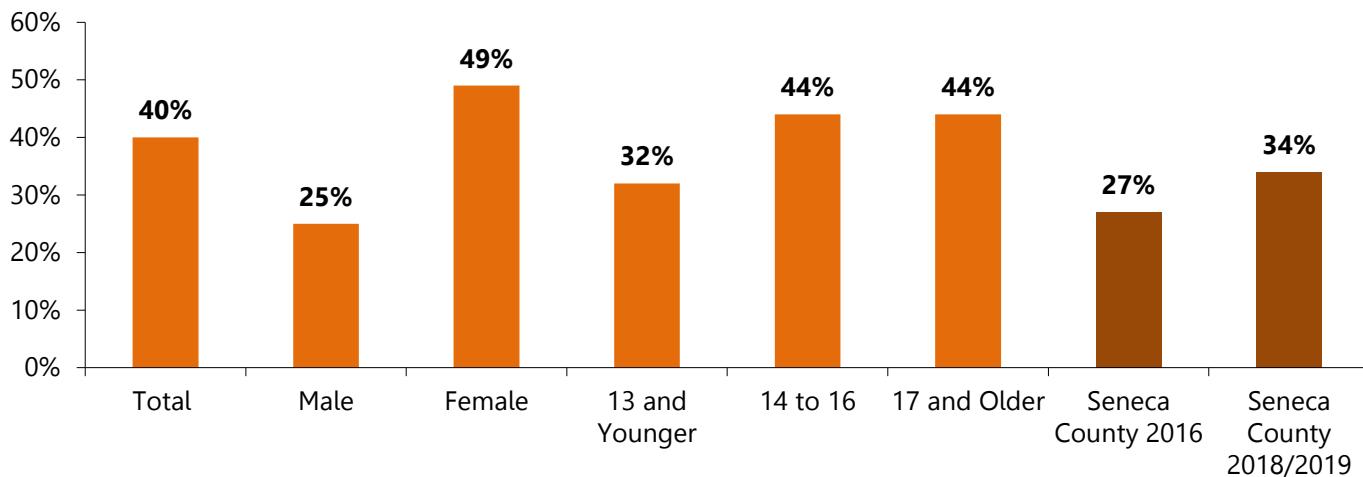
- Forty percent (40%) of Seneca County youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 49% of females.
- Nineteen percent (19%) of youth reported they had seriously considered attempting suicide in the past 12 months, increasing to 25% of youth ages 17 and older.
- In the past 12 months, 9% of youth had attempted suicide.
- Of all youth who had attempted suicide, 3% reported their suicide attempt resulted in injury, poisoning, or overdose that had to be treated by a doctor or nurse.
- Among youth who had attempted suicide in the past year, 26% reported their suicide attempt resulted in injury, poisoning, or overdose that had to be treated by a doctor or nurse.
- Youth in Seneca County reported being bothered nearly every day within the past 2 weeks by the following: feeling nervous, anxious, or on edge (22%), feeling down, depressed, or hopeless (15%), not being able to stop or control worrying (14%), and having little interest or pleasure in doing things (11%).
- Youth reported the following ways of dealing with stress: physical activity (47%); avoid people who create drama (45%); express oneself through the arts and literature (36%); participate in hobbies or community service (28%); get support from others (26%); meditate, pray, or use relaxation techniques (19%); and limit exposure to social media (18%). Twelve percent (12%) of youth reported they did not have stress.
- Forty-three percent (43%) of youth in Seneca County reported they had ever visited a doctor, nurse, therapist, social worker, or counselor for a mental health problem. Thirty-four percent (34%) of youth had visited a mental health provider within the past 12 months, and 5% had visited more than two years ago.

Mental Health Impacts
*Seneca County youth reported they were bothered
 by the following within the past 2 weeks:*

Mental Health	Not at All	Several Days	More Days Than Not	Nearly Every Day
Feeling nervous, anxious, or on edge	36%	29%	13%	22%
Not being able to stop or control worrying	50%	25%	11%	14%
Feeling down, depressed, or hopeless	48%	25%	12%	15%
Little interest or pleasure in doing things	55%	23%	11%	11%

The following graph shows Seneca County youth who felt sad or hopeless for two or more weeks in a row. An example of how to interpret the information includes: 40% of youth felt sad or hopeless for two or more weeks in a row, including 25% of males, and 49% of females.

**Seneca County Youth Who Felt Sad or Hopeless
 for Two or More Weeks in a Row**



Note for graph: 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	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (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)	21%	23%	27%	34%	40%	44%	33%	37%
Seriously considered attempting suicide (in the past 12 months)	N/A	N/A	N/A	N/A	19%	24%	16%	19%
Attempted suicide (in the past 12 months)	N/A	N/A	N/A	N/A	9%	11%	7%	9%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (in the past 12 months)	N/A	N/A	N/A	N/A	3%	3%	N/A	N/A

N/A – Not Available

Youth Health: Social Determinants of Health

Key Findings

Almost one-third (32%) of youth had three or more adverse childhood experiences (ACEs). Nine percent (9%) of Seneca County youth drivers had texted while driving in the past 30 days.

Personal Health

- Almost half (49%) of Seneca County youth had visited the doctor or nurse for a check-up during the past year. Fifteen percent (15%) of youth reported visiting a doctor or nurse between 12-24 months ago, and 7% reported last visiting a doctor over 2 years ago. Ten percent (10%) of youth said they had never been to the doctor or nurse for a routine check-up.
- Ten percent (10%) of youth reported that they had a disability or long-term health problem that prevented them from doing everyday activities.
- Fourteen percent (14%) of youth had been told by a doctor, nurse, or parent they had a disability or long-term health problem that prevented them from doing everyday activities.
- 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 (64%), 1 to 2 years ago (11%), more than 2 years ago (8%), never (4%), and not sure (13%).
- Seneca County youth reported they got the following amounts of sleep on an average school night: four hours or less (14%), five hours (15%), six hours (22%), seven hours (22%), eight hours (19%), nine hours (6%) and ten hours or more (2%).
- Youth reported their parents limited the times of day or length of time they used their electronic devices for non-school related purposes at the following frequencies: never (42%), rarely (31%), sometimes (15%), and often (12%).

Personal Safety

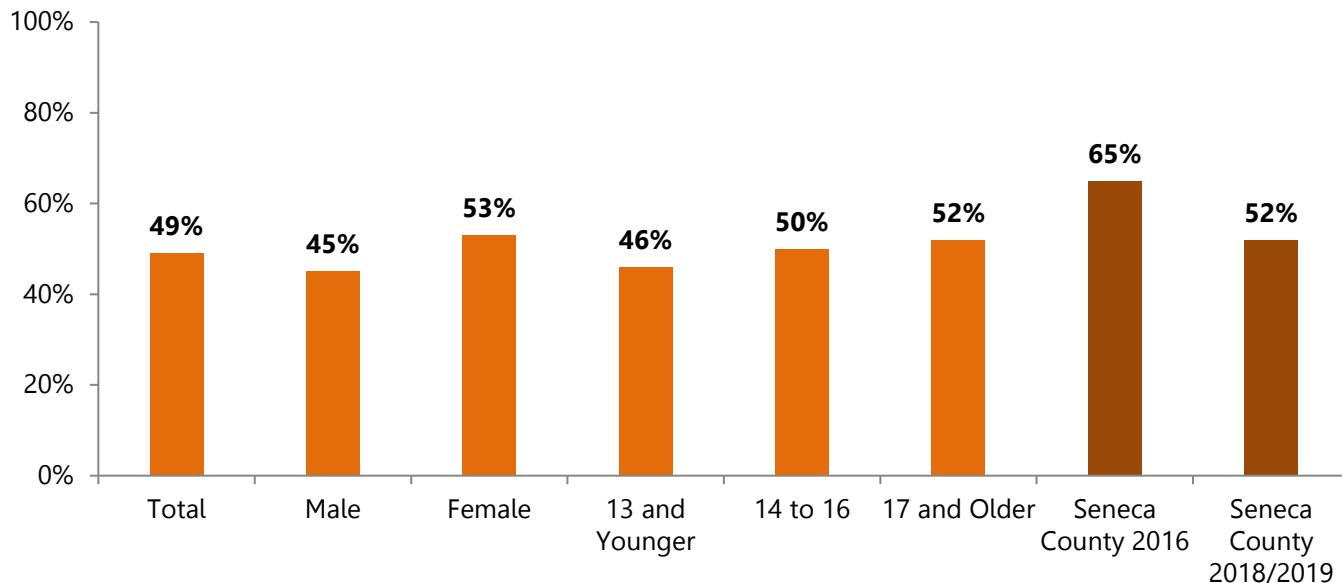
- In the past 30 days, 25% of youth drivers reported they had texted or emailed on at least one day while driving a car or other vehicle. Five percent (5%) of youth drivers reported texting or emailing on 10-29 days in the past month, and 10% reported doing so on all 30 days.
- Nine percent (9%) of youth had a concussion in the past year from playing a sport or being physically active, increasing to 10% of females. Six percent (6%) of youth reported having more than one concussion in the past 12 months.

