OKLAHOMA STATE DEPARTMENT OF HEALTH

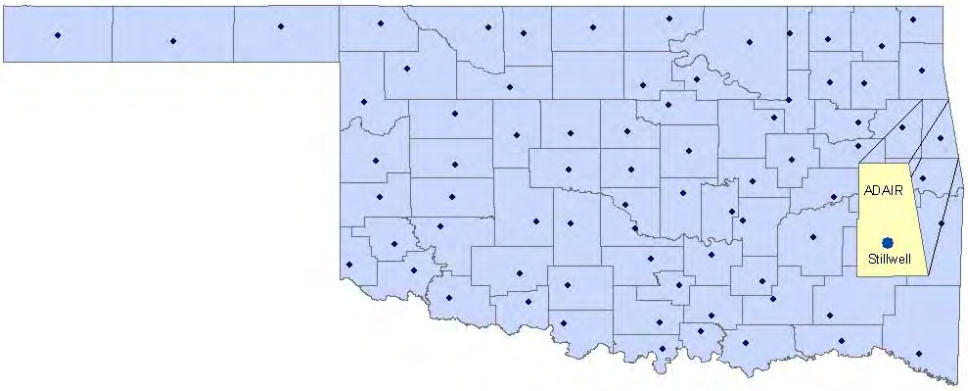
State of the County's Health Report

A Look Back To Move Forward

Adair County

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

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



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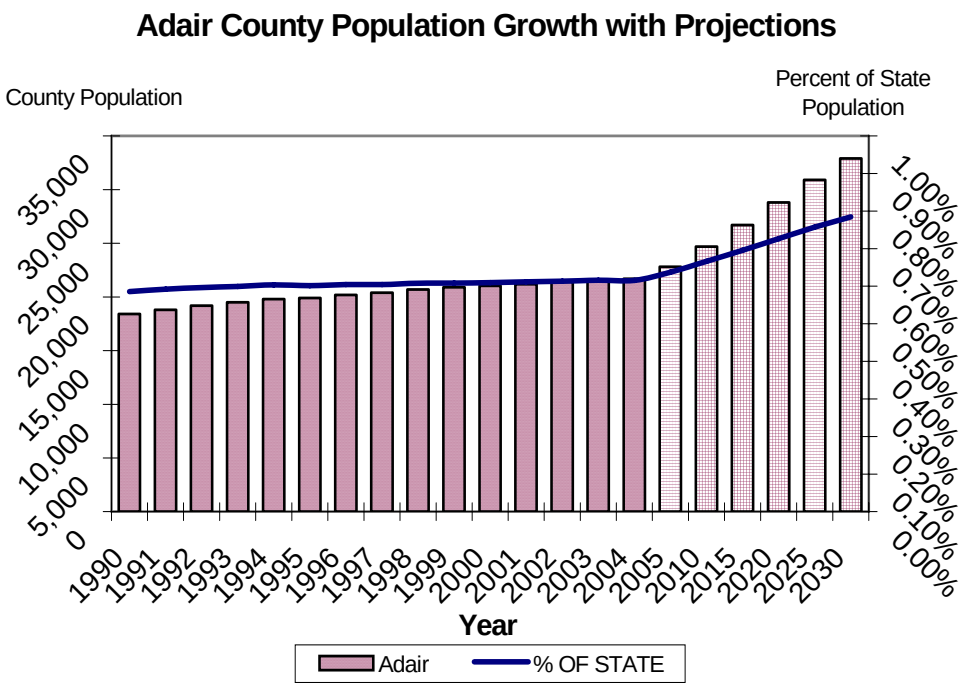
Demographics

** U.S. Census Bureau*

- Population estimates
  - 14% increase 1990 to 2000 (18,421 to 21,038)
    - state increase = 10%
  - 3.1% increase from 2000 to 2004
  - Ranked 16th for growth in state

2000 Census
- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 48.5%
  - Native Americans = 42.5%
  - Blacks = 0.2%
  - Other/Multiple = 8.8%
- Age
  - Under 5 = 7.5%
  - Over 64 = 12.0%
  - Median age = 33.2 years
- Housing units
  - Occupied = 7,471 (89.5%)
  - Vacant = 877 (10.5%)
- Disability (ages 21 to 64) = 26.6%
  state = 21.5% national = 19.2%
- Families below poverty = 19.4%
  state = 11.2% national = 9.2%



** Vital Statistics,* Health Care Information Systems, OSDH &

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Adair County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted.

From 1983 to 1993 heart disease killed 786 people in Adair County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 67 deaths a year, heart disease accounts for almost $25 million a year in medical costs in Adair County.

Heart disease accounts for almost $25 million a year in medical costs in Adair County.

Alzheimer's disease and the complications associated has increased from the 16th ranked cause of death (1983-1993) to the 11th leading cause of death in persons 65 and older accounting for a 233% increase in deaths.

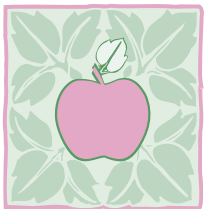
** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 31.3% (6,750) of people in Adair County were considered obese which accounted for an additional $2,666,250 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Adair County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 13	UNINTENT. INJURY 5	UNINTENT. INJURY 32	UNINTENT. INJURY 16	CANCER 24	CANCER 55	CANCER 108	HEART DISEASE 585	HEART DISEASE 738
2	PERINATAL PERIOD 11	HEART DISEASE 1	HOMICIDE/ LEGAL 5	HOMICIDE/ LEGAL 8	UNINTENT. INJURY 18	HEART DISEASE 37	HEART DISEASE 92	CANCER 323	CANCER 517
3	UNINTENT. INJURY 5	HOMICIDE/ LEGAL 1	CANCER 4	SUICIDE 7	HEART DISEASE 17	UNINTENT. INJURY 18	DIABETES MELLITUS 26	STROKE 155	STROKE 188
4	SIDS 3	HYPERTENSION 1	SUICIDE 3	HEART DISEASE 3	HOMICIDE/ LEGAL 7	DIABETES MELLITUS 11	STROKE 19	INFLUENZA/ PNEUMONIA 81	UNINTENT. INJURY 148
5	STROKE 2	SUICIDE 1	HEART DISEASE 2	DIABETES MELLITUS 2	STROKE 6	LIVER DISEASE 11	BRONCHITIS/ EMPHYSEMA/ ASTHMA 16	BRONCHITIS/ EMPHYSEMA/ ASTHMA 76	DIABETES MELLITUS 109
6	HEART DISEASE 1	OTHER 1	OTHER 5	HIV 2	LIVER DISEASE 6	STROKE 5	UNINTENT. INJURY 12	DIABETES MELLITUS 67	BRONCHITIS/ EMPHYSEMA/ ASTHMA 95
7	CANCER 1			CANCER 2	SUICIDE 6	SUICIDE 5	LIVER DISEASE 5	UNINTENT. INJURY 42	INFLUENZA/ PNEUMONIA 88
8	OTHER 8			CONGENITAL ANOMALIES 1	DIABETES MELLITUS 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	KIDNEY DISEASE 4	KIDNEY DISEASE 26	SEPTICEMIA (BLOOD POISONING) 33
9				LIVER DISEASE 1	HIV 3	HOMICIDE/ LEGAL 3	SEPTICEMIA (BLOOD POISONING) 4	SEPTICEMIA (BLOOD POISONING) 26	LIVER DISEASE 31
10				OTHER 7	INFLUENZA/ PNEUMONIA 2	INFLUENZA/ PNEUMONIA 3	TWO CAUSES TIED 3	ATHERO-SCLEROSIS 25	KIDNEY DISEASE 30

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

July 2005

Injury and Violence

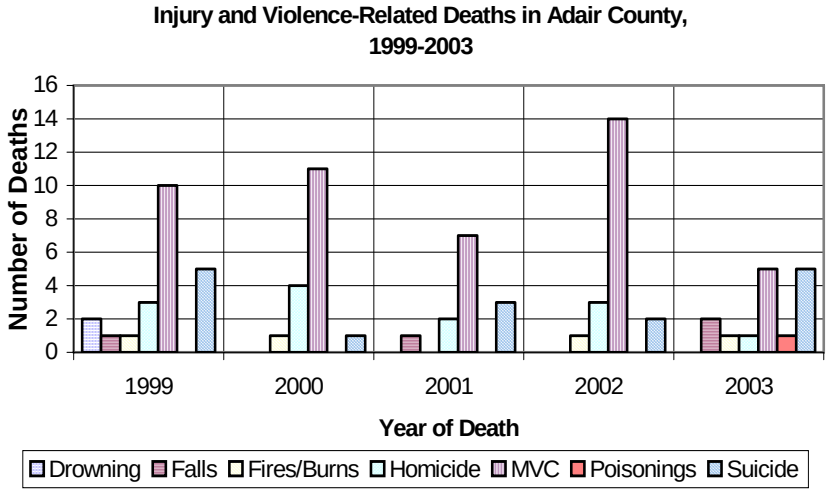
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Adair County. Unintentional injuries are the leading cause of death from ages 5 to 34 and the 2nd cause of death in ages 35 to 44 in Adair County.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Adair County which has an average of 9.4 motor vehicle-related deaths a year, that translates to over $10 million a year.

Violence-related injuries (homicide and suicide) in Adair County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.8% (4,917) of people in Adair County use tobacco of some sort. Medical costs accumulated by those persons are over $16 million a year for Adair County.

> *"Medical costs accumulated by those persons are over **$16 million a year** for Adair County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 44.2% (9,533) of people in Adair County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.4% (2,243) of Adair County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $29,704,049 in one year for Adair County.

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

Teen Pregnancy

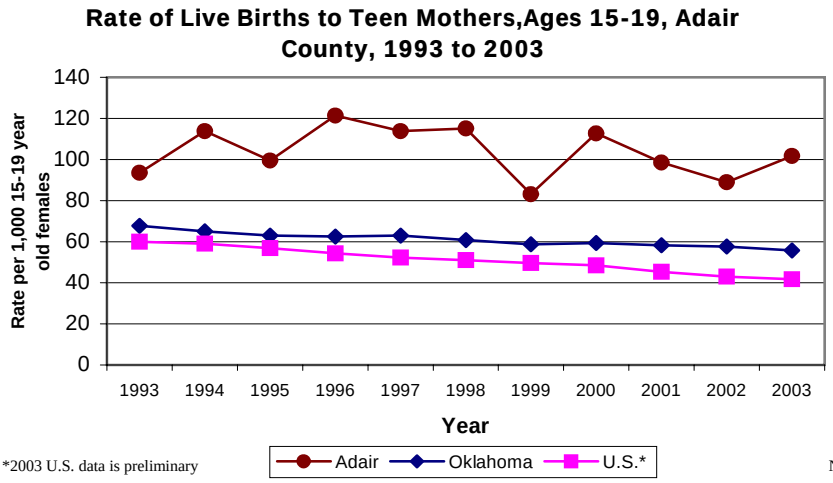
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Adair County had a teen birth rate of 101.7 in 2003 which was a 14% increase from 2002 (88.9) and a 9% increase since 1993 (93.6).

With an average of 85 births per year, teen pregnancy costs the citizens of Adair County $272,000.00 a year.



*2003 U.S. data is preliminary

Note: 13 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 23.2% of persons in Adair County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Adair County is 58% above the state (14.7%) and 87% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Adair County, 2000 Census

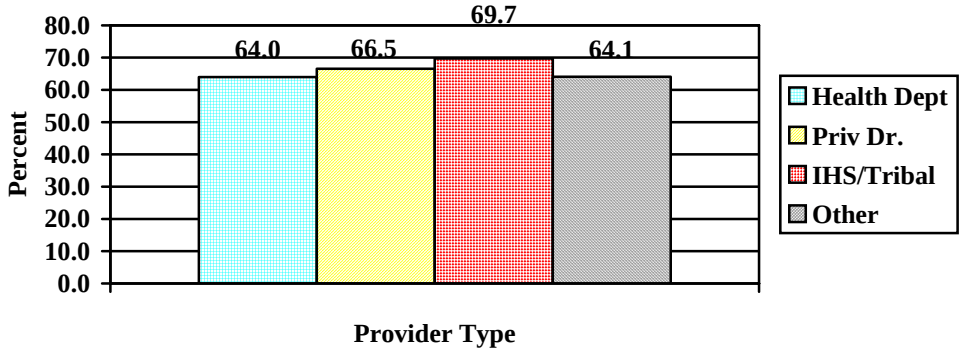
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	20,552	1,762	3,008	3,479	3,012	9,291
Cumulative Population		1,762	4,770	8,249	11,261	20,552
% of Total	100.0%	8.6%	14.6%	16.9%	14.7%	45.2%
Cumulative %		8.6%	23.2%	40.1%	54.8%	100.0%

OK By One - State Immunization Data

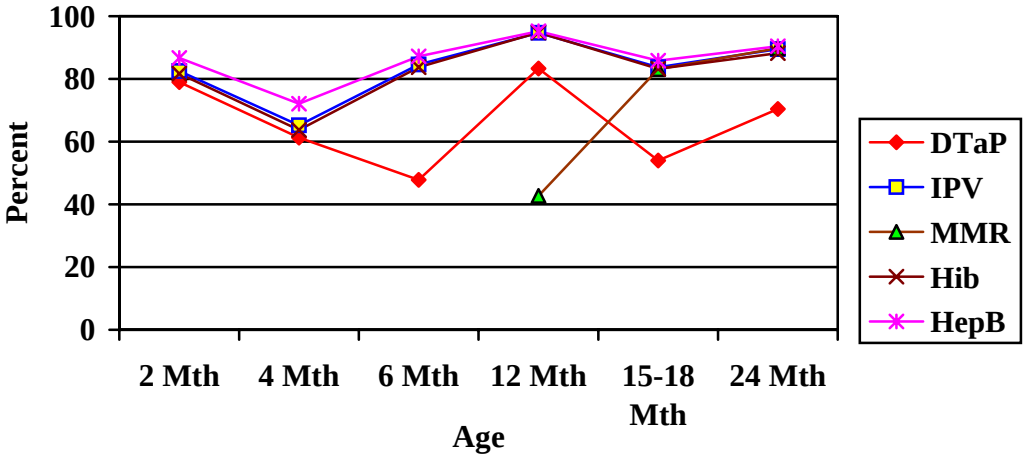
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

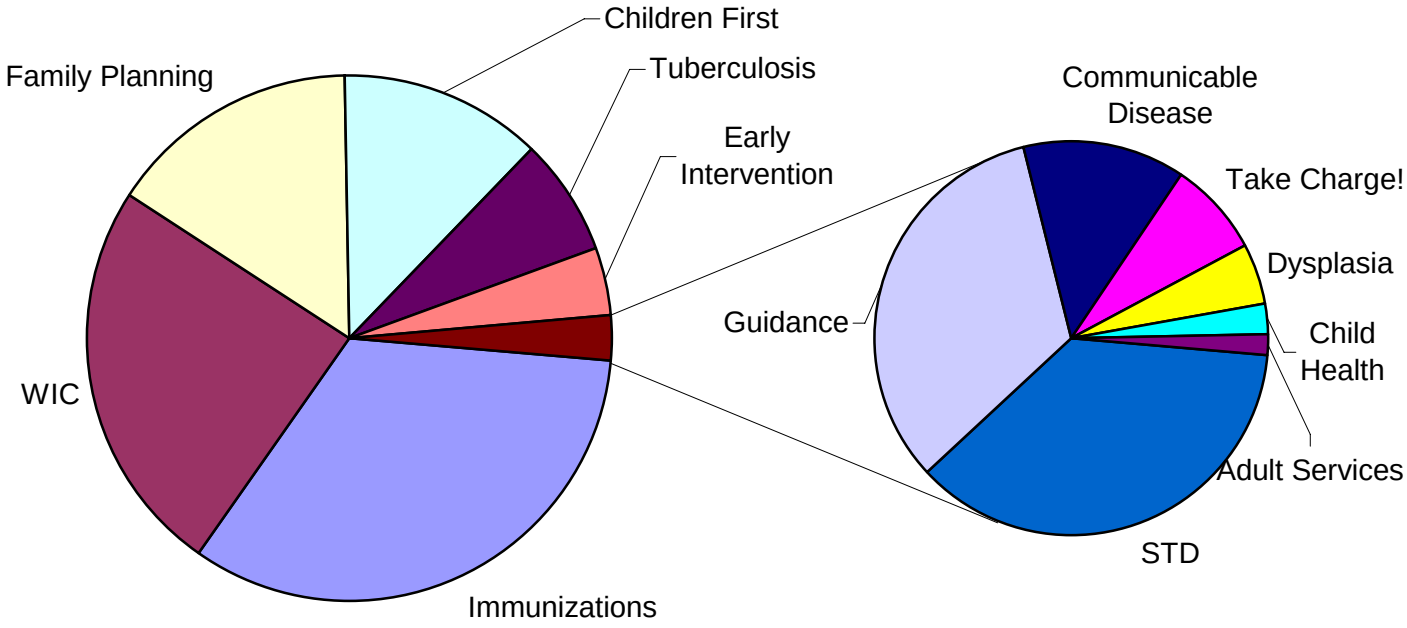


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services, OSDH*

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 67 deaths a year
- $369,476.69 per death
- Total— $24,754,938.23 a year

Obesity

- 31.3% of population (6,765)
- $395.00 in additional medical costs per person
- Total—$2,672,175.00

Motor Vehicle-Related Injury Death

- Average 9.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$10,528,000.00 a year

Tobacco Use

- 22.8% of population (4,928)
- $3,300.00 in health care costs
- Total—$16,262,400.00 a year

Diabetes

- 10.4% of population (2,248)
- $13,243.00 in healthcare costs a year
- Total—$29,770,264.00 a year

Teen Pregnancy

- Average of 85 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $272,000.00 a year

Grand Total for Adair County:

$84,259,777.23

OKLAHOMA STATE DEPARTMENT OF HEALTH

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Looking Back to Move Forward

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

Alfalfa County

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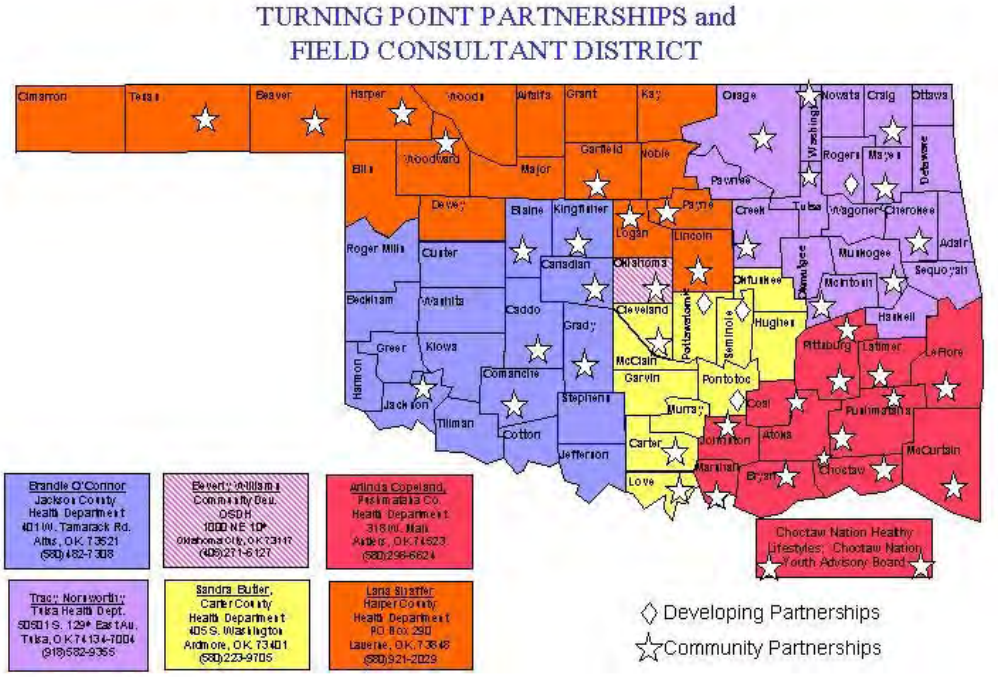

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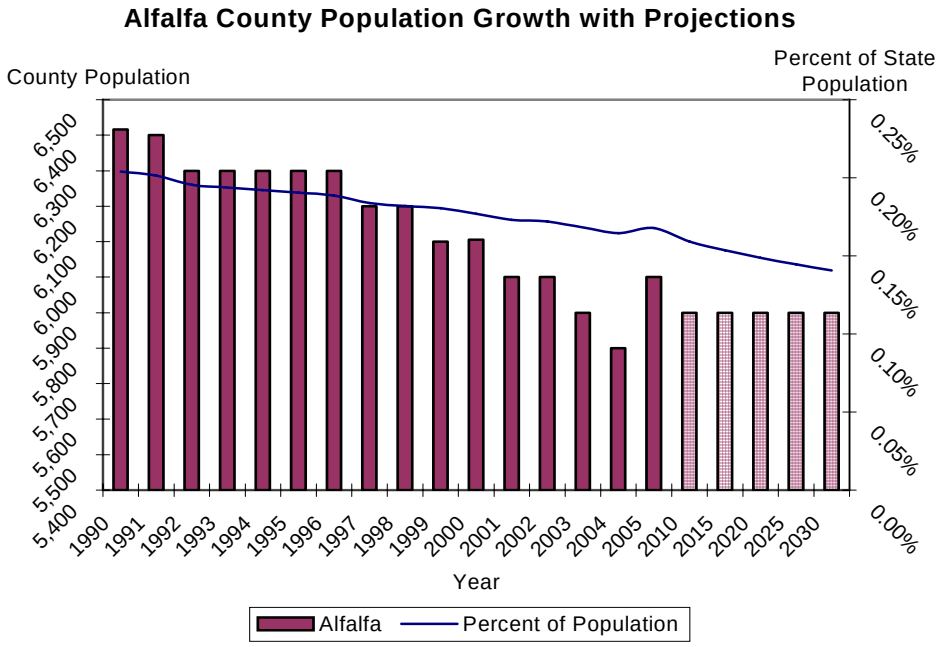
Demographics

** U.S. Census Bureau*

- Population estimates
  - 5% decrease from 1990 to 2000 (6,416 to 6,105)
  - 5% decrease from 2000 to 2004
  - Ranked 68th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 89%
  - Native Americans =3%
  - Blacks =4%
  - Other/Multiple = 4%
- Age
  - Under 5 = 5%
  - Over 64 = 20%
  - Median age = 42.3 years
- Housing units
  - Occupied = 2,199 (78%)
  - Vacant = 633 (22%)
- Disability (ages 21 to 64) = 18.2% national = 19.2% state = 21.5%
- Individuals below poverty = 13.7% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Alfalfa County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 432 people in Alfalfa County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 30.1 deaths a year, heart disease accounts for over $11 million a year in medical costs in Alfalfa County.

Heart disease accounts for over $11 million a year in medical costs in Alfalfa County.

Alzheimer's disease and the complications associated with it have decreased from the 11th ranked cause of death (1983-1993) to the 14th ranked cause of death in persons 65 and older accounting for a 57% decrease in deaths.

Nutrition and Obesity

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

No Data Available At This Time

Top 10 Causes of Death by Age Group

Alfalfa County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	UNINTENT. INJURY 4	UNINTENT. INJURY 2	UNINTENT. INJURY 5	SUICIDE 4	CANCER 3	HEART DISEASE 10	HEART DISEASE 31	HEART DISEASE 287	HEART DISEASE 332
2	HEART DISEASE 1	HEART DISEASE 1	HEART DISEASE 1	HIV 2	SUICIDE 2	CANCER 8	CANCER 17	CANCER 136	CANCER 164
3	PERINATAL PERIOD 1		SUICIDE 1	CONGENITAL ANOMALIES 1	UNINTENT. INJURY 2	UNINTENT. INJURY 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 6	STROKE 71	STROKE 74
4	OTHER 1			UNINTENT. INJURY 1	DIABETES MELLITUS 1	DIABETES MELLITUS 2	UNINTENT. INJURY 5	INFLUENZA/ PNEUMONIA 58	INFLUENZA/ PNEUMONIA 60
5				OTHER 1	INFLUENZA/ PNEUMONIA 1	VIRAL HEPATITIS 2	STROKE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 35	BRONCHITIS/ EMPHYSEMA/ ASTHMA 41
6					OTHER 1	STROKE 1	DIABETES MELLITUS 2	DIABETES MELLITUS 20	UNINTENT. INJURY 40
7						LIVER DISEASE 1	SEPTICEMIA (BLOOD POISONING) 2	KIDNEY DISEASE 17	DIABETES MELLITUS 25
8						OTHER 2	INFLUENZA/ PNEUMONIA 1	UNINTENT. INJURY 16	KIDNEY DISEASE 18
9							LIVER DISEASE 1	ATHERO-SCLEROSIS 12	ATHERO-SCLEROSIS 12
10							OTHER 7	PNEUMONITIS 12	TWO CAUSES TIED 12

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

Injury and Violence

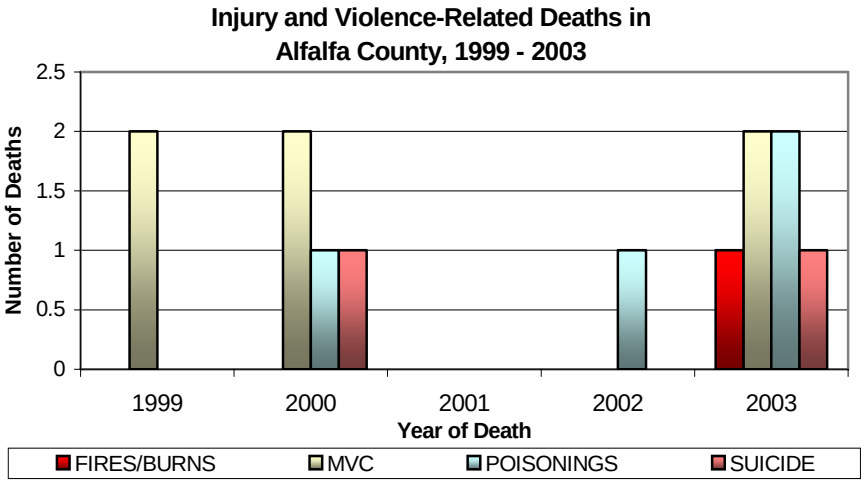
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Alfalfa County. Unintentional injuries are the leading cause of death from ages 5 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Alfalfa County which has an average of 1.2 motor vehicle-related deaths a year, that translates to over $1 million a year.

Violence-related injuries (homicide and suicide) in Alfalfa County are ranked in the top 10 in three of the eight age groups (see Top 10 list on page 3).



*No homicides/legal intervention or poisoning deaths occurred during this time period

Tobacco Use

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

No Data Available At This Time

Physical Activity, Wellness and Diabetes

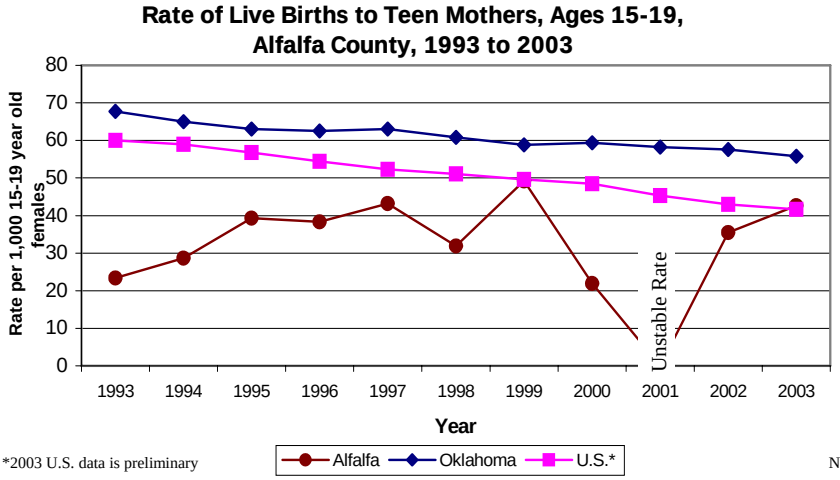
* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & Ameri-

No Data Available At This Time

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

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

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

According to Oklahoma Vital Statistics, Alfalfa County had a teen birth rate of 42.6 in 2003 which was a 20% increase from 2002 (35.5) and a 82% increase since 1993 (23.4).

With an average of 6 births per year, teen pregnancy costs the citizens of Alfalfa County $19,200.00 a year.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 13.7% of persons in Alfalfa County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Alfalfa County is 7% below the state (14.7%) and 11% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Alfalfa County, 2000 Census

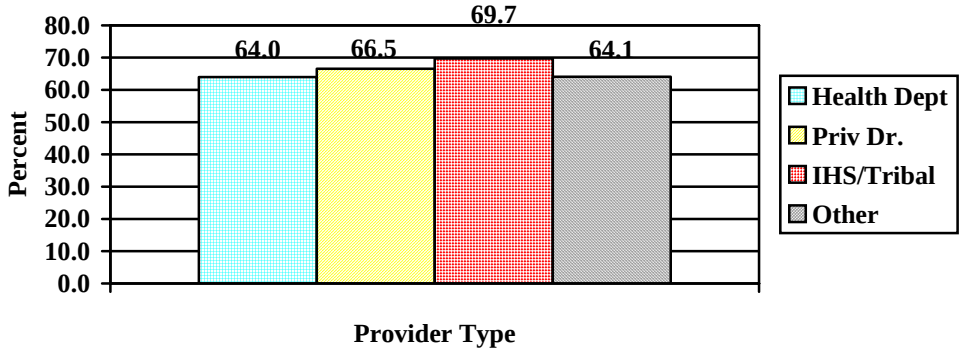
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	5,028	178	512	722	696	2,920
Cumulative Population		178	690	1,412	2,108	5,028
% of Total	100.0%	3.5%	10.2%	14.4%	13.8%	58.1%
Cumulative %		3.5%	13.7%	28.1%	41.9%	100.0%

OK By One - State Immunization Data

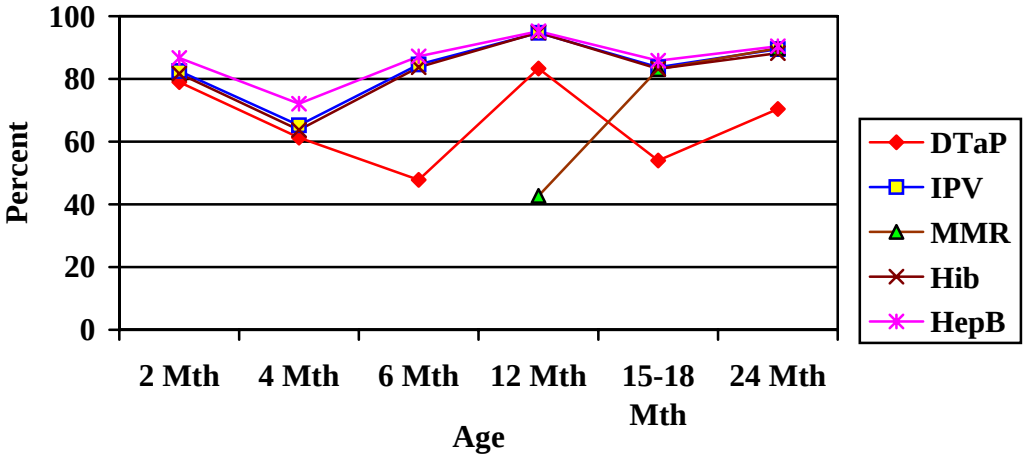
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



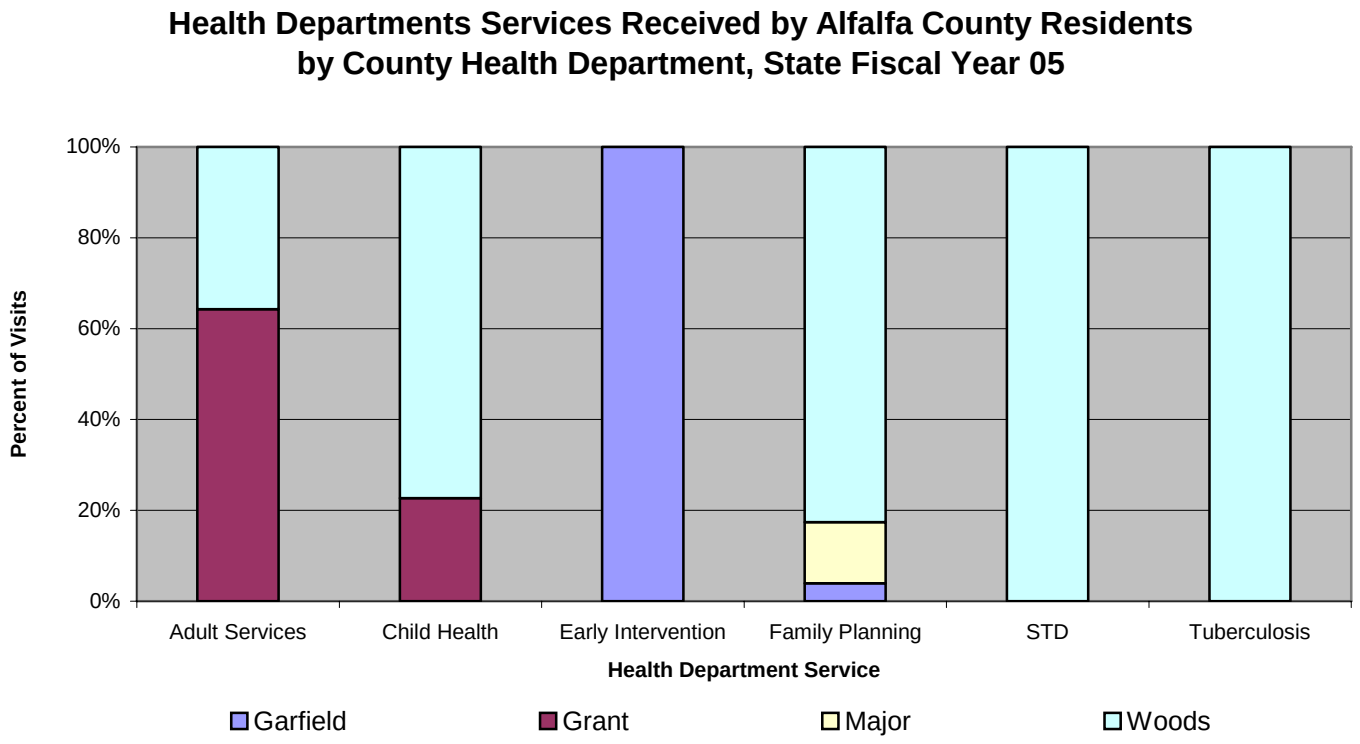
Oklahoma Children On Schedule by Antigen, 2004



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

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 30 deaths a year
- $369,476.69 per death
- Total— $11,084,300.70 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 1.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$1,344,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 6 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $19,200.00 a year

Grand Total for Alfalfa County:

$12,447,500.70

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

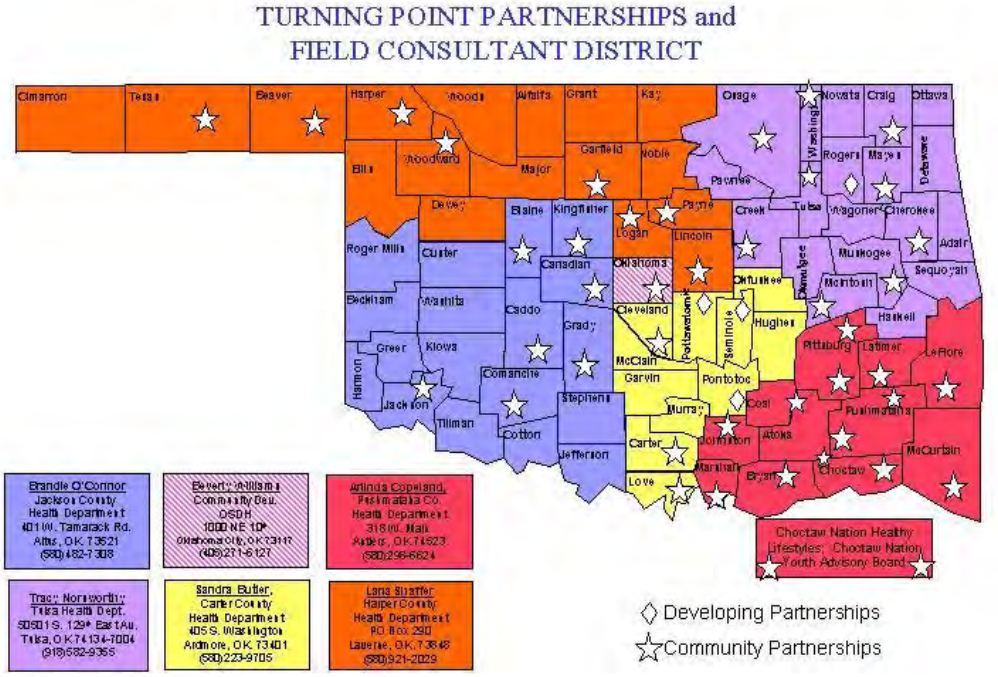
State of the County's Health Report

A Look Back To Move Forward

Atoka County

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

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



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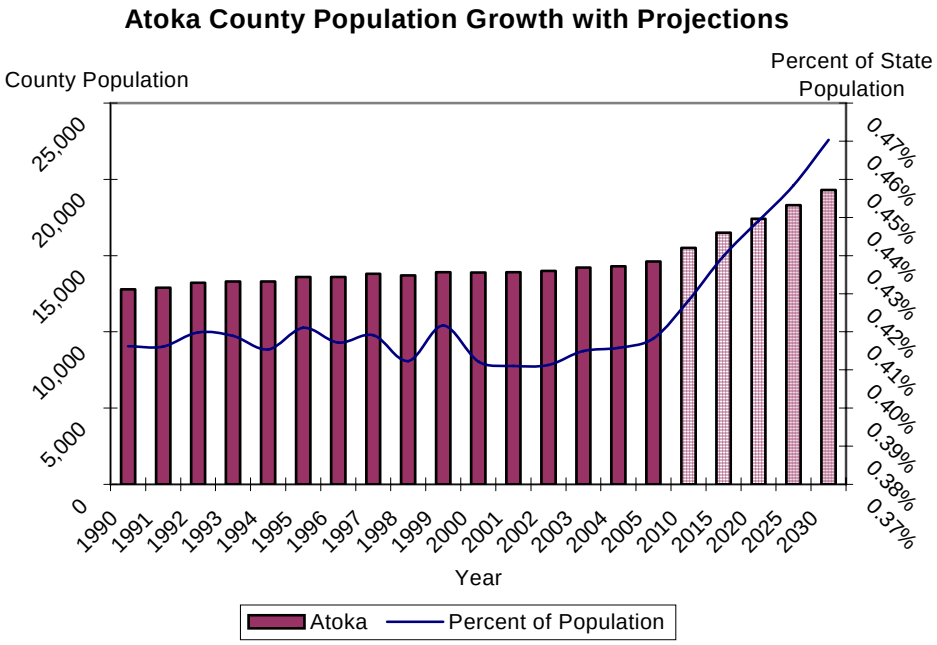
Demographics

** U.S. Census Bureau*

- Population estimates
  - 9% increase from 1990 to 2000 (12,778 to 13,879)
  - 3% increase from 2000 to 2004
  - Ranked 17th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 1%
- Race
  - Whites = 76%
  - Native Americans =11%
  - Blacks =6%
  - Other/Multiple = 7%
- Age
  - Under 5 = 6%
  - Over 64 = 15%
  - Median age = 38.3 years
- Housing units
  - Occupied = 4,964 (88%)
  - Vacant = 709 (12%)
- Disability (ages 21 to 64) = 25.8% national = 19.2% state = 21.5%
- Individuals below poverty = 19.8% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Atoka County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 694 people in Atoka County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 56.4 deaths a year, heart disease accounts for almost $21 million a year in medical costs in Atoka County.

Heart disease accounts for almost $21 million a year in medical costs in Atoka County.

Alzheimer's disease and the complications associated with it have increased from the 18th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 900% increase in deaths.

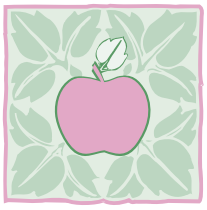
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 20.1% (2,843) of people in Atoka County were considered obese which accounted for an additional $1,122,985 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Atoka County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 5	UNINTENT. INJURY 4	UNINTENT. INJURY 15	UNINTENT. INJURY 14	UNINTENT. INJURY 15	HEART DISEASE 28	HEART DISEASE 66	HEART DISEASE 514	HEART DISEASE 620
2	PERINATAL PERIOD 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	HEART DISEASE 1	SUICIDE 6	HEART DISEASE 7	CANCER 15	CANCER 61	CANCER 235	CANCER 321
3	SIDS 3	PERINATAL PERIOD 1	HOMICIDE/ LEGAL 1	HEART DISEASE 4	CANCER 7	UNINTENT. INJURY 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 12	INFLUENZA/ PNEUMONIA 78	STROKE 90
4	UNINTENT. INJURY 1		SUICIDE 1	CANCER 3	SUICIDE 5	LIVER DISEASE 7	STROKE 12	STROKE 75	UNINTENT. INJURY 87
5	OTHER 6			LIVER DISEASE 2	LIVER DISEASE 3	SUICIDE 5	UNINTENT. INJURY 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 53	INFLUENZA/ PNEUMONIA 83
6				HOMICIDE/ LEGAL 1	HOMICIDE/ LEGAL 2	STROKE 3	LIVER DISEASE 4	DIABETES MELLITUS 30	BRONCHITIS/ EMPHYSEMA/ ASTHMA 67
7				INFLUENZA/ PNEUMONIA 1	DIABETES MELLITUS 1	DIABETES MELLITUS 3	KIDNEY DISEASE 4	KIDNEY DISEASE 30	DIABETES MELLITUS 35
8				OTHER 5	INFLUENZA/ PNEUMONIA 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	SUICIDE 3	SEPTICEMIA (BLOOD POISONING) 20	KIDNEY DISEASE 35
9					OTHER 8	HIV 1	INFLUENZA/ PNEUMONIA 2	UNINTENT. INJURY 20	LIVER DISEASE 26
10						FOUR CAUSES TIED 1	THREE CAUSES TIED 1	ALZHEIMER'S DISEASE 10	SUICIDE 23

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

Injury and Violence

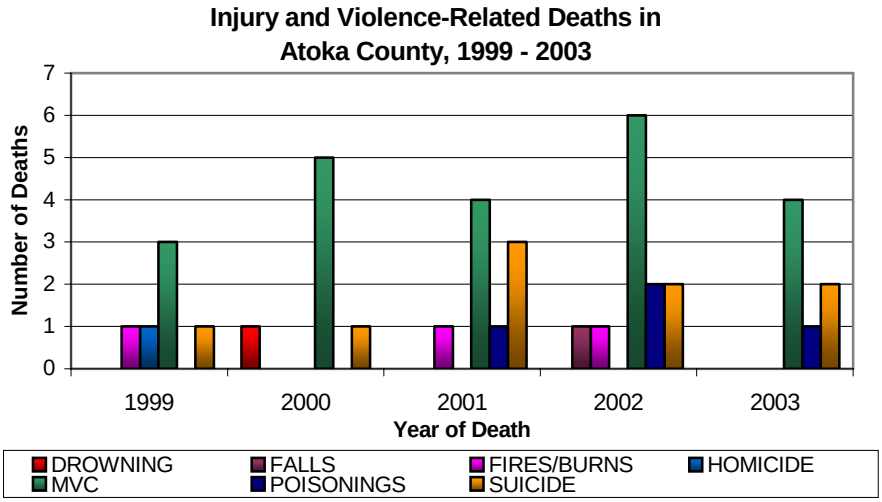
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Atoka County which has an average of 4.4 motor vehicle-related deaths a year, that translates to almost $5 million a year.

Violence-related injuries (homicide and suicide) in Atoka County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 31.6% (4,469) of people in Atoka County use tobacco of some sort. Medical costs accumulated by those persons are almost $15 million a year for Atoka County.

> *"Medical costs accumulated by those persons are almost **$15 million a year** for Atoka County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 33.8% (4,780) of people in Atoka County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.7% (1,089) of Atoka County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $14,421,627.00 in one year for Atoka County.

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

Teen Pregnancy

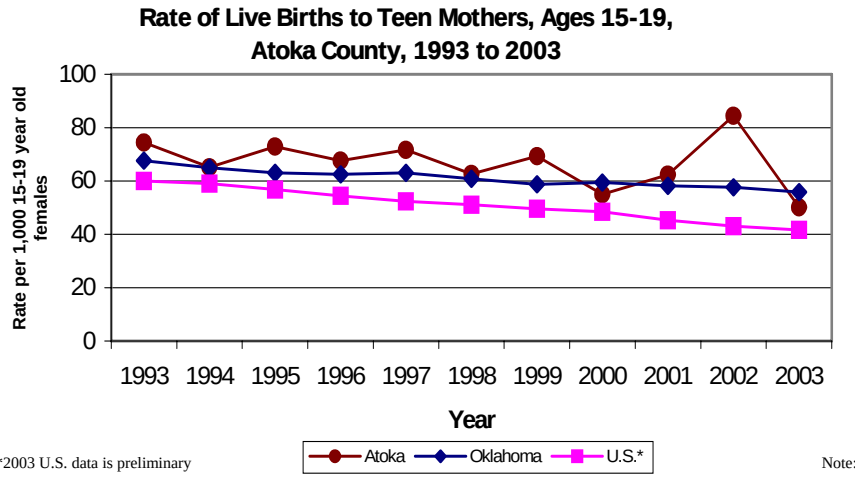
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Atoka County had a teen birth rate of 50.1 in 2003 which was a 41% decrease from 2002 (84.4) and a 33% decrease since 1993 (74.4).

With an average of 29 births per year, teen pregnancy costs the citizens of Atoka County $92,800.00 a year.



*2003 U.S. data is preliminary

Note: 4 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 19.8% of persons in Atoka County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Atoka County is 34% above the state (14.7%) and 59% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Atoka County, 2000 Census

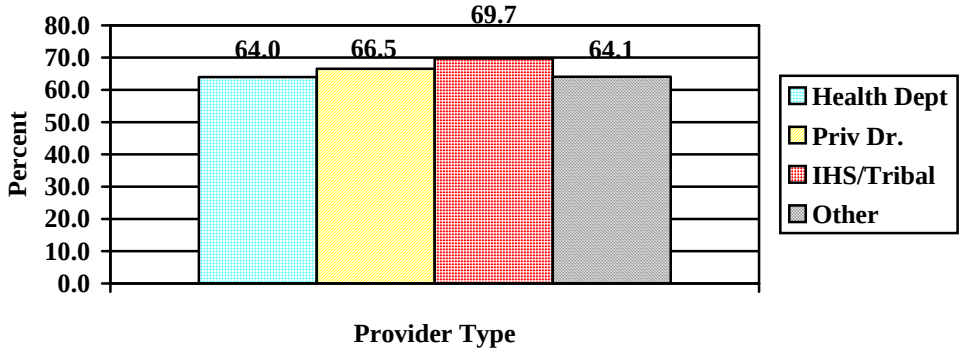
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	12,282	1,018	1,408	2,147	1,534	6,175
Cumulative Population		1,018	2,426	4,573	6,107	12,282
% of Total	100.0%	8.3%	11.5%	17.5%	12.5%	50.3%
Cumulative %		8.3%	19.8%	37.2%	49.7%	100.0%

OK By One - State Immunization Data

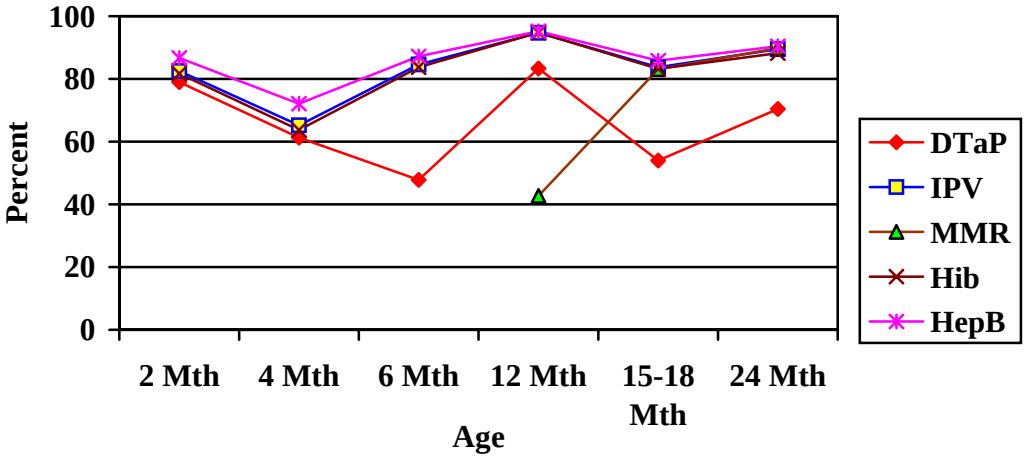
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

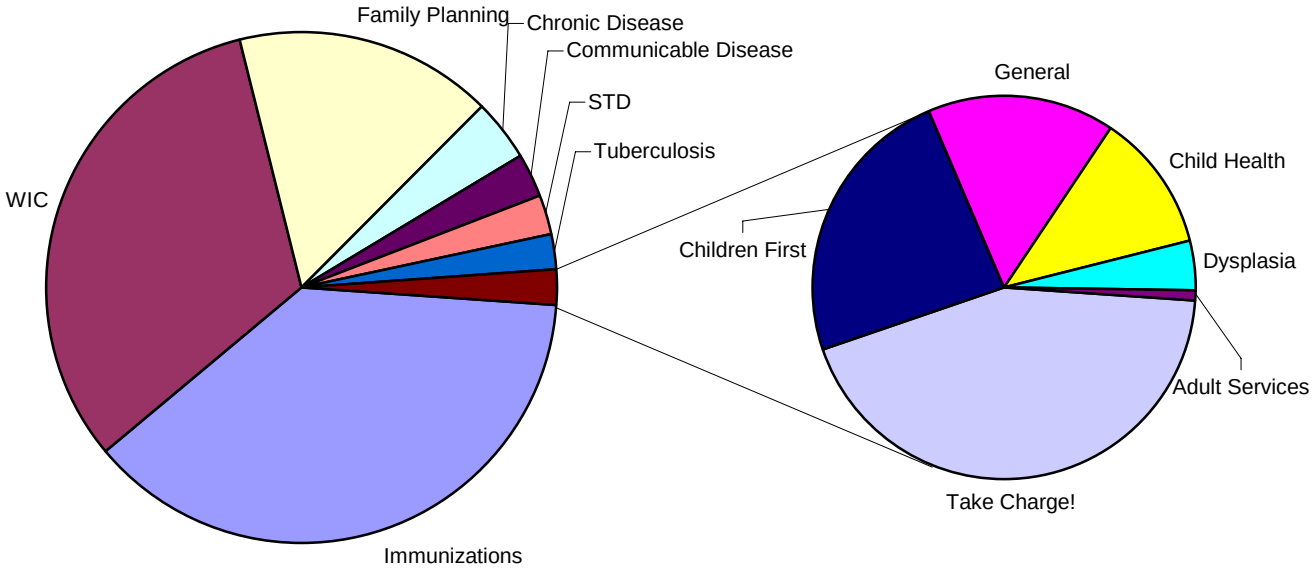


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 56 deaths a year
- $369,476.69 per death
- Total— $20,690,694.64 a year

Obesity

- 20.1% of population (2,843)
- $395.00 in additional medical costs per person
- Total—$1,122,985.00

Motor Vehicle-Related Injury Death

- Average 4.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,928,000.00 a year

Tobacco Use

- 31.6% of population (4,469)
- $3,300.00 in health care costs
- Total—$14,747,700.00 a year

Diabetes

- 7.7% of population (1,089)
- $13,243.00 in healthcare costs a year
- Total—$14,421,627.00 a year

Teen Pregnancy

- Average of 29 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $92,800.00 a year

Grand Total for Atoka County:

$56,003,806.64

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Oklahoma City, OK 73117
405-271-6127
Email: neilh@health.ok.gov

Atoka County Health Department
1006 W 13th St
Atoka, OK 74525
580-889-2116

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Report compiled by:
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Kelly Baker, MPH

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Atoka & Coal Counties Partnership For Change Community Coalition

We want to thank all the people and organizations that make the Partnership for Change Community Coalition successful. Thank you!

- American Cancer Society
- Atoka & Coalgate Chamber of Commerce
- Atoka Community Chest
- Atoka First Baptist Church
- Atoka/Coalgate Hospital
- Big Five Community Action Agency/Sorts Transit
- Choctaw Nation CORE Capacity/Healthy Lifestyles/Project CHILD
- Coal and Atoka County Health Departments
- Coal and Atoka County Public Schools
- Coalgate Register
- COALition
- Community members at large
- County Commissioners
- Department of Human Services
- Girl Scouts
- Head Start
- INCA Community Action Agency/Jamm Transit
- Kiamichi Technology Center
- Oklahoma State Department of Health Turning Point
- Oklahoma State University Cooperative Extension Service
- School Based Social Workers
- Senior Nutrition Center
- Southeast Oklahoma Division on Aging (SODA)
- Tri-County Indian Nations Community Development Corporation
- USDA
- Women, Infants and Children (WIC)
- Youth

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

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

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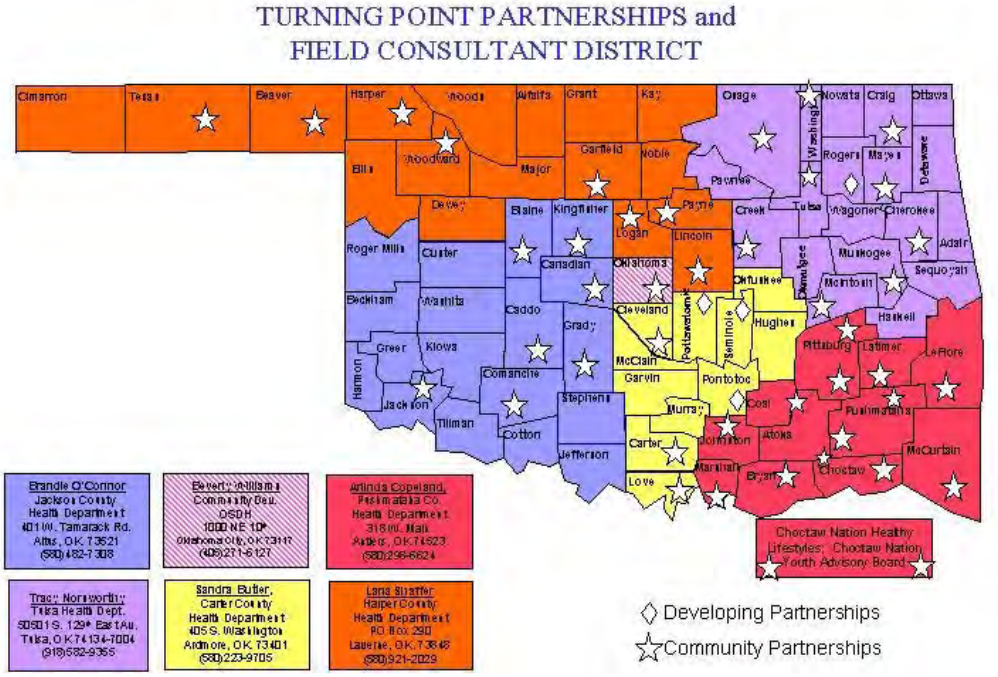

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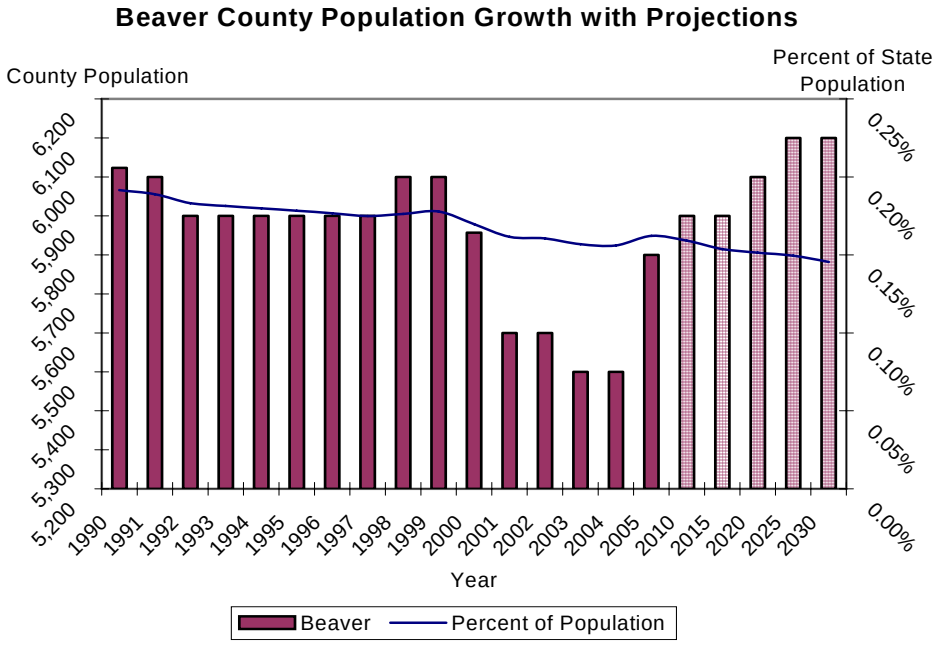
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% decrease from 1990 to 2000 (6,023 to 5,857)
  - 6% decrease from 2000 to 2004
  - Ranked 75th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 11%
- Race
  - Whites = 93%
  - Native Americans =1%
  - Blacks =0%
  - Other/Multiple = 6%
- Age
  - Under 5 = 6%
  - Over 64 = 17%
  - Median age = 39.3 years
- Housing units
  - Occupied = 2,245 (83%)
  - Vacant = 474 (17%)
- Disability (ages 21 to 64) = 15.1% national = 19.2% state = 21.5%
- Individuals below poverty = 11.7% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Beaver County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 239 people in Beaver County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 17.6 deaths a year, heart disease accounts for almost $7 million a year in medical costs in Beaver County.

Heart disease accounts for almost $7 million a year in medical costs in Beaver County.

Alzheimer's disease and the complications associated with it have increased from the 14th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 300% increase in deaths.

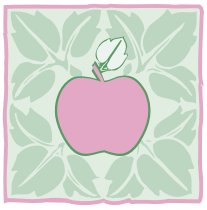
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 33.7% (1,881) of people in Beaver County were considered obese which accounted for an additional $742,995 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Beaver County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 3	SUICIDE 2	UNINTENT. INJURY 8	UNINTENT. INJURY 3	UNINTENT. INJURY 5	CANCER 10	HEART DISEASE 17	HEART DISEASE 167	HEART DISEASE 195
2	CONGENITAL ANOMALIES 1	OTHER 1	STROKE 2	SUICIDE 2	HEART DISEASE 2	UNINTENT. INJURY 10	CANCER 12	CANCER 112	CANCER 137
3			CANCER 1	OTHER 1	CANCER 2	HEART DISEASE 8	NON-CANCEROUS TUMOR 3	ATHERO-SCLEROSIS 35	UNINTENT. INJURY 42
4					BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	DIABETES MELLITUS 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	STROKE 32	STROKE 36
5					LIVER DISEASE 1	NON-CANCEROUS TUMOR 1	DIABETES MELLITUS 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 24	ATHERO-SCLEROSIS 35
6					NUTRITIONAL DEFICIENCY 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	STROKE 2	DIABETES MELLITUS 20	BRONCHITIS/ EMPHYSEMA/ ASTHMA 29
7					OTHER 1	LIVER DISEASE 1	INFLUENZA/ PNEUMONIA 2	UNINTENT. INJURY 14	DIABETES MELLITUS 25
8						NUTRITIONAL DEFICIENCY 1	UNINTENT. INJURY 2	INFLUENZA/ PNEUMONIA 13	INFLUENZA/ PNEUMONIA 15
9						SUICIDE 1	HYPERTENSION 1	ALZHEIMER'S DISEASE 12	ALZHEIMER'S DISEASE 12
10						OTHER 3	OTHER 3	TWO CAUSES TIED 5	SUICIDE 10

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

Injury and Violence

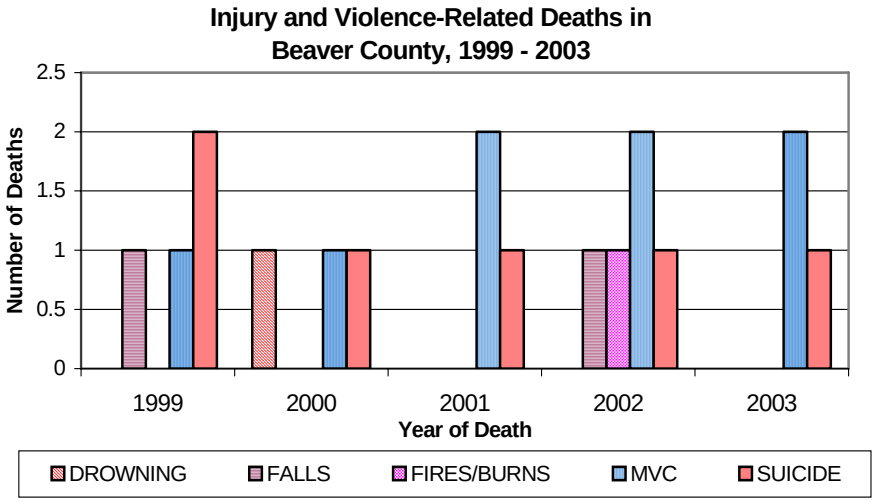
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Beaver County. Unintentional injuries are the leading cause of death from ages 15 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Beaver County which has an average of 1.6 motor vehicle-related deaths a year, that translates to almost $2 million a year.

Violence-related injuries (homicide and suicide) in Beaver County are ranked in the top 10 in three of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.3% (1,245) of people in Beaver County use tobacco of some sort. Medical costs accumulated by those persons are over $4 million a year for Beaver County.

> *"Medical costs accumulated by those persons are over **$4 million a year** for Beaver County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 28.1% (1,569) of people in Beaver County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 1.6% (89) of Beaver County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $1,178,627.00 in one year for Beaver County.

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

Teen Pregnancy

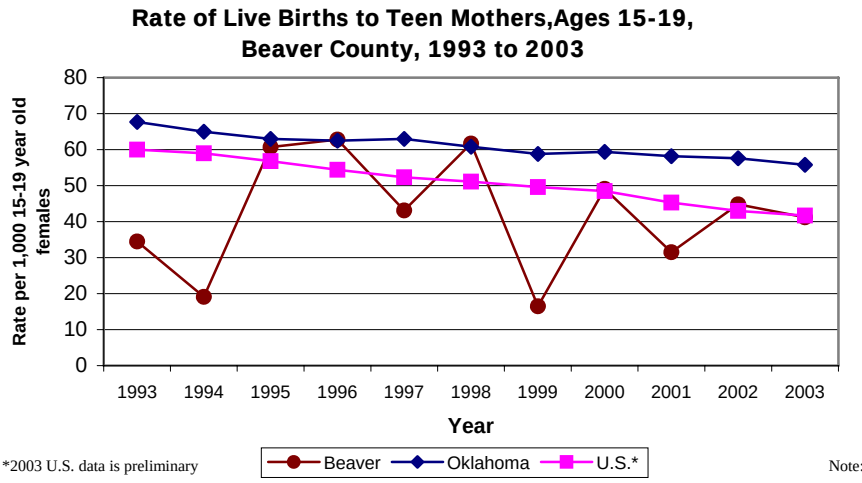
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Beaver County had a teen birth rate of 41.2 in 2003 which was a 8% decrease from 2002 (44.8) and a 19% increase since 1993 (34.5).

With an average of 9 births per year, teen pregnancy costs the citizens of Beaver County $28,800.00 a year.



*2003 U.S. data is preliminary

Note: 1 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 11.7% of persons in Beaver County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Beaver County is 20% below the state (14.7%) and 6% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Beaver County, 2000 Census

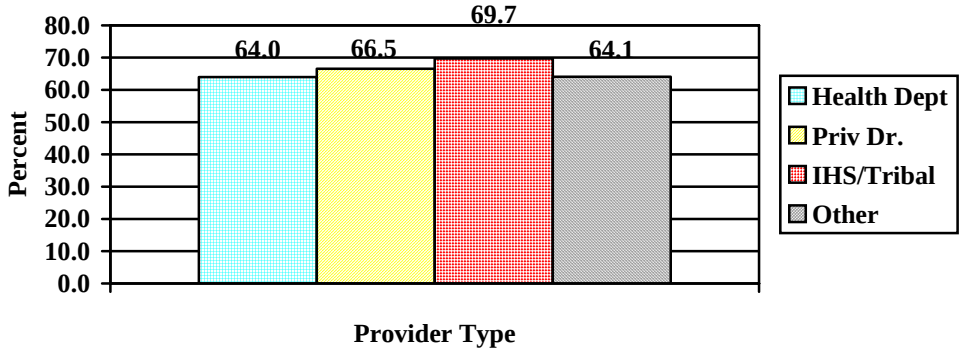
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	5,748	226	447	606	574	3,895
Cumulative Population		226	673	1,279	1,853	5,748
% of Total	100.0%	3.9%	7.8%	10.5%	10.0%	67.8%
Cumulative %		3.9%	11.7%	22.3%	32.2%	100.0%

OK By One - State Immunization Data

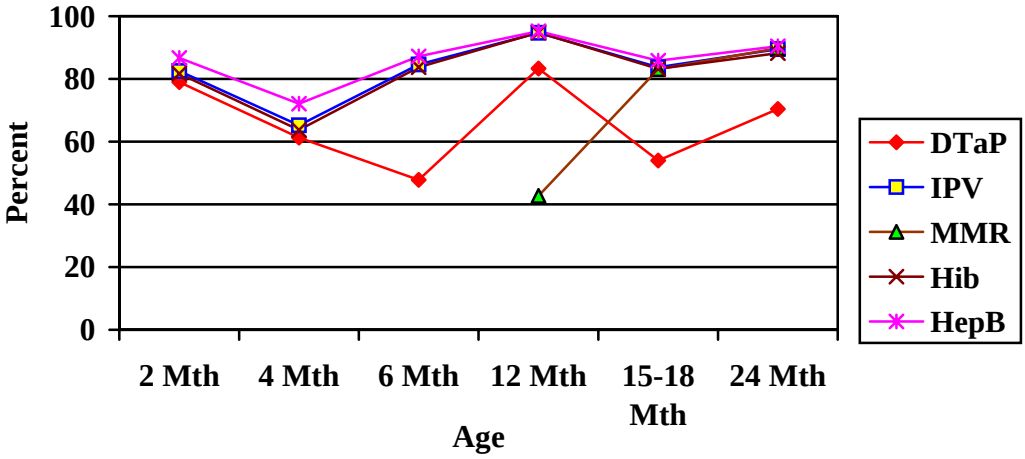
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

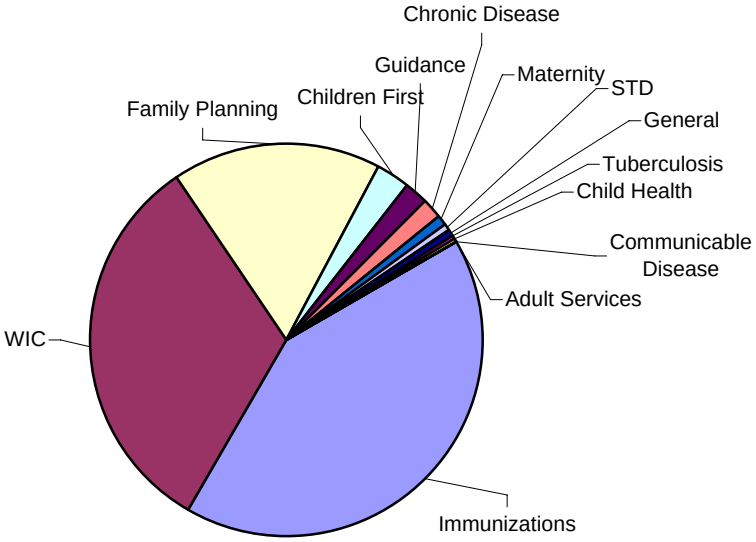


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 18 deaths a year
- $369,476.69 per death
- Total— $6,650,580.42 a year

Obesity

- 33.7% of population (1,881)
- $395.00 in additional medical costs per person
- Total—$742,995.00

Motor Vehicle-Related Injury Death

- Average 1.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$1,792,000.00 a year

Tobacco Use

- 22.3% of population (1,245)
- $3,300.00 in health care costs
- Total—$4,108,500.00 a year

Diabetes

- 1.6% of population (89)
- $13,243.00 in healthcare costs a year
- Total—$1,178,627.00 a year

Teen Pregnancy

- Average of 9 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $28,800.00 a year

Grand Total for Beaver County:

$14,501,502.42

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

Beaver County Health Department
PO Box 520
Beaver, OK 73932
580-625-3693

Beaver County Health Department
PO Box 520
Beaver, OK 73932
580-625-3693

Looking Back to Move Forward

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

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Beaver Health Awareness Partnership

We want to thank all the people and organizations that make the Beaver Health Awareness Partnership such a huge success. With successes such as helping to recruit a physician and conducting a community health assessment and future plans of developing a wellness/fitness center, you are paving the way to a healthier future for all residents of Beaver County. Thank you!

- Beaver County Health Department
- First Security Bank
- Bank of Beaver City
- Beaver County Memorial Hospital
- Nutrition Site
- OSU Extension
- Herald Democrat
- City of Beaver
- Howard Drilling Company
- Community Clinic
- Downing's Market
- Beaver Senior Citizens
- Area Agency on Aging
- Hardberger & Smylie
- OEDA
- Department of Human Services
- XCEL Energy
- EMT
- Howard Auto Supply
- Assembly of God Church
- O'Laughlin Center, Spearman TX
- Chamber of Commerce
- Trippett and Kee Law Office
- SW Kansas Technical School
- M & M Consultants

OKLAHOMA STATE DEPARTMENT OF HEALTH

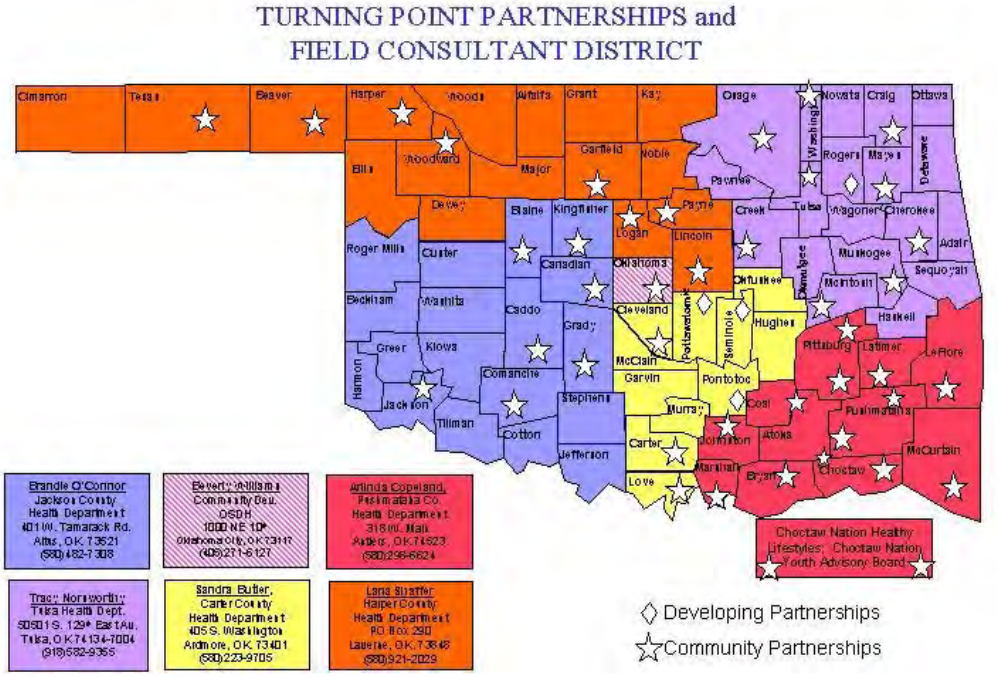
State of the County's Health Report

A Look Back To Move Forward

Beckham County

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

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



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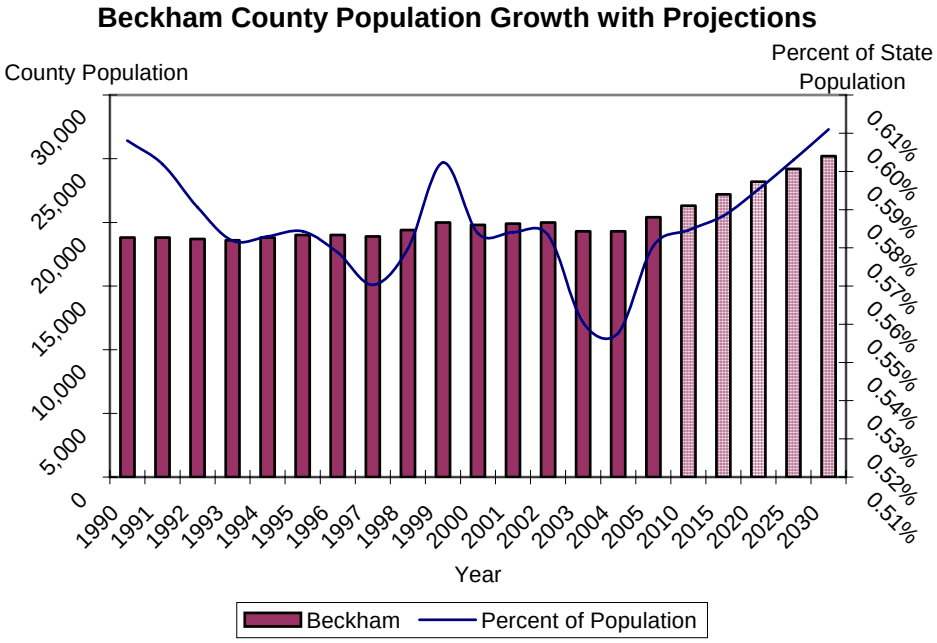
Demographics

** U.S. Census Bureau*

- Population estimates
  - 5% increase from 1990 to 2000 (18,812 to 19,799)
  - 3% decrease from 2000 to 2004
  - Ranked 58th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 5%
- Race
  - Whites = 87%
  - Native Americans =3%
  - Blacks =6%
  - Other/Multiple = 5%
- Age
  - Under 5 = 6%
  - Over 64 = 15%
  - Median age = 36.6 years
- Housing units
  - Occupied = 7,356 (84%)
  - Vacant = 1,440 (16%)
- Disability (ages 21 to 64) = 24.8% national = 19.2% state = 21.5%
- Individuals below poverty = 18.2% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Beckham County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,032 people in Beckham County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 94.7 deaths a year, heart disease accounts for almost $35 million a year in medical costs in Beckham County.

Heart disease accounts for almost $35 million a year in medical costs in Beckham County.

Alzheimer's disease and the complications associated with it have increased from the 16th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 380% increase in deaths.

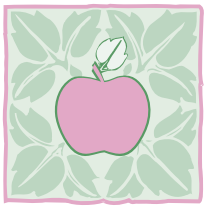
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 24.5% (4,874) of people in Beckham County were considered obese which accounted for an additional $1,925,230 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Beckham County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 9	UNINTENT. INJURY 6	UNINTENT. INJURY 25	UNINTENT. INJURY 14	UNINTENT. INJURY 20	HEART DISEASE 37	CANCER 98	HEART DISEASE 909	HEART DISEASE 1042
2	UNINTENT. INJURY 6	AORTIC ANEURYSM 1	SUICIDE 8	SUICIDE 6	CANCER 13	CANCER 35	HEART DISEASE 79	CANCER 336	CANCER 486
3	SIDS 4	HEART DISEASE 1	CANCER 2	HEART DISEASE 4	HEART DISEASE 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 18	STROKE 276	STROKE 297
4	CONGENITAL ANOMALIES 3	INFLUENZA/ PNEUMONIA 1	ANEMIA 1	HIV 2	SUICIDE 8	UNINTENT. INJURY 8	UNINTENT. INJURY 11	BRONCHITIS/ EMPHYSEMA/ ASTHMA 159	BRONCHITIS/ EMPHYSEMA/ ASTHMA 186
5	HOMICIDE/ LEGAL 2	CANCER 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	STROKE 1	STROKE 5	STROKE 7	STROKE 7	INFLUENZA/ PNEUMONIA 83	UNINTENT. INJURY 123
6	ATHERO-SCLEROSIS 1	OTHER 1	STROKE 1	HOMICIDE/ LEGAL 1	HOMICIDE/ LEGAL 2	LIVER DISEASE 7	DIABETES MELLITUS 6	DIABETES MELLITUS 41	INFLUENZA/ PNEUMONIA 93
7	HEART DISEASE 1		HEART DISEASE 1	CANCER 1	INFLUENZA/ PNEUMONIA 2	DIABETES MELLITUS 6	SEPTICEMIA (BLOOD POISOINING) 5	KIDNEY DISEASE 38	DIABETES MELLITUS 53
8	HERNIA 1		HIV 1	OTHER 8	LIVER DISEASE 2	SUICIDE 5	SUICIDE 5	SEPTICEMIA (BLOOD POISOINING) 37	SEPTICEMIA (BLOOD POISOINING) 43
9	OTHER 6		HOMICIDE/ LEGAL 1		CONGENITAL ANOMALIES 1	INFLUENZA/ PNEUMONIA 3	INFLUENZA/ PNEUMONIA 3	UNINTENT. INJURY 33	KIDNEY DISEASE 40
10			INFLUENZA/ PNEUMONIA 1		TWO CAUSES TIED 1	CONGENITAL ANOMALIES 2	LIVER DISEASE 3	ALZHEIMER'S DISEASE 24	SUICIDE 38

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

Injury and Violence

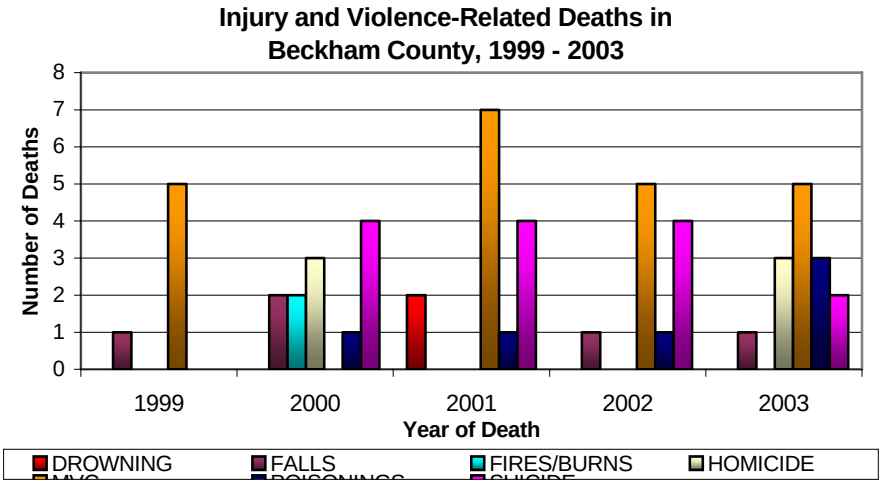
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Beckham County which has an average of 4.4 motor vehicle-related deaths a year, that translates to almost $5 million a year.

Violence-related injuries (homicide and suicide) in Beckham County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



*No homicides/legal intervention or poisoning deaths occurred during this time period

Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 32.3% (6,426) of people in Beckham County use tobacco of some sort. Medical costs accumulated by those persons are over $21 million a year for Beckham County.

> *"Medical costs accumulated by those persons are over **$21 million a year** for Beckham County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 38.8% (7,719) of people in Beckham County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 11.5% (2,288) of Beckham County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $30,299,984.00 in one year for Beckham County.

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

Teen Pregnancy

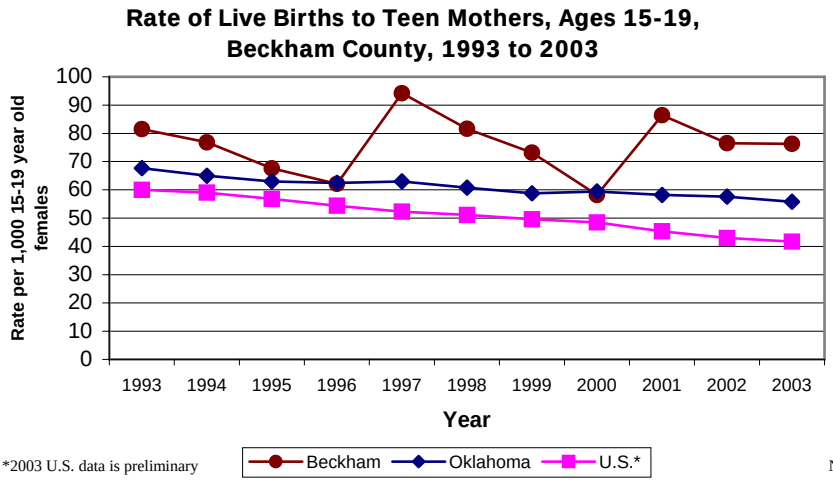
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Beckham County had a teen birth rate of 76.3 in 2003 which was a 0% decrease from 2002 (76.5) and a 6% decrease since 1993 (81.5).

With an average of 52 births per year, teen pregnancy costs the citizens of Beckham County $166,400.00 a year.



*2003 U.S. data is preliminary

Note: 7 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 18.2% of persons in Beckham County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Beckham County is 24% above the state (14.7%) and 46% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Beckham County, 2000 Census

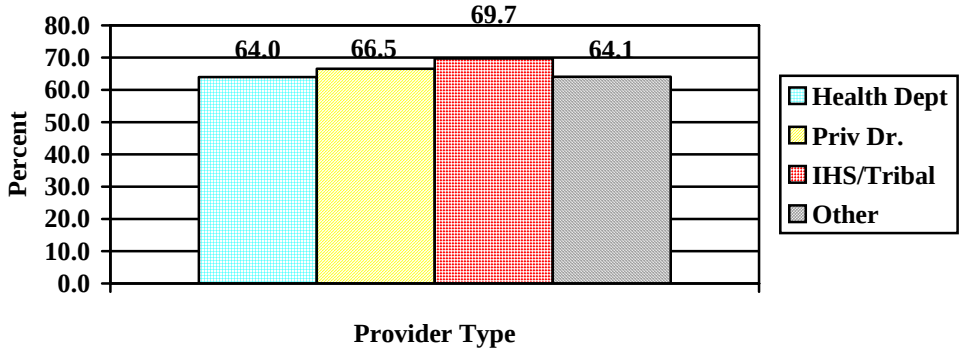
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	17,884	1,224	2,023	2,387	2,277	9,973
Cumulative Population		1,224	3,247	5,634	7,911	17,884
% of Total	100.0%	6.8%	11.3%	13.3%	12.7%	55.8%
Cumulative %		6.8%	18.2%	31.5%	44.2%	100.0%

OK By One - State Immunization Data

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

2003-04 Immunization Coverage Rates

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



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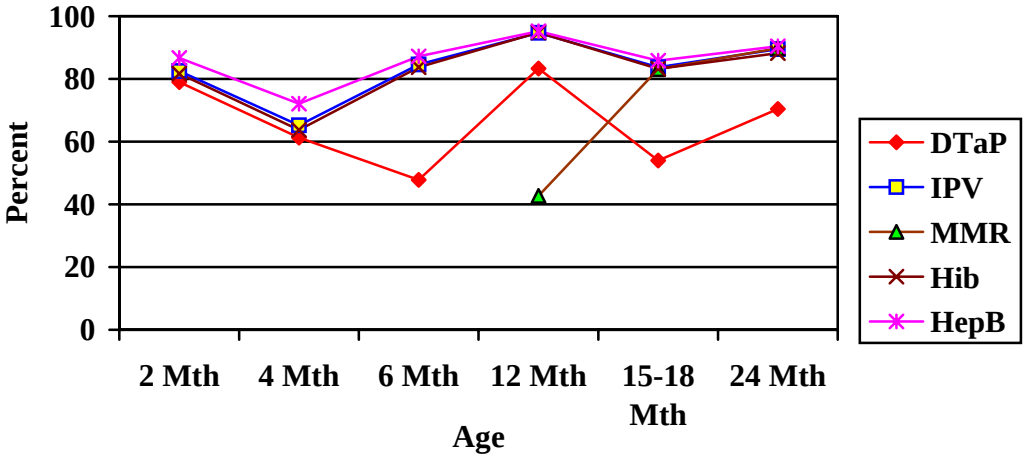

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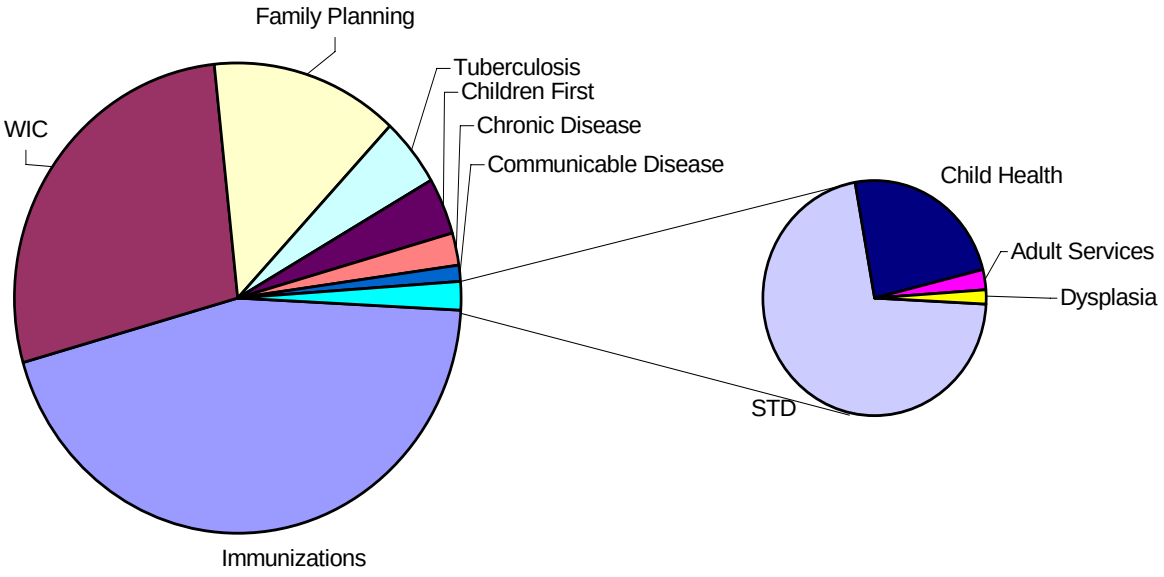

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 95 deaths a year
- $369,476.69 per death
- Total— $35,100,285.55 a year

Obesity

- 24.5% of population (4,874)
- $395.00 in additional medical costs per person
- Total—$1,925,230.00

Motor Vehicle-Related Injury Death

- Average 4.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,928,000.00 a year

Tobacco Use

- 32.3% of population (6,426)
- $3,300.00 in health care costs
- Total - $21,205,800.00 a year

Diabetes

- 11.5% of population (2,288)
- $13,243.00 in healthcare costs a year
- Total—$30,299,984.00 a year

Teen Pregnancy

- Average of 52 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $166,400.00 a year

Grand Total for Beckham County:

$93,625,699.55

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Beckham County Health Department
400 East Third St
Elk City, OK 73644
580-225-1173

Looking Back to Move Forward

Report compiled by:
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Community Development Service, OSDH
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Health Care Information Systems, OSDH

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Oklahoma Community Partners in ***Public Health Innovation***

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A Look Back To Move Forward

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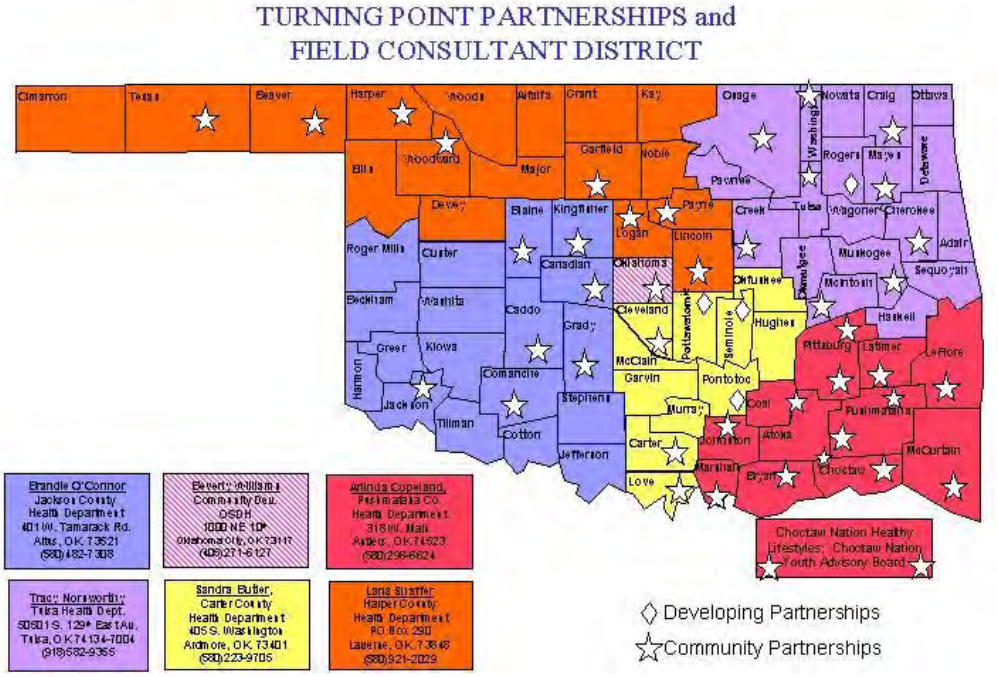
The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health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

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



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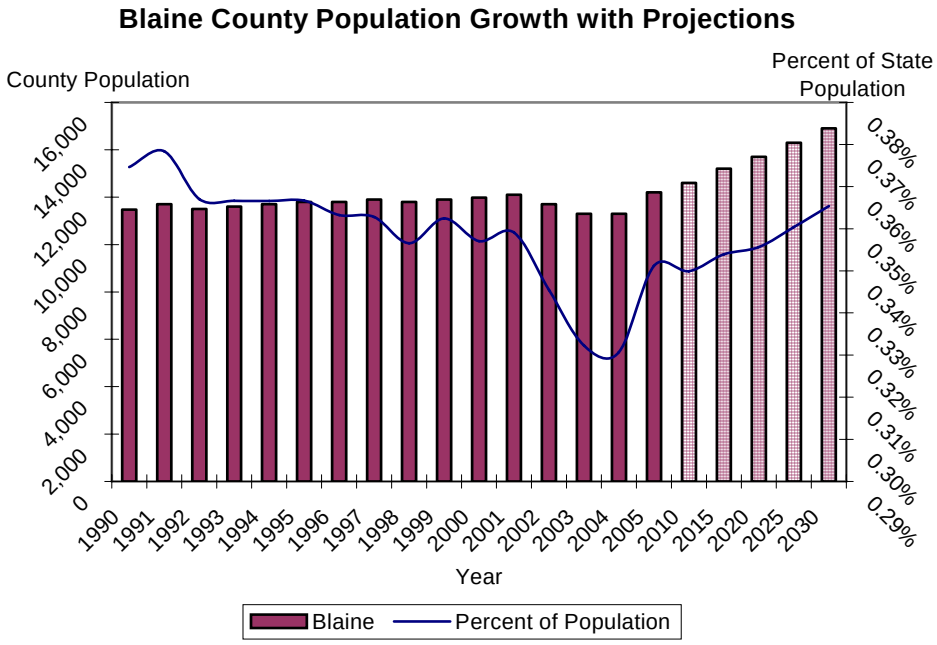
Demographics

** U.S. Census Bureau*

- Population estimates
  - 4% increase from 1990 to 2000 (11,470 to 11,976)
  - 6% decrease from 2000 to 2004
  - Ranked 73rd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 7%
- Race
  - Whites = 76%
  - Native Americans =9%
  - Blacks =7%
  - Other/Multiple = 8%
- Age
  - Under 5 = 6%
  - Over 64 = 17%
  - Median age = 37.6 years
- Housing units
  - Occupied = 4,159 (80%)
  - Vacant = 1,049 (20%)
- Disability (ages 21 to 64) = 20.7% national = 19.2% state = 21.5%
- Individuals below poverty = 16.9% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Blaine County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 767 people in Blaine County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 61.9 deaths a year, heart disease accounts for almost $23 million a year in medical costs in Blaine County.

Heart disease accounts for almost $23 million a year in medical costs in Blaine County.

Alzheimer's disease and the complications associated with it have increased from the 18th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 250% increase in deaths.

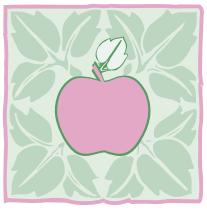
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 36.6% (4,274) of people in Blaine County were considered obese which accounted for an additional $1,688,230 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Blaine County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 5	UNINTENT. INJURY 5	UNINTENT. INJURY 9	UNINTENT. INJURY 15	UNINTENT. INJURY 15	HEART DISEASE 23	HEART DISEASE 51	HEART DISEASE 594	HEART DISEASE 681
2	PERINATAL PERIOD 4		SUICIDE 5	HOMICIDE/ LEGAL 3	HEART DISEASE 11	CANCER 15	CANCER 48	CANCER 275	CANCER 345
3	HOMICIDE/ LEGAL 2		HOMICIDE/ LEGAL 2	SUICIDE 3	CANCER 6	UNINTENT. INJURY 11	STROKE 8	STROKE 102	STROKE 116
4	SIDS 2		HERNIA 1	STROKE 2	INFLUENZA/ PNEUMONIA 2	STROKE 4	UNINTENT. INJURY 7	INFLUENZA/ PNEUMONIA 96	INFLUENZA/ PNEUMONIA 100
5	UNINTENT. INJURY 2			HEART DISEASE 2	LIVER DISEASE 2	LIVER DISEASE 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 68	UNINTENT. INJURY 98
6	OTHER 5			HIV 1	GALLBLADDER DISORDER 1	DIABETES MELLITUS 3	DIABETES MELLITUS 4	DIABETES MELLITUS 41	BRONCHITIS/ EMPHYSEMA/ ASTHMA 74
7				CANCER 1	HIV 1	SUICIDE 3	HYPERTENSION 2	UNINTENT. INJURY 34	DIABETES MELLITUS 48
8				KIDNEY DISEASE 1	MENINGITIS 1	KIDNEY DISEASE 2	LIVER DISEASE 2	KIDNEY DISEASE 31	KIDNEY DISEASE 34
9				OTHER 5	SUICIDE 1	VIRAL HEPATITIS 2	SUICIDE 2	PNUEMONITIS 17	SUICIDE 20
10					OTHER 10	THREE CAUSES TIED 1	SIX CAUSES TIED 1	SEPTICEMIA (BLOOD POISOINING) 15	PNUEMONITIS 18

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

Injury and Violence

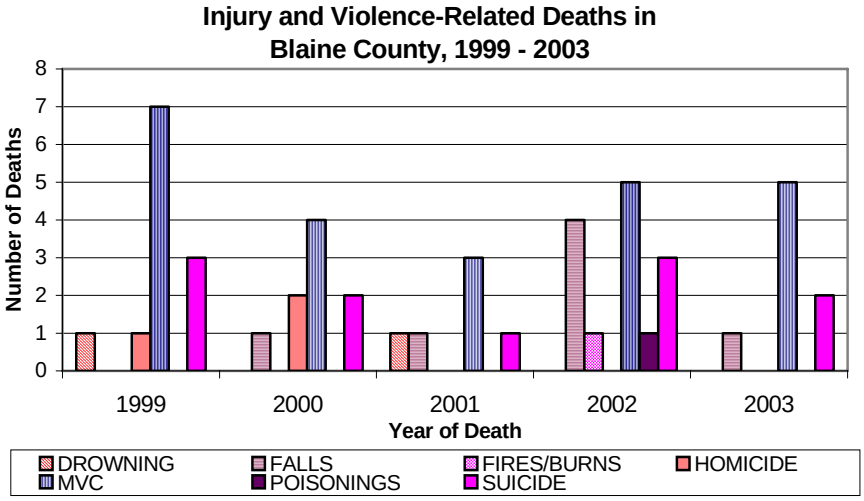
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Blaine County which has an average of 4.8 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Blaine County are ranked in the top 10 in sixof the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 32.4% (3,784) of people in Blaine County use tobacco of some sort. Medical costs accumulated by those persons are over $12 million a year for Blaine County.

> *"Medical costs accumulated by those persons are over **$12 million a year** for Blaine County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 34.8% (4,064) of people in Blaine County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 8.1% (946) of Blaine County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $12,527,878.00 in one year for Blaine County.

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

Teen Pregnancy

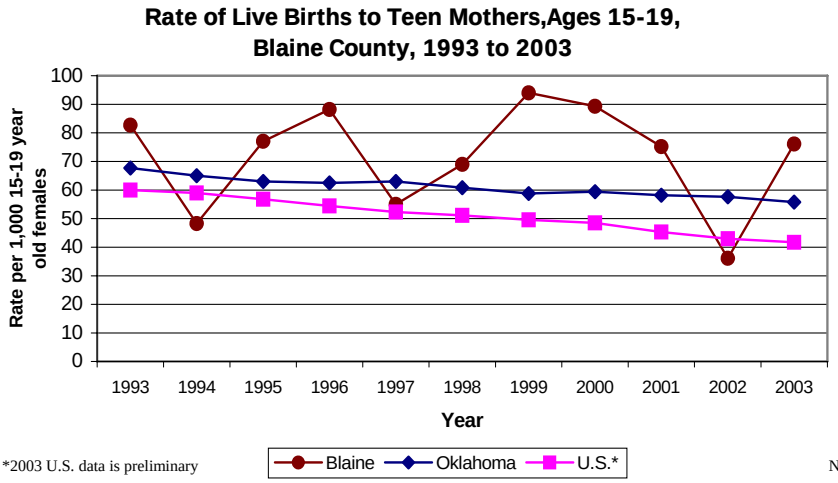
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Blaine County had a teen birth rate of 76.1 in 2003 which was a 111% increase from 2002 (36.1) but a 8% decrease since 1993 (82.7).

With an average of 29 births per year, teen pregnancy costs the citizens of Blaine County $92,800.00 a year.



*2003 U.S. data is preliminary

Note: 4 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 16.9% of persons in Blaine County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Blaine County is 15% above the state (14.7%) and 36% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Blaine County, 2000 Census

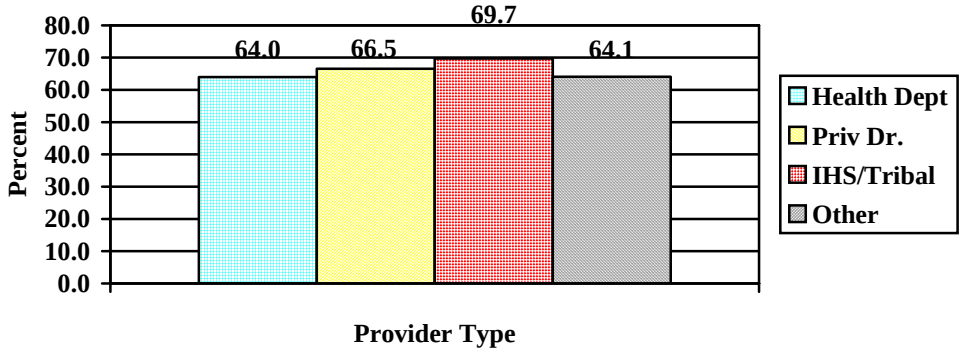
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	10,378	549	1,202	1,408	1,322	5,897
Cumulative Population		549	1,751	3,159	4,481	10,378
% of Total	100.0%	5.3%	11.6%	13.6%	12.7%	56.8%
Cumulative %		5.3%	16.9%	30.4%	43.2%	100.0%

OK By One - State Immunization Data

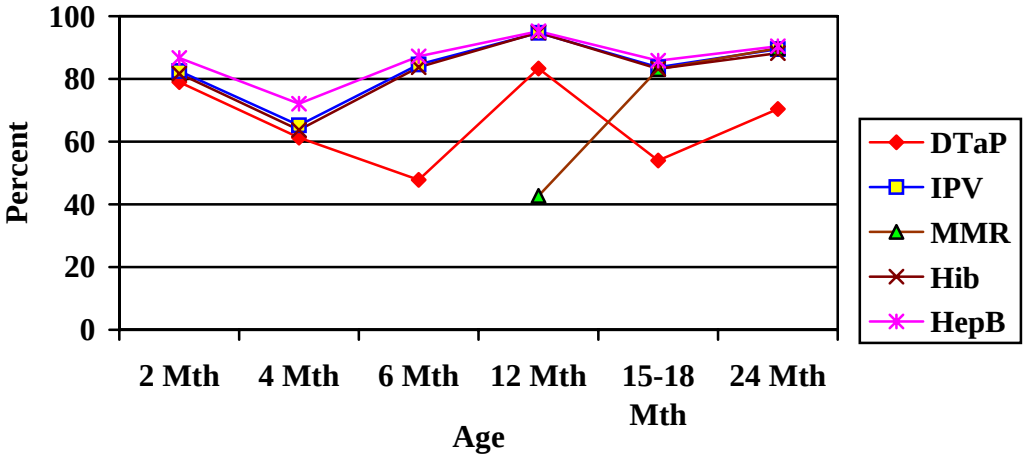
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

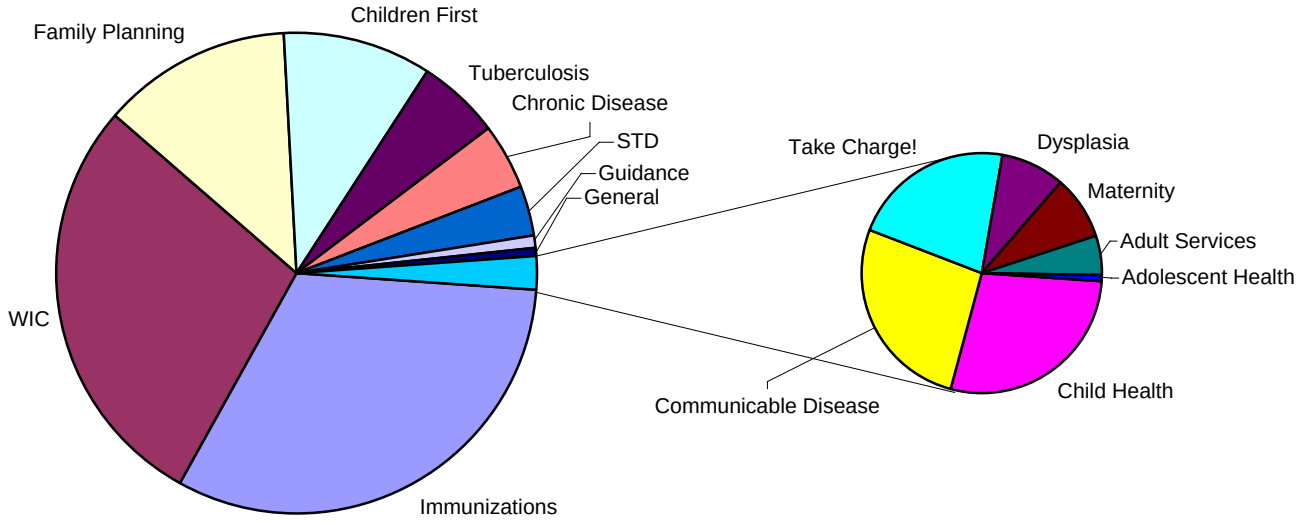


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 62 deaths a year
- $369,476.69 per death
- Total— $22,907,554.78 a year

Obesity

- 36.6% of population (4,274)
- $395.00 in additional medical costs per person
- Total—$1,688,230.00

Motor Vehicle-Related Injury Death

- Average 4.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,376,000.00 a year

Tobacco Use

- 32.4% of population (3,784)
- $3,300.00 in health care costs
- Total—$12,487,200.00 a year

Diabetes

- 8.1% of population (946)
- $13,243.00 in healthcare costs a year
- Total—$12,527,878.00 a year

Teen Pregnancy

- Average of 29 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $92,800.00 a year

Grand Total for Blaine County:

$55,079,662.78

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Blaine County Health Department
521 W 4th
Watonga, OK 73772
580-623-7977

Looking Back to Move Forward

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

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

Blaine County Community Health Action Team & Geary Community Health Care

We want to say thank you to all the members of the Blaine County Community Health Action Team and Geary Community Health Care.

Blaine County Community Health Action Team

- Blaine County Health Department
- Roman Nose State Park
- Department of Human Services
- Oklahoma Commission for Children and Youth
- YWCA
- Business Owners
- Preventionworks
- Watonga Police Department
- Faith Community
- County Judge

Geary Community Health Care

- Geary Schools
- Parkview Hospital
- Chamber of Commerce
- Emergency Medical Services
- Nursing Home Board
- Local Physicians
- Local Pharmacist
- Concerned Citizens
- Local Business
- Blaine County Health Department

OKLAHOMA STATE DEPARTMENT OF HEALTH

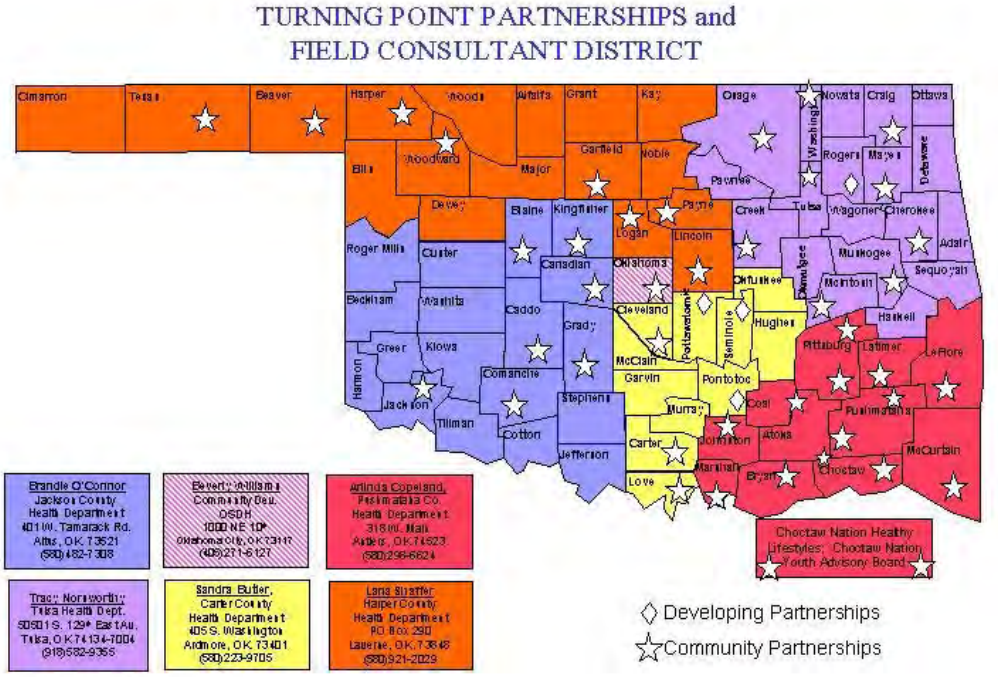
State of the County's Health Report

A Look Back To Move Forward

Bryan County

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

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



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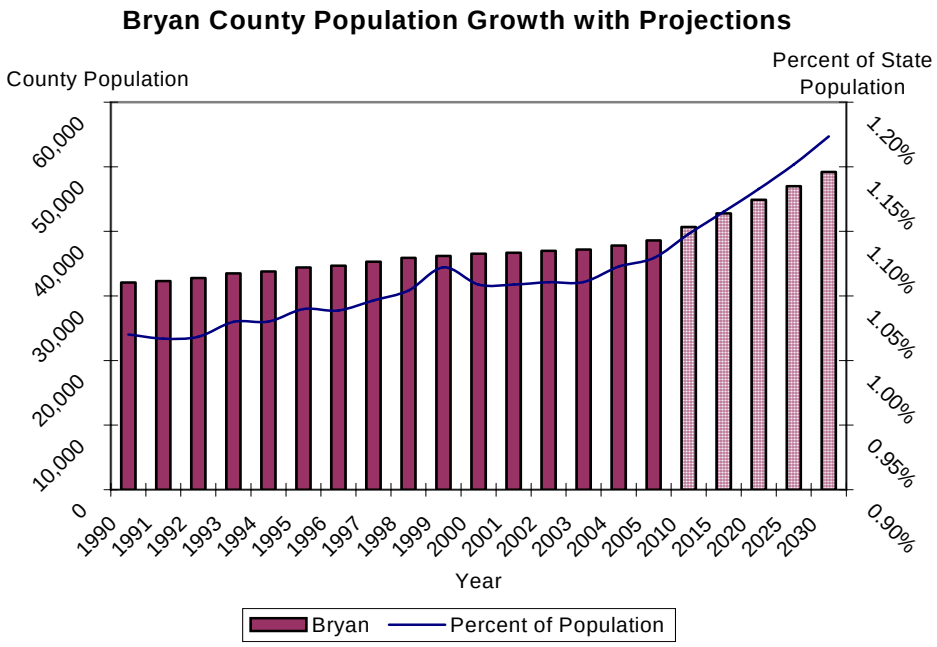
Demographics

** U.S. Census Bureau*

- Population estimates
  - 14% increase from 1990 to 2000 (32,089 to 36,534)
  - 3% increase from 2000 to 2004
  - Ranked 13th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 80%
  - Native Americans =«Indian %»
  - Blacks =1%
  - Other/Multiple = 6%
- Age
  - Under 5 = 6%
  - Over 64 = 15%
  - Median age = 35.8 years
- Housing units
  - Occupied = 14,422 (86%)
  - Vacant = 2,293 (14%)
- Disability (ages 21 to 64) = 26.3% national = 19.2% state = 21.5%
- Individuals below poverty = 18.4% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Bryan County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,529 people in Bryan County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 136.2 deaths a year, heart disease accounts for over $50 million a year in medical costs in Bryan County.

Heart disease accounts for over $50 million a year in medical costs in BryanCounty.

Alzheimer's disease and the complications associated with it have increased from the 16th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 173% increase in deaths.

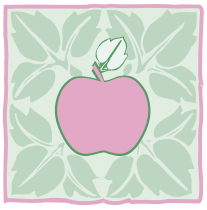
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 17.1% (6,379) of people in Bryan County were considered obese which accounted for an additional $2,519,705 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Bryan County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 15	UNINTENT. INJURY 11	UNINTENT. INJURY 23	UNINTENT. INJURY 28	UNINTENT. INJURY 31	CANCER 69	CANCER 166	HEART DISEASE 1261	HEART DISEASE 1499
2	CONGENITAL ANOMALIES 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	SUICIDE 13	HEART DISEASE 7	HEART DISEASE 25	HEART DISEASE 53	HEART DISEASE 148	CANCER 689	CANCER 943
3	UNINTENT. INJURY 3	HEART DISEASE 1	HOMICIDE/ LEGAL 3	SUICIDE 6	CANCER 13	UNINTENT. INJURY 14	BRONCHITIS/ EMPHYSEMA/ ASTHMA 20	STROKE 202	STROKE 229
4	HOMICIDE/ LEGAL 2	HOMICIDE/ LEGAL 1	HEART DISEASE 2	HOMICIDE/ LEGAL 5	SUICIDE 12	LIVER DISEASE 12	STROKE 16	INFLUENZA/ PNEUMONIA 182	BRONCHITIS/ EMPHYSEMA/ ASTHMA 202
5	SEPTICEMIA (BLOOD POISOINING) 2	CANCER 1	INFLUENZA/ PNEUMONIA 1	CANCER 4	HIV 5	DIABETES MELLITUS 10	UNINTENT. INJURY 14	BRONCHITIS/ EMPHYSEMA/ ASTHMA 174	UNINTENT. INJURY 202
6	SIDS 2	OTHER 2	OTHER 6	STROKE 2	VIRAL HEPATITIS 5	SUICIDE 9	DIABETES MELLITUS 13	DIABETES MELLITUS 97	INFLUENZA/ PNEUMONIA 199
7	HEART DISEASE 1			HIV 2	STROKE 4	STROKE 5	INFLUENZA/ PNEUMONIA 11	KIDNEY DISEASE 81	DIABETES MELLITUS 125
8	INFLUENZA/ PNEUMONIA 1			DIABETES MELLITUS 1	DIABETES MELLITUS 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	LIVER DISEASE 7	SEPTICEMIA (BLOOD POISOINING) 78	SEPTICEMIA (BLOOD POISOINING) 85
9	CANCER 1			OTHER 15	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	HOMICIDE/ LEGAL 4	SUICIDE 7	UNINTENT. INJURY 78	KIDNEY DISEASE 83
10	OTHER 8				HOMICIDE/ LEGAL 3	THREE CAUSES TIED 2	HYPERTENSION 4	ALZHEIMER'S DISEASE 30	SUICIDE 60

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, OK State Dept. of Health

July-05

Injury and Violence

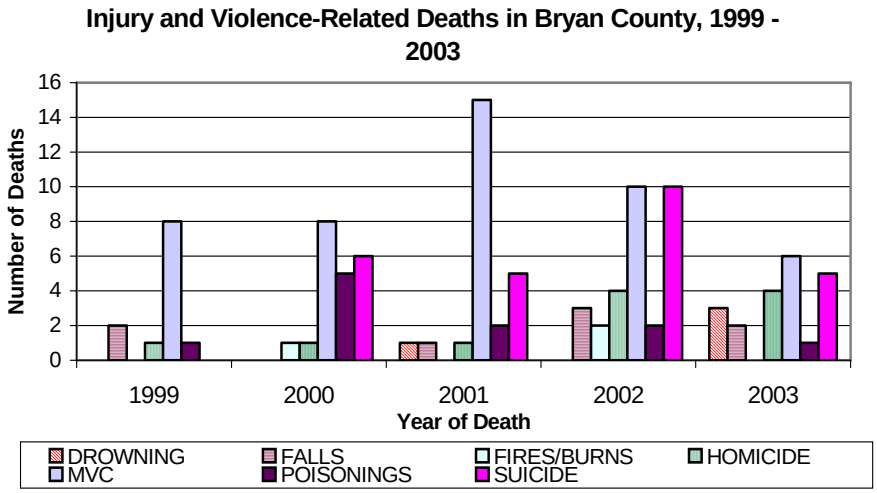
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Bryan County which has an average of 9.4 motor vehicle-related deaths a year, that translates to almost $11 million a year.

Violence-related injuries (homicide and suicide) in Bryan County are ranked in the top 10 in Seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 35.6% (13,281) of people in Bryan County use tobacco of some sort. Medical costs accumulated by those persons are almost $44 million a year for Bryan County.

> *"Medical costs accumulated by those persons are almost **$44 million a year** for Bryan County"*

Physical Activity, Wellness and Diabetes

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 30.7% (11,453) of people in Bryan County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.3% (2,723) of Bryan County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $36,060,689.00 in one year for Bryan County.

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

Teen Pregnancy

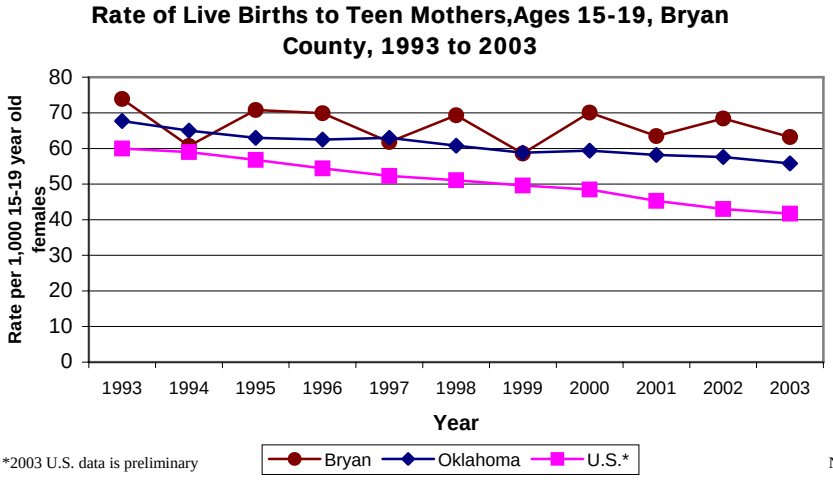
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Bryan County had a teen birth rate of 63.2 in 2003 which was a 8% decrease from 2002 (68.4) and a 14% decrease since 1993 (73.9).

With an average of 89 births per year, teen pregnancy costs the citizens of Bryan County $284,800.00 a year.



*2003 U.S. data is preliminary

Note: 15 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 18.4% of persons in Bryan County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Bryan County is 25% above the state (14.7%) and 48% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Bryan County, 2000 Census

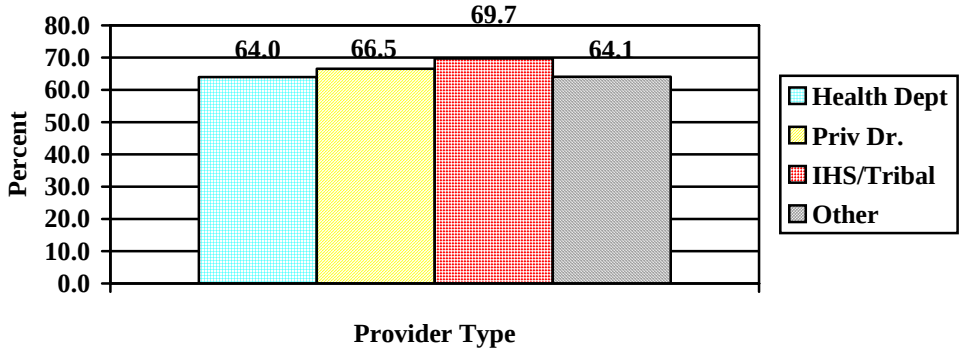
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	35,521	2,503	4,026	4,653	4,679	19,660
Cumulative Population		2,503	6,529	11,182	15,861	35,521
% of Total	100.0%	7.0%	11.3%	13.1%	13.2%	55.3%
Cumulative %		7.0%	18.4%	31.5%	44.7%	100.0%

OK By One - State Immunization Data

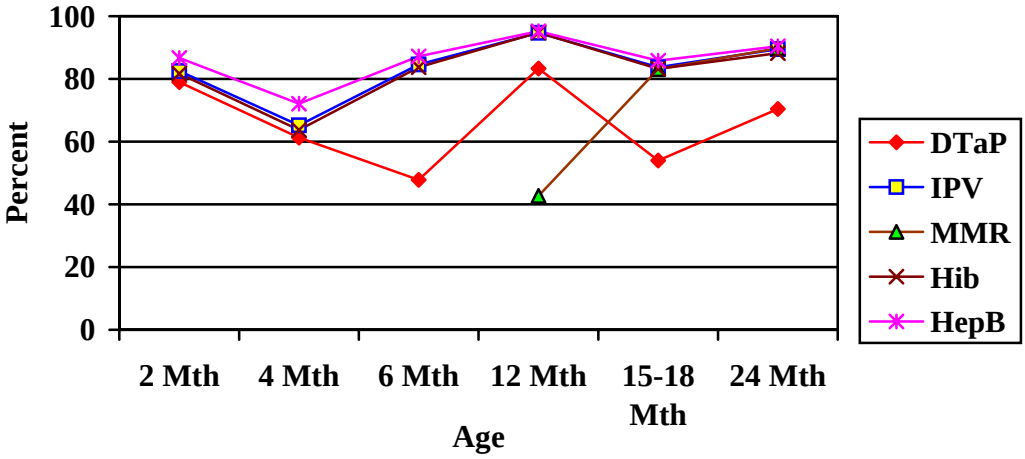
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

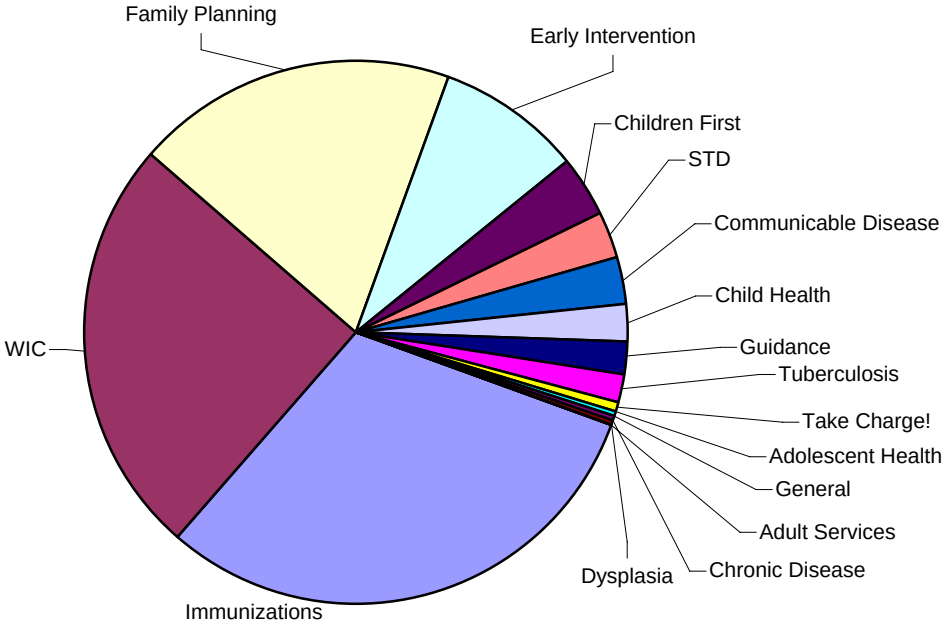


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 136 deaths a year
- $369,476.69 per death
- Total— $50,248,829.84 a year

Obesity

- 17.1% of population (6,379)
- $395.00 in additional medical costs per person
- Total—$2,519,705.00

Motor Vehicle-Related Injury Death

- Average 9.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$10,528,000.00 a year

Tobacco Use

- 35.6% of population (13,281)
- $3,300.00 in health care costs
- Total—$43,827,300.00 a year

Diabetes

- 7.3% of population (2,723)
- $13,243.00 in healthcare costs a year
- Total—$36,060,689.00 a year

Teen Pregnancy

- Average of 89 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $284,800.00 a year

Grand Total for Bryan County:

$143,469,323.84

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Bryan County Health Department
1524 W Chuckwa
PO Box 598
Durant, Oklahoma 74702-0598
580-924-4285

Looking Back to Move Forward

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

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

Bryan County Turning Point Coalition

We want to say Thank You to all the people that make the Bryan County Turning Point Coalition such a huge success.

- Bryan County Health Department
- Bryan County Coalition
- Bryan County Community Council
- Turning Point Coalition
- Durant Public Schools
- Choctaw Nation Community Health Programs/ Health Services
- Durant Chamber of Commerce
- Durant Kiwanis Club
- Durant Lions Club
- OSU Extension Service
- Medical Center of Southeastern Oklahoma
- Success by Six Initiative
- City of Durant—Parks & Recreation Department
- Southeast Oklahoma Division on Aging (SODA)
- Chickasaw Nation Health Services

OKLAHOMA STATE DEPARTMENT OF HEALTH

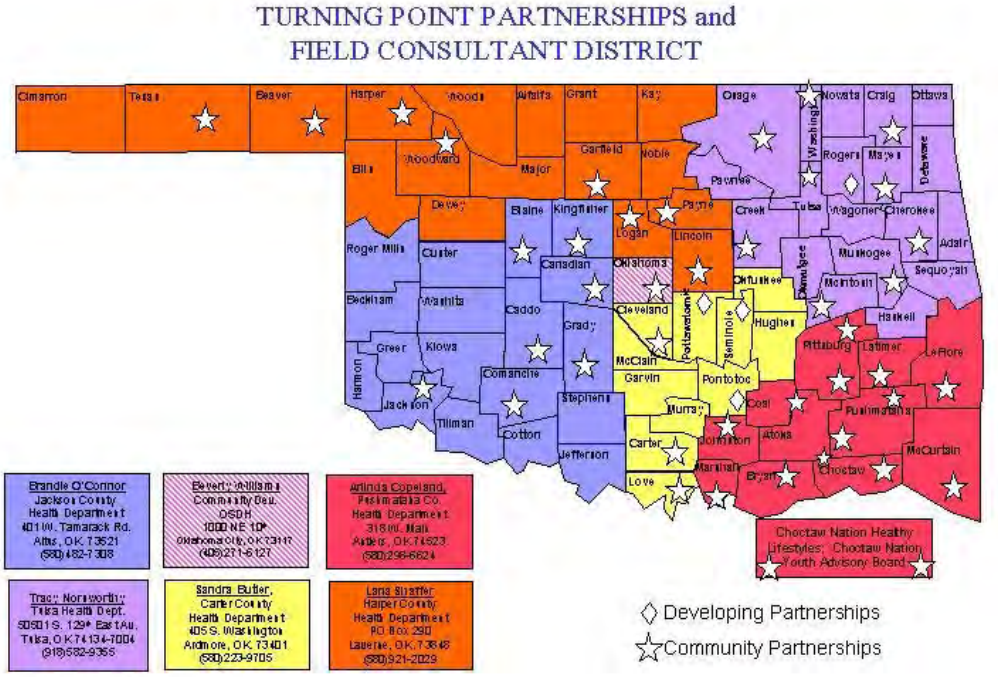
State of the County's Health Report

A Look Back To Move Forward

Caddo County

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

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



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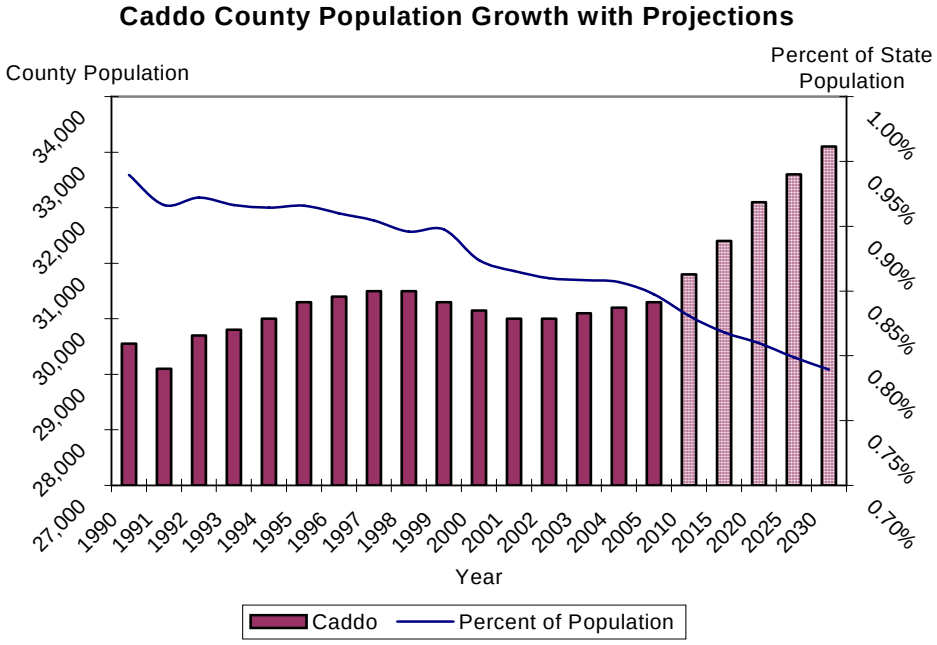
Demographics

** U.S. Census Bureau*

- Population estimates
  - 2% increase from 1990 to 2000 (29,550 to 30,150)
  - 0% increase from 2000 to 2004
  - Ranked 40th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 6%
- Race
  - Whites = 66%
  - Native Americans =24%
  - Blacks =3%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 15%
  - Median age = 36.0 years
- Housing units
  - Occupied = 10,957 (84%)
  - Vacant = 2,139 (16%)
- Disability (ages 21 to 64) = 22.5% national = 19.2% state = 21.5%
- Individuals below poverty = 21.7% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Caddo County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,452 people in Caddo County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 127.5 deaths a year, heart disease accounts for over $47 million a year in medical costs in Caddo County.

Heart disease accounts for over $47 million a year in medical costs in Caddo County.

Alzheimer's disease and the complications associated with it have increased from the 12th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 231% increase in deaths.

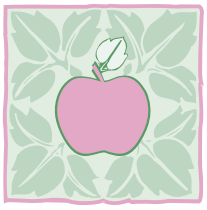
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 32.8% (9,863) of people in Caddo County were considered obese which accounted for an additional $3,895,885 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Caddo County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 15	UNINTENT. INJURY 8	UNINTENT. INJURY 52	UNINTENT. INJURY 31	UNINTENT. INJURY 34	HEART DISEASE 65	HEART DISEASE 135	HEART DISEASE 1167	HEART DISEASE 1402
2	CONGENITAL ANOMALIES 13	HEART DISEASE 3	SUICIDE 7	HOMICIDE/ LEGAL 9	HEART DISEASE 24	CANCER 54	CANCER 117	CANCER 547	CANCER 742
3	SIDS 4	CONGENITAL ANOMALIES 1	HOMICIDE/ LEGAL 5	SUICIDE 6	CANCER 18	UNINTENT. INJURY 23	STROKE 28	STROKE 244	STROKE 287
4	HEART DISEASE 3	OTHER 2	COMPLICATED PREGNANCY 2	CANCER 5	LIVER DISEASE 11	LIVER DISEASE 19	BRONCHITIS/ EMPHYSEMA/ ASTHMA 26	BRONCHITIS/ EMPHYSEMA/ ASTHMA 162	UNINTENT. INJURY 239
5	INFLUENZA/ PNEUMONIA 3		HEART DISEASE 2	DIABETES MELLITUS 4	HOMICIDE/ LEGAL 10	DIABETES MELLITUS 11	DIABETES MELLITUS 25	INFLUENZA/ PNEUMONIA 141	BRONCHITIS/ EMPHYSEMA/ ASTHMA 193
6	SEPTICEMIA (BLOOD POISONING) 2		NON-CANCEROUS TUMOR 1	STROKE 3	DIABETES MELLITUS 6	SUICIDE 10	UNINTENT. INJURY 21	DIABETES MELLITUS 114	DIABETES MELLITUS 160
7	STROKE 1		STROKE 1	HEART DISEASE 3	HIV 5	STROKE 6	LIVER DISEASE 16	UNINTENT. INJURY 69	INFLUENZA/ PNEUMONIA 158
8	HOMICIDE/ LEGAL 1		CONGENITAL ANOMALIES 1	INFLUENZA/ PNEUMONIA 3	SUICIDE 5	SEPTICEMIA (BLOOD POISONING) 5	SEPTICEMIA (BLOOD POISONING) 9	KIDNEY DISEASE 68	KIDNEY DISEASE 79
9	KIDNEY DISEASE 1		HIV 1	LIVER DISEASE 3	STROKE 4	HOMICIDE/ LEGAL 4	KIDNEY DISEASE 7	ALZHEIMER'S 53	LIVER DISEASE 66
10	UNINTENT. INJURY 1		CANCER 1	BLOOD POISONING 3	TWO CAUSES TIED 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	INFLUENZA/ PNEUMONIA 5	TWO CAUSES TIED 39	SEPTICEMIA (BLOOD POISONING) 62

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health July 2005

Injury and Violence

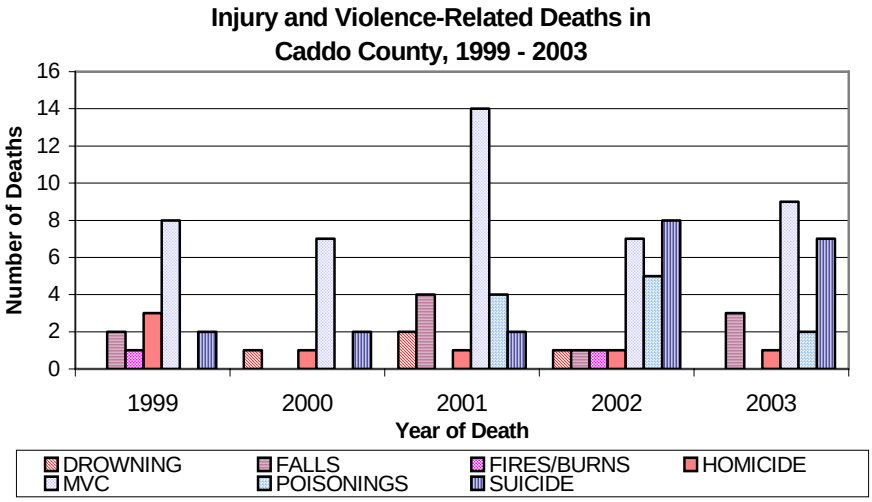
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Caddo County which has an average of 9 motor vehicle-related deaths a year, that translates to over $10 million a year.

Violence-related injuries (homicide and suicide) in Caddo County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 31.3% (9,412) of people in Caddo County use tobacco of some sort. Medical costs accumulated by those persons are over $31 million a year for Caddo County.

> *"Medical costs accumulated by those persons are over **$31 million a year** for Caddo County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 34.3% (10,314) of people in Caddo County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 8.3% (2,496) of Caddo County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $33,054,528.00 in one year for Caddo County.

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

Teen Pregnancy

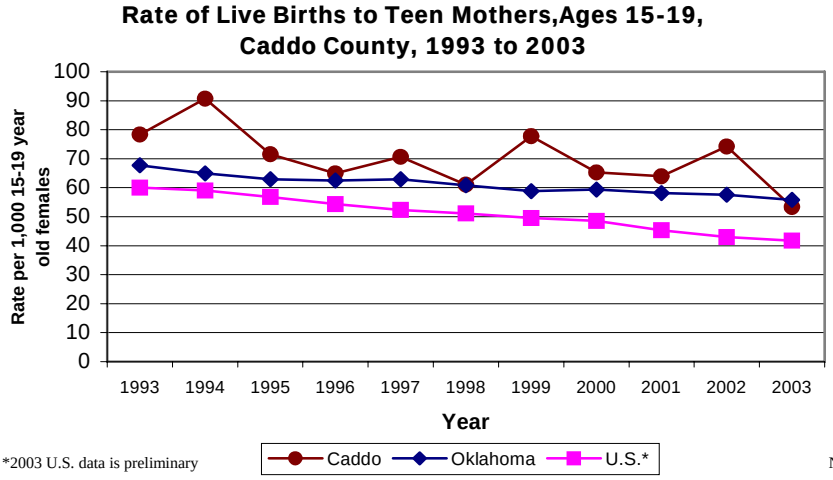
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Caddo County had a teen birth rate of 53.4 in 2003 which was a 28% decrease from 2002 (74.2) but a 32% decrease since 1993 (78.3).

With an average of 85 births per year, teen pregnancy costs the citizens of Caddo County $272,000.00 a year.



*2003 U.S. data is preliminary

Note: 24 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 21.7% of persons in Caddo County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Caddo County is 48% above the state (14.7%) and 75% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Caddo County, 2000 Census

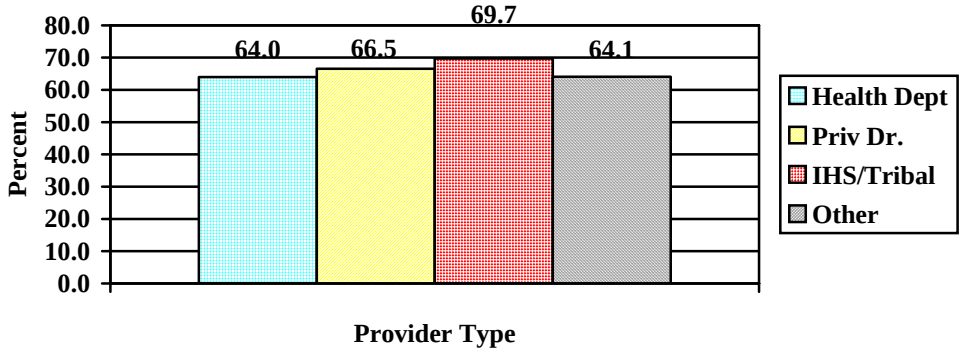
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	28,857	2,696	3,564	4,507	3,475	14,615
Cumulative Population		2,696	6,260	10,767	14,242	28,857
% of Total	100.0%	9.3%	12.4%	15.6%	12.0%	50.6%
Cumulative %		9.3%	21.7%	37.3%	49.4%	100.0%

OK By One - State Immunization Data

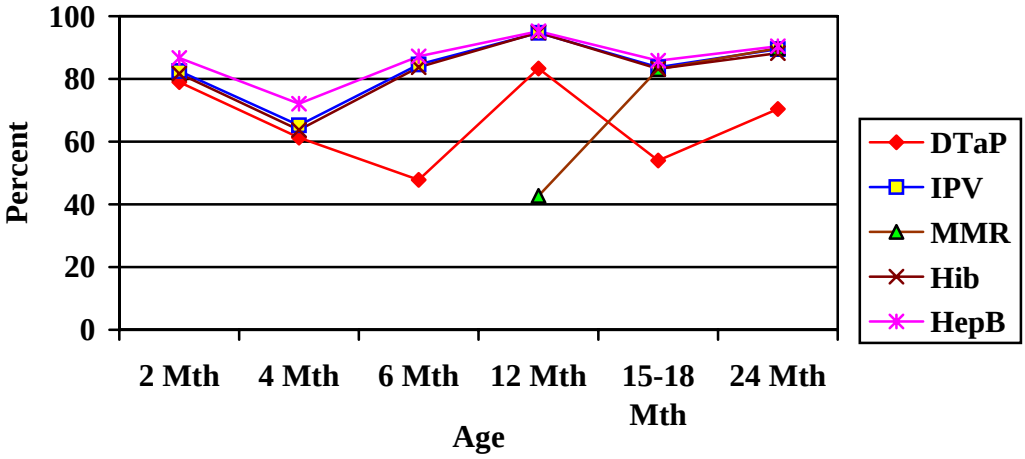
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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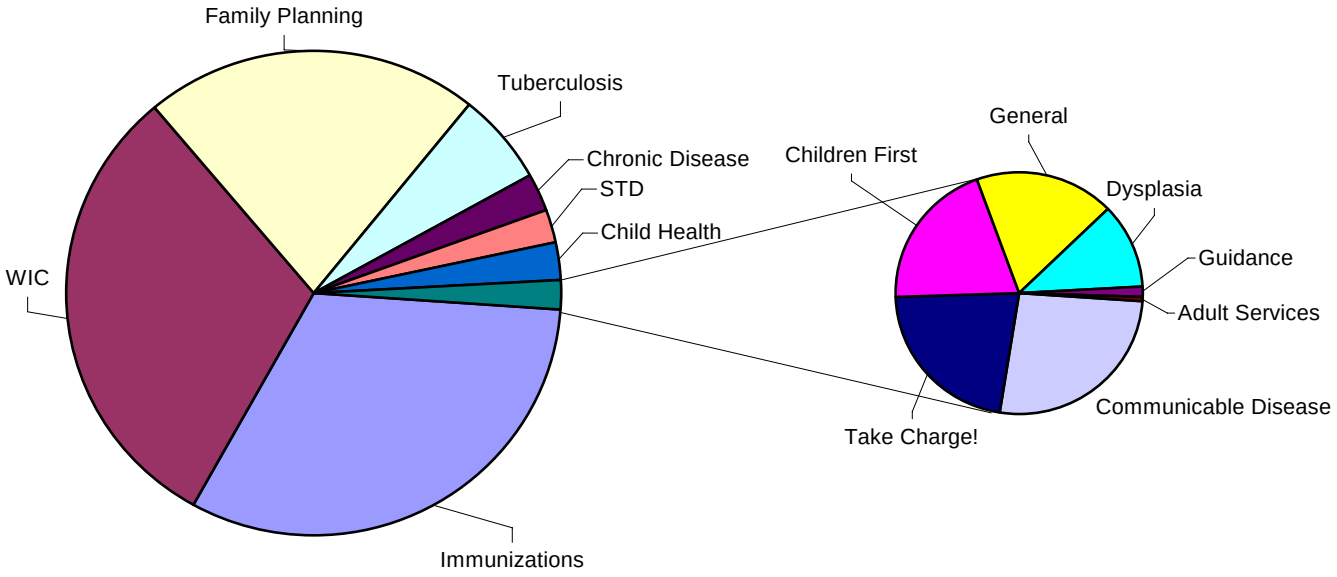

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 128 deaths a year
- $369,476.69 per death
- Total— $47,293,016.32 a year

Obesity

- 32.8% of population (9,863)
- $395.00 in additional medical costs per person
- Total—$3,895,885.00

Motor Vehicle-Related Injury Death

- Average 9 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$10,080,000.00 a year

Tobacco Use

- 31.3% of population (9,412)
- $3,300.00 in health care costs
- Total—$31,059,600.00 a year

Diabetes

- 8.3% of population (2,496)
- $13,243.00 in healthcare costs a year
- Total—$33,054,528.00 a year

Teen Pregnancy

- Average of 85 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $272,000.00 a year

Grand Total for Caddo County:

$125,655,029.32

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
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Anadarko, OK 73005
405-247-2507
www.health.state.ok.us/chds/caddo/

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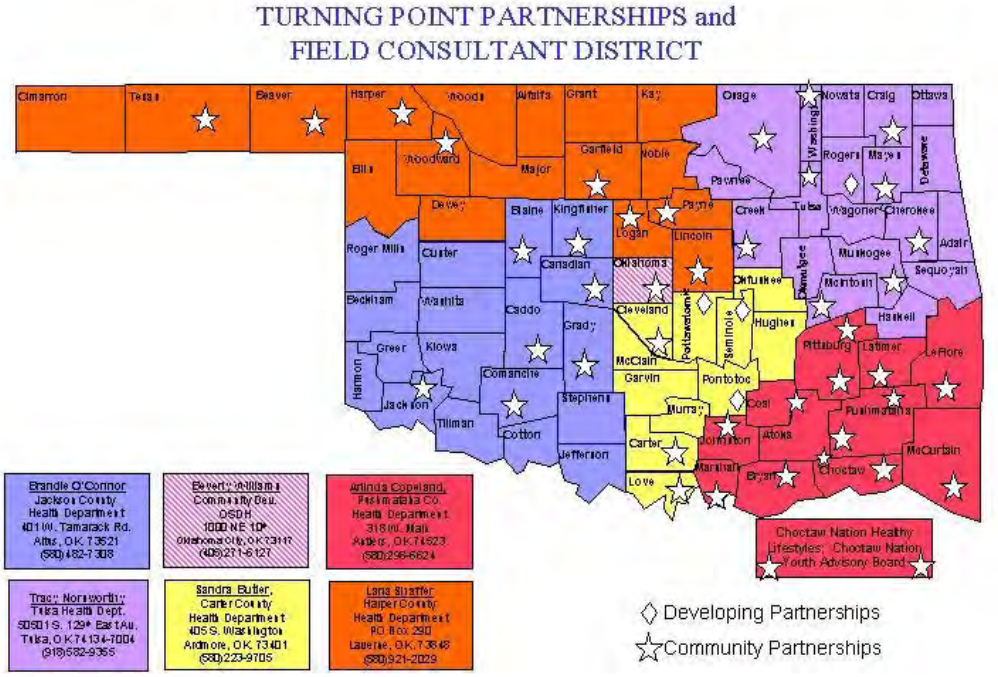

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Health Care Costs Summary	7
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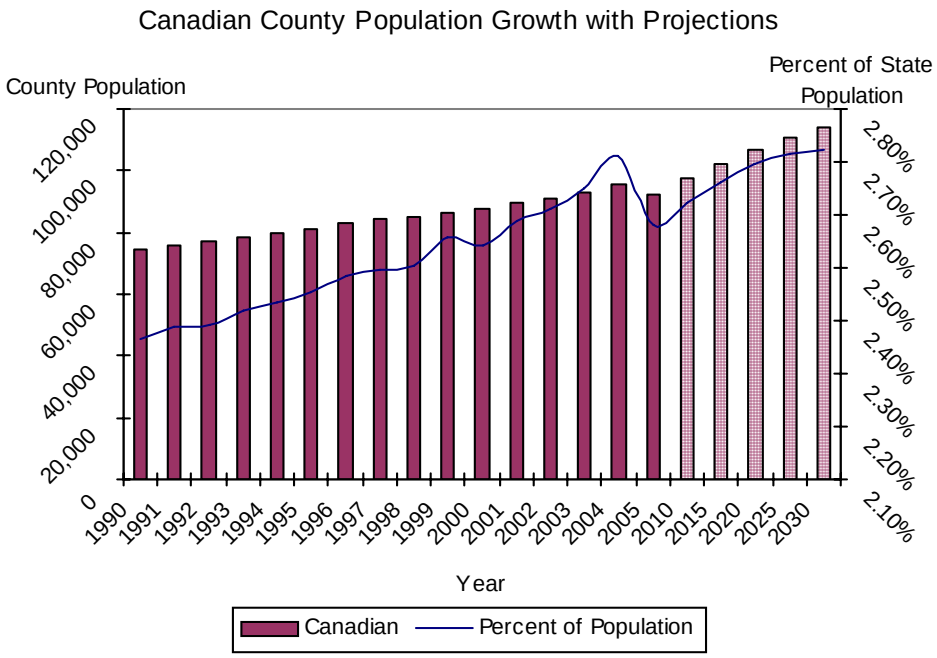
Demographics

- Population estimates
  - 18% increase from 1990 to 2000 (74,409 to 87,697)
  - 9% increase from 2000 to 2004
  - Ranked 3rd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 87%
  - Native Americans =«Indian %»
  - Blacks =2%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 10%
  - Median age = 35.4 years
- Housing units
  - Occupied = 31,484 (93%)
  - Vacant = 2,485 (7%)
- Disability (ages 21 to 64) = 15.6% national = 19.2% state = 21.5%
- Individuals below poverty = 7.9% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Canadian County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,611 people in Canadian County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 188.9 deaths a year, heart disease accounts for almost $70 million a year in medical costs in Canadian County.

Heart disease accounts for almost $70 million a year in medical costs in CanadianCounty.

Alzheimer's disease and the complications associated with it have increased from the 12th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 330% increase in deaths.

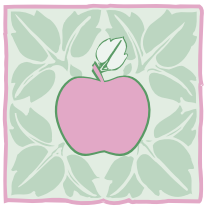
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 21.7% (20,160) of people in Canadian County were considered obese which accounted for an additional $7,963,200 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Canadian County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 30	UNINTENT. INJURY 11	UNINTENT. INJURY 59	UNINTENT. INJURY 33	CANCER 59	CANCER 139	CANCER 298	HEART DISEASE 1676	HEART DISEASE 2078
2	CONGENITAL ANOMALIES 26	CANCER 2	SUICIDE 21	SUICIDE 24	HEART DISEASE 42	HEART DISEASE 126	HEART DISEASE 215	CANCER 944	CANCER 1460
3	SIDS 12	SUICIDE 2	HEART DISEASE 8	HOMICIDE/ LEGAL 11	UNINTENT. INJURY 39	UNINTENT. INJURY 42	BRONCHITIS/ EMPHYSEMA/ ASTHMA 35	STROKE 431	STROKE 481
4	UNINTENT. INJURY 7	CONGENITAL ANOMALIES 1	HOMICIDE/ LEGAL 8	CANCER 10	SUICIDE 17	SUICIDE 17	DIABETES MELLITUS 27	BRONCHITIS/ EMPHYSEMA/ ASTHMA 286	BRONCHITIS/ EMPHYSEMA/ ASTHMA 341
5	HEART DISEASE 5	HOMICIDE/ LEGAL 1	CANCER 6	HEART DISEASE 6	HIV 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 16	STROKE 25	INFLUENZA/ PNEUMONIA 167	UNINTENT. INJURY 300
6	HOMICIDE/ LEGAL 2	STROKE 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	HIV 4	HOMICIDE/ LEGAL 9	STROKE 15	UNINTENT. INJURY 19	DIABETES MELLITUS 114	INFLUENZA/ PNEUMONIA 186
7	SEPTICEMIA (BLOOD POISONING) 2	OTHER 9	INFLUENZA/ PNEUMONIA 1	LIVER DISEASE 4	LIVER DISEASE 9	HOMICIDE/ LEGAL 10	LIVER DISEASE 10	UNINTENT. INJURY 90	DIABETES MELLITUS 150
8	FOUR CAUSES TIED 1		OTHER 7	INFLUENZA/ PNEUMONIA 2	STROKE 7	DIABETES MELLITUS 8	SEPTICEMIA (BLOOD POISONING) 10	ALZHEIMER'S DISEASE 86	SUICIDE 107
9				SEPTICEMIA (BLOOD POISONING) 2	CONGENITAL ANOMALIES 4	LIVER DISEASE 7	KIDNEY DISEASE 8	KIDNEY DISEASE 76	KIDNEY DISEASE 87
10				EIGHT CAUSES TIED 1	SEPTICEMIA (BLOOD POISONING) 3	INFLUENZA/ PNEUMONIA 6	TWO CAUSES TIED 7	ATHERO-SCLEROSIS 50	ALZHEIMER'S DISEASE 86

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health July 2005

Injury and Violence

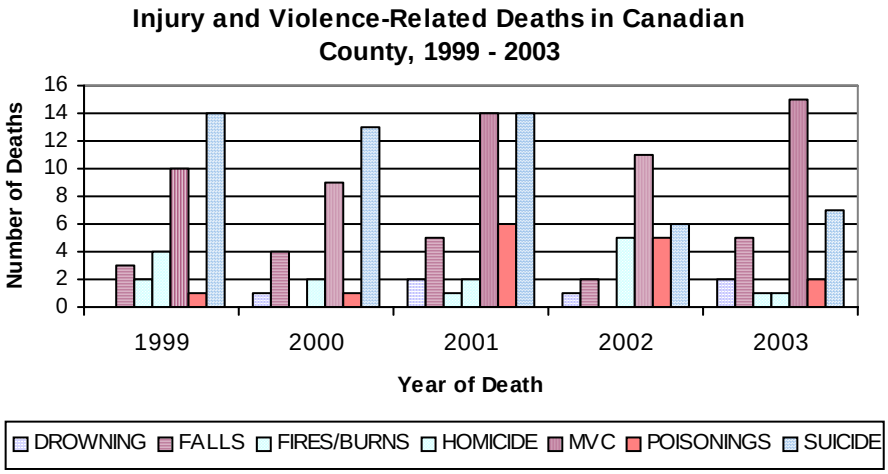
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Canadian County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Canadian County which has an average of 11.8 motor vehicle-related deaths a year, that translates to over $13 million a year.

Violence-related injuries (homicide and suicide) in Canadian County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 26.7% (24,805) of people in Canadian County use tobacco of some sort. Medical costs accumulated by those persons are almost $82 million a year for Canadian County.

> *"Medical costs accumulated by those persons are almost **$82 million a year** for Canadian County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 23.3% (21,647) of people in Canadian County had no leisure activity in the past month at the time they were surveyed.

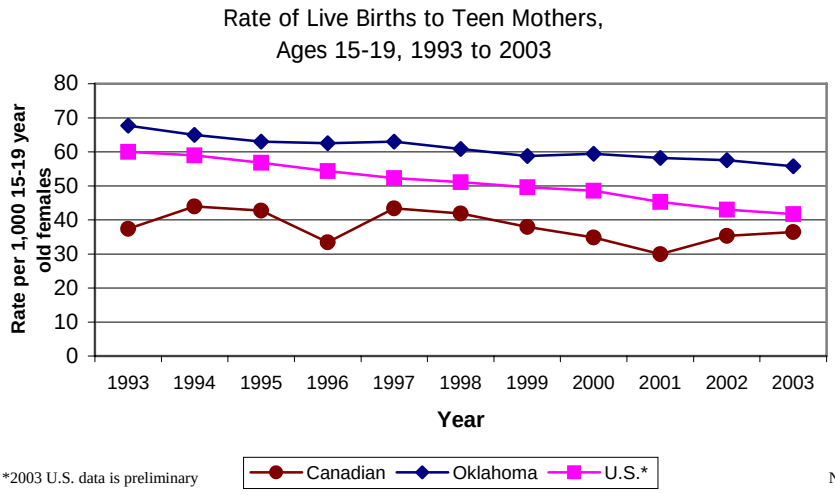
The BRFSS also indicated that 4.8% (4,459) of Canadian County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $59,050,537.00 in one year for Canadian County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

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

According to Oklahoma Vital Statistics, Canadian County had a teen birth rate of 36.4 in 2003 which was a 3% increase from 2002 (35.3) and a 3% decrease since 1993 (37.4).

With an average of 123 births per year, teen pregnancy costs the citizens of Canadian County $393,600.00 a year.

Note: 12 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 7.9% of persons in Canadian County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Canadian County is 46% below the state (14.7%) and 36% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Canadian County, 2000 Census

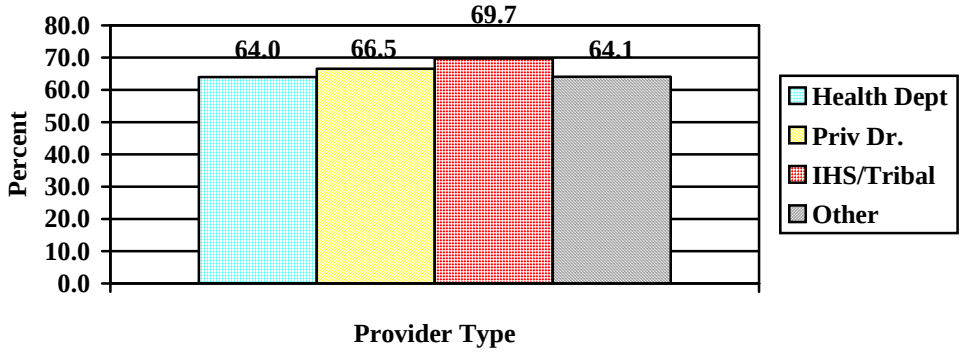
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	85,060	2,703	4,048	6,563	7,353	64,393
Cumulative Population		2,703	6,751	13,314	20,667	85,060
% of Total	100.0%	3.2%	4.8%	7.7%	8.6%	75.7%
Cumulative %		3.2%	7.9%	15.7%	24.3%	100.0%

OK By One - State Immunization Data

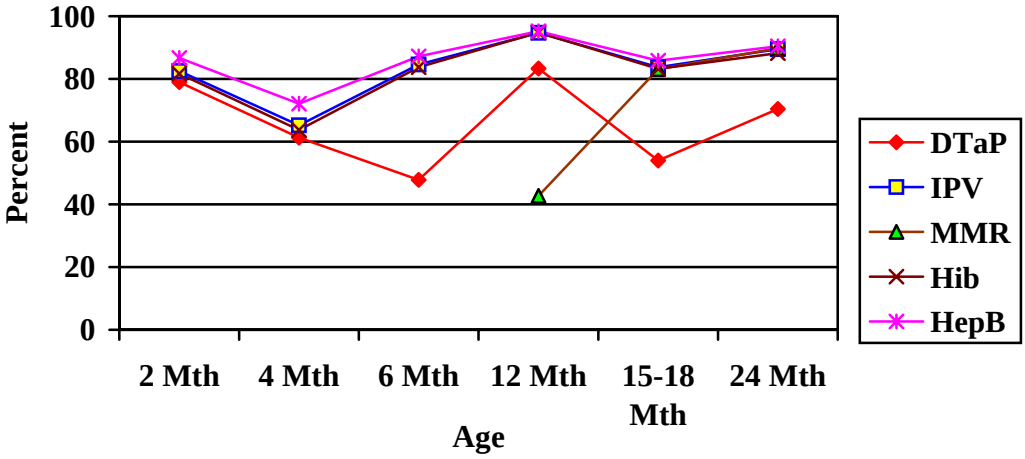
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

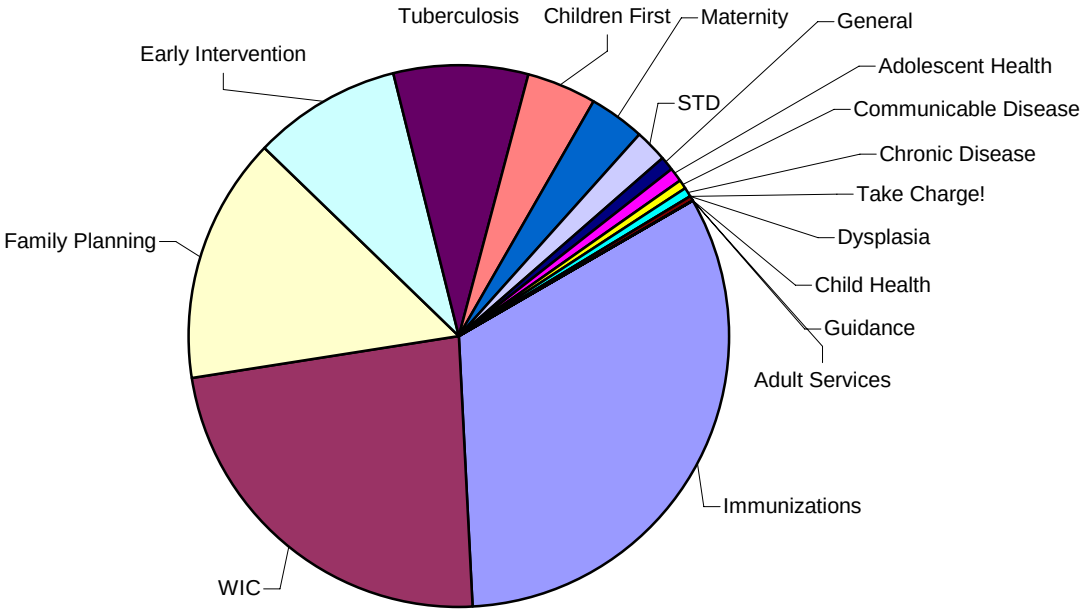


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 189 deaths a year
- $369,476.69 per death
- Total— $69,831,094.41 a year

Obesity

- 21.7% of population (20,160)
- $395.00 in additional medical costs per person
- Total—$7,963,200.00

Motor Vehicle-Related Injury Death

- Average 11.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$13,216,000.00 a year

Tobacco Use

- 26.7% of population (24,805)
- $3,300.00 in health care costs
- Total—$81,856,500.00 a year

Diabetes

- 4.8% of population (4,459)
- $13,243.00 in healthcare costs a year
- Total—$59,050,537.00 a year

Teen Pregnancy

- Average of 123 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $393,600.00 a year

Grand Total for Canadian County:

$232,310,931.41

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Canadian County Health Department
100 s. Rock Island
El Reno, Oklahoma 73036
405-262-0042

Looking Back to Move Forward

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

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

El Reno Healthcare Coalition

Thank you to all the people of El Reno Health Care Coalition who have made It such a success.

- C.A.R.E.
- Canadian County Health Department
- Concerned Citizens
- El Reno City Government
- El Reno Schools
- Oklahoma State University Cooperative Extension Service
- Parkview Hospital
- Russell-Murray Hospice

OKLAHOMA STATE DEPARTMENT OF HEALTH

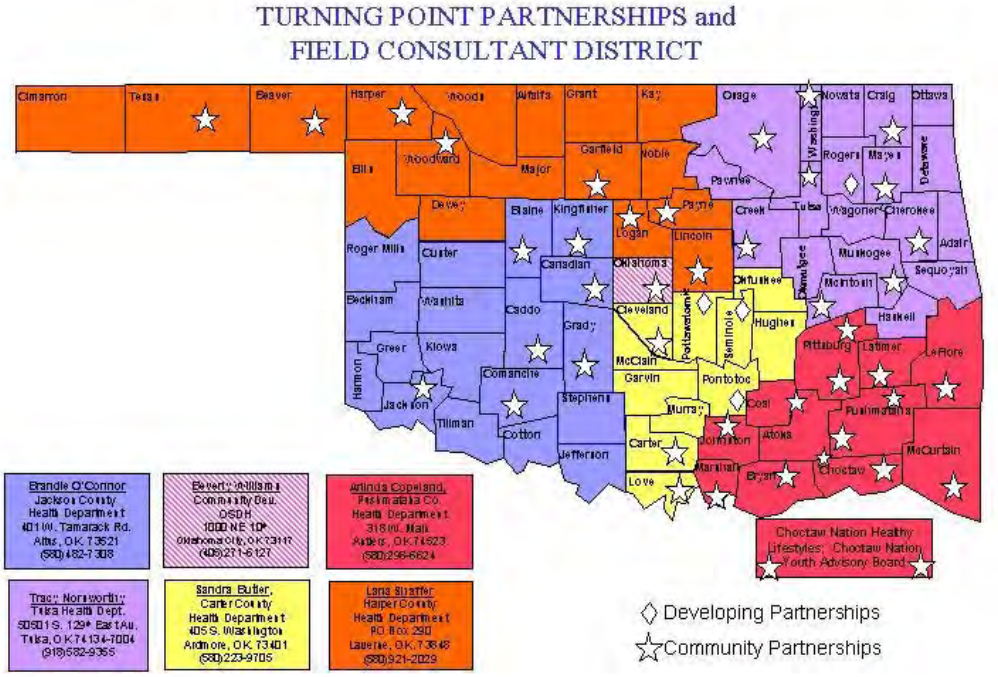
State of the County's Health Report

A Look Back To Move Forward

Carter County

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

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



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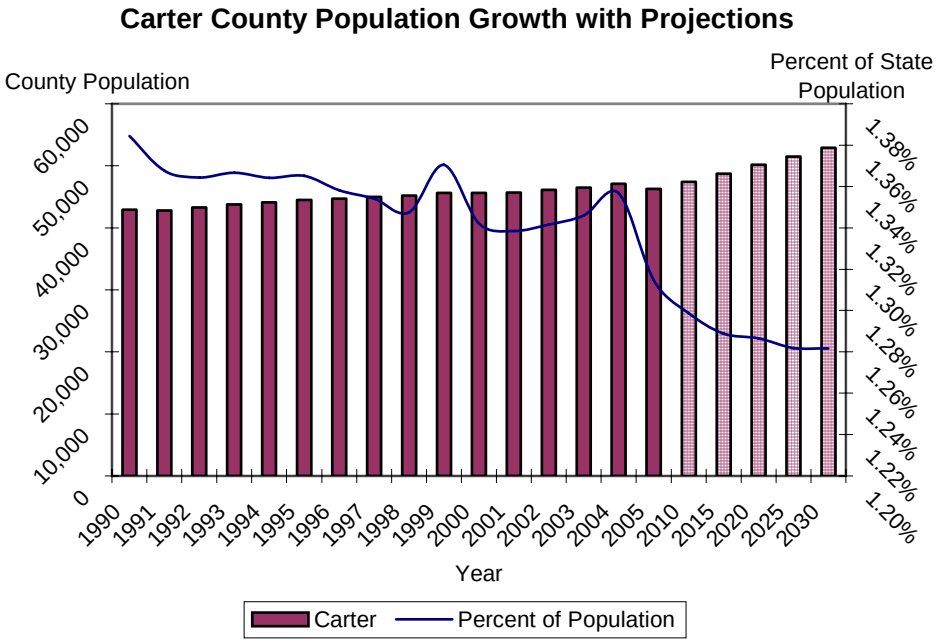
Demographics

** U.S. Census Bureau*

- Population estimates
  - 6% increase from 1990 to 2000 (42,919 to 45,621)
  - 3% increase from 2000 to 2004
  - Ranked 14th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 78%
  - Native Americans =8%
  - Blacks =8%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 16%
  - Median age = 38.0 years
- Housing units
  - Occupied = 17,992 (87%)
  - Vacant = 2,585 (13%)
- Disability (ages 21 to 64) = 25.0% national = 19.2% state = 21.5%
- Individuals below poverty = 16.6% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Carter County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,135 people in Carter County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 197.5 deaths a year, heart disease accounts for almost $73 million a year in medical costs in Carter County.

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

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

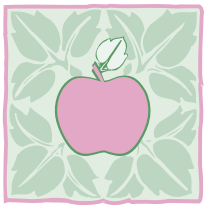
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 22.6% (10,485) of people in Carter County were considered obese which accounted for an additional $4,141,575 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Carter County 1993-2003

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

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

Injury and Violence

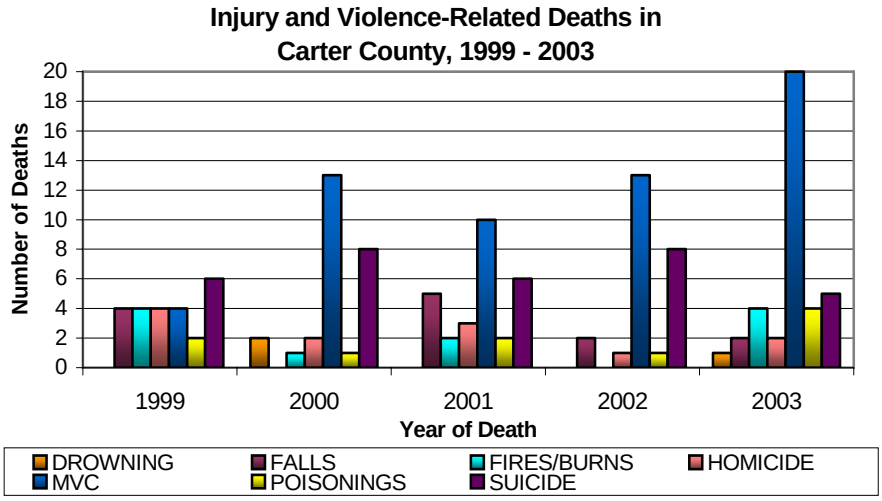
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Carter County which has an average of 12 motor vehicle-related deaths a year, that translates to over $13 million a year.

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



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 27.1% (12,573) of people in Carter County use tobacco of some sort. Medical costs accumulated by those persons are over $41 million a year for Carter County.

> *"Medical costs accumulated by those persons are over **$41 million a year** for Carter County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 36.1% (16,749) of people in Carter County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.5% (3,480) of Carter County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $46,085,640.00 in one year for Carter County.

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

Teen Pregnancy

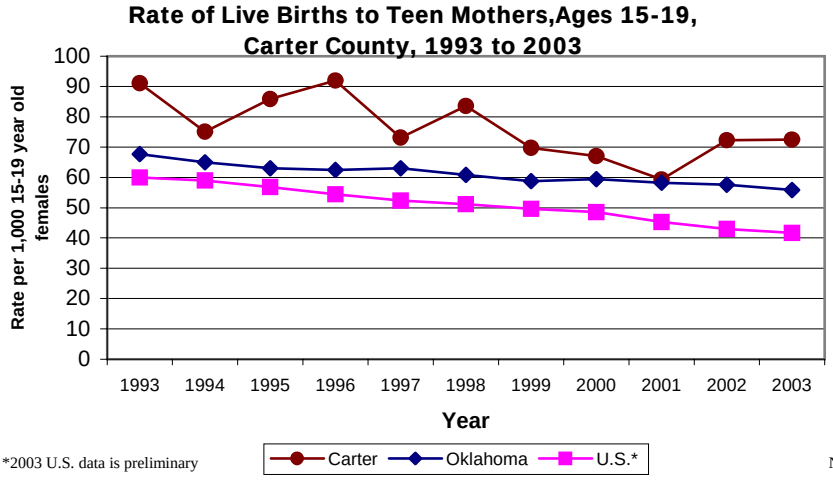
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

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

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



*2003 U.S. data is preliminary

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

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 16.6% of persons in Carter County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Carter County is 13% above the state (14.7%) and 34% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Carter County, 2000 Census

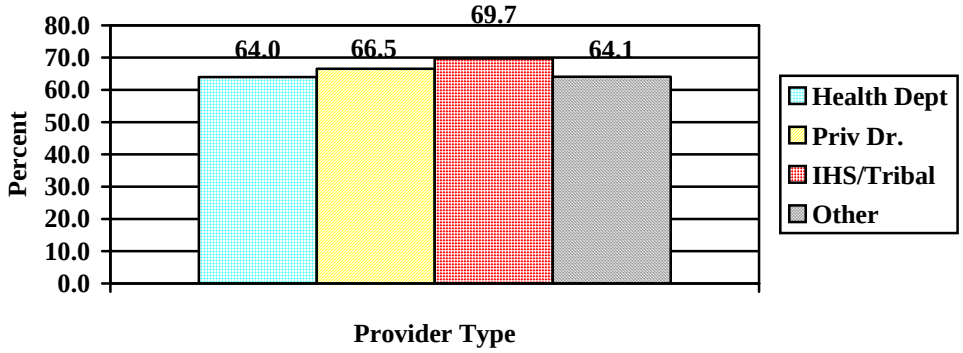
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	44,412	3,075	4,300	5,692	5,485	25,860
Cumulative Population		3,075	7,375	13,067	18,552	44,412
% of Total	100.0%	6.9%	9.7%	12.8%	12.4%	58.2%
Cumulative %		6.9%	16.6%	29.4%	41.8%	100.0%

OK By One - State Immunization Data

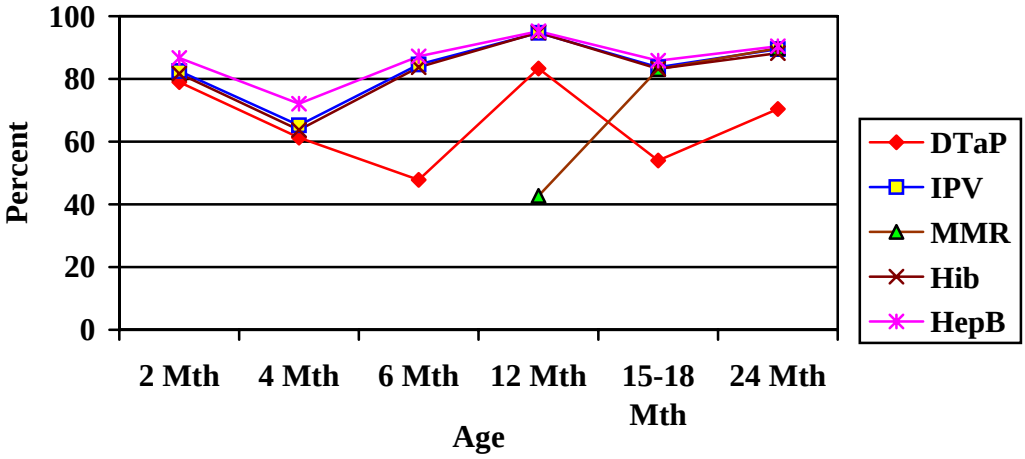
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

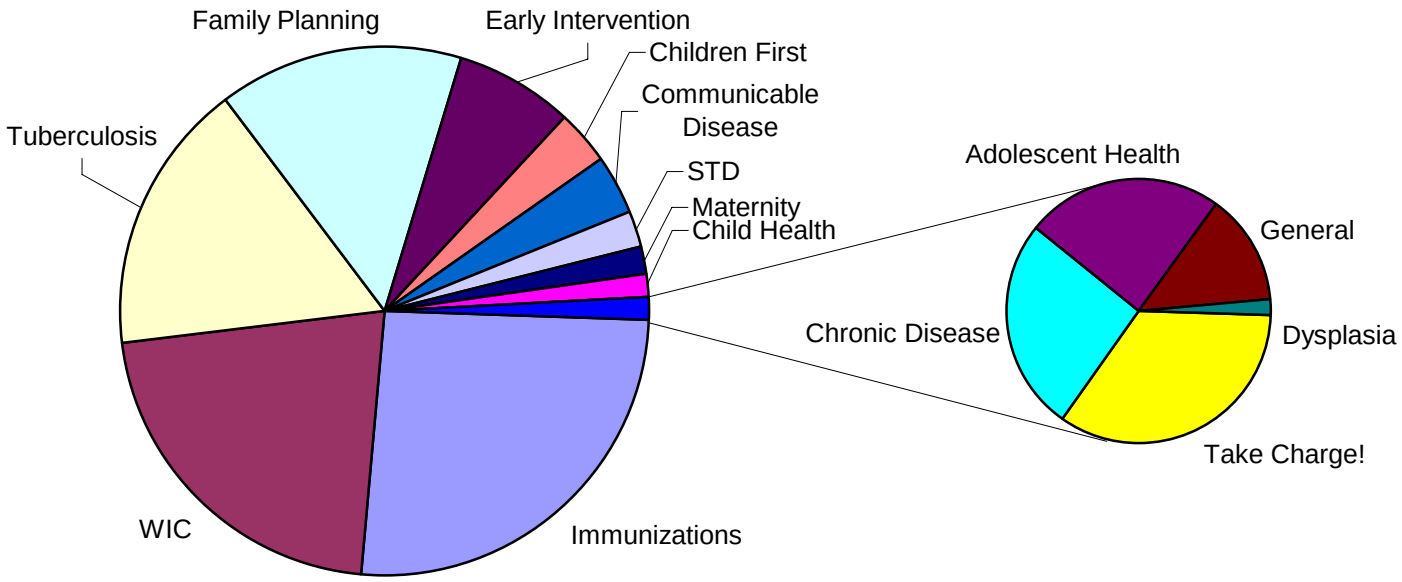


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

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

Obesity

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

Motor Vehicle-Related Injury Death

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

Tobacco Use

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

Diabetes

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

Teen Pregnancy

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

Grand Total for Carter County:

$178,701,699.62

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

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

City Hall - 308 Franklin
Box 298
Healdton, OK 73438
580-229-1291
www.health.state.ok.us/chds/carter/

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

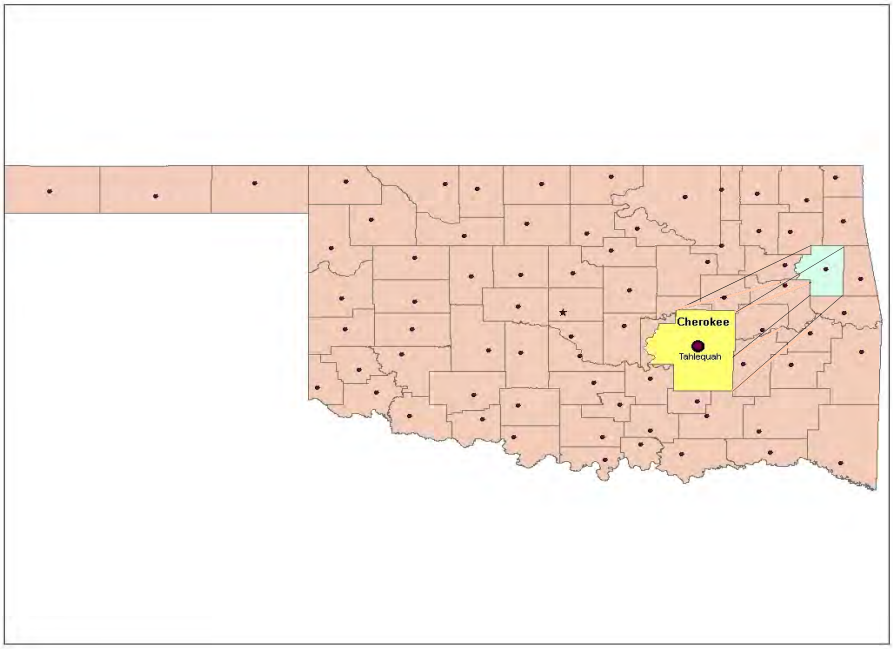
State of the County's Health Report

A Look Back To Move Forward

Cherokee County

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

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



Inside this issue:

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County Health Department Usage	5
Health Care Costs Summary	5
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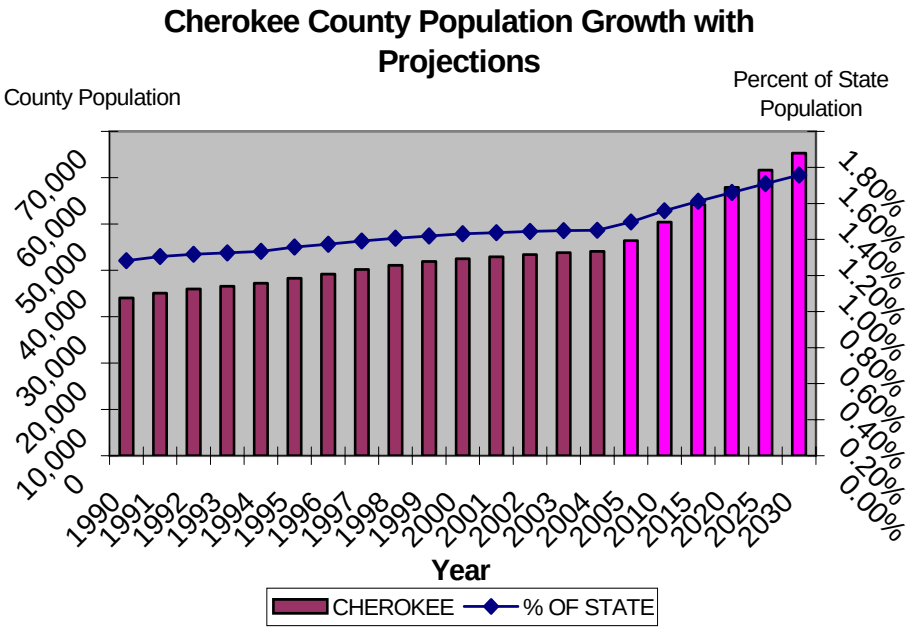
Demographics

** U.S. Census Bureau*

- Population
  - 25% increase from 1990 to 2000 (34,049 to 42,521)
  - 4% increase from 2000 to 2004 (42,521 to 44,100)
  - Ranked 11th for growth in state
- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 56%
  - Native Americans = 32%
  - Blacks = 1%
  - Other/Multiple = 11%
- Age
  - Under 5 = 7%
  - Over 64 = 12%
  - Median age = 32 years
- Occupied housing = 16,175
- Disability (ages 21 to 64) = 23%
  national average = 19.2%
- Families below poverty = 17%
  national average = 9.2%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Cherokee County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,129 people in Cherokee County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 120 deaths a year, heart disease accounts for over $44 million a year in medical costs in Cherokee County.

Heart disease accounts for over $44 million a year in medical costs in Cherokee County.

Alzheimer's disease and the complications associated has increased from the 16th ranked cause of death (1983-1993) to the 9th leading cause of death in persons 65 and older accounting for a 400% increase.

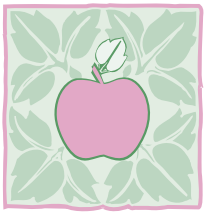
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 30% (13,130) of people in Cherokee County were considered obese which accounted for an additional $5,186,350.00 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods—Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Cherokee County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	UNINTENT. INJURY 11	UNINTENT. INJURY 8	UNINTENT. INJURY 31	UNINTENT. INJURY 25	CANCER 33	HEART DISEASE 75	CANCER 133	HEART DISEASE 970	HEART DISEASE 1200
2	CONGENITAL ANOMALIES 10	CANCER 3	SUICIDE 9	SUICIDE 13	UNINTENT. INJURY 28	CANCER 71	HEART DISEASE 127	CANCER 614	CANCER 862
3	SIDS 5	HOMICIDE/ LEGAL 1	HOMICIDE/ LEGAL 6	CANCER 6	HEART DISEASE 20	UNINTENT. INJURY 30	DIABETES MELLITUS 32	STROKE 223	STROKE 259
4	PERINATAL PERIOD 4	OTHER 4	HEART DISEASE 4	HOMICIDE/ LEGAL 5	SUICIDE 15	DIABETES MELLITUS 19	BRONCHITIS/ EMPHYSEMA/ ASTHMA 25	BRONCHITIS/ EMPHYSEMA/ ASTHMA 190	UNINTENT. INJURY 226
5	HEART DISEASE 2		ANEMIA 1	HIV 4	DIABETES MELLITUS 13	LIVER DISEASE 12	UNINTENT. INJURY 25	INFLUENZA/ PNEUMONIA 153	BRONCHITIS/ EMPHYSEMA/ ASTHMA 220
6	HOMICIDE/ LEGAL 2		CONGENITAL ANOMALIES 1	STROKE 3	STROKE 8	STROKE 11	LIVER DISEASE 15	DIABETES MELLITUS 92	INFLUENZA/ PNEUMONIA 168
7	INFLUENZA/ PNEUMONIA 1		CANCER 1	DIABETES MELLITUS 3	HOMICIDE/ LEGAL 6	INFLUENZA/ PNEUMONIA 5	STROKE 14	ATHERO-SCLEROSIS 78	DIABETES MELLITUS 159
8	CANCER 1		OTHER 4	HEART DISEASE 2	LIVER DISEASE 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	INFLUENZA/ PNEUMONIA 7	UNINTENT. INJURY 67	ATHERO-SCLEROSIS 82
9	OTHER 9			CONGENITAL ANOMALIES 1	CONGENITAL ANOMALIES 3	BLOOD POISONING 4	SUICIDE 6	ALZHEIMER'S 55	SUICIDE 59
10				TWO CAUSES TIED 1	HIV 3	SUICIDE 4	THREE CAUSES TIED 4	KIDNEY DISEASE 45	ALZHEIMER'S 55

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health July 2005

Injury and Violence

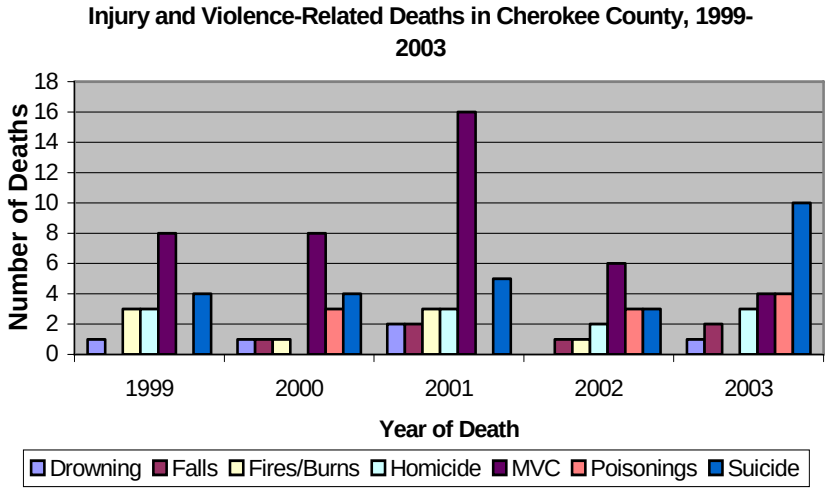
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Cherokee County. Unintentional injuries are the leading cause of death from birth to age 34 in Cherokee County.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Cherokee County which has an average of 8.4 motor vehicle-related deaths a year, that translates to over $9 million a year.

Violence-related injuries (homicide and suicide) in Cherokee County are ranked in the top 10 in every age group except for persons over the age of 65.



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 27% (11,817) of people in Cherokee County use tobacco of some sort. Medical costs accumulated by those persons are almost $39 million a year for Cherokee County.

*"Medical costs accumulated by those persons are almost **$39 million a year** for Cherokee County"*

Physical Activity, Wellness and Diabetes

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

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

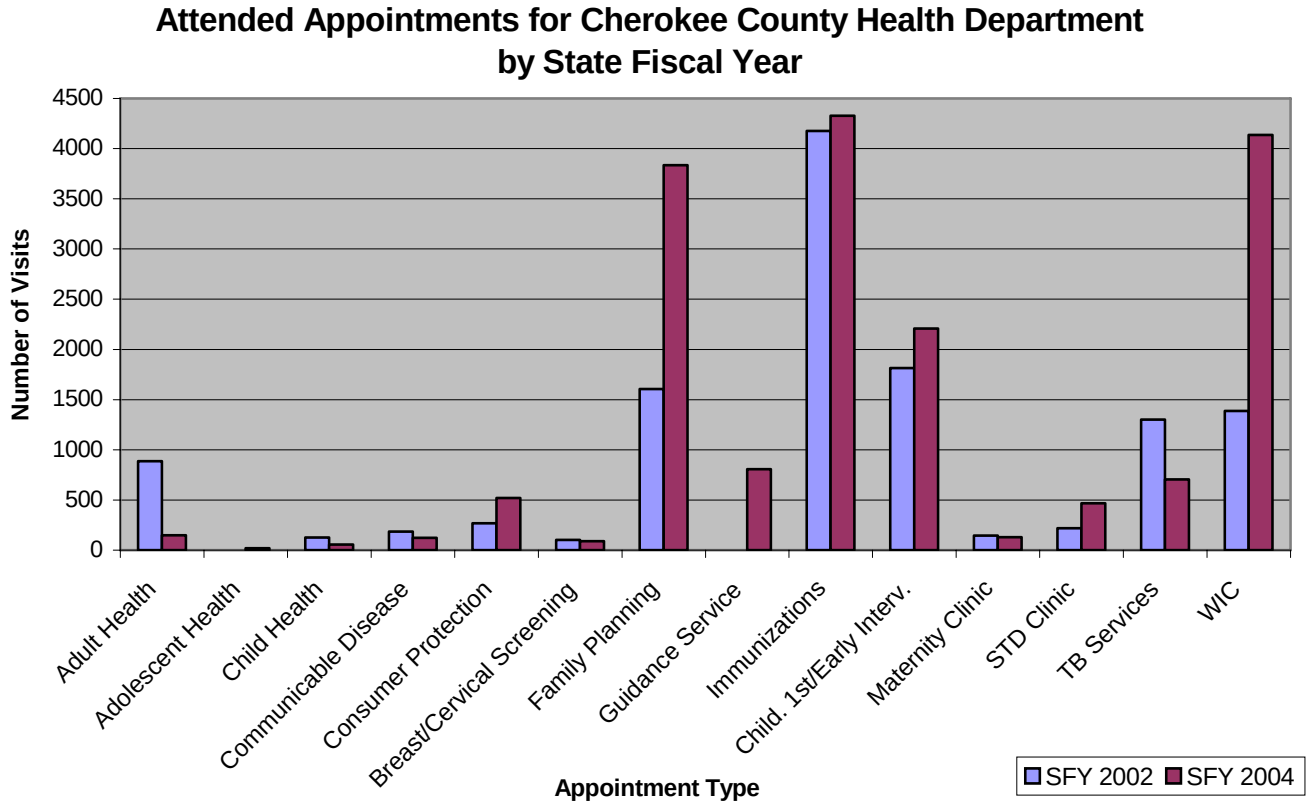
According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that a little over 30% (144,922) of people in Cherokee County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 9.9% (4,333) of Cherokee County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated additional health care costs of $57,381,919 in one year for Cherokee County.

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

County Health Department Usage

** PHOCIS, Community Health Services, OSDH*



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 120 deaths a year
- $369,476.69 per death
- Total—$44,336,842.80 a year

Obesity

- 30% of population (13,130)
- $395 in additional medical costs per person
- Total—$5,186,350.00

Motor Vehicle-Related Injury Death

- Average 8.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$9,408,000.00 a year

Tobacco Use

- 27% of population (11,817)
- $3,300 in health care costs
- Total—$38,996,397.00 a year

Diabetes

- 9.9% of population (4,333)
- $13,243 in healthcare costs a year
- Total—$57,381,919 a year

Grand Total for Cherokee County:

$155,309,508.80

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117

Phone: 405-271-6127
Fax: 405-271-1225
Email: neil@health.ok.gov

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Carol McKiel
Cherokee County Health Department

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Cherokee County Community Health Coalition

We want to say Thank You to all the people that make the Cherokee County Community Health Coalition such a huge success. With milestones such as opening two community health clinics and a birthing center, implementing school and community based physical activity programs and obtaining various grants to fund health-related projects the Cherokee County Community Health Coalition is an example to live up to.

- Bill Willis Community Mental Health and Substance Abuse Services
- Cherokee County Health Department
- Cherokee Nation
- Christian Children's Fund
- City of Tahlequah
- Cookson Hills Community Action
- Cox Pharmacy
- Help In Crisis
- Kid Connections, Inc.
- Northeastern Oklahoma Community Health Centers, Inc.
- Northeastern State University
- OSU Extension Services
- Oklahoma Caring Foundation
- State Senator Jim Wilson
- Tahlequah Boys and Girls Club
- Tahlequah City Hospital
- Tahlequah Public Schools
- Cherokee County Public Schools
- Trinity Hospice
- W.W. Hastings Indian Medical Center
- Local Business, Religious, and Community Leaders

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

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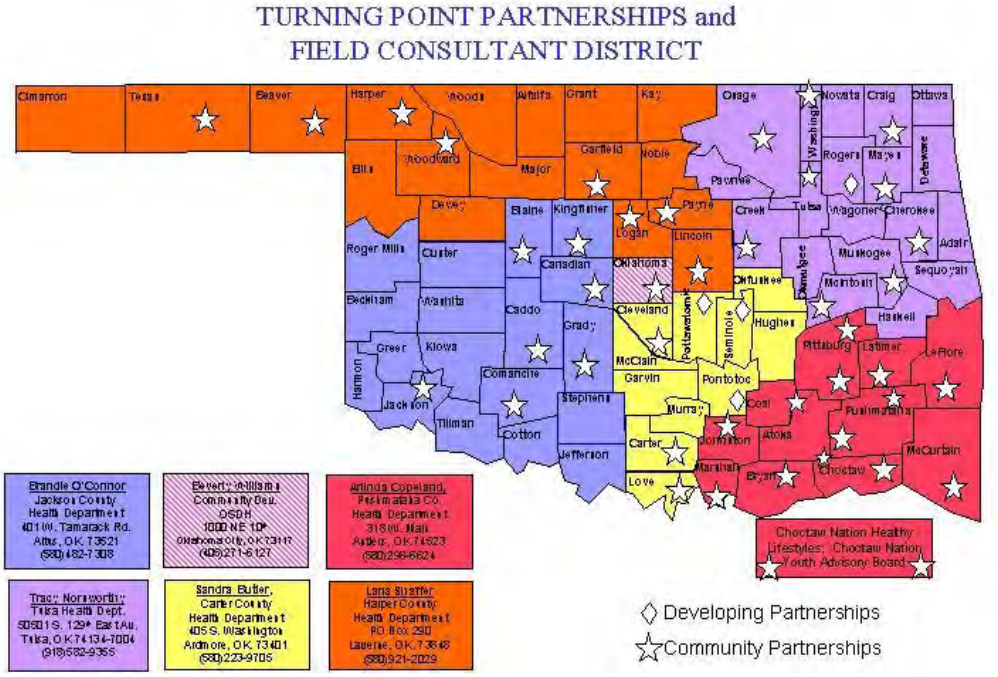

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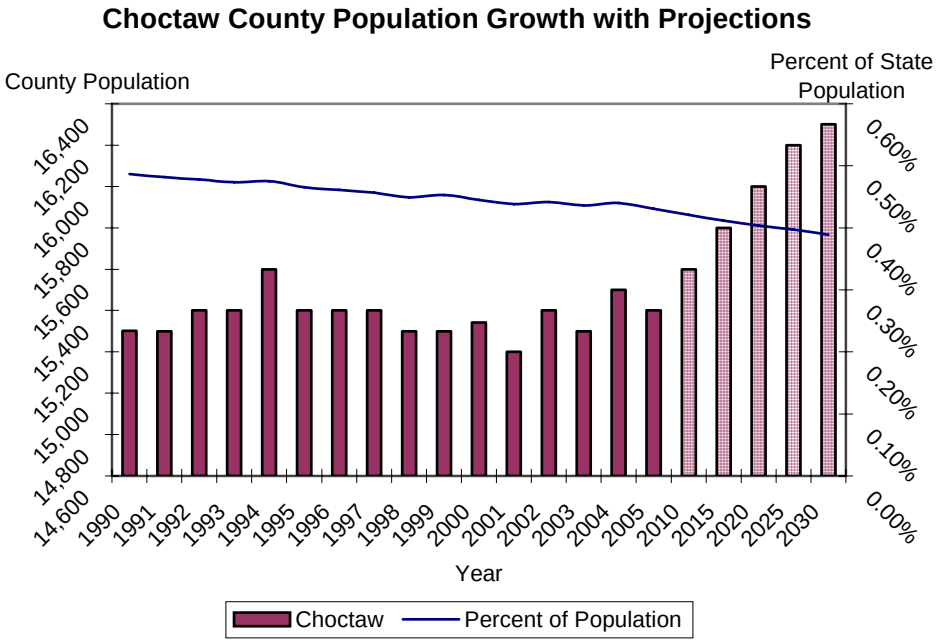
Demographics

** U.S. Census Bureau*

- Population estimates
  - 0% increase from 1990 to 2000 (15,302 to 15,342)
  - 1% increase from 2000 to 2004
  - Ranked 34th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 69%
  - Native Americans =15%
  - Blacks =11%
  - Other/Multiple = 6%
- Age
  - Under 5 = 6%
  - Over 64 = 17%
  - Median age = 38.7 years
- Housing units
  - Occupied = 6,220 (83%)
  - Vacant = 1,319 (17%)
- Disability (ages 21 to 64) = 26.6% national = 19.2% state = 21.5%
- Individuals below poverty = 24.3% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Choctaw County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 967 people in Choctaw County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 70.2 deaths a year, heart disease accounts for almost $26 million a year in medical costs in Choctaw County.

Heart disease accounts for almost $26 million a year in medical costs in Choctaw County.

Alzheimer's disease and the complications associated with it have decreased from the 18th ranked cause of death (1983-1993) to the 12th ranked cause of death in persons 65 and older but accounted for a 233% increase in deaths.

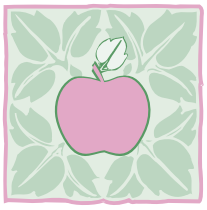
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 19.4% (2,994) of people in Choctaw County were considered obese which accounted for an additional $1,182,630 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Choctaw County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 6	UNINTENT. INJURY 5	UNINTENT. INJURY 15	UNINTENT. INJURY 16	UNINTENT. INJURY 16	HEART DISEASE 33	HEART DISEASE 75	HEART DISEASE 652	HEART DISEASE 772
2	UNINTENT. INJURY 6	CONGENITAL ANOMALIES 2	HOMICIDE/ LEGAL 6	SUICIDE 6	CANCER 11	CANCER 28	CANCER 69	CANCER 342	CANCER 456
3	CONGENITAL ANOMALIES 3	STROKE 1	SUICIDE 1	HEART DISEASE 4	HEART DISEASE 7	UNINTENT. INJURY 14	BRONCHITIS/ EMPHYSEMA/ ASTHMA 15	BRONCHITIS/ EMPHYSEMA/ ASTHMA 106	BRONCHITIS/ EMPHYSEMA/ ASTHMA 130
4	HOMICIDE/ LEGAL 2	HERNIA 1	CANCER 2	CANCER 3	SUICIDE 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 6	UNINTENT. INJURY 12	STROKE 106	STROKE 122
5	SIDS 2	CANCER 1	NON-CANCEROUS TUMOR 1	DIABETES MELLITUS 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	STROKE 5	STROKE 8	INFLUENZA/ PNEUMONIA 87	UNINTENT. INJURY 119
6	OTHER 7	OTHER 2	CONGENITAL ANOMALIES 1	LIVER DISEASE 2	DIABETES MELLITUS 3	HOMICIDE/ LEGAL 5	DIABETES MELLITUS 8	DIABETES MELLITUS 35	INFLUENZA/ PNEUMONIA 93
7			HEART DISEASE 1	CONGENITAL ANOMALIES 1	HOMICIDE/ LEGAL 3	LIVER DISEASE 5	INFLUENZA/ PNEUMONIA 4	UNINTENT. INJURY 35	DIABETES MELLITUS 50
8			INFLUENZA/ PNEUMONIA 1	HIV 1	STROKE 2	SUICIDE 4	SUICIDE 4	KIDNEY DISEASE 29	KIDNEY DISEASE 34
9				OTHER 4	HIV 2	DIABETES MELLITUS 2	ATHERO-SCLEROSIS 3	SEPTICEMIA (BLOOD POISOINING) 25	SEPTICEMIA (BLOOD POISOINING) 30
10					THREE CAUSES TIED 1	THREE CAUSES TIED 2	THREE CAUSES TIED 3	PNEUMONITIS 24	SUICIDE 27

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

July 2005

Injury and Violence

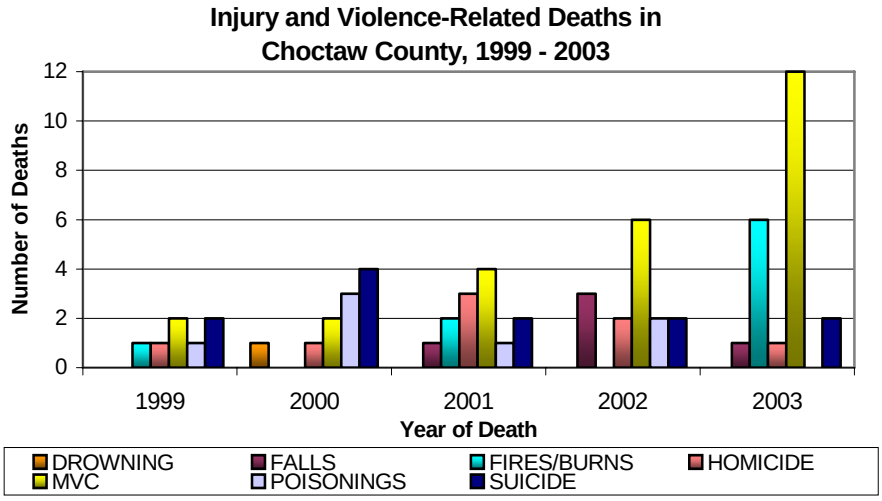
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Choctaw County which has an average of 5.2 motor vehicle-related deaths a year, that translates to almost $6 million a year.

Violence-related injuries (homicide and suicide) in Choctaw County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 33.3% (5,139) of people in Choctaw County use tobacco of some sort. Medical costs accumulated by those persons are almost $17 million a year for Choctaw County.

> *"Medical costs accumulated by those persons are almost **$17 million a year** for Choctaw County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 36.1% (5,571) of people in Choctaw County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 9.3% (1,435) of Choctaw County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $19,003,705.00 in one year for Choctaw County.

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

Teen Pregnancy

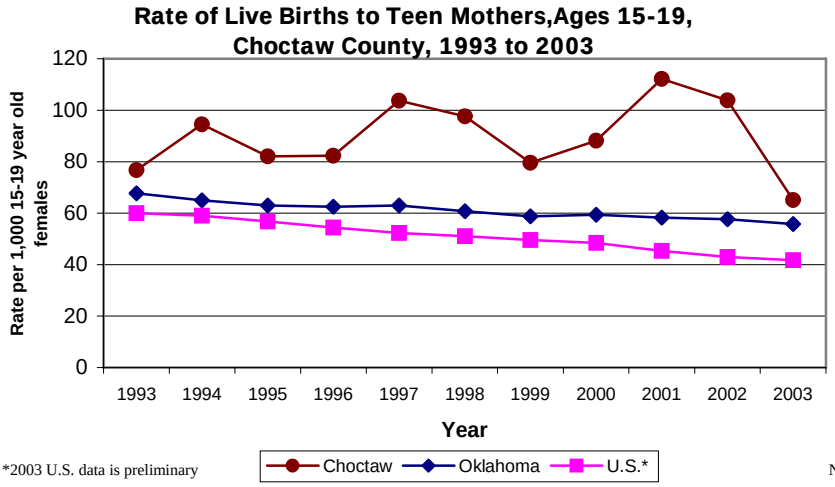
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Choctaw County had a teen birth rate of 65.1 in 2003 accounting for a 15% decrease since 1993 (76.8).

With an average of 48 births per year, teen pregnancy costs the citizens of Choctaw County $153,600.00 a year.



*2003 U.S. data is preliminary

Note: 7 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 24.3% of persons in Choctaw County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Choctaw County is 65% above the state (14.7%) and 96% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Choctaw County, 2000 Census

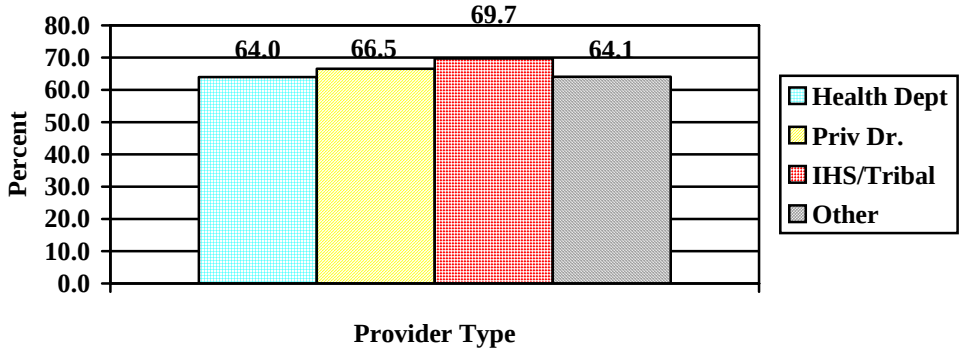
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	15,097	1,398	2,274	2,485	1,888	7,052
Cumulative Population		1,398	3,672	6,157	8,045	15,097
% of Total	100.0%	9.3%	15.1%	16.5%	12.5%	46.7%
Cumulative %		9.3%	24.3%	40.8%	53.3%	100.0%

OK By One - State Immunization Data

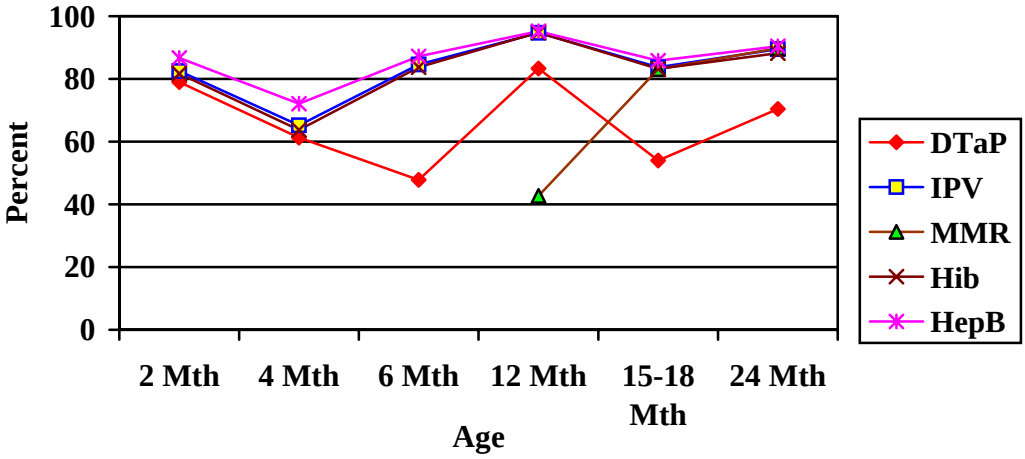
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

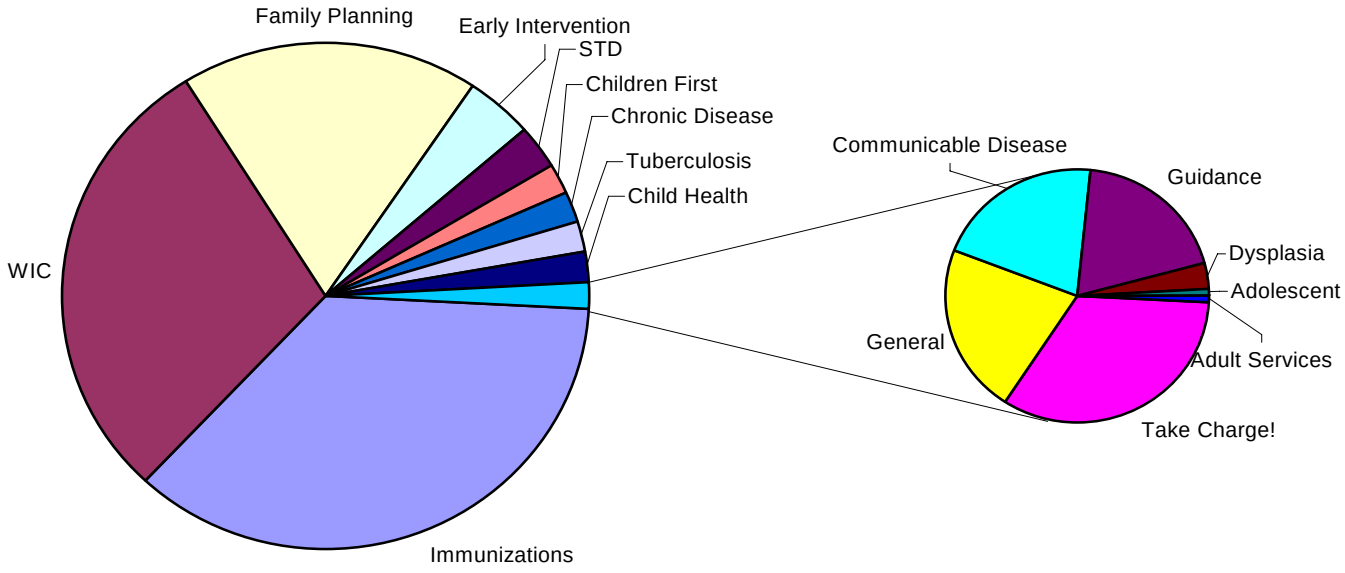


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 70 deaths a year
- $369,476.69 per death
- Total— $25,863,368.30 a year

Obesity

- 19.4% of population (2,994)
- $395.00 in additional medical costs per person
- Total—$1,182,630.00

Motor Vehicle-Related Injury Death

- Average 5.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,824,000.00 a year

Tobacco Use

- 33.3% of population (5,139)
- $3,300.00 in health care costs
- Total—$16,958,700.00 a year

Diabetes

- 9.3% of population (1,435)
- $13,243.00 in healthcare costs a year
- Total—$19,003,705.00 a year

Teen Pregnancy

- Average of 48 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $153,600.00 a year

Grand Total for Choctaw County:

$68,986,003.30

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Choctaw County Health Department
103 S Fourth St
Hugo, OK 74743
580-326-8821

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

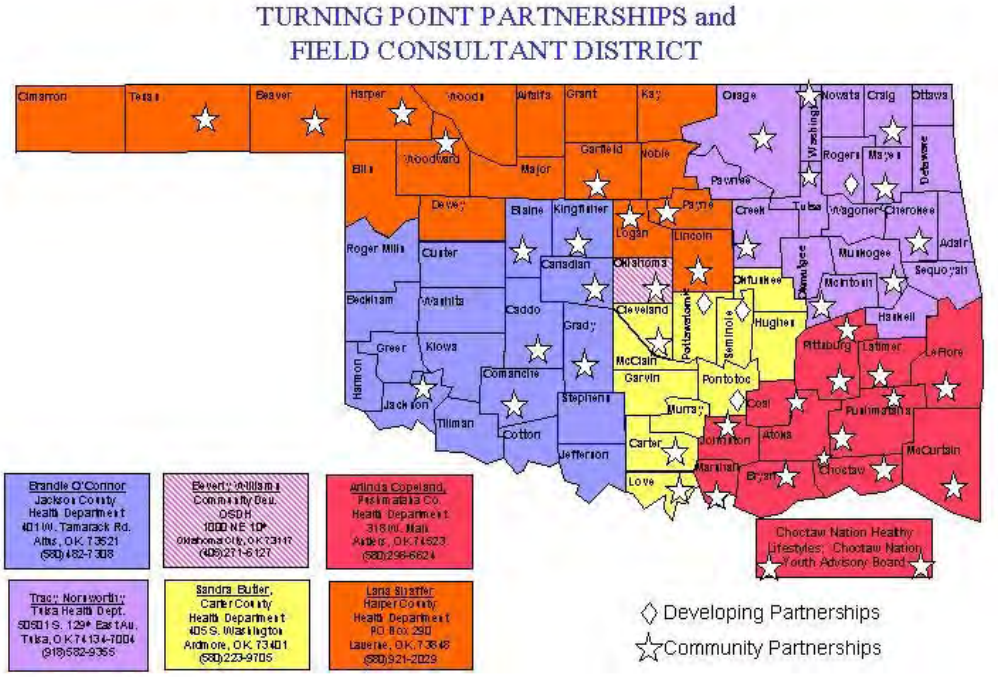
State of the County's Health Report

A Look Back To Move Forward

Cimarron County

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

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



Inside this issue:

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Top 10 Leading Causes of Death	2
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Top 10 Leading Causes of Death Table	3
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Health Care Costs Summary	7
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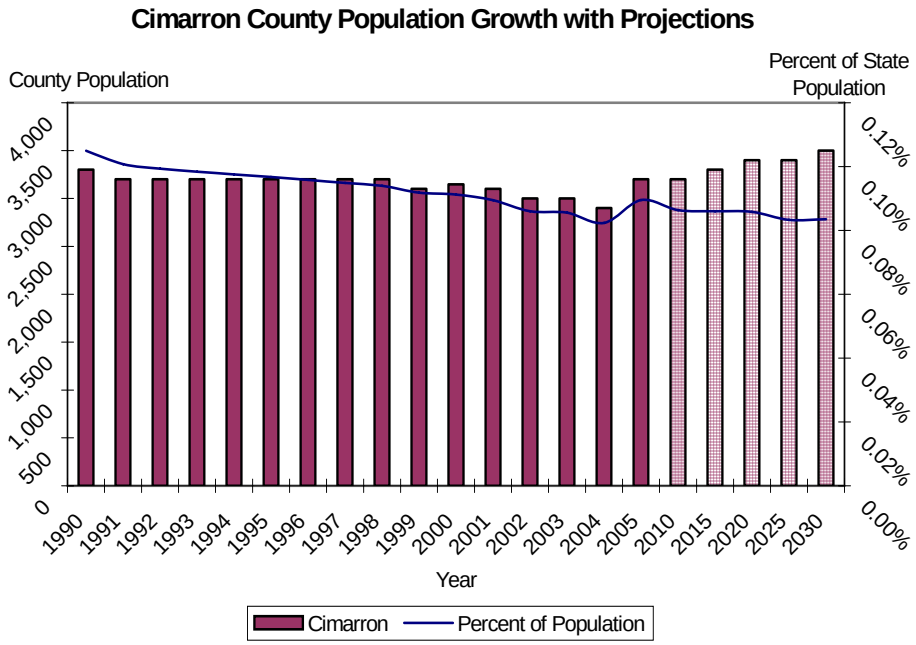
Demographics

** U.S. Census Bureau*

- Population estimates
  - 5% decrease from 1990 to 2000 (3,301 to 3,148)
  - 8% decrease from 2000 to 2004
  - Ranked 76th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 15%
- Race
  - Whites = 86%
  - Native Americans =1%
  - Blacks =1%
  - Other/Multiple = 13%
- Age
  - Under 5 = 7%
  - Over 64 = 19%
  - Median age = 39.3 years
- Housing units
  - Occupied = 1,257 (79%)
  - Vacant = 326 (21%)
- Disability (ages 21 to 64) = 16.5%
  national = 19.2% state = 21.5%
- Individuals below poverty = 17.6%
  national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Cimarron County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 159 people in Cimarron County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 10.4 deaths a year, heart disease accounts for almost $4 million a year in medical costs in Cimarron County.

Heart disease accounts for almost $4 million a year in medical costs in Cimarron County.

Alzheimer's disease and the complications associated with it have increased from the 13th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 800% increase in deaths.

Nutrition and Obesity

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

No Data Available At This Time

Top 10 Causes of Death by Age Group

Cimarron County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 2	UNINTENT. INJURY 2	UNINTENT. INJURY 5	SUICIDE 2	CANCER 3	CANCER 4	CANCER 11	HEART DISEASE 104	HEART DISEASE 114
2	PERINATAL PERIOD 1		SUICIDE 1	UNINTENT. INJURY 2	UNINTENT. INJURY 3	HEART DISEASE 3	HEART DISEASE 4	CANCER 74	CANCER 93
3				HOMICIDE/ LEGAL 1	SUICIDE 2	INFLUENZA/ PNEUMONIA 2	UNINTENT. INJURY 3	STROKE 18	UNINTENT. INJURY 22
4				CANCER 1	STROKE 1	SUICIDE 2	NON-CANCEROUS TUMOR 1	KIDNEY DISEASE 18	STROKE 21
5				OTHER 2	DIABETES MELLITUS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	STROKE 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 17	BRONCHITIS/ EMPHYSEMA/ ASTHMA 18
6					HOMICIDE/ LEGAL 1	STROKE 1	DIABETES MELLITUS 1	INFLUENZA/ PNEUMONIA 16	INFLUENZA/ PNEUMONIA 18
7					OTHER 3	DIABETES MELLITUS 1	LIVER DISEASE 1	DIABETES MELLITUS 10	KIDNEY DISEASE 18
8						NUTRITIONAL DEFICIENCY 1	SUICIDE 1	ALZHEIMER'S DISEASE 9	DIABETES MELLITUS 13
9						OTHER 5	OTHER 3	UNINTENT. INJURY 7	SUICIDE 10
10								AORTIC ANEURYSM 4	ALZHEIMER'S DISEASE 9

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

Injury and Violence

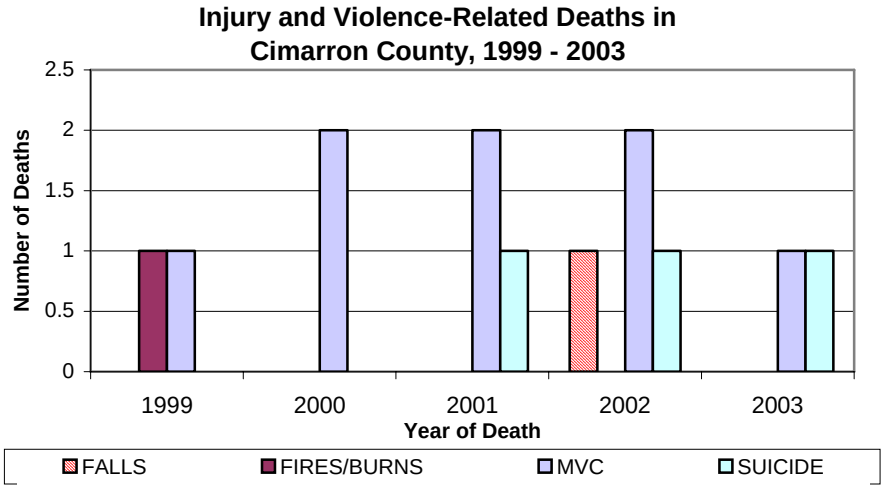
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Cimarron County. Unintentional injuries are the leading cause of death from ages 5 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Cimarron County which has an average of 1.6 motor vehicle-related deaths a year, that translates to almost $2 million a year.

Violence-related injuries (homicide and suicide) in Cimarron County are ranked in the top 10 in fiveof the eight age groups (see Top 10 list on page 3).



*No homicides/legal intervention or poisoning deaths occurred during this time period

Tobacco Use

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

No Data Available At This Time

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & Ameri-

No Data Available At This Time

Teen Pregnancy

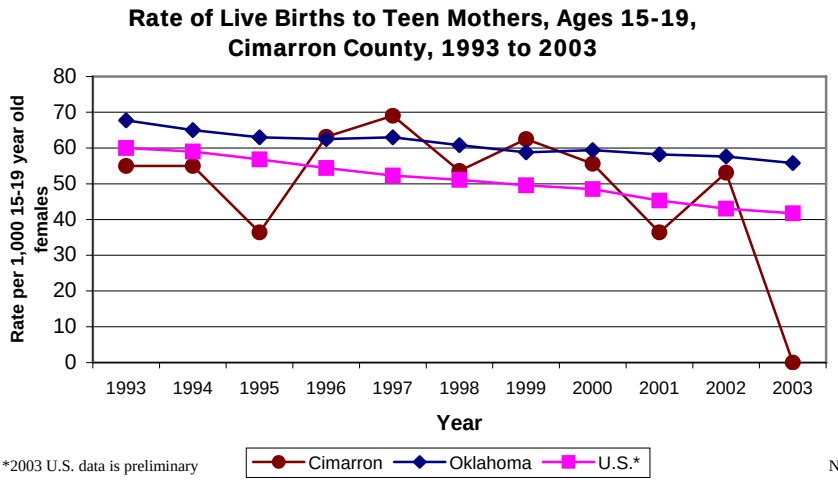
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Cimarron County had a teen birth rate of . in 2003 which was a #VALUE! increase from 2002 (53.1) and a #VALUE! increase since 1993 (55).

With an average of 6 births per year, teen pregnancy costs the citizens of Cimarron County $19,200.00 a year.



*2003 U.S. data is preliminary

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

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 17.6% of persons in Cimarron County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Cimarron County is 20% above the state (14.7%) and 42% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Cimarron County, 2000 Census

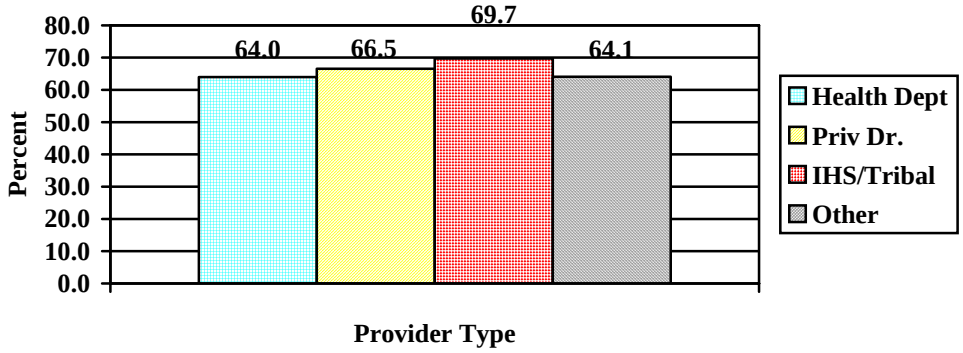
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	3,103	217	328	382	393	1,783
Cumulative Population		217	545	927	1,320	3,103
% of Total	100.0%	7.0%	10.6%	12.3%	12.7%	57.5%
Cumulative %		7.0%	17.6%	29.9%	42.5%	100.0%

OK By One - State Immunization Data

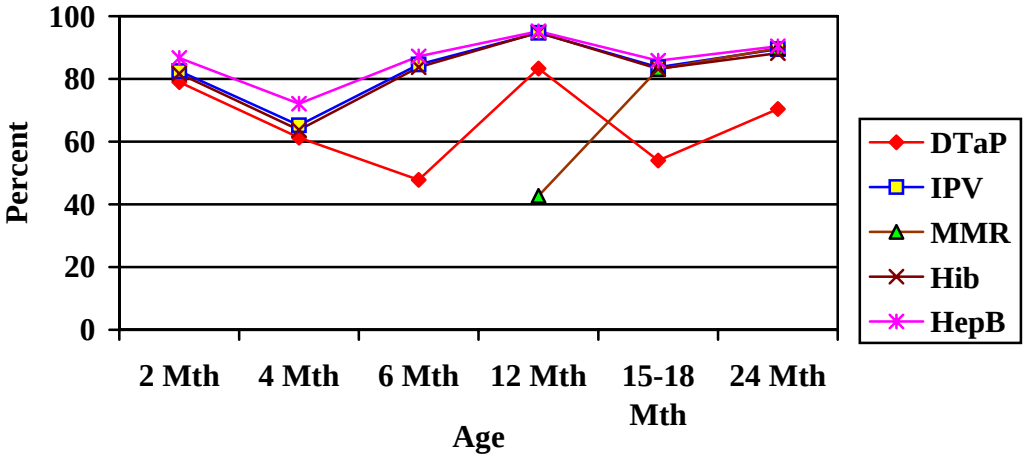
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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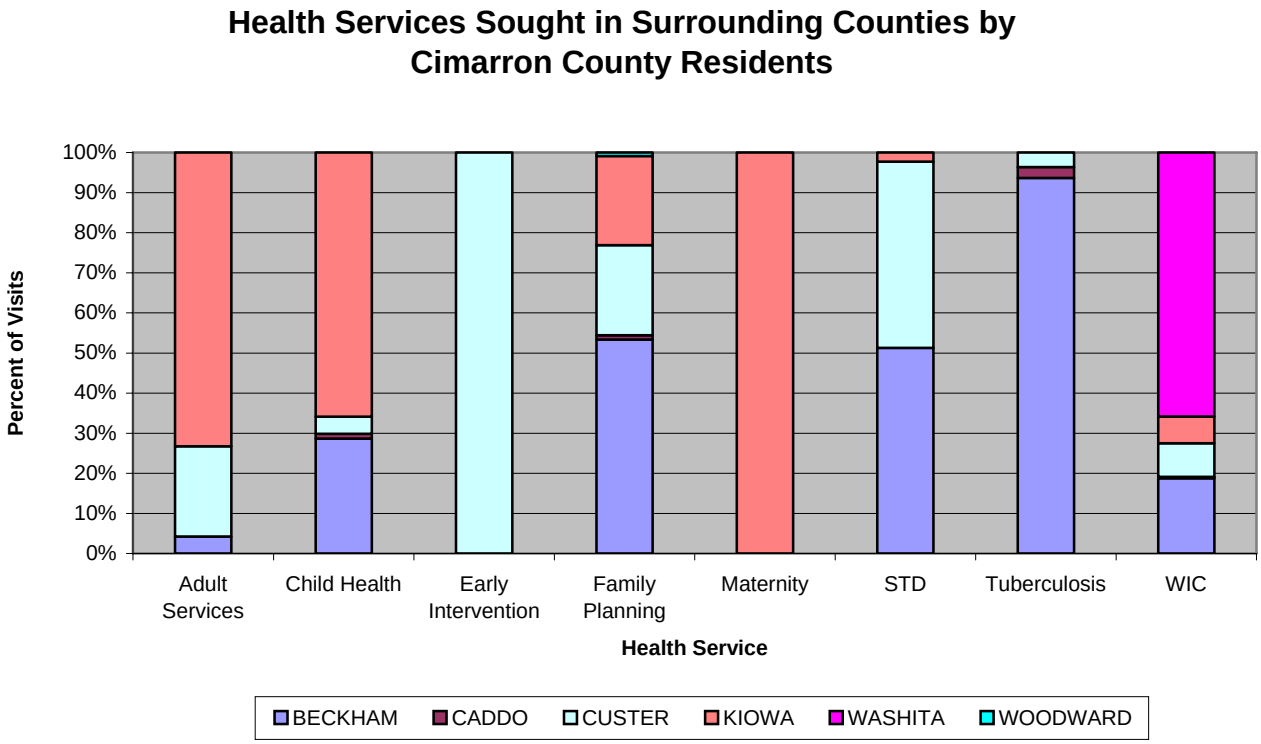

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 10 deaths a year
- $369,476.69 per death
- Total— $3,694,766.90 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 1.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$1,792,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 6 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $19,200.00 a year

Grand Total for Cimarron County:

$5,505,966.90

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Looking Back to Move Forward

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

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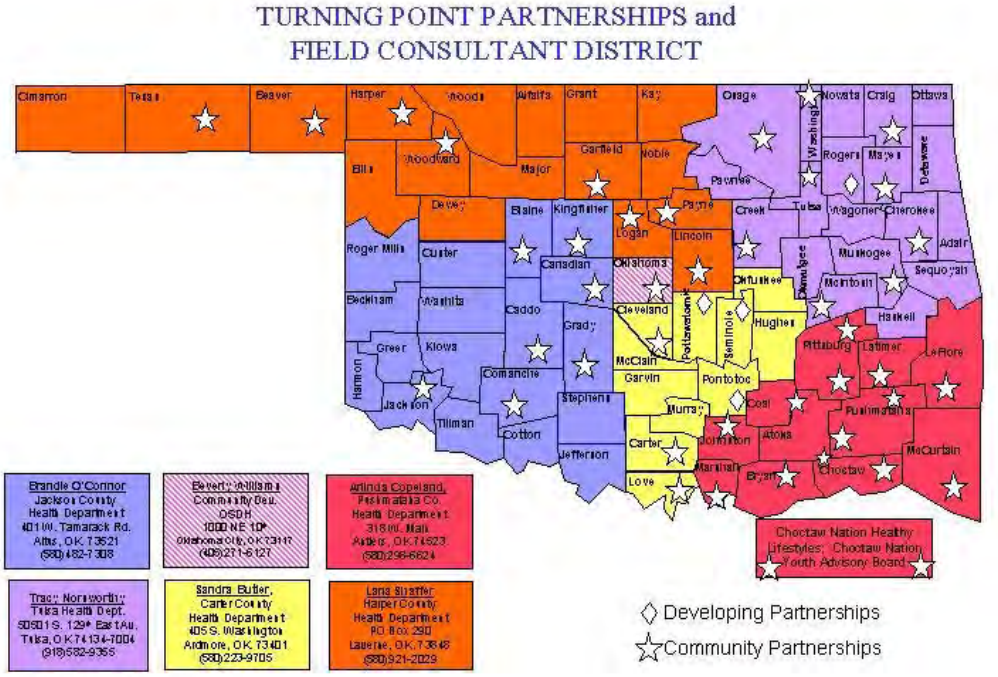

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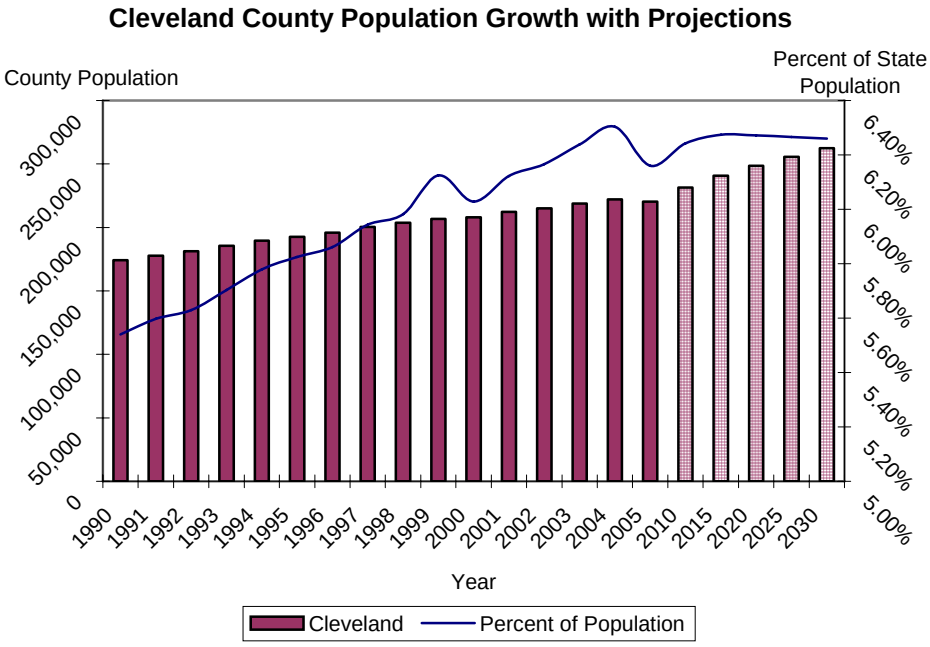
Demographics

- Population estimates
  - 19% increase from 1990 to 2000 (174,253 to 208,016)
  - 7% increase from 2000 to 2004
  - Ranked 5th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 84%
  - Native Americans =4%
  - Blacks =4%
  - Other/Multiple = 8%
- Age
  - Under 5 = 6%
  - Over 64 = 8%
  - Median age = 32.2 years
- Housing units
  - Occupied = 79,186 (93%)
  - Vacant = 5,658 (7%)
- Disability (ages 21 to 64) = 16.2% national = 19.2% state = 21.5%
- Individuals below poverty = 10.6% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Cleveland County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 3,011 people in Cleveland County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 350.7 deaths a year, heart disease accounts for almost $130 million a year in medical costs in Cleveland County.

Heart disease accounts for almost $130 million a year in medical costs in ClevelandCounty.

Alzheimer's disease and the complications associated with it have increased from the 9th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 105% increase in deaths.

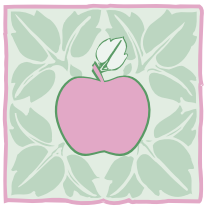
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 20% (43,993) of people in Cleveland County were considered obese which accounted for an additional $17,377,235 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Cleveland County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 62	UNINTENT. INJURY 24	UNINTENT. INJURY 106	UNINTENT. INJURY 75	CANCER 134	CANCER 360	CANCER 554	HEART DISEASE 3017	HEART DISEASE 3859
2	CONGENITAL ANOMALIES 36	HOMICIDE/ LEGAL 8	SUICIDE 50	SUICIDE 54	UNINTENT. INJURY 97	HEART DISEASE 255	HEART DISEASE 463	CANCER 1735	CANCER 2857
3	UNINTENT. INJURY 23	CANCER 8	HOMICIDE/ LEGAL 16	CANCER 45	HEART DISEASE 85	UNINTENT. INJURY 75	BRONCHITIS/ EMPHYSEMA/ ASTHMA 97	STROKE 767	STROKE 902
4	SIDS 15	SUICIDE 5	CANCER 12	HEART DISEASE 21	SUICIDE 56	STROKE 50	STROKE 65	BRONCHITIS/ EMPHYSEMA/ ASTHMA 535	BRONCHITIS/ EMPHYSEMA/ ASTHMA 660
5	CANCER 8	CONGENITAL ANOMALIES 4	HEART DISEASE 8	HIV 21	HIV 30	SUICIDE 40	DIABETES MELLITUS 52	INFLUENZA/ PNEUMONIA 344	UNINTENT. INJURY 622
6	HOMICIDE/ LEGAL 7	HEART DISEASE 3	CONGENITAL ANOMALIES 3	HOMICIDE/ LEGAL 13	LIVER DISEASE 19	LIVER DISEASE 33	UNINTENT. INJURY 45	DIABETES MELLITUS 222	INFLUENZA/ PNEUMONIA 390
7	HEART DISEASE 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	STROKE 2	STROKE 4	HOMICIDE/ LEGAL 14	DIABETES MELLITUS 29	LIVER DISEASE 22	UNINTENT. INJURY 177	DIABETES MELLITUS 318
8	INFLUENZA/ PNEUMONIA 6	SEPTICEMIA (BLOOD POISONING) 2	INFLUENZA/ PNEUMONIA 2	DIABETES MELLITUS 3	DIABETES MELLITUS 12	BRONCHITIS/ EMPHYSEMA/ ASTHMA 20	INFLUENZA/ PNEUMONIA 18	ALZHEIMER'S DISEASE 127	SUICIDE 244
9	STROKE 4	NON-CANCEROUS TUMOR 1	ANEMIA 1	COMPLICATED PREGNANCY 2	STROKE 9	SEPTICEMIA (BLOOD POISONING) 17	SUICIDE 16	KIDNEY DISEASE 125	KIDNEY DISEASE 143
10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	FOUR CAUSES TIED 1	FOUR CAUSES TIED 1	THREE CAUSES TIED 2	INFLUENZA/ PNEUMONIA 6	TWO CAUSES TIED 13	SEPTICEMIA (BLOOD POISONING) 11	PNEUMONITIS 106	ALZHEIMER'S DISEASE 130

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health

Injury and Violence

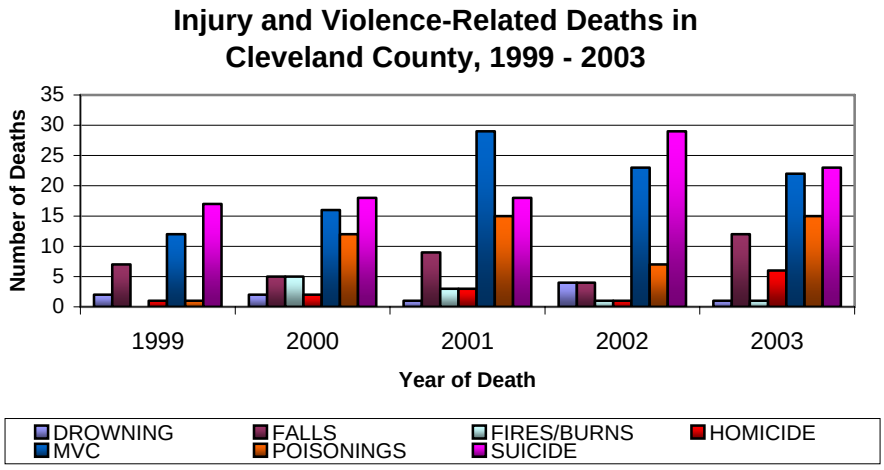
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Cleveland County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Cleveland County which has an average of 20.4 motor vehicle-related deaths a year, that translates to almost $23 million a year.

Violence-related injuries (homicide and suicide) in Cleveland County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 25.5% (56,091) of people in Cleveland County use tobacco of some sort. Medical costs accumulated by those persons are over $185 million a year for Cleveland County.

> *"Medical costs accumulated by those persons are over **$185 million a year** for Cleveland County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 25% (54,992) of people in Cleveland County had no leisure activity in the past month at the time they were surveyed.

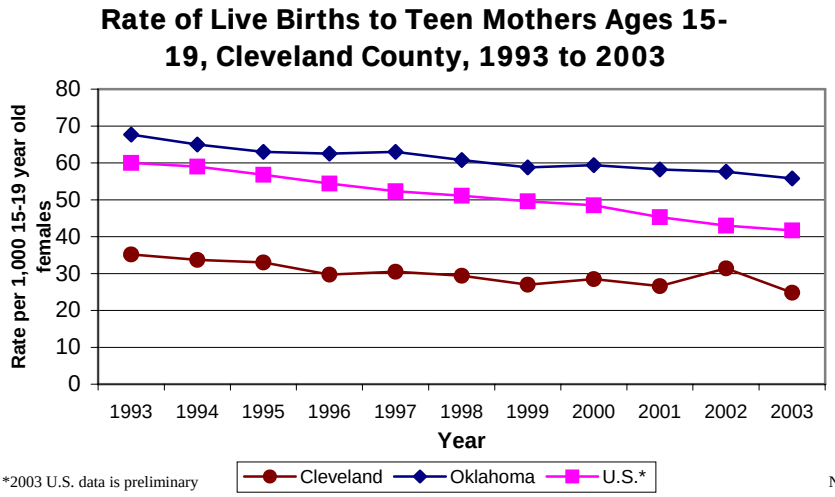
The BRFSS also indicated that 4.8% (10,558) of Cleveland County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $139,819,594.00 in one year for Cleveland County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 33 births to a mother 10-14 years of age occurred during the 11 year period.

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

According to Oklahoma Vital Statistics, Cleveland County had a teen birth rate of 24.8 in 2003 which was a 21% decrease from 2002 (31.4) and a 30% decrease since 1993 (35.2).

With an average of 249 births per year, teen pregnancy costs the citizens of Cleveland County $796,800.00 a year.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 10.6% of persons in Cleveland County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Cleveland County is 28% below the state (14.7%) and 15% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Cleveland County, 2000 Census

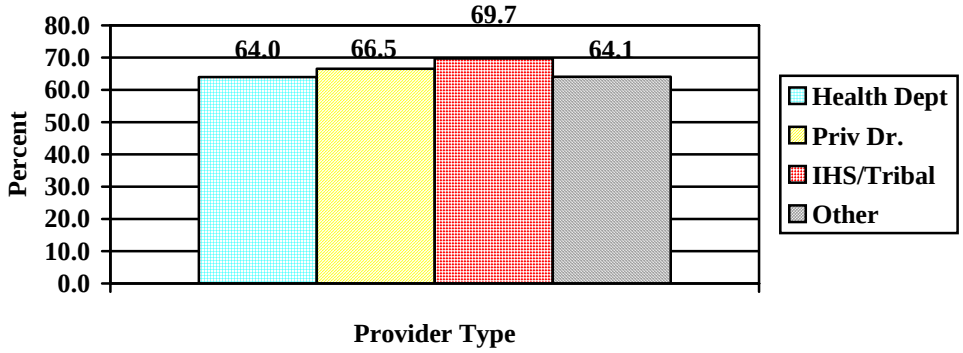
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	198,291	9,477	11,500	14,406	17,217	145,691
Cumulative Population		9,477	20,977	35,383	52,600	198,291
% of Total	100.0%	4.8%	5.8%	7.3%	8.7%	73.5%
Cumulative %		4.8%	10.6%	17.8%	26.5%	100.0%

OK By One - State Immunization Data

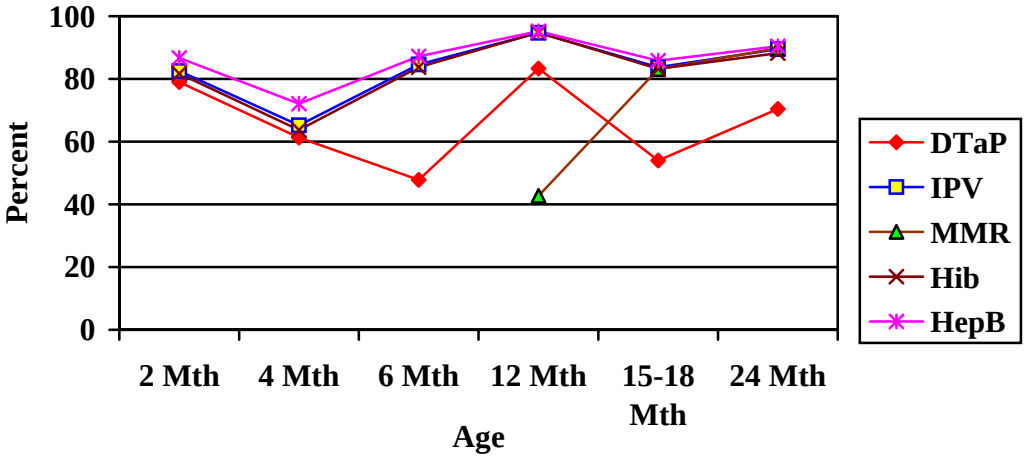
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

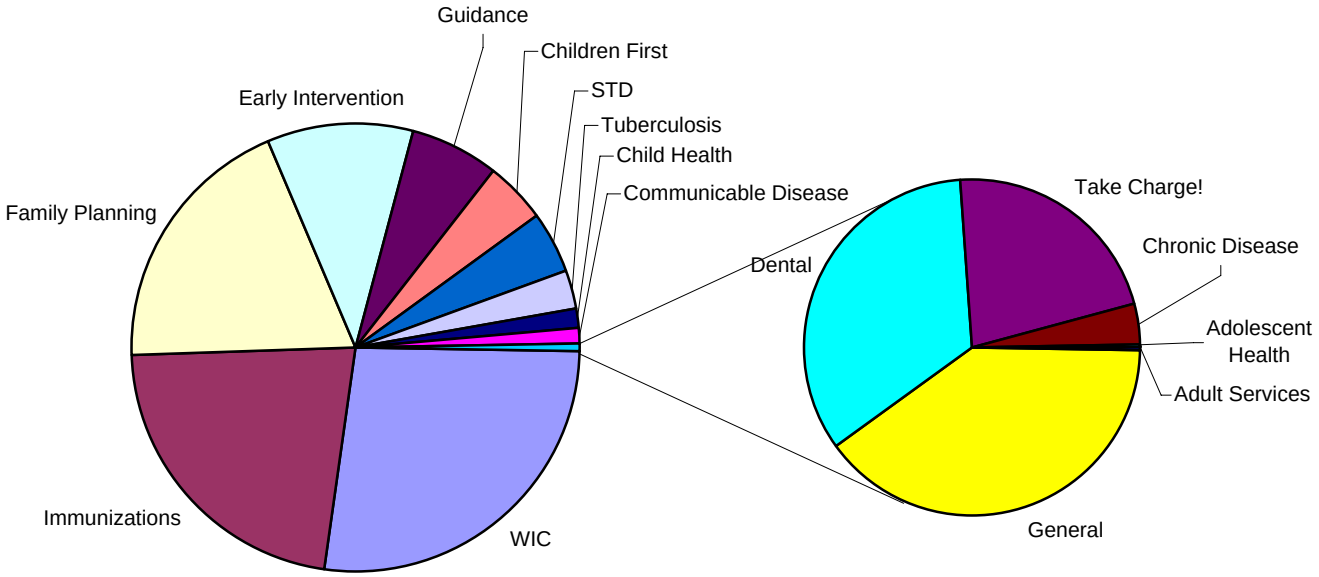


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 351 deaths a year
- $369,476.69 per death
- Total— $129,686,318.19 a year

Obesity

- 20% of population (43,993)
- $395.00 in additional medical costs per person
- Total—$17,377,235.00

Motor Vehicle-Related Injury Death

- Average 20.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$22,848,000.00 a year

Tobacco Use

- 25.5% of population (56,091)
- $3,300.00 in health care costs
- Total—$185,100,300.00 a year

Diabetes

- 4.8% of population (10,558)
- $13,243.00 in healthcare costs a year
- Total—$139,819,594.00 a year

Teen Pregnancy

- Average of 249 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $796,800.00 a year

Grand Total for Cleveland County:

$495,628,247.19

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Cleveland County Health Department
250 12th Ave NE
Norman, OK 73071
405-321-4048

224 South Chestnut
Moore, OK 73160
405-794-1591

Looking Back to Move Forward

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

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

Cleveland County Turning Point

Thank you to all the people of Cleveland County Turning Point who have made It such a success.

- Allan Grubb- Board of Health
- City of Norman
- Cleveland County Health Department
- Cleveland County YMCA
- Health for Friends
- Marge Greer- Community Volunteer
- Moore School System
- NAIC
- Noble Police Department
- Noble PTA
- Norman Chamber of Commerce
- Norman City Attorney's Office
- Norman Parks and Recreation Department
- Norman Pediatric Associates
- Norman Public Schools
- Norman Regional Hospital
- Norman Regional Hospital Auxiliary
- Norman Regional Hospital Foundation
- Success By Six
- Transcript
- United Way of Norman
- University of Oklahoma
- Work Force Oklahoma

OKLAHOMA STATE DEPARTMENT OF HEALTH

