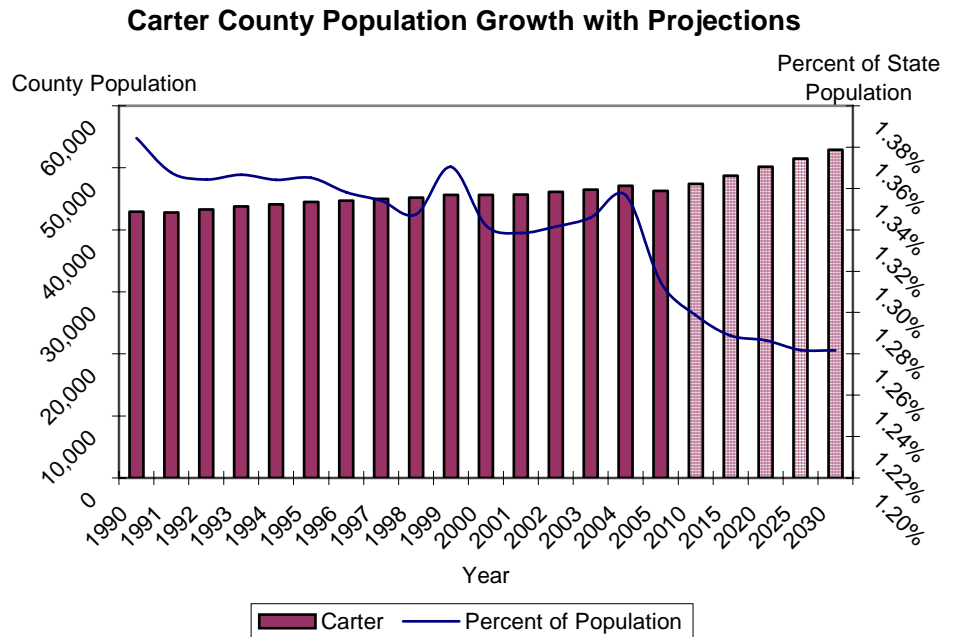


Demographics

* U.S. Census Bureau

- Population estimates
 - 6% increase from 1990 to 2000 (42,919 to 45,621)
 - 3% increase from 2000 to 2004
 - Ranked 14th for growth in state
- 2000 Census
- Hispanic/Latino ethnicity = 3%
- Race
 - Whites = 78%
 - Native Americans = 8%
 - Blacks = 8%
 - Other/Multiple = 6%
- Age
 - Under 5 = 7%
 - Over 64 = 16%
 - Median age = 38.0 years
- Housing units
 - Occupied = 17,992 (87%)
 - Vacant = 2,585 (13%)
- Disability (ages 21 to 64) = 25.0% national = 19.2% state = 21.5%
- Individuals below poverty = 16.6% national = 12.4% state = 14.7%



* Vital Statistics, Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Carter County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,135 people in Carter County and

is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost \$400,000 is spent on each heart disease-related death. With an average of 197.5 deaths a year, heart disease accounts for almost \$73 million a year in medical costs

Heart disease accounts for almost \$73 million a year in medical costs in Carter County.

in Carter County.

Alzheimer's disease and the complications associated with it have decreased from the 11th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older but accounted for a 106% increase in deaths.

* Behavioral Risk Factor Surveillance System, Health Care Information System, OSDH & Health Affairs Journal, R. Strum, 2002

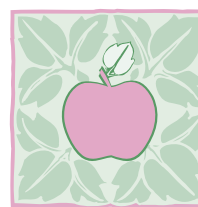
Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the

same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are \$395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 22.6%



**Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day**

(10,485) of people in Carter County were considered obese which accounted for an additional \$4,141,575 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.