Neighborhood and Built Environment

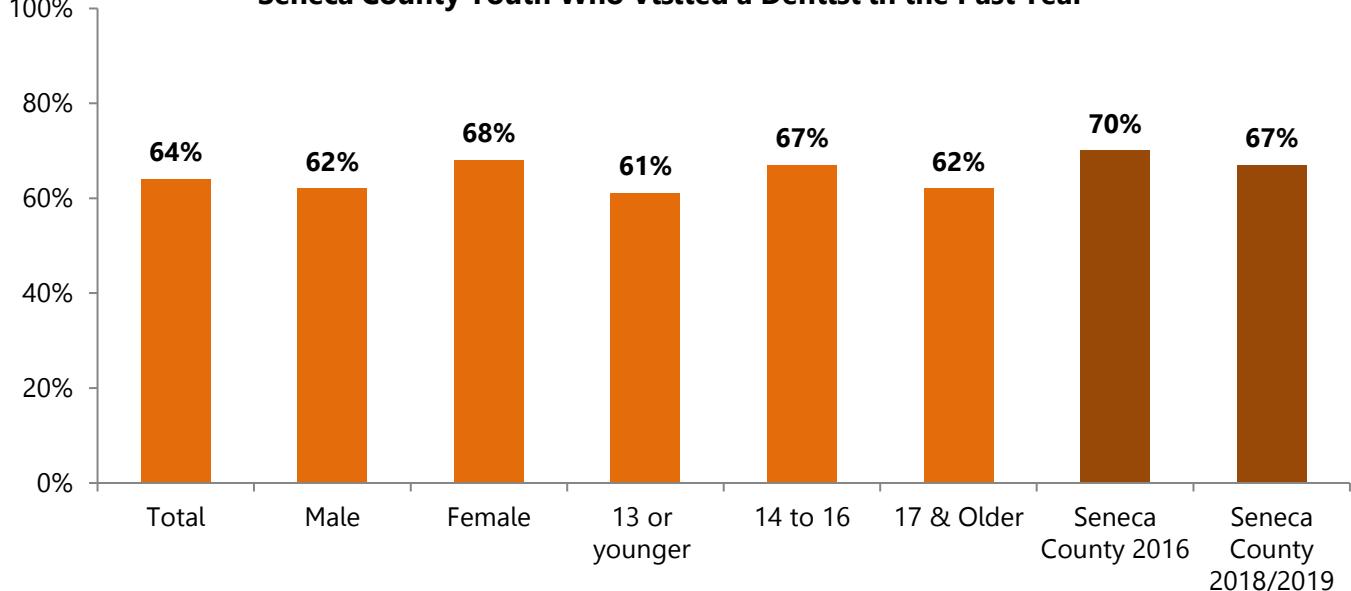
- Eleven percent (11%) of youth reported they did not feel safe in their neighborhood.
- Over half (51%) of youth in Seneca County reported there were a lot of adults in their neighborhood that they could talk to about something important.
- Youth in Seneca County reported they had ever moved to a new address at the following frequencies:
 - 0 times (24%)
 - 1 time (20%)
 - 2 times (11%)
 - 3 times (13%)
 - 4 or more times (32%)

The following graphs show Seneca County youth who visited a doctor and who visited a dentist in the past year. Examples of how to interpret the information include: 49% of youth had visited a doctor in the past year, including 45% of males and 53% of females.

Seneca County Youth Who Visited a Doctor Within the Past Year



Seneca County Youth Who Visited a Dentist 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 Comparisons	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (9 th -12 th)
Visited a doctor or other healthcare professional (for a routine check-up in the past year)	66%	68%	65%	52%	49%	51%	N/A	N/A
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work)	74%	74%	70%	67%	64%	66%	N/A	N/A

N/A – Not Available

Social and Community Context

- Youth reported the following adverse childhood experiences (ACEs):
 - Parents became separated or divorced (41%)
 - Lived with someone who was depressed, mentally ill or suicidal (36%)
 - Parents or adults in home swore at them, insulted them or put them down (33%)
 - Lived with someone who was a problem drinker or alcoholic (26%)
 - Lived with someone who served time or was sentenced to serve time in a prison, jail, or other correctional facility (24%)
 - Parents were not married (23%)
 - Lived with someone who used illegal street drugs or who abused prescription medication (19%)
 - Parents or adults in the home slapped, hit, kicked, punched, or beat each other up (11%)
 - Parents or adults in home hit, beat, kicked, or physical hurt them (11%)
 - Someone at least 5 years older than them or an adult touched them sexually (7%)
 - Someone at least 5 years older than them or an adult tried to make them touch them sexually (5%)
 - Someone at least 5 years older than them or an adult forced them to have sex (3%)
- Almost one-third (32%) of youth had experienced three or more ACEs.

Education

- In the past year, Seneca County youth described their grades in school as the following:
 - Mostly A's (38%)
 - Mostly B's (29%)
 - Mostly C's (18%)
 - Mostly D's (6%)
 - Mostly F's (4%)
- Seneca County youth reported they agreed or strongly agreed with the following statements about school:
 - My parents push me to work hard in school (75%)
 - My parents talk to me about what I do in school (62%)
 - My school provides various opportunities to learn about and appreciate different cultures and ways of life (47%)
 - I can go to adults at my school for help if I needed it (46%)
 - I feel like I belong at my school (35%)
 - I enjoy coming to school (24%)
- In the past year, youth reported their parents checked whether they had done their homework at the following frequencies: never or almost never (25%), sometimes (26%), often (22%), and all the time (27%).

School Perceptions
Seneca County youth reported the following about school:

Perceptions	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I enjoy coming to school	19%	16%	40%	20%	5%
I feel like I belong at my school	16%	14%	35%	26%	9%
I can go to adults at my school for help if I needed it	13%	13%	28%	30%	16%
My school provides various opportunities to learn about and appreciate different cultures and ways of life	10%	11%	32%	36%	11%
My parents talk to me about what I do in school	6%	10%	23%	41%	20%
My parents push me to work hard in school	3%	4%	18%	38%	37%

Gambling

- In the past 12 months, 18% of youth in Seneca County reported gambling money or things while playing cards, betting on personal skills or sports teams, buying lottery tickets or scratch-offs, or in internet gaming.
- Among youth who had gambled in the past 12 months, youth reported gambling at the following frequencies: less than once a month (49%), about once a month (25%), about once a week (13%), and daily (13%).
- Youth gamblers experienced the following in the past 12 months: gambled more than they planned to (27%), felt bad about the amount they bet, or about what happened when they bet on money or things (27%), and hid from family or friends any betting slips, I.O.U.s, lottery tickets, money or things they won, or other signs of gambling (15%).
- Over one-fifth (21%) of youth gamblers reported they had ever lied to important people in their lives about how much they gamble.

Youth Health: Violence

Key Findings

Eighteen percent (18%) of youth had been involved in a physical fight, increasing to 24% of males. Forty-three percent (43%) of youth had been bullied in the past year.

Violence-Related Behaviors

- Seneca County youth reported they felt safe and secure at school at the following frequencies: never (3%), rarely (6%), sometimes (18%), most of the time (47%), and all of the time (26%).
- Twenty-two percent (22%) 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.
- Seventeen percent (17%) of youth were threatened or injured with a weapon on school property in the past year.

