

State of the County's Health Report

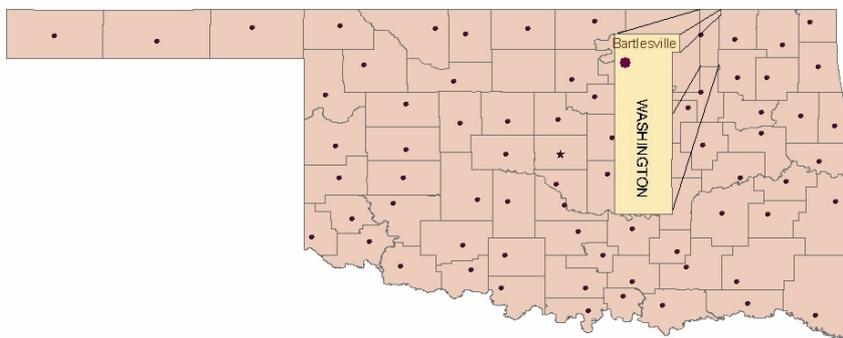


A Look Back To Move Forward

Washington County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Washington County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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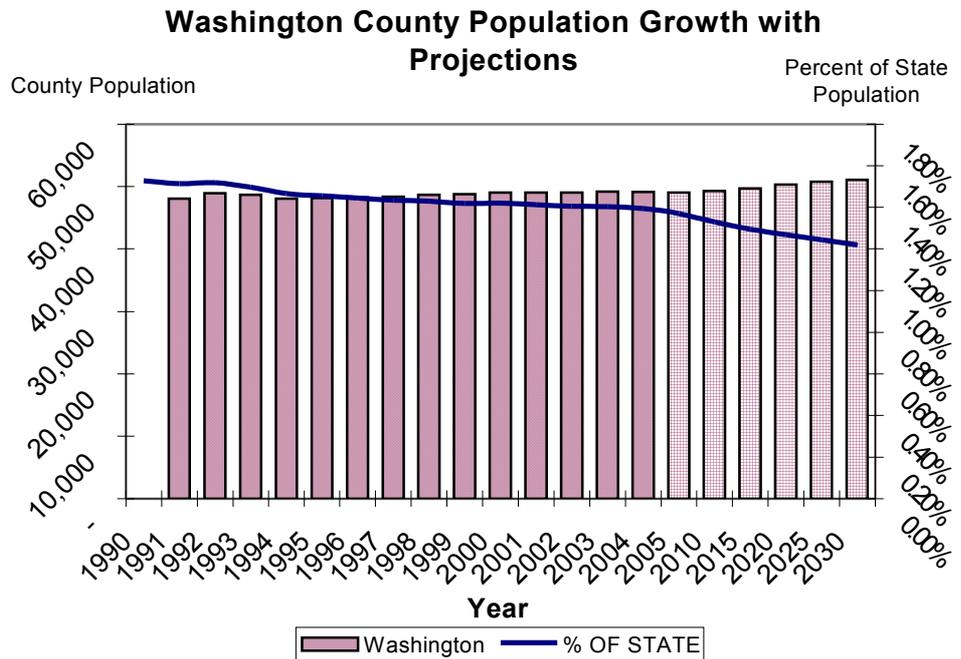
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Demographics

* U.S. Census Bureau

- Population estimates
 - 2% increase from 1990 to 2000 (48,066 to 48,996)
 - No change from 2000 to 2004
 - Ranked 39th for growth in state
- 2000 Census
- Hispanic/Latino ethnicity = 3%
- Race
 - Whites = 81%
 - Native Americans = 9%
 - Blacks = 2%
 - Other/Multiple = 8%
- Age
 - Under 5 = 6%
 - Over 64 = 18%
 - Median age = 40.1 years
- Housing units
 - Occupied = 20,179 (91%)
 - Vacant = 2,071 (9%)
- Disability (ages 21 to 64) = 21.7%
 - national = 19.2% state = 21.5%

- Individuals below poverty = 11.9%
 - national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

* Vital Statistics, Health Care Information Systems, OSDH &

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Washington 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 1,912 people

in Washington 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 170 deaths a year, heart disease accounts for

Heart disease accounts for almost \$63 million a year in medical costs in Washington

almost \$63 million a year in medical costs in Washington County.

Alzheimer's disease and the complications associated has decreased from the 7th ranked cause of death (1983-1993) to the 8th leading cause of death in persons 65 and older but accounted for a 59% increase in deaths.

