

CASEY COUNTY

2014 Community Health Assessment



A Healthy **Today** for a Brighter **Tomorrow.**





Shawn Crabtree MSSW, MPA Director Lake Cumberland District Health Department

An important message from the Director

Judging by quality and longevity of life, compared to other developed countries, the United States is one of the unhealthiest countries in the world. By almost any health indicator one cares to consider, Kentucky is one of the most unhealthy states in America. And, when reviewing our region's Health Report Card, Lake Cumberland scores a "D" in almost every health category. Basically, Lake Cumberland is one of the unhealthiest places in the developed world.

This is something for which we should all be appalled. Furthermore, we should all be motivated to work together to achieve something better. Bringing together our community partners to consider our health status and to develop plans for area-wide improvements is vital in changing our dismal statistics. Hopefully we can all work together to achieve "a healthy today, for a brighter tomorrow".

A Healthy Today for a Brighter Tomorrow.

www.LCDHD.org







www.instagram.com/lcdhd_org

www.twitter.com/LCDHD

Casey County Health Empowerment Coalition

"Coming together is the beginning. Keeping together is progress. Working together is success." – Henry Ford

inside

| Health Policy and Promotion Community Health Assessment 4 |
|--|
| Casey County Vision |
| МАРР 5 |
| Ten Essential Public Health Services 5 |
| LCDHD's Road MAPP to Health Improvment 6 |
| Casey County Community Health Assessment Information |
| Casey County Health Empowerment Coalition Contact Information |
| Casey County Health Empowerment Coalition in Action |
| Community Health Status Assessment |
| Demographic Characteristics Socioeconomic Characteristics |
| Demographic Characteristics |

Forces of Change Assessment 15

Economic Environmental Legal/Ethical Political Social Technological/Education Medical

| Local Public Hea | lth | ı Sy | /ste | em | | | | |
|------------------|-----|------|------|-------|---------|-----|------|----|
| Assessment | ••• | ••• | ••• | • • • | • • • • | ••• | •••• | 18 |

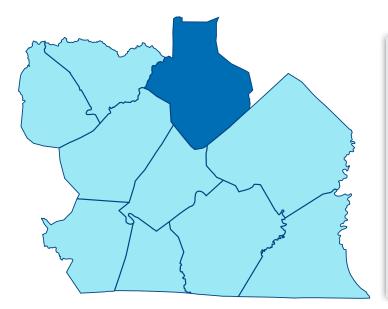
APPENDIX

| Community Health Data Collection 20 |
|---|
| Total Population |
| School District Population |
| Health Characteristics |
| KY Behavior Risk Factor Surveillance System |
| KY Incentive for Prevention Survey |
| Infectious Diseases Causes and Rates |
| Injuries and Crime |
| Chronic Illness Death Rate |
| Cancer Rates |
| Maternal and Infant Death |
| References 25 |
| Casey County Community Health |

| | _ | - | <u> </u> | | | 7 | | | | | | | | | | | | | | | | | | | | | | | | |
|--------|-----|---|----------|---|---|---|----|---|---|---|---|---|---|---|---|---|---|---|-----|---|---|---|---|---|---|---|---|-----|----|--|
| Survey | . / | • | • | • | • | • | •• | • | • | • | • | • | • | • | • | • | • | • | • • | • | • | • | • | • | • | • | • | ••• | 26 | |

Health Policy and Promotion Community Health Assessment

The Lake Cumberland District Health Department (LCDHD) is located in rural south central Kentucky. The LCDHD is comprised of ten counties: Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor and Wayne. The District covers around 3,613 square miles with a population of approximately 204,000 (2013 US Census estimates). As one travels through our District they will notice an abundance of beautiful scenic opportunities along with a National and several State Parks. Nonetheless, the natural beauty of our rural communities and open countryside comes with many health challenges.



The Lake Cumberland District Health Department Vision:

To be a leader in preventive health care, health education, and environmental monitoring in collaboration with the public and private sectors. We will show compassion and respect as we strive to improve the health of our communities.

Casey County is a located in the South Central Kentucky. Liberty is the County Seat for Casey County. The population is 16,067. The county is named for Colonel William Casey, a pioneer settler who moved his family to Kentucky in 1779. It is the only Kentucky county entirely in Knobs region. Casey County is home to annual 'Casey County Apple Festival'. It is considered part of the Appalachian region of Kentucky.



Casey County Vision Statement:

Casey County will be a united community focusing on active, healthy lifestyles free of drugs, violence and tobacco.

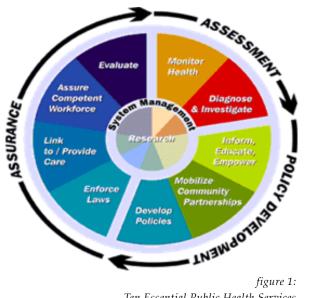
County Health Rankings data ranks Casey County's Health Outcome:

78 out of 120 counties

Mobilizing for Action through Planning and Partnerships (MAPP)

Mobilizing Action through Partnership and Planning (MAPP) is a shift in how we think about strategic public planning. It shifts from operational strategic planning to focus on the community and the entire public health system. Mobilizing for Action through Planning and Partnership (MAPP) is a strategic tool that helps communities improve health and quality of life through community-wide strategic planning. The MAPP tool was developed by the National Association of County and City Health Officials (NACCHO) in cooperation with the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Practice Program Office. Through MAPP, communities seek to achieve optimal health by identifying and using their resources wisely, accounting for their unique circumstances and needs, and forming effective partnerships for strategic action. MAPP focuses on the creation and strengthening of the local public health system. Local public health systems are defined as all entities that contribute to the delivery of public health services within a community. This system includes all public, private, and voluntary entities.

MAPP utilizes the Ten Essential Public Health Services to define public health activities. The Ten Essential Public Health Services provide a useful framework for determining who is responsible for the community's health and well-being. The services reflect core processes used in public health to promote health and prevent disease.



Ten Essential Public Health Services

- **Ten Essential Public Health Services**
- **1.** Monitor health status to identify and solve community health problems.
- 2. Diagnose and investigate health problems and health hazards in the community.
- **3.** Inform, educate, and empower people about health issues.
- **4.** Mobilize community partnerships and action to identify and solve health problems.
- **5.** Develop policies and plans that support individual and community health efforts.
- **6.** Enforce laws and regulations that protect health and ensure safety.
- 7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- **8.** Assure competent public and personal health care workforce.
- 9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- **10.** Research for new insights and innovative solutions to health problems.

LCDHD's Road MAPP to Health Improvment

The Lake Cumberland District Health Department, Health Policy and Promotion Department has been facilitating Mobilizing Action through Partnerships and Planning (MAPP), over the past two years. MAPP is a framework to help communities apply strategic thinking to prioritize public health issues and identify resources to address them. This interactive process will improve the efficiency, effectiveness, and ultimately the performance of local public health systems. Our goal is to bring the local public health systems together, through community wide-strategic planning, to create a healthier community.

The Casey County Community Health Assessment Booklet, provides statistical information, community input and environmental forces that are essential in determining the health status, behaviors and needs of the residents of Casey County.

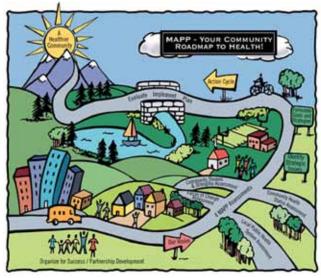


figure 2: Community Roadmap

The process is shown moving along a road that leads to a healthier community. The MAPP process is initiated when the local public health systems organize themselves, recruit participants, and prepare to implement MAPP. The second phase, Visioning, provides a framework for pursuing long range community goals.

OUR GOAL: To bring the local public health systems together to create a healthier community through community-wide strategic planning

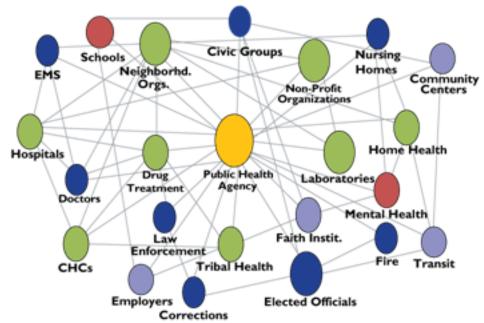


figure 3: Local Public Health System

Casey County Community Health Assessment Information

Casey County Health Empowerment Coalition has compiled four assessments which make up the Casey County Community Health Assessment Booklet. These four assessments assist in creating a picture of residents of the county with health strengths and opportunities. These assessments provided insight on the gaps between current circumstances, provided information to use to identify the strategic issues, and served as the source of information from which our strategic issues, strategies and goals are built.

The four assessments conducted were:

- **1. National Public Health Performance Standards Program** (NPHPSP): measures the capacity of the local public health system to conduct essential public health services.
- 2. Community Themes and Strengths: a community health and safety survey that provides an in-depth look at the health related behaviors of the many different segments of the communities.
- **3. Community Health Status**: statistical information gathered from various sources to provide indicators of current health status in the community.
- **4. Forces of Change Assessment**: takes into account external forces of change, i.e. social, environmental, governmental and economic changes that have an impact on health services.



figure 4: MAPP Model

In the MAPP model, the phases of the MAPP process are shown in the center of the model, while the four MAPP Assessments - the key content areas that drive the process - are shown in four outer arrows.

Casey County Health Empowerment Coalition

Adanta RPC Adult Learning Center Amedysis Home Health Americore **Back and Body Chiropractic Casey County Board of Education Casey County Extension Casey County Family Resource Centers Casey County Health Department Casey County Hospital Casey County News Casey County Sheriff Casey County Youth Service Center Casey County Public Library Chamber of Commerce Community Representative Court Designated Worker Changing The Generation-Kentucky Department of Community Based Services Department of Juvenile Justice** Early Childhood Council **Emergency Management Casey County Judge Executive Kentucky State Police** Kentucky Agency for Substance Abuse **Policy (KY-ASAP) KY Blood Center** Lake Cumberland Area Community Action Lake Cumberland Area Development District Lake Cumberland District Health Department Lake Cumberland Head Start Liberty Fire Department **Liberty Police** Liberty/Casey County Disaster Relief Lifeline Home Health Mayor WellCare of Kentucky

Strategic Plan for Community Improvement

Supported by the Lake Cumberland District Health Department, Casey County Health Empowerment Coalition was formed in August 2012. The coalition collaborated with the local KY Agency for Substance Abuse Policy board and the local health coalition. The coalition has completed the four MAPP assessments: Community Themes and Strengths, Local Public Health System Assessment, Community Health Status Assessment and Forces of Change Assessment. These assessments provided insight on the gaps between current circumstances, provided information to use to identify the strategic issues, and served as the source of information from which our strategic issues, strategies and goals were built.

Casey County Health Empowerment Coalition strives to organize for success through partnership development and began by conducting several visioning sessions. This document presents the findings of the four MAPP assessments collected between June 2010 and April 2013.

All public, private and voluntary organizations, agencies, groups and individuals that have interests in population health improvements are invited to join Casey County Health Empowerment Coalition.

Interested in Joining?

Contact Jelaine Harlow at 606-787-6911 ext: 3221 or email: jelainet.harlow@lcdhd.org for meeting information.

Casey County Health Empowerment Coalition in Action











Casey County covers 445.61 square miles including the city of Liberty. Casey County population is 16,067 with a population density of 36 people per square mile. The population under the age of 18 is 23% and 18.2% of the population is over age 65.



Demographic Characteristics

| | Casey County | District | Kentucky | USA |
|---|--------------|----------|-----------|-------------|
| Population, 2013 estimate ¹ | 16,067 | 203,949 | 4,395,295 | 316,128,839 |
| Persons under 18, percent ¹ | 23.0% | 22.2% | 23.1% | 23.3% |
| Person 65 and over, percent ¹ | 18.2% | 17.7% | 14.4% | 14.1% |
| Female, percent ¹ | 51.3% | 50.5% | 50.8% | 50.8% |
| Male, percent ¹ | 48.7% | 49.5% | 49.2% | 49.2% |
| White alone, percent ¹ | 97.7% | 95.6% | 88.5% | 77.7% |
| Black or African American, percent ¹ | 0.7% | 2.4% | 8.2% | 13.2% |
| American Indian/Alaska Native, percent ¹ | 0.3% | 0.3% | 0.3% | 1.2% |
| Hispanic or Latino, percent ¹ | 2.9% | 2.3% | 3.3% | 17.1% |
| Reporting two or more races, percent ¹ | 1.0% | 1.2% | 1.7% | 2.4% |
| School District Enrollment ² | 2,216 | 31,607 | 675,530 | 495,000,000 |

SOURCES: ¹US Census Bureau: State and County Quick Facts, Data derived from Population Estimates, American Community Survey, Census of Populations. July 8, 2014. ²Kentucky Department for Education, Schools and District Attendance; August, 5, 2014; http://education.ky.gov/comm/Pages/2013-2014-Kentucky-Schools-

Socioeconomic characteristics play an important role in determining the health status of a county. The unemployment rate is 7.9%. The median household income is \$28,416 with 40% of our children living in poverty. Homeownership rates are 81.1%. 21% of the population is without adequate social support. The rate of children living in single parent homes is 28%.

| | Casey County | District | Kentucky | USA |
|--|--------------|----------|----------|----------|
| 1. Unemployment ¹ | 7.9% | 9.5% | 8.2% | NDA* |
| 2. Median household income ² | \$28,416 | \$29,685 | \$42,610 | \$53,046 |
| 3. Homeownership ² | 81.1% | 73.9% | 68.7% | 65.5% |
| 4. Children in poverty ¹ | 40% | 38% | 27% | NDA* |
| 5. Inadequate social support ¹ | 21% | 23% | 20% | NDA* |
| 6. Children in single parent households ¹ | 28% | 34% | 34% | NDA* |

Socioeconomic Characteristics

NDA* - No Data Available.

NOTE: 1, 3, 4, 5, 6 - Represent a percentage of the total population.