Physical Violence

- In the past 12 months, 18% of youth had been involved in a physical fight, increasing to 24% of males.
- In the past 12 months, 8% of youth had been involved in a physical fight on school property, increasing to 12% of males.
- Of those who had been in a physical fight on school property, 24% had been in a fight on more than one occasion.
- In the past 12 months, 9% of youth in Seneca County reported they had been physically hurt by someone they were dating.

Dating/Relationship Violence

- Thirteen percent (13%) of Seneca County youth reported they had ever been forced to do sexual things that they did not want to do, increasing to 38% of those ages 17 to 19 years old.
- In the past 12 months, 14% of youth reported they had been forced to do sexual things with someone they were dating or going out with when they did not want to at least one time in their lifetime, increasing to 23% of females.

Bullying

- Forty-three percent (43%) of youth had been bullied in the past year. The following types of bullying were reported:
 - 33% of youth were verbally/emotionally bullied (teased, taunted or called harmful names)
 - 25% of youth were indirectly bullied (spread mean rumors about them or kept them out of a "group")
 - 11% of youth were cyber/electronically bullied (teased, taunted or threatened by e-mail, cell phone or other electronic methods)
 - 10% of youth were physically bullied (were hit, kicked, punched or people took their belongings)
 - 2% 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)
- Nineteen percent (19%) of youth reported they had ever been electronically bullied through email, cell phone, or other electronic methods.
- Of those who had been bullied in the past 12 months, 46% had been electronically bullied.
- In the past 12 months, 27% of youth had been bullied on school property.
- Of those who had been bullied in the past 12 months, 65% had been bullied on school property.

Types of Bullying Seneca County Youth Experienced in Past Year

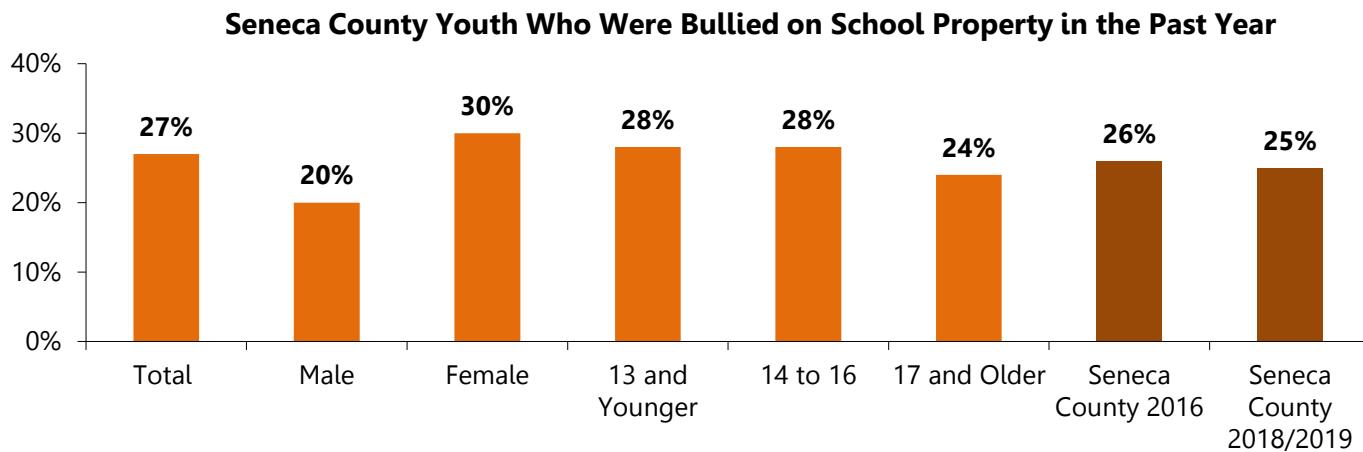
Youth Behaviors	Total	Male	Female	13 or younger	14-16 Years old	17 and older
Verbally/Emotionally Bullied	33%	26%	37%	35%	34%	28%
Indirectly Bullied	25%	11%	36%	24%	26%	27%
Cyber/Electronically Bullied	11%	6%	13%	11%	10%	12%
Physically Bullied	10%	10%	10%	13%	10%	6%
Sexually Bullied	2%	1%	3%	2%	3%	1%

Healthy People 2030 Injury and Violence Prevention (IVP)

Objective	Seneca County 2022 OHYES!	Ohio 2019	U.S. 2019	Healthy People 2030 Target
IVP-11 Reduce physical fighting among adolescents	17% (7-12 Grade) 15% (9-12 Grade)	19% (9-12 Grade)	22% (9-12 Grade)	21% (9-12 grade)

(Sources: Healthy People 2030 Objectives, 2019 Ohio YRBS, 2019 U.S. YRBS, 2022 Seneca County OHYES)

The following graph shows Seneca County youth who were bullied on school property in the past year. Examples of how to interpret the information include: 27% of youth were bullied on school property in the past year, including 20% of males and 30% 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.

Youth Comparisons	Seneca County 2009 (6 th -12 th)	Seneca County 2013 (6 th -12 th)	Seneca County 2016 (6 th -12 th)	Seneca County 2018/2019 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (7 th -12 th)	Seneca County 2022 OHYES! (9 th -12 th)	Ohio 2019 (9 th -12 th)	U.S. 2019 YRBS (9 th -12 th)
Were in a physical fight (in the past 12 months)	N/A	N/A	N/A	20%	17%	15%	19%	22%
Were in a physical fight on school property (in the past 12 months)	N/A	N/A	N/A	8%	8%	6%	N/A	8%
Threatened or injured with a weapon on school property (in the past 12 months)	7%	5%	5%	11%	17%	19%	N/A	7%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)	4%	5%	4%	8%	22%	21%	N/A	9%
Bullied on school property (in the past year)	N/A	33%	26%	25%	27%	27%	14%	20%
Electronically bullied (bullied through e-mail, chat rooms, instant messaging, websites or texting in the past year)	10%	13%	9%	10%	19%	19%	13%	16%
Experienced physical dating violence (including being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with in the past 12 months)	N/A	N/A	N/A	N/A	9%	10%	10%	8%

N/A – Not Available

Youth Health: Perceptions

Key Findings

In 2022, 20% of youth thought that there was no risk in harming themselves physically or in other ways if they smoke marijuana once or twice a week. Seventy-nine percent (79%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

Perceived Risk of Drug Use

- One-quarter (25%) of youth thought there was a great risk in harming themselves physically or in other ways if they had five or more drinks of an alcoholic beverage once or twice a week. Fourteen percent (14%) thought that there was no risk if they had five or more drinks of an alcoholic beverage once or twice a week.
- Over half (51%) of 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. Eleven percent (11%) thought there was no risk if they smoked one or more packs of cigarettes per day.
- Thirty percent (30%) of youth thought there was a great risk in harming themselves physically or in other ways if they used electronic vapor products every day. Twelve percent (12%) thought there was no risk if they used electronic vapor products every day.
- Over one-quarter (26%) 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 percent (20%) of youth thought that there was no risk if they smoked marijuana once or twice a week.
- Over half (54%) 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. Nine percent (9%) of youth thought that there was no risk in misusing prescription drugs.

Degree of Disapproval of Use by Parents

- Sixty-three percent (63%) 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.
- Almost three-fourths (74%) of Seneca County youth reported their parents would feel it was very wrong for them to smoke tobacco.
- Sixty-seven percent (67%) of Seneca County youth reported their parents would feel it was very wrong for them to use electronic vapor products.
- Seventy-one percent (71%) of youth reported their parents would feel it was very wrong for them to smoke marijuana.
- Seventy-nine percent (79%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

Degree of Disapproval of Use by Friends

- Thirty-eight percent (38%) of youth reported their friends would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Almost half (48%) of Seneca County youth reported their friends would feel it was very wrong for them to smoke tobacco.
- Over one-third (36%) of youth reported their friends would feel it was very wrong for them to use electronic vapor products.
- Forty-six percent (46%) of youth reported their friends would feel it was very wrong for them to smoke marijuana.
- Sixty percent (60%) of youth reported their friends would feel it was very wrong for them to misuse prescription medications.

