



Logan County Community Health Improvement Plan 2020 - 2025



February 27, 2020
Logan County, Oklahoma

Revised June 24, 2024

Table of Contents

Mission and Vision	3
Introduction	4
The MAPP Process	5
Logan County	7
Demographics	8
Public Health Strategic Issues	
Issue One: Mental Health	9
Issue Two: Obesity	12
Issue Three: Substance Use Disorder	15
Issue Four: Poverty	18
Performance Tracking	21
Conclusion	22
Activity	23
Updates	30
First Annual Report	38
Second Annual Report	44
Third Annual Report	49
Fourth Annual Report	57
References	66
Version History	68

MISSION

Creating a Healthy Logan County
by Connecting the Community
through Planning, Partnerships and
Activities

VISION

Connecting the Community

Introduction



The Logan County Partnership (LCP) completed its first Community Health Improvement Plan (CHIP) on October 4, 2018. Each of five strategic issues demonstrated improvement in health outcomes. From this, LCP learned the value of a formal strategic planning process. Highlights included:

- Infant Mortality Rate decreased from 7.9 per 1,000 live births to 4.7.
- Adult Obesity Rate decreased from 33% to 30.4%.
- Uninsured Rate decreased from 19% to 12.2%.

LCP committed to a second round of strategic planning. Again, it used the Mobilizing for Action through Planning and Partnerships (MAPP) framework as a guide to conducting a new Community Health Assessment (CHA). Data provided a comprehensive view of health factors, real and perceived, that influenced Logan County's health. After reviewing the data, 10 elements were identified for closer review:

- **Alcohol Abuse**
- **Cancer**
- **Child Abuse and Neglect**
- **Drug Abuse**
- **Heart Disease**
- **Mental Health Problems**
- **Obesity**
- **Poverty**
- **Suicide**
- **Tobacco Use**

After further consideration and discussion, LCP chose the following strategic issues for this CHIP:

- **Mental Health**
- **Obesity**
- **Poverty**
- **Substance Use Disorder**

LCP developed performance objectives and strategies for addressing each of the strategic issues. After a period of review, the second Logan County CHIP was approved on February 27, 2020.

The MAPP Process

Mobilizing to Action through Planning and Partnerships (MAPP)

The following is taken from the website of the National Association of County and City Health Officials (NACCHO) and can be found at: <https://www.naccho.org/>.

“MAPP is a community-driven strategic planning process for improving community health. Facilitated by public health leaders, this framework helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is not an agency-focused assessment process; rather, it is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems.”

MAPP provides for up to four individual assessments. Each yields important information for improving community health, but their value is multiplied by considering the findings as a whole. Logan County Partnership chose to conduct three of the four assessments: Community Health Status, Community Themes and Strengths, and Forces of Change.

Community Health Status Assessment

The Community Health Status Assessment identifies priority community health and quality of life issues. Questions answered include: “How healthy are our residents?” and “What does the health status of our community look like?”

Logan County Partnership used the following data sources and indicators to constitute its Community Health Status Assessment:

- 2018 Oklahoma Drug Threat Assessment by Oklahoma Bureau of Narcotics
- American Community Survey by the U.S. Census Bureau
- Child Abuse and Neglect Statistics SFY2018 by Oklahoma Department of Human Services
- Community Health Needs Assessment by Community Commons
- County Health Rankings & Roadmaps by The Robert Wood Johnson Foundation
- County Unemployment Rates provided by Oklahoma Employment Security Commission
- Crime in Oklahoma 2017 by Oklahoma State Bureau of Investigation
- Kids Count Data Center by Annie E. Casey Foundation
- Mercy Hospital Logan County Community Health Needs Assessment conducted by Oklahoma State University Office of Rural Health
- Oklahoma Department of Mental Health and Substance Abuse Services
- Oklahoma Health Improvement Plan 2020
- Oklahoma State Department of Health State and County Disease Data
- Oklahoma State of the County's Health Report - Logan County
- Oklahoma State of the State's Health Report
- SoonerCare Data provided by Oklahoma Health Care Authority

Community Themes and Strengths Assessment

The Community Themes and Strengths Assessment provides an understanding of the issues that residents feel are important by answering the questions: "What is important to our community?" "How is quality of life perceived in our community?" "What assets do we have that can be used to improve community health?"

Logan County Partnership used a Logan County Community Themes and Strengths Assessment Survey to collect this data.

Forces of Change Assessment

The Forces of Change Assessment focuses on identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate. This answers the questions: "What is occurring or might occur that affects the health of our community or the local public health system?" "What specific opportunities or threats are generated by these occurrences?"

Logan County Partnership used a series of focus group brainstorming sessions during regularly scheduled monthly meetings combined with worksheet submissions by individual coalition participants.



The Oklahoma Department of Human services hosts the Logan County Partnership's monthly meetings. Meetings are held the fourth Thursday of every month except November and December (check for scheduling during those months). Meetings are open to the public.

Logan County¹



Located in north-central Oklahoma, Logan County is bordered by Garfield and Noble counties on the north, Payne and Lincoln counties on the east, Oklahoma County on the south, and Kingfisher County on the west. Named for U.S. Sen. John A. Logan of Illinois, the county is drained by the Cimarron River and the Cottonwood and Ephraim creeks. Comprised of twenty-one townships, Logan County lies within the Red Bed Plains physiographic area. The eastern three townships of North Cimarron, South Cimarron, and Iowa were added to Logan County after the Sac and Fox Land Opening on September 22, 1891, to comprise a total of 748.92 square miles of land and water. In 2010 the incorporated towns included Cedar Valley, Cimarron City, Coyle, Crescent, Marshall, Meridian, Mulhall, Orlando, and Guthrie, the county seat.

The influx of settlers in Guthrie and other Logan County communities after the 1889 land opening brought about the establishment of educational facilities. Initially, subscription schools as well as private facilities offered children an education until public schools could be organized. Ninety-six school districts in Logan County were opened by 1897. Higher education institutions soon followed with Langston University established as the Colored Agricultural and Normal University in 1897. The Methodist University of Oklahoma operated in Guthrie from 1911 to 1919 before relocating to Oklahoma City and eventually becoming Oklahoma City University. By 1918 the Benedictine Sisters conducted the Catholic College of Oklahoma for young women on a seventy-acre campus located one mile west of Guthrie. At that time the Capital City Business College and other private institutions offered educational opportunities. Through the years public schools consolidated due to improved roads and to population shifting from rural to urban. Therefore, at the turn of the twenty-first century Logan County had four public school districts, Coyle, Crescent, Guthrie, and Mulhall-Orlando. The St. Joseph Convent and Academy (NR 79002000) in Guthrie and the Langston University Cottage Row Historic District (NR 98001593) were listed in the National Register of Historic Places.

In 1900 Logan County registered 26,563 residents. At 1907 statehood it had a population of 30,711. In 1910, when the state capital was moved from Guthrie to Oklahoma City, the federal census registered 31,740 inhabitants. Thereafter, the numbers steadily declined to 27,550 in 1920, 27,761 in 1930, 25,245 in 1940, 22,170 in 1950, and 18,662 in 1960. In 1970 the population rebounded to 19,645, and it climbed to 29,011 in 1990. At the turn of the twenty-first century Logan County had 33,924 residents. In 2010 census counted 41,848, of whom 81.0 percent were white, 9.1 percent African American, 3.3 percent American Indian, and 0.5 percent Asian. Hispanic ethnicity was identified at 5.2 percent.

Among the museums located in Guthrie are the Oklahoma Territorial Museum and the Oklahoma Frontier Drugstore Museum. Also situated in Guthrie are the Scottish Rite Temple (NR 87000503) and the Carnegie Library (NR 71000666), both listed in the National Register of Historic Places. Since 1984 rodeo fans have enjoyed events at the Lazy E Arena.

1. Linda D. Wilson, "Logan County," The Encyclopedia of Oklahoma History and Culture, <https://www.okhistory.org/publications/enc/entry.php?entry=LO005>.

Demographics

Demographics - Estimates	Oklahoma	%	Logan County	%
Total Population	3,943,079 ²		47,291 ³	
Age⁴				
19 years and under	1,060,684	27.2	12,400	27.4
20 - 64 years	2,261,237	57.9	21,531	58.3
65 + years	574,330	14.7	6499	14.4
Gender				
Male	1,930,615	49.6	22,593	49.8
Female	1,965,636	50.4	22,733	50.2
Race/Ethnicity				
White	2,828,569	72.6	37,437	82.6
Hispanic or Latino	394,879	10.1	2,598	5.7
African American	283,821	7.3	3930	8.7
Asian	80,670	2.1	225	0.5
American Indian & Alaska Native	289,871	7.4	1,602	3.5
Native Hawaiian & Pacific Islander	5,543	0.1	23	0.1
Other	105,686	2.7	228	0.5
Identified by two or more	302,091	7.8	1,881	4.1
Selected Economic Characteristics⁵				
Mean household income (dollars)	67,682	X	76,793	X
Median household income (dollars)	49,767	X	59,133	X
Mean travel time to work (minutes)	21.5	X	28.5	X
Percent unemployed	3.5	X	3.0	X

2. Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2018. U.S. Census Bureau, Population Division, December 2018.

3. Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2018. U.S. Census Bureau, Population Division, April 2019.

4. U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates, DP05.

5. U.S. Census Bureau, 2013-2017 American Community Survey 5Year Estimates, DP03.

Public Health Strategic Issues

Issue One:

Mental Health

Between 600,000 and 900,000 Oklahomans experience mental illness and/or a substance use disorder annually. Only one in three receive treatment. As a result, negative and costly consequences occur such as law enforcement contact, criminal justice system engagement, loss of jobs, incarceration, overflowing and backed-up hospital emergency rooms, family fragmentation and children in foster care. Much of this can be prevented with increased access to appropriate services. Nearly 20% of Oklahoma adults experienced up to 13 mentally unhealthy days in the past month; approximately 13% experienced between 14 to 30 mentally unhealthy days in the past month.⁶

In the Community Themes and Strengths Assessment, residents ranked Mental Health Problems as the most important health problem in their communities. Contributing factors were also identified: Drug Abuse, Alcohol Abuse and Being Overweight were ranked 1st, 2nd and 3rd most important risk behaviors; Obesity was ranked 2nd most important health problem.

The State of the State's Health Report defines Frequent Poor Mental Health Days as the percentage of adults

reporting at least 14 poor mental days in the past 30 days. Logan County's rate was 10.2%, compared to the state at 15.6% and the nation at 12.01%, receiving a grade of "B".

The County Health Rankings & Roadmaps defines Poor Mental Health Days as the average number of mentally unhealthy days reported in the past 30 days. Logan County's rate was 4.3 days, compared to the state at 4.5 and the nation's 90th percentile at 3.1.

The Forces of Change Assessment identified Mental Health as a significant factor to the community. Opportunities created included: more programs with Mental Health First Aid Training, and awareness of programs for insured and uninsured. Threats posed included: incarcerations, and untreated and/or unmedicated residents in the community.

In 2016, suicide was the 8th leading cause of death for Oklahomans and the 10th leading cause of death in the U.S., with over 44,000 deaths each year nationwide. According to the CDC, an estimated 9.3 million adults (3.9% of the adult U.S. population) reported having suicidal thoughts in 2013. Since 2010, suicide rates have increased for all populations in



Oklahoma and the nation. Research shows that 90% of those who die from suicide have a mental health and/or substance use disorder at the time of their death. Suicide is the leading cause of violent death among Oklahomans; annually, more than twice as many people die by suicide than by homicide.

The State of the State's Health Report reported a Logan County suicide rate of 23.7 per 100,000, compared to the state at 19.1 and the nation at 14.00, receiving a grade of "F". Logan County's suicide rate has increased significantly over the past three years.

In the Community Themes and Strengths Assessment, residents ranked suicide at the bottom of the list of important health problems, indicating that they view mental health and suicide as separate issues.

6. Oklahoma State of the State's Health Report. (Feb 26, 2019). Data - Health Indicators - Frequent Poor Mental Health Days (≥ 14 days in the past 30 days) - Learn More.

Mental Health

Objectives:

- By 2025, decrease rate of frequent poor mental health days from 10.2% to 9.3%. (As reported by the State of the State's Health Report)

- By 2025, decrease suicide rate from 23.7/100,000 to 18.8. (As reported by the State of the State's Health Report)

Accomplished 4/19/2021

Strategy 1: Increase access to appropriate care for mental health treatment and supports. (*Healthy People 2020 Mental Health and Mental Disorders; OSDH Strategic Map C-1; Oklahoma Health Improvement Plan 2020 Behavioral Health*)

Strategy 2: Strengthen community and cultural connections to increase awareness of mental health issues. (*OSDH Strategic Map B-2*)

Strategy 3: Promote community training for recognizing and responding to those at risk. (*OSDH Strategic Map B-2*)

- Promote awareness of Youth Crisis Mobile Response, National Suicide Prevention Lifeline, Oklahoma 2-1-1, Mental Health First Aid, Question Persuade Refer, and other programs advocating mental health and suicide awareness, recognition, and response.

Strategy 4: Promote help-seeking behavior among those who are struggling. (*OSDH Strategic Map C-2*)

Strategy 5: Promote healthy lifestyles. (*OSDH Strategic Map B-5*)

Strategy 6: Facilitate and promote the public screening of the documentary film *RESILIENCE: The Biology of Stress & the Science of Hope*.

Strategy 7: Provide and promote community activities featuring the six Positive Parenting Practices: reading books; story telling, singing; playing with peers; going out four or more times a week; family meal; and watching two hours or less of television a day. This will reduce or eliminate adverse childhood experiences (ACEs) and reduce prevalence of social-emotional deficits, leading to healthier childhood development and better mental health outcomes into adulthood.

Lead Organizations: NorthCare
Logan County Health Department

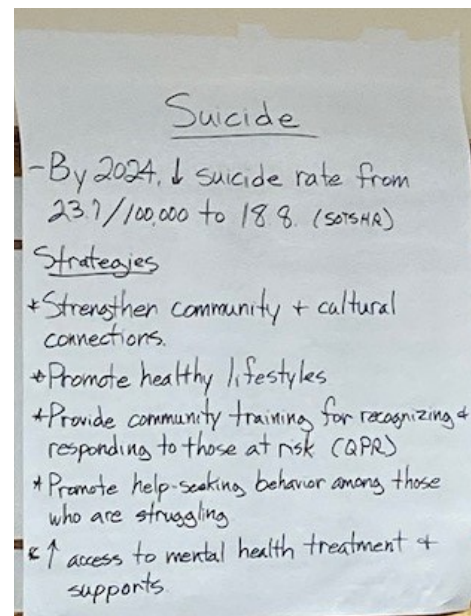
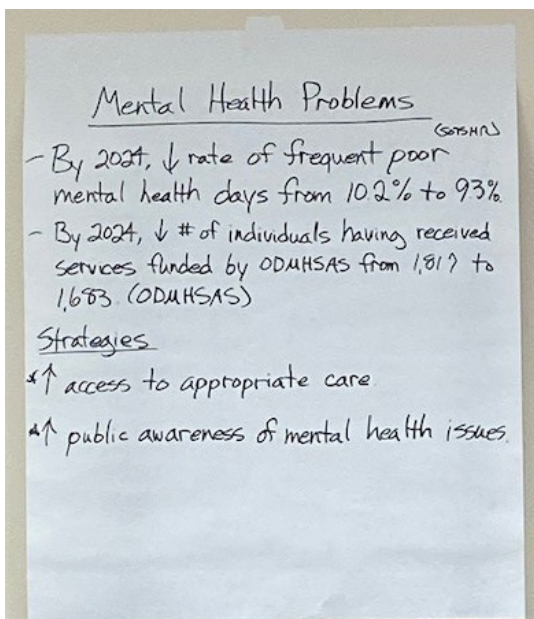
Policy Changes Needed: None

Resources:

- Existing providers
- Counseling agencies
- School counseling and school programs
- Law enforcement

Barriers:

- Lack of providers
- Lack of funding
- Difficulties with local transportation providers
- Lack of knowledge of available resources
- Parenting
- Heredity
- Domestic violence
- Substance abuse
- Obesity
- Stigma
- Poverty
- Accessibility to medications
- Noncompliance with medications



Issue Two:

Obesity

The CDC states that obesity is a complex issue to address. Obesity results from a combination of causes and contributing factors, including individual factors such as behavior and genetics. Behaviors can include dietary patterns, physical activity, inactivity, medication use, and other exposures. Additional contributing factors in our society include food and physical environment, education and skills, and food marketing and promotion. Obesity is a serious concern because it is associated with poorer mental health outcomes, reduced quality of life, and the leading causes of death in the United States including diabetes, heart disease, stroke, and some types of cancer.⁷

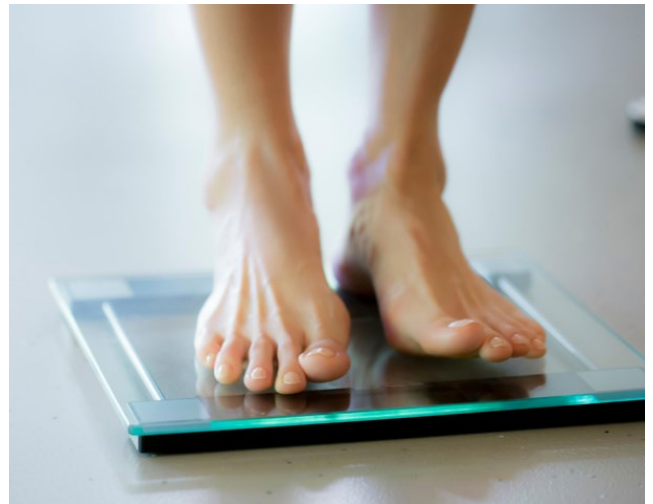
In the Community Themes and Strengths Assessment, residents ranked Obesity as the 2nd most important health problem and Being Overweight as the 3rd most important risk behavior in their communities.