SOURCES: ¹ CHR - County Health Ranking, 2014. ²US Census Bureau: State and County Quick Facts. Data drived from Population Estimates, America Community Survey, Census of Population and Housing, State and County Housing Unite Estimates, Economic Census, and Building Permits, July 8, 2014

Behavior risk factors directly impact the individual's and community's overall health status. There is a strong correlation between behavior risk factors and mortality rates. Adult obesity in Casey County is 35% and 38% are physically inactive. The CDC estimated in 2010 more than one third of adolescents and teens were overweight or obese. According to Kentucky Health Facts, data indicates that 30% of Casey County adults students smoke.

Behavior Risk Factors

| | Casey County | District | Kentucky |
|--|--------------|----------|----------|
| 1. Adult Obesity $(adults \ge 18)^*$ | 35% | 33% | 33% |
| 2. Physical Inactivity $(adults \ge 18)^{**}$ | 38% | 36% | 31% |
| 3. Adult Smoking (adults \geq 18) ^{***} | 30% | 29% | 26% |
| 4. Excessive Drinking $(adults \ge 18)^{****}$ | 14% | NDA* | 12% |

NDA* - No Data Available.

NOTE: 1, 2, 3, 4 - Represent the total percentage of the population of adults \geq 18.

SOURCES: CHR, County Health Ranking, 2014. * Percent of adults with BMI over 30. ** Percent of population 20 or above with no leisure time activity. *** Percent of adults that smoke more than 100 cigarettes. **** Percent of binge drinking or heavy drinking

Humans interact with the environment constantly. These interactions affect quality of life, years of healthy life lived, and health disparities. The World Health Organization (WHO) defines environment, as it relates to health, as "all the physical, chemical, and biological factors external to a person, and all the related behaviors." Environmental health consists of preventing or controlling disease, injury, and disability related to the interactions between people and their environment. (Healthy People, 2020)

| 13.3 | 13.4 | 13.5 |
|------|------------|-------------------------------|
| | | |
| 10% | 2% | 7% |
| 14% | 15% | 14% |
| 76% | 81% | 82% |
| 40% | 28% | 28% |
| | 14% 76% | 14% 15% 76% 81% |

Physical Environment

SOURCE: 1 CHR - County Health Ranking, 2014

Access to community preventive services and evidence base clinical practices reduce death, disability and health inequities and improve quality of life (National Prevention Council, 2011; U.S. Department of Health and Human Services, 2011).

Casey County has one hospital. According to County Health Rankings the physician to patient ratio is 7,955 to 1. Kentucky Health Facts state that 22% of Casey County adults have no insurance.



Health Resources Availability

| | Casey County | District | Kentucky |
|--|--------------|----------|----------|
| 1. Uninsured ¹ | 22% | 20% | 17% |
| 2. Primary care physician ratio ¹ | 7,955:1 | NDA* | 1,560:1 |
| 3. Dentist ratio ¹ | 16,082:1 | NDA* | 1,731:1 |
| 4. Mental health provider ratio ¹ | 1,787:1 | NDA* | 852:1 |
| 5. Preventable hospital stays ¹ | 185 | 143 | 103 |

NDA* - No Data Available.

NOTE: 1. Represent percentage of the total population. 5. Hospitalization rate for ambulatory care sensitive conditions per 1,000 Medicare enrollees. SOURCE: ¹ CHR - County Health Ranking, 2014

Communicable diseases occur only when the agent comes into contact with a host in a suitable environment. Prevention and control efforts for communicable diseases may be directed to any of these three elements. Communicable diseases affect both individuals and communities, so control efforts may be directed at both. Antibiotics effectively treats most communicable diseases. A simple way to prevent the occurrence of communicable diseases is to eliminate the infectious agent through, for example, cooking food, washing hands, and sterilizing surgical instruments between each use. Assuring the safety of drinking water through filtration and chlorination. Treating sewage appropriately are other important means of preventing the spread of communicable diseases.

| | Casey County | District | Kentucky |
|---|--------------|----------|----------|
| 1. Syphilis ¹ | 0 | 4 | 335 |
| 2. Gonorrhea ¹ | 2 | 31 | 4,521 |
| 3. Chlamydia ¹ | 18 | 446 | 16,631 |
| 4. AIDS (number of people living with) ² | 7 | 110 | 7,750 |

Communicable Disease

NOTE: 1, 2, 3 - numbers reported.

SOURCES: ¹KY Vital Statistics, 2011 (Preliminary Data). ²HIV Surveillance Report, 2011

Improving the well-being of mothers, infants, and children is an important public health goal for the Lake Cumberland District. Their well-being determines the health of the next generation and can help predict future public health challenges for families, communities, and the health care system. The objectives of the Maternal, Infant, and Child Health topic area address a wide range of conditions, health behaviors, and health systems indicators that affect the health, wellness, and quality of life of women, children, and families. (Healthy People, 2020)

Maternal and Child Health

| | Casey County | District | Kentucky | USA |
|--|--------------|----------|----------|-----------|
| 1. Total births | 195 | 2,582 | 56,900 | 4,247,694 |
| 2. Infant mortality (rate) | 10.3 | 7.0 | 6.9 | 6.5 |
| 3. Teen births (rate) | 62.6 | 61.5 | 38.7 | NDA* |
| 4. No prenatal care first trimester (percentage) | 28.7% | 26.3% | 27.8% | 29.0% |

NDA* - No Data Available.

NOTE: 1. Total number of births. 2. Crude rate per 1,000 live births. 3. Teen births = rate per 1000 of total births born to females ages 15-19.

SOURCES: 1, 2, 4 - KY Annual Vital Statistics Report, 2008 (http://chfs.ky.gov/dph/vital/) and National Vital Statistics Reports for Births and Deaths (http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_07_ tables.pdf) (http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_01.pdf) 3. KY Annual Vital Statistic Report, 2013 (Preliminary Data) - Teen Births by County, Rates per 1,000



Social and Mental factors can indirectly and directly influence the overall health status of a person and the community. Abuse, substance abuse, neglect and violence impact the mental and physical status of individuals and communities.

Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with challenges. Mental health is essential to personal well-being, family and interpersonal relationships, and the ability to contribute to community or society.

| | Casey County | District | Kentucky | USA |
|--|--------------|----------|----------|---------|
| 1. Mean travel time to work (minutes), workers age 16+1 | 27.6 | 23.5 | 22.7 | 25.4 |
| 2. Poor or fair health (adults \geq 18) ² | 32% | 28% | 21% | NDA* |
| 3. Poor physical health days (adults \geq 18) ² | 5.7 | 6.0 | 4.8 | NDA* |
| 4. Poor mental health days (adults ≥ 18) ² | 5 | 4.8 | 4.3 | NDA* |
| 5. Child abuse neglect - # of reports ³ | 179 | 2,979 | 63,438 | 676,569 |
| 6. Suicide death rate per 100,000 (all ages)⁴ | 0 | 13.1 | 13.5 | 11.6 |

Social and Mental Health

NDA* - No Data Available.

NOTE: 2 - Represent a percentage of the total population. 3, 4 - Average number of days in the past 30 days. 5 - Number of Child Abuse Neglect Reported. 6 - Age adjusted death rates per 100,000 population SOURCES: ¹ US Census Bureau: State and County Quick Facts. Data drived from Population Estimates, America Community Survey, Census of Population and Housing, State and County Housing Unite Estimates, Economic Census, and Building Permits, July 8, 2014. ² CHR - County Health Ranking, 2014. ³ Child Abuse Neglect Report by County - Prevent Child Abuse Kentucky. Statistics Provided by the Cabinet for Health and Family Services, Jan. 1, 2013 - Dec. 31, 2013 http://www.pcaky.org/stats_research.html Child Maltreatment - Administration for Children and Families - Department for Health And Human Services: http://www. acf.hhs.gov/sites/default/files/cb/cm2012.pdf. ⁴ KY Annual Vital Statistics Report 2008 (http://chfs.ky.gov/dph/vital/) and National Vital Statistics Reports Vol. 59, No. 10, December 7, 2011 (2008 data) (http:// www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_10.pdf)

Forces of Change Assessment

The Forces of Change Assessment (FOC) is one of four assessments conducted as part of the Mobilizing for Action through Planning and Partnerships (MAPP) community health strategic planning initiative. This assessment focuses on identifying the trends, factors, and events that are likely to influence community health and quality of life, or impact the work of the local public health system.

The FOC Assessment was performed by community health stakeholders and volunteers. A brainstorming session was conducted on February 7, 2013. Participants were charged with answering the following questions: "What is occurring or might occur that affects the health of our community or the local public health system?" and "What specific threats or opportunities are generated by these occurrences?" To address those questions, participants determined the economic, environmental, legal/ethical, political, social, technology/education, and medical forces that impact how Casey County's public health system functions. Members then developed a list of potential opportunities and threats for each identified force.

Participant findings were compiled into the attached comprehensive matrix of key forces and their associated impacts upon the health of Casey County.

A selection of the results is included below:

- Business Closure due to Natural Disaster
- Increase in Drug Use
- Community Involvement
- Family Activities

- New College
- Loss of Superintendant
- Improved Health Care
- Change of Political Offices

The information gathered through the FOC Assessment is an important component of the MAPP comprehensive community assessment process. These findings will be used in conjunction with the results of the other three MAPP assessments to identify key strategic issues and priorities for action by our community.



Forces of Change Assessment

| FORCE | THREATS POSED | OPPORTUNITIES CREATED |
|---|--|--|
| Economic | | |
| Flood | Loss of jobs/productivity/loss of businesses | Federal funds for clean up and restoration |
| New Hospital | | Jobs, better care |
| Apple Festival | | People coming into the community to spend money |
| AG/Expo | | People coming into the community to spend money |
| Medical/Healthcare | Cost | |
| Environmental | | |
| Decreased Recycling in Homes | Toxins in land fill, water, air from burning garbage | Money for teaching others to value environment |
| Increased Amount of Trash | Image of community and health | Education, bettering community |
| Natural Disaster Preparedness | Injury, death, loss of possession | Feeling of safety, having an emergency plan |
| Legal/Ethical | | |
| New Circuit Judge/Commonwealth Attorney | Inexperience in new positions that are very important/ ways in which they communicate with law enforcement | |
| Wet/Dry Vote | A dangerous drug of abuse being more available (especially to youth) crime rate may go up | Profits for some |
| Political | | |
| New Circuit Court Judge | Bias toward Adair Co | |
| New Commonwealth Attorney | Bias toward Adair Co | |
| Republican Majority | Ultra-conservative | Dialogue between parties |
| Sequestration Cuts from Washington | Cuts to Education | Fund raising Contact representatives |
| Smoke Free Bill Failing in 2013 Legislative KY | Dangers of Second hand smoke | Urge local officials to adopt smoke free ordinances |
| Social | | |
| Flood of May 2010 | Closed businesses | Community came together (EDA devoted to business disaster relief was formed) |
| | Loss of homes and personal property | Community came together |
| Drugs — Use of Meth | Loss of life, families destroyed, pollution of ground water | Higher awareness |
| Rise in Heroin use | Increase in addiction, affects on babies | Education efforts up |
| Unemployment Rate | Loss of income | Retraining efforts, education |
| AG/Expo Center | | More family activities, increase in socialization |

Forces of Change Assessment

| FORCE | THREATS POSED | OPPORTUNITIES CREATED | | | | |
|-----------------------------------|---|---|--|--|--|--|
| Technological/Education | | | | | | |
| Flood | Dislocation of children, relocation Not focused on school, education | Other community help, different sectors working together | | | | |
| Tornado | Dislocation of children, relocation Not focused on school, education | Other community help, different sectors working together | | | | |
| Sandy Hook Shooting | Social and emotional damage (especially staff) | Re-evaluate and update emergency plan | | | | |
| Superintendant Leaving | Worried about jobs, concerned for school district | New ideas | | | | |
| New college coming in | Not getting experience of other places | Creating new jobs, less travel for teens, more opportunity | | | | |
| Medical | | | | | | |
| Hospital Renovation | | Jobs, better and more advanced medical treatment and equipment | | | | |
| Multiple Medical Related Business | | More opportunities for jobs; provide choices for consumers | | | | |
| Obama Care | Unknown issues due to newness | Youth can stay on parents insurance longer Subsidize health care for middle income families | | | | |
| Illegal Drug Use | Effects on unborn child, overdose, DUI | | | | | |



Community Themes and Strengths Assessment

A Quality of Life survey was distributed across Casey County during the months of April and May 2013. The survey was distributed in two formats electronically and paper with 311 individuals completing the survey. The community health status assessment assists the communities in identifying priority community health and quality of life issues. A few of the questions follow.

What do you think are the three most important "health problems" in Casey County?

| Answer Options | % | Respondents |
|---------------------------|-------|-------------|
| Cancers | 40.9% | 163 |
| Alcohol/Drugs | 74.9% | 299 |
| Obesity (children/adults) | 29.8% | 119 |

What do you think are the three most important factors for a "healthy community"?

| Answer Options | % | Respondents |
|------------------------------|-------|-------------|
| Good Place to Raise Children | 40.4% | 161 |
| Low Crime/Safe Neighborhood | 45.1% | 180 |
| Good School Systems | 52.1% | 208 |

What do you think are the three most important "risky behaviors" in Casey County?

| Answer Options | % | Respondents |
|------------------|-------|-------------|
| Alcohol/Drug Use | 88.5% | 353 |
| Being Overweight | 47.4% | 189 |
| Tobacco Use | 43.6% | 174 |

See Casey County Community Health Surveys on pages 26 - 27 of this booklet.

Local Public Health System Assessment

Casey County performed the LPHSA in June 2010. There were approximately 30 people that participated in the assessment. The majority of the organizations that make up the Local Public Health System were present.