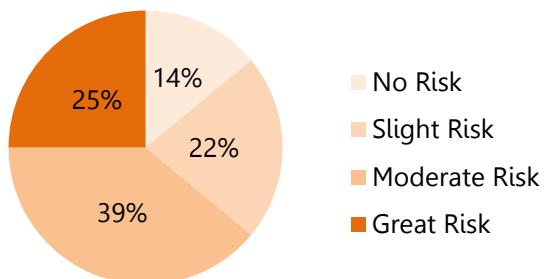
Degree of Disapproval of Use by Youth

- Seventy percent (70%) of Seneca County youth reported they somewhat or strongly disapproved of someone their age trying marijuana or hashish once or twice.
- Sixty-nine percent (69%) of youth reported they somewhat or strongly disapproved of someone their age using marijuana once a month or more.
- Eighty-five percent (85%) of youth reported they somewhat or strongly disapproved of someone their age having one or two drinks of an alcoholic beverage nearly every day.

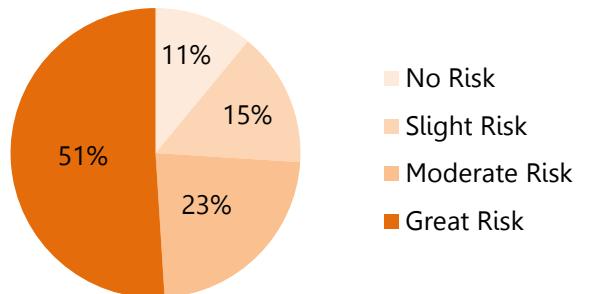
Perceived Risk of Drug Use by Surveyed Youth

How much do you think people risk harming themselves if they:

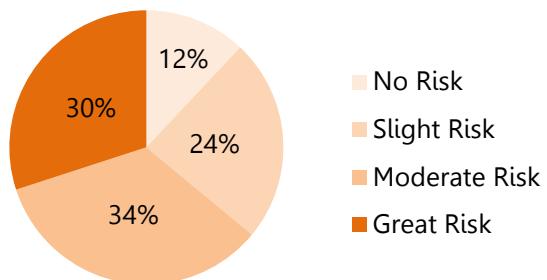
Have five or more drinks of an alcoholic beverage per day



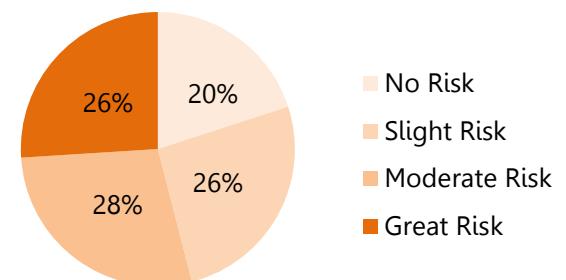
Smoke tobacco every day



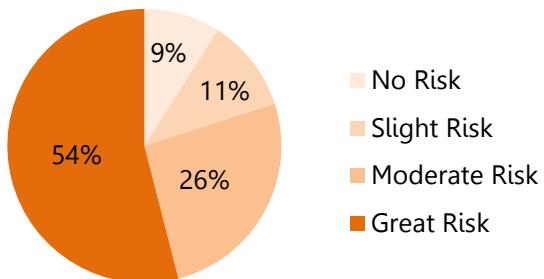
Use electronic vapor products every day



Smoke marijuana once or twice a week



Misuse prescription drugs



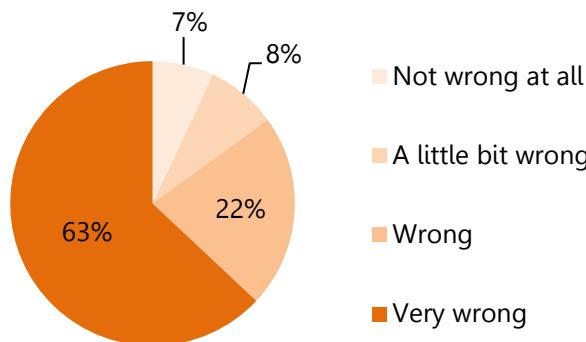
Perceived Great Risk of Substance Use

How much do you think people risk harming themselves if they:	Total	Male	Female	13 or younger	14-16 years old	17 or older
Have five or more alcoholic beverages once or twice a week	25%	24%	26%	22%	28%	23%
Smoke one or more pack of cigarettes per day	51%	50%	54%	44%	58%	50%
Use electronic vapor products every day	30%	31%	30%	30%	31%	27%
Smoke marijuana once or twice a week	26%	26%	27%	32%	25%	18%
Misuse prescription drugs	54%	52%	58%	47%	57%	62%

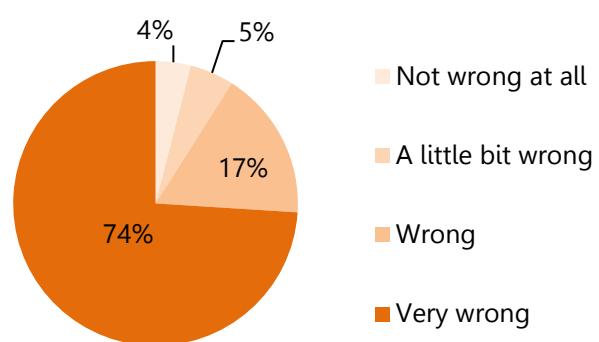
Surveyed Youth Perceptions of Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:

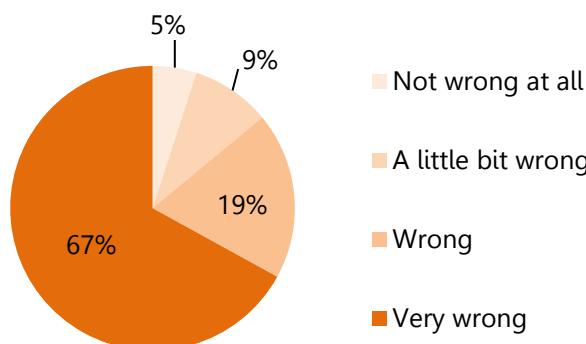
Have one or two drinks of an alcoholic beverage nearly every day



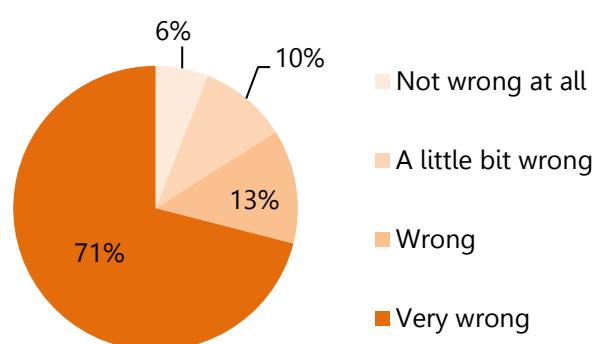
Smoke tobacco



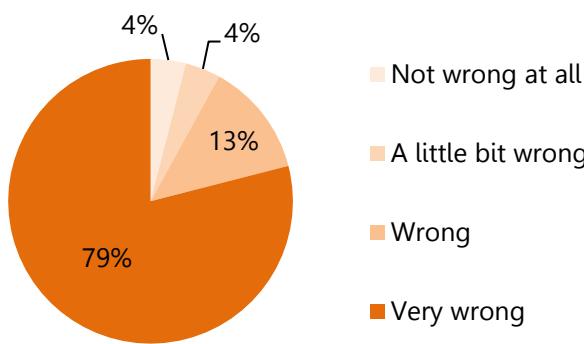
Use electronic vapor products



Smoke marijuana



Misuse prescription drugs



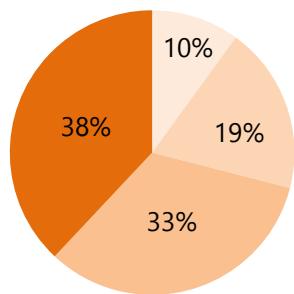
Perceived Degree of Great Disapproval by Parents

Parents feel it would be very wrong for you to do the following:	Total	Male	Female	13 or younger	14-16 years old	17 or older
Have one or two drinks of an alcoholic beverage nearly every day	63%	64%	65%	67%	64%	53%
Smoke tobacco	74%	77%	74%	79%	74%	66%
Use electronic vapor products	67%	70%	68%	72%	67%	60%
Smoke marijuana	71%	72%	72%	81%	68%	57%
Misuse prescription drugs	79%	80%	81%	75%	80%	83%