The State of the State's Health Report defines Adult Obesity as having a Body Mass Index (BMI) greater than or equal to 30 (Overweight is 25.0 to 29.9, Normal is 18.5 to 24.9). Logan County's rate of Adult Obesity was 35.1%. This was a significant increase from the 30.4% reported the year before and erases the improvement demonstrated during Logan County's first strategic plan cycle. In comparison, the state rate was 36.5%

and the national rate was 31.30%. (Figure 1) Logan County was given a grade of "D" for this measure.

The County Health Rankings & Roadmaps reported Logan County's rate of Adult Obesity at 33% and further indicated that the measure was an "Area to Explore." The report indicated no significant trend was found for this measure.

Community Commons reported that 33% of Logan County adults aged 20 and older self-reported a BMI greater than 30.0, compared to the state at 33.3% and the nation at 28.3%, finishing in the "green" of the report's dashboard indicator.



The Forces of Change Assessment identified Obesity as a significant factor to the community's health.

Opportunities created included: education on health and nutrition, and a chance to break the cycle of unhealthiness. Threats posed included: increases in heart disease, stroke, diabetes and cancer, and a continued cycle of unhealthiness.

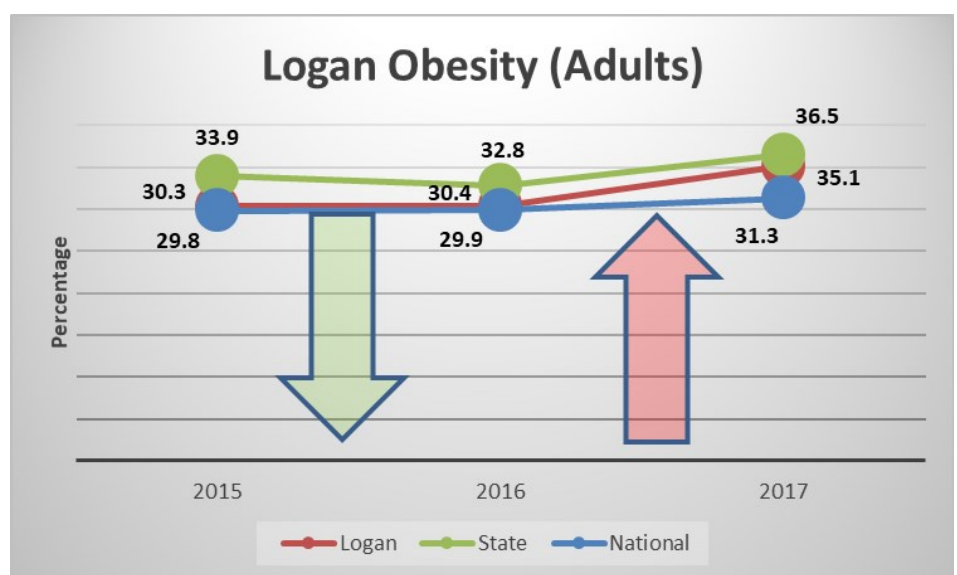


Figure 1. Logan Obesity (Adults). Data from Oklahoma State of the State's Health Report.

7. Oklahoma State of the State's Health Report. (Feb 26, 2019). Data - Health Indicators - Obesity (Adults) - Learn More.

Obesity

Objectives:

- By 2025, decrease rate of adult obesity from 35.1% to 31.3%. (As reported by the State of the State's Health Report)

Strategy 1: Pass policy and shape environments to promote healthy eating and physical activity. *(Healthy People 2020 Nutrition and Weight Status; OSDH Strategic Map B-5; Oklahoma Health Improvement Plan 2020 Obesity)*

Strategy 2: Promote Certified Healthy Oklahoma program to provide guidance and recognition to organizations working to promote healthy environments. *(Healthy People 2020 Nutrition and Weight Status; OSDH Strategic Map B-3; Oklahoma Health Improvement Plan 2020 Obesity)*

Strategy 3: Promote Oklahoma Health Care Authority's (OHCA) website that promotes health, wellness and nutrition to low-income populations. *(Healthy People 2020 Nutrition and Weight Status; OSDH Strategic Map B-1; Oklahoma Health Improvement Plan 2020 Obesity)*

Strategy 4: Promote Oklahoma Department of Mental Health and Substance Abuse Services' (ODMHSAS) service that provides a Wellness Coach as a core team member within the behavioral home which provides integrated behavioral health care to those with mental health needs. *(Healthy People 2020 Nutrition and Weight Status; OSDH Strategic Map B-1; Oklahoma Health Improvement Plan 2020 Obesity)*

Strategy 5: Facilitate and promote the public screening of the documentary film *RESILIENCE: The Biology of Stress & the Science of Hope*.

Strategy 6: Provide and promote community activities featuring the six Positive Parenting Practices: reading books; story telling, singing; playing with peers; going out four or more times a week; family meal; and watching two hours or less of television a day. This will reduce or eliminate adverse childhood experiences (ACEs) and reduce prevalence of social-emotional deficits, leading to healthier childhood development and better health outcomes into adulthood such as lower rates of obesity.

Lead Organizations: Logan County Health Department
Oklahoma Department of Mental Health and Substance Abuse Services
Oklahoma Health Care Authority

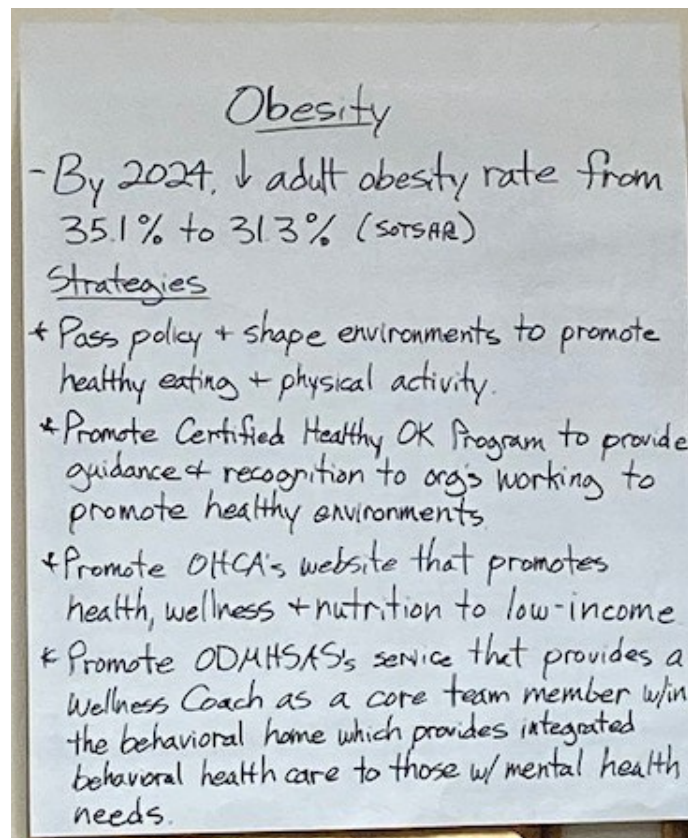
Policy Changes Needed: Increase in number of Certified Healthy Oklahoma institutions

Resources:

Logan County Health Department health education and community engagement assets
ODMHSAS Wellness Coach
OHCA website
OSU Extension Office
YMCA

Barriers:

Culture
Low fruit consumption
Low access to recreation and fitness facilities
High rates of diabetes prevalence and mortality
Low access to grocery stores
Low access to healthy food options
Low farmers' market availability



Substance Use Disorder

Substance use disorders affect people from all walks of life and all age groups. They are common, recurrent, and often serious, but they are treatable and many people do recover. Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.⁸

Excessive drinking is a risk factor for many adverse health outcomes such as; alcohol poisoning, hypertension, acute myocardial infarction, sexually transmitted infections, unintended pregnancy, fetal alcohol syndrome, sudden infant death syndrome, suicide, interpersonal violence, and motor vehicle crashes.⁹ Logan County residents and public health professionals identified alcohol use as a significant factor to the community's health.

Tobacco use is still the leading preventable cause of disease and death. Smoking kills more Oklahomans than alcohol, auto accidents, AIDS, suicides, murders



and illegal drugs combined.¹⁰ Thousands more die from other tobacco-related causes. Smoking causes cancer, heart disease, stroke, lung diseases, diabetes, and chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis. Smoking increases risk of tuberculosis, certain eye diseases, and problems of the immune system, including rheumatoid arthritis.¹¹ Smokers put others at risk; secondhand smoke is responsible for the death of over 50,000 nonsmokers every year.¹² Logan County's adult smoking prevalence rate was 15.9%, or approximately one out of every six adults. It is yet to be seen what the effects of e-cigarette use and legalized "smokable" forms of cannabis will have on adult smoking rates.

Drug overdoses are a leading contributor to premature death and are largely preventable. The vast majority of these deaths are caused by pharmaceutical and illicit drugs. More overdose deaths involve prescription painkillers than alcohol and all illicit drugs combined. Nearly 70% of unintentional poisoning deaths in Oklahoma involve at least one prescription drug. Of these, more than 80% involve prescription painkillers (opioids). Logan County's rate of unintentional poisoning deaths was 10.2 per 100,000 population. Logan County residents and public health professionals also identified drug abuse and opioid use as significant factors to the community's health.

8. U.S. Department of Health & Human Services (04/13/2019). Substance Abuse and Mental Health Services Administration. Mental Health and Substance Use Disorders. [samhsa.gov/find-help/disorders](https://www.samhsa.gov/find-help/disorders).
9. Centers for Disease Control and Prevention. Sociodemographic differences in binge drinking among adults - 14 states, 2004. *MMWR Morb Mortal Wkly Rep.* 2009;58:301-304.
10. Campaign for Tobacco Free Kids. The Toll of Tobacco in Oklahoma. Retrieved from <https://www.tobaccofreekids.org/problem/toll-us/oklahoma> on May 18, 2018.
11. Centers for Disease Control and Prevention. Health Effects. Retrieved from https://www.cdc.gov/tobacco/basic_information/health_effects/index.htm on May 18, 2018.
12. Campaign for Tobacco Free Kids. Smoke-Free Laws. Retrieved from <https://www.tobaccofreekids.org/what-we-do/us/smoke-free-laws> on May 18, 2018.

Substance Use Disorder

Objectives:

- By 2025, decrease rate of binge drinking from 14.9% to 13.5%. (As reported by the State of the State's Health Report) **Accomplished 3/13/2023 - Regressed 6/24/2024**
- By 2025, decrease rate of heavy drinkers from 4.8% to 3.4%. (As reported by the State of the State's Health Report)
- By 2025, decrease rate of adult smoking prevalence from 15.9% to 14.4%. (As reported by the State of the State's Health Report)
- By 2025, decrease rate of unintentional poisoning death from 10.2 per 100,000 population to 8.73. (As reported by the State of the State's Health Report) **Accomplished 4/19/2021 - Regressed 6/24/2024**

Strategy 1: Alcohol *(Healthy People 2020 Substance Abuse)*

- School based prevention programming that includes curricula preventing alcohol use, appropriate coping skills and peer support for health decisions.
- Responsible Beverage Sales and Service training for retailers, sellers and servers.
- Enforcement of laws prohibiting sales to minors and over service.

Strategy 2: TOBACCO *(Healthy People 2020 Tobacco Use; OSDH Strategic Map A-1; Oklahoma Health Improvement Plan 2020 Tobacco Use)*

- Make referrals to Oklahoma Tobacco Helpline.
- Promote certification at the level of Excellence through Certified Health Oklahoma. Excellence requires the institution to have a tobacco free policy.
- Promote and support smoking cessation events (ex., Great American Smoke Out, World No Tobacco Day, Kick Butts Day, etc.)

Strategy 3: Drugs *(Healthy People 2020 Substance Abuse; Oklahoma Health Improvement Plan 2020 Behavioral Health)*

- Reduce substance abuse and chemical dependency through increased awareness and understanding of the issues and the provision of prevention and early intervention services. *(ODMHSAS Strategic Plan)*
- Increase mechanisms for appropriate medication disposal.

Strategy 4: Facilitate and promote the public screening of the documentary film *RESILIENCE: The Biology of Stress & the Science of Hope*.

Strategy 5: Provide and promote community activities featuring the six Positive Parenting Practices: reading books; story telling, singing; playing with peers; going out four or more times a week; family meal; and watching two hours or less of television a day. This will reduce or eliminate adverse childhood experiences (ACEs) and reduce prevalence of social-emotional deficits, leading to healthier childhood development and better social and emotional functioning. This in turn may result in fewer substance use disorders into adulthood.

Lead Organizations: Logan County Health Department
Garfield County Alcohol & Drug Coalition (taskforce that covers Logan County)
Oklahoma Department of Mental Health and Substance Abuse Services
Red Rock

Policy Changes Needed: Increase in number of Certified Healthy Oklahoma institutions certified as Excellent

Resources: Oklahoma Tobacco Helpline
ODMHSAS Wellness Coach
NorthCare
Local support groups (NAMI, AA, NA, etc.)

