MONTGOMERY COUNTY
HEALTH DEPARTMENT

Montgomery County
Community
Health Profile
2015

Public Health
Prevent. Promote. Protect.

Montgomery County
Health Department
110 West South Boulevard
Crawfordsville, IN 47933
765.364.6440

It is the mission of the Montgomery County Health Department to better serve the community by providing public health services which promote and protect the health of the citizens of Montgomery County

2015 Montgomery County Board of Health

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Montgomery County

Public Health
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CONTENTS

PURPOSE

The purpose of a Community Health Assessment (CHA) is to evaluate the current health, well-being, and needs of a local community. **Community Health Assessments help form a snapshot of a community, which allows for the construction of a broader Community Health Profile.** Community Health Profiles use a variety of sources including demographic data, county health trends, and surveying of local populations to identify priority areas where improvements can be made.

Local partners, including the Montgomery County Department of Health (MCDH), involved in the Community Health Profile will use the profiles data to implement a Community Health Improvement Plan (CHIP) aimed at improving any or all of the following: awareness and education of specific health conditions and lifestyle choices, availability of effective health services, sustaining an environment that supports healthy living.

The 2015 assessment survey* was developed in August of 2015 and disseminated from September 8th to November 8th. Data was analyzed upon completion of survey. Throughout the entire process, Franciscan St. Elizabeth Health-Crawfordsville, the Montgomery County Wellness Coalition and the Montgomery County Health Department Accreditation Advisory Group provided input, guidance, and feedback.

*Two pilot studies were conducted to assess the overall understanding of the survey and feasibility of taking the survey in a realistic time frame.

BACKGROUND

In 2012, **a Community Health Needs Assessment** was conducted by Franciscan St. Elizabeth Health-Crawfordsville as a requirement for non-profit hospitals as part of the Affordable Care Act. Non-profit hospitals are required to conduct a CHNA every 3 years.

The previous health assessment only provided primary data and did not incorporate secondary data. Using primary and secondary data covering health multiple health status indicators allows for comparison of "rates and trends of priority community health outcomes and determinants" [1].

Link to 2012 Community Health Needs Assessment: http://www.franciscanalliance.org/hospitals/crawfordsville/documents/mont-cty-chna.pdf

NEXT STEPS

The goal of the 2015 survey, and resulting Community Health Profile was to assess a broader scope of current health issues in Montgomery County. The next steps will be to identify the key priority areas where improvements can be made. These priority areas will be identified through community input and community partner collaboration. **Ultimately, 2 to 3 priority areas will be identified so that measurable goals can be set, and processes to achieve those goals be established in a timeframe suitable for each goal.**

References:

http://www.cdc.gov/stltpublichealth/cha/data.html

COMMUNITY PARTNERS

Many thanks and sincere appreciation to the following community partners and the people of Montgomery County.

City of Crawfordsville, Mayor's office
Mayor Todd Barton*

City of Crawfordsville Parks & Recreation
Fawn Johnson*

Chamber of Commerce
Steve House, Director*

Crawfordsville School Corporation
Rex Ryker*

Franciscan St Elizabeth Health - Crawfordsville
Terry Klein, VP/COO*
Sister M. Ruth Luthman OSF
Matt Oates, Marketing Specialist

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JoBeth McCarthy-Jean, MPH
Dr. Cynthia Stone, DrPH, RN

Indiana West Advantage
Zach Churney

MCT (Medical Care Trust)
Jill Rogers*

Montgomery County Health Board
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Montgomery County Wellness Coalition

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Luke Wren, Accreditation Coordinator *
Samantha Swearingen, Health Educator
Rebecca Lang, Public Health Nurse*

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Leah Sinnet*

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David Johnson, Executive Director *

Wabash College
Dr. Sara Drury, Strategic Planning Facilitator*
Kyle Stucker, Wabash Student

MCHD Accreditation Advisory Team
*Denotes Advisory Group Members from Community Partners above

Any other partners and/or individuals not mentioned, thank you for your contribution to this assessment.

DATA SOURCES

Primary Data

2015 Montgomery County Community Health Assessment Survey

The Community Health Assessment Survey was a 57-question survey consisting of multiple choice and open ended questions. There were two parts of the survey*:

Part one consisted of questions regarding demographic information, employment, income, healthcare needs, youth and senior citizen issues, housing and shelter, child care, health status, nutrition and exercise, preventative care, and stress.

Part two consisted of questions regarding Sexual Health Practices.

*Part 1 was created by both Franciscan St. Elizabeth Health-Crawfordsville and the Montgomery County Health Department. Part 2 was for the Montgomery Health Department's use only.

All graphs or charts used to visually represent 2015 Community Health Assessment Data were created via www.metachart.com

Limitations to the 2015 survey

In order to obtain a statistically significant sample size, which allows for assumptions to be made at the county population level, multiple community partners were utilized to obtain survey responses. This was done through school district and employer email list serves. **This could allow for some bias in regards to employment, household income, and insurance, as those who were recruited to take the 2015 survey through their job might result in an over representation of those who are employed, therefore could possibly make more money**, also have access to employer insurance, and possibly increased representation of persons with college degree. This can be seen as the largest income demographic surveyed is household income of $75,000 or higher.

To address this limitation, secondary data is used to provide further information, so that a better overall picture can be made. Incorporating secondary data from credible sources (see Secondary Sources below) allows for the most accurate information to be presented and thus allows for Montgomery County's Health to be evaluated.

Secondary Data

2010 Census

The U.S. Census counts every resident in the United States. It is required by Article I, Section 2 of the Constitution and takes place every 10 years; the most recent was conducted in 2010. The Census provides population demographic data for example: age, race, gender, employment, median household income, education, poverty statistics, and much more.

For more information on the 2010 Census visit: http://www.census.gov/2010census/

BRFSS (Behavioral Risk Factor Surveillance System)

BRFSS is the nation's foremost system of health-related telephone surveys that collect state data about U.S. populations regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.

BRFSS collects data in all 50 states as well as the District of Columbia and three U.S. territories. BRFSS **completes more than 400,000 adult interviews each year**, making it the largest ongoing health survey system in the entire world.

For more information on BRFSS visit: http://www.cdc.gov/brfss/index.html

County Health Rankings

The County Health Rankings & Roadmaps program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.

County Health Rankings measure multiple vital health factors in areas like high school graduation rates, obesity, smoking, unemployment, access to healthy foods, quality of air and water, income, and teen births in almost every county in America.

The annual rankings provide a informative snapshot of how health is influenced by where residents live, learn, work, and play.

See page 9 for more information or visit: http://www.countyhealthrankings.org/about-project

YRBSS (Youth Risk Behavior Surveillance System)

The Youth Risk Behavior Surveillance System (YRBSS) monitors six types of health-risk behaviors that contribute to the leading causes of death and disability among youth and adults for example:

- Behaviors that contribute to unintentional injuries and violence
- Sexual behaviors that contribute to unintended pregnancy and sexually transmitted diseases, including HIV Infection
- Alcohol and other drug use
- Tobacco use
- Unhealthy dietary behaviors
- Inadequate physical activity

YRBSS also measures the prevalence of obesity, asthma, and includes a national school-based survey conducted by CDC.

For more information visit: http://www.cdc.gov/healthyyouth/data/yrbs/index.htm

Montgomery County Demographics-2010 Census Quick Facts

Population	
Population, 2014 Estimate	38, 146
Persons under 5 years, percent, 2013	6.2%
Persons under 18 years, percent, 2013	23.2%
Persons 65 years and over, percent, 2013	16.3%
Female persons, percent, 2013	49.7%
Ethnicity	
White alone, not Hispanic or Latino, percent, 2013	92.5%
Black or African American alone, percent, 2013	0.4%
Asian alone, percent, 2013	0.6%
Two or More Races, percent, 2013	1.2%
Hispanic or Latino, percent, 2013	4.7%
Education	
High School graduate or higher, percent of persons age 25+, 2009-2013	87.8%
Bachelor's degree or higher, percent of persons age 25+, 2009-2013	17.8%
Housing	
Housing units, 2013	16,474
Homeownership rate, 2009-2013	72.2%
Housing units in multi-unit structures, percent, 2009-2013	13.3%
Median Value of owner-occupied housing units, 2009-2013	$108,300
Households, 2009-2013	14,590
Persons per household, 2009-2013	2.53
Income	
Per capita money income in past 12 months (2013 dollars), 2009-2013	$22, 679
Median household income, 2009-2013	$46,797
Persons below poverty level, percent, 2009-2013	16.8%

For more information visit: http://quickfacts.census.gov/qfd/states/18/18107.html
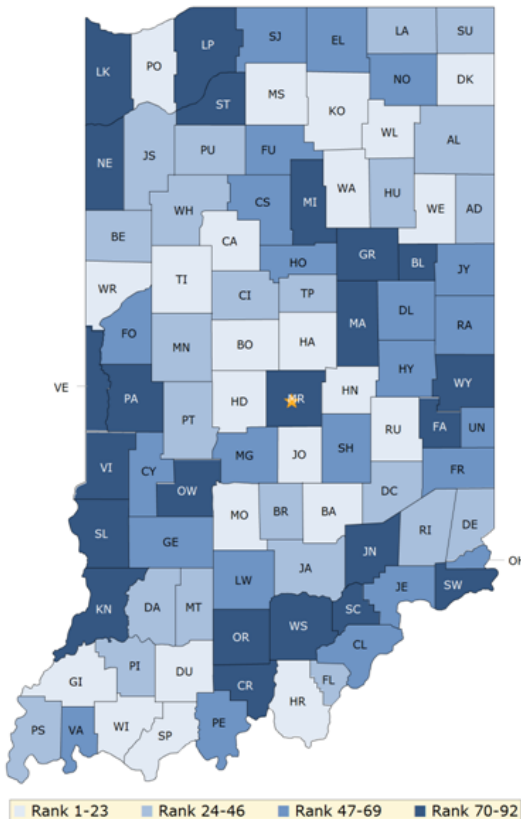
COUNTY HEALTH RANKINGS

County Health Rankings provided by the Robert Wood Johnson Foundation in collaboration with the University of Wisconsin Population Health Institute **uses a model of population health that emphasizes multiple factors which if improved, will increase the health of a community.**
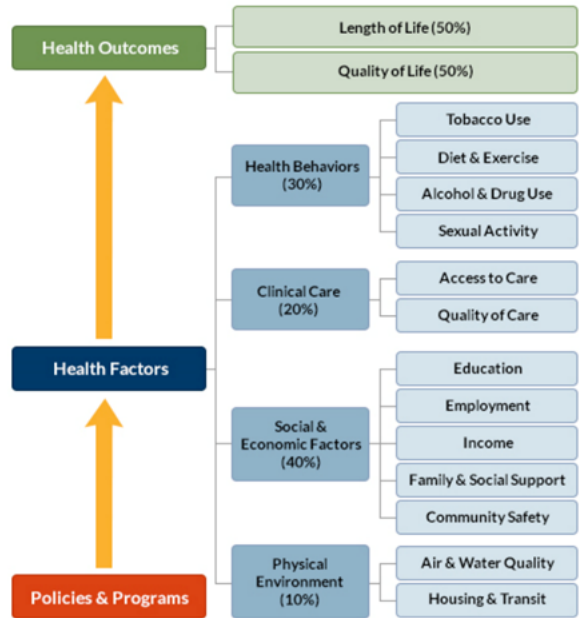
Health rankings are broken down into two main categories:

  Health Factors
  Health Outcomes

Health Outcomes (length and quality of life) **are impacted by Health Factors such as health behaviors.**
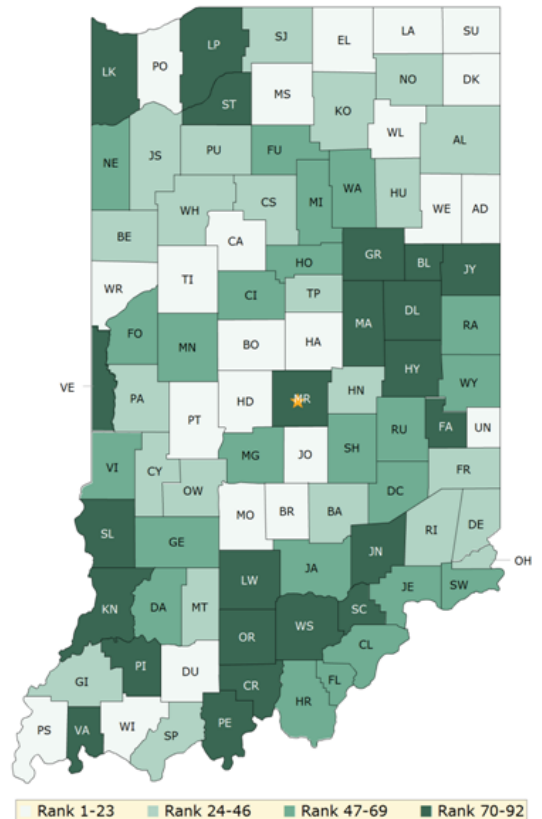
Clinical Care, Social and Economic Factors, as well as **Physical Environment** also impact these areas, and provide data to support the overall rankings.

Montgomery County Ranks 31st in Health Factors, but only 50th in Health Outcomes.

For more information visit:
http://www.countyhealthrankings.org/app/indiana/2015/rankings/montgomery/

WHAT DETERMINES A HEALTHY COMMUNITY?

The American Public Health Association defines a healthy community as one that:

- **Meets everyone's basic needs** such as safe, affordable and accessible food, water, housing education, health care, and places to play;

- **Provides supportive levels of economic and social development** through living wage, safe and healthy job opportunities, a thriving economy and healthy development of children and adolescents;

- **Promotes quality and sustainability** of the environment through tobacco and smoke-free spaces, clean air, soil and water, green and open spaces and sustainable energy use; and

- **Places high value on positive social relationships** through supportive and cohesive families and neighbor-
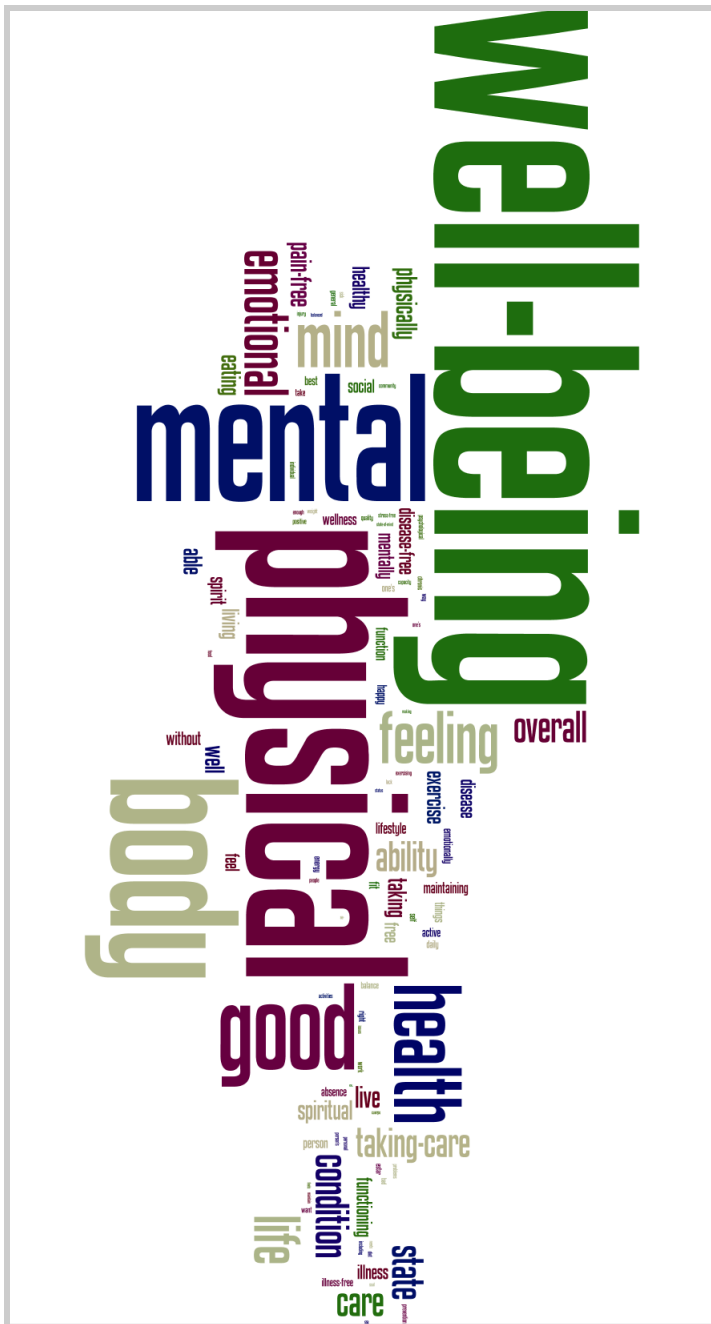
WHAT IS PUBLIC HEALTH?

According to the World Health Organization, public health refers to all organized measures (whether public or private) **to prevent disease, promote health, and prolong life among the population as a whole.**

Its activities aim to provide conditions in which **people can be healthy and focus on entire populations**, not on individual patients or diseases.

Thus, **public health is concerned with the total community** and not only the eradication of a particular disease.

The **three main public health functions** are:

- The **assessment and monitoring** of the health of communities and populations at risk to identify health problems and priorities.

- The **formulation of public policies** designed to solve identified local and national health problems and priorities.

- To **assure that all populations have access to appropriate and cost-effective care**, including health promotion and disease prevention services.

Source: http://www.who.int/trade/glossary/story076/en/

Figure: Picture above is a Wordle™ from survey answers to the question "What is health?" "Wordles give greater prominence to words that appear more frequently in the source text."- http://www.wordle.net/

NUTRITION

Eating right doesn't have to be complicated. Remember to balance calories to manage weight. People who are overweight or looking to lose weight, should strive to consume fewer calories from food and beverages and increase physical activity. The 2010 Dietary Guidelines recommends the following:

- Emphasize fruit, vegetable, whole grains, low-fat or fat-free milk, and milk products.
- Include lean meats, poultry, fish, beans, eggs, and nuts.
- Make sure your diet is low in saturated and trans fats (solid fats), cholesterol, salt (sodium), and added sugars.
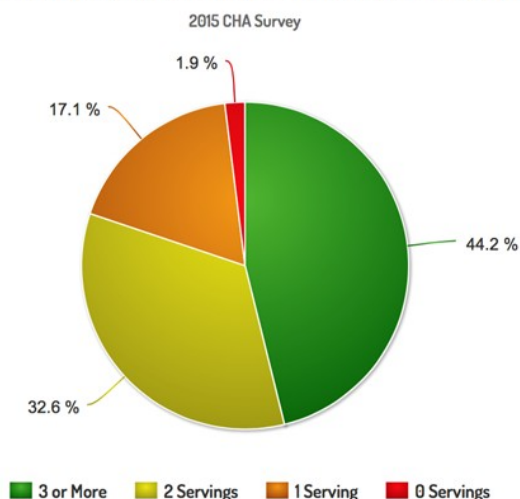
To read more about the 2010 Dietary Guidelines follow this link:

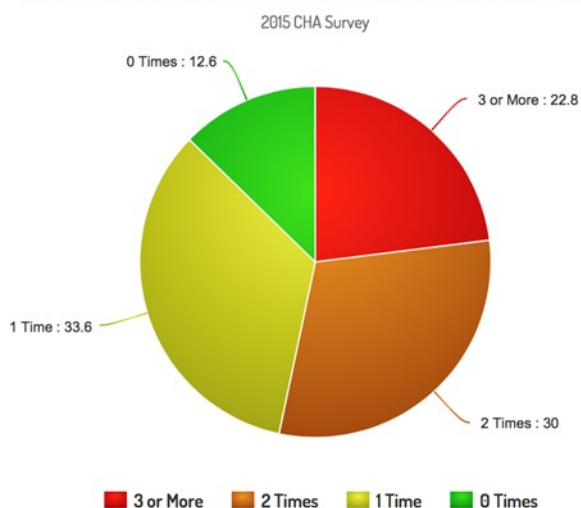http://www.cnpp.usda.gov/sites/default/files/dietary_guidelines_for_americans/PolicyDoc.pdf

Don't think about good food verse bad food. Think nutrient rich food. Which food is going to give the most nutrition for the amount of calories? Ensure the food is packed with vitamins, minerals, fiber, and low in calories.

Eating a rainbow will ensure nutrient rich foods are being selected. Eat dark green veggies, vibrant orange carrots or sweet potatoes, dark blueberries, red peppers, and white has a place at the table too, fill up on cauliflower and onions.

AVERAGE SERVINGS OF FRUITS OR VEGETABLES CONSUMED EACH DAY
2015 CHA Survey

1.9 %
17.1 %
44.2 %
32.6 %

■ 3 or More ■ 2 Servings ■ 1 Serving ■ 0 Servings

FAST FOOD OR PIZZA CONSUMPTION IN WEEK PRIOR TO SURVEY
2015 CHA Survey

0 Times : 12.6
3 or More : 22.8
1 Time : 33.6
2 Times : 30

■ 3 or More ■ 2 Times ■ 1 Time ■ 0 Times

Shop for foods that are in season.

Fresh Fruits and vegetables that are in season are easier to get and normally less expensive. **Local Farmers Markets are a great way to buy fresh local produce.** Fresh produce doesn't last long so you may have to buy it in smaller quantities.

Trying to buy fresh all year long, because you heard it is the healthiest thing to do? Not so fast, According to the Journal of the Science of Food and Agriculture, frozen food is more nutritious than "fresh" if the produce has been transported over several miles. **The majority of Indiana's fresh produce has to travel over 1500 miles before it reaches our shelves!**

When produce is harvested it instantly begins to decay. Decay causes loss of nutrients, meaning the "fresh" produce on the grocery store shelf may have very little nutritional value. **Feeding the family on a budget can be done when remembering: "Frozen and canned when the weather is bland!"**

NUTRITION—CONTINUED

Improving your nutrition, eating habits, and increasing physical activities levels can help [1]:

- Control your weight
- Reduce your risk of heart disease
- Reduce your risk for type 2 diabetes
- Reduce your risk of some cancers
- Strengthen your bones and muscles
- Improve your mental health and mood
- Improve your ability to do daily activities and prevent falls, if you're an older adult
- Increase your chances of living longer

Reduce sugary beverages

Calories from sugary beverages can add up and people don't often realize how many calories they drink. **For example one 20-ounce bottle of soda can have 14 tsp of sugar and 227 calories.**
In order to reduce calories from beverages read the food label carefully. Check how many serving per container if there are two or more, multiply all the information on the food label by the amount of servings. Check the ingredients list for words that don't look like sugar:

- High-fructose corn syrup
- Fructose
- Syrup
- Honey
- Fruit juice concentrates
- Corn syrup
- Sucrose
- Dextrose

Make better beverage choices, choose water. For a body to continue to function normally it needs a continuous supply of water, after all 50% to 70% of the body is made up of water.

Food Insecurity in Montgomery County

Food insecurity refers to not having adequate access to the proper nutritional requirements needed for a healthy lifestyle. This refers to households not having nutritionally adequate and safe foods for all members of a household.

Lacking constant access to food is related to multiple negative health outcomes like weight-gain and premature mortality [2].

Food Insecurity*	
Montgomery County	**15%**
Indiana	**16%**

*Food Insecurity is the percentage of the population who did not have access to a reliable source of food during the past year.
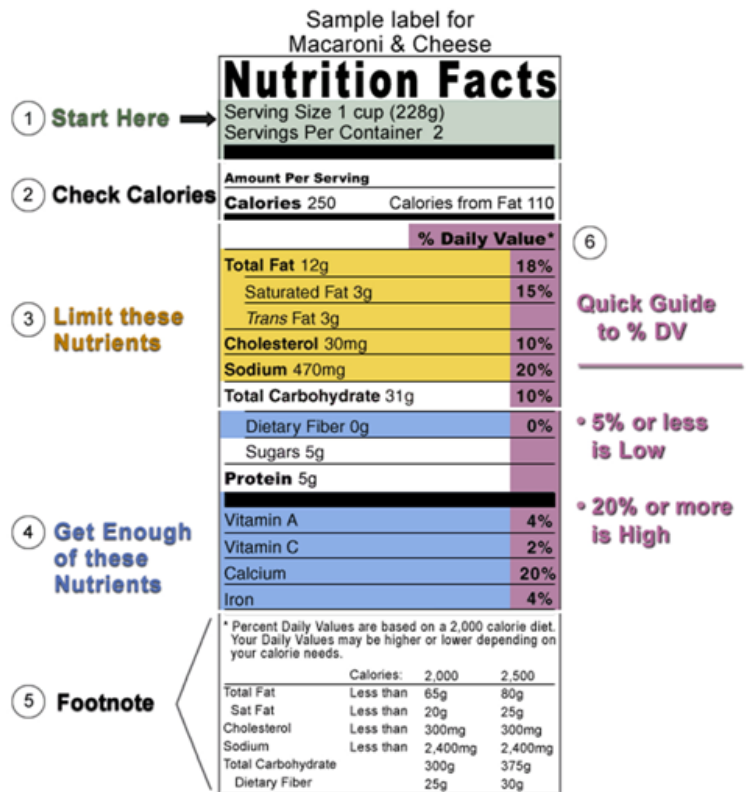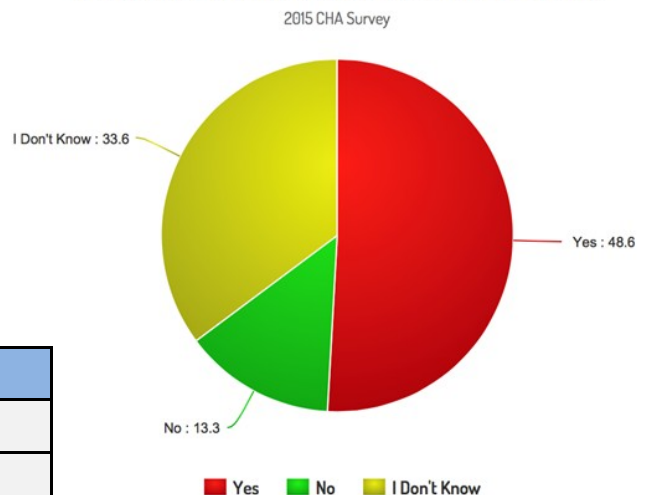
PHYSICAL ACTIVITY

The 2008 Physical Activity Guidelines for Americans recommends that everyone should be physically active on a regular basis to improve overall health and fitness. The guidelines recommend **150 minutes per week of moderate intensity physical activity**, such as brisk walking. This equates to a manageable task of 30 minutes 5 days a week. It is important to remember to start slow. Accumulating 150 minutes of physical activity in 10-minute intervals has been shown to be beneficial [3].

Another component of physical fitness is resistance exercise or strength training. Resistance exercise is used to increase muscular strength through resistance. Popular forms of resistance exercise include weights, resistance bands, push–ups and sit ups. **For best results and disease prevention, resistance exercise should be performed 2 to 3 times/week with a day of rest in between.** Increased muscular strength could lead to better performance of daily living tasks, increased balance, and reduced muscle and joint injury.
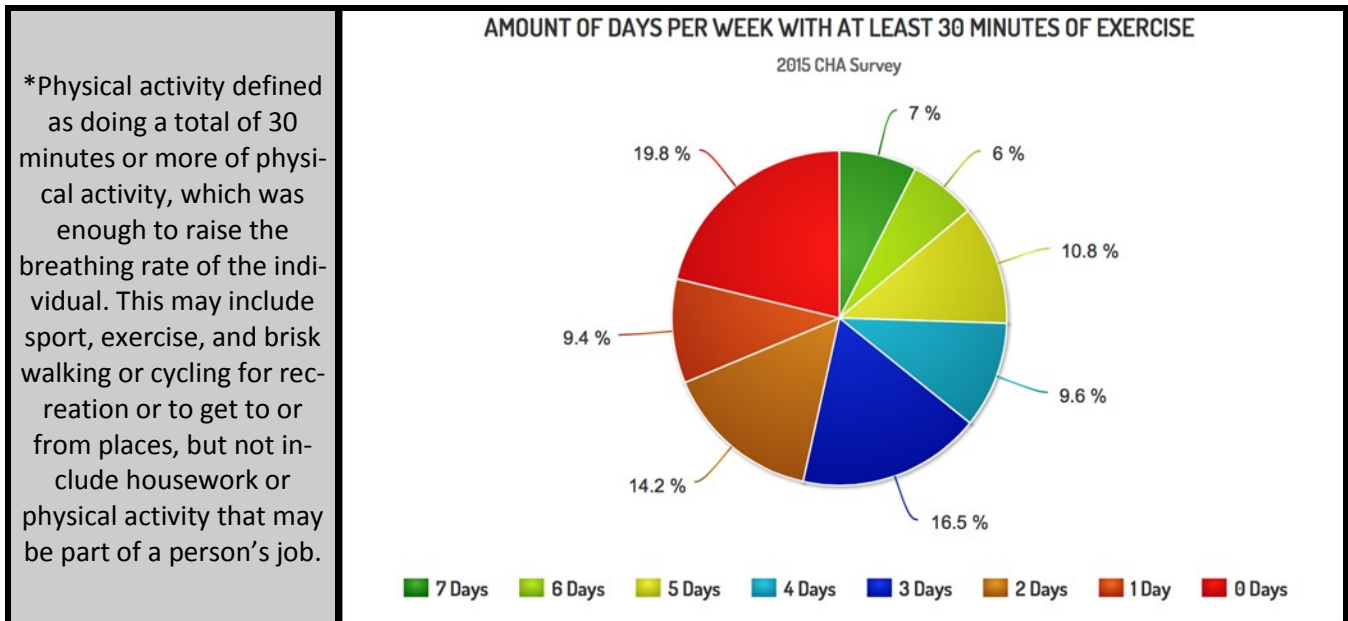
Not everyone has to run a marathon to be physically fit. Simply walking can decrease a person's risk for many chronic diseases.

*Physical activity defined as doing a total of 30 minutes or more of physical activity, which was enough to raise the breathing rate of the individual. This may include sport, exercise, and brisk walking or cycling for recreation or to get to or from places, but not include housework or physical activity that may be part of a person's job.	

AMOUNT OF DAYS PER WEEK WITH AT LEAST 30 MINUTES OF EXERCISE
2015 CHA Survey

7 % — 6 % — 10.8 % — 9.6 % — 16.5 % — 14.2 % — 9.4 % — 19.8 %

Legend: 7 Days, 6 Days, 5 Days, 4 Days, 3 Days, 2 Days, 1 Day, 0 Days

	Indiana Average	U.S. Average
Adults reporting no leisure time physical activity	**31%** (CI 95%*) 29.8%-32.3%	**26.3%** (CI 95%) 26.0%-26.6%
Adults Meeting aerobic and muscle strengthening guidelines	**16.2%** (CI 95%) 15.2%-17.3%	**20.2%** (CI 95%) 19.9%-20.4%

*CI 95% is the 95% Confidence Interval, this gives an estimated range of values which is likely to include an unknown population parameter or measure, loosely this means one can be 95% certain that the true value falls within the range given.

Additional Links

Follow this link to see a Purdue Extension publication on water: https://www.extension.purdue.edu/extmedia/HHS/HHS-748-W.pdf

For healthier low-cost food options check out WedMD's article titled *15 Healthy Foods for About $2* at http://www.webmd.com/food-recipes/cheap-healthy-15-nutritious-foods-about-2-dollars

Academy of Nutrition and Dietetics: http://www.eatright.org/

USDA: http://www.choosemyplate.gov/

University of Nebraska Extension http://food.unl.edu/

Purdue Extension Education Store* https://mdc.itap.purdue.edu/default.asp

Has many free publications on Human Nutrition; Altering Recipes for Better Health, Autumn Produce, Fish4Health, Food Storage Guides, Ingredient Substitution, Raw Milk FAQS, Rethinking Lactose Intolerance, Spring Produce, Summer Produce, drinking water, Vitamin D.

Click here to view Purdue Extension's publication on walking for exercise: https://www.extension.purdue.edu/extmedia/HHS/HHS-786-W.pdf

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Resources Available

Montgomery County Purdue Extension

Purdue Extension Family Nutrition Program, offers programs to increase the ability of individuals and families with limited resources to utilize their food dollars and SNAP benefits appropriately and provide a safe meal environment.

For Information contact:
Debbie Threlkeld at 765-364-6363
https://extension.purdue.edu/montgomery/pages/default.aspx

Purdue Extension Classes Offered:
Eat your way to Better Health
Food Safety including ServSafe
Dining with Diabetes
Be Heart Smart
Food Preservation
Cooking Demonstrations
Consultations on any nutrition related topic

Matter of Balance
A Purdue Extension class managing concerns about falls. A fall prevention class with muscle strengthening exercises to increase balance and prevent falls. Contact Purdue Extension: 765-364-6363
https://extension.purdue.edu/montgomery/pages/default.aspx

Athena Sport & Fitness:
http://www.athenafitness.net/
Contact: (765) 359-1126
Location: 200 E College St. Crawfordsville, IN 47933

Crawfordsville Parks & Recreation: http://www.crawfordsville.net/department/index.php?structureid=13
Contact: (765) 364-5175
Location: 922 E. South Blvd. Crawfordsville, IN 47933

INShape Indiana: http://www.inshapeindiana.org/209.htm#Montgomery

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References:
1. http://www.cdc.gov/physicalactivity/basics/pa-health/index.htm
2. http://www.countyhealthrankings.org/app/indiana/2015/measure/additional/139/description
3. http://health.gov/paguidelines/pdf/paguide.pdf
4. http://www.cdc.gov/physicalactivity/basics/pa-health/index.htm
5. http://www.cnpp.usda.gov/sites/default/files/dietary_guidelines_for_americans/ExecSumm.pdf
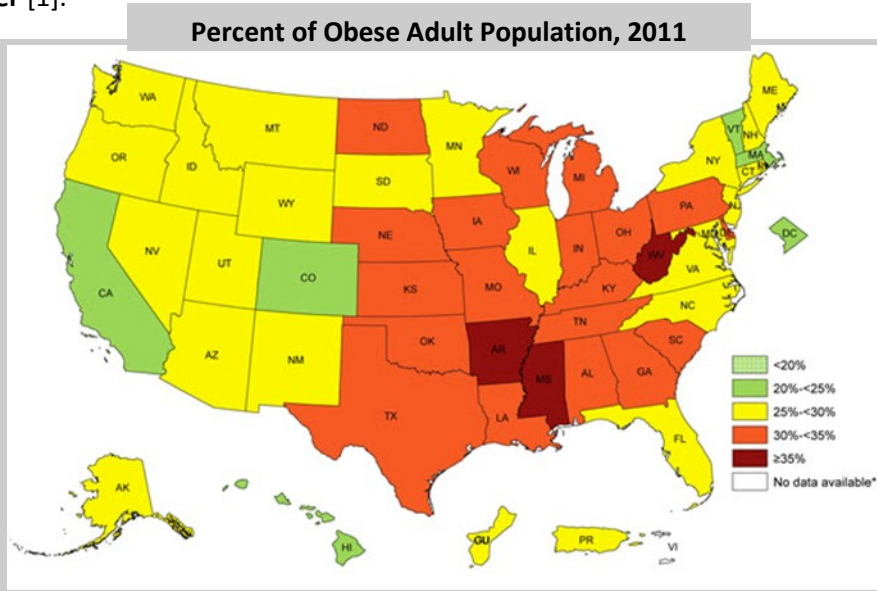
CHRONIC DISEASE

OBESITY

Addressing obesity from a public health perspective is difficult, as obesity results from a variety of causes. These can be both behaviors and the genetics of an individual. **Some behaviors contributing to obesity include: dietary patterns, physical activity, physical inactivity, medication use, and other exposures.**

Obesity is a very serious matter, as it is associated with poor mental health and reduced quality of life. **Obesity has been shown to be a contributing factor in leading causes of death including: diabetes, heart disease, stroke, and some types of cancer** [1].