Top 10 Causes of Death by Age Group Carter County 1993-2003

| Rank | 0-4 | 05-14 | 15-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65+ | All Ages |
|------|-----------------------------------|---------------------------|------------------------|----------------------------------|--------------------------|-----------------------------------|-----------------------------------|------------------------------------|------------------------------------|
| 1 | PERINATAL PERIOD 13 | UNINTENT. INJURY 16 | UNINTENT. INJURY 42 | UNINTENT. INJURY 36 | UNINTENT. INJURY 49 | CANCER 100 | HEART DISEASE 215 | HEART DISEASE 1830 | HEART DISEASE 2174 |
| 2 | UNINTENT. INJURY 10 | CANCER 4 | HOMICIDE/LEGAL 12 | HOMICIDE/LEGAL 15 | CANCER 32 | HEART DISEASE 89 | CANCER 207 | CANCER 939 | CANCER 1297 |
| 3 | CONGENITAL ANOMALIES 7 | CONGENITAL ANOMALIES 1 | SUICIDE 6 | CANCER 11 | HEART DISEASE 25 | UNINTENT. INJURY 33 | BRONCHITIS/EMPHYSEMA/ASTHMA 31 | STROKE 379 | STROKE 431 |
| 4 | SIDS 5 | HOMICIDE/LEGAL 1 | HEART DISEASE 4 | HEART DISEASE 9 | DIABETES MELLITUS 10 | LIVER DISEASE 21 | STROKE 28 | BRONCHITIS/EMPHYSEMA/ASTHMA 247 | BRONCHITIS/EMPHYSEMA/ASTHMA 289 |
| 5 | CANCER 1 | STROKE 1 | CANCER 3 | SUICIDE 9 | HOMICIDE/LEGAL 9 | SUICIDE 21 | UNINTENT. INJURY 23 | INFLUENZA/PNEUMONIA 222 | UNINTENT. INJURY 277 |
| 6 | HEART DISEASE 1 | SUICIDE 1 | SIX CAUSES TIED 1 | HIV 5 | SUICIDE 8 | STROKE 12 | DIABETES MELLITUS 18 | DIABETES MELLITUS 103 | INFLUENZA/PNEUMONIA 251 |
| 7 | HOMICIDE/LEGAL 1 | OTHER 1 | | INFLUENZA/PNEUMONIA 5 | LIVER DISEASE 6 | INFLUENZA/PNEUMONIA 9 | LIVER DISEASE 16 | KIDNEY DISEASE 78 | DIABETES MELLITUS 140 |
| 8 | SEPTICEMIA (BLOOD POISONING) 1 | | | STROKE 3 | STROKE 6 | BRONCHITIS/EMPHYSEMA/ASTHMA 8 | INFLUENZA/PNEUMONIA 11 | SEPTICEMIA (BLOOD POISONING) 68 | KIDNEY DISEASE 88 |
| 9 | OTHER 14 | | | ANEMIA 2 | INFLUENZA/PNEUMONIA 4 | DIABETES MELLITUS 8 | SEPTICEMIA (BLOOD POISONING) 7 | UNINTENT. INJURY 68 | SEPTICEMIA (BLOOD POISONING) 84 |
| 10 | | | | BRONCHITIS/EMPHYSEMA/ASTHMA 2 | KIDNEY DISEASE 4 | SEPTICEMIA (BLOOD POISONING) 5 | SUICIDE 6 | ALZHEIMER'S DISEASE 64 | LIVER DISEASE 81 |

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health
 Produced by: Injury Prevention Service, Disease and Prevention Service, Oklahoma State Department of Health

Injury and Violence

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

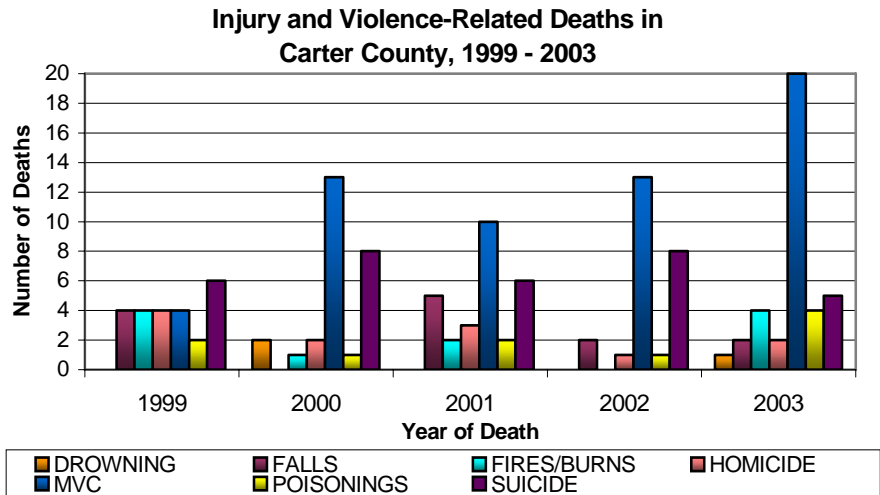
This trend does not change much in Carter County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death \$1.1 million in economic costs are incurred. For Carter County which has an average of 12 motor vehicle-related deaths a year,

that translates to over \$13 million a year.

Violence-related injuries (homicide

and suicide) in Carter County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

Tobacco Use

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the

problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over \$3,300 in health care costs per year. According to the Be-

havioral Risk Factor Surveillance System, it is estimated that 27.1% (12,573) of people in Carter County use tobacco of some sort. Medical costs accumulated by those persons are over \$41 million a year for Carter County.

“Medical costs accumulated by those persons are over \$41 million a year for Carter County”

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

Physical Activity, Wellness and Diabetes

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 36.1%

(16,749) of people in Carter County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.5% (3,480) of Carter County citizens have been diagnosed by a health professional as having diabe-



Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

tes. In 2002, the per capita annual healthcare costs for people with diabetes was \$13,243 compared to \$2,560 for people without diabetes. Persons with diabetes accumulated health care costs of \$46,085,640.00 in one year for Carter County.