The Local Public Health System Assessment Instrument focuses on the local public health system or all entities that contribute to public health services within a community. The local instrument was developed by NACCHO and CDC. The standards are designed around the ten Essential Public Health Services to assure that the standards fully cover the gamut of public health action needed at state and community levels. The standards focus on the overall public health system (all public, private, and voluntary entities that contribute to public health activities within a given area), rather than a single organization. This assures that the contributions of all entities are recognized in assessing the provision of essential public health services. The standards describe an optimal level of performance rather than provide minimum expectations. This assures that the standards can be used for continuous quality improvement. The standards can stimulate greater accomplishment and provide a level to which all public health systems can aspire to achieve. The standards are intended to support a process of quality improvement. System partners should use the assessment process and the performance standards results as a guide for learning about public health activities throughout the system and determining how to make improvements. The Local Public Health System Assessment is a valuable tool in identifying areas for system improvement, strengthening local partnerships, and assuring that a strong system is in place for effective response to day-to-day public health issues as well as public health emergencies. Local Public Health System Assessment instrument users at all levels report numerous such benefits, including:

- 1. Improves organizational and community communication and collaboration, by bringing partners to the same table.
- 2. Educates participants about public health and the interconnectedness of activities, which can lead to a higher appreciation and awareness of the many activities related to improving the public's health.
- 3. Strengthens the diverse network of partners within state and local public health systems, which can lead to more cohesion among partners, better coordination of activities and resources, and less duplication of services.
- 4. Identifies strengths and weaknesses to address in quality improvement efforts. Responses to the assessment can be tracked over time to identify system improvements or changes. Provides a benchmark for public health practice improvements, by providing a gold standard to which public health systems can aspire.

| EP | łS | SCORE |
|-----|---|-------|
| 1 | Monitor Health Status To Identify Community Health Problems | 46 |
| 2 | Diagnose And Investigate Health Problems and Health Hazards | 39 |
| 3 | Inform, Educate, And Empower People about Health Issues | 46 |
| 4 | Mobilize Community Partnerships to Identify and Solve Health Problems | 45 |
| 5 | Develop Policies and Plans that Support Individual and Community Health Efforts | 51 |
| 6 | Enforce Laws and Regulations that Protect Health and Ensure Safety | 62 |
| 7 | Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable | 34 |
| 8 | Assure a Competent Public and Personal Health Care Workforce | 50 |
| 9 | Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services | 40 |
| 10 | Research for New Insights and Innovative Solutions to Health Problems | 48 |
| ονι | ERALL SCORE | 46 |

Summary of Casey County performance scores by Essential Public Health Service (EPHS)

The summary above provides a quick overview of the system's performance in each of the 10 Essential Public Health Services (EPHS). Each EPHS score is a composite value determined by the scores given to those activities that contribute to each Essential Service. These scores range from a minimum value of 0% (no activity is performed pursuant to the standards) to a maximum of 100% (all activities associated with the standards are performed at optimal levels).

Lake Cumberland District Total Population

| | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | КҮ | USA |
|--|--------|--------|---------|---------|--------|----------|---------|---------|--------|--------|----------|-----------|-------------|
| Population, 2013 estimate | 18,732 | 16,067 | 10,146 | 6,789 | 11,180 | 17,989 | 63,903 | 17,752 | 24,649 | 20,678 | 203,949 | 4,395,295 | 316,128,839 |
| Person under 5, percent | 5.3% | 6.2% | 5.6% | 6.0% | 5.2% | 5.9% | 5.9% | 6.5% | 6.2% | 5.6% | 5.9% | 6.3% | 6.3% |
| Person under 18, percent | 21.2% | 23.0% | 22.6% | 22.1% | 21.4% | 21.8% | 22.9% | 22.3% | 22.3% | 21.9% | 22.2% | 23.1% | 23.3% |
| Person 65 and over, percent | 16.3% | 18.2% | 17.8% | 20.3% | 18.5% | 13.7% | 17.2% | 18.7% | 17.2% | 17.6% | 17.7% | 14.4% | 14.1% |
| Female, percent | 50.7% | 51.3% | 50.4% | 50.9% | 50.4% | 45.6% | 51.1% | 51.2% | 51.9% | 50.6% | 50.5% | 50.8% | 50.8% |
| Male, percent | 49.3% | 48.7% | 49.6% | 49.1% | 49.6% | 54.4% | 48.9% | 48.8% | 48.1% | 49.4% | 49.5% | 49.2% | 49.2% |
| White alone, percent | 95.2% | 97.7% | 97.2% | 95.5% | 96.0% | 91.7% | 96.7% | 97.6% | 92.5% | 96.3% | 95.6% | 88.5% | 77.7% |
| Black or African American, percent | 2.9% | 0.7% | 0.5% | 2.9% | 2.2% | 5.8% | 1.3% | 0.6% | 5.0% | 1.8% | 2.4% | 8.2% | 13.2% |
| American Indian/Alaska Native alone, percent | 0.3% | 0.3% | 0.2% | 0.1% | 0.4% | 0.8% | 0.3% | 0.4% | 0.2% | 0.3% | 0.3% | 0.3% | 1.2% |
| Asian alone, percent | 0.3% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.6% | 0.4% | 0.7% | 0.4% | 0.3% | 1.3% | 5.3% |
| Native Hawaiian/other Pacific Islander alone, percent | 0.1% | 0.1% | 0.5% | 0.0% | z | 0.1% | z | z | 0.1% | 0.1% | 0.1% | 0.1% | 0.2% |
| Reporting two or more races, percent | 1.2% | 1.0% | 1.3% | 1.3% | 1.3% | 1.4% | 1.1% | 1.0% | 1.6% | 1.2% | 1.2% | 1.7% | 2.4% |
| Hispanic or Latino, percent | 1.8% | 2.9% | 2.8% | 1.0% | 1.6% | 2.4% | 2.3% | 3.7% | 2.0% | 2.9% | 2.3% | 3.3% | 17.1% |
| White alone, not Hispanic or Latino, percent | 93.7% | 95.1% | 95.2% | 94.6% | 94.6% | 89.9% | 94.7% | 94.2% | 90.7% | 93.9% | 93.7% | 85.6% | 62.6% |

SOURCE: US Census Bureau: State and County Quick Facts, Data derived from Population Estimates, American Community Survey, Census of Populations. July 8, 2014. z: value greater than zero but less than half unit of measure shown

Lake Cumberland School District School Population

| | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | KY | USA |
|------------------|-------|-------|---------|---------|-------|----------|---------|---------|--------|-------|----------|---------|-----|
| Total Enrollment | 2,370 | 2,216 | 1,875 | 915 | 1,691 | 2,238 | 9,947 | 2,670 | 4,155 | 3,530 | 31,607 | 675,530 | |

| 629 |
|-----|
| 572 |
| 597 |
| 572 |
| |

| Cumberland County School District | |
|------------------------------------|-----|
| Cumberland Elementary School (K-5) | 455 |
| Cumberland Middle School (6-8) | 230 |
| Cumberland High School (9-12) | 230 |

| Pulaski County School District | |
|--------------------------------------|-------|
| Pulaski County Memorial Schoo, (PS) | 225 |
| Burnside Elementary School (PS-05) | 525 |
| Eubank Elementary School (PS-05) | 375 |
| Nancy Elementary School (PS-05) | 400 |
| Oakhill Elementary School (PS-05) | 495 |
| Pulaski Elementary School (PS-05) | 645 |
| Shopeville Elementary School (PS-05) | 400 |
| Southern Elementary School (PS-05) | 730 |
| Northern Middle School (6-8) | 645 |
| Southern Middle School (6-8) | 1,000 |
| Pulaski High School (9-12) | 1,100 |
| Southwestern High School (9-12) | 1,200 |

| Casey County School District | |
|-------------------------------|-----|
| Jones Park Elemntary (K-06) | 386 |
| Liberty Elementary (K-6) | 360 |
| Walnut Hill Elementary (K-06) | 421 |
| Casey Middle School (7-8) | 378 |
| Casey High School (9-12) | 671 |

| Green County School District | |
|-----------------------------------|-----|
| Green County Primary School (K-2) | 392 |
| Green County Intermediate (3-5) | 380 |
| Green County Middle School (6-8) | 386 |
| Green County High School (9-12) | 533 |

| Science Hill Independent School District Science Hill Elementary (PS-08) 52 | 20 |
|---|----|
| Science Hill Elementary (PS-08) 52 | 20 |
| | |
| Russell County School District | |
| Jamestown Elementary (PS-05) 49 | 90 |
| Russell Springs Elementary (PS-05) 71 | 0 |
| Salem Elementary School (PS-05) 31 | 0 |
| Russell County Middle School (6-8) 67 | 70 |
| Russell County High Schol (9-12) 49 | 90 |
| Taylor County School District | |

| Taylor County Elementary (PS-05) | 1,214 |
|-----------------------------------|-------|
| Taylor County Middle School (6-8) | 740 |
| Taylor County High School (9-12) | 896 |

| 0 |
|---|
| 0 |
| 0 |
| 5 |
| 0 |
| |

McCreary County School District

| Meercary county school bistilet | |
|---------------------------------------|-------|
| Pine Knot Preschool (P) | 83 |
| Pine Knot Primary School (K-03) | 528 |
| Pine Knot Intermediate School (4-6) | 385 |
| McCreary County Middle School (7-8) | 445 |
| McCreary County High School (9-12) | 797 |
| Somerset Independent School District | |
| Hopkins Elementary School (PS-05) | 695 |
| Meece Middle School (5-8) | 489 |
| Somerset High School (9-12) | 503 |
| Campbellsville Independent School Dis | trict |
| Campbellsville Elementary (PS-03) | 400 |
| Campbellsville Middle School (4-8) | 475 |
| Campbellsville High School (9-12) | 430 |
| Wayne County School District | |
| Walker Early Learning Center (PS-K) | 430 |
| Bell Elementary School (1-2) | 490 |
| Monticello Elementary School (3-5) | 760 |
| Wayne County Middle School (6-8) | 825 |
| Wayne County High School (9-12) | 1,000 |

SOURCE:

Kentucky Department for Education, Schools and District Attendance; August, 5, 2014; http://education.ky.gov/comm/Pages/2013-2014-Kentucky-Schools-Directory.aspx

Lake Cumberland District Health Characteristics

| | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | KY |
|--|---------|----------|---------|---------|----------|----------|---------|---------|---------|---------|----------|---------|
| HEALTH OUTCOMES | 48 | 78 | 84 | 107 | 32 | 91 | 54 | 38 | 42 | 46 | NDA* | NDA* |
| Length of Life [*] | 27 | 83 | 19 | 110 | 32 | 68 | 48 | 59 | 49 | 34 | NDA* | NDA* |
| 1. Premature death* | 7,968 | 10,495 | 9,670 | 13,257 | 8,097 | 9,612 | 9,194 | 9,453 | 9,198 | 9,198 | 8,228 | 8,758 |
| Quality of Life | 78 | 77 | 99 | 103 | 51 | 109 | 53 | 18 | 34 | 68 | NDA* | NDA* |
| 2. Poor or fair health | 32% | 25% | 28% | 29% | 24% | 41% | 27% | 21% | 22% | 31% | 28% | 21% |
| 3. Poor physical health days | 5.7 | 6.4 | 7.0 | 6.4 | 5.3 | 8.9 | 5.2 | 4.2 | 4.6 | 6.4 | 6.0 | 4.8 |
| 4. Poor mental health days | 5.0 | 5.1 | 4.4 | 5.0 | 5.1 | 6.2 | 4.0 | 4.0 | 4.2 | 5.7 | 4.9 | 4.3 |
| 5. Low birthweight | 8.8% | 8.9% | 11.1% | 11.6% | 8.2% | 9.2% | 8.8% | 8.0% | 8.4% | 7.4% | 9% | 9.1% |
| HEALTH FACTORS | 87 | 85 | 89 | 101 | 52 | 110 | 48 | 79 | 28 | 88 | NDA* | NDA* |
| Health Behaviors* | 84 | 86 | 15 | 62 | 36 | 112 | 30 | 68 | 14 | 88 | NDA* | NDA* |
| 6. Adult smoking | 34% | 30% | 21% | 27% | 31% | 40% | 27% | 31% | 23% | 29% | 29% | 26% |
| 7. Adult obesity | 34% | 35% | 32% | 34% | 30% | 32% | 32% | 32% | 32% | 32% | 33% | 33% |
| 8. Food environment index | 7.5 | 7.6 | 7.7 | 7.6 | 7.8 | 6.5 | 7.1 | 7.8 | 7.6 | 6.3 | 7.4 | 7.4 |
| 9. Physical inactivity | 35% | 38% | 36% | 37% | 38% | 35% | 33% | 38% | 28% | 40% | 36% | 31% |
| 10. Access to exercise opportunities | 62% | NDA* | 74% | 11% | 39% | 100% | 62% | 79% | 26% | 42% | NDA* | 62% |
| 11. Excessive drinking | NDA* | 14% | NDA* | NDA* | NDA* | 10% | 7% | 8% | 12% | NDA* | NDA* | 12% |
| 12. Alcohol-impaired driving deaths | 26% | 19% | 38% | 25% | 9% | 30% | 22% | 20% | 23% | 36% | 25% | 28% |
| Clinical Care* | 114 | 11 | 119 | 117 | 92 | 45 | 84 | 65 | 84 | 49 | NDA* | NDA* |
| 13. Uninsured | 21% | 22% | 20% | 20% | 20% | 21% | 18% | 20% | 19% | 19% | 20% | 17% |
| 14. Primary Care Physicians | 2,669:1 | 7,955:1 | 2,550:1 | 1,708:1 | 11,200:1 | 3,657:1 | 1,415:1 | 1,601:1 | 1,237:1 | 1,613:1 | NDA* | 1,560:1 |
| 15. Dentists | 6,225:1 | 16,082:1 | 3,428:1 | 6,819:1 | 2,829:1 | 18,069:1 | 1,590:1 | 2,916:1 | 3,527:1 | 3,471:1 | NDA* | 1,731:1 |
| 16. Mental health providers | 1,245:1 | 1,787:1 | 1,286:1 | 852:1 | 2,829:1 | 1,390:1 | 757:1 | 1,094:1 | 1,122:1 | 2,603:1 | NDA* | 852:1 |
| 17. Preventable hospital stays, rate | 182 | 185 | 206 | 213 | 103 | 117 | 92 | 109 | 92 | 129 | 143 | 103 |
| Social & Economic Factors* | 80 | 73 | 90 | 106 | 44 | 107 | 79 | 85 | 65 | 95 | NDA* | NDA* |
| 18. High school graduation | 78% | 89% | 88% | 78% | 95% | 88% | 76% | 84% | 90% | 89% | 86% | 79% |
| 19. Some college | 48% | 41% | 36% | 39% | 39% | 42% | 50% | 46% | 44% | 38% | 42% | 57% |
| 20. Unemployment | 7.7% | 7.9% | 9.5% | 10.8% | 7.9% | 13.3% | 9.4% | 8.6% | 7.8% | 12.4% | 9.5% | 8.2% |
| 21. Children in poverty | 39% | 40% | 40% | 42% | 31% | 51% | 31% | 40% | 32% | 38% | 38% | 27% |
| 22. Inadequate social support | 28% | 21% | 16% | 20% | 21% | 30% | 20% | 27% | 20% | 24% | 23% | 20% |
| 23. Children in single-parent households | 27% | 28% | 41% | 45% | 34% | 27% | 34% | 36% | 40% | 31% | 34% | 34% |
| 24. Violent crimes, rate | 52 | 62 | 0 | 50 | 44 | 59 | 112 | 72 | 159 | 91 | 76 | 247 |
| 25. Injury deaths, rate | 78 | 99 | 124 | 156 | 79 | 72 | 78 | 101 | 87 | 68 | NDA* | 79 |
| | | | | | | | | | | | | |

NDA* - No Data Available.