Having a body weight higher than what is recommended for a specific height is described as either overweight or obese. This is determined by the Adult Body Mass Index or BMI, and this is calculated by taking the weight of a person in kilograms and dividing by the squared height of the person in meters [2].

Percent of Obese Adult Population, 2011

Source: Behavorial Risk Factor Surveillance System, CDC: http://www.cdc.gov/obesity/data/prevalence-maps.html

According to the CDC: "At an individual level, BMI can be used as a *screening tool* but is not diagnostic of the body fatness or the health of an individual. A trained healthcare provider should perform appropriate health assessments in order to evaluate an individual's health status and risks."

BMI does not calculate or measure fat directly but has been shown to correlate with other measures of body fat.

Additional Links:
http://www.cdc.gov/obesity/
http://www.who.int/topics/obesity/en/
http://www.obesitycampaign.org/obesity_facts.asp
http://frac.org/initiatives/hunger-and-obesity/

Resources Available:
INShape Indiana: http://www.inshapeindiana.org/209.htm#Montgomery

Athena Sport & Fitness: http://www.athenafitness.net/Contact: (765) 359-1126
Location: 200 E College St. Crawfordsville, IN 47933

Crawfordsville Parks & Recreation: http://www.crawfordsville.net/department/index.php?structureid=13
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References:
http://www.cdc.gov/obesity/adult/causes.html
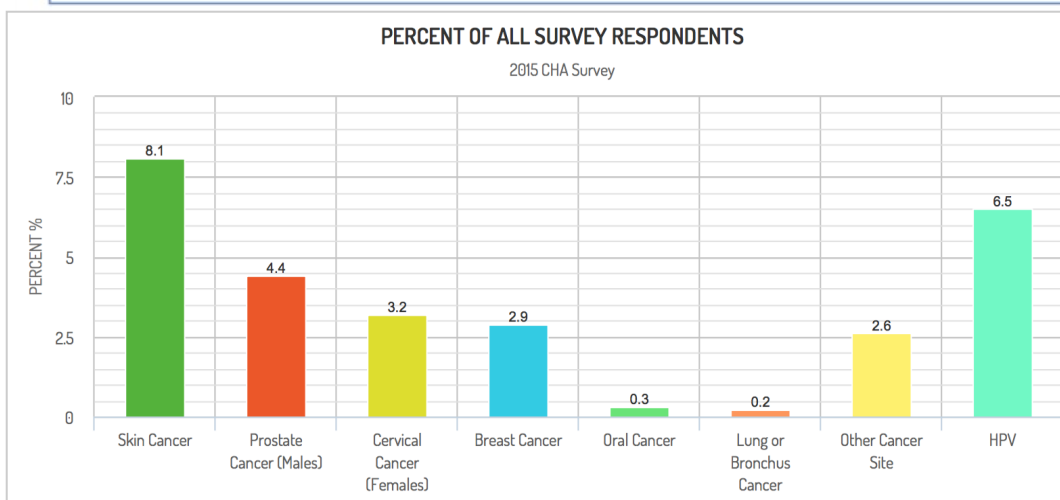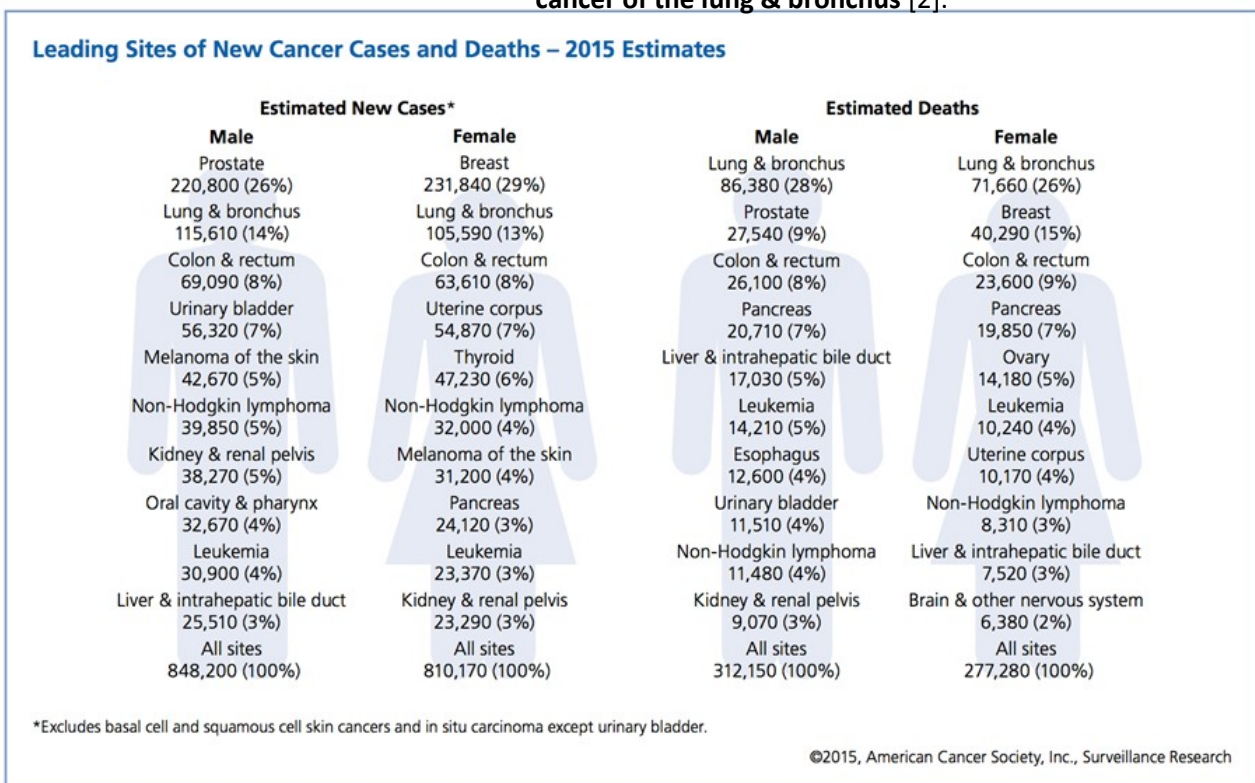http://www.cdc.gov/obesity/adult/defining.html

CANCER

Cancer is a term used to describe diseases in which **abnormal cells divide uncontrollably** and can invade other tissues of the body. There are over 100 kinds of cancer.

There are multiple ways to prevent certain types of cancer these include: screening, vaccines, and healthy lifestyle choices including avoiding tobacco, limiting alcohol use, protecting skin from the sun or other forms UV radiation (indoor tanning), eating diet rich in fruits and vegetables, keeping a healthy weight, and being physically active.

Screening for cervical, colorectal, and breast cancer can better identify lesions that are in the before cancer stage and/or can find them at an earlier stage when treatment can be more effective.
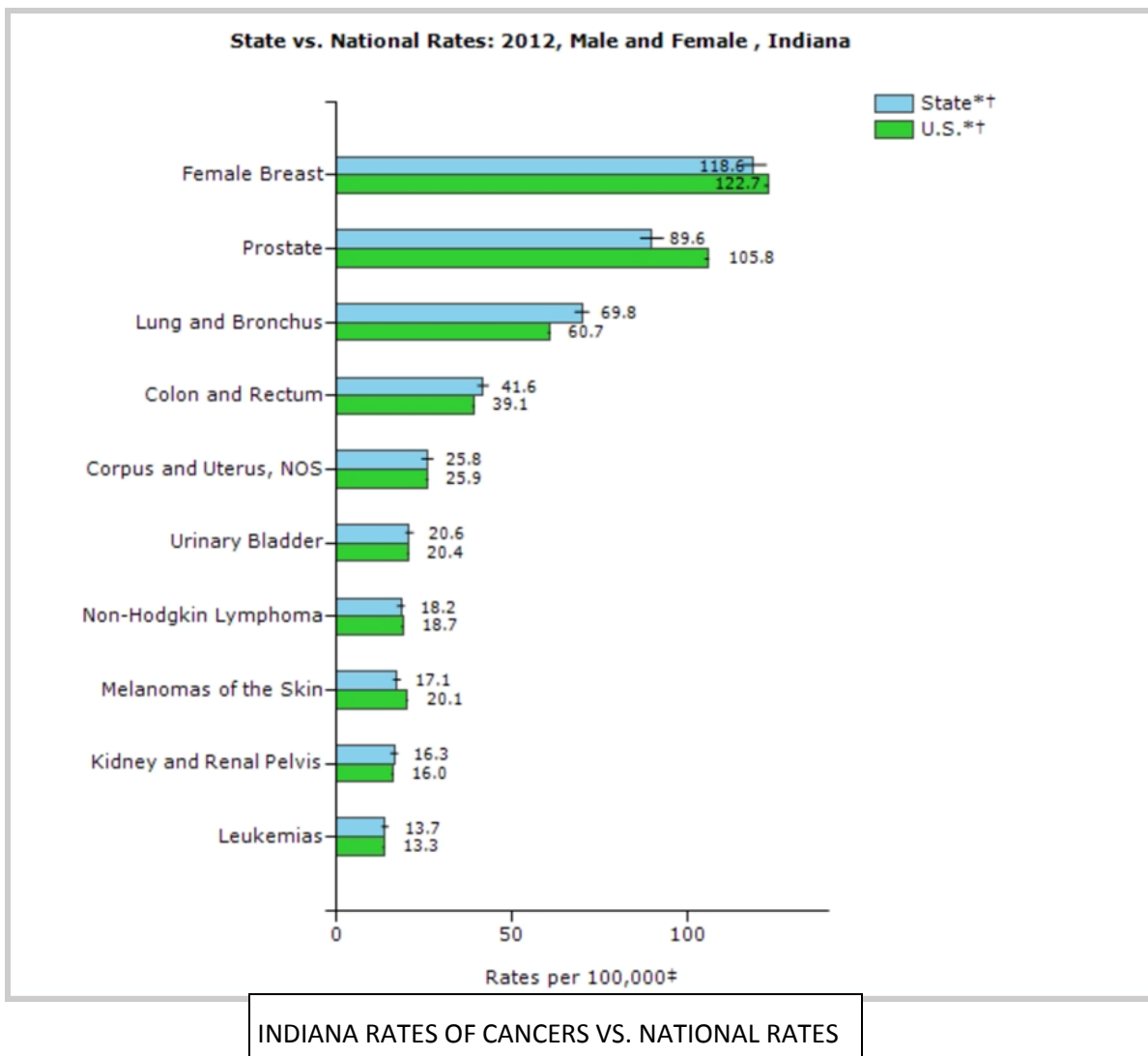
Vaccines can lower the risk of cancer. The human papillomavirus (HPV) vaccine helps prevent most cervical cancer and multiple other types of cancer. The hepatitis B vaccine can help lower risk of liver cancer [1].

The most common cancer locations in the body vary by gender. The leading sites for new cancer cases diagnosed for male was prostate, while for female was breast. **However, for both males and females the leading cause of death in 2015 from cancer was cancer of the lung & bronchus** [2].

Leading Sites of New Cancer Cases and Deaths – 2015 Estimates

Estimated New Cases*

Male	Female
Prostate 220,800 (26%)	Breast 231,840 (29%)
Lung & bronchus 115,610 (14%)	Lung & bronchus 105,590 (13%)
Colon & rectum 69,090 (8%)	Colon & rectum 63,610 (8%)
Urinary bladder 56,320 (7%)	Uterine corpus 54,870 (7%)
Melanoma of the skin 42,670 (5%)	Thyroid 47,230 (6%)
Non-Hodgkin lymphoma 39,850 (5%)	Non-Hodgkin lymphoma 32,000 (4%)
Kidney & renal pelvis 38,270 (5%)	Melanoma of the skin 31,200 (4%)
Oral cavity & pharynx 32,670 (4%)	Pancreas 24,120 (3%)
Leukemia 30,900 (4%)	Leukemia 23,370 (3%)
Liver & intrahepatic bile duct 25,510 (3%)	Kidney & renal pelvis 23,290 (3%)
All sites 848,200 (100%)	All sites 810,170 (100%)

Estimated Deaths

Male	Female
Lung & bronchus 86,380 (28%)	Lung & bronchus 71,660 (26%)
Prostate 27,540 (9%)	Breast 40,290 (15%)
Colon & rectum 26,100 (8%)	Colon & rectum 23,600 (9%)
Pancreas 20,710 (7%)	Pancreas 19,850 (7%)
Liver & intrahepatic bile duct 17,030 (5%)	Ovary 14,180 (5%)
Leukemia 14,210 (5%)	Leukemia 10,240 (4%)
Esophagus 12,600 (4%)	Uterine corpus 10,170 (4%)
Urinary bladder 11,510 (4%)	Non-Hodgkin lymphoma 8,310 (3%)
Non-Hodgkin lymphoma 11,480 (4%)	Liver & intrahepatic bile duct 7,520 (3%)
Kidney & renal pelvis 9,070 (3%)	Brain & other nervous system 6,380 (2%)
All sites 312,150 (100%)	All sites 277,280 (100%)

*Excludes basal cell and squamous cell skin cancers and in situ carcinoma except urinary bladder.

©2015, American Cancer Society, Inc., Surveillance Research

PERCENT OF ALL SURVEY RESPONDENTS
2015 CHA Survey

Category	PERCENT %
Skin Cancer	8.1
Prostate Cancer (Males)	4.4
Cervical Cancer (Females)	3.2
Breast Cancer	2.9
Oral Cancer	0.3
Lung or Bronchus Cancer	0.2
Other Cancer Site	2.6
HPV	6.5

*Percent of those surveyed who indicated they themselves were told by a healthcare professional that they had the following

State vs. National Rates: 2012, Male and Female , Indiana

Legend: State*† / U.S.*†

Cancer Type	State*†	U.S.*†
Female Breast	118.6	122.7
Prostate	89.6	105.8
Lung and Bronchus	69.8	60.7
Colon and Rectum	41.6	39.1
Corpus and Uterus, NOS	25.8	25.9
Urinary Bladder	20.6	20.4
Non-Hodgkin Lymphoma	18.2	18.7
Melanomas of the Skin	17.1	20.1
Kidney and Renal Pelvis	16.3	16.0
Leukemias	13.7	13.3

Rates per 100,000‡

INDIANA RATES OF CANCERS VS. NATIONAL RATES

Additional Links

American Cancer Society guidelines for Nutrition and Physical Activity for Cancer Prevention, etc
http://www.cancer.org/healthy/eathealthygetactive/
acsguidelinesonnutritionphysicalactivityforcancerprevention/

American Institute for Cancer Research recommendations
http://www.aicr.org/reduce-your-cancer-risk/recommendations-for-cancer-prevention/?
referrer=https://www.google.com/

National Cancer Institute
http://www.nutrition.gov/nutrition-and-health-issues/cancer

References
http://www.cdc.gov/cancer/dcpc/prevention/index.htm
http://www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-044552.pdf

DIABETES

In 2014 over 21 million Americans were living with diagnosed diabetes

When you eat, food is turned into a sugar, called glucose, by your body. This sugar is put into your bloodstream to be taken to the parts of the body that need it for energy. **Every part of the body uses sugar to work properly.**

Insulin, a hormone, acts as the key to get the sugar into the cell so that it can be used for energy. **If the body is not able to make enough insulin or the body cannot use the insulin correctly, glucose remains in the blood and your blood sugar rises.** A high blood sugar indicates you have diabetes.

If the body is not making any insulin this is characterized as Type 1 diabetes. Without insulin, the body is not able to use the blood sugar. People with Type 1 diabetes are required to take external insulin. Approximately 5% of those with diabetes have type 1 diabetes.

If the body is not using insulin correctly this is characterized as Type 2 diabetes. When insulin is not used correctly glucose cannot enter the cell, causing a buildup of glucose in the blood stream. Type 2 diabetes is controlled with diet and exercise. Medication or insulin may also be prescribed. Approximately 95% of those with diabetes have type 2 diabetes.

Over a period of time having elevated levels of sugar in the blood can cause serious complications. Complications include nerve damage (loss of feeling or pain in the hands, feet, and legs), blindness, heart disease, loss of limb, stroke, and kidney failure [1].

PERCENT WITH DIABETES BY AGE GROUP
2015 CHA Survey

Age	PERCENT %
18-39	6.4
40-59	8.1
60+	18.9

*This figure shows the rate of diagnosed diabetes per 100 individuals from 1980 to 2014. Blue line represents the crude (actual) rate, while the red line is adjusted for age.
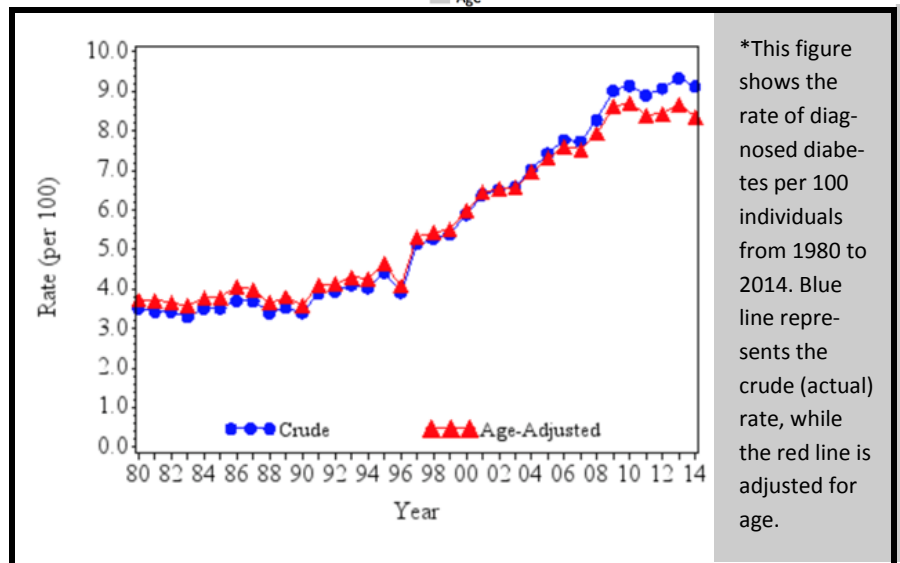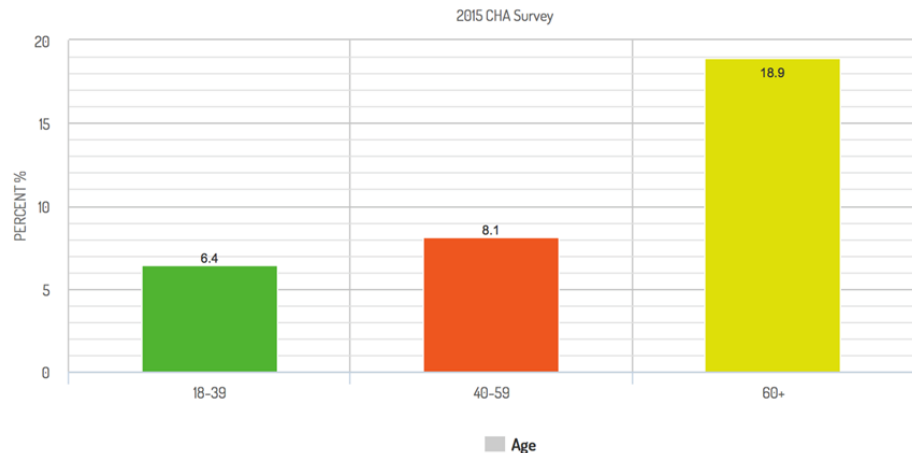
Additional Links
American Diabetes Association: www.diabetes.org

Center for Disease Control:
www.cdc.gov/diabetes/home/

Resources Available
Dining with Diabetes- Purdue Extension offersa cooking school for persons with diabetes and their families. Contact: (765) 364-6363
https://extension.purdue.edu/montgomery/pages/default.aspx

Diabetes Education:
Franciscan St. Elizabeth Health-Lafayette
Contact: (765) 428-5850

http://www.franciscanalliance.org/hospitals/lafayetteeast/services/diabetes/pages/default.aspx

References
1. www.diabetes.org
2. www.cdc.gov/diabetes/statistics/prev/national/figadults.htm
**3.** www.cdc.gov/diabetes/statistics/prev/national/figageadult.htm

HEART DISEASE

Keeping the heart healthy is crucial for the heart to perform critical functions. Did you know…The heart beats nearly 100,000 times daily pumping nearly 2,000 gallons of blood through the body? The heart supplies blood to the body's organs and tissues through 60,000 miles of blood vessels [American Heart Association].

The term **"heart disease" can refer to multiple types of heart conditions**. In the United States, by far, the **most common type of heart disease is coronary artery disease or CAD**. CAD reduces blood flow to the heart by a build up of plaque in the walls of the arteries that supply the heart with blood. **A major component of plaque is cholesterol.** Overtime plaque buildup causes narrowing of the arteries, in a process called atherosclerosis.

The most common symptom of CAD is chest pain or discomfort. **Over time CAD can cause weakened heart muscles, which may lead to heart failure and possibly death.**

There are multiple risk factors for heart disease including being overweight or obese, having a physically in-active lifestyle, eating unhealthy, smoking tobacco products, and having family history of heart disease [1].

PERCENT WITH HEALTH CONDITION
2015 CHA Survey
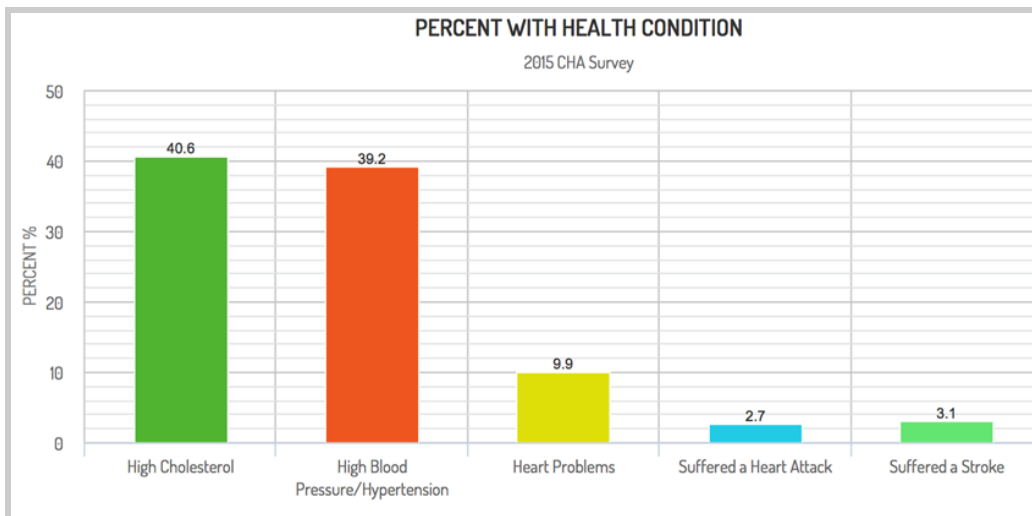
Heart attacks may have several major warning signs and symptoms such as [2].

- Chest Pain

- Upper body pain or discomfort in the arms, back, neck, jaw, or upper stomach.

- Shortness of breath.

- Nausea, lightheadedness, or cold sweats

Key Facts:

- Heart disease is the leading cause of death for all races and genders in Indiana and U.S [3]

- Stroke is the 4th leading cause of death in the U.S. and Indiana [4].

- About 610,000 people die of heart disease every year in the U.S.

- About 735,000 people suffer a heart attack every year in the U.S.

- About half of Americans (47%) have at least one of these risk factors: High Blood pressure, high cholesterol, and smoking.

Heart Disease in Women

According to Go Red for Women heart disease is the **number one killer of women, causing 1 in 3 deaths each year.** That is nearly one woman every minute. Symptoms of heart disease differ for women. **Women are more likely to experience shortness of breath, nausea/vomiting and back or jaw pain.** Other signs and symptoms to look for are dizziness, lightheadedness or fainting, pain in the lower chest or upper abdomen and extreme fatigue [5].

Based on the Community Health Assessment Survey, Montgomery County shows comparable percentage to Indiana in regards to High Cholesterol. **In 2012 Indiana had a High Cholesterol rate of 40%. Those surveyed showed a higher percent of High Blood Pressure (39.2%) then the 2012 state average of 33% (see figure above)** [3].

Spot a Stroke with F.A.S.T

- **Face Dropping** – Ask the person to smile, look for one side of the face to droop or be numb.

- **Arm Weakness –** Ask the person to raise both arms, look for one arm to float down.

- **Speech Difficulty –** Ask the person to repeat a simple sentence, look for slurred speech, inability to speak, or hard to understand.

- **Time to call 911 –** If the person shows any of these signs call 911.

HEART DISEASE—CONTINUED

Additional Links

American Heart Association: www.heart.org

Know the facts about Heart Disease: http://www.cdc.gov/heartdisease/docs/consumered_heartdisease.pdf

Resources Available

Be Heart Smart
Purdue Extension course
Contact: (765) 364-6363
https://extension.purdue.edu/montgomery/pages/default.aspx

$49 Heart Scan
Franciscan St. Elizabeth Health-Crawfordsville
Contact: (765) 364-3171
http://www.franciscanalliance.org/hospitals/crawfordsville/services/imaging/pages/heart-scan.aspx

References

http://www.cdc.gov/heartdisease/about.htm
http://www.cdc.gov/heartdisease/facts.htm
http://www.state.in.us/isdh/24970.htm
http://www.state.in.us/isdh/24950.htm
https://www.goredforwomen.org/home/about-heart-disease-in-women/facts-about-heart-disease/

TOBACCO USE

For decades tobacco use had been demonstrated to be detrimental to health. **However, according to the CDC, 17.8% of U.S. adults still smoke cigarettes.** Tobacco use in the form of smoking cigarettes is the leading cause of preventable deaths and disease in the United States, with **480,000 (1 out of every 5) deaths every year attributable to smoking** [1].

Smoking can also cause disease and death for those who inhale second hand smoke. Second hand smoke is smoke from burning tobacco products like cigarettes, cigars, or pipes, and also smoke that has been exhaled by a person smoking. **During the years 2005-2009 second hand smoke exposure caused 34,000 adult nonsmokers' deaths due to heart disease, and 7,300 deaths due to lung cancer** [1].

E-cigarettes are a common type of Electronic Nicotine Delivery System (ENDS), which gives the user a dose of nicotine without the combustion of tobacco. **E-cigarettes are increasingly being used, especially by adolescents.** According to the CDC Office on Smoking and Health "From 2011 to 2014, past 30-day use of e-cigarettes increased nine-fold for high school students (1.5% to 13.4%) and more than six-fold for middle school students (0.6% to 3.9%) "[2].

Health Consequences Linked to Exposure to Secondhand Smoke

Children
- Middle ear disease
- Respiratory symptoms, impaired lung function
- Lower respiratory illness
- Sudden infant death syndrome

Adults
- Stroke
- Nasal irritation
- Lung cancer
- Coronary heart disease
- Reproductive effects in women: low birth weight

Source: http://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/health_effects/index.htm#overview

Most ENDS users also smoke conventional cigarettes, which are referred to as a "dual user." According to the CDC in, 2012 and 2013, 76.8% of adults who used e-cigarettes in the past 30-days were also current cigarette smokers. **Little research has been conducted examining the adverse health effects of ENDS, however the CDC states "Nicotine poses dangers to pregnant women and fetuses, children, and adolescents. Youth use of nicotine in any form, including ENDS, is unsafe"** [2].

Some argue that ENDS are an effective way to quit smoking conventional cigarettes, but for adult smokers to benefit from ENDS, they "must completely quit combusted tobacco use."*

 *At this time ENDS are not an FDA-approved quit aid [2].

2015 Community Health Assessment Survey

15.9% of respondents indicated some type of current tobacco or nicotine based product usage.
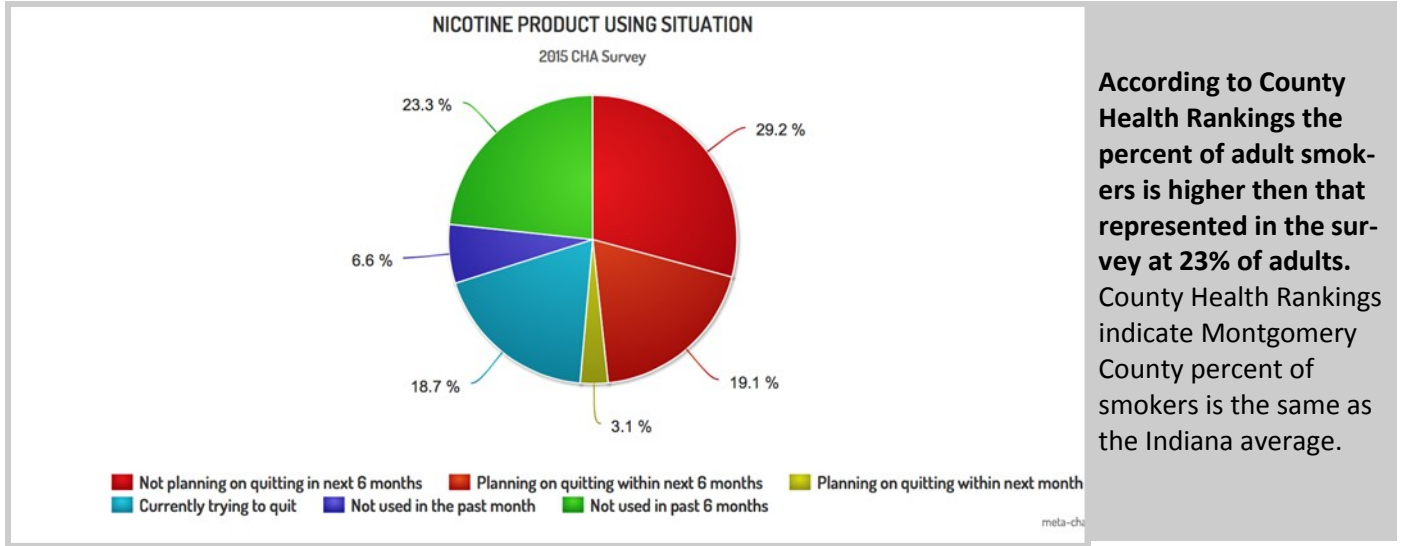
According to County Health Rankings the percent of adult smokers is higher then that represented in the survey at 23% of adults. County Health Rankings indicate Montgomery County percent of smokers is the same as the Indiana average.

County Health Rankings-Adult Smokers Percent (95% CI)	
Montgomery County	**Indiana**
23 (17-31)	**23 (22-23)**

BRFSS-Adult Smokers Percent (95% CI)	
Indiana	**U.S.**
21.9 (20.8-23)	**18.8**

*CI 95% is the 95% Confidence Interval, this gives an estimated range of values which is likely to include an unknown population parameter or measure, loosely this means one can be 95% certain that the true value falls within the range given.

Additional Links:

http://www.cdc.gov/tobacco/
http://www.who.int/mediacentre/factsheets/fs339/en/
http://kidshealth.org/teen/drug_alcohol/tobacco/secondhand_smoke.html

Calculate Cost of Smoking:
http://www.quitnow.ca/tools-and-resources/calculate-your-savings

Smoking Cessation:
http://in.gov/quitline/
http://www.wellnessindiana.org/project/smoking-sesation/

Quit Now Indiana: 1-800-QUIT-NOW http://www.quitnowindiana.com/

Resources Available:

Montgomery County Free Clinic: 816 Mill St. Crawfordsville, IN 47933 www.mcfreeclinic.org

References:

1. http://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/general_facts/index.htm

2.http://www.cdc.gov/tobacco/stateandcommunity/pdfs/ends-key-facts2015.pdf
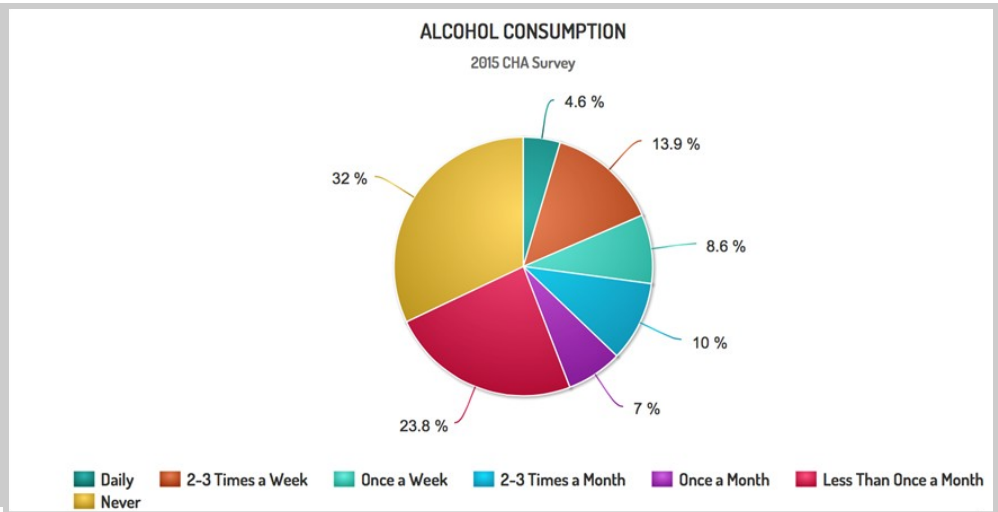
ALCOHOL USE

Ethanol, or ethyl alcohol is the intoxicating ingredient found in beer, wine, and liquor. Alcohol is produced by the fermentation of yeast, sugars, and starches. **Alcohol affects all organs in the human body, is a nervous system depressant, and is rapidly absorbed into the bloodstream**. Alcohol is broken down in the liver by enzymes; however, the liver can only break down a very small amount of alcohol at a time. This leaves any excess alcohol circulating throughout the body. The intensity of the effect of alcohol is directly related to the amount of alcohol consumed.

Alcohol's effect on the body begins as soon as someone takes their first drink. The immediate effects can be felt within 10 minutes. As someone drinks, the blood alcohol concentration (BAC) level continues to increase. BAC is the level of alcohol in the person's bloodstream. The higher the BAC, the more impaired a person becomes. Alcohol can effect different people in different ways depending on a variety of factors, including:[1]

Alcohol can effect different people in different ways depending on a variety of factors, including:[1]

- •How much you drink
- •How often you drink
- •Your age
- •Your health status
- •Your family history

ALCOHOL CONSUMPTION
2015 CHA Survey

4.6 %
13.9 %
32 %
8.6 %
10 %
23.8 %
7 %

Daily | 2-3 Times a Week | Once a Week | 2-3 Times a Month | Once a Month | Less Than Once a Month | Never

Only **3.86%** Males responded they typically consume 5 or more drinks on average and only **3.18%** Females responded they typically consume 4 or more drinks on average*.

5 fl oz

12 fl oz

1.5 fl oz

Regular beer
(about 5% alcohol)

=

Table wine
(about 12% alcohol)

=

80-proof distilled spirits
(40% alcohol)

*A drink is defined by the percent of alcohol in each type of beverage [2].

ALCOHOL ABUSE

It is not uncommon for an individual to enjoy a glass of wine with dinner, stop for a drink after work, or enjoy a couple of beers while watching the big game; the problem is when a distinct pattern begins to emerge **and alcohol consumption becomes a method for coping with stresses of everyday life.**

Excessive alcohol use, including underage drinking and binge drinking (drinking 5 or more drinks on an occasion for men or 4 or more drinks on an occasion for women), **can lead to increased risk of health problems such as injuries, violence, liver diseases, and cancer.**

Alcohol and drug use have significant economic costs. **Excessive alcohol use costs $235 billion in lost productivity, health care, and criminal justice expenses each year** [1].

> **Drinking too much can weaken the immune system, making the body a much easier target for disease.** Chronic drinkers are more liable to contract diseases like pneumonia and tuberculosis than people who do not drink too much. Drinking a lot on a single occasion slows your body's ability to ward off infections – even up to 24 hours after intoxication

Alcohol's Effects on the Body:

BRAIN	HEART	LIVER	PANCREAS	CANCER
• Alcohol interferes with the brain's communication pathways, and can affect the way the brain looks and works. • These disruptions can change mood and behavior, and make it harder to think clearly and move with coordination.	• Drinking a lot over a long time or too much on a single occasion can damage the heart, causing problems including: • Cardiomyopathy – Stretching and drooping of heart muscle • Arrhythmias – Irregular heart beat • Stroke • High blood pressure • Research also shows that drinking moderate amounts of alcohol may protect healthy adults from developing coronary heart disease.	• Heavy drinking takes a toll on the liver, and can lead to a variety of problems and liver inflammations including: • Steatosis, or fatty liver • Alcoholic hepatitis • Fibrosis • Cirrhosis	• Alcohol causes the pancreas to produce toxic substances that can eventually lead to pancreatitis, a dangerous inflammation and swelling of the blood vessels in the pancreas that prevents proper digestion.	• Drinking too much alcohol can increase your risk of developing certain cancers, including cancers of the: • Mouth • Esophagus • Throat • Liver • Breast • Immune System

References

1. http://www.niaaa.nih.gov/alcohol-health/overview-alcohol-consumption
2. http://www.niaaa.nih.gov/alcohol-health/alcohols-effects-body
3. http://rethinkingdrinking.niaaa.nih.gov/images/icg-drinks.jpg

DRUG ABUSE

It is usually during teen years that introduction to drugs begins. An introduction to drugs may be fanned by simple curiosity, a desire to fit in, to have a good time, or ease other problems. **What begins as experimentation can result in drug addiction.**

Illicit drug use and abuse continues to rise nationally and the social and financial impacts on society are rising as well. Illicit drugs include marijuana (including hashish), cocaine (including crack), heroin, hallucinogens, inhalants, and misuse of prescription drugs. **The financial impact of drug abuse related to lost productivity, healthcare, and legal costs are estimated upwards of $190 Billion in U.S. [1].** Socially the impacts include spreading disease due to needle sharing or unprotected sex, deaths resulting from overdose of complications, unborn children of users, drug related crimes, broken families and homes.

| Table 1. Illicit drug use in the past month among individuals aged 12 or older: 2013						
	Aged 12 or older		Aged 12 to 17		Aged 18 or older	
Substance	Number (in thousands)	Percent	Number (in thousands)	Percent	Number (in thousands)	Percent
Illicit drug use	24,573	**9.4%**	2,197	**8.8%**	22,376	**9.4%**
Marijuana and	19,810	**7.5%**	1,762	**7.1%**	18,048	**7.6%**
Cocaine	1,549	**0.6%**	43	**0.2%**	1,505	**0.6%**
Inhalants	496	**0.2%**	121	**0.5%**	375	**0.2%**
Hallucinogens	1,333	**0.5%**	154	**0.6%**	1,179	**0.5%**
Heroin	289	**0.1%**	13	**0.1%**	277	**0.1%**
Nonmedical use of prescription-type drugs	6,484	**2.5%**	549	**2.2%**	5,935	**2.5%**
Pain relievers	4,521	**1.7%**	425	**1.7%**	4,096	**1.7%**

NOTE: Numbers and percentages do not sum to the illicit drug use estimate as individuals may have used more than one illicit drug.
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2013.

2015 Community Health Assessment Survey:

Percent Said "Yes" These Are Community Problem	
Issue	Percent %
Abuse of Prescription Pain Medicine	70.6%
Heroin and Meth Use	81.6%

Nonmedical Use of Pain Relievers in the Past Year among Individuals Aged 12 or Older, **by State: Percentages, Annual Averages Based on 2012 and 2013 NSDUHs**

Percentages of Persons
- 5.14 - 5.82
- 4.67 - 5.13
- 4.19 - 4.66
- 3.81 - 4.18
- 3.56 - 3.80
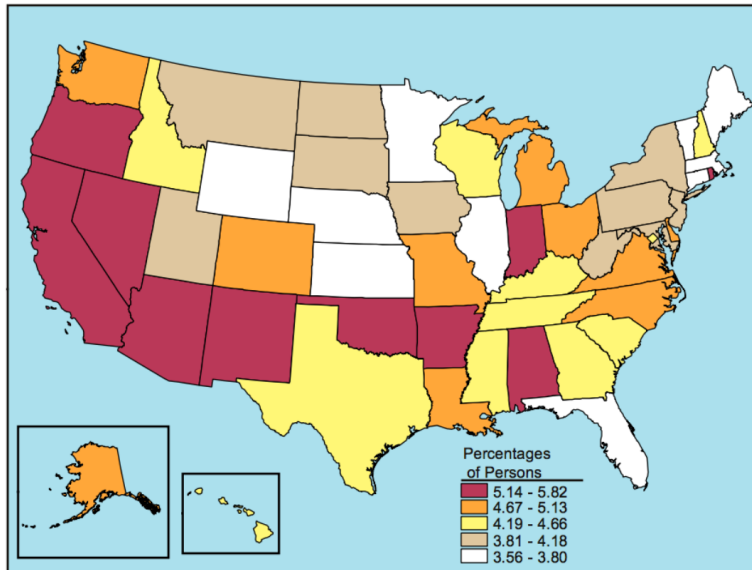
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, NSDUH, 2012 and 2013.

Prescription Drug abuse Nationally NOTE: Indiana ranks in the highest category for abuse of non medical pain relievers by individuals 12 years and older.

Meth (Methamphetamine Clandestine) Lab Seizures remediation oversight is a responsibility of the Montgomery County Health Department due to the hazardous residue that manufacturing and smoking meth leaves behind on all surfaces within a residence and vehicles. Meth Labs are identified by local law enforcement and the Meth Suppression Unit of the Indiana State Police handle the removal of all chemicals. Below are statistics provided by the Indiana State Police Meth Suppression Unit:

Meth (Methamphetamine Clandestine) Lab Seizure Incidents 2002-2014													
	Total	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Indiana	15902	732	1011	1137	1065	803	832	1104	1365	1395	1437	1726	1808	1488
Montgomery County	188	12	14	18	18	9	14	9	2	7	7	27	28	23

Ask Yourself!

1. **Have you ever felt like you should cut down on your drinking or drug use?**

2. **Have you ever felt irritated by criticism of your drinking and drug use?**

3. **Have you ever felt guilty about your drinking, drug use or your behavior during its use?**

4. **Do you ever take a drink or use drugs in the morning?**

If you answered yes to one of these questions, the possibility that you are alcohol or drug dependent is significantly increased. This may also mean that although you are not dependent on drugs or alcohol at this time, you could become dependent if your pattern of abuse continues. **If you answered yes to two of these questions,** it is very likely that you are dependent on drugs or alcohol.

If you answered yes to three or four of these questions, there is a greater than 95% chance that you are dependent on drugs or alcohol. **Please seek assistance for your drug or alcohol problem immediately [3].**

DRUG ABUSE—CONTINUED

Drug and Alcohol Abuse Additional Links

https://ncadd.org/about-addiction

http://www.cdc.gov/alcohol/

http://www.who.int/topics/alcohol_drinking/en/

Understanding Alcohol Use Disorders: http://www.apa.org/helpcenter/alcohol-disorders.aspx

http://www.webmd.com/mental-health/addiction/understanding-alcohol-abuse-basics

http://www.cdc.gov/pwud/substance-treatment.html

http://www.cdc.gov/nchs/fastats/drug-use-illegal.htm

http://www.who.int/topics/substance_abuse/en/

Indiana Division of Mental Health and Addiction (DMHA): http://www.in.gov/fssa/dmha/4521.htm

Resources Available

State Substance Abuse Agency Indiana Division of Mental Health and Addiction Family and Social Services Administration
402 West Washington Street Room W353 Indianapolis, IN 46204-2739
Phone: (317)232-7800
Email: DARMHA@fssa.in.gov
State web site address: www.in.gov/fssa/dmha/index.htm

Wabash Valley Alliance Counseling & Outpatient Services:
(765) 362-2852
1480 Darlington Avenue Crawfordsville, IN 47933
http://www.wvhmhc.org/indexd.html#

Cummins Behavioral Health Counseling & Outpatient:
(765) 361-9767
701 Englewood Dr. Crawfordsville, IN 47933
http://cumminsbhs.org/

Narcotics Anonymous & Alcoholics Anonymous:
Wabash Ave Presbyterian Church
Contact: (765) 362-1852
307 S. Washington Crawfordsville, IN 47933

Alcoholics Anonymous 24 Hour Referral Service & Treatment program & Helpline:

800-410-2560

Narcotics Anonymous 24 Hour Referral Service & Treatment program & Helpline:

800-711-6375

References:

1. http://www.drugabuse.gov/related-topics/trends-statistics

2. http://www.samhsa.gov/data/sites/default/files/NSDUH-FRR1-2014/NSDUH-FRR1-2014.htm#idtextanchor007

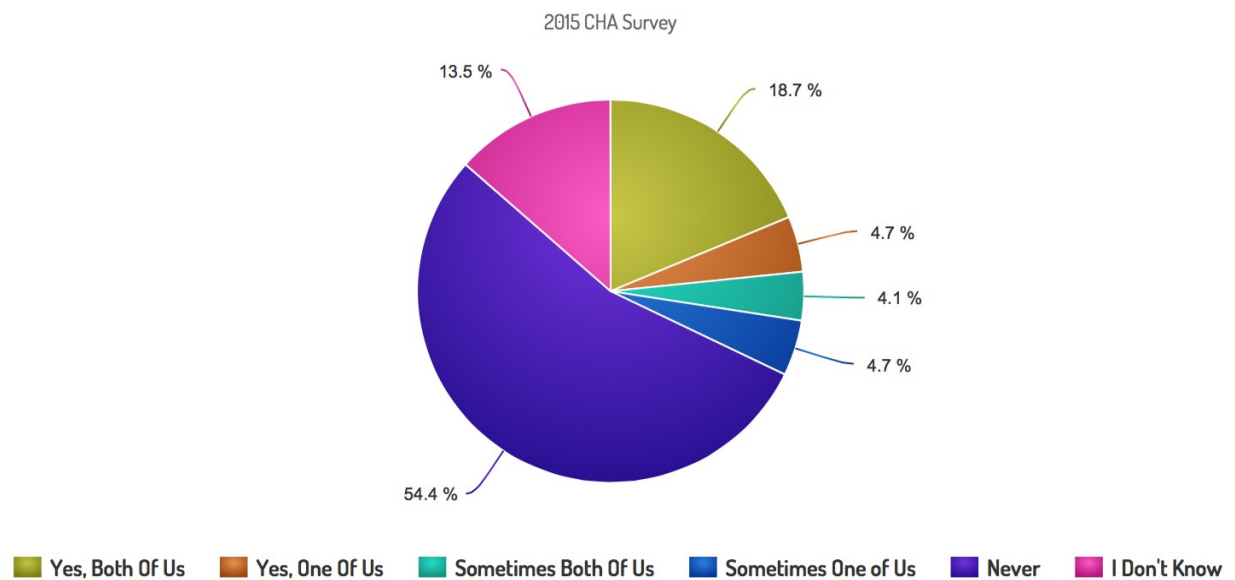3. http://www.fit.edu/caps/articles/facts.php

SEXUAL HEALTH

The Centers for Disease Control and Prevention (CDC)/Health Resources and Services Administration Advisory Committee on HIV, Viral Hepatitis, and STD Prevention and Treatment (CHAC) has developed the following definition of sexual health recommended for use in the U.S.:

> "**Sexual health is a state of well-being in relation to sexuality across the life span that involves physical, emotional, mental, social, and spiritual dimensions**. Sexual health is an intrinsic element of human health and is based on a positive, equitable, and respectful approach to sexuality, relationships, and reproduction, that is free of coercion, fear, discrimination, stigma, shame, and violence. **It includes: the ability to understand the benefits, risks, and responsibilities of sexual behavior**; the prevention and care of disease and other adverse outcomes; and the possibility of fulfilling sexual relationships. **Sexual health is impacted by socioeconomic and cultural contexts—including policies, practices, and services—that support healthy outcomes for individuals, families, and their communities [1]."**

As can be seen by the diverse and comprehensive definition of sexual health, **there are many aspects of life that must be considered when discussing sexual health practices.** Engaging in sexual activities can leave someone at risk of acquiring certain diseases and infections. These diseases and infections are called sexually transmitted diseases (STDs), or sexually transmitted infections (STIs). Both STDs and STIs are generally acquired by sexual contact.

Someone can contract an STD by having unprotected sex with a person who is infected. It is not always possible to tell if someone is infected with an STD or STI, because many cause little to no symptoms, especially for the earliest stages of infection. **In fact, the person with an STD or STI may have it without knowing it.**

BEFORE HAVING SEXUAL INTERCOURSE WITH A NEW SEXUAL PARTNER DO YOU AND/OR YOUR NEW SEXUAL PARTNER GET TESTED FOR A SEXUALLY TRANSMITTED DISEASE/SEXUALLY TRANSMITTED INFECTION?*

2015 CHA Survey

- 18.7 % — Yes, Both Of Us
- 4.7 % — Yes, One Of Us
- 4.1 % — Sometimes Both Of Us
- 4.7 % — Sometimes One of Us
- 54.4 % — Never
- 13.5 % — I Don't Know

*Percent of answers utilized in pie chart creation, as "Does not apply to me" and "wish not to answer" were also possible answers, and combined for 84.2% of all total survey responses.

SEXUAL HEALTH—CONTINUED

It is necessary to be vigilant about STD prevention. **If someone chooses to be sexually active, their best bet for STD prevention is to limit sexual partners to one, ask them about their sexual history, and get tested.** If you're not in an exclusive relationship, you can still protect yourself by learning about and consistently practicing STD prevention, such as using condoms.

Additional Links:

General Sexual Health:

http://www.cdc.gov/sexualhealth/default.html#who

https://www.nlm.nih.gov/medlineplus/sexualhealth.html

Birth Control:
http://www.cdc.gov/reproductivehealth/UnintendedPregnancy/Contraception.htm

Available Resources:

STD Testing:
Boone County Health Department:
116 West Washington Street, B201
Lebanon, IN 46052-2147
765-482-3942

Testing is free and no appointment is necessary.

Walk-in hours are Thursday's from 9-11am & 2-4pm. Testing is also available by appointment.

Lafayette Health Center - Planned Parenthood
964 Mezzanine Drive Lafayette, IN 47901-1159
765-446-8078 (By appointment only, call for details)

*Percent of answers utilized in pie chart creation, as "Does not apply to me" and "wish not to answer" were also possible answers, and combined for 61.7% of all

References:

1. Douglas, J. M., Fenton, K. A. (2013). Understanding Sexual Health and Its Role in More Effective Prevention Programs. *Public Health Rep*. Mar-Apr; 128 (Suppl 1): 1–4.

2. http://www.cdc.gov/sexualhealth/default.html#who

ACCESS TO CARE

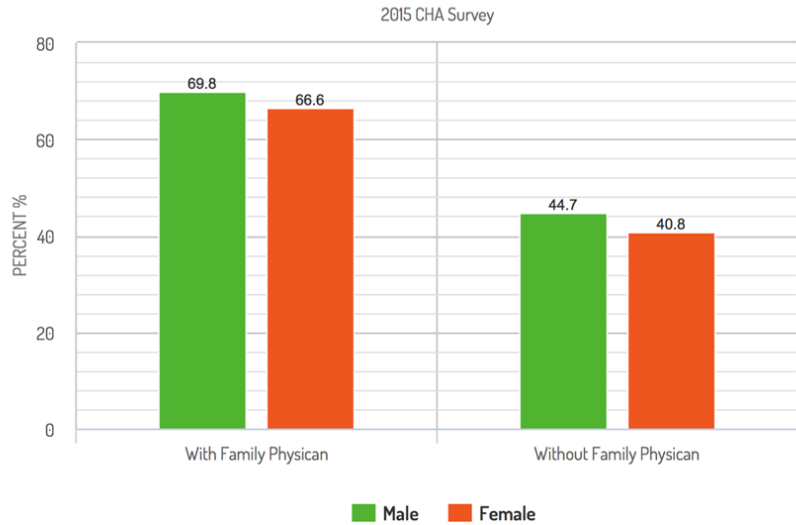**Preventative Care and Services**

Ac-

Accessibility, as indicated in this table, **Montgomery County has 1 physician for every 2,250 Montgomery County Residents.** This is a larger number of residents per physician compared to state and national averages.

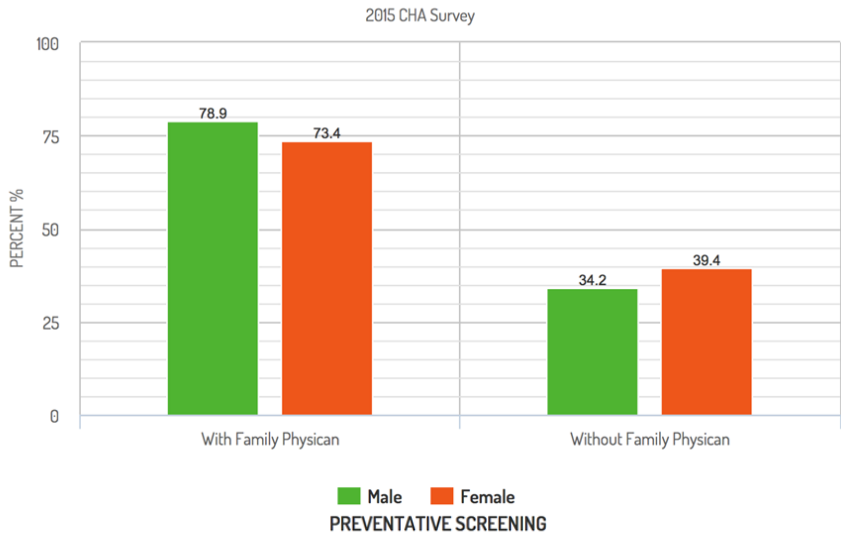| Ratio of Population to Primary Care Physicians		
Montgomery County	**Indiana**	**U.S.**
2250:1	**1518:1**	**1045:1**

Affordability of care pertains to individuals without health insurance (uninsured) or inadequate insurance (underinsured). Individuals and families that fall within those categories are less likely to seek out **preventative services** because the process is more difficult and the available providers have been less. **Based on County Health Rankings, 17% of Montgomery County residents are uninsured.**

Ultimately the easier it is to make an appointment with healthcare provider due to available space and easier it is to cover the costs of those services, the more likely an individual is to continuously seek out and receive those services for themselves and their family members.

RECIVED A FLU SHOT IN THE PAST YEAR
2015 CHA Survey

- With Family Physican: Male 69.8, Female 66.6
- Without Family Physican: Male 44.7, Female 40.8

■ Male ■ Female

HAD A CHOLESTEROL CHECK IN THE PAST YEAR
2015 CHA Survey

- With Family Physican: Male 78.9, Female 73.4
- Without Family Physican: Male 34.2, Female 39.4

■ Male ■ Female

PREVENTATIVE SCREENING
2015 CHA Survey

- Male (Over 50)-Digital Rectal Exam*: With Family Physician 41.8, Without Family Physician 12.5
- Female-Pap Smear: With Family Physician 45.1, Without Family Physician 42.3

■ With Family Physician ■ Without Family Physician
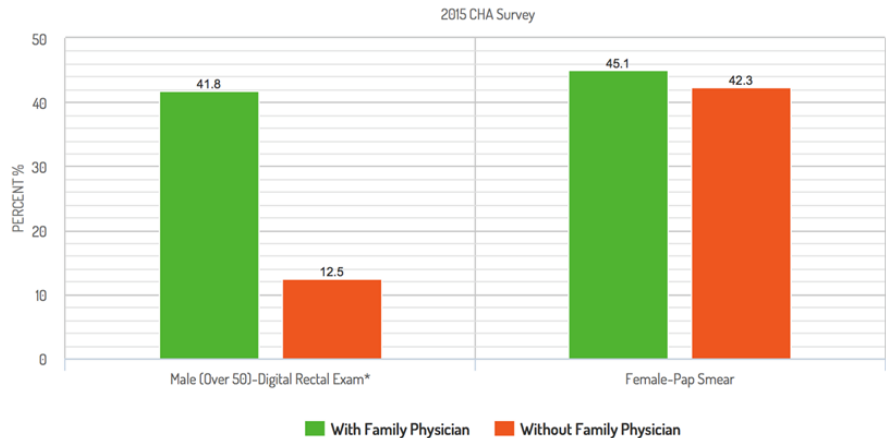
QUALITY OF CARE

According to the 2011 Report to Congress: National Strategy for Quality Improvement in Health Care, a report by the U.S. Department of Health and Human Services, "The Affordable Care Act seeks to increase access to high-quality, affordable health care for all Americans." This report **identified three primary aims to be used to guide and assess all local, state, and national efforts to improve of Quality of Care** [1].

Better Care: Improve the overall quality, by making healthcare more patient-centered, reliable, accessible, and safe.

Healthy People/Healthy Communities: Improve the health of the U.S. population by supporting proven interventions to address behavioral, social and, environmental determinants of health in addition to delivering higher-quality care.

Affordable Care: Reduce the cost of quality health care for individuals, families, employers, and government

Rate of Preventable Hospital Stays*		
Montgomery County	**Indiana**	**U.S.**
63	**70**	**41 (90th percentile)**

A measurement of Quality of Care for the purpose of the County Health Rankings is based on Preventable Hospital Stays. *__Preventable Hospital Stays is defined as the hospital discharge rate for ambulatory care-sensitive conditions per 1,000 fee-for-service Medicare enrollees.__

Ambulatory care-sensitive conditions include: convulsions, chronic obstructive pulmonary disease, bacterial pneumonia, asthma, congestive heart failure, hypertension, angina, cellulitis, diabetes, gastroenteritis, kidney/urinary infection, and dehydration. This measure is age-adjusted.
The rate of preventable hospital stays is used to assess the effectiveness and accessibility of primary healthcare.

Additional Links

CDC Access to Health Care: http://www.cdc.gov/nchs/fastats/access-to-health-care.htm

WHO Right to Health: http://www.cdc.gov/nchs/fastats/access-to-health-care.htm

Resources Available

Healthy Indiana Plan: http://www.in.gov/fssa/hip/

Montgomery County Free Clinic: 816 Mill St. Crawfordsville, IN 47933 www.mcfreeclinic.org

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References
Access to Care

1. http://www.countyhealthrankings.org/app/indiana/2015/measure/factors/85/map
2. http://www.countyhealthrankings.org/app/indiana/2015/measure/factors/4/map

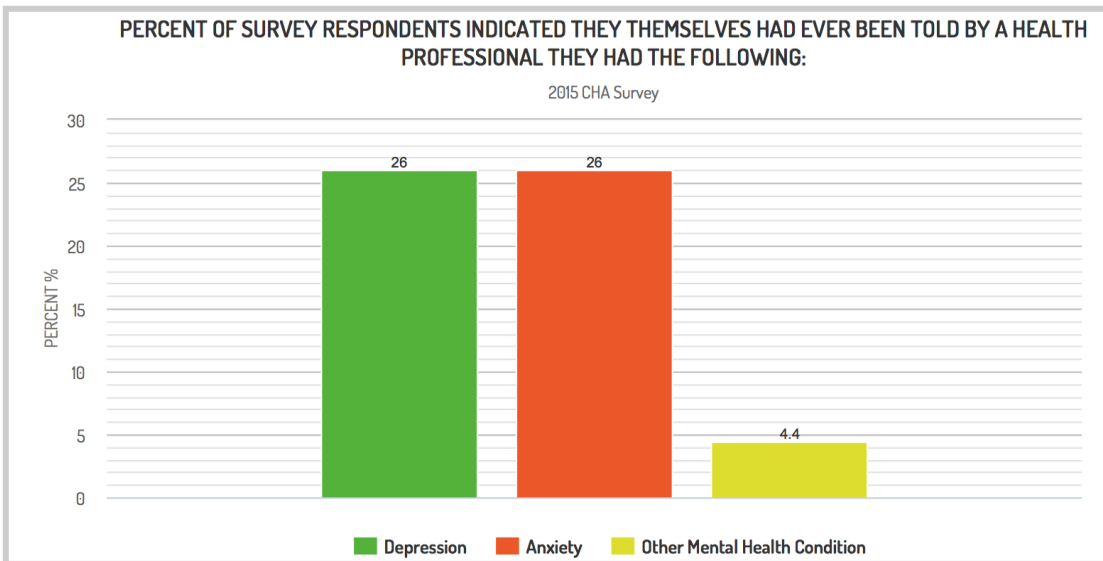**Quality of Care**

1. 2011 Report to Congress: National Strategy for Quality Improvement in Health Care, Executive Summary. http://www.ahrq.gov/workingforquality/nqs/nqs2011annlrpt.htm
2. http://www.countyhealthrankings.org/app/indiana/2015/measure/factors/5/map
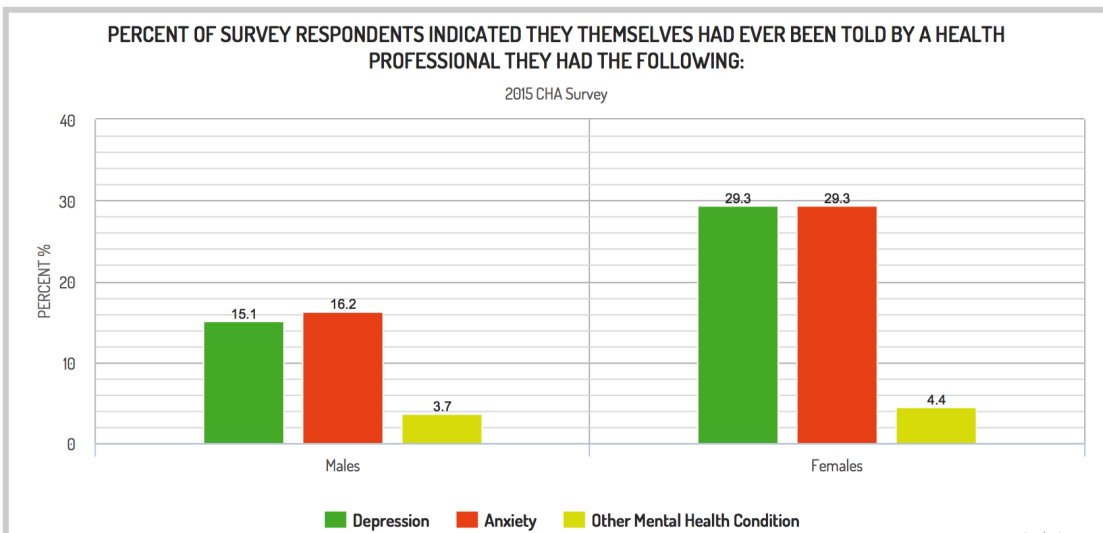
MENTAL HEALTH

According to the Center for Disease Control and Prevention **Depression is the most common type of mental illness.** It is estimated to affect more than 26% of U.S. Adults, and by 2020 depression will be the second leading cause of disability throughout the entire world [2].

Evidence has shown that depressive disorders and other mental disorders strongly correlate to the occurrence and treatment effectiveness of chronic diseases including diabetes, cancer, cardiovascular disease, asthma, and obesity. Mental disorders have also been shown to affect many health risk behaviors like physical inactivity, smoking, excessive drinking, and insufficient sleep [2].
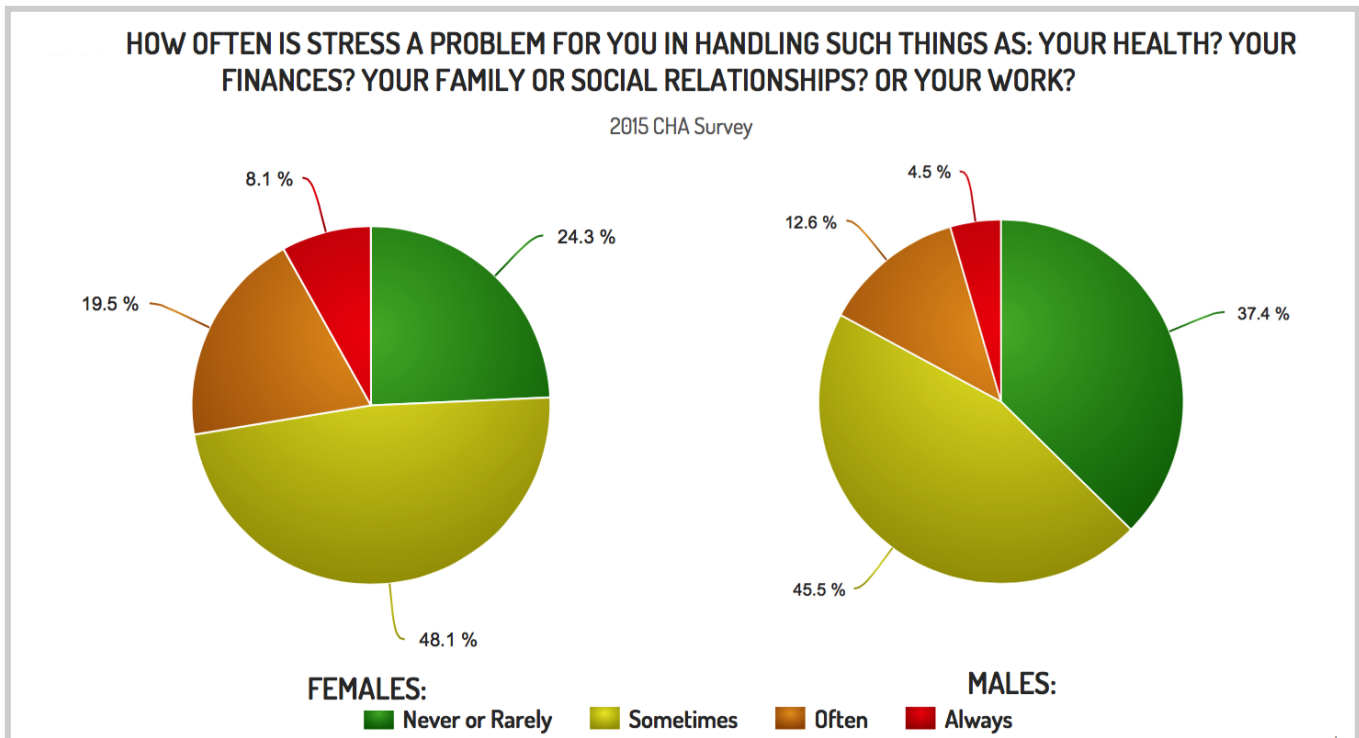

PERCENT OF SURVEY RESPONDENTS INDICATED THEY THEMSELVES HAD EVER BEEN TOLD BY A HEALTH PROFESSIONAL THEY HAD THE FOLLOWING:
2015 CHA Survey

According to the World Health Organization mental health is not merely the absence of mental illness, mental health is defined as, **"a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community"** [1].

PERCENT OF SURVEY RESPONDENTS INDICATED THEY THEMSELVES HAD EVER BEEN TOLD BY A HEALTH PROFESSIONAL THEY HAD THE FOLLOWING:
2015 CHA Survey

According to National Health and Nutrition Examination Survey (NHANES) Depression affects a higher percentage of females than males [3]. **This was consistent with Montgomery County Survey Results. The table below shows the breakdown of the responses by male and female**

MENTAL HEALTH—CONTINUED

HOW OFTEN IS STRESS A PROBLEM FOR YOU IN HANDLING SUCH THINGS AS: YOUR HEALTH? YOUR FINANCES? YOUR FAMILY OR SOCIAL RELATIONSHIPS? OR YOUR WORK?

2015 CHA Survey

FEMALES:
- 24.3 %
- 48.1 %
- 19.5 %
- 8.1 %

MALES:
- 37.4 %
- 45.5 %
- 12.6 %
- 4.5 %

Legend: ■ Never or Rarely ■ Sometimes ■ Often ■ Always

Additional Links:
http://www.cdc.gov/mentalhealth/
http://www.who.int/mental_health/en/

National Alliance on Mental Illness: https://www.nami.org/Learn-More/Mental-Health-Conditions

Substance Abuse and Mental Health Services Administration:
http://media.samhsa.gov/mentalhealth/understanding_mentalillness.aspx

Resources Available:
State Substance Abuse Agency Indiana Division of Mental Health and Addiction Family and Social Services Administration
402 West Washington Street Room W353 Indianapolis, IN 46204-2739
Phone: (317)232-7800
Email: DARMHA@fssa.in.gov
State web site address: www.in.gov/fssa/dmha/index.htm

Wabash Valley Alliance Counseling & Outpatient Services: (765) 362-2852
1480 Darlington Avenue Crawfordsville, IN 47933
http://www.wvhmhc.org/indexd.html#

Cummins Behavioral Health Counseling & Outpatient: (765) 361-9767
701 Englewood Dr. Crawfordsville, IN 47933
http://cumminsbhs.org/

References:
1. World Health Organization. *Strengthening Mental Health Promotion*. Geneva, World Health Organization (Fact sheet no. 220), 2001.
2. http://www.cdc.gov/mentalhealth/basics.htm

MATERNAL AND REPRODUCTIVE HEALTH

Maternal and child health starts long before the baby is conceived. A mother's health is important in determining the baby's health. **Prenatal care is shown to be an essential and effective part of healthy pregnancies allowing for problems to be addressed as they arise**. Ideally a full-term (greater than 37 weeks) pregnancy will result without complications or unnecessary interventions.

Chronic health conditions among pregnant women, such as high blood pressure, diabetes, and heart disease put mothers at a higher risk of adverse outcomes as do unhealthy habits. 2013 Indian Natality Report-Key Statistics
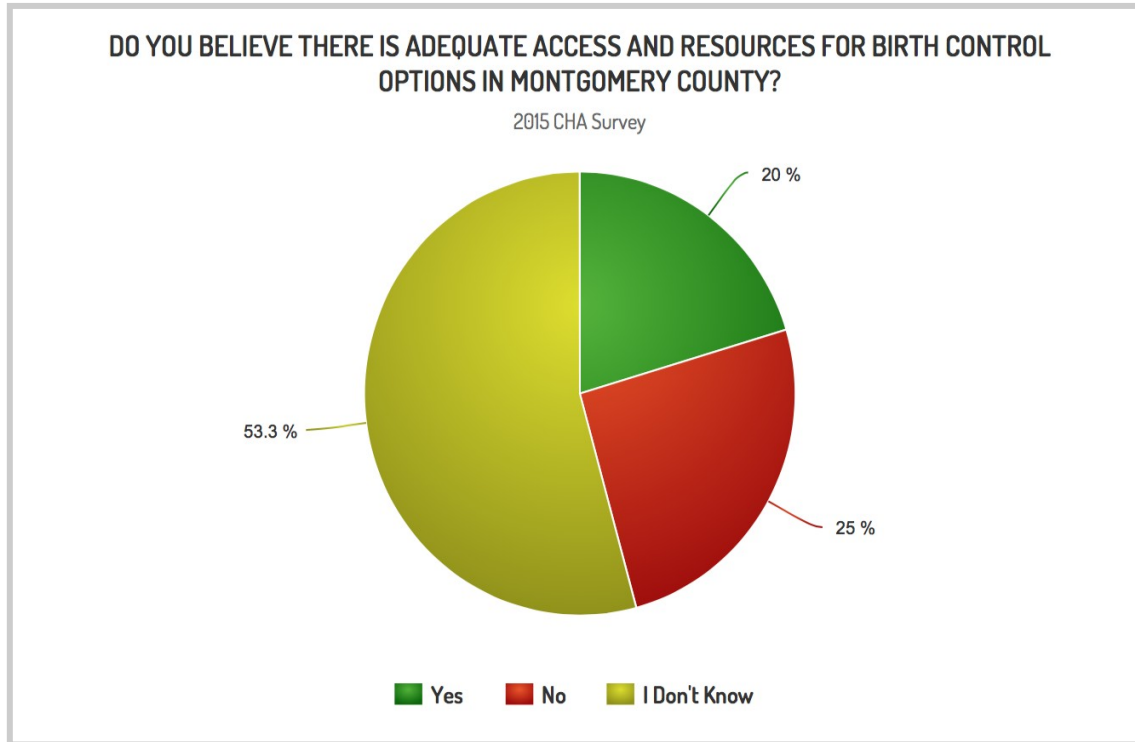
The **Indiana Natality Report** for 2013 a total of **463 live births** to mothers who are residents of Montgomery County in 2013.

Percent of Women Who Smoked During Pregnancy		Pre-Term Births	
Montgomery County	Indiana	Montgomery County	Indiana
23.8%	15.7%	6.9%	7.9%
Low-Birth Weight Births		Percent of Mothers Receiving Adequate Pre-Natal Care Beginning in the First Trimester	
Montgomery County	Indiana	Montgomery County	Indiana
8.4%	9.6%	69.3%	67.4%

CDC Fast Facts [1]:

- In the United States, about 700 women die of pregnancy-related causes each year, and 65,000 have serious health complications.

- **Many pregnancy-related deaths and complications are caused by chronic diseases and conditions, such as diabetes and obesity**.

- Women who take steps to prevent and control these chronic conditions before and during pregnancy have the best chance for a healthy outcome.

- CDC supports states in tracking adverse pregnancy outcomes. Data from these efforts are used to guide pregnancy care.

DO YOU BELIEVE THERE IS ADEQUATE ACCESS AND RESOURCES FOR BIRTH CONTROL OPTIONS IN MONTGOMERY COUNTY?

2015 CHA Survey

20 %

25 %

53.3 %

■ Yes   ■ No   ■ I Don't Know

Additional Links:
http://www.cdc.gov/reproductivehealth/maternalinfanthealth/
http://www.who.int/topics/maternal_health/en/
http://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health

Prenatal Care Fact Sheet: http://womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html

Resource for Parenting: Just in Time Parenting www.extension.org/parenting
-This is a newsletter parents can receive in their inbox once a month. It has information for pre-natal up to 5 years old. Interested people can log on and put in their expected due date and then receive a monthly e-mail based on the babies age.

Birth Control: Contact your family physician or wellness provider

References:
1. http://www.cdc.gov/reproductivehealth/maternalinfanthealth/index.html]

2.Epidemiology Resource Center, Data Analysis [http://www.in.gov/isdh/19095.htm].

PHYSICAL ENVIRONMENT

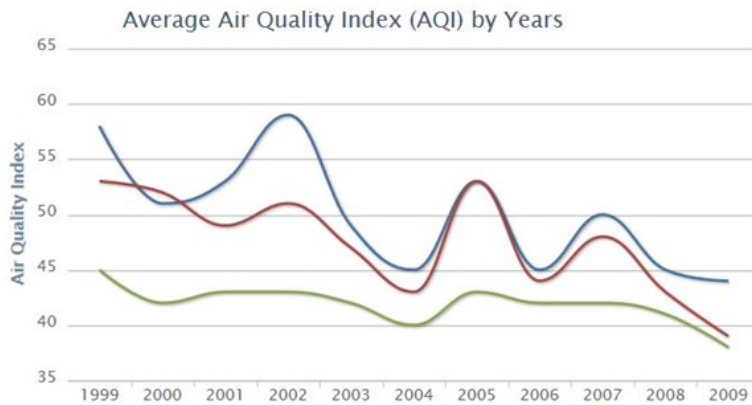## WATER QUALITY

Little thought is given to the necessity of safe and clean water for drinking and cooking. **Currently there are 11 monitored water systems providing drinking water to 21,428 Montgomery County residents.** The Safe Drinking Water Act was passed by Congress in 1974 to protect public health by regulating the nation's public drinking water supply and requires many actions to protect drinking water and its sources. **Montgomery County's primary water service provider is Indiana American Water (IAW), which provides drinking water to just over a population of 16,000.**

Residents utilizing private wells as a water source aren't provided the same types of safe guards. There are regulations that provide protection such as required depth of a well and distance from a septic field for those who are not on a community sewer system. **Private well owners are encouraged to have their well water tested to ensure their water is free of contaminants.** For systems installed prior to when these regulations were established, the property owner may wish to test more frequently or contact a well driller that can address any questions or concerns. Water bacterial testing services are available at the Montgomery County Health Department and many other private labs.

AIR QUALITY

Air quality in Indiana is monitored and regulated by the Air Quality divisions of the Environmental Protection Agency (EPA) and Office of Air Quality at the Indiana Department of Environmental Management (IDEM**). These agencies are responsible for regulation, compliance, compliance assistance, and enforcement of established air emission standards.** Air quality indices (AQI) are numbers used by government agencies to characterize the quality of the air at a given location. The United States Environmental Protection Agency (EPA) uses the following AQI**. Montgomery County has ranked in the "good" Air Quality Index Level of Health Concern range since 2006 im-**

Air Quality Index (AQI), #59

Average Air Quality Index (AQI) by Years

Montgomery County is represented by the BLUE line
Indiana is represented by the RED line
US is represented by the GREEN line

Air Quality Index Levels of Health Concern	Numerical Value	Meaning
Good	0 to 50	Air quality is considered satisfactory, and air pollution poses little or no risk
Moderate	51 to 100	Air quality is acceptable; however, for some pollutants there may be a moderate health concern for a very small number of people who are unusually sensitive to air pollution.
Unhealthy for Sensitive Groups	101 to 150	Members of sensitive groups may experience health effects. The general public is not likely to be affected.
Unhealthy	151 to 200	Everyone may begin to experience health effects; members of sensitive groups may experience more serious health effects.
Very Unhealthy	201 to 300	Health warnings of emergency conditions. The entire population is more likely to be affected.
Hazardous	301 to 500	Health alert: everyone may experience more serious health effects

References:
1. http://www.usa.com/montgomery-county-in-air-quality.htm

Additional Links:
Air Quality in Indiana: http://www.in.gov/idem/airquality/
Indiana Air Quality Index Information: http://idem.tx.sutron.com/
Water Quality in Indiana: http://in.gov/idem/cleanwater/
Environmental Protection Agency: http://www.epa.gov/waterdata/national-water-quality-inventory-report-congress
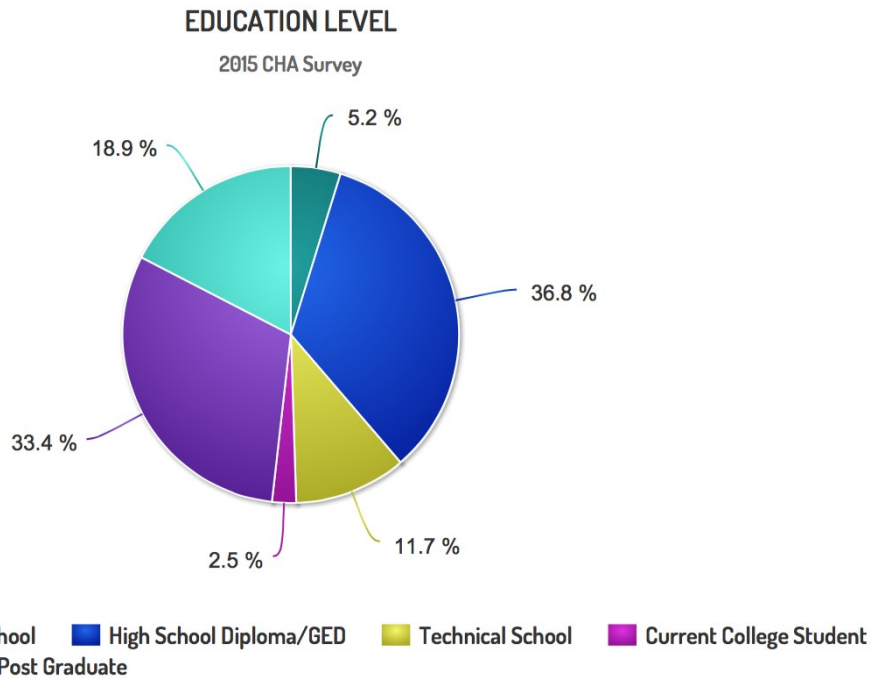
Resources:
Montgomery County Health Department
110 W. South Blvd. Crawfordsville, IN 47933

SOCIAL AND ECONOMIC FACTORS

EDUCATION AND EMPLOYMENT

According to the CDC, "Health disparities are also related to inequities in education. Dropping out of school is associated with multiple social and health problems. **Overall, individuals with less education are more likely to experience a number of health risks, such as obesity, substance abuse, and intentional and unintentional injury, compared with individuals with more education.** Higher levels of education are associated with a longer life and an increased likelihood of obtaining or understanding basic health information and services needed to make appropriate health decisions"[1].

2015 Community Health Assessment Survey

EDUCATION LEVEL
2015 CHA Survey

- 5.2 %
- 18.9 %
- 36.8 %
- 33.4 %
- 2.5 %
- 11.7 %

■ Did Not Graduate High School ■ High School Diploma/GED ■ Technical School ■ Current College Student
■ College Graduate ■ Post Graduate

Education Level-Census Quick Facts 2009-2013 [2]		
	Montgomery County	**Indiana**
High School Graduate or higher, percent of	87.8%	87.2%
Bachelor's degree or higher, percent of per-	17.8%	23.2%

Additional Links

Health Disparities in Education and Income: http://www.cdc.gov/minorityhealth/CHDIR/2011/FactSheets/EducationIncome.pdf
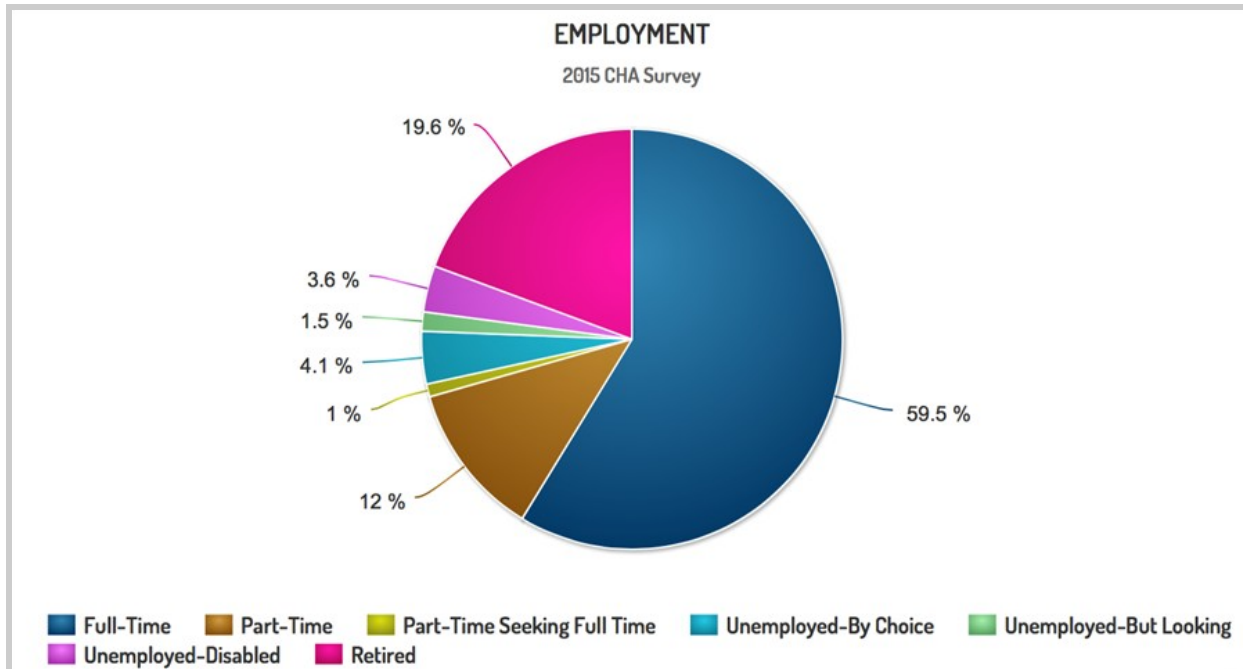
Higher education and income levels keys to better health: http://www.cdc.gov/media/releases/2012/p0516_higher_education.html

United Way: http://www.uwsv.org/articles/education-income-health

HOUSEHOLD INCOME LEVEL VS. EDUCATION LEVEL*
2015 CHA Survey

	<25,000	25,001 to 40,000	40,001 to 60,000	60,001 to 75,000	>75,000
High School Graduate	19.2	15.3	25.3	15.3	24.8
College Graduate	6.6	9.5	18.6	19.8	45.6

*Percent of survey respondents who answer they themselves and/or a spouse (if applicable) had the highest education level completed of high school or college.

EMPLOYMENT
2015 CHA Survey

- Full-Time — 59.5 %
- Part-Time — 12 %
- Part-Time Seeking Full Time — 1 %
- Unemployed-By Choice — 4.1 %
- Unemployed-But Looking — 1.5 %
- Unemployed-Disabled — 3.6 %
- Retired — 19.6 %

Underemployment includes those workers that are highly skilled but working in low paying jobs, workers that are highly skilled but work in low skill jobs, and part-time workers that would prefer to be full-time.

Montgomery County	Percent
Underemployment	12.5%

References:
http://www.cdc.gov/healthyyouth/disparities/
http://quickfacts.census.gov/qfd/states/18/18107.html

POVERTY AND SOCIAL HEALTH

Adults and children who live in single-parent households are at an increased risk for negative health outcomes such as mental health problems (including substance abuse, depression, and suicide). Also, adults and children living in single-parent households have higher rates of unhealthy behaviors, such as smoking and excessive alcohol use [1].

Self-reporting of individual health has been shown to be worse among lone parents than for parents living as couples. Risk of mortality is also higher among lone parents. Additionally, **children in single-parent households are at increased risk of severe disability and all causes of death then children in two-parent households** [1].

Children in Poverty	
Montgomery County	**19%**
Indiana	**22%**

Children In Single Parent Households	
Montgomery County	**28%**
Indiana	**33%**

"Children in poverty" is the percentage of children under 18 years old living in households where family income is lower than the poverty threshold.

Living in poverty can result in higher risk of death, prevalence of negative health conditions, disease, depression, intimate partner violence, and poor health behaviors.

While negative health effects resulting from poverty are present at all ages, **children in poverty experience greater disability and death than adults due to increased risk of accidental injury and lack of health care**

According to County Health Rankings:

> *"(Social) Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations. "*

Poor family support, low amount of contact with others, and decreased participation in community life are associated with increased disability due to ill health and even early death.

Social support networks have been identified as strong predictors of health behaviors. Research **suggests individuals without a strong social network are less likely to make healthy lifestyle choices** than individuals with a strong social network [2].

Social Associations Per 10,000 Population	
Montgomery County	14.4
Indiana	12.7

"Social associations" is defined as the number of associations per 10,000 population.

CHILD CARE

There is a lot of research that connects high-quality early childhood experiences to children's school readiness and later life successes. Children with high quality child-care from a young age enter school with higher levels of math, language, and social skills [3].

Child Care Services ranked highest for Personal Need in the Youth Issues & Services section. It received 58% more responses than the second highest ranked personal need in the same category.

2015 Community Health Assessment Survey:

Top Four Child Care Problems (within the past year)	Top Four Child Care Needs	Top Four Currently Used Child Care
Cost of Care (19.6%)	After School Care (29.7%)	Care by family member(s) including older siblings (25.5%)
Finding care for sick child (16.6%)	Full Time Care-5 days a week (24.7%)	Spouse/Partner (17.1%)
Finding Temporary Care (12.6%)	Sick Child Care (13.7%)	After School Care (13.6%)
Scheduling care to match work schedule (11.8%)	Partial Week Care-2 or 3 times a week (12.9%)	Faith Based Child Care (13.3%)

HOUSING

Having a state of good health depends on having a home that is safe and free from physical hazards**. Satisfactory housing protects individuals and families from harmful exposures and provides them with a sense of privacy, security, stability and control.** Having a safe and stable house can impact the quality of health for those residing within. In contrast, **poor quality and inadequate housing can contribute to health problems** for example communicable and chronic diseases, injuries, and even poor childhood development [4].

According to County Health Rankings, "Severe Housing Problems" is defined as the percentage of all households with at least 1 or more of the following housing problems:

1. housing unit lacks complete kitchen facilities;
2. housing unit lacks complete plumbing facilities;
3. household is severely overcrowded*; and
4. household is severely cost burdened**.

*Severe overcrowding is defined as more than 1.5 persons per room.
**Severe cost burden is defined as monthly housing costs (including utilities) that exceed 50% of

Severe Housing Problems	
Montgomery County	10%
Indiana	14%

CHILDCARE AND HOUSING—CONTINUED

Additional Links

Child Care

http://childcareindiana.org/

Find Child Care: https://orm.naccrraware.net/orm/ormLogin.action?uid=SOXODVFVF6EL39Q

Choosing Childcare

> http://kidshealth.org/parent/positive/family/child_care.html

> https://www.healthychildren.org/English/family-life/work-play/Pages/Choosing-a-Childcare-Center.aspx

Information for Early Childhood Educators
 http://www.cdc.gov/ncbddd/actearly/ccp/index.html
CDC Family Health: http://www.cdc.gov/family/

Housing:

Indiana Housing & Community Development Authority: http://www.in.gov/ihcda/

Resources Available:

Child Care:

Child Care and Development Fund (CCDF): Care Assistance for low-income families
http://www.in.gov/fssa/carefinder/3900.htm

Locate Licensed Child Care in Montgomery County: https://secure.in.gov/apps/fssa/carefinder/showSearchResults.html

Resource for Parenting: Just in Time Parenting www.extension.org/parenting

> -This is a newsletter parents can receive in their inbox once a month. It has information for pre-natal up to 5 years old. Interested people can log on and put in their expected due date and then receive a monthly e-mail based on the babies age.

References:

> http://www.countyhealthrankings.org/app/indiana/2015/measure/factors/82/description

> http://www.countyhealthrankings.org/app/indiana/2015/measure/factors/140/description

> http://www.childrenscabinet.org/child-care-resources/for-parents/why-is-quality-child-care-important/].

> http://www.countyhealthrankings.org/app/indiana/2015/measure/factors/136/description

SENIOR SERVICES AND CONCERNS

As individuals get older, changes occur in their body as a normal aspect of aging. Physical changes can occur in nearly every organ and often can affect the health and lifestyle of a person. **Some diseases and conditions become more prominent in the elderly, but not all changes affect a person physically.** Many psychological and social issues can play a part in the mental health of older adults.

Many governmental and health organizations accept the definition of elderly as individuals over the age of 60 or 65.

Over 60- *Top Personal Needs*	%
Reliable Source for Senior Transportation	18.9
Balance Classes for Senior	18.9
Home Healthcare Services	17.0
Community Senior Center	15.1
Assisted Living Facilities	11.3

RESOURCE

Matter of Balance-A Purdue Extension class managing concerns about falls. A fall prevention class with muscle strengthening exercises to increase balance and prevent falls.
For Information contact : Debbie Threlkeld at 765-364-6363

Over 60- *Top Personal Needs*	%
Dental Care	31.1
Chronic Disease Management (Heart Disease, Diabetes, etc.)	24.2
Paying for Medication	20.5
Reliable Source of Transportation to Healthcare	11.7

RESOURCE

Area IV Agency on Aging & Community Action:
800-382-7556
660 N. 36 st. Lafayette, IN 47905

Percent of over 60 year olds surveyed who said they had been told by a health professional that they had any of the following:			
Answer Options	% of Over 60 Surveyed	Answer Options	% of Over 60 Surveyed
High Cholesterol	55.30%	Colorectal Cancer	1.40%
High Blood Pressure/Hypertension	60.60%	Lung or Bronchus Cancer	0.60%
Heart Problems	18.10%	Prostate Cancer	3.60%
Suffered a Heart Attack	4.40%	Oral Cancer	0.80%
Diabetes Type 1 or Type 2	18.90%	Other Cancer	3.60%
Chronic Lung Disease	5.60%	Liver Disease	1.40%
Emphysema or Chronic Bronchitis	5.80%	Arthritis or Rheumatism	40.00%
Asthma	10.00%	Depression	20.30%
Suffered a Stroke	5.60%	Anxiety	16.90%
Skin Cancer	16.10%	Mental Health Condition	2.50%
Breast Cancer	5.30%	Scoliosis/osteoporosis	8.90%
Cervical Cancer	0.80%	Low bone density	15.00%
		Multiple Sclerosis or MS	0.00%

Additional Links:

CDC Healthy Aging:
http://www.cdc.gov/aging/index.html

National Institutes of Health:
www.nihseniorhealth.gov

Senior Health Center:
http://www.medicinenet.com/senior_health/focus.htm

Alzheimer's Care Coalition:
http://www.alzheimerscarecoalition.org/

INShape Indiana: http://www.inshapeindiana.org/209.htm#Montgomery

Resources:

Athena Sport & Fitness:
http://www.athenafitness.net/
Contact: (765) 359-1126
Location: 200 E College St. Crawfordsville, IN 47933

Crawfordsville Parks & Recreation:
http://www.crawfordsville.net/department/index.php?structureid=13
Contact: (765) 364-5175
Location: 922 E. South Blvd. Crawfordsville, IN 47933

TEEN ISSUES AND CONCERNS

Priority health risk behaviors are behaviors that significantly contribute to the leading causes of death, disability, and social problems among youth and adults. These behaviors are usually established at younger ages. These behaviors have been monitored in youths since 1990 via the Youth Risk Behavior Surveillance System [1].

Health Risk Behaviors include:

- Behaviors that contribute to unintentional injuries and violence.
- Sexual behaviors that contribute to unintended pregnancy and sexually transmitted infections, including HIV infection.
- Alcohol and other drug use.
- Tobacco use.
- Unhealthy dietary behaviors.
- Inadequate physical activity.

Teen Tobacco Use

Teen Tobacco use in the form of smoking has decreased substantially in previous years, with 2013 being the lowest percentage of cigarette smoking for High School students in over two decades. **Interestingly, although use of combustible tobacco has declined, e-cigarette use has increased dramatically in recent years.** According to the CDC Office on Smoking and Health "From 2011 to 2014, past 30-day use of e-cigarettes **increased nine-fold** for high school students (1.5% to 13.4%) and **more than six-fold** for middle school students (0.6% to 3.9%)."

Source: http://www.cdc.gov/media/releases/2014/p0612-YRBS.html
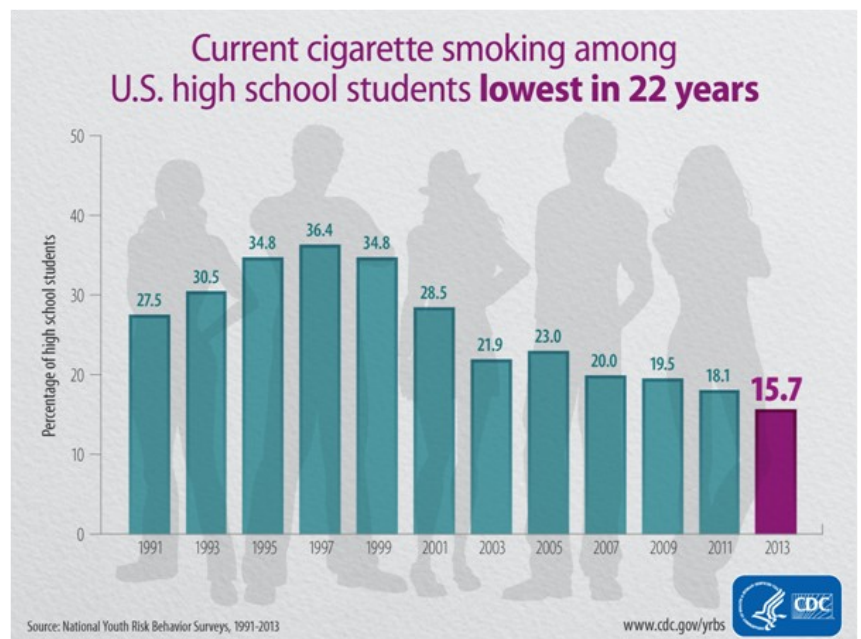
2015 Community Health Assessment Survey

Top Two Personal Needs-Youth Issues & Services	
Topic	**Percent of All Personal Needs**
Child Care Services	51.3%
Mental Healthcare	32.5%

Percent Said "Yes " these are Community Problems	
Topic	**Percent of All Surveyed**
Underage Drinking	69.8%
Unplanned Teen Pregnancy	66.4%

Teen Sexual Risk Behaviors Key Facts [2]

In 2013, **nearly half (46.8%) of American high school students surveyed had ever had sexual intercourse**, and 34% were currently sexually active, meaning having sexual intercourse with at least 1 person during the 3 months before the survey.

Only 59.1% used a condom during their last sexual intercourse among students who were currently sexual active. This is a decrease from 63% in 2003.

Of sexually active high school students **13.7% did not use any method to prevent pregnancy** during their most recent sexual intercourse.

According to the Indiana Youth Institute Indiana Teen Birth Rate per 1,000 females ages 15-19 declined from 42.3 in 2009 to 30.3 in 2013. However, the **Teen Birth Rate in Montgomery County is higher then both Indiana and National averages** according to the 2015 County Health Rankings. See table below [3].

Teen Birth Rate* (Births to teens/Females ages 15-19 x 1000)*		
Montgomery County	Indiana Average	U.S.
46	39 (Ranges from 13-63)	Top U.S. performers: 20 (90th Percentile)

*Note the County Health Ranking rate is different than the Indiana Youth Institute's (IYI) teen birth rate as the equation used is different. IYI rates should be compared to other IYI rates and not directly compared to County Health Rankings rates, and vice versa.

Teen Illicit Drug Use and Abuse

Illicit Drug Use in the Past Month among Youths Aged 12 to 17, **by State: Percentages, Annual Averages Based on 2012 and 2013 NSDUHs**
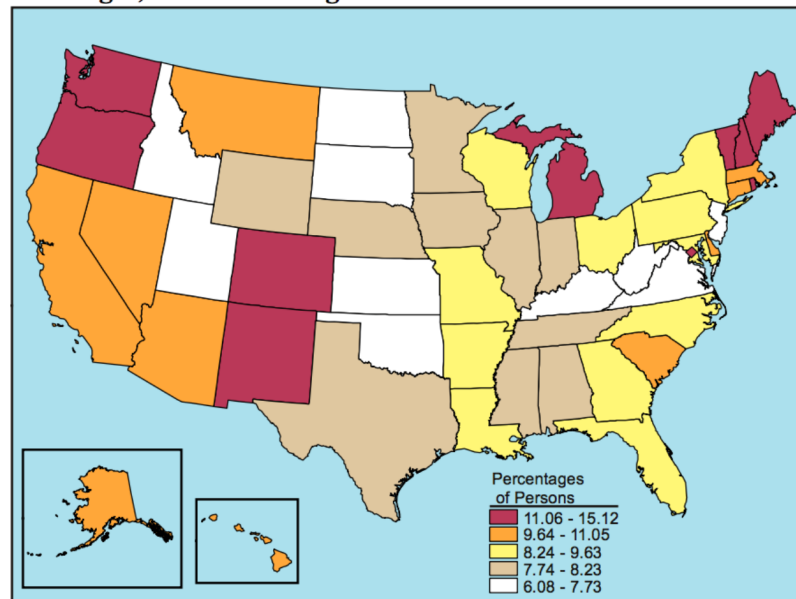
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, NSDUH, 2012 and 2013.

TEEN ISSUES AND CONCERNS—CONTINUED

Additional Links:

http://www.cdc.gov/std/stats/by-age/15-24-all-STDs/state/2013/IN13.pdf

CDC Adolescent and School Health: http://www.cdc.gov/HealthyYouth/

Teen Health: http://kidshealth.org/teen/

Medline Plus: https://www.nlm.nih.gov/medlineplus/teenhealth.html

Reportable Teen STD Facts: http://www.cdc.gov/std/stats/by-age/15-24-all-STDs/state/2013/IN13.pdf

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Available Resources

Montgomery County Youth Service Bureau
209 East Pike Street
Crawfordsville, IN 47933
765-362-0694
www.mcysb.org

Resource for Parenting:
Just in Time Parenting www.extension.org/parenting

 -This is a newsletter parents can receive in their inbox once a month. It has information for pre-natal up
 to 5 years old. Interested people can log on and put in their expected due date and then receive a
 monthly e-mail based on the babies age.

Have a Healthy Baby class: Purdue Extension offers a class for pregnant teens through the school they attend.
It's all about proper nutrition to grow the baby. For more information contact: 765-364-6363

http://extension.purdue.edu/Montgomery

References

 http://www.cdc.gov/healthyyouth/data/yrbs/overview.htm

 http://www.cdc.gov/healthyyouth/data/yrbs/pdf/trends/us_sexual_trend_yrbs.pdf

 http://www.iyi.org/

 http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/states/in.html

 http://www.samhsa.gov/data/sites/default/files/NSDUHStateEst2012-2013-p1/Maps/NSDUHsaeMaps2013.pdf

parent tips

We can!
Ways to Enhance Children's Activity & Nutrition

Knowing What Your Weight Means

It's important to be at a healthy weight. Body Mass Index—or BMI—and waist size are two numbers that can help you decide if your weight is healthy, or if you need to make some changes. This tip sheet explains how to find both and what they mean.

Body Mass Index (BMI)

BMI is a measure of how much you weigh compared to how tall you are. Adults can use the chart below to check their BMI. However, children's BMIs are also based on their age and gender. To find your child's BMI—and learn what it means for their health—use the U.S. Centers for Disease Control and Prevention's calculator at http://apps.nccd.cdc.gov/dnpabmi/.

For Adults — Find Your BMI in the Chart on the Reverse Side

- See an example of someone who has a BMI of 24 on the chart.
- Find **your** height on the left side of the table.
- Follow that row across until you come to your weight. If your weight is between two numbers, choose the smaller number.
- Then follow that column straight down to find your BMI.

Write your BMI here: _____

What does your BMI mean?

- **BMI of 19 to 24 means you are a healthy weight.** Make it your goal to stay at that way.
- **BMI of 25 to 29 means you are overweight.** Avoid gaining more weight. You may need to lose weight. Check with your doctor.
- **BMI of 30 or higher means you are obese.** You probably need to lose weight. Lose weight slowly—about 1 to 2 pounds a week. Talk to your doctor about the best ways to lose weight.

Waist Measurement

Waist measurement is another way to see if you are at a healthy weight. Your waist measurement is a sign of how much fat you have around your waist. The more "belly" fat you have, the higher your risk for getting heart disease, type 2 diabetes (high blood sugar), or other illnesses.

How to Measure Your Waist

- Place a tape measure around your bare belly, just above your hip bones.
- Be sure the tape is snug, but does not push in your skin.
- Be sure the tape is level all the way around you.
- Breathe out normally and measure your waist.

Write your waist measurement here: _____

What Does Your Waist Measurement Mean?

- **For men,** a waist measurement bigger than 40 inches means a higher risk for heart disease, type 2 diabetes (high blood sugar), or other illnesses.
- **For women,** a waist measurement bigger than 35 inches means a higher risk for heart disease, type 2 diabetes (high blood sugar), or other illnesses.

Body Mass Index (BMI) Table

Step 1:
Find your height in the left column

Step 2:
Follow the row across until you come to your weight

Step 3:
Your BMI is at the bottom of the column under your height

Height	Weight (in pounds)																
4'10"	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167
4'11"	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173
5'0"	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179
5'1"	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185
5'2"	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191
5'3"	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197
5'4"	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204
5'5"	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210
5'6"	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216
5'7"	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223
5'8"	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230
5'9"	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236
5'10"	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243
5'11"	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250
6'0"	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258
6'1"	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265
6'2"	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272
6'3"	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279
6'4"	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287
BMI	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
	Healthy Weight						**Overweight**					**Obese**					