Barriers: Culture
Lack of knowledge and resources
Money
Stigma
Youth cessation / treatment

Poverty

Research indicates a link between poverty and poor health. Poverty is both a cause and a consequence of poor health. Those living in poverty have a higher level of maternal mortality, higher levels of disease, reduced access to healthcare and a shorter life span. Poverty is rooted in various social and economic issues including employment, education, hunger, mass incarceration, poor health, inequalities among minority populations, and more.¹³

Oklahoma has historically lagged behind the nation in poverty rates. In 2017, nearly 1 in 6 Oklahomans (15.8%) were living below the federal poverty line (\$24,600 for a family of four) before taxes. And though the percentage of Oklahoma families living in poverty is lower than it was last year (16.3%), the distance between Oklahoma's poverty rate and the national rate has widened.¹⁴

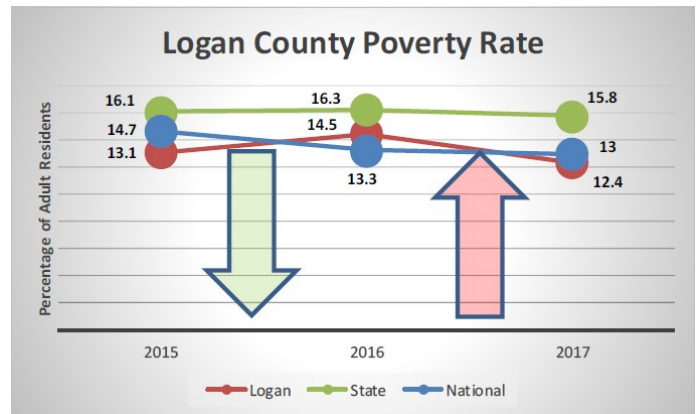
Strategies that aim to increase the economic mobility of families (for

example, job training programs and Early Head Start) may help to alleviate the negative effects of poverty.¹⁵⁻¹⁷ In addition, social assistance programs are designed as a safety net for all U.S. citizens, but specifically benefit low-income individuals and families.¹⁸ An example of a social assistance program is the National School Lunch Program (NSLP). The NSLP has been found to reduce the "risk of experiencing food insufficiency" among low-income households with children.¹⁹ In order to reduce socioeconomic inequality, it may also be important to address factors that are associated with the health status of poor communities.¹⁵

The State of the State's Health Report indicated that Logan County's rate of residents living in poverty was 12.4%, compared to the state at 15.8% and

the nation at 13.0%.

The County Health Rankings & Roadmaps defines Children in Poverty as the percentage of people under age 18 in poverty. It reported a rate for Logan County of 15%. Accounting for the report's margin of error, this placed Logan County among the Top U.S. Performers (90th percentile). However, the report identified no significant trend for Logan County with this measure.



13. Oklahoma State of the State's Health Report. (Feb 26, 2019). Data - Health Indicators - Poverty - Learn More.

14. Oklahoma Policy Institute. (Sep 13, 2018). New Census data shows that Oklahoma fell further behind the U.S. on poverty and uninsured rate for second consecutive year. Retrieved from okpolicy.org/new-census-data-shows-that-oklahoma-fell-further-behind-the-u-s-on-poverty-and-uninsured-rate-for-second-consecutive-year/

15. Yoshikawa H, Aber JL, Beardslee WR. The effects of poverty on the mental, emotional, and behavioral health of children and youth: implications for prevention. *Am Psychol.* 2012;67(4):272-84.

16. Riccio J, Dechausay N, Greenberg D, Miller C, Rucks Z, Verma N. Toward reduced poverty across generations: Early findings from New York City's conditional cash transfer program. New York, (NY): MDRC; 2010.

17. Love JM, Kisker EE, Ross CM, Schochet PZ, Brooks-Gunn J, Paulsell D, Brady-Smith C. Making a difference in the lives of infants and toddlers and their families: The impacts of early Head Start. Princeton (NJ): Mathematica Policy Research; 2002.

18. Blank RM. Evaluating welfare reform in the United States. *Journal of Economic Literature.* 2002;40(4):1105-1166.

19. Huang J, Barnidge E. Low-income Children's participation in the National School Lunch Program and household food insufficiency. *Social Science & Medicine.* 2016;150:8-14.

Poverty

Objectives:

- By 2025, decrease poverty rate from 12.4% to 11.9%. (As reported by the State of the State's Health Report)
Accomplished 4/19/2021 - Regressed 3/13/2023.

Strategy 1: Promote Children First Program where nurse home visitors work with low-income, first time mothers to promote health during pregnancy, care of their child, and personal growth and development; improve families' economic self-sufficiency. (*Healthy People 2020 Maternal, Infant, and Child Health; OSDH Strategic Map A-1; Oklahoma Health Improvement Plan 2020 Children's Health*)

Strategy 2: Network with Oklahoma Works, Job Corps, Meridian Technology Center, Langston University, and Logan County chambers of commerce to promote employment opportunities.

Strategy 3: Facilitate the provision of Bridges Out of Poverty workshops to the community.

Strategy 4: Facilitate and promote public screenings of the documentary film *RESILIENCE: The Biology of Stress & the Science of Hope*.

Strategy 5: Provide and promote community activities featuring the six Positive Parenting Practices: reading books; story telling, singing; playing with peers; going out four or more times a week; family meal; and watching two hours or less of television a day. This will reduce or eliminate adverse childhood experiences (ACEs) and reduce prevalence of cognition and language deficits, leading to healthier childhood development and greater language skill, motor skill, and cognitive ability. This, in turn, may result in less or no economic hardship into adulthood.

Lead Organizations: Logan County Partnership
Logan County Health Department

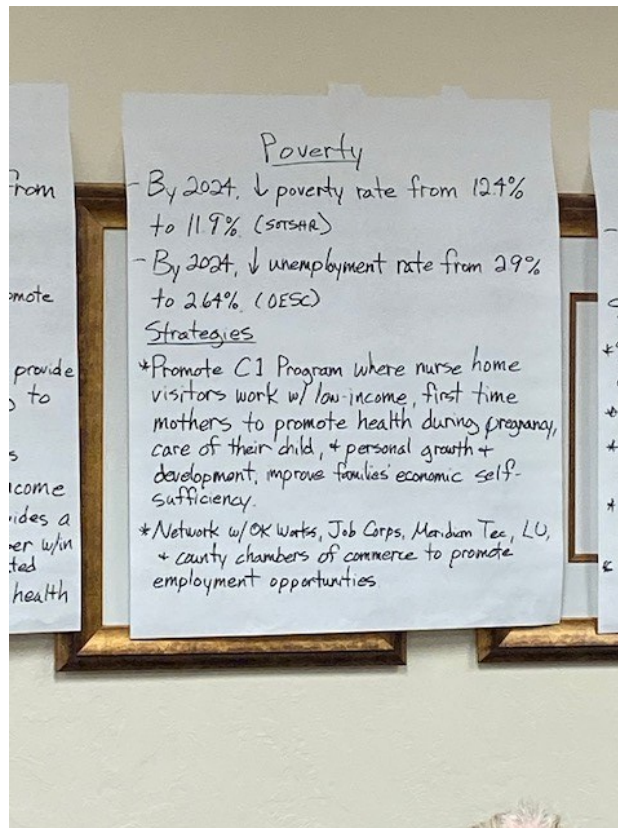
Policy Changes Needed: None

Resources:

Logan County Health Department's Children First Program
Oklahoma Works office in Guthrie
Guthrie Job Corps
Meridian Technology Center
Langston University
Chambers of commerce in Logan County

Barriers:

Access to mental health services²⁰
Geography - rural versus urban
Educational attainment - for example, County Health Rankings & Roadmaps identified high school graduation rate of 75% as an "area to explore"
Homelessness



20. Center for the Study of Social Policy. (March 2014). Results-Based Public Policy Strategies for Reducing Child Poverty. Retrieved from <https://www.cssp.org/policy/2014/Results-Based-Public-Policy-Strategies-for-Reducing-Child-Poverty.pdf>.

Performance Tracking

LCP will track the progress of its CHIP in multiple ways.

Activities that LCP participates in will be documented in the “Activity” section beginning on page 23. These may be activities initiated by LCP or activities in which LCP participates in. Strategic Issues and Strategies fulfilled by the activity will be identified.

Forces that may affect public health outcomes will be documented in the “Updates” section beginning on page 30. These may consist of updated data reports, public health developments such as infectious disease outbreaks or emergency proclamations, significant developments for community partners, etc.

Annual Reports will be added to document the most recent primary data for performance objectives for each of the Strategic Issues. This will provide a measure of progress. Annual Reports will be added beginning with the First Annual Report on page 38.



Conclusion

LCP knows the benefits of a formal strategic planning process. It has learned from experience that focusing community resources on a few strategically identified public health issues can lead to wide ranging improvements in health outcomes. For example, during LCP's last CHIP, improvement in the rates of adult obesity and adult smoking prevalence were accompanied by rate improvements in diabetes mortality, stroke mortality, heart disease mortality, cancer mortality, and asthma prevalence. In other words, two strategic issue improvements likely contributed to five additional health outcome improvements. That's the benefit of strategic planning!

However, LCP understands that there are a myriad of other public health issues that are not reflected in its CHIP. This does not, in any way, diminish the importance of these public health issues. Nor does it mean that LCP will not work to address any and all public health issues when it has the means and opportunity to do so. In other words, LCP is not "limited" by its CHIP and will always seek out opportunities to improve the health status of Logan County citizens.

As LCP works to implement this CHIP, it is important to remember that this is a very dynamic and fluid process. Though we worked diligently to be as deliberative as possible, it is likely there will be obstacles and opportunities yet to be discovered. LCP will review its CHIP annually to assess its effectiveness and make necessary modifications.

Improving health outcomes takes time and effort. However, with patience and persistence, improved health outcomes do eventually come. Case in point:

- 2019 County Health Rankings & Roadmaps published by the Robert Wood Johnson Foundation ranked Logan County as the 4th healthiest county in Oklahoma.
- Best in the state with the lowest rate of Frequent Poor Mental Health Days.
- 2nd best in the state with rates of nephritis deaths, unintentional poisoning deaths, infant mortality, seniors influenza vaccination, and teen births.
- 3rd best in the state with rates of total mortality and no physical activity.
- 4th best in the state with rates of chronic lower respiratory disease deaths, heart disease deaths and minimal vegetable consumption.
- Top ten best in the state with rates of cancer deaths, depression, current adult smoking prevalence, seniors pneumococcal vaccination, and poverty.

LCP recognizes that the "public health battle" is one that never ends, that there will always be room for improvement no matter how much ground we gain, and that the battle is worth fighting for the benefit of all our communities in Logan County.

Activity

Resilience Screening

February 28, 2020

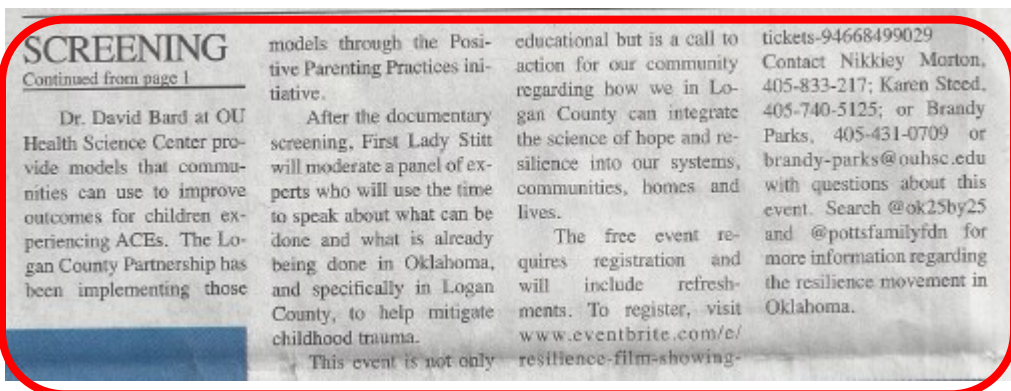
Community Church

The Coalition partnered with First Lady Sarah Stitt, the Potts Family Foundation and Community Church to host the screening of the documentary film "Resilience: The Biology of Stress & the Science of Hope." The screening was followed by a panel discussion of local experts moderated by the First Lady. The event was promoted by the Guthrie News Leader.



This activity demonstrates the following:

- Issue One: Mental Health - Strategy 6
- Issue Two: Obesity - Strategy 5
- Issue Three: Substance Use Disorder - Strategy 4
- Issue Four: Poverty - Strategy 4



Hall, Mize legislation setting standards for Farmers Markets signed into law

May 21, 2020

Taken from Guthrie News Page²¹

The Oklahoma Farmers Market and Farmers Hub Act was signed into law Wednesday by the governor.

Authored by Sen. Chuck Hall, R-Perry, and Rep. Garry Mize, R-Guthrie, Senate Bill 1785 creates the Oklahoma Farmers Market and Farmers Hub Act. The act sets standards for farmers markets and farmers hubs that are registered with the Dept. of Agriculture, Food and Forestry.

A hub differs from a market in that the food is sold on consignment for the producers, rather than direct sales that take place at a market.

Hall and Mize said they collaborated on the legislation after a constituent, who runs a local farmers market, adopted a new business model to allow producers to sell their products on a consignment basis. This allowed the producers to stay in the field and produce without having to be present to sell their products.

Their constituent ran into an issue, however, when neither the Dept. of Agriculture nor the Health Dept. had a definition or rules for such an arrangement; as a result, the farmers market was forced to shut down for a few days.

"This is exactly the way state government should work," Hall said. "Representative Mize and I were contacted by a constituent who had a problem that prevented their business from growing. We worked together to craft legislation to correct the issue and convinced our colleagues it was the right approach for Oklahoma's business and citizens. I'm thankful to Governor Stitt for recognizing the value in our legislation and allowing it to become law by his signature."

"With the creation of the Farmers Market and Farmers Hub Act, this model can now be recreated all over the state without fear of being shut down," Mize said. "This will allow for more economic opportunities for Oklahomans. I was glad to work with Senator Hall to solve this issue raised by our constituent and I appreciate the Governor for acting quickly to sign this bill into law."

The act specifies that registered farmers' markets may sell unprocessed produce and nuts, meat, baked goods in compliance with the Home Bakery Act, processed foods meeting all governmental requirements, and nonfood items that comprise less than 25% of market sales.

Senate Bill 1785 was signed into law on Wednesday, May 20 and will go into effect on Nov. 1.

This activity demonstrates the following:

- Issue Two: Obesity - Strategy 1

21. Guthrie News Page. (May 21, 2020). "Hall, Mize legislation setting standards for Farmers Markets signed into law." Retrieved from guthrienewspage.com/hall-mize-legislation-setting-standards-for-farmers-markets-signed-into-law/.

Governor signs bill raising minimum age to buy tobacco products to 21

May 21, 2020

Taken from Guthrie News Page²²

On Tuesday, Oklahoma Governor Kevin Stitt signed a bill into law that raises the minimum age to purchase tobacco products to 21.

The legislation aligns with the federal Tobacco-Free Youth Act, which was signed by President Donald Trump last December.

That law prohibited the sale of cigarettes, e-cigarettes, cigars and other tobacco products to anyone under the age of 21.

The bill was authored by Senator Greg McCortney, R-Ada, and Representative Kevin Wallace, R-Wellston.

"This important legislation will protect our youth from the negative health effects of tobacco use by increasing the age when they are eligible to make such purchases," said Wallace. "This will align us with federal statute, and that compliance puts ABLE in line for grant funding of more than \$18 million that can be used for tobacco cessation programs. I was grateful to work with Senator McCortney on the passage of this legislation and for the support it received."

This activity demonstrates the following:

- Issue Three: Substance Use Disorder

22. Guthrie News Page. (May 21, 2020). "Governor signs bill raising minimum age to buy tobacco products to 21." Retrieved from guthriewspage.com/governor-signs-bill-raising-minimum-age-to-buy-tobacco-products-to-21/.

City adopts amendment to tobacco ordinance in hopes of receiving grant for parks

June 3, 2020

Taken from Guthrie News Page²³

With guidance from the state and local health departments, the City of Guthrie amended the existing Tobacco and Electronic Cigarette Ordinance within city limits. With the change, the City will now be available for additional grant money.

The city council voted 6-0 to approve the amendments when it comes to tobacco and electronic cigarettes.

The changes now allow the City to meet the prerequisite requirements and criteria to apply for Tobacco Settlement Endowment Trust (TSET) funded grants including the Healthy Communities Incentive Grant.

If awarded, the City may be eligible to receive up to \$70,000.00 on projects that will enhance wellness activities.

City officials believe the projects that may benefit from this grant include park enhancements such as adding shade structures to splash pad developments.

The changes include municipally owned properties and exclude privately owned properties except where prohibited by Oklahoma State Law, expand the definition of tobacco products, expand the prohibition of tobacco products to include vapor products, other elements added or adjusted to become compliant with TSET Tobacco-Free Government Property Policy and practice evaluation tool.

"The biggest change with the current ordinance is that we are taking out all the private property type stuff," City Planner Dan Kassik told the council. "It will be specifically municipal owned properties, or other properties that would be prohibited by under state law."