Teen Pregnancy

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births

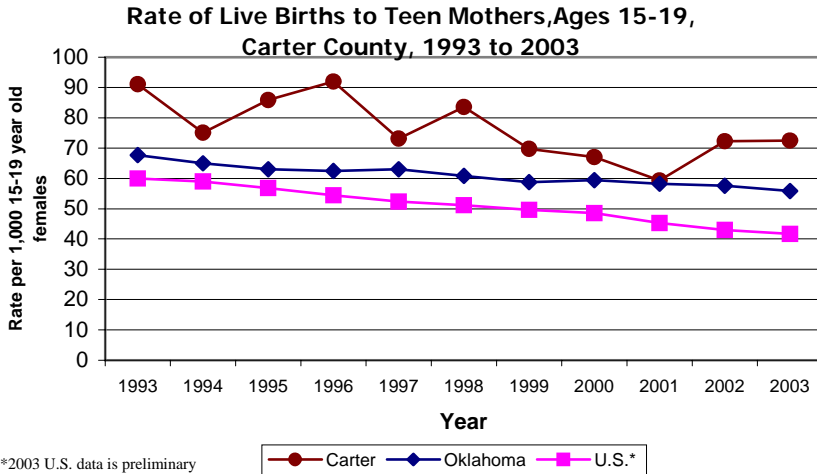
was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of

31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate \$3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Carter County had a teen birth rate of 72.5 in 2003 accounting for a 20% decrease since 1993 (91.1).

With an average of 121 births per year, teen pregnancy costs the citizens of Carter County \$387,200.00 a year.



*2003 U.S. data is preliminary

Note: 27 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* U.S. Census Bureau

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 16.6% of persons in Carter County

for whom poverty status was known had an income below what was needed to live at the federal poverty level. Carter County is 13% above the state (14.7%) and 34% above the nation (12.4%) for persons with incomes below the federal poverty level.

| Poverty level | Total | 50% below | 51% to 99% below | poverty level to 149% above | 150% to 199% above | 200% and above |
|-----------------------|--------|-----------|------------------|-----------------------------|--------------------|----------------|
| Population | 44,412 | 3,075 | 4,300 | 5,692 | 5,485 | 25,860 |
| Cumulative Population | | 3,075 | 7,375 | 13,067 | 18,552 | 44,412 |
| % of Total | 100.0% | 6.9% | 9.7% | 12.8% | 12.4% | 58.2% |
| Cumulative % | | 6.9% | 16.6% | 29.4% | 41.8% | 100.0% |