SOURCE: County Health Ranking, 2014 (all of the above), Percentage of total population

Each county ranking is compared among the 120 counties in Kentucky.

HEALTH OUTCOMES in the County Health Rankings represent how healthy a county is. We measure two types of health outcomes: how long people live (length of life) and how healthy people feel while alive (quality of life). LENGTH OF LIFE (Mortality) examine mortality (or death) data to find out how long people live. More specifically, we measure what are known as premature deaths (deaths before age 75).

QUALITY OF LIFE (Morbidity) refers to how healthy people feel while alive. Specifically, we report on the measures of their health-related quality of life (their overall health, physical health, and mental health) and we also look at birth outcomes (in this case, babies born with a low birthweight).

HEALTH FACTORS in the County Health Rankings represent what influences the health of a county. We measure four types of health factors: health behaviors, clinical care, social and economic, and physical environment factors. In turn, each of these factors is based on several measures. A fifth set of factors that influence health (genetics and biology) is not included in the Rankings.

1. Premature death - Years of potential life lost before age 75 per 100,000 population (age-adjusted)

- 2. Poor or fair health Percent of adults reporting fair or poor health (age-adjusted)
- 3. Poor physical health day Average number of physically unhealthy days reported in past 30 days (age-adjusted)
- Poor mental health day Average number of mentally unhealthy days reported in past 30 days (age-adjusted)
- 5. Low birth rate Low birth weight is the percent of live births for which the infant weighed less than 2,500 grams (approximately 5 lbs., 8 oz.).
- 6. Adult smoking Percentage of adults that report smoking more than 100 cigarettes
- 7. Adult obesity Percent of adults that report a BMI >= 30
- 8. Food environment index Index of factors that contribute to a healthy food environment
- 9. Physical inactivity percent of adults aged 20 and over reporting no leisure time physical activity
- Access to exercise opportunities percent of the population with adequate access to locations for physical activity
- 11. Excessive drinking Binge drinking or heavy drinking; binge drinking is consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion. Heavy drinking is defined as drinking more than 1 (women) or 2 (men) per day over average

- 12. Alcohol-impaired driving Proportion of driving deaths with alcohol involvement
- 13. Uninsured Percentage of adults under age 65 without health insurance
- 14. Primary care physicians Ratio of population to primary care physicians
- 15. Dentist Ratio of population to dentists
- 16. Mental health providers Ration of population to mental health providers
- 17. Preventable hospital stays Hospitalization rate for ambulatory-care sensitive conditions per 1,000 Medicare enrollees
- 18. High school graduation Percent of ninth grade cohort that graduates in 4 years
- 19. Some college Percent of adults aged 25-44 years with some post-secondary education
- 20. Unemployment Percent of population age 16+ unemployed but seeking work
- 21. Children in poverty Percent of children under age 18 in poverty
- 22. Inadequate social support Percent of adults without social/emotional support
- 23. Children in single-parent households Percent of children that live in household headed by single parent
- 24. Violent crimes Violent crime rate per 100,000 population

^{25.} Injury Deaths - Injury deaths is the death rate from intentional and unintentional injuries per 100,000 population. Deaths included are those with an underlying cause of injury (ICD-10 codes *U01-*U03, V01-Y36, Y85-Y87, Y89 continued on page 22

Lake Cumberland District Health Characteristics (continued from page 21)

| | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | KY |
|--|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------------|
| Physical Environment | 66 | 21 | 78 | 9 | 31 | 85 | 94 | 54 | 14 | 44 | NDA* | NDA* |
| 26. Air pollution-particulate matter | 13.5 | 13.3 | 13.5 | 13.6 | 13.5 | 13.3 | 13.2 | 13.4 | 13.4 | 13.4 | 13.4 | 13.5 |
| 27. Drinking water violations | 0% | 10% | 0% | 0% | 0% | 0% | 14% | 0% | 0% | 0% | 2% | 7% |
| 28. Severe housing problems | 16% | 14% | 14% | 12% | 12% | 18% | 17% | 17% | 14% | 13% | 15% | 14% |
| 29. Driving alone to work | 80% | 76% | 87% | 78% | 79% | 81% | 84% | 80% | 78% | 82% | 81% | 82% |
| 30. Long commute - driving alone | 30% | 40% | 15% | 21% | 44% | 37% | 20% | 22% | 19% | 31% | 28% | 28% |
| 31. Number of housing units | 8,472 | 7,372 | 5,227 | 3,644 | 5,261 | 7,397 | 31,070 | 9,869 | 10,923 | 10,792 | 100,027 | 19,365,650 |
| 32. Home ownership rate | 73.5% | 81.1% | 77.0% | 73.7% | 75.8% | 70.9% | 70.3% | 75.8% | 70.6% | 70.6% | 73.9% | 68.7% |
| 33. Median household income | \$31,169 | \$28,416 | \$26,885 | \$29,885 | \$33,573 | \$21,758 | \$32,788 | \$29,465 | \$35,000 | \$27,646 | \$29,685 | \$42,610 |
| 34. Person below poverty level | 20.6% | 27.4% | 28.0% | 23.7% | 20.4% | 30.8% | 23.3% | 27.3% | 23.0% | 26.8% | 25.1% | 18.6% |
| 35. Mean travel time to work (min), workers age 16+ | 25 | 27.6 | 17.5 | 23 | 29 | 27.6 | 20.9 | 20.9 | 19.2 | 25.1 | 23.5 | 22.7 |

NDA* - No Data Available.

SOURCES: 26. - 30. - County Health Ranking, 2014.

31. - 35. - US Census Bureau: State and County Quick Facts. Data drived from Population Estimates, America Community Survey, Census of Population and Housing, State and County Housing Unite Estimates, Economic Census, and Building Permits, July 8, 2014.

26. Air pollution-particulate matter - the average daily measure of fine particulate matter in micrograms per cubic meter (PM2.5) in a county

27. Drinking water violations - Percentage of population potentially exposed to water exceeding a violation limit during the past year

28. Severe housing problems - Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities

29. Driving alone to work - Percent of the workforce that drives alone to work

30. Long commute-driving alone - Among workers who commute in their car alone, the percentage that commute more than 30 minutes

Kentucky Behavior Risk Factor Surveillance System (KYBRFSS)

| | District | KY |
|---|----------|-------|
| Adults who report binge drinking | 8.8% | 14.9% |
| Adults who have been diagnosed with arthritis | 37% | 35% |
| Adults who have ever had a heart attack | 6.8% | 6.6% |
| Adults who have coronary heart disease | 6.3% | 6.1% |
| Adults who have ever had a stroke | 3.1% | 4.2% |
| Adults aged 50+ who had a blood stool test within two years | 9.9% | 13.9% |
| Adults ages 50+ who ever had a sigmoidscopy or colonoscopy | 60.1% | 65.9% |
| Adults who have ever been diagnosed with depressive disorder | 24.4% | 23.5% |
| Adults who have diabetes | 12.7% | 10.7% |
| Adults who are limited in any activities because of health problems | 29.4% | 26.2% |
| Adults with health problems that require use of special equipment | 12.5% | 11.6% |
| Adults who participate in any leisure-time pysical activity | 63.9% | 70.3% |
| Adults who reported good or better health | 71.9% | 76.1% |

| | District | КҮ |
|--|----------|-------|
| Adults who have health care coverage | 79.8% | 82.9% |
| Adults aged 18-64 who have health care coverage | 74.3% | 79.1% |
| Adults aged 18-64 who have been tested for HIV | 31.3% | 30.0% |
| Adults aged 65+ who had a flu shot in past year | 53.2% | 61.8% |
| Adults aged 65+ who had pneumococcal vaccination | 50.8% | 65.6% |
| Adults aged 65+ who had all their natural teeth extracted | 30.9% | 24.8% |
| Adults who visited the dentist or dental clinic within the past year | 51.9% | 60.3% |
| Adults who are overweight (BMI = 25.0 -29.9) | 39.9% | 24.8% |
| Adults who are obese (BMI >30.0) | 34.7% | 31.3% |
| Adults who currently have asthma | 13.0% | 11.1% |
| Adults who have COPD, emphysema, or chronic bronchitis | 10.8% | 11.2% |
| Adults who are current smokers | 27.5% | 28.3% |
| Women aged 18+ who had a pap test within past three years | 73.6% | 76.6% |
| Women aged 40+ who had a mammogram within past two years | 65.7% | 71.3% |

SOURCE: KYBRFSS, 2012 percentage of total population

Kentucky Incentive for Prevention Survey (KIP)

| | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | KY |
|--------------------------------------|-------|-------|---------|---------|-------|----------|---------|---------|--------|-------|----------|-----|
| Youth smokeless tobacco - 30 day use | 19% | 24% | 28% | 16% | 16% | 24% | 18% | 12% | 14% | 19% | 19% | 13% |
| Youth cigarette - 30 day use | 27% | 30% | 15% | 15% | 21% | 26% | 21% | 25% | 25% | 21% | 23% | 18% |
| Youth alcohol - 30 day use | 23% | 23% | 15% | 30% | 14% | 26% | 34% | 26% | 27% | 25% | 24% | 25% |
| Youth marijuana - 30 day use | 11% | 14% | 6% | 8% | 6% | 9% | 17% | 11% | 21% | 14% | 12% | 14% |
| Youth inhalant - 30 day use | 2% | 1% | 2% | 6% | 1% | 3% | 4% | 2% | 4% | 4% | 3% | 2% |
| Youth inhalant - 30 day use | 2% | 1% | 2% | 6% | 1% | 3% | 4% | 2% | | | 3% | |

SOURCE: KIP, 2012 10th grade students

Infectious Disease Cases and Rates

| | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wavne | District | КҮ | USA | HP 2020 | Grade |
|--|-------|---------|---------|---------|-------|----------|---------|---------|--------|-------|----------|-------|---------|---------|-------|
| | | · · · · | | | | | | | | | | | | | |
| 1. Tuberculosis case rate | 0.0 | 0.0 | 9.7 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 4.1 | 0.0 | 1.0 | 1.8 | 3.2 | 1.0 | A |
| 2. AIDS cases, number | 6 | 7 | 7 | 4 | 6 | 8 | 44 | 8 | 13 | 7 | 110 | 7,750 | 478,862 | NDA* | NDA* |
| 3. Cryptosporidiosis | 5.4 | 18.9 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 1.9 | 2.0 | 2.7 | NDA* | NDA* |
| 4. Ehrlichiosis, Anaplasmosis | 0.0 | 0.0 | 0.0 | 14.6 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 4.8 | 1.0 | 0.4 | 0.8 | NDA* | NDA* |
| 5. Group A Streptococcal Infection, Invasive* | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 4.7 | NDA* | NDA* | NDA* |
| 6. Hepatitis A | 0.0 | 0.0 | 9.8 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 4.0 | 0.0 | 1.0 | 0.6 | 0.5 | NDA* | NDA* |
| 7. Hepatitis B, acute | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 4.0 | 0.0 | 0.5 | 3.1 | 1.1 | NDA* | NDA* |
| 8. Hepatitis C, acute | 0.0 | 12.6 | 9.8 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 23.8 | 3.8 | 2.5 | 0.3 | NDA* | NDA* |
| 9. Histoplasmosis | 0.0 | 0.0 | 9.8 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 8.1 | 0.0 | 1.4 | 1.0 | NDA* | NDA* | NDA* |
| 10. Legionellosis | 0.0 | 0.0 | 0.0 | 14.6 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.5 | 0.7 | 1.1 | NDA* | NDA* |
| 11. Listeriosis | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.2 | 0.3 | NDA* | NDA* |
| 12. Pertussis | 37.5 | 6.3 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 3.8 | 7.0 | 8.8 | NDA* | NDA* |
| 13. Rocky Mountain Spotted Fever | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.1 | 0.1 | NDA* | NDA* |
| 14. Salmonellosis | 0.0 | 0.0 | 9.8 | 0.0 | 26.7 | 0.0 | 7.9 | 11.4 | 16.2 | 28.6 | 10.1 | 13.5 | 17.5 | NDA* | NDA* |
| 15. Shiga toxin- producing E. Coli (STEC) | 5.4 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 3.1 | 0.0 | 8.1 | 0.0 | 2.4 | 1.6 | 1.8 | NDA* | NDA* |
| 16. Streptococcus Pneumoniae, invasive disease | 0.0 | 0.0 | 0.0 | 0.0 | 8.9 | 0.0 | 1.6 | 0.0 | 0.0 | 0.0 | 1.0 | 4.7 | 5.3 | NDA* | NDA* |

* Group A Streptococcal Infection, Invasive was removed from the 2010 list of Nationally Notifiable Diseases