The amendment also includes vapor products.

To see the Full Ordinance, ORDINANCE NO. 3334, refer to Guthrie News Page as referenced below in the footnote.

This activity demonstrates the following:

- Issue Three: Substance Use Disorder

23. Guthrie News Page. (June 3, 2020). "City adopts amendment to tobacco ordinance in hopes of receiving grant for parks." Retrieved from guthrienewspage.com/city-adopts-amendment-to-tobacco-ordinance-in-hopes-of-receiving-grant-for-parks/.

City ordinance amended to buy tobacco, vape products from age 18 to 21

October 7, 2020

Taken from Guthrie News Page²⁴

The Guthrie city council amended an ordinance to raise the minimum age to purchase or possess tobacco products from 18 to 21. The city council voted 5-2 to approve the amendment.

The amendment now matches the state statute.

In May, Gov. Stitt signed Senate Bill 1423 into law, prohibiting the sale of cigarettes, e-cigarettes, cigars and any other tobacco products to anybody who is not at least 21 years old. In December, Congress passed legislation prohibiting the exact same thing; the Tobacco-Free Youth Act was signed into law by President Trump.

The local ordinance went into effect immediately. Guthrie municipal ordinance now conforms with federal and state law.

This activity demonstrates the following:

- Issue Three: Substance Use Disorder

24. Guthrie News Page. (October 7, 2020). "City ordinance amended to buy tobacco, vape products from age 18 to 21." Retrieved from guthrienewspage.com/city-ordinance-amended-to-buy-tobacco-vape-products-from-18-to-21/.

Certified Healthy Oklahoma

October 15, 2020

Applications were opened for Certified Healthy Oklahoma 2020 through January 15, 2021. Certified Healthy Oklahoma is a free, voluntary, annual statewide certification that showcases businesses, campuses, communities, congregations, early childhood programs, restaurants, and schools that are committed to supporting healthy choices through environmental and policy change.²⁵ Instructions for how to apply online were emailed to the Coalition membership. Online applications can be submitted at certifiedhealthyok.com.

This activity demonstrates the following:

- Issue Two: Obesity - Strategy 2
- Issue Three: Substance Use Disorder - Strategy 2

²⁵ Certified Healthy Oklahoma. certifiedhealthyok.com.

August 30, 2021 - Journey Through Darkness

The Partnership sent out an email promoting the conference "Journey Through Darkness: A day of suicide prevention, education, and conversation" to be held on Monday, September 13th at Autry Technology Center in Enid.

Journey Through Darkness:

A day of suicide prevention, education, and conversation.



Monday, September 13th - 8:30 am until 4:30 pm

Autry Technology Center - 1201 W Willow Rd.

Guest Speakers



Jeremy Elledge



Kevin Hines



Registration is required, scan the code above to register now!

Lunch provided with \$10 paid registration

CEUs are available!

Sponsored by: Tri-CHIO and The Evolution Foundation,

This activity demonstrates the following:

- Issue One: Mental Health - Strategy 3

Updates

March 16, 2020 - COVID-19

Coronavirus disease 2019 (COVID-19) is an infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It was first identified in December 2019 in Wuhan, the capital of China's Hubei Province. It spread globally, resulting in a coronavirus pandemic. Symptoms include fever, cough, and shortness of breath. While roughly 80% of cases report mild symptoms, some progress into severe pneumonia and multi-organ failure and can lead to death. Data indicates the risk of death for those contracting COVID-19 notably increases for individuals above the age of 60 or for individuals with autoimmune conditions. On January 11, 2020, the first set of individuals in the United States tested positive for COVID-19. The first case in Oklahoma was confirmed March 6, 2020.

On March 12th, Governor Kevin Stitt issued Executive Order 2020-06 directing all state agencies to take steps necessary to protect vulnerable populations. On March 15th, Governor Stitt issued Executive Order 2020-07 declaring a state of emergency due to the impending threat of COVID -19. The State Emergency Operations Plan was activated, and resources of all state departments and agencies available to meet the emergency were committed to protect the health and safety of the public.

A number of mitigation practices were recommended that included, but were not limited to:

- If you or any member of your family feels sick, stay home and contact your medical provider.
- If you test positive for COVID-19, keep the entire household at home and contact your medical provider.
- If you are older, or have serious underlying health conditions that can put you at increased risk, stay home and away from other people.
- Stay home if possible. Telework and/or tele-school if you can.
- Avoid social gatherings in groups of more than 10 people. Maintain social distancing of at least six feet.
- Avoid discretionary travel, shopping trips, and social visits.
- Do not visit nursing homes or retirement or long-term care facilities unless to provide critical assistance.
- Practice good hygiene and wash hands, especially after touching any frequently used item or surface, avoid touching your face, sneeze or cough into a tissue or inside your elbow, and disinfect frequently used items and surfaces as much as possible.

The COVID-19 pandemic has significantly effected day-to-day operations of every aspect of life, including the efforts of each of our Coalition partners. We cannot know how long this will last, nor can we know the impact it will have on our organizations and their missions. At this unprecedented moment, the greatest good we can do to promote the public's health is to individually and collectively practice the social mitigation recommendations, keep ourselves healthy, and prevent the spread of the virus until we are able to exercise some level of control.

March 18, 2020 - 2020 County Health Rankings & Roadmaps

Logan County was ranked as the 4th healthiest county in Oklahoma; retaining its ranking from the previous year. Changes in measures reported in the CHA included:

- Excessive drinking; the percentage of adults reporting binge or heavy drinking; increased (worsened) from 14% to 15%.
- Drug overdose deaths; the number of drug poisoning deaths per 100,000 population; decreased (improved) from 14 to 10. This rate was among the Top U.S. Performers (10th/90th percentile).
- Poor mental health days; the average number of mentally unhealthy days reported in the past 30 days (age-adjusted); decreased (improved) from 4.3 to 4.2.
- Adult obesity; the percentage of the adult population (age 20 and older) that reports a body mass index (BMI) greater than or equal to 30; increased (worsened) from 33% to 36%. It was identified as an "area to explore."
- Children in poverty; the percentage of people under age 18 in poverty; decreased (improved) from 15% to 14%. Accounting for the report's margin of error, this rate was among the Top U.S. Performers (10th/90th percentile). It was identified as an "area of strength."
- Adult smoking; the percentage of adults who are current smokers; increased (worsened) from 16% to 18%. It was identified as an "area to explore."

The following measures were identified as "areas to explore."

- Adult smoking; defined above - 18%
- Adult obesity; defined above - 26%
- Access to exercise opportunities; percentage of population with adequate access to locations for physical activity - 37%
- Primary care physicians; ratio of population to primary care physicians - 46,780:1
- High school graduation; percentage of 9th grade cohort that graduates in four years - 75%
- Long commute - drive alone; among workers who commute in their car alone, the percentage that commute more than 30 minutes - 49%

The following measures were identified as "areas of strength."

- Food environment index; index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best) - 7.4
- Teen births; number of births per 1,000 female population ages 15-19 - 15 (accounting for margin of error, was among Top U.S. Performers)
- Uninsured; percentage of population under age 65 without health insurance - 13%
- Preventable hospital stays; rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees - 3,301

- Mammography screening; percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening - 42%
- Unemployment; percentage of population ages 16 and older unemployed but seeking work - 3.0%
- Children in poverty; defined above - 14% (accounting for margin of error, was among Top U.S. Performers)
- Children in single-parent households; percentage of children that live in a household headed by a single parent - 24% (accounting for margin of error, was among Top U.S. Performers)
- Injury deaths; number of deaths due to injury per 100,000 population - 75

Logan County's rank in individual health categories are as follows. Ranks in parenthesis are from the previous year's report (2019):

Health Outcomes - 4th (4th)
 Length of Life - 3rd (5th)
 Quality of Life - 14th (11th)
 Health Factors - 19th (19th)
 Health Behaviors - 19th (7th)
 Clinical Care - 16th (28th)
 Social & Economic Factors - 22nd (19th)
 Physical Environment - 26th (60th)

May 29, 2020 - Logan County DHS building on the list to close down (taken from Guthrie News Page)²⁶

It was announced this week many of the Oklahoma Department of Human Services buildings across the state are scheduled to close this year. On the list includes the Logan County office in Guthrie.

OKDHS is rolling out a "service-first" model that entails the elimination of 35 county offices, including the office in Guthrie at 1414 S. Division St., and moving many employees to a telework environment.

DHS Director Justin Brown says during the current pandemic they have learned they can be as productive working remotely.

"Our agency has learned so much in light of COVID," Brown said. "We know that we can continue to serve our customers in a meaningful way while teleworking. Many of our staff are already working from the field."

The state's largest agency is facing reduced revenue projections for next year. With the closing of brick and mortar locations, the department says it will save approximately \$6 million.

Brown added by leaving physical structures, the department will avoid budget cuts.

"By strengthening community partnerships to serve in new ways, we are creating stability for our agency and those we serve well into the future."

Under the plan, OKDHS will deliver service to customers in areas without a physical office via telephone and the agency's online portals, such as okdhslive.org.

Among the services performed locally, and other facilities across the state, include handling SNAP benefits, child welfare, adult protective services and the state's Medicaid program.

26. Guthrie News Page. (May 29, 2020). "Logan County DHS building on the list to close down." Retrieved from guthrienewspage.com/logan-county-dhs-building-on-the-list-to-close-down/.

April 1, 2021 - 2021 County Health Rankings & Roadmaps

Logan County was ranked as the 4th healthiest county in Oklahoma for the third consecutive year. Changes in measures reported in the CHA included:

- Excessive drinking; the percentage of adults reporting binge or heavy drinking; remained at 15%. This was identified as an area of strength and finished among the Top U.S. Performers (10th/90th percentile).
- Drug overdose deaths; the number of drug poisoning deaths per 100,000 population; remained at 10. This was among the Top U.S. Performers (10th/90th percentile).
- Poor mental health days; the average number of mentally unhealthy days reported in the past 30 days (age-adjusted); increased (worsened) from 4.2 to 4.8.
- Adult obesity; the percentage of the adult population (age 20 and older) that reports a body mass index (BMI) greater than or equal to 30; decreased (improved) from 36% to 34%. It was identified as an "area to explore."
- Children in poverty; the percentage of people under age 18 in poverty; remained at 14%. Accounting for the report's margin of error, this rate was among the Top U.S. Performers (10th/90th percentile). It was identified as an "area of strength."
- Adult smoking; the percentage of adults who are current smokers; increased (worsened) from 18% to 20%. It was identified as an "area to explore."

The following measures were identified as "areas to explore."

- Adult smoking; defined above - 20%
- Adult obesity; defined above - 34%
- Access to exercise opportunities; percentage of population with adequate access to locations for physical activity - 37%
- Alcohol-impaired driving deaths; percentage of driving deaths with alcohol involvement - 38%.
- Primary care physicians; ratio of population to primary care physicians - 23,650:1
- Dentists; ratio of population to dentists - 6,860:1
- Long commute - drive alone; among workers who commute in their car alone, the percentage that commute more than 30 minutes - 50%

The following measures were identified as "areas of strength."

- Food environment index; index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best) - 7.6
- Excessive drinking; percentage of adults reporting binge or heavy drinking - 15% (among Top U.S. Performers)
- Teen births; number of births per 1,000 female population ages 15-19 - 14 (accounting for margin of error, was among Top U.S. Performers)

- Uninsured; percentage of population under age 65 without health insurance - 15%
- Preventable hospital stays; rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees - 3,445
- High school completion; percentage of adults ages 25 and over with a high school diploma or equivalent - 90%.
- Children in poverty; defined above - 14% (accounting for margin of error, was among Top U.S. Performers)
- Injury deaths; number of deaths due to injury per 100,000 population - 78

Logan County was ranked 5th in Oklahoma, down one spot. Changes in measures reported in the CHA included:

- Excessive drinking; the percentage of adults reporting binge or heavy drinking; remained at 15% for the third consecutive year. Identified as an area of strength, finished among the Top U.S. Performers (10th/90th percentile).
- Drug overdose deaths; the number of drug poisoning deaths per 100,000 population; was not reported.
- Poor mental health days; the average number of mentally unhealthy days reported in the past 30 days (age-adjusted); remained at 4.8.
- Adult obesity; the percentage of the adult population (age 20 and older) that reports a body mass index (BMI) greater than or equal to 30; increased (worsened) from 34% to 37%. It was identified as an "area to explore."
- Children in poverty; the percentage of people under age 18 in poverty; decreased (improved) from 14% to 13%. Statistically, was among Top U.S. Performers (10th/90th percentile) and identified as an "area of strength."
- Adult smoking; the percentage of adults who are current smokers; decreased (improved) from 20% to 18%. It was identified as an "area to explore."

The following measures were identified as "areas to explore."

- Adult smoking; defined above - 18%
- Adult obesity; defined above - 37%
- Primary care physicians; ratio of population to primary care physicians - 24,010:1
- Dentists; ratio of population to dentists - 8,130:1
- Long commute - drive alone; among workers who commute in their car alone, the percentage that commute more than 30 minutes - 49%

The following measures were identified as "areas of strength."

- Excessive drinking; percentage of adults reporting binge or heavy drinking - 15% (among Top U.S. Performers)
- Teen births; number of births per 1,000 female population ages 15-19 - 14
- Uninsured; percentage of population under age 65 without health insurance - 15%
- Preventable hospital stays; rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees - 2,616
- High school completion; percentage of adults ages 25 and over with a high school diploma or equivalent - 91%
- Unemployment; percentage of population ages 16 and older unemployed but seeking work - 5.1%
- Children in poverty; defined above - 13% (statistically among Top U.S. Performers)
- Children in single-parent households; percentage of children that live in a household headed by a single parent - 16% (statistically among Top U.S. Performers)
- Injury deaths; number of deaths due to injury per 100,000 population - 74

July 13, 2022 - 2022 Wellness County Profiles

New Wellness County Profiles were published by OSDH Community Analysis & Linkages. Changes in measures reported in the Logan CHIP included:

- By 2025, decrease rate of frequent poor mental health days from 10.2% to 9.3%. The Profile provided three new data points: 2018 - 8.2%; 2019 - 9.3%; 2020 - 11.2%. This measure exceeded its performance objective, then backtracked to meet the performance objective, and is now at a point higher (worse) than it started.
- By 2025, decrease rate of adult obesity from 35.1% to 31.3%. The Profile provided two new data points: 2019 - 34.8%; 2020 - 33.8%. The rate changes demonstrate some volatility, but currently represent a 3.7% improvement from where it started.
- By 2025, decrease rate of binge drinking from 14.9% to 13.5%. The Profile provided three new data points: 2018 - 14.9%; 2019 - 13.9%; 2020 - 10.1%. The measure currently demonstrates a 32% improvement from where it began and exceeds its performance objective.
- By 2025, decrease rate of adult smoking prevalence from 15.9% to 14.4%. The Profile provided two new data points: 2019 - 13.8%; 2020 - 14.8%. The measure currently demonstrates a 7% improvement from where it began.

First Annual Report

Issue One:

Mental Health

Objectives:

- By 2025, decrease rate of frequent poor mental health days from 10.2% to 9.3%. (As reported by the State of the State's Health Report)

At the time of this report, there was no new data available.

- By 2025, decrease suicide rate from 23.7/100,000 to 18.8. (As reported by the State of the State's Health Report)

The most recent data available on OK2SHARE reports a suicide rate for Logan County of 18.4. This was a 22% improvement and **achieved the performance objective for this measure.**

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2016 to 2018
Cause of Death	Intentional self-harm (suicide)

27 records matched the search criteria.

Characteristics Selected for Records Search

Deaths	Population	Death Rate	Age-Adjusted Death Rate
27	140,663	19.2	18.4

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 19APR2021:15:52:13.