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

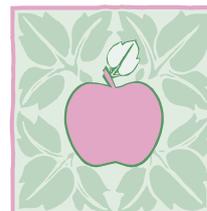
Nutrition and Obesity

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 na-

tion, 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, 20.7% (10,168) of people in



**Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegeta-**

Washington County were considered obese which accounted for an additional \$4,016,360 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 Washington County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 14	UNINTENT. INJURY 7	UNINTENT. INJURY 29	UNINTENT. INJURY 15	CANCER 31	CANCER 106	CANCER 213	HEART DISEASE 1618	HEART DISEASE 1872
2	UNINTENT. INJURY 12	CONGENITAL ANOMALIES 2	SUICIDE 10	CANCER 10	UNINTENT. INJURY 30	HEART DISEASE 68	HEART DISEASE 158	CANCER 1010	CANCER 137
3	PERINATAL PERIOD 10	ANEMIA 1	HOMICIDE/LEGAL 5	SUICIDE 7	HEART DISEASE 21	UNINTENT. INJURY 21	BRONCHITIS/EMPHYSEMA/ASTHMA 29	STROKE 373	STROKE 418
4	SIDS 3	BRONCHITIS 1	CANCER 5	HOMICIDE/LEGAL 2	SUICIDE 15	LIVER DISEASE 14	STROKE 24	BRONCHITIS/EMPHYSEMA/ASTHMA 283	BRONCHITIS/EMPHYSEMA/ASTHMA 320
5	HEART DISEASE 1	HEART DISEASE 1	CONGENITAL ANOMALIES 2	BRONCHITIS 1	LIVER DISEASE 8	STROKE 13	DIABETES MELLITUS 19	INFLUENZA/PNEUMONIA 203	INFLUENZA/PNEUMONIA 223
6	ACUTE BRONCHITIS 1	HIV 1	HEART DISEASE 2	HEART DISEASE 1	STROKE 6	DIABETES MELLITUS 8	UNINTENT. INJURY 15	ALZHEIMER'S DISEASE 143	UNINTENT. INJURY 210
7	STROKE 1	INFLUENZA 1	STROKE 1	HIV 1	HOMICIDE/LEGAL 4	INFLUENZA 8	SUICIDE 11	DIABETES MELLITUS 120	DIABETES MELLITUS 148
8	INFLUENZA 1	PERINATAL PERIOD 1	PNEUMONITIS 1	LIVER DISEASE 1	HIV 3	SUICIDE 7	INFLUENZA/PNEUMONIA 9	UNINTENT. INJURY 81	ALZHEIMER'S DISEASE 145
9	KIDNEY DISEASE 1	SEPTICEMIA 1	OTHER 5	SEPTICEMIA 1	VIRAL HEPATITIS 2	BRONCHITIS 5	KIDNEY DISEASE 7	KIDNEY DISEASE 78	KIDNEY DISEASE 90
10	OTHER 12			VIRAL HEPATITIS 1	FOUR CAUSES TIED 1	KIDNEY DISEASE 4	SEPTICEMIA 6	ATHERO-SCLEROSIS 60	SUICIDE 69

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 Washington County. Unintentional injuries are the leading cause of death from ages 5 to 34.

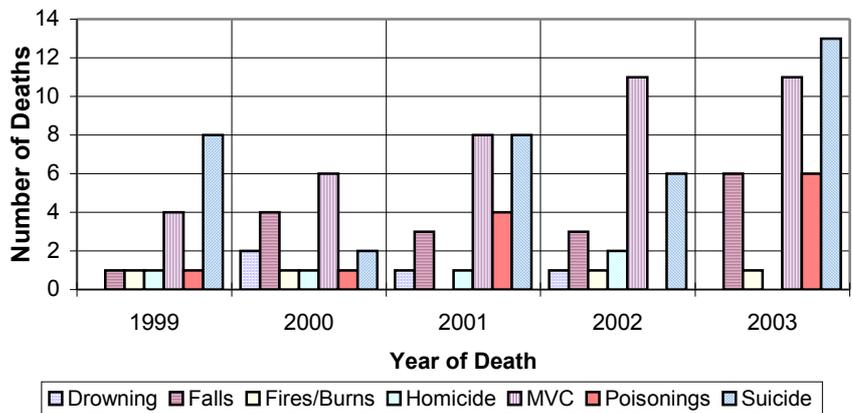
It is estimated that for every motor vehicle-related death \$1.1 million in economic costs are incurred. For Washington County which has an average of 8 motor vehicle-related

deaths a year, that translates to almost \$9 million a year.

Violence-related injuries (homicide

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

Injury and Violence-Related Deaths in Washington County, 1999-2003



* 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

Behavioral Risk Factor Surveillance System, it is estimated that 30.1% (14,785) of people in Washington County use tobacco of some sort. Medical costs accumulated by those persons are almost \$49 million a year for Washington County.