Surveyed Youth Perceptions of the Degree of Disapproval by Friends

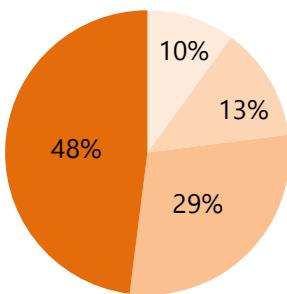
How wrong do your friends feel it would be for you to do the following:

Have one or two drinks of an alcoholic beverage nearly every day



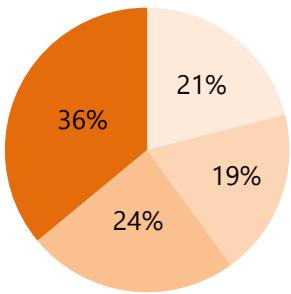
- Not wrong at all
- A little bit wrong
- Wrong
- Very wrong

Smoke tobacco



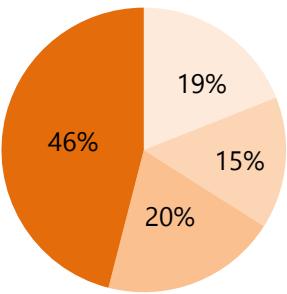
- Not wrong at all
- A little bit wrong
- Wrong
- Very wrong

Use electronic vapor products



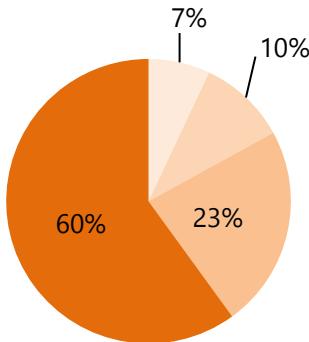
- Not wrong at all
- A little bit wrong
- Wrong
- Very wrong

Smoke marijuana



- Not wrong at all
- A little bit wrong
- Wrong
- Very wrong

Misuse prescription drugs



- Not wrong at all
- A little bit wrong
- Wrong
- Very wrong

Perceived Degree of Great Disapproval by Friends

Friends feel it would be very wrong for you to do the following:	Total	Male	Female	13 or younger	14-16 years old	17 or older
Have one or two drinks of an alcoholic beverage nearly every day	38%	40%	38%	45%	38%	26%
Smoke tobacco	48%	50%	49%	56%	47%	33%
Use electronic vapor products	36%	40%	34%	48%	31%	23%
Smoke marijuana	46%	47%	48%	62%	39%	27%
Misuse prescription drugs	60%	63%	61%	62%	59%	61%

Appendix I: Health Assessment Information Sources

Source	Data Used	Website
American Association of Suicidology	<ul style="list-style-type: none"> • Suicide Statistics 	https://suicidology.org/facts-and-statistics/
American Cancer Society	<ul style="list-style-type: none"> • 2022 Cancer Facts, Figures, and Estimates 	https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2022.html
American Cancer Society (ACS), 2020	<ul style="list-style-type: none"> • Summary of the American Cancer Society (ACS) Guidelines on Nutrition and Physical Activity 	https://www.cancer.org/healthy/eat-healthy-get-active/acs-guidelines-nutrition-physical-activity-cancer-prevention/summary.html
Asthma and Allergy Foundation of America	<ul style="list-style-type: none"> • Asthma Facts and Figures 	https://www.aafa.org/asthma-facts/
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	<ul style="list-style-type: none"> • 2017 - 2020 Adult Ohio and U.S. Correlating Statistics 	https://www.cdc.gov/brfss/index.html
CDC, Arthritis	<ul style="list-style-type: none"> • Arthritis at a Glance 	https://www.cdc.gov/chronicdisease/resources/publications/aag/arthritis.htm
CDC, Breast Cancer	<ul style="list-style-type: none"> • What Can I do to Reduce My Risk of Breast Cancer? 	https://www.cdc.gov/cancer/breast/basic_info/prevention.htm
CDC, Diabetes	<ul style="list-style-type: none"> • Diabetes Fast Facts 	https://www.cdc.gov/diabetes/basic_s/quick-facts.html
	<ul style="list-style-type: none"> • What is Diabetes? 	https://www.cdc.gov/diabetes/basic_s/diabetes.html
CDC, Mold	<ul style="list-style-type: none"> • Facts About Mold and Dampness 	https://www.cdc.gov/mold/dampness_facts.htm
CDC, National Center for Health Statistics	<ul style="list-style-type: none"> • Women's Health 	https://www.cdc.gov/nchs/fastats/womens-health.htm
	<ul style="list-style-type: none"> • Men's Health 	https://www.cdc.gov/nchs/fastats/mens-health.htm
	<ul style="list-style-type: none"> • Contraceptive Use 	https://www.cdc.gov/nchs/fastats/contraceptive.htm
CDC, Oral Health	<ul style="list-style-type: none"> • Adult Oral Health 	https://www.cdc.gov/oralhealth/basic/index.html
CDC, Prostate Cancer	<ul style="list-style-type: none"> • Prostate Cancer Awareness 	https://www.cdc.gov/cancer/prostate/index.htm
CDC, Sexual Violence	<ul style="list-style-type: none"> • Preventing Sexual Violence 	https://www.cdc.gov/violenceprevention/sexualviolence/fastfact.html
CDC, Smoking & Tobacco Use	<ul style="list-style-type: none"> • Health Effects of Cigarette Smoking 	https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm
	<ul style="list-style-type: none"> • E-Cigarette Health Effects 	www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html
CDC, Violence Prevention	<ul style="list-style-type: none"> • Adverse Childhood Experiences (ACE) 	https://www.cdc.gov/violenceprevention/acestudy/

Source	Data Used	Website
CDC, Wonder	<ul style="list-style-type: none"> • About Underlying Cause of Death, 2017-2019 • U.S. age-adjusted mortality rates 	http://wonder.cdc.gov/ucd-icd10.html
County Health Rankings	<ul style="list-style-type: none"> • USDA Food Environment Atlas • Fatality Analysis Reporting System • Health Outcomes & Factors 	http://www.countyhealthrankings.org
Healthy People 2030: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> • Access to Health Services • All Healthy People 2030 Target Data Points • Predictors of Access to Health Care • Social Determinants of Health • Some U.S. Baseline Statistics 	http://health.gov/healthypeople
National Alliance on Mental Illness (NAMI)	<ul style="list-style-type: none"> • Know the Warning Signs 	https://www.nami.org/learn-more/know-the-warning-signs
Ohio Automated Rx Reporting System (OARRS)	<ul style="list-style-type: none"> • Seneca County Number of Opiate and Pain Reliever Doses Per Patient • Ohio Number of Opiate and Pain Reliever Doses Per Patient • What is OARRS? 	https://www.ohiopmp.gov/Reports.aspx
Ohio Department of Health, Child Injury Prevention	<ul style="list-style-type: none"> • Child Passenger Safety 	https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/child-injury-Prevention/child-passenger-safety#:~:text=Ohio's%20child%20passenger%20safety%20law%20requires%20the%20following%3A, must%20use%20a%20booster%20seat.
Ohio Department of Health, Information Warehouse	<ul style="list-style-type: none"> • Incidence of Cancer 	https://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/StateLockdownCancers
	<ul style="list-style-type: none"> • Leading Causes of Death & Mortality 	https://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/Mortality
Ohio Department of Health, STD Surveillance Data	<ul style="list-style-type: none"> • Seneca County and Ohio Chlamydia and Gonorrhea Disease Rates • Seneca County Chlamydia and Gonorrhea Cases 	www.odh.ohio.gov/odhprograms/stdsurv/stdsur1.aspx
Ohio Department of Health, Violence and Injury Prevention	<ul style="list-style-type: none"> • 2020 Ohio Drug Overdose Report 	https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/violence-injury-prevention-program/media/2020+ohio+drug+overdose+report
Ohio Department of Job and Family Services	<ul style="list-style-type: none"> • Ohio Civilian Labor Force Estimates 	https://ohiolmi.com/_docs/LAUS/OhioCivilianLaborForceEstimates.pdf