Issue Two:

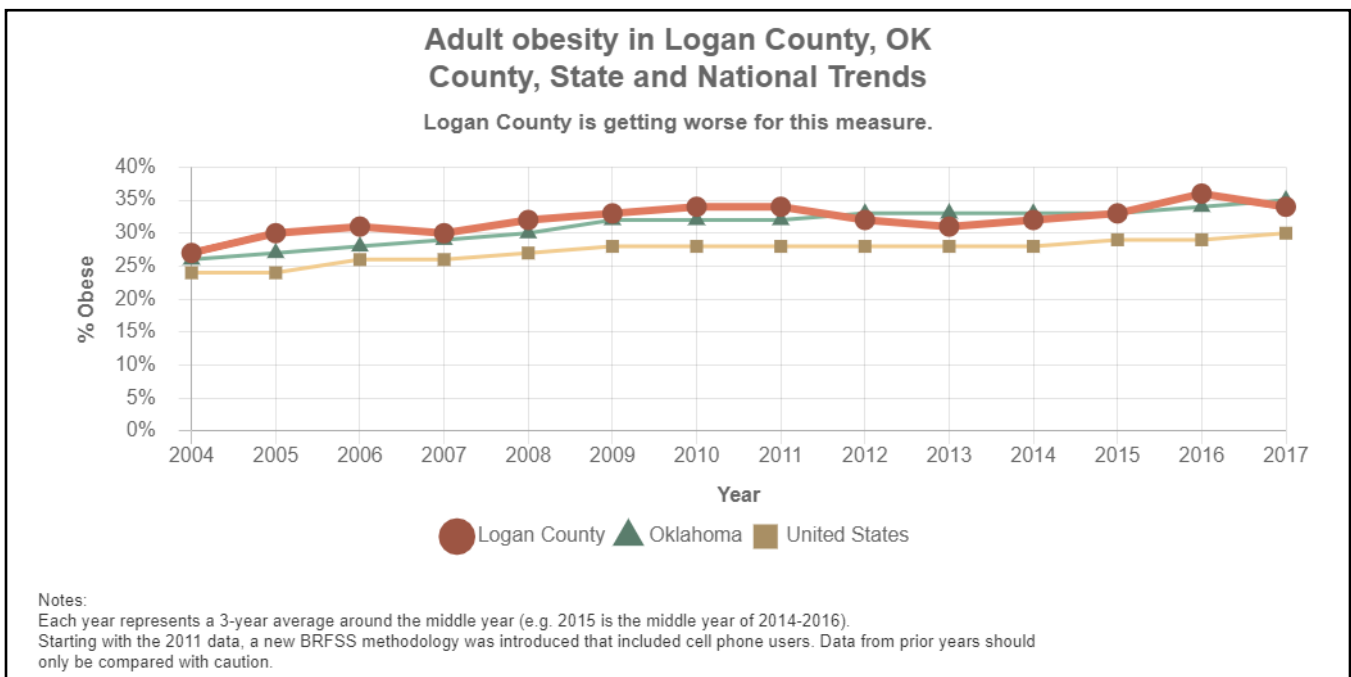
Obesity

Objectives:

- By 2025, decrease rate of adult obesity from 35.1% to 31.3%. (As reported by the State of the State's Health Report)

The most recent data, published in the 2020 Wellness County Profile for Logan County, reported an adult obesity rate of 31.9%. This was a 9% improvement and was near to achieving the performance objective for this measure.

The 2021 County Health Rankings & Roadmaps reported that Logan County's adult obesity rate improved from 36% to 34%. It still reported that Logan County was getting worse for this measure and identified it as an "area to explore."



Issue Three:

Substance Use Disorder

Objectives:

- By 2025, decrease rate of binge drinking from 14.9% to 13.5%. (As reported by the State of the State's Health Report)


At the time of this report, there was no new data available.

- By 2025, decrease rate of heavy drinkers from 4.8% to 3.4%. (As reported by the State of the State's Health Report)

At the time of this report, there was no new data available.

- By 2025, decrease rate of adult smoking prevalence from 15.9% to 14.4%. (As reported by the State of the State's Health Report)

The most recent data, published in the 2020 Wellness County Profile for Logan County, reported a Smoking Prevalence of 14.8%. This was almost at 7% improvement and was near to achieving the performance objective for this measure.

Health Outcomes - LOGAN	2013	2014	2015	2016	2017	2018	Trend
Tobacco							
Smoking Prevalence	20.0%	17.4%	18.2%	15.5%	15.9%	14.8%	

- By 2025, decrease rate of unintentional poisoning death from 10.2 per 100,000 population to 8.73. (As reported by the State of the State's Health Report)

The most recent data available on OK2SHARE reports an accidental poisoning rate for Logan County of 6.6. This is a 35% improvement and achieved the performance objective for this measure.

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2016 to 2018
Cause of Death	Accidental poisoning and exposure to noxious substances

9 records matched the search criteria.

Characteristics Selected for Records Search

Deaths	Population	Death Rate	Age-Adjusted Death Rate
9	140,663	6.4	6.6

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

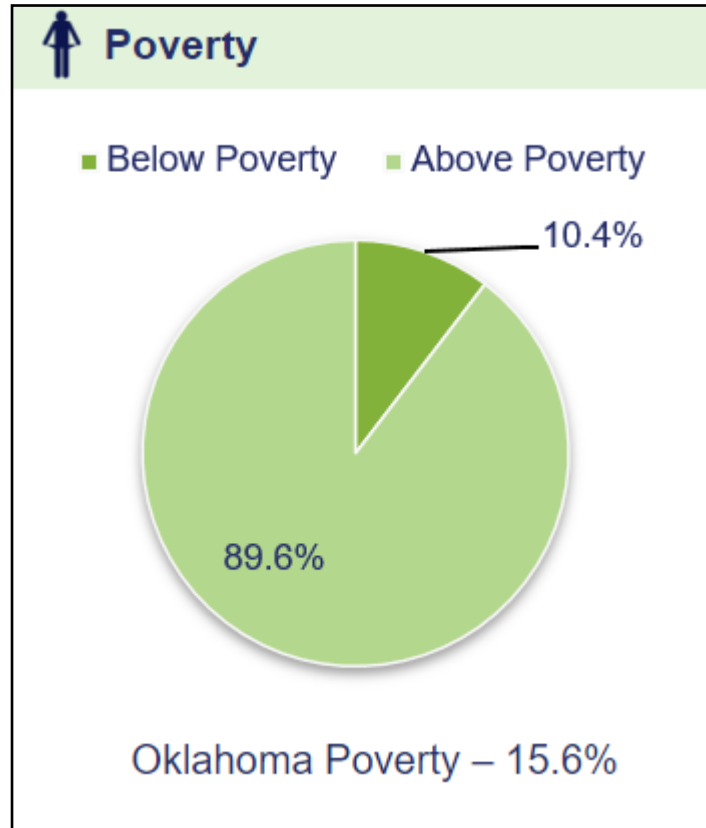
Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 20APR2021-09:44:03.

Poverty

Objectives:

- By 2025, decrease poverty rate from 12.4% to 11.9%. (As reported by the State of the State's Health Report)

The most recent data, published in the 2020 Wellness County Profile for Logan County , reported a Poverty rate of 10.4%. This was a 16% improvement and achieved the performance objective for this measure.



Summary:

Mental Health



A 22% decrease in the suicide rate demonstrated a potential lower incidence of mortality due to mental health issues. Fewer lives lost equaled more lives saved, longer lives lived, and more opportunity for treatment and recovery. It also demonstrated a performance objective for this CHIP that has been achieved.

The metric for mental health days is obtained from BRFSS data (Behavioral Risk Factor Surveillance System). BRFSS is the nation's premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.²⁸ This data is available from OK2SHARE on a state and regional basis. County-level data is available less frequently. At the time of this First Annual Report, new county-level data for this metric was unavailable.

Obesity



In combination with smoking, obesity is perhaps the most impactful public health metric. The direction that obesity goes is generally the same direction as cardiovascular disease, stroke, cancer, diabetes, and mental health. As demonstrated by the graph on page 33, the direction that obesity has gone since 2004 has generally been "up." Consequently, the health status of Logan County residents during that time has generally gone "down." Given this context, a 9% improvement in the adult obesity rate was very encouraging.

Substance Use Disorder



The rates of binge drinking and heavy drinkers are obtained from BRFSS data. At the time of this First Annual Report, new county-level data for this metric was unavailable.

In combination with obesity, as alluded to above, smoking is perhaps the most impactful public health metric. The act of smoking tobacco damages every system of the body. In combination with obesity, the destructive effects to one's health can be devastating. That is why a 7% improvement in the smoking prevalence rate was very encouraging. However, unlike obesity, smoking prevalence has demonstrated a relatively consistent improvement since 2013.

Another satisfying result for this strategic issue was the 35% improvement in the rate of unintentional poisoning deaths. As written in the strategic issue's justification on page 15, nearly 70% of these deaths involve at least one prescription drug. Therefore, it is hoped that this improvement demonstrated a decrease in prescription drug abuse as well as illicit drug abuse. It also demonstrated a performance objective for this CHIP that has been achieved.

Poverty



As indicated in the strategic issue's justification on page 18, research indicated a link between poverty and poor health; with cause and effect relationships proceeding in both directions. The 16% improvement in the poverty rate seems to "fit" with the corresponding improvements in the other three strategic issues. It also demonstrated a performance objective for this CHIP that has been achieved.

28. Centers for Disease Control and Prevention. (May 16, 2014). Behavioral Risk Factor Surveillance System: About BRFSS. cdc.gov/brfss/about/index.htm.

Second Annual Report

Issue One:

Mental Health

Objectives:

- By 2025, decrease rate of frequent poor mental health days from 10.2% to 9.3%. (As reported by the State of the State's Health Report)

At the time of this report, there was no new data available.

- By 2025, decrease suicide rate from 23.7/100,000 to 18.8. (As reported by the State of the State's Health Report)

The most recent data available on OK2SHARE reports a suicide rate for Logan County of 17.0. This was a 7.6% improvement and continues to **exceed the performance objective for this measure.**

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2018 to 2020
Cause of Death	Intentional self-harm (suicide)

23 records matched the search criteria.

Characteristics Selected for Records Search

Deaths	Population	Death Rate	Age-Adjusted Death Rate
23	144,079	16.0	17.0

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2018 to 2020, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 07APR2022:09:48:08.

Obesity

Objectives:

- By 2025, decrease rate of adult obesity from 35.1% to 31.3%. (As reported by the State of the State's Health Report)

There was no new data at the time of this report.

There was also no new data to report from County Health Rankings & Roadmaps.

The data shared below from Community Commons is also a bit dated. However, it confirms what we have previously reported; that the adult obesity rate has improved.

Obesity

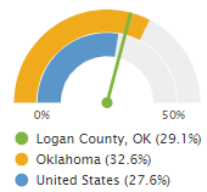
This indicator reports the number and percentage of adults aged 20 and older self-report having a Body Mass Index (BMI) greater than 30.0 (obese). Respondents were considered obese if their Body Mass Index (BMI) was 30 or greater. Body mass index (weight [kg]/height [m]²) was derived from self-report of height and weight. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Within the report area, there are a total of 10,409 adults age 20 and older who self-reported having a BMI greater than 30.0. This represents a 29.1% of the survey population.

Note: In 2021, the CDC updated the methodology used to produce estimates for this indicator. Estimated values for prior years (2004 - 2017) have been updated in this platform to allow comparison across years. Use caution when comparing with saved assessments generated prior to November 10, 2021.

Report Area	Population Age 20+	Adults with BMI > 30.0 (Obese)	Adults with BMI > 30.0 (Obese), Percent
Logan County, OK	35,285	10,409	29.1%
Oklahoma	2,898,117	946,173	32.6%
United States	243,082,729	67,624,774	27.6%

Percentage of Adults Obese (BMI > 30.0), 2019



Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2019. Source geography: County

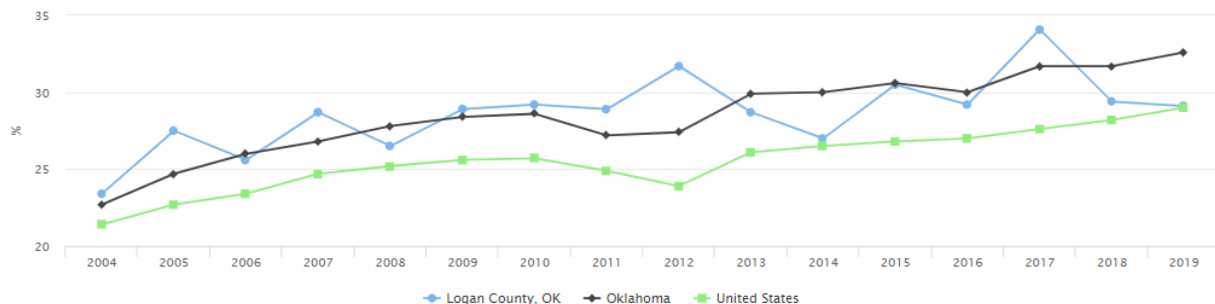
→ Show more details

Percentage of Adults Obese (BMI > 30.0) by Year, 2004 through 2019

The table below displays trends in the percentage of adults that are obese over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Logan County, OK	23.4%	27.5%	25.6%	28.7%	26.5%	28.9%	29.2%	28.9%	31.7%	28.7%	27.0%	30.5%	29.2%	34.1%	29.4%	29.1%
Oklahoma	22.7%	24.7%	26.0%	26.8%	27.8%	28.4%	28.6%	27.2%	27.4%	29.9%	30.0%	30.6%	30.0%	31.7%	31.7%	32.6%
United States	21.4%	22.7%	23.4%	24.7%	25.2%	25.6%	25.7%	24.9%	23.9%	26.1%	26.5%	26.8%	27.0%	27.6%	28.2%	29.0%

Percentage of Adults Obese (BMI > 30.0) by Year, 2004 through 2019



Issue Three:

Substance Use Disorder

Objectives:

- By 2025, decrease rate of binge drinking from 14.9% to 13.5%. (As reported by the State of the State's Health Report)
- By 2025, decrease rate of heavy drinkers from 4.8% to 3.4%. (As reported by the State of the State's Health Report)
- By 2025, decrease rate of adult smoking prevalence from 15.9% to 14.4%. (As reported by the State of the State's Health Report)

There was no new data at the time of this report for the above three performance objectives.

- By 2025, decrease rate of unintentional poisoning death from 10.2 per 100,000 population to 8.73. (As reported by the State of the State's Health Report)

The most recent data available on OK2SHARE reports an accidental poisoning rate for Logan County of 5.2. This is a 21% improvement and continues to **exceed the performance objective for this measure.**

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2018 to 2020
Cause of Death	Accidental poisoning and exposure to noxious substances

8 records matched the search criteria.

Characteristics Selected for Records Search

Deaths	Population	Death Rate	Age-Adjusted Death Rate
8	144,079	5.6	5.2

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2018 to 2020, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 07APR2022:10:48:27.

Issue Four:

Poverty

Objectives:

- By 2025, decrease poverty rate from 12.4% to 11.9%. (As reported by the State of the State's Health Report)

According to the U.S. Census Bureau's QuickFacts, Logan County's poverty rate was 11.0%. This is a 5.8% increase from last year. However, it compares favorably with the state rate of 14.3% and the national rate of 11.4%. It continues to meet the performance objective for this measure.

The screenshot shows the QuickFacts interface for "Persons in poverty, percent". The table displays the following data:

Topic	Oklahoma	Logan County, Oklahoma	United States
Persons in poverty, percent	14.3%	11.0%	11.4%

Summary:

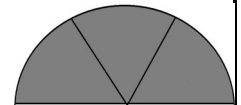
Mental Health



A 7.6% decrease in the suicide rate demonstrates a continued improvement in the area of mental health. It is hoped that this indicates more people are seeking help. The performance objective for this measure has thus far been exceeded by 9.5%.

The metric for mental health days is obtained from BRFSS data (Behavioral Risk Factor Surveillance System). As described in the last annual Report, this data is available from OK2SHARE on a state and regional basis. County-level data is available less frequently. At the time of this Second Annual Report, new county-level data for this metric was still unavailable.