1. Case rate per 100,000 population 2. Nunber of persons living with AIDS 3. - 16. Case rate per 100,000 population

SOURCES:

1. Kentucky Tuberculosis Program 2012 http://chfs.ky.gov/dph/epi/tb.htm. CDC Tuberculosis Cases, Case Rates per 100,000 Population, Deaths, and Death Rates per 100,000 Population, and Percent Change: United States, 1953–2012. Atlanta, GA: U.S. Department of Health and Human Services, CDC, 2012. http://www.cdc.gov/tb/statistics/reports/2012/table1.htm

2. 2009 Cumulative AIDS Cases by Area Development Districts (ADD) and County at the Time of Diagnosis; HIV Surveillance Report, Volume 22: Table 16a. Persons living with an AIDS diagnosis, by year and selected characteristics, 2007–2009—United States: http://www.cdc.gov/hiv/surveillance/resources/reports/2010report/pdf/2010_HIV_Surveillance_Report_vol_22.pdf#Page=54

3-16. Reportable Diseases in Kentucky 2011 Summary, Cabinet for Health and Family Services, Department for Public Health, Division of Epidemiology and Health Planning, http://chfs.ky.gov/dph/epi/reportablediseases.htm MMWR 2011 Reports of Nationally Notifiable Infectious Diseases; Centers for Disase Control and Prevention; http://www.cdc.gov/mmwr/preview/mmwr/html/mm6053a1.htm

Infectious Disease Cases

| | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | КҮ |
|------------|-------|-------|---------|---------|-------|----------|---------|---------|--------|-------|----------|--------|
| Syphillis* | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 3 | 0 | 5 | 335 |
| Gonorrhea* | 2 | 2 | 1 | 1 | 1 | 0 | 9 | 1 | 14 | 1 | 32 | 4,521 |
| Chlamydia* | 43 | 18 | 10 | 10 | 39 | 39 | 112 | 32 | 104 | 39 | 446 | 16,631 |

SOURCE: Kentucky Vital Statistics, 2011 * Preliminary Data numbers reported

Injuries and Crime

| Indicator | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | KY | USA | HP 2020 | Grade |
|--|-------|-------|---------|---------|-------|----------|---------|---------|--------|-------|----------|--------|---------|---------|-------|
| 1. Homicide Death Rate | 11.0 | 5.3 | 13.6 | 23.2 | 0.0 | 7.2 | 3.2 | 7.1 | 12.9 | 5.9 | 7.0 | 5.5 | 5.9 | 5.5 | D |
| 2. Suicide Death Rate | 19.3 | 0.0 | 33.6 | 36.4 | 34.0 | 18.6 | 9.5 | 9.9 | 3.3 | 8.1 | 13.1 | 13.5 | 11.6 | NDA* | С |
| 3. Motor Vehicle Death Rate | 19.1 | 12.3 | 83.6 | 14.7 | 34.4 | 11.6 | 23.0 | 17.3 | 16.6 | 19.3 | 24.2 | 19.1 | 13.1 | 12.4 | D |
| 4. Child Abuse Neglect - # of Reports | 358 | 179 | 183 | 31 | 187 | 297 | 766 | 229 | 427 | 322 | 2,979 | 63,438 | 676,569 | NDA* | NDA* |

NDA* - No Data Available.

NOTES:

1.-2. Age adjusted death rate per 100,000 U.S. standard population. 3 Crude death rate per 100,000 population. 4. Number of Child Abuse Neglect Reports.

SOURCES:

1. - 3. KY Annual Vital Statistics Report 2008 (http://chfs.ky.gov/dph/vital/) and National Vital Statistics Reports Vol. 59, No. 10, December 7, 2011 (2008 data) (http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_10.pdf) 4. Child Abuse Neglect Report by County - Prevent Child Abuse Kentucky. Statistics Provided by the Cabinet for Health and Family Services, Jan. 1, 2013 - Dec. 31, 2013 http://www.pcaky.org/stats_research.html Child Maltreatment - Administration for Children and Families - Department for Health And Human Services: http://www.acf.hhs.gov/sites/default/files/cb/cm2012.pdf

NDA* - No Data Available.

NOTES:

Chronic Illness Death Rate

| Indicator | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | КҮ | USA | HP 2020 | Grade |
|--------------------------------------|-------|-------|---------|---------|-------|----------|---------|---------|--------|-------|----------|-------|-------|---------|-------|
| 1. Heart Disease | 270.4 | 197.6 | 190.3 | 273.9 | 201.2 | 312.5 | 238.9 | 253.9 | 194.9 | 210.7 | 230.9 | 213.7 | 186.5 | 100.8 | D |
| 2. Cerebrovascular disease/stroke | 63.1 | 68.2 | 57.5 | 83.6 | 52.2 | 5.8 | 35.3 | 44.7 | 59.6 | 21.2 | 44.9 | 44.4 | 40.7 | 33.8 | D |
| 3. Diabetes | 13.5 | 11.8 | 28.2 | 0.0 | 24.5 | 56.1 | 36.0 | 31.4 | 15.8 | 12.3 | 20.1 | 25.9 | 21.8 | 65.8 | Α |
| 4. All causes | 945.7 | 991.1 | 976.4 | 1,114.4 | 850.4 | 995.2 | 904.2 | 861.7 | 829.4 | 856.6 | 909.0 | 883.6 | 758.3 | NDA* | D |

NOTES:

1-4. Age adjusted death rates per 100,000 U.S. standard population SOURCES:

1-4. KY Annual Vital Statistics Report, 2008 (http://chfs.ky.gov/dph/vital/) and National Vital Statistics Reports Vol. 59, No. 10, December 7, 2011 (2008 data) (http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_10.pdf)

Cancer Rates

| current nates | | | | | | | | | | | | | | | |
|--------------------------------------|----------|----------|-----------|----------|----------|-----------|----------|-----------|----------|----------|----------|-------|-------|---------|-------|
| Indicator | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | КҮ | USA | HP 2020 | Grade |
| 1. Cancer incidence (all) | 460.5 | 569.3 | 732.9 | 550.9 | 460.3 | 555.0 | 548.1 | 526.7 | 599.2 | 571.4 | 553.1 | 565.1 | 445.5 | NDA* | С |
| 2. Cancer (all) death rate | 177.8 | 257.7 | 222.2 | 173.9 | 219.0 | 244.8 | 227.0 | 237.4 | 214.2 | 177.0 | 217.2 | 207.2 | 171.8 | 160.6 | D |
| 3. Lung cancer incidence | 102.3 | 109.8 | 99.01*** | 66.78*** | 55.22*** | 154.9 | 110.7 | 107.8 | 102.9 | 103.0 | 106.2 | 100.1 | 61.7 | NDA* | D |
| 4. Lung cancer death rate | 50.41*** | 100.5 | 50.14*** | 59.23*** | 71.52*** | 99.8 | 93.7 | 95.2 | 87.6 | 60.4 | 81.6 | 73.8 | 47.4 | 45.5 | D |
| 5. Female breast cancer incidence | 87.67*** | 157.7*** | 198.09*** | ~ | 63.47*** | 126.87*** | 109.2 | 116.78*** | 122.3 | 106.2 | 115.0 | 145.0 | 118.7 | NDA* | A |
| 6. Female breast cancer death rate | 39.90*** | 46.03*** | ~ | 0.0*** | ~ | ~ | 14.79*** | 0.00*** | ~ | ~ | 20.2 | 21.8 | 21.9 | 20.6 | A |
| 7. Colorectal cancer incidence | 55.73*** | 100.5 | 40.78*** | 96.61*** | 34.64*** | 40.99*** | 62.0*** | 38.20*** | 72.5 | 54.4 | 59.7 | 54.4 | 40.4 | NDA* | D |
| 8. Colorectal cancer death rate | ~ | ~ | ~ | ~ | ~ | ~ | 20.2 | 37.84*** | 27.15*** | ~ | 19.5 | 17.5 | 15.5 | 14.5 | D |
| 9. Cervix/uteri cancer incidence | 0.0*** | ~ | ~ | 0.0*** | 0.0*** | 0.0*** | 14.67*** | 0.0*** | ~ | 0.0*** | 8.37*** | 8.7 | 7.5 | NDA* | С |
| 10. Cervix/uteri cancer death rate | 0.0*** | 0.0*** | 0.0*** | 0.0*** | 0.0*** | 0.0*** | 0.0*** | ~ | 0.0*** | 0.0*** | 0.0*** | 2.5 | 2.3 | 2.2 | A |
| 11. Melanoma cancer incidence | ~ | 29.47*** | 116.54*** | ~ | 60.72*** | 42.65*** | 43.9 | 40.61*** | 67.9 | 48.95*** | 48.1 | 40.5 | 19.0 | NDA* | D |
| 12. Melanoma cancer death rate | ~ | ~ | ~ | 0.0*** | 0.0*** | 0.0*** | ~ | 0.0*** | ~ | 0.0*** | 3.17*** | 3.3 | 2.7 | 2.4 | С |

***Counts < 15 are too few to calculate a stable age-adjusted rate

~Counts/rates are suppressed if fewer than 5 cases were reported in the specified category

NOTES:

1-12. Age-adjusted Incidence Rates or Crude Death Rates per 100,000 population for the U.S. Standard Population

SOURCES:

1. -12. Kentucky Cancer Registry University of Kentucky, Markey Cancer Control Program 2010 (http://cancer-rates.info/ky/index_mort.php). U.S. Cancer Statistics Working Group. United States Cancer Statistics: 2010 Incidence and Mortality Web-based Report. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute. Available at:(http://apps.nccd.cdc.gov/uscs/index.aspx)

Maternal and Child Health

| Indicator | Adair | Casey | Clinton | Cumber. | Green | McCreary | Pulaski | Russell | Taylor | Wayne | District | КҮ | USA | HP 2020 | Grade |
|---|-------|-------|---------|---------|-------|----------|---------|---------|--------|-------|----------|--------|-----------|---------|-------|
| 1. Total births | 219 | 195 | 141 | 64 | 124 | 206 | 815 | 233 | 332 | 253 | 2,582 | 56,900 | 4,247,694 | NDA* | NDA* |
| 2. Infant mortality (rate) | 4.6 | 10.3 | 7.1 | 15.6 | 8.1 | 4.9 | 7.4 | 0.0 | 6.0 | 11.9 | 7.0 | 6.9 | 6.5 | 6.0 | D |
| 3. Low weight birth (percentage) | 6.9% | 7.2% | 9.9% | 10.9% | 7.3% | 11.2% | 8.3% | 7.7% | 9.9% | 10.3% | 8.8% | 9.0% | 8.2% | 7.8% | С |
| 4. Teen births, rate | 28.8 | 62.6 | 77.5 | 65.5 | 64.8 | 83.5 | 49.6 | 57.5 | 53.1 | 72.5 | 61.5 | 38.7 | NDA* | NDA* | NDA* |
| 5. No prenatal care first trimester (percentage) | 34.3% | 28.7% | 30.0% | 41.3% | 25.0% | 24.9% | 20.1% | 26.4% | 32.2% | 22.5% | 26.3% | 27.8% | 29.0% | 22.0% | В |

NDA* - No Data Available.

NOTES:

1. Total number of births 2. Crude rate per 1,000 live births 3.Low Weight Birth = Percentage weighing less than 2500 grams (5lbs. 8 oz.) 4. Teen Births = Rate per 1,000 total births born to females ages 15-19. 5. Prenatal Care = Percentage of mothers not receiving prenatal care in the first trimester. National Data is for only selected states, including KY because the 2003 Revision of the U.S. Certificate of Live Birth after January 1, 2004. SOURCES:

1., 2., 3., 5. - KY Annual Vital Statistics Report, 2008 (http://chfs.ky.gov/dph/vital/) and National Vital Statistics Reports for Births and Deaths (http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_07_tables.pdf) (http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_01.pdf). 4. - KY Annual Vital Status Report, 2013 (Preliminary Data), Teen Births by County, Rates per 1,000

2014 Community Health Assessment References

2009 Cumulative AIDS Cases by Area Development Districts (ADD) and County at the Time of Diagnosis HIV Surveillance Report, Volume 22: Table 16a. Persons living with an AIDS diagnosis, by year and selected characteristics, 2007–2009—United States: http://www.cdc.gov/hiv/surveillance/resources/reports/2010report/pdf/2010_HIV_Surveillance_Report_vol_22.pdf#Page=54

American Community Survey, 2008-12: Some College; Children in Single Parent Households, Driving Alone to Work; Long Commute-Driving Alone

Behavioral Risk Factor Surveillance System, 2006-12: Poor or Fair Health; Poor Physical Health Day; Poor Mental Health Day; Adult Smoking; Excessive Drinking, Inadequate Social Support

Bureau of Labor Statistics, 2011; Unemployment

Center for Disease Control and Prevention (CDC) Wonder Environmental Data, 2011; Air Pollution-Particulate Matter

Center for Medicaid and Medicare Services (CMS), National Provider Identification, 2013; Mental Health Providers

Comprehensive Housing Affordability Strategy (CHAS), 2006-10; Severe Housing Problems

County Health Ranking and Roadmaps, Building a Culture of Health, County by County, 2014

Dartmouth Atlas of Health Care, 2011; Preventable Hospital Stays

Environmental Protection Agency (EPA), 2012-13

Fatality Analysis Reporting Systems, 2008-12: Alcohol Impaired Driving Deaths

Health Resource and Service Information (HRSA), Area Resource File, 2011; Primary Care Physicians; Dentist

Housing and Urban Development (HUD), Comprehensive Housing Authority Strategy, 2006-10; Severe Housing Violation

Kentucky Department for Education, 2014 Schools and District Attendance; Graduation Rates; http://education.ky.gov/comm/Pages/2013-2014-Kentucky-Schools-Directory.aspx

Kentucky Incentive for Prevention Project, 2012; Substance Use - 30 Days, 10th grade

Kentucky Cabinet for Health and Family Services, Public Health Department, Vital Statistics, 2011 (Preliminary data), Sexually Transmitted Diseases.