“Medical costs accumulated by those persons are almost \$49 million a year for Washington County”

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

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 32.8%

(16,112) of people in Washington County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 12.8% (6,287) of Washington County citizens have been diagnosed by a health professional as having diabetes. In 2002,



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

the per capita annual health-care costs for people with diabetes was \$13,243 compared to \$2,560 for people without diabetes. Persons with diabetes accumulated health care costs of \$83,258,741 in one year for Washington 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 2002, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of

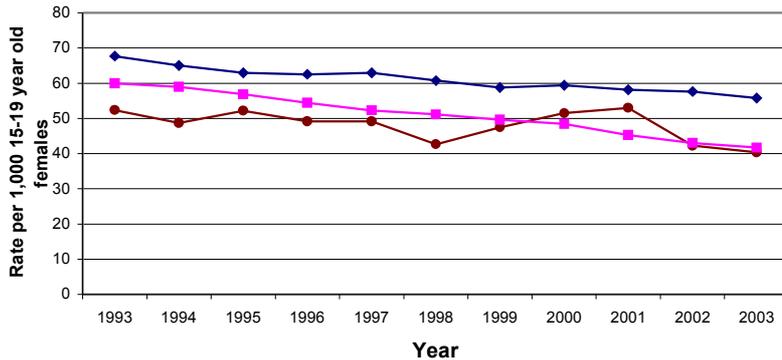
31% and 7%, respectively.

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, Washington County had a teen birth rate of 40.4 in 2003 which was a 5% decrease from 2002 (42.2) and a 23% decrease since 1993 (52.4).

With an average of 82 births per year, teen pregnancy costs the citizens of Washington County \$262,400.00 a year.

Rate of Live Births to Teen Mothers, Ages 15-19, 1993 to 2003



*2003 U.S. data is preliminary

Note: Only 9 birth to a mother 10-14 years of age occurred during the 11 year period.

Poverty

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, inade-

quate 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.

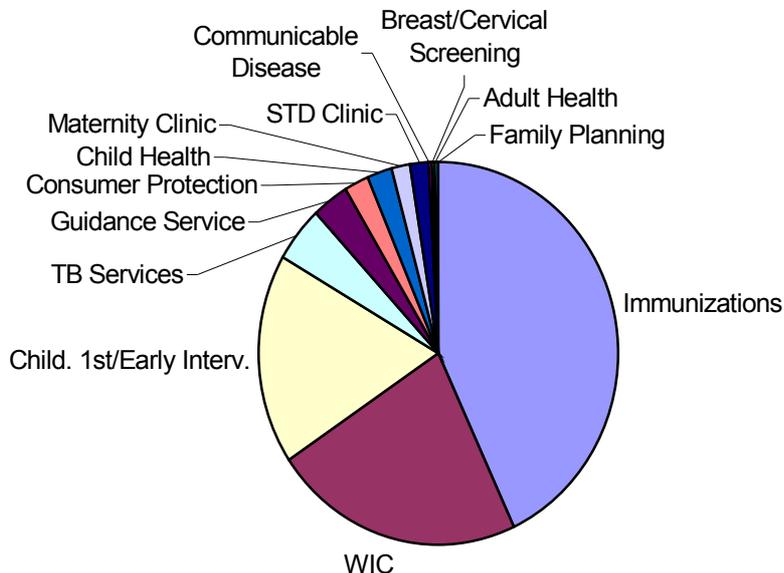
According to the 2000 census, 11.9% of persons in Washington

County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Washington County is 19% below the state and 5% below the nation for persons with incomes below the federal poverty level.

Income to Poverty Ratio Comparison, Washington County, 2000 Census

Poverty Level	Total	50% below	51% to 99% below	100% to 149% above	150% to 199% above	200% and above
Population	48,225	2,137	3,602	4,967	4,634	32,885
Cumulative Population		2,137	5,739	10,706	15,340	48,225
% of Total	100.0%	4.4%	7.5%	10.3%	9.6%	68.2%
Cumulative %		4.4%	11.9%	22.2%	31.8%	100.0%

Attended Appointments for Washington County Health Department, State Fiscal Year 04



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 170 deaths a year
- \$369,476.69 per death
- Total—\$62,811,037.30 a year

Obesity

- 20.7% of population (10,168)
- \$395.00 in additional medical costs per person
- Total—\$4,016,360.00

Motor Vehicle-Related Injury Death

- Average 8 deaths per year
- \$1,120,000.00 in economic costs per death
- Total—\$8,960,000.00 a year