Obesity



This data is also a product of BRFSS. Though it is published more frequently than other metrics, it is still not regularly available. At the time of this Second Annual Report, new county-level data was not available. The secondary data provided from Community Commons supports the good news of what we think is trending, but it cannot be used to evaluate our progress.

Substance Use Disorder



We explained in the First Annual Report that binge drinking and heavy drinker were BRFSS products. We did not identify that smoking is also a BRFSS product because, like obesity, this metric is published more frequently but still not regularly. At the time of this Second Annual Report, new county-level data was not available for the BRFSS products.

The rate of unintentional poisoning deaths continues to improve. The performance objective has now been exceeded by 40%. We continue to hope that this improvement demonstrated a decrease in prescription drug abuse as well as illicit drug abuse.

Poverty



The poverty rate increased somewhat. Though it still compared well with state and national rates, and still met the performance objective for this measure, this outcome could be a reason for concern. For two years our society has been impacted in a number of ways by COVID-19, including areas of economy and employment. Oklahoma appears to be one of the states that fared better than most. However, there were still negative consequences. The poverty rate may become a more important public health indicator moving forward.

Third Annual Report

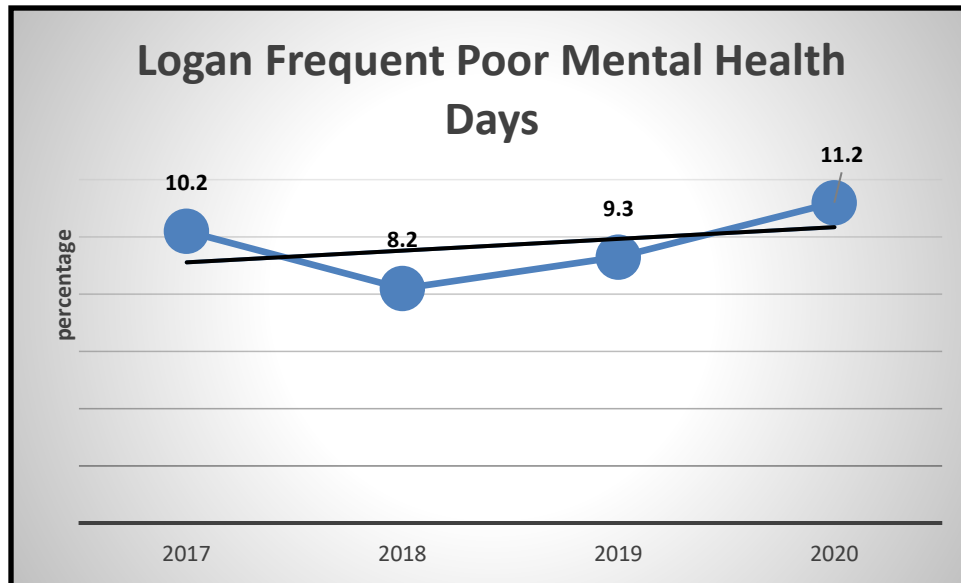
Issue One:

Mental Health

Objectives:

- By 2025, decrease rate of frequent poor mental health days from 10.2% to 9.3%. (As reported by the State of the State's Health Report)

Three new data points were published with the 2022 Logan County Wellness Profile provided by OSDH Community Analysis & Linkages. They were: 2018 - 8.2%, 2019 - 9.3%, and 2020 - 11.2%. The current rate is about 10% higher (worse) than the starting rate.



- By 2025, decrease suicide rate from 23.7/100,000 to 18.8. (As reported by the State of the State's Health Report)

There was no new data at the time of this report.

UPDATE: 10/24/2023

The most recent data available on OK2SHARE reports a suicide rate for Logan County of 17.9. This was a 5% increase (worsening) but still continued to exceed the performance objective for this measure.

The linear trend rate demonstrated by the black line on the graph on the next page shows clear improvement in this area. However, the polynomial trend rate demonstrated by the red line shows the potential beginnings of an increasing (worsening) trend.

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2019 to 2021
Cause of Death	Intentional self-harm (suicide)

26 records matched the search criteria.

Characteristics Selected for Records Search

Death Record Search Based on Query

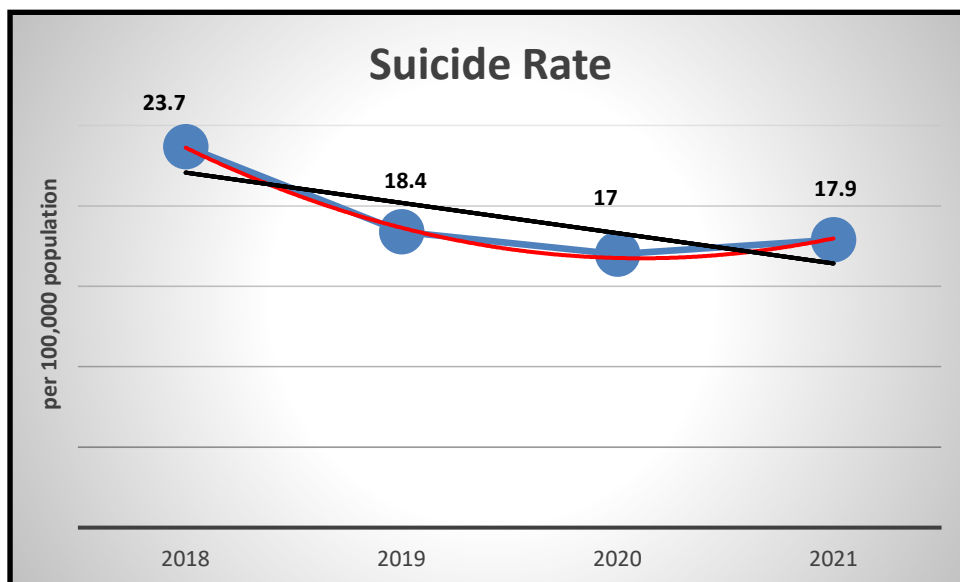
Age-adjusted rates based on 2000 US population standard.
All rates are deaths per 100,000 population.

Deaths	Population	Death Rate	Age-Adjusted Death Rate
26	147,746	17.6	17.9

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2019 to 2021, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 24OCT2023:13:38:49.

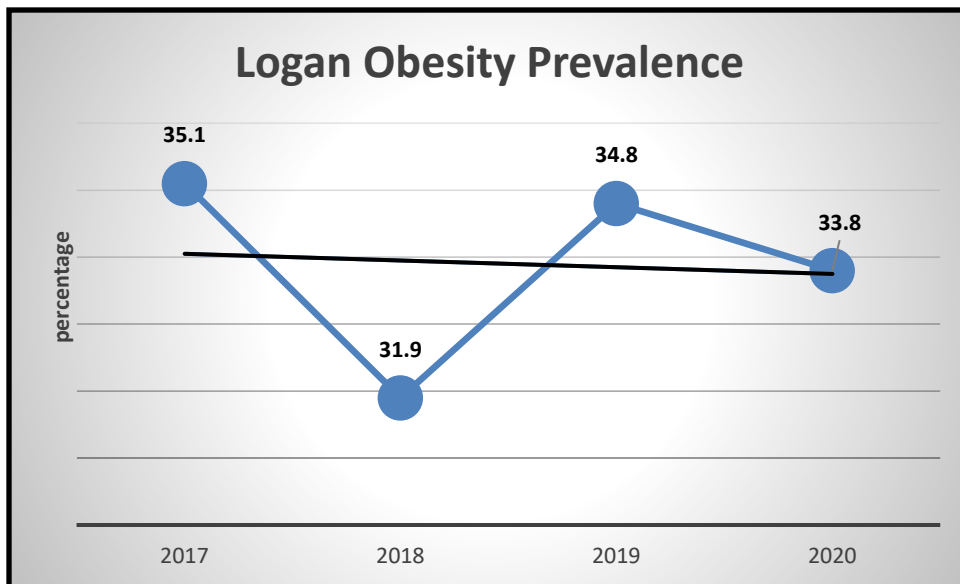


Obesity

Objectives:

- By 2025, decrease rate of adult obesity from 35.1% to 31.3%. (As reported by the State of the State's Health Report)

Two new data points were published with the 2022 Logan County Wellness Profile provided by OSDH Community Analysis & Linkages. They were: 2019 - 34.8%, and 2020 - 33.8%. The current rate is about 4% lower (better) than the starting rate.



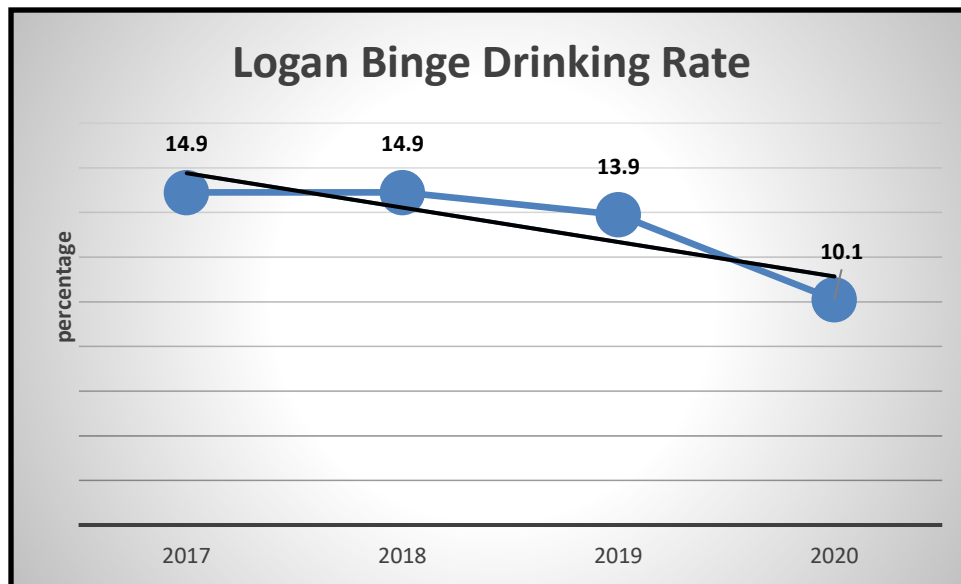
Issue Three:

Substance Use Disorder

Objectives:

- By 2025, decrease rate of binge drinking from 14.9% to 13.5%. (As reported by the State of the State's Health Report)

Three new data points were published with the 2022 Logan County Wellness Profile provided by OSDH Community Analysis & Linkages. They were: 2018 - 14.9%, 2019 - 13.9%, and 2020 - 10.1%. The current rate is about 32% lower (better) than the starting rate and **exceeds the performance objective for this measure.**

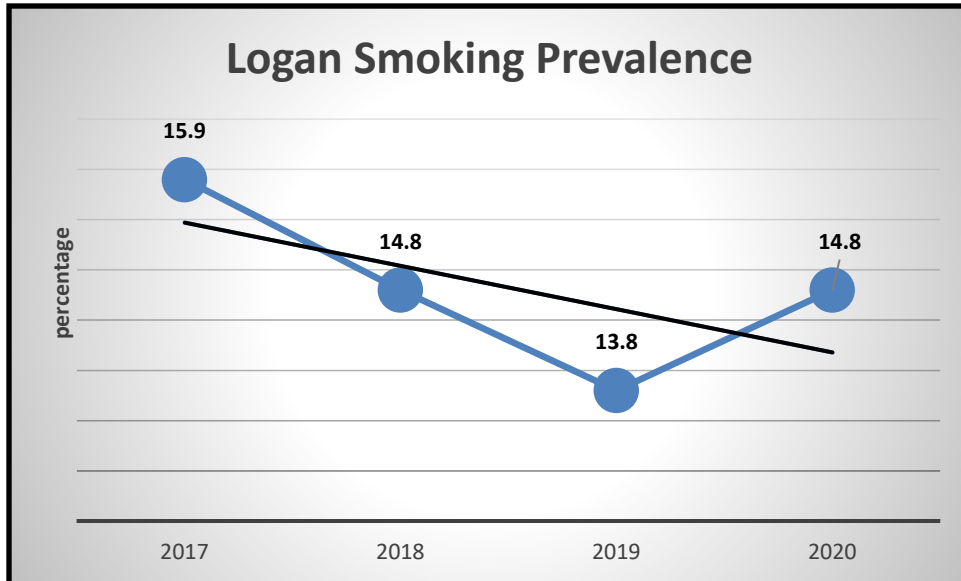


- By 2025, decrease rate of heavy drinkers from 4.8% to 3.4%. (As reported by the State of the State's Health Report)

There was no new data at the time of this report.

- By 2025, decrease rate of adult smoking prevalence from 15.9% to 14.4%. (As reported by the State of the State's Health Report)

Two new data points were published with the 2022 Logan County Wellness Profile provided by OSDH Community Analysis & Linkages. They were: 2019 - 13.8%, and 2020 - 14.8%. The current rate is about 7% lower (better) than the starting rate.



- By 2025, decrease rate of unintentional poisoning death from 10.2 per 100,000 population to 8.73. (As reported by the State of the State's Health Report)

There was no new data at the time of this report.

UPDATE: 10/24/2023

The most recent data available on OK2SHARE reports a rate of unintentional poisoning death for Logan County of 6.2. This was a 19% increase (worsening) but still continued to exceed the performance objective for this measure.

The linear trend rate demonstrated by the black line on the graph on the next page shows clear improvement in this area. However, the polynomial trend rate demonstrated by the red line shows the potential beginnings of an increasing (worsening) trend.

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2019 to 2021
Cause of Death	Accidental poisoning and exposure to noxious substances

10 records matched the search criteria.

Characteristics Selected for Records Search

Death Record Search Based on Query

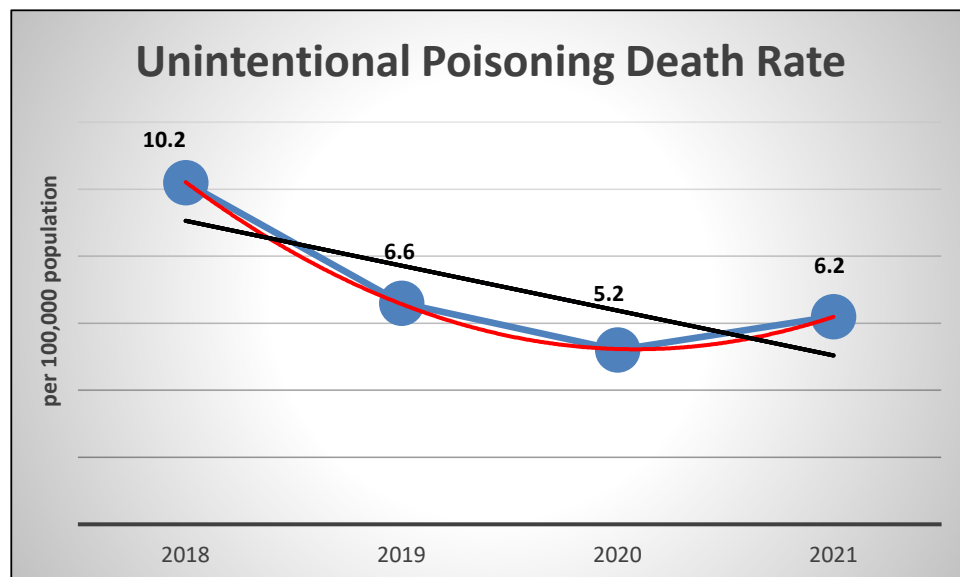
Age-adjusted rates based on 2000 US population standard.
All rates are deaths per 100,000 population.

Deaths	Population	Death Rate	Age-Adjusted Death Rate
10	147,746	6.8	6.2

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2019 to 2021, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 24OCT2023:14:59:04.