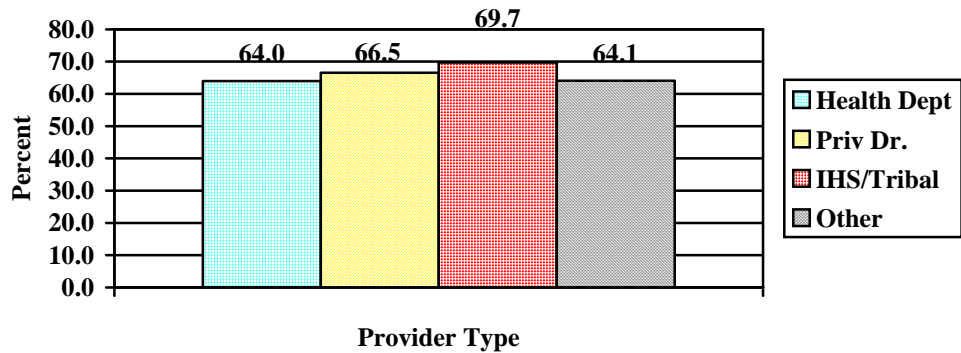
OK By One - State Immunization Data

* 2 Year-old Immunization Survey, Immunization Service, OSDH

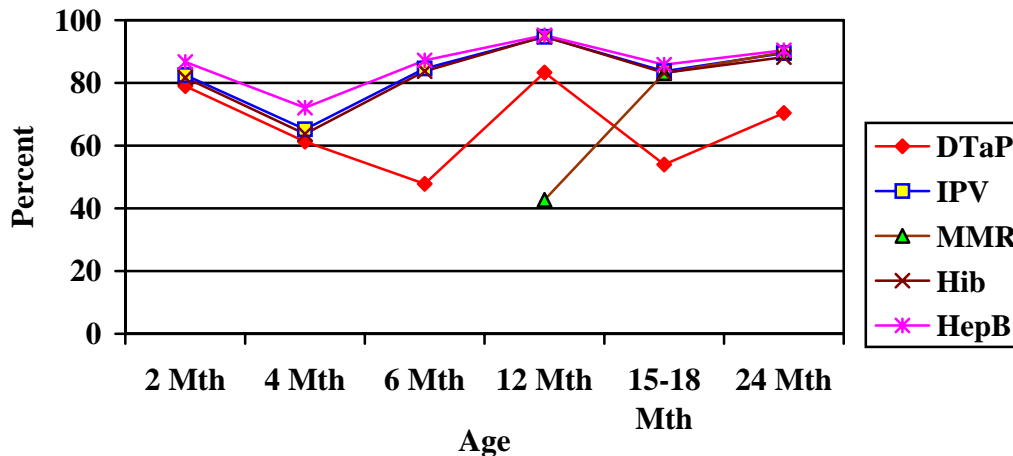
2003-04 Immunization Coverage Rates



4:3:1:1:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

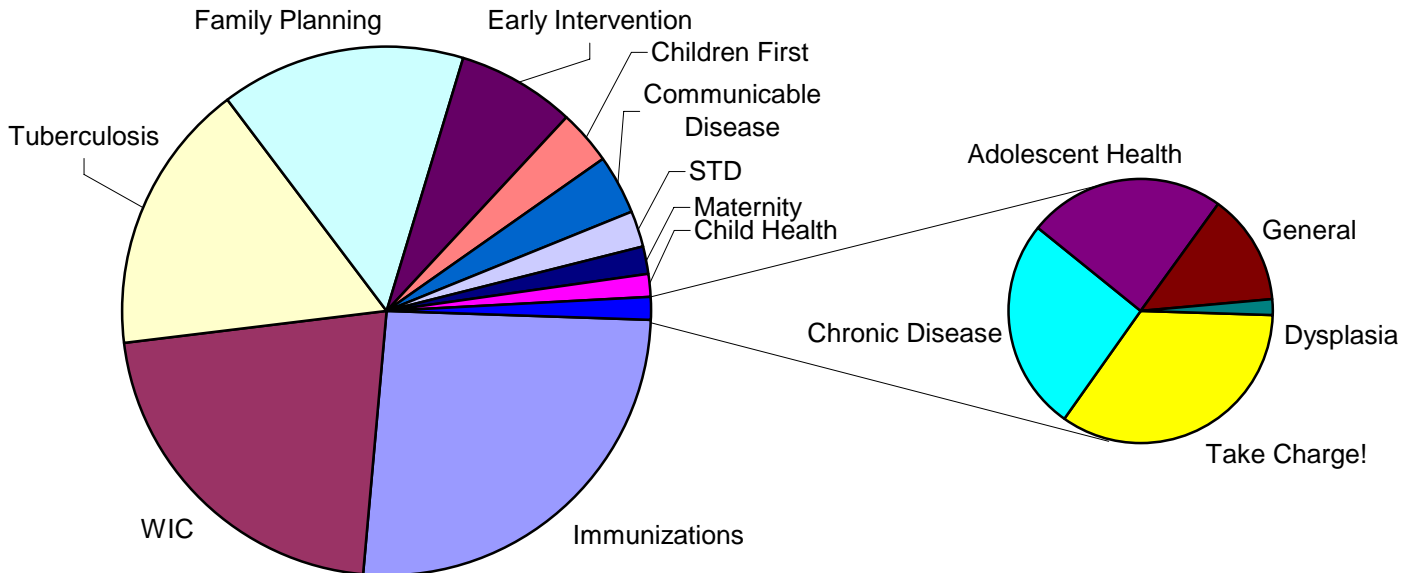


**Note: County level data will be available soon.

County Health Department Usage

* PHOCIS, Community Health Services, OSDH

Attended Appointments for Carter County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 198 deaths a year
- \$369,476.69 per death
- Total— \$73,156,384.62 a year

Obesity

- 22.6% of population (10,485)
- \$395.00 in additional medical costs per person
- Total—\$4,141,575.00

Motor Vehicle-Related Injury Death

- Average 12 deaths per year
- \$1,120,000.00 in economic costs per death
- Total—\$13,440,000.00 a year

Tobacco Use

- 27.1% of population (12,573)
- \$3,300.00 in health care costs
- Total—\$41,490,900.00 a year

Diabetes

- 7.5% of population (3,480)
- \$13,243.00 in healthcare costs a year
- Total—\$46,085,640.00 a year

Teen Pregnancy

- Average of 121 births to teen mothers per year
- \$3,200.00 in costs for each birth a year
- Total— \$387,200.00 a year



Grand Total for Carter County:

\$178,701,699.62



**OKLAHOMA STATE
DEPARTMENT OF HEALTH**

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
Email: neil@health.ok.gov

Carter County Health Department
405 S Washington
Ardmore, OK 73401
580-223-9705

City Hall - 308 Franklin
Box 298
Healdton, OK 73438
580-229-1291

www.health.state.ok.us/chds/carter/

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT



*Oklahoma Community Partners
in Public Health Innovation*