Source	Data Used	Website
Stanford Children's Health	<ul style="list-style-type: none"> How to 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
U.S. Department of Agriculture (USDA), Economic Research Service	<ul style="list-style-type: none"> Food Insecurity in the U.S., Interactive Charts and Highlights 	https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/interactive-charts-and-highlights/
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> American Community Survey 5-year estimate, 2020 	https://www.census.gov/programs-surveys/acs/
	<ul style="list-style-type: none"> Federal Poverty Thresholds 	https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html
	<ul style="list-style-type: none"> Small Area Income and Poverty Estimates 	https://www.census.gov/data/data-sets/2020/demo/saipe/2020-state-and-county.html
U. S. Department of Commerce, Bureau of Economic Analysis	<ul style="list-style-type: none"> GDP & Personal Income 	https://apps.bea.gov/iTable/indexRegional.cfm

Appendix II: Acronyms and Terms

AHS	Access to Health Services , Topic of Healthy People 2030 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.
CY	Calendar Year
FY	Fiscal Year
HCNO	Hospital Council of Northwest Ohio
HDS	Heart Disease and Stroke , Topic of Healthy People 2020 objectives
HP 2030	Healthy People 2030 , a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
Health Indicator	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
High Blood Cholesterol	240 mg/dL and above
High Blood Pressure	Systolic \geq 140 and Diastolic \geq 90
IID	Immunizations and Infectious Diseases , Topic of Healthy People 2020 objectives
N/A	Data is not available.
NSCH	National Survey of Children's Health
ODH	Ohio Department of Health
OSHP	Ohio State Highway Patrol
Race/Ethnicity	Census 2010: U.S. Census data consider race and Hispanic origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as "a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race." Data are presented as "Hispanic or Latino" and "Not Hispanic or Latino." Census 2010 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported, "White alone" or "Black alone", means the respondents reported only one race.
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 5th percentile
Overweight is defined as BMI-for-age 85th percentile to < 95th percentile.
Obese is defined as \geq 95th percentile.

Appendix III: Methods for Weighting the 2022 Seneca 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 2022 Seneca County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Seneca 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 Seneca 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 Seneca County Survey and the 2020 Census.

2022 Seneca Survey			2020 Census		Weight
<u>Sex</u>	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	177	50.86207%	27,758	50.23981%	0.98777
Female	171	49.13793%	27,493	49.76019%	1.01266

In this example, it shows that there was a slightly larger portion of males in the sample compared to the actual portion in Seneca County. The weighting for males was calculated by taking the percent of males in Seneca County (based on Census information) (50.23981%) and dividing that by the percent found in the 2022 Seneca County sample (50.86207%) [50.23981 / 50.86207 = weighting of 0.98777 for males]. The same was done for females [49.76019/49.13793 = weighting of 1.01266 for females]. Thus, males' responses are weighted less by a factor of 0.98777 and females' responses weighted heavier by a factor of 1.01266.

This same thing was done for each of the 19 specific categories as described above. For example, a respondent who was female, White, in the age category 35-44, and with a household income in the \$50-\$75k category would have an individual weighting of 1.49695 [1.01266 (weight for females) x 0.95637 (weight for White) x 1.30012 (weight for age 35-44) x 1.18887 (weight for income \$50-\$75k)]. Thus, each individual in the 2019 Seneca 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 27.0) 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	Seneca County Sample	%	2020 Census	%	Weighting Value
Sex:					
Male	177	50.86207	27,758	50.23981	0.98777
Female	171	49.13793	27,493	49.76019	1.01266
Age:					
20 to 34 years	24	6.95652	10,193	24.79325	3.56403
35 to 44 years	42	12.17391	6,507	15.82750	1.30012
45 to 54 years	44	12.75362	6,631	16.12911	1.26467
55 to 59 years	29	8.40580	4,112	10.00195	1.18989
60 to 64 years	50	14.49275	3,811	9.26980	0.63962
65 to 74 years	104	30.14493	5,670	13.79159	0.45751
75 to 84 years	46	13.33333	2,773	6.74499	0.50587
85+ years	6	1.73913	1,415	3.44182	1.97905
Race:					
White	325	93.39080	49,348	89.31603	0.95637
Non-White	23	6.60920	5,903	10.68397	1.61653
Household Income:					
Less than \$25,000	62	19.37500	4,041	18.57163	0.95854
\$25,000 to \$34,999	45	14.06250	2,460	11.30567	0.80396
\$35,000 to \$49,999	60	18.75000	3,770	17.32616	0.92406
\$50,000 to \$74,999	56	17.50000	4,527	20.80518	1.18887
\$75,000 to \$99,999	42	13.12500	2,984	13.71387	1.04487
\$100,000 to \$149,999	41	12.81250	2,896	13.30944	1.03879
\$150,000 or more	14	4.37500	1,081	4.96806	1.13556

Appendix IV: Seneca County Sample Demographic Profile*

Adult Variable	2022 Seneca County Adult Survey Sample	Seneca County Census 2016-2020 (5-year estimates)	Ohio Census 2019 (1-year estimates)
Age			
20-29	3.4%	12.9%	13.2%
30-39	5.4%	11.0%	12.6%
40-49	10.9%	12.2%	11.9%
50-59	17.1%	13.6%	13.1%
60 plus	60.0%	24.7%	24.4%
Race/Ethnicity			
White	94.0%	94.7%	83.5%
Hispanic or Latino (of any race)	0.9%	5.3%	4.0%
African American	0.2%	4.2%	14.4%
Some other race	0.6%	1.6%	1.3%
Asian	1.7%	0.9%	3.0%
American Indian and Alaska Native	1.1%	0.9%	0.8%
Marital Status[†]			
Married Couple	58.3%	47.1%	47.0%
Never been married/member of an unmarried couple	13.2%	32.6%	32.7%
Divorced/Separated	11.5%	14.1%	13.9%
Widowed	15.4%	6.2%	6.3%
Education[†]			
Less than High School Diploma	6.0%	7.9%	9.2%
High School Diploma	36.9%	44.8%	32.6%
Some college/ College graduate	47.4%	47.3%	58.1%
Income (Families)			
\$14,999 and less	8.9%	6.0%	6.0%
\$15,000 to \$24,999	14.3%	5.4%	5.9%
\$25,000 to \$49,999	28.9%	25.8%	18.7%
\$50,000 to \$74,999	16.6%	22.5%	19.4%
\$75,000 or more	21.2%	40.2%	49.9%

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

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

Appendix V: Demographics and Household Information

SENECA COUNTY PROFILE

*(Source: U.S. Census Bureau, 2016-2020)
2016-2020 ACS 5-year estimates*

General Demographic Characteristics

	Number	Percent (%)
<i>Total Population</i>		
2020 Total Population	55,251	100%
<i>Largest City – Tiffin</i>		
2020 Total Population	17,473	100%
<i>Population by Race/Ethnicity</i>		
Total Population	55,251	100%
White	52,331	94.7%
Hispanic or Latino (of any race)	2,928	5.3%
African American	2,329	4.2%
Two or more races	1,233	2.2%
Some other race	872	1.6%
Asian	506	0.9%
American Indian and Alaska Native	504	0.9%
<i>Population by Age</i>		
Under 5 years	2,979	5.4%
5-to-19 years	11,160	20.1%
20-to-24 years	3,824	6.9%
25-to-44 years	12,876	23.3%
45-to-64 years	14,554	26.3%
65 years and more	9,858	17.8%
Median age (years)	40.4	N/A
<i>Household by Type</i>		
Total households	21,759	100%
Total families	14,160	65.1%
Households with children <18 years	5,502	25.3%
Married-couple family household	10,374	47.7%
Married-couple family household with children <18 years	3,165	14.5%
Female householder, no husband present	2,437	11.2%
Female householder, no husband present with children <18 years	1,426	6.6%
Nonfamily household (single person)	7,599	34.9%
Nonfamily household (single person) living alone	N/A	79.9%
Nonfamily household (single person) 65 years and >	N/A	34.3%
Households with one or more people <18 years	N/A	30.4%
Households with one or more people 60 years and >	N/A	41.7%
Average household size	2.39 people	N/A
Average family size	2.87 people	N/A