Tobacco Use

- 30.1% of population (14,785)
- \$3,300.00 in health care costs
- Total—\$48,790,500.00 a year

Diabetes

- 12.8% of population (6,287)
- \$13,243.00 in healthcare costs a year
- Total—\$83,258,741.00 a year

Teen Pregnancy

- Average of 82 births to teen mothers per year
- \$3,200.00 in costs for each birth a year
- Total—\$262,400.00 a year



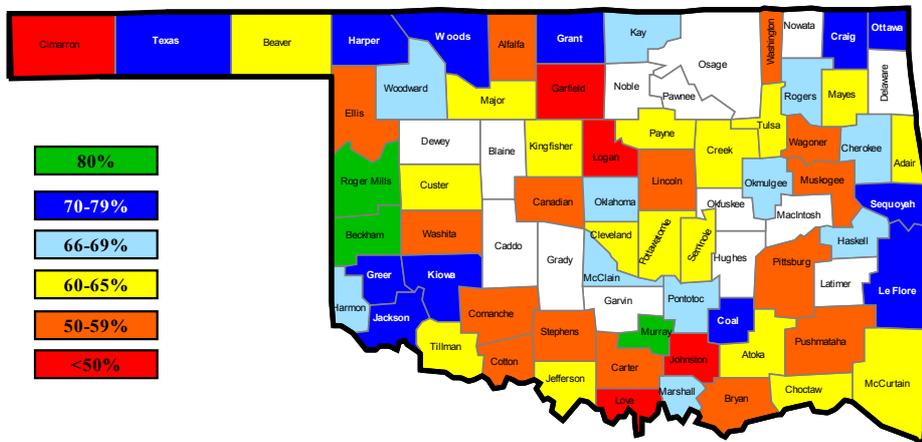
Grand Total for Washington County:

\$208,099,038.30

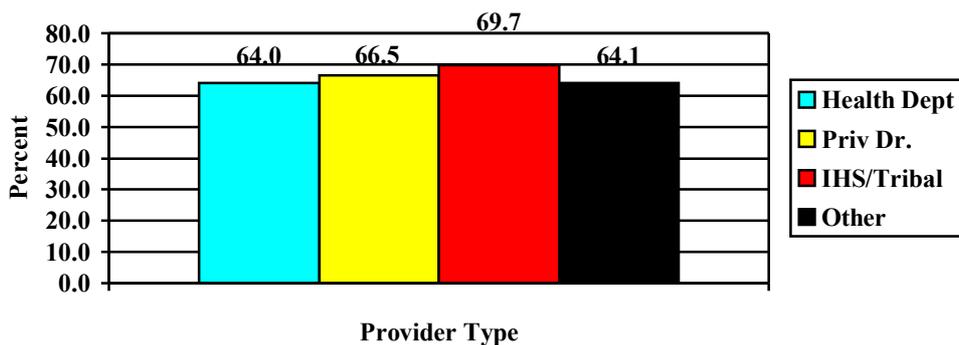
OK By One - Immunizations

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

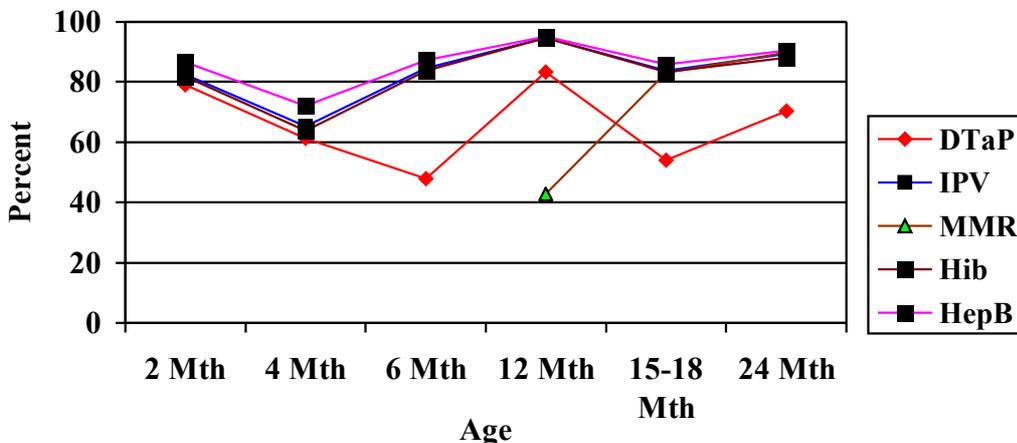
2003-04 Immunization Coverage Rates



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



Oklahoma Children On Schedule by Antigen, 2004





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OF HEALTH**

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Looking Back to Move Forward

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The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the department 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*