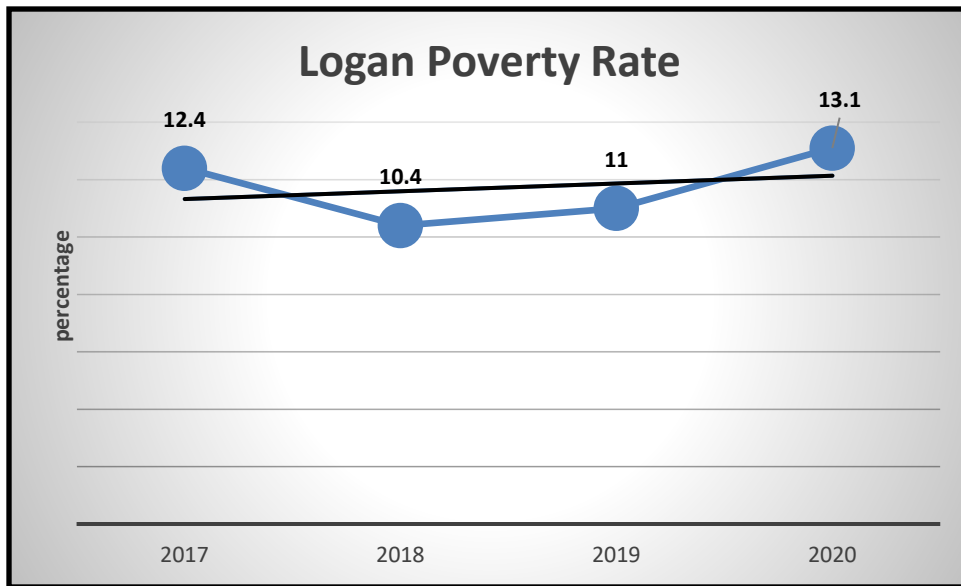


Poverty

Objectives:

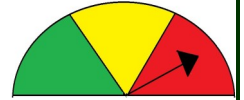
- By 2025, decrease poverty rate from 12.4% to 11.9%. (As reported by the State of the State’s Health Report)

According to the U.S. Census Bureau’s QuickFacts, Logan County’s poverty rate was 13.1%. This is a 19% increase (worsening) from last year. It is still below the state rate of 15.6% but is now higher than the national rate of 11.6%. The rate is 5.6% higher than where it started and no longer meets the performance objective for this measure.



Summary:

Mental Health



After what appeared to be a promising beginning, the rate of “frequent poor mental health days” is trending up (getting worse).

Obesity



After what appeared to be, once again, a promising beginning, the rate of obesity took an unwanted rebound. However, the trend continued to be down (getting better).

Substance Use Disorder



The rate of binge drinking has declined and currently exceeds the performance objective for this measure. The rate for heavy drinkers may not be accessible anymore. Adult smoking prevalence is trending down (improving), though it demonstrated a rebound during the last year of data. The rate of unintentional poisonings, a measure we use for insight into drug overdose, was not updated at the time of this report.

Poverty



The poverty rate is trending up (worsening) and is now higher than when we started this strategic plan cycle. In our last Annual Report we identified our concern about the rising poverty rate as a possible outcome of the COVID-19 pandemic. Typically, the latest data available is a snapshot of a year-or-two in the past. Therefore, this current rate may fall in the middle of the pandemic.

Fourth Annual Report

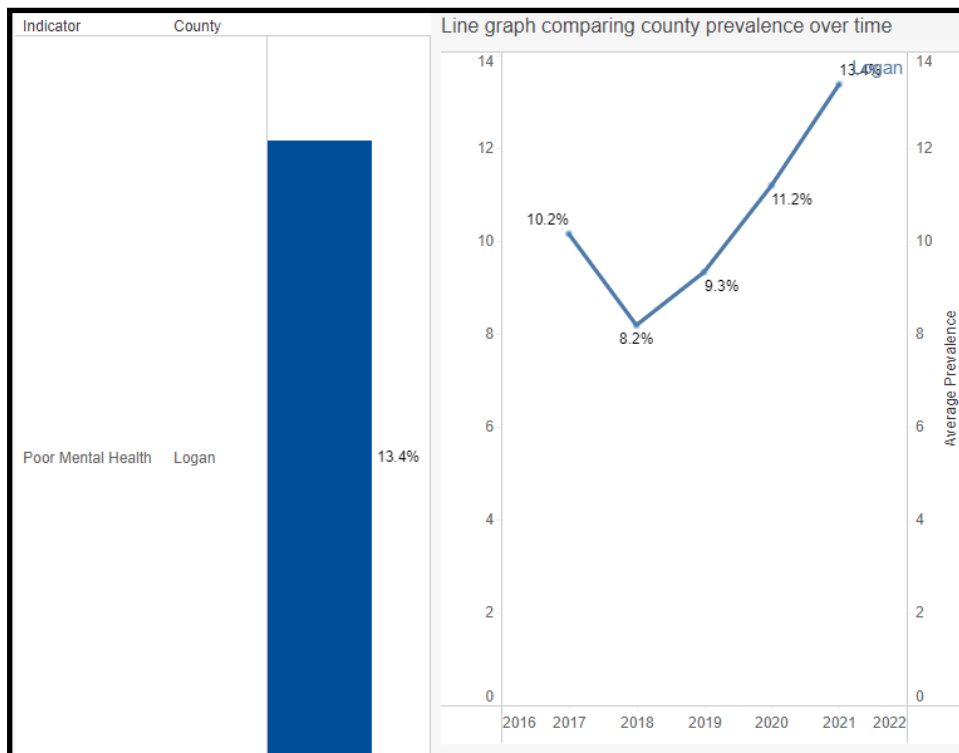
Issue One:

Mental Health

Objectives:

- By 2025, decrease rate of frequent poor mental health days from 10.2% to 9.3%. (As reported by the State of the State's Health Report)

The 2024 County Wellness Profile reported a Poor Mental Health rate of 13.4%. This was a 20% increase (worsening).



- By 2025, decrease suicide rate from 23.7/100,000 to 18.8. (As reported by the State of the State's Health Report)

The most recent data on OK2SHARE reports a suicide rate for Logan County of 16.2. This was a 9% decrease (improvement) and represents the lowest suicide rate for Logan County during this CHIP cycle. The rate continued to exceed the performance objective for this measure. See next page.

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2020 to 2022
Cause of Death	Intentional self-harm (suicide)

25 records matched the search criteria.

Characteristics Selected for Records Search

Death Record Search Based on Query

Age-adjusted rates based on 2000 US population standard.
All rates are deaths per 100,000 population.

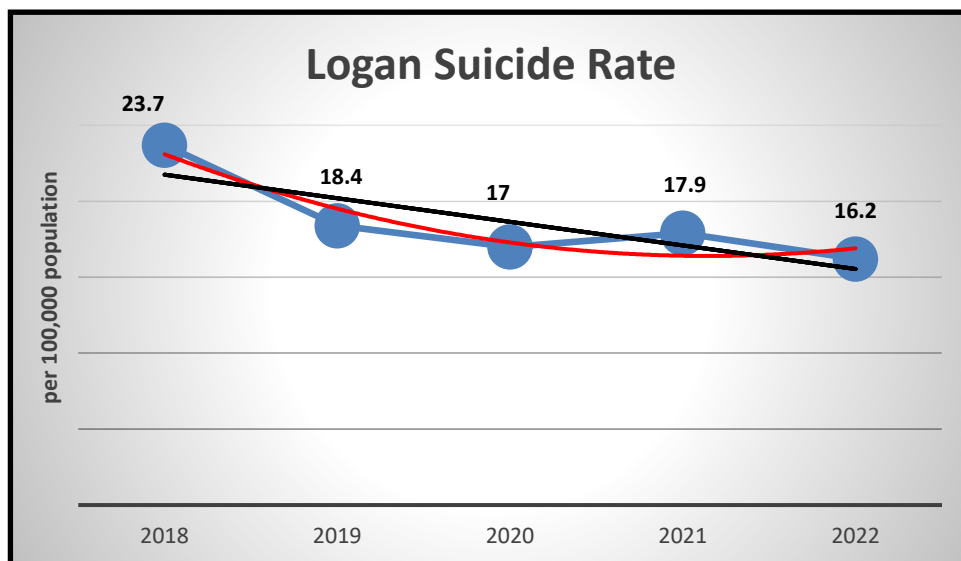
Deaths	Population	Death Rate	Age-Adjusted Death Rate
25	151,595	16.5	16.2

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2020 to 2022, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 29APR2024:09:31:05.

The linear trend rate demonstrated by the black line on the graph below shows clear improvement in this area. However, the polynomial trend rate demonstrated by the red line shows the potential beginning of an increasing (worsening) trend.



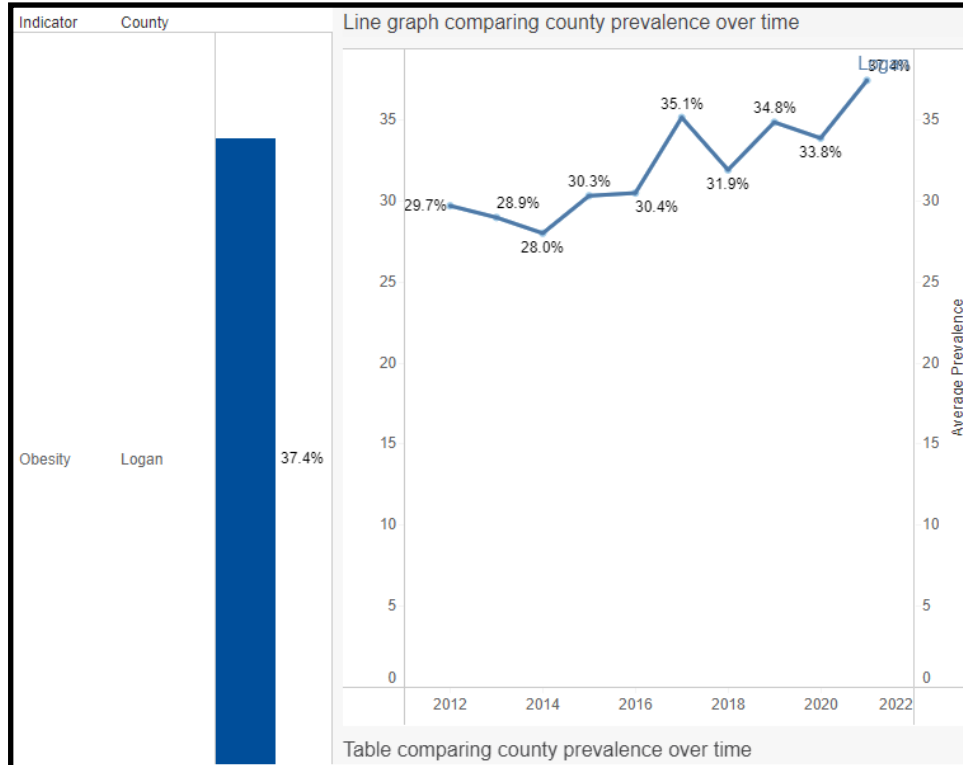
Issue Two:

Obesity

Objectives:

- By 2025, decrease rate of adult obesity from 35.1% to 31.3%. (As reported by the State of the State's Health Report)

The 2024 County Wellness Profile reported an Obesity rate for Logan County of 37.4%. This was an 11% increase (worsening).



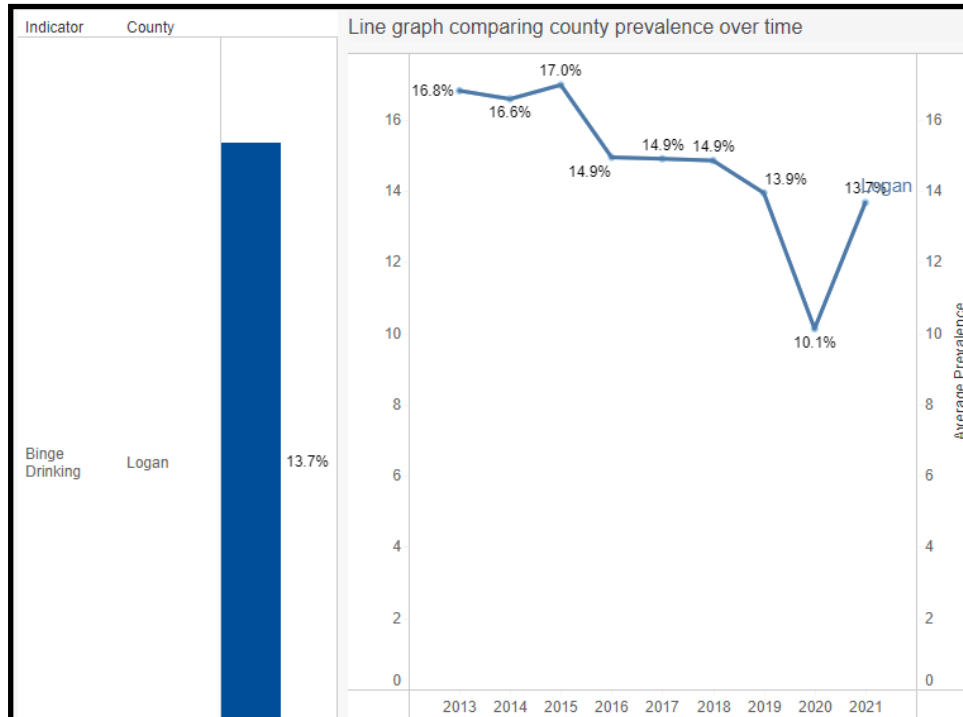
Issue Three:

Substance Use Disorder

Objectives:

- By 2025, decrease rate of binge drinking from 14.9% to 13.5%. (As reported by the State of the State's Health Report)

The 2024 County Wellness Profile reported a Binge Drinking rate for Logan County of 13.7%. This was a 36% increase (worsening). This measure no longer meets its performance measure.



- By 2025, decrease rate of heavy drinkers from 4.8% to 3.4%. (As reported by the State of the State's Health Report)

There was no new data at the time of this report. It is possible that this metric will no longer be reported by OSDH.

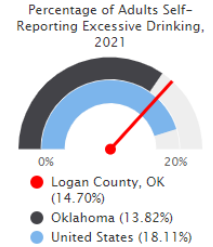
CARES University of Missouri Extension (Community Commons), a secondary data source, reports the following for Logan County Heavy Alcohol Consumption:

Alcohol - Heavy Alcohol Consumption

In the report area, 5,856, or 14.70% adults self-report excessive drinking in the last 30 days, which is greater than the state rate of 13.82%. Data for this indicator were based on survey responses to the 2021 Behavioral Risk Factor Surveillance System (BRFSS) annual survey and are used for the 2024 County Health Rankings.

Excessive drinking is defined as the percentage of the population who report at least one binge drinking episode involving five or more drinks for men and four or more for women over the past 30 days, or heavy drinking involving more than two drinks per day for men and more than one per day for women, over the same time period. Alcohol use is a behavioral health issue that is also a risk factor for a number of negative health outcomes, including: physical injuries related to motor vehicle accidents, stroke, chronic diseases such as heart disease and cancer, and mental health conditions such as depression and suicide. There are a number of evidence-based interventions that may reduce excessive/binge drinking; examples include raising taxes on alcoholic beverages, restricting access to alcohol by limiting days and hours of retail sales, and screening and counseling for alcohol abuse (Centers for Disease Control and Prevention, Preventing Excessive Alcohol Use, 2020).

Report Area	Population Age 18+	Adults Reporting Excessive Drinking	Percentage of Adults Reporting Excessive Drinking
Logan County, OK	39,857	5,856	14.70%
Oklahoma	3,041,356	420,199	13.82%
United States	259,746,218	47,041,079	18.11%

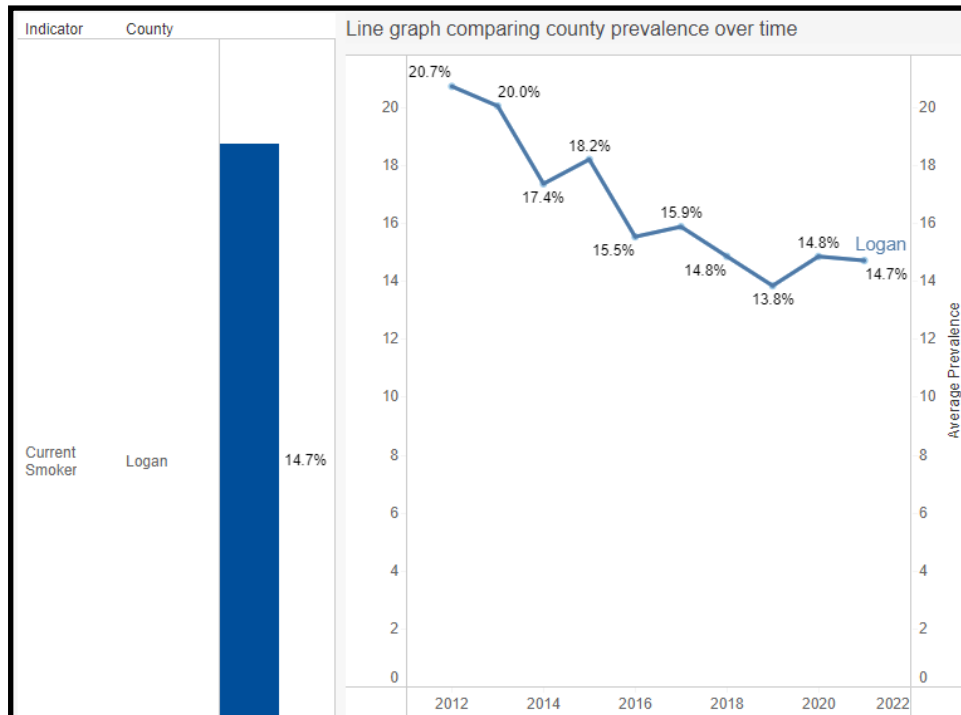


Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via County Health Rankings. 2021. → Show more details

- By 2025, decrease rate of adult smoking prevalence from 15.9% to 14.4%. (As reported by the State of the State's Health Report)

The 2024 Wellness County Profile reported a Current Smoker rate for Logan County of 14.7%. This was essentially the same as the previously reported 14.8%.



- By 2025, decrease rate of unintentional poisoning death from 10.2 per 100,000 population to 8.73. (As reported by the State of the State’s Health Report)

The most recent data on OK2SHARE reports a rate of unintentional poisoning death for Logan County of 11.6. This was an 87% increase (worsening). This measure no longer meets its performance objective.

The linear trend rate demonstrated by the black line on the graph is now increasing (worsening). The polynomial trend rate demonstrated by the red line shows an acceleration towards increasing (worsening). The green line roughly indicates the performance objective. The unintentional poisoning rate for Logan County has gone from three years of meeting and exceeding the performance objective to a point that is now higher than the original rate when this strategic plan began.

Detailed Mortality Statistics

Characteristics Selected for Records Search

Search Characteristic	Values Selected
Counties	Logan
Years	2020 to 2022
Cause of Death	Accidental poisoning and exposure to noxious substances

17 records matched the search criteria.

Characteristics Selected for Records Search

Death Record Search Based on Query

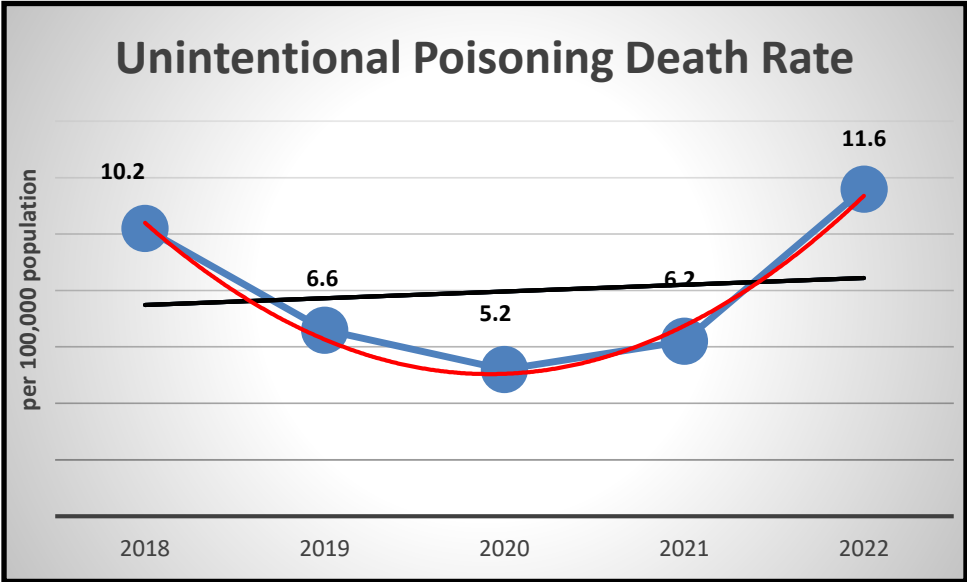
Age-adjusted rates based on 2000 US population standard.
All rates are deaths per 100,000 population.

Deaths	Population	Death Rate	Age-Adjusted Death Rate
17	151,595	11.2	11.6

Calculations may have been suppressed due to small cell size (less than 5 deaths/populations less than 20)

Suggested Citation:

Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2020 to 2022, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share> on 24 JUN 2024:13:50:28.

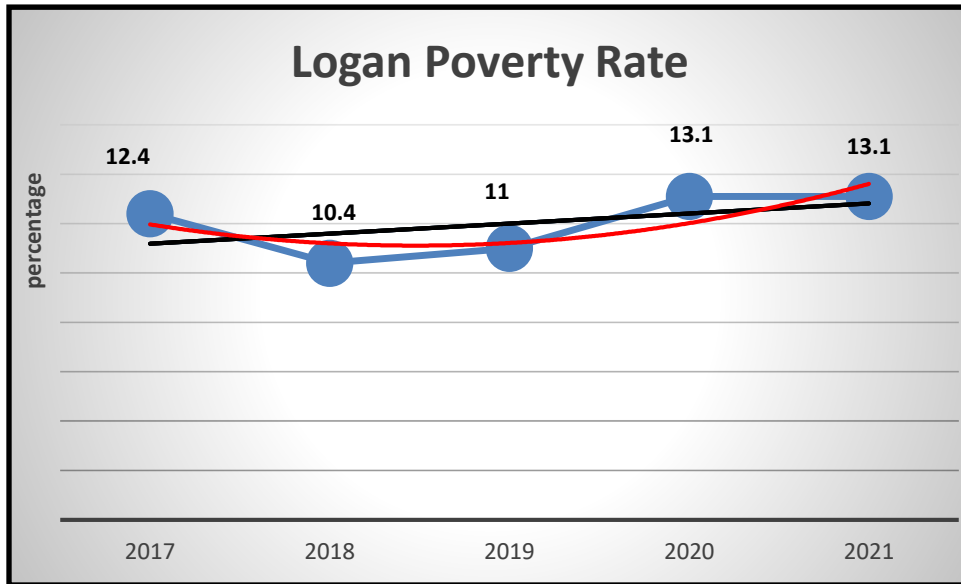


Poverty

Objectives:

- By 2025, decrease poverty rate from 12.4% to 11.9%. (As reported by the State of the State’s Health Report)

The 2024 Wellness County Profile reported a poverty rate that it, in turn, took from the United States Census Bureau. The reported rate was 13.1%. This is the same rate as previously reported. Trends indicate that this measure is getting worse.



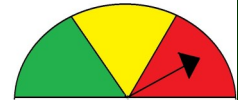
Summary:

Mental Health



The rate of poor mental health days continues to rise. However, the suicide rate continues to improve which represents lives saved.

Obesity



The obesity rate is now 7% higher than when this strategic plan began.

Substance Use Disorder



Binge drinking increased by 36%. Unintentional poisonings increased by 87%, meaning it was likely that drug overdose increased. Adult smoking prevalence stayed essentially the same (improved by .6%). Two performance objectives that were previously met for binge drinking and unintentional poisonings regressed back to unmet levels. Overall, substance abuse increased in Logan County.

Poverty



The poverty rate remained the same. The trend continues to be worsening.

Commentary

The data presented in the Fourth Annual Report represented the world we lived in approximately two years ago. At that time we were still dealing with COVID and all of its myriad effects.

At the start of the COVID-19 pandemic, life for many people changed very quickly. Worry and concern were natural partners of all that change — getting used to new routines, loneliness and financial pressure, among other issues. Information overload, rumor and misinformation didn't help.²⁹

Worldwide surveys done in 2020 and 2021 found higher than typical levels of stress, insomnia, anxiety and depression. By 2022, levels had lowered but were still higher than before 2020.²⁹

These higher levels of stress may have contributed significantly to stress-reaction behaviors such as having poor mental health days, overeating, reduced physical activity, smoking, drinking, and drug use. And the financial pressures alluded to above included the loss of jobs and household income.

29. Mayo Clinic. (April 4, 2024). COVID-19 and your mental health. <https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/mental-health-covid-19/art-20482731>.

References

1. Linda D. Wilson, "Logan County," The Encyclopedia of Oklahoma History and Culture, <https://www.okhistory.org/publications/enc/entry.php?entry=LO005>.
2. Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2018. U.S. Census Bureau, Population Division, December 2018.
3. Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2018. U.S. Census Bureau, Population Division, April 2019.
4. U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates, DP05.
5. U.S. Census Bureau, 2013-2017 American Community Survey 5Year Estimates, DP03.
6. Oklahoma State of the State's Health Report. (Feb 26, 2019). Data - Health Indicators - Frequent Poor Mental Health Days (≥ 14 days in the past 30 days) - Learn More.
7. Oklahoma State of the State's Health Report. (Feb 26, 2019). Data - Health Indicators - Obesity (Adults) - Learn More.
8. U.S. Department of Health & Human Services (04/13/2019). Substance Abuse and Mental Health Services Administration. Mental Health and Substance Use Disorders. samhsa.gov/find-help/disorders.
9. Centers for Disease Control and Prevention. Sociodemographic differences in binge drinking among adults- 14 states, 2004. MMWR Morb Mortal Wkly Rep. 2009;58:301-304.
10. Campaign for Tobacco Free Kids. The Toll of Tobacco in Oklahoma. Retrieved from <https://www.tobacofreekids.org/problem/toll-us/oklahoma> on May 18, 2018.
11. Centers for Disease Control and Prevention. Health Effects. Retrieved from https://www.cdc.gov/tobacco/basic_information/health_effects/index.htm on May 18, 2018.
12. Campaign for Tobacco Free Kids. Smoke-Free Laws. Retrieved from <https://www.tobacofreekids.org/what-we-do/us/smoke-free-laws> on May 18, 2018.
13. Oklahoma State of the State's Health Report. (Feb 26, 2019). Data - Health Indicators - Poverty - Learn More.
14. Oklahoma Policy Institute. (Sep 13, 2018). New Census data shows that Oklahoma fell further behind the U.S. on poverty and uninsured rate for second consecutive year. Retrieved from okpolicy.org/new-census-data-shows-that-Oklahoma-fell-further-behind-the-u-s-on-poverty-and-uninsured-rate-for-second-consecutive-year/
15. Yoshikawa H, Aber JL, Beardslee WR. The effects of poverty on the mental, emotional, and behavioral health of children and youth: implications for prevention. *Am Psychol.* 2012;67(4):272-84.
16. Riccio J, Dechausay N, Greenberg D, Miller C, Rucks Z, Verma N. Toward reduced poverty across generations: Early findings from New York City's conditional cash transfer program. New York, (NY): MDRC; 2010.
17. Love JM, Kisker EE, Ross CM, Schochet PZ, Brooks-Gunn J, Paulsell D, Brady-Smith C. Making a difference in the lives of infants and toddlers and their families: The impacts of early Head Start. Princeton (NJ): Mathematica Policy Research; 2002.
18. Blank RM. Evaluating welfare reform in the United States. *Journal of Economic Literature.* 2002;40(4):1105-1166.

19. Huang J, Barnidge E. Low-income Children's participation in the National School Lunch Program and household food insufficiency. *Social Science & Medicine*. 2016;150:8-14.
20. Center for the Study of Social Policy. (March 2014). Results-Based Public Policy Strategies for Reducing Child Poverty. Retrieved from <https://www.cssp.org/policy/2014/Results-Based-Public-Policy-Strategies-for-Reducing-Child-Poverty.pdf>.
21. Guthrie News Page. (May 21, 2020). "Hall, Mize legislation setting standards for Farmers Markets signed into law." Retrieved from guthrienewspage.com/hall-mize-legislation-setting-standards-for-farmers-markets-signed-into-law/.
22. Guthrie News Page. (May 21, 2020). "Governor signs bill raising minimum age to buy tobacco products to 21." Retrieved from guthrienewspage.com/governor-signs-bill-raising-minimum-age-to-buy-tobacco-products-to-21/.
23. Guthrie News Page. (June 3, 2020). "City adopts amendment to tobacco ordinance in hopes of receiving grant for parks." Retrieved from guthrienewspage.com/city-adopts-amendment-to-tobacco-ordinance-in-hopes-of-receiving-grant-for-parks/.
24. Guthrie News Page. (October 7, 2020). "City ordinance amended to buy tobacco, vape products from age 18 to 21." Retrieved from guthrienewspage.com/city-ordinance-amended-to-buy-tobacco-vape-products-from-18-to-21/.
25. Certified Healthy Oklahoma. certifiedhealthyok.com.
26. Guthrie News Page. (May 29, 2020). "Logan County DHS building on the list to close down." Retrieved from guthrienewspage.com/logan-county-dhs-bulding-on-the-list-to-close-down/.
27. City of Guthrie City Council Meeting, 65th City Council. (June 2, 2020). City Council Agenda Packet, pg. 47. <https://www.cityofguthrie.com/ArchiveCenter/ViewFile/Item/2874>.
28. Centers for Disease Control and Prevention. (May 16, 2014). Behavioral Risk Factor Surveillance System: About BRFSS. cdc.gov/brfss/about/index.htm.
29. Mayo Clinic. (April 4, 2024). COVID-19 and your mental health. <https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/mental-health-covid-19/art-20482731>.

Version History

The version numbering is as follows:

- The initial version is 1.0
- After the baseline (v 1.0), all subsequent minor changes should increase the version number by 0.1
- After the baseline (v 1.0), all subsequent major changes should increase the version number by 1.0

Version Number	Change Request Number (if applicable)	Accepted Date	Author	Summary of Change
1.0		2/27/2020	Mikeal Murray	Release of initial document
1.1		3/2/2020	Mikeal Murray	Added Activity, 2/28 Resilience Screening
1.2		3/16/2020	Mikeal Murray	COVID-19
1.3		3/20/2020	Mikeal Murray	Added Update, 2020 County Health Rankings & Roadmaps
1.4		7/21/2020	Mikeal Murray	Added Activities and Updates, rearrange location of References and Version History
1.5		10/8/2020	Mikeal Murray	Added October 7th Activity
1.6		10/15/2020	Mikeal Murray	Added October 15th Activity
2.0		4/19/2021	Mikeal Murray	First Annual Report
2.1		5/4/2021	Mikeal Murray	Added 2021 County Health Rankings & Roadmaps
2.2		9/2/2021	Mikeal Murray	Added August 30th Activity
3.0		4/7/2022	Mikeal Murray	Second Annual Report
3.1		7/13/2022	Mikeal Murray	Updated data
4.0		3/13/2023	Mikeal Murray	Third Annual Report
4.1		10/24/2023	Mikeal Murray	Updated officers, added updates for suicide and unintentional death
5.0		6/24/2024	Mikeal Murray	Fourth Annual Report

Notes:

Logan County Community Health Improvement Plan

For more information or to get involved, contact:

Aimee Waller, Chair

Core Family Member

mataim@cox.net

(405) 431-5125

Josh Snider, Vice-Chair

Logan County Health Department

Josh.snider@health.ok.gov

(405) 282-3485

Jennifer Roysdon, Secretary

OSDH Cancer Coalition Coordinator

jennifer.roysdon@health.ok.gov

(405) 426-8279

Written for Logan County Partnership by Mikeal Murray, Accreditation Coordinator, Logan County Health Department, mikealm@health.ok.gov

In memory of Linda Charney