General Demographic Characteristics, Continued

<i>Housing Occupancy</i>		
Median value of owner-occupied units	\$108,900	N/A
Median monthly owner costs for housing units with a mortgage	\$1,014	N/A
Median monthly owner costs for housing units without a mortgage	\$411	N/A
Median value of occupied units paying rent	\$699	N/A
Median rooms per total housing unit	6.2	N/A
Total occupied housing units	21,759	N/A
No telephone service available	274	1.3%
Lacking complete kitchen facilities	347	1.6%
Lacking complete plumbing facilities	31	0.1%

Selected Social Characteristics

<i>School Enrollment</i>		
Population 3 years and over enrolled in school	14,051	100%
Nursery & preschool	1,092	7.8%
Kindergarten	379	2.7%
Elementary School (Grades 1-8)	5,575	39.6%
High School (Grades 9-12)	2,907	20.7%
College or Graduate School	4,098	29.2%
<i>Educational Attainment</i>		
Population 25 years and over	37,288	100%
< 9 th grade education	631	1.7%
9 th to 12 th grade, no diploma	2,325	6.2%
High school graduate (includes equivalency)	16,719	44.8%
Some college, no degree	7,356	19.7%
Associate degree	3,790	10.2%
Bachelor's degree	4,233	11.4%
Graduate or professional degree	2,234	6.0%
Percent high school graduate or higher	34,332	92.1%
Percent Bachelor's degree or higher	6,467	17.3%
<i>Marital Status</i>		
Population 15 years and over	45,492	100%
Never married	N/A	32.6%
Now married, excluding separated	N/A	47.1%
Separated	N/A	1.6%
Widowed	N/A	6.2%
Widowed females	N/A	9.2%
Divorced	N/A	12.5%
Divorced females	N/A	14.5%
<i>Veteran Status</i>		
Civilian population 18 years and over	43,200	100%
Veterans 18 years and over	3,374	7.8%

Selected Social Characteristics, Continued

<i>Disability Status of the Civilian Non-Institutionalized Population</i>			
Total civilian noninstitutionalized population		54,306	100%
Civilian with a disability		7,932	14.6%
Under 18 years		12,034	100%
Under 18 years with a disability		867	7.2%
18-to-64 years		32,956	100%
18-to-64 years with a disability		3,876	11.8%
65 Years and over		9,316	100%
65 Years and over with a disability		3,189	34.2%

Selected Economic Characteristics

<i>Employment Status</i>			
Population 16 years and over		44,817	100%
16 years and over in labor force		27,791	62.0%
16 years and over not in labor force		17,026	38.0%
Females 16 years and over		22,452	100%
Females 16 years and over in labor force		13,030	58.0%
Population living with own children <6 years		3,366	100%
All parents in family in labor force		2,764	82.1%
<i>Class of Worker</i>			
Civilian employed population 16 years and over		26,636	100%
Private wage and salary workers		22,693	85.2%
Government workers		2,652	10.0%
Self-employed workers in own not incorporated business		1,282	4.8%
Unpaid family workers		9	0.0%
<i>Occupations</i>			
Employed civilian population 16 years and over		26,636	100%
Production, transportation, and material moving occupations		7,630	28.6%
Management, business, science, and art occupations		7,273	27.3%
Sales and office occupations		4,743	17.8%
Service occupations		4,305	16.2%
Natural resources, construction, and maintenance occupations		2,685	10.1%
<i>Leading Industries</i>			
Employed civilian population 16 years and over		26,636	100%
Agriculture, forestry, fishing and hunting, and mining		417	1.6%
Construction		1,814	6.8%
Manufacturing		7,617	28.6%
Wholesale trade		523	2.0%
Retail trade		2,788	10.5%
Transportation and warehousing, and utilities		1,423	5.3%
Information		199	0.7%
Finance and insurance, and real estate and rental and leasing		740	2.8%
Professional, scientific, and management, and administrative and waste management services		1,398	5.2%
Educational services, and health care and social assistance		5,744	21.6%
Arts, entertainment, and recreation, and accommodation and food services		2,129	8.0%
Other services, except public administration		1,094	4.1%
Public administration		750	2.8%

Selected Economic Characteristics, Continued

Income In 2020		
Households	21,759	100%
< \$10,000	952	4.4%
\$10,000 to \$14,999	1,126	5.2%
\$15,000 to \$24,999	1,963	9.0%
\$25,000 to \$34,999	2,460	11.3%
\$35,000 to \$49,999	3,770	17.3%
\$50,000 to \$74,999	4,527	20.8%
\$75,000 to \$99,999	2,984	13.7%
\$100,000 to \$149,999	2,896	13.3%
\$150,000 to \$199,999	721	3.3%
\$200,000 or more	360	1.7%
Median household income	\$52,897	N/A
Income in 2020		
Families	14,160	100%
< \$10,000	470	3.3%
\$10,000 to \$14,999	384	2.7%
\$15,000 to \$24,999	769	5.4%
\$25,000 to \$34,999	1,303	9.2%
\$35,000 to \$49,999	2,351	16.6%
\$50,000 to \$74,999	3,189	22.5%
\$75,000 to \$99,999	2,343	16.5%
\$100,000 to \$149,999	2,421	17.1%
\$150,000 to \$199,999	623	4.4%
\$200,000 or more	307	2.2%
Median family income	\$63,655	N/A
Per capita income in 2020	\$26,810	N/A
Poverty Status in 2020		
Families	N/A	8.6%
All People	N/A	12.7%

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

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2020	\$44,993	58 th of 88 counties
BEA Per Capita Personal Income 2019	\$40,458	63 rd of 88 counties
BEA Per Capita Personal Income 2018	\$39,002	63 rd of 88 counties
BEA Per Capita Personal Income 2017	\$38,050	58 th of 88 counties
BEA Per Capita Personal Income 2016	\$37,948	52 nd 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

Employment Statistics

Category	Seneca County	Ohio
Labor Force	26,900	5,779,400
Employed	25,600	5,525,400
Unemployed	1,300	254,000
Unemployment Rate* in March 2022	4.8	4.4
Unemployment Rate* in February 2022	4.8	4.8
Unemployment Rate* in March 2021	5.2	6.0

*Rate equals unemployment divided by labor force.

(Source: Ohio Department of Job and Family Services, March 2022,
https://ohiolmi.com/_docs/LAUS/OhioCivilianLaborForceEstimates.pdf

Estimated Poverty Status in 2020

Age Groups	Number	90% Lower Confidence Interval	90% Upper Confidence Interval	Percent	90% Lower Confidence Interval	90% Upper Confidence Interval
Seneca County						
All ages in poverty	5,449	4,204	6,694	10.4	8.0	12.8
Ages 0-17 in poverty	1,531	1,041	2,021	13.3	9.1	17.5
Ages 5-17 in families in poverty	1,014	652	1,376	11.9	7.6	16.2
Median household income	\$58,129	\$52,412	\$63,846			
Ohio						
All ages in poverty	1,428,219	1,398,807	1,457,631	12.6	12.3	12.9
Ages 0-17 in poverty	417,333	400,878	433,788	16.6	15.9	17.3
Ages 5-17 in families in poverty	281,878	267,654	296,102	15.3	14.5	16.1
Median household income	\$60,360	\$59,900	\$60,820			
United States						
All ages in poverty	38,371,394	38,309,115	38,433,673	11.9	11.9	11.9
Ages 0-17 in poverty	11,204,423	11,176,652	11,232,194	15.7	15.7	15.7
Ages 5-17 in families in poverty	7,798,566	7,778,138	7,818,994	14.9	14.9	14.9
Median household income	\$67,340	\$67,251	\$67,429			

Source: U.S. Census Bureau, 2020 Poverty and Median Income Estimates,
<https://www.census.gov/data/datasets/2020/demo/saipe/2020-state-and-county.html>