Kentucky Tuberculosis Program 2012 http://chfs.ky.gov/dph/epi/tb.htm. CDC Tuberculosis Cases, Case Rates per 100,000 Population, Deaths, and Death Rates per 100,000 Population, and Percent Change: United States, 1953–2012. Atlanta, GA: U.S. Department of Health and Human Services, CDC, 2012. http://www.cdc.gov/tb/statistics/reports/2012/table1.htm

Kentucky Vital Statistics Report, 2008 (http://chfs.ky.gov/dph/vital/) and National Vital Statistics Reports Vol. 59, No. 10, December 7, 2011 (2008 data) (http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_10.pdf

National Center for Educational Statistics, American Community Survey, 2010-11; High School Graduation

National Center for Health Statistics, 2008-10; Premature Death and Birth

National Center for Chronic Disease Prevention and Health Promotion, 2010; Division of Diabetes Translation; Adult Obesity; Physical Inactivity

OneSource Global Business Browser, Delorme map data, ESRI, & US Census Tigerline Files; 2008-12; Access to Exercise Opportunity

Reportable Diseases in Kentucky 2011 Summary, Cabinet for Health and Family Services, Department for Public Health, Division of Epidemiology and Health Planning, http://chfs.ky.gov/dph/epi/reportablediseases.htm MMWR 2011 Reports of Nationally Notifiable Infectious Diseases; Centers for Disease Control and Prevention; http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6053a1.htm

Safe Drinking Water Information, 2012-13; Drinking Water Violations

Small Area Income and Poverty Estimates, 2012; Children in Poverty

US Census Bureau: State and County Quick Facts, Data derived from Population Estimates, American Community Survey, July 2014; Census of Populations

US Census Bureau's Small Area Health Insurance Estimates, 2011; Uninsured

Uniform Crime Report, FBI, 2009-11; Violent Crimes

USDA Food Environmental Atlas, 2010 - 11; Map the Meal Gap Feeding American; Food Environment Index

Casey County Community Health Survey

| community health concer most pressing health pro important! If you have an 1. Do you live or wo Ves 2. Age | time to complet rns. Your local blems to addre y questions, ple | health coalition will use th | urpose of this survey is e results of this survey to complete the survey one | to get your opinion about o |
|---|--|---|--|---|
| community health concer important! If you have an 1. Do you live or wo Ves 2. Age 18-25 (3) 3. Gender | rns. Your local blems to addre y questions, ple ork in Casey | health coalition will use th ss. We ask that you only | e results of this survey to complete the survey one | |
| Ves 2. Age 18-25 (3. Gender | - | | ducator at your local hea | time only. Your opinion is |
| Ves 2. Age 18-25 (3. Gender | - | County? | | |
| 18-25 (| | - | | |
| 3. Gender | ~ | 0 | ō | 0 |
| - | 26-39 | 0 40-54 | 0 55-64 | 65 or older |
| O Male | | | | |
| | O Femal | | | |
| 4. Ethnic Group | | | | |
| White/Caucasian | | African American/Black | Hispan | nic/Latino |
| Other (please specify) | | | _ | |
| | | | | |
| 5. Language spoke | n at home | | | |
| English | | s | panish | |
| Other (please specify) | | _ | | |
| | | | | |
| 6. Marital Status: | | | | |
| Married / Living with a pa | artner | | ot married / Single/ Windowe | d |
| 7. Education: | | | | |
| Less that high school | | High school diploma or Gl | ED Colleg | e degree or highter |
| Other (please specify) | | - | 0.1 | |
| | | | | |
| 8. Is this a good cou | unty to raise | children? | | |
| () Yes | N₀ | | | |
| 9. Are you satisfied | with the be- | alth care in | | |
| Casey County? | | | | |
| () Yes | O № | | | |
| | | | | |
| | | | | |
| | Cas | ey County Comm | unity Survey | |
| 10. Is this a good co | | | | |
| O ^{Yes} | O No | | | |
| 11. What do you thi | nk are the T | hree (3) most impor | tant factors for a " | Healthy Community |
| | - | rove the quality of li | | |
| Good place to raise child | | Low disease rate | | ous or spiritual values |
| Low crime/safe neighbor | | Personal responsibility | | environment |
| Good school systems | | Parks and recreation | | iltural events |
| Easy access to healthcare | • | Quality child care | Recrei | ational facilities |
| Family/youth activities | | Excellent race relations Good jobs/healthy econor | 1V | |
| Other (please specify) | | cool jocarricality econom | 7 | |
| Coner (prease specify) | | | | |
| | | itu in the | | |
| 10.1-4 | IIC opportun | ity in the | | |
| | | | | |
| community? | | | | |
| community? | O No | | | |
| community? O Yes 13. What do you this | O No | HREE (3) most impo | ortant "health prot | lems" in Casey |
| community? Ves 13. What do you this County? | ○ № nk are the T | | _ | |
| Yes Yes Yes Yes Aging problems (e.g. atthermoder of the second se | ○ № nk are the T | HREE (3) most impo | Obesit | plems" in Casey y (children and adults) xexual assault |
| Community? Yes S. What do you this County? Aging problems (e.g. arth hearing/vision loss, etc.) Alcohol/drugs | ○ № nk are the T | Firearm-related injuries | Obesit | y (children and adults) |
| Vres Vres Vres J3. What do you this County? Aging problems (e.g. arth hearingVision loss, etc.) Alcohol/drugs Cancers | ○ № nk are the T | Firearm-related injuries | Obesit Rape/s Respir Sexua | y (children and adults) xexual assault atoryflung disease Ily Transmitted Diseases/Infection |
| Ves Ves Aging problems (e.g. arth hearingVision loss, etc.) Cancers Carcers Child abuse/neglect | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure | Obesit Rapeh Respir Sexua (STD's or ST | y (children and adults) bexual assault atorylung disease Ily Transmitted Diseases/Infection Te) |
| Community? Ves Ves 13. What do you this County? Acoholdways County County? Co | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure HIV/AIDS Infant death Infectious diseases (Hepat | Obesit Rape/s Respir Respir Sexua (STD's or ST Suicid tis, TB, etc.) | y (children and adults) vexual assault atoryflung disease Ily Transmitted Diseases/Infection T's) e |
| Community? Ves Ves 13. What do you this County? Agg problems (e.g. ath hardnytvision loss, etc.) Acoholidrugs Cancers Cancers Child abuse/neglect | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure HV/ADS Infant death Infectious diseases (Hepat Mental health problems | Obesit Rape/s Respir Respir Sexua (STD's or ST Suicid tis, TB, etc.) | y (children and adults) rexual assault atoryllung disease Ily Transmitted Diseases/Infection Ts) e ge pregnancy |
| Community? Yes I3. What do you this County? Aping problems (e.g. arth hearingvision loss, etc.) Conces Cancers Child abuse/neglect Dental problems Diabetes | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure HIV/AIDS Infant death Infectious diseases (Hepat | Dobesit Rapek Respir Sexua (STD'z or ST Suicid bis, TB, etc.) Teena | y (children and adults) rexual assault atoryllung disease Ily Transmitted Diseases/Infection Ts) e ge pregnancy |
| community? Yes 33. What do you thin County? Aging problems (e.g. atm haterignyiation (se.g. atm haterignyiation (se.g. atm cons) Child abuaterisect Dental problems Dataetes Dataetes Dataetes Voilabetes Dataetes Voilabetes | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure HV/ADS Infant death Infectious diseases (Hepat Mental health problems | Dobesit Rapek Respir Sexua (STD'z or ST Suicid bis, TB, etc.) Teena | y (children and adults) rexual assault atoryllung disease Ily Transmitted Diseases/Infection Ts) e ge pregnancy |
| community? Yes 33. What do you thi County? 44/99 problems (e.g. atm haterignyiation iss. atc.) Child abuse herged: Child abuse herged: Dental problems Dataetes Dental problems Dataetes Amount of the second of | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure HV/ADS Infant death Infectious diseases (Hepat Mental health problems | Dobesit Rapek Respir Sexua (STD'z or ST Suicid bis, TB, etc.) Teena | y (children and adults) rexual assault atoryllung disease Ily Transmitted Diseases/Infection Ts) e ge pregnancy |
| community? Yes 33. What do you thi County? 44/99 problems (e.g. atm haterignyiation iss. atc.) Child abuse herged: Child abuse herged: Dental problems Dataetes Dental problems Dataetes Amount of the second se | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure HV/ADS Infant death Infectious diseases (Hepat Mental health problems | Dobesit Rapek Respir Sexua (STD'z or ST Suicid bis, TB, etc.) Teena | y (children and adults) rexual assault atoryllung disease Ily Transmitted Diseases/Infection Ts) e ge pregnancy |
| County? Application loss, etc.) Accholidrugs Cancers Child abuse/neglect Dental problems Diabetes Omentic Violence Fam eelated accidents | ○ № nk are the T | Firearm-related injuries Heart disease/stroke High blood pressure HV/ADS Infant death Infectious diseases (Hepat Mental health problems | Dobesit Rapek Respir Sexua (STD'z or ST Suicid bis, TB, etc.) Teena | y (children and adults) rexual assault atoryllung disease Ily Transmitted Diseases/Infection Ts) e ge pregnancy |

| | What are the THREE (3 | | <u>County Co</u> risky beha | | | | unty? |
|---|---|---------|---|----------------------------|--|--------------------------------|--|
| | Alcohol/drug use | | | | Not using seath | elts/chil | i safety seats |
| _ | Being Overweight | | | _ | Racism | | |
| _ | Dropping out of school | | | | lobacco use | | |
| | Not getting 'shots' to prevent disease | | | | Jnsafe sex | | |
| | Not using birth control | | | | | | |
| | Other (please specify) | | | | | | |
| [| | | | | | | |
| ~ | How would you rate Ca Very healthy Healthy | - | | | thy Comn | | _ |
| - | - | | - | | , 01 | eaiti | ., U very unnearthy |
| - | How would you rate yo Very healthy Healthy | | Sonal health Somew | | Ithy O | Jnhealth | y Very unhealthy |
| ~ | What do you do to help | | 0 | | 0 | | 0 |
| _ | Exercise at least 3 times a week | mainte | in your own | _ | Avoid tobacco | | |
| | Limit soda and sugary drinks | | | _ | Eat healthy sna | | |
| | Avoid second hand smoke | | | _ | Jse portion cor | | reals |
| _ | Take prescription drugs as prescribed | | | _ | .imit fatty/fried | | |
| | Eat a least 5 fruits & vegetables daily | | | - | Take prescriptio | | as prescribed |
| = | Attend Health Fairs | | | | | | |
| 18 | What group needs the r | nost he | aln with acc | | o health | ara | in Casey County? |
| | oose one) | | | | • | | |
| | Low-income families | | | | Children/infant | | |
| | Immigrants/refugees | | | | Young adults | | |
| | Elderly | | | | Ainority groups | (e.g.Afi | ican American, Hispanic) |
| | Physically/mentally disabled | | | | | | |
| | Other (please specify) | | | | | | |
| [| | | | | | | |
| 19.1 | Have you seen a doctor | /health | care | | | | |
| prov | vider in the last 12 mon | | | | | | |
| 0 | Yes O | No | | | | | |
| | | Casor | County Co | 00000 | | Nev | |
| | How many times have | | | | | | ed the Emergency Room |
| in th | he past 12 months? | | _ | | _ | | _ |
| 0 | 1-2 times 3-5 time | s | 0 6 or mo | re | 0 | lone | Don't remember |
| 21.1 | When you need health s | ervice | s how do yo | u ge | there? (| chec | k all that apply) |
| | Personal Ambulance | | Walk | | Share ride | | R-Tec Taxi |
| vehic | | | | | | | |
| Ц | Other (please specify) | | | _ | | | |
| Į | | | | | | | |
| 22. (| Check the items below | that yo | u feel are a | barri | er to heal | th ca | re in our community. |
| | Doctor office hours | _ | Transportation | | | | Health beliefs |
| | Discrimination | | Health knowledge | • | | | Culture/language |
| | Insurance (lack of) | | Stigma | | | | Lack of childcare |
| | Insurance (failure to accept) | | Cost/expenses | | | | Unemployment |
| | Other (please specify) | | | | | | |
| | | | | | | | |
| | When choosing a resta | urant d | io you prefe | r sm | oke | | |
| free | | () № | | | | | |
| - | | - | | | | | |
| | Do you think Casey Co acco free? | unty S | chools shou | ild be | • | | |
| () | | () № | | | | | |
| 0 | | 0 | | | | | |
| | What preventative heal | | | use | | | Durate Surg |
| | Vaccinations/shots | - | Breast exam | | | | Prostate Exam |
| | Colonoscopy | | Yearly physical | | | | Skin exam |
| _ | Yearly lab work | | Mammography | | | _ | Educational programs |
| _ | Family planning | | Pap smear | | | | Support groups |
| | Other (please specify) | | | | | | |
| | | _ | | | | | |
| [| To improve the health o | | County County Co | | | rvey | |
| 26 | | | mat ca | | | | |
| | - | | | | Aore exercise : | laces | |
| | Increase dental health Mental/emotional health access | | | | Nore exercise p | | |
| | Increase dental health | | | | | hy foods | |
| | Increase dental health Mental/emotional health access | | | | Access to healt | hy foods | |
| | Increase dental health Mental/emotional health access Immunization services | | <u>×</u> | | Access to healt | hy foods | |
| | Increase dental health Mental/emotional health access Immunization services Other (please specify) | | × | | Access to healt | hy foods | ds |
| 27. | Increase dental health Mental/emotional health access Immunization services Other (please specify) In your opinion, what is | the be | st way to ac | | Access to healt | hy foods | |
| 27. I | Increase dental health Mental/emotional health access Immunization services Other (please specify) In your opinion, what is unty? | the be | st way to ac | | Access to healt | hy foods | ds |
| 27. Cou | Increase dental health Mental/emotional health access Immunization services Other (please specify) In your opinion, what is | | est way to ad | ddres | Access to healt | hy foods care ner | ds |
| 27. Cou | Increase dental health Mentaliemotional health access Immunization services Other (please specify) In your opinion, what is pose one) | | | ddres | Access to health Special health | hy foods care ner | eeds of people in Casey |
| 27. Cou (cha | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is unty? oose one) More exercise opinons | | Access to healthy | ddres | Access to health Special health | hy foods care ner | eeds of people in Casey Quitsmoking classes |
| 27. Cou (cha | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is pose one) More exercise options Diabetes education | | Access to healthy More primary care | ddres | Access to health Special health | hy foods care ner | eeds of people in Casey Quitsmoking classes |
| 27. Cou (cha | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is inty? pose one) More service softons Diabetes education Nutrition education | | Access to healthy More primary care | ddres | Access to health Special health | hy foods care ner | eeds of people in Casey Quitsmoking classes |
| 27. Cou (cha | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is inty? pose one) More service softons Diabetes education Nutrition education | | Access to healthy More primary care | ddres | Access to health Special health | hy foods care ner | eeds of people in Casey Quitsmoking classes |
| 27. Cou (cha | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is inity? poise one) More exercise explores Diabetes education Nutrition education Other (please specify) Do you exercise? | | Access to healthy More primary care Smoke-free laws | ddres | Access to health Special health | hy foods care new alth n | eeds of people in Casey Quitsmoking classes |
| 27. Cou (cha | Increase dental health Mental/emotional health access Immunization services Other (please specify) In your opinion, what is inity? poose one) More exercise eptions Diabetes education Natrition education Other (please specify) Do you exercise? Yes | | Access to healthy More primary care Smoke-free laws | foods e doctor | Access to health | hy foods care new alth n | eeds of people in Casey Out smoking classes More specialitis |
| 27. Cou (cha | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is inity? poise one) More exercise explores Diabetes education Nutrition education Other (please specify) Do you exercise? | | Access to healthy More primary care Smoke-free laws | foods e doctor | Access to health | hy foods care new alth n | eeds of people in Casey Out smoking classes More specialitis |
| 27. Cou (cha 28. 28. 29. | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is innty? oose one) More exercise options Dabetes education Natrition education Other (please specify) Do you exercise? Yes If you exercise where d | | Access to healthy More primary care Smoke-free laws | foods e doctor | Access to health | hy foods care new alth n | eeds of people in Casey Out smoking classes More specialitis |
| 27. Cou (cha 28. 29. 30. | Increase dental health Mentalemotional health access Immunitation services Other (please specify) In your opinion, what is Dole one opinion, what is Dobe one opinion, what is Dobe one opinion, what is Dabetes education Natificin education Other (please specify) Too you exercise? Yes If you exercise where d Do you attend church? | | Access to healthy More primary care Smoke-free laws No No | foods e doctor | Access to health | alth n | eeds of people in Casey Out smoking classes More specialists |
| 27. 1 Cour (chc 28. 1 29. 1 30. | Increase dental health Mentalemotional health access Immunitation services Other (please specify) In your opinion, what is Dose one) More exercise options Dashetes education Natrition education Other (please specify) Do you exercise? Yes If you exercise where d Do you attend church? Yes | 0 you e | Access to healthy More primary care Smoke free laws) No exercise? (P | ddres foods e doctor | Access to health Special health as the heat a | hy foods aith n | eeds of people in Casey Out smaling classes More specialists |
| 27.1 Cou (chc 28.1 29.1 30.1 31.1 | Increase dental health Mentalemotional health access Immunization services Other (please specify) In your opinion, what is inity? poose one) Mere exercise options Diabetes education Nutrition education Other (please specify) Do you exercise? Yes If you exercise where d Do you attend church? Yes | 0 you e | Access to healthy More primary care Smoke free laws) No exercise? (P | ddres foods e doctor | Access to health Special health as the heat a | hy foods aith n | eeds of people in Casey Out smoking classes More specialists |
| 27.1 Cou (chc 28.1 29.1 30.1 31.1 | Increase dental health Mentalemotional health access Immunitation services Other (please specify) In your opinion, what is Dose one) More exercise options Dashetes education Natrition education Other (please specify) Do you exercise? Yes If you exercise where d Do you attend church? Yes | 0 you e | Access to healthy More primary care Smoke free laws) No exercise? (P | ddres foods e doctor | Access to health Special health as the hea a | hy foods aith n | eeds of people in Casey Out smaling classes More specialists |

Casey County Community Health Survey (Spanish)

| | Case | y County Comm | unity Survey | |
|--|--|--|--|---|
| Thank you for taking the | time to complete | the survey below. The p | urpose of this survey is | to get your opinion about ou |
| community health conce | erns. Your local he | alth coalition will use th | e results of this survey | to assist in determining the time only. Your opinion is |
| most pressing health pr important! If you have a | oblems to address ny questions, plea | s. We ask that you only se contact the Health E | complete the survey on ducator at your local he | e time only. Your opinion is alth department. |
| | | | | |
| 1. Do you live or w | | County? | | |
| () Yes | O № | | | |
| 2. Age | | | | |
| | 26-39 | 0 40-54 | 0 55-64 | 65 or older |
| 0 10:20 | 0 20:39 | 0 40/04 | 0 55-64 | |
| 3. Gender | | | | |
| Male | Female | | | |
| | 0 | | | |
| 4. Ethnic Group | _ | _ | _ | |
| White/Caucasian | L | African American/Black | Hispa | nic/Latino |
| Other (please specify) | | | | |
| | | | | |
| 5. Language spoke | en at home | | | |
| _ • • • | in at nome | Π. | | |
| English | | | panish | |
| Other (please specify) | | | | |
| | | | | |
| 6. Marital Status: | | | | |
| Married / Living with a p | partner | | ot married / Single/ Windowe | d |
| • | | 0. | | |
| 7. Education: | | | | |
| Less that high school | C | High school diploma or Gl | ED Colleg | e degree or highter |
| Other (please specify) | | | | |
| | | | | |
| B. Is this a good co | unty to raise | children? | | |
| | | children | | |
| () Yes | O No | | | |
| 9. Are you satisfied | with the heat | th caro in | | |
| Casey County? | i with the hear | th care in | | |
| - | \sim | | | |
| | () No | | | |
| | 0 | | | |
| | 0 | | | |
| () Yes | 0 | | | |
| | | y County Comm | unity Survey | |
| | Case | | unity Survey | |
| 10. Is this a good c | Case | | unity Survey | |
| 10. Is this a good c | Case community to g | grow old? | | Healthy Community? |
| 10. Is this a good c Ves 11. What do you thi | Case community to g No ink are the Th | grow old? ree (3) most impor | tant factors for a ' | 'Healthy Community? |
| 10. Is this a good c Yes 11. What do you thi Those factors whi | Case community to g ○ № ink are the Thi ch most impro | grow old? ree (3) most impor ove the quality of li | tant factors for a ' fe in a community |): |
| 10. Is this a good c Yes 11. What do you thi Those factors whi | Case community to g No ink are the Thi ich most impro | grow old? ree (3) most impor ove the quality of li | tant factors for a ' fe in a community Religie |): |
| 10. Is this a good c Yes 11. What do you thi Those factors whi | Case community to g No ink are the Thi ich most impro | grow old? ree (3) most impor ove the quality of li | tant factors for a ' fe in a community Religit Clean |): bus or spiritual values environment |
| 10. Is this a good c Yes 11. What do you thi Those factors whi | Case community to g No ink are the Th ich most impro | grow old? ree (3) most impor ove the quality of li | tant factors for a ' fe in a community Religit Clean |): |
| 10. Is this a good c Yes 11. What do you thi Those factors whi Good place to raise chil Low crime/safe neighbo | Case community to g No ink are the Th ich most impro | grow old? ree (3) most impor ove the quality of li Low disease rate | tant factors for a ' fe in a community Religi Clean drukci |): bus or spiritual values environment |
| 10. Is this a good c Yes 11. What do you thi Those factors whi God place to raise chi Low crime/safe neighbo | Case community to g No ink are the Th ich most impro | grow old? ree (3) most impor the quality of li Low disease rate Personal responsibility Parks and recreation | tant factors for a ' fe in a community Religi Clean drukci | environment ultural events |
| | Case community to g No ink are the Th ich most impro | grow old? ree (3) most impor ove the quality of li Low disease rate Personal responsibility Parks and recreation Quality child care | tant factors for a ' fe in a community Ciean Artsici Recre | environment ultural events |
| I. Is this a good of Ves Ves I. What do you thi Those factors whil Coor place to raise chil Low crimesate neighbo Good shoto system Good shoto system Familyyouth activities Afforeable housing | Case community to g No ink are the Th ich most impro | grow old? ree (3) most impor ove the quality of li Low disease rate Personal responsibility Parks and recreation Quality child care Escellent race relations | tant factors for a ' fe in a community Ciean Artsici Recre | environment ultural events |
| | Case community to g No ink are the Th ich most impro | grow old? ree (3) most impor ove the quality of li Low disease rate Personal responsibility Parks and recreation Quality child care Escellent race relations | tant factors for a ' fe in a community Ciean Artsici Recre | environment ultural events |
| | Case community to g No ink are the Th ich most impro | grow old? ree (3) most impor ove the quality of li Low disease rate Personal responsibility Parks and recreation Quality child care Escellent race relations | tant factors for a ' fe in a community Ciean Artsici Recre | environment ultural events |
| | Case community to g No ink are the Thi ch most impro- timen [re [re [community] | grow old? ree (3) most impor voe the quality of ii low disease rate Personal responsibility Personal recession Quality child care Excellent race relations Good jobs/healthy econor | tant factors for a ' fe in a community Ciean Artsici Recre | environment ultural events |
| | Case community to g No ink are the Thi ch most impro- timen [re [re [community] | grow old? ree (3) most impor voe the quality of ii low disease rate Personal responsibility Personal recession Quality child care Excellent race relations Good jobs/healthy econor | tant factors for a ' fe in a community Ciean Artsici Recre | environment ultural events |
| | Case community to no ink are the Th ch most impro- inter the Th ch most impro- inter the Th ch most impro- inter the Th ch most impro- inter the the the ch most impro- ch | grow old? ree (3) most impor voe the quality of ii low disease rate Personal responsibility Personal recession Quality child care Excellent race relations Good jobs/healthy econor | tant factors for a ' fe in a community Ciean Artsici Recre | environment ultural events |
| | Case community to o No ink are the Th ch most impro- tere re re nic opportunit | grow old? ree (3) most impor vov the quality of il persona responsibility Peris and recreation Quity child care Excellent rac relations Good jobs/healthy econor y in the | tant factors for a ' fe in a community Clean Recro Y |); ous or spinhaal values environment uhural events adional facilities |
| | Case community to o No ink are the Th ch most impro- tere re re nic opportunit | grow old? ree (3) most impor vov the quality of il persona responsibility Peris and recreation Quity child care Excellent rac relations Good jobs/healthy econor y in the | tant factors for a ' fe in a community Clean Recro Y |); ous or spinhaal values environment uhural events adional facilities |
| | Case community to o No ink are the Th ch most impro- tere re re nic opportunit | grow old? ree (3) most impor vov the quality of il persona responsibility Peris and recreation Quity child care Excellent rac relations Good jobs/healthy econor y in the | tant factors for a ' fe in a community Clean Recro Y |); ous or spinhaal values environment uhural events adional facilities |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor vov the quality of il persona responsibility Peris and recreation Quity child care Excellent rac relations Good jobs/healthy econor y in the | tant factors for a ' fe in a community Clean Clean Recre 7 rtant "health prol |); ous or spinhaal values environment uhural events adional facilities |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor ve the quality of ii Low disease rate Personal represent Quality child care Couldry child care Could care Couldry child care Could care | tant factors for a ' fe in a community clean clean Rece v v v |): us or spiritual values environment attornal facilities statornal facilities |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor ve the quality of ii Double the quality of ii Double the quality of ii Petronal reportability Petronal reportability Petronal reportability Petronal reportability Petronal reportability reportability petronal reportability petrona | tant factors for a ' fe in a community Clean Artsco Rece y y y y y y y artant "health prol Obesi Rapei |): ous or sporthaal values environment attarial events attarianal facilities olems" in Casey y(children and adults) |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor vov the quality of ili Coor disease rate Personal reposability Perks and recreation Quity ohid care Excellent race relations Good jobs/healthy econor y in the REE (3) most impor Person-related injuries Heat disease/tinke High blood pressure | tant factors for a ' fe in a community Clean Attalu Rece Y Y |): us or spirituati values environment durat events statomal facilities Diems" in Casey y (christen and adults) excutal assaut atorylung disease |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor voe the quality of it Low disease rate Personal reposability Parks and recreation Quality child care Country child ca | tant factors for a ' fe in a community Clean Attalu Rece Y Y |): ous or spiritual values environment attarial events attariant facilities Diems" in Cassey y (children and adults) exerual asstudt attorylung disease by Transmitte Diseasestinfrection |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor ve the quality of ii duality of ii duality of ii oud dease rela Personal responsibility Personal responsibility Personal responsibility Personal responsibility Personal responsibility Personal responsibility (Coordination of the second of | tant factors for a ' fe in a community Clean Article Recre y v trant "health prol Repei Repei Repei Repei Sexa (STO et ST Sexa Sexa Sexa Sexa Sexa Sexa Sexa Sexa |): ous or spirihaal values environment attornal facilities statornal facilities olems" in Casey y (children and adults) texcual assault atoryhing disease b) Transmitted Diseasesbihlection (rs) |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor (box disasses rate Personal reposability Parts and recreation Guilty child care Excellent race relations Good jobs/healthy econor y in the REEE (3) most impor Fream-related injuries High blog resure High blog res | tant factors for a ' fe in a community clean distance recever v v v v v v v v v v v v v v v v v v |): us or spiritual values environment ditural events attornal facilities blems" in Casey y (chidren and adults) executa assaul attorylung disease by Transmitte Diseases/infectione ro |
| | Case community to g No ink are the Thi the most impre- timent are the Thi re nic opportunit No ink are the TH | grow old? ree (3) most impor ve the quality of ii duality of ii duality of ii oud dease rela Personal responsibility Personal responsibility Personal responsibility Personal responsibility Personal responsibility Personal responsibility (Coordination of the second of | tant factors for a ' fe in a community clean distance for a community clean distance memory for tant "health proi distance distance for set stance distance for set stance dis |): us or spiritual values environment titural events stational facilities blems" in Casey y (children and adults) tescual assault atoryling disease by Transmitted Diseases/Infections rs) e ge pregnancy |
| | Case community to g No ink are the Th ch most impre- inter are the Th re re nic opportunit nic opportunit nic are the TH thris, | grow old? ree (3) most impor (box disasses rate Personal reposability Parts and recreation Guilty child care Excellent race relations Good jobs/healthy econor y in the REEE (3) most impor Fream-related injuries High blog resure High blog res | tant factors for a ' fe in a community clean distance recever v v v v v v v v v v v v v v v v v v |): us or spiritual values environment titural events stational facilities blems" in Casey y (children and adults) tescual assault atoryling disease by Transmitted Diseases/Infections rs) e ge pregnancy |
| | Case community to g No ink are the Th ch most impre- inter are the Th re re nic opportunit nic opportunit nic are the TH thris, | grow old? ree (3) most impor voe the quality of it parsand receation Courd disase rate Personal reposability Parts and receation Could press and receation The second press and press | tant factors for a ' fe in a community clean distance for a community clean distance memory for tant "health proi distance distance for set stance distance for set stance dis |): us or spiritual values environment titural events stational facilities blems" in Casey y (children and adults) tescual assault atoryling disease by Transmitted Diseases/Infections rs) e ge pregnancy |
| | Case community to g No ink are the Th ch most impre- inter are the Th re re nic opportunit nic opportunit nic are the TH thris, | grow old? ree (3) most impor voe the quality of it parsand receation Courd disase rate Personal reposability Parts and receation Could press and receation The second press and press | tant factors for a ' fe in a community clean distance for a community clean distance memory for tant "health proi distance distance for set stance distance for set stance dis |): us or spiritual values environment titural events stational facilities blems" in Casey y (children and adults) tescual assault atoryling disease by Transmitted Diseases/Infections rs) e ge pregnancy |
| | Case community to g No ink are the Th ch most impre- inter are the Th re re nic opportunit nic opportunit nic are the TH thris, | grow old? ree (3) most impor voe the quality of it parsand receation Courd disase rate Personal reposability Parts and receation Could press and receation The second press and press | tant factors for a ' fe in a community clean distance for a community clean distance memory for tant "health proi distance distance for set stance distance for set stance dis |): us or spiritual values environment titural events stational facilities blems" in Casey y (children and adults) tescual assault atoryling disease by Transmitted Diseases/Infections rs) e ge pregnancy |
| | Case community to g No ink are the Th ch most impre- inter are the Th re re nic opportunit nic opportunit nic are the TH thris, | grow old? ree (3) most impor voe the quality of it parsand receation Courd disase rate Personal reposability Parts and receation Could press and receation The second press and press | tant factors for a ' fe in a community clean distance for a community clean distance memory for tant "health proi distance distance for set stance distance for set stance dis |): us or spiritual values environment titural events stational facilities blems" in Casey y (children and adults) tescual assault atoryling disease by Transmitted Diseases/Infections rs) e ge pregnancy |

| Being Overweight | | | Not using se | arch | , |
|---|--|---|---|-------------------------|---|
| Dropping out of school | | | Tobacco use | | |
| Not getting 'shots' to prevent diseas | se | | Unsafe sex | | |
| Not using birth control | | | | | |
| Other (please specify) | | | | | |
| 15. How would you rate C | Casey C | ounty as a " | Healthy Com | munit | y?" |
| Very healthy Healt | thy | | hat healthy |) Unheat | ~ |
| 16. How would you rate y Very healthy Healt | - | | - |) Unheat | hy Very unhealthy |
| • • | | 0 | 0 | | |
| 17. What do you do to hel | p mainta | ain your owr | _ | | |
| Exercise at least 3 times a week Limit soda and sugary drinks | | | Eat healthy s | | 5 |
| Avoid second hand smoke | | | Use portion | | meals |
| Take prescription drugs as prescribe | ed | | Limit fatty/fri | ed foods | |
| Eat a least 5 fruits & vegetables da | sily | | Take prescri | ption drug | s as prescribed |
| Attend Health Fairs | | | | | |
| 18. What group needs the | most h | elp with acc | ess to healt | h care | in Casey County? |
| (choose one) | | | Children/infa | unte | |
| Low-income families | | | Young adult | | |
| Elderly | | | - | | frican American, Hispanic) |
| Physically/mentally disabled | | | | | |
| Other (please specify) | | | | | |
| | | | | | |
| 19. Have you seen a docto | | n care | | | |
| provider in the last 12 mo | | | | | |
| O Yes C |) No | | | | |
| | | | ommunity S | | |
| 20. How many times have in the past 12 months? | | | | | sed the Emergency Room |
| 1-2 times 0 3-5 ti | mes | () 6 or mc | re C |) None | Don't remember |
| | | 0 | | | 0 |
| 21. When you need health Personal Ambulance | | es how do yo | Share ride | | R-Tec Taxi |
| vehicle | - L | 1 | | | |
| Other (please specify) | | | | | |
| | | | | | |
| 22. Check the items belov | v that yo | ou feel are a | barrier to he | alth c | are in our community. |
| Doctor office hours | | Transportation | | _ | Health beliefs |
| Discrimination | Ē | Health knowledge | • | | Culture/language |
| Insurance (lack of) Insurance (failure to accept) | | Stigma | | _ | Lack of childcare |
| Other (please specify) | | Cost/expenses | | | Unemployment |
| | | | | | |
| 23. When choosing a rest | aurant | lo you prefe | r smoke | | |
| iree? | _ | | | | |
| ⊖ _{Yes} | O NO | | | | |
| 24 Do you think Casey C | ounty S | chools shou | ıld be | | |
| L4. Do you think ousey o | | | | | |
| tobacco free? | <u> </u> | | | | |
| tobacco free? | O № | | | | |
| tobacco free? Ves Ves Ves | alth serv | - | use? | _ | 1 |
| tobacco free? Ves Ves Ves Vaccinations/shots | alth serv | Breast exam | use? | | Prostate Exam |
| Yes Yes Veccinations/shots Colonescopy | alth serv | Breast exam Yearly physical | use? | | Skin exam |
| Ves Vacinations/ands/ Ves Vacinations/ands Colonecopy Vacinations/ands | alth ser | Breast exam Yearly physical Mammography | use? | | |
| Yes Yes Veccinations/shots Colonescopy | alth ser | Breast exam Yearly physical | use? | | Skin exam Educational programs |
| Ves Ves Ves Ves Colonecopy Vesy | alth ser | Breast exam Yearly physical Mammography | use? | | Skin exam Educational programs |
| Ves Ves Ves Ves Colonecopy Vesy | alth ser | Breast exam Yearly physical Mammography Pap smear | | | Skin exam Educational programs Support groups |
| Ves 25. What preventative here Vacinations/india Colonaccopy Yearly lab work Family planning Other (please specify) | alth ser | Breast exam Yearly physical Mammography Pap smear / County C | ommunity S | | Skin exam Educational programs Support groups |
| Ves 25. What preventative here Vacinations/india Colonaccopy Yearly lab work Family planning Other (please specify) | alth ser | Breast exam Yearly physical Mammography Pap smear / County C | ommunity S | | Skin exam Educational programs Support groups |
| Colonacco free? Ves Vacinations/ahots Colonaccopy Vacinations/ahots Colonaccopy Vacinations/ahots Colonaccopy Vacinations/ahots Colonaccopy Colonaccop | alth ser | Breast exam Yearly physical Mammography Pap smear / County C | ommunity S an we do? More exercit Access to he | Survey te places | Skin exam Educational programs Support groups |
| Colonacco free? Ves Ves Colonacopy Vacinations/ahots Colonacopy Vacinations/ahot Colonacopy Vacinations/ahot Colonacopy Colonac | alth ser | Breast exam Yearly physical Mammography Pap smear / County C | ommunity S an we do? | Survey te places | Skin exam Educational programs Support groups |
| Colonacco free? Ves Vacinations/ahots Colonaccopy Vacinations/ahots Colonaccopy Vacinations/ahots Colonaccopy Vacinations/ahots Colonaccopy Colonaccop | alth ser | Breast exam Yearly physical Mammography Pap smear / County C | ommunity S an we do? More exercit Access to he | Survey te places | Skin exam Educational programs Support groups |
| Colonacco free? Ves Ves Colonacopy Vacinations/ahots Colonacopy Vacinations/ahot Colonacopy Vacinations/ahot Colonacopy Colonac | alth ser | Breast exam Yearly physical Mammography Pap smear / County C | Ommunity S an we do? More exercis Access to he Special heat | Survey te places | Skin exam Educational programs Support groups |
| Cohoacco free? Ves Ves Cohoacco free? Ves Cohoaccopy Vearly lab work Family planning Other (please specify) Cohoacces Innouscide and health Increase dental health Mertal/emotional health access Other (please specify) Cohor (please sp | Case) | Breast exam Yearly physical Mammography Pap amear / County C Irren what ci | ommunity S an we do? More exerci Access to he Special heat | e places the care ne | Skin snam Educational programs Support groups / |
| Cobacco free? Yes Ves Cobacco free? Yes Cobacco free? Ves Cobacco free? | Case) | Breast exam Yearly physical Mammography Pap amear / County C Irren what ci | ommunity S an we do? More exerci Access to he Special heat | e places the care ne | Skin snam Educational programs Support groups / |
| Choose one) Choose one | Casey of Child | Breast exam Yearly physical Manmography Pap smear / County C dren what co | ommunity S an we do? More exercit Access to he Special heal | e places salthy food | Stan exam Educational programs Support groups / / s eds |
| Colonacco free? Yes Ves Colonacco free? Ves Colonacco free? Ves Colonacco Colon | Casey of Child | Breast exam Yearly physical Mamography Pap amear / County C rren what cr Basst way to an Access to healthy | ommunity S an we do? More exercis Access to be Special head | e places althy food | Stan exam Educational programs Support groups / / s reeds reeds of people in Casey Cut smaking classes |
| Choose one) Choose one | Casev Casev of Child | Breast exam Yearly physical Manmography Pap smear / County C dren what co | ommunity S an we do? More exercis Access to be Special head | e places althy food | Stan exam Educational programs Support groups / / s eds |
| | Casev Casev of Child | Breast exam Yearly physical Mammography Pap amear County C Fren what cr fren what cr bast way to a Access to healthy More primary can | ommunity S an we do? More exercis Access to be Special head | e places althy food | Stan exam Educational programs Support groups / / s reeds reeds of people in Casey Cut smaking classes |
| Cobacco free? Yes Yes Yes Yes Yes Statutorial preventative her Yes Yes Statutorial preventative her Coonsecopy Yeany tab work Family planning Other (please specify) Cober (please specify) Heratemotional health access Immunization services Other (please specify) Cober (please specify) Meratemotional health access Immunization services Other (please specify) Cober (| Casev Casev of Child | Breast exam Yearly physical Mammography Pap amear County C Fren what cr fren what cr bast way to a Access to healthy More primary can | ommunity S an we do? More exercis Access to be Special head | e places althy food | Stan exam Educational programs Support groups / / s reeds reeds of people in Casey Cut smaking classes |
| Chobacco free? Yes Ves Ves Connecopy | Casev Casev of Child | Breast exam Yearly physical Mammography Pap amear County C Fren what cr fren what cr bast way to a Access to healthy More primary can | ommunity S an we do? More exercis Access to be Special head | e places althy food | Stan exam Educational programs Support groups / / s reeds reeds of people in Casey Cut smaking classes |
| | Caseee of Child | Breast exam Yearly physical Mammography Pap amear County C Fren what cr fren what cr bst way to a Access to healthy More primary can | ommunity S an we do? More exercis Access to be Special head | e places e alth i | Stan exam Educational programs Support groups / / s reeds reeds of people in Casey Cut smaking classes |
| | Caseed of Child | Breast exam Yearly physical Mamography Pap smear / County C Growthy C irren what c: | ommunity S an we do? More exercit Access to be Special heat ddress the h | ealth | Skin exam Educational programs Support groups / / s exds meeds of people in Casey Out amoling classes More specialists |
| | Caseed of Child | Breast exam Yearly physical Mamography Pap smear / County C Growthy C irren what c: | ommunity S an we do? More exercit Access to be Special heat ddress the h | ealth | Skin exam Educational programs Support groups / / s exds meeds of people in Casey Out amoling classes More specialists |
| biobacco free? Yes 25. What preventative here Woonations/holds Colonecopy Yes/Vacinations/holds Colonecopy Yes/Vacinations/holds Colonecopy Yes/Vacinations/holds Colonecopy Yes/Vacinations/holds Colonecopy Yes/Vacinations/holds Cher (please specify) Z6. To improve the health Increase dental health Mertai/emotional health access Immunization services Other (please specify) Z7. In your opinion, what if County? (choose one) More exercise options Other (please specify) Z8. Do you exercise? Yes 28. Do you exercise where 30. Do you attend church | Case() Ca | Breast exam Yearly physical Mammography Pap amear / County C frem what cri sets way to an Access to healthy More primary can Smoke free laws) No | ommunity S an we do? More exercit Access to be Special heat ddress the h | ealth i | Skin exam Educational programs Support groups (|
| Ves Ves Ves Ves Ves Ves Ves Ves Conneccoy Ves Conneccoy Ves Overnations/indes Conneccoy Ves Ves Ves Overnations/indes Conneccoy Ves Ves Ves Ves Ves Other (please specify) Conneccos Other (please specify) Distributed of the other of the other of the other of the other o | Case() Ca | Breast exam Yearly physical Mamography Pap smear / County C Growthy C irren what c: | ommunity S an we do? More exercit Access to be Special heat ddress the h | ealth i | Skin exam Educational programs Support groups / / s exds meeds of people in Casey Out amoling classes More specialists |



2014 Community Health Assessment CASEY COUNTY

A Healthy Today for a Brighter Tomorrow.

www.LCDHD.org