Federal Poverty Thresholds in 2021 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	\$14,097					
1 Person 65 and >	\$12,996					
2 people Householder < 65 years	\$18,145	\$18,677				
2 People Householder 65 and >	\$16,379	\$18,606				
3 People	\$21,196	\$21,811	\$21,831			
4 People	\$27,949	\$28,406	\$27,479	\$27,575		
5 People	\$33,705	\$34,195	\$33,148	\$32,338	\$31,843	
6 People	\$38,767	\$38,921	\$38,119	\$37,350	\$36,207	\$35,529
7 People	\$44,606	\$44,885	\$43,925	\$43,255	\$42,009	\$40,554
8 People	\$49,888	\$50,329	\$49,423	\$48,629	\$47,503	\$46,073
9 People or >	\$60,012	\$60,303	\$59,501	\$58,828	\$57,722	\$56,201

Source: U. S. Census Bureau, Poverty Thresholds 2021,
<https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html>

Appendix VI: County Health Rankings

	Seneca County 2022	Ohio 2022	U.S. 2022
Health Outcomes			
Premature death. Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2018-2020)	8,300	8,700	7,300
Overall health. Percentage of adults reporting fair or poor health (age-adjusted) (2019)	21%	18%	17%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2019)	4.5	4.2	3.9
Mental health. Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2019)	5.4	5.2	4.5
Maternal and infant health. Percentage of live births with low birthweight (< 2500 grams) (2014-2020)	9%	9%	8%
Health Behaviors			
Tobacco. Percentage of adults who are current smokers (2019)	23%	22%	16%
Obesity. Percentage of adults that report a BMI of 30 or more (2019)	39%	35%	32%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2019)	7.5	6.8	7.8
Physical inactivity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2019)	30%	28%	26%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2021)	69%	77%	80%
Excessive drinking. Percentage of adults reporting binge or heavy drinking (2019)	19%	21%	20%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2016-2020)	33%	33%	27%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2019)	442.2	559.4	551
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2014-2020)	22	21	19

(Source: 2022 County Health Rankings for Seneca County, Ohio, and U.S. data)

	Seneca County 2022	Ohio 2022	U.S. 2022
Clinical Care			
Coverage and affordability. Percentage of population under age 65 without health insurance (2019)	7%	8%	11%
Access to health care/medical care. Ratio of population to primary care physicians (2019)	2,900:1	1,290:1	1,310:1
Access to dental care. Ratio of population to dentists (2020)	2,390:1	1,570:1	1,400:1
Access to behavioral health care. Ratio of population to mental health providers (2021)	680:1	350:1	350:1
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2019)	4,096	4,338	3,767
Mammography screening. Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2019)	42%	45%	43%
Flu vaccinations. Percentage of Medicare enrollees that had an annual flu vaccination (2019)	54%	51%	48%
Social and Economic Factors			
Education. Percentage of adults ages 25 and over with a high school diploma or equivalent (2016-2020)	92%	91%	89%
Education. Percentage of adults ages 25-44 years with some post-secondary education (2016-2020)	58%	66%	67%
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2020)	8.1%	8.1%	8.1%
Employment, poverty, and income. Percentage of children under age 18 in poverty (2020)	13%	17%	16%
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2016-2020)	3.6	4.6	4.9
Family and social support. Percentage of children that live in a household headed by single parent (2016-2020)	23%	27%	25%
Family and social support. Number of membership associations per 10,000 population (2019)	14.5	10.9	9.2
Violence. Number of reported violent crime offenses per 100,000 population (2014 & 2016)	172	293	386
Injury. Number of deaths due to injury per 100,000 population (2016-2020)	86	96	76

(Source: 2022 County Health Rankings for Seneca County, Ohio, and U.S. data)

N/A – Data is not available

	Seneca County 2022	Ohio 2022	U.S. 2022
Physical Environment			
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2018)	9.1	9.0	7.5
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 (2020)	Yes	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 (2014-2018)	11%	13%	17%
Transportation. Percentage of the workforce that drives alone to work (2016-2020)	82%	82%	75%
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2016-2020)	26%	31%	37%

(Source: 2022 County Health Rankings for Seneca County, Ohio, and U.S. data)

N/A – Data is not available

Appendix VII: Community Stakeholder Perceptions

In December 2022, The Seneca County Health Alliance released the 2022 Seneca County Community Health Assessment (CHA) for public viewing and input. Those who viewed the report or short video presentations were directed to submit feedback via an electronic survey platform. Results from the participant feedback are included below:

1) What surprised you the most?

- Parents not talking to their kids about important topics (e.g., mental health, safe sex) (2)
- The ACES in youth - it seems like there were some categories that were not reported in the results. There are other ACES that youth in Seneca County have experienced.
- Lack of charts reporting cardiovascular health
- Lack of a concern about Clean Air Act violations and health risks associated with chronic exposure to greenhouse gasses
- Number of residents indicating cost as a barrier to obtaining health care
- Data on COVID-19 and mental health
- High percentage of youth reporting feeling sad or hopeless almost every day for two weeks or more in a row
- Concerned about validity and reliability of results (if results accurately represent what is truly occurring in Seneca County)
- Some areas were better than expected while other areas were concerning

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

- Health impacts of the COVID-19 vaccine (compare incidence of illnesses in those vaccinated vs not vaccinated)
- Health impacts (e.g., cancer rate) of adults/children living near the landfill in the county compared to other areas of the county
- Involvement of faith-based organizations and how they can help with mental health needs
- Phone usage (e.g., average amount of time adults & youth spend on phones per day, how old youth were when they had their first phone)
- Comparison of illness by area of the county. Is there a concern in certain areas of the county?

3) What will you or your organization do with this data?

- Use the data to determine focus for funding and prevention efforts (3)
- Personal use/awareness
- Help people understand the issues people face and why
- Get Federal EPA support
- Share to raise awareness
- Utilize it to write grants and open dialogue with groups
- Discussion on what the township can do and how to best assist the health department

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

Please list 2 or more choices.

- Mental health (3)
- Youth suicide (2)
- Substance use (2)
- Nutrition
- Food insecurity
- Publication of results to show youth and adults that most people aren't binge drinking, having sex, etc. and that other people struggle with mental health issues so they are not alone
- COVID-19 vaccine safety and effects
- Educating parents on why it's important to talk to their children about concerning matters
- Need for affordable primary care services
- Need for mental health services
- Vaccination (e.g., flu, shingles)

5) 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 and other websites (3)
- Public events (e.g., farmers markets, fairs, etc.)
- Presentations in schools and to community organizations
- Teachers could use the report in lessons to show student skills in reading/interpretation of graphs while communicating the information in the report at the same time. Students could write responses about the results.
- Have people sign up for emails and do mass emails
- Open forum to the public to discuss issues and allow residents to provide their input on improving what is important to their health
- Provide solutions and work on prevention, especially stopping the landfill expansion that is impacting public health
- Greater involvement of community stakeholders
- A program where the information is shared for populations that don't use social media or don't have access to internet, phone, or computer
- Direct mailings

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

- Poverty/financial instability (2)
- Distrust
- Lack of providers
- Not being able to pay for care
- Declining property values making it impossible to get out of the county unless they sell to the landfill that is impacting public health
- Acceptance of the data
- Lack of representation
- Parents don't understand the importance of talking with their children about tough topics
- People use their phones too much rather than have actual conversations that matter
- Knowledge of how, what, and where
- Lack of confidence in research

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

- After school groups
- Youth mentoring programs
- Friendship groups
- Scouts
- 4-H
- Alternative health care providers who focus on prevention of diseases (promote vitamins and healthy lifestyle instead of opioids and gene therapy)
- Law enforcement
- Local physician offices
- School social workers/counselors
- Parent representatives
- Department of Job and Family Services

8) Other comments or concerns:

- Improve landfill oversight and get several professionals to oversee it to protect public health.
- Stop masking kids and mandating EUA therapies we know nothing about.
- Thank you for sharing this info.
- We need to make sure we are having overdose and suicide fatality reviews so that we as a community know what we need to put in place to help prevent individuals from doing these things.
- There should be huge questions about reliability and validity with many of these results. Some of the pie charts and graphs are not accurate or are missing information (e.g., pie chart depicting demographics of education is not representative of the percentages; healthcare coverage section has a pie chart but does not have any percentages or descriptors to that pie chart; youth exaggerated on responses such as reporting being injured with a weapon at school in the past year)
- Excellent report. Very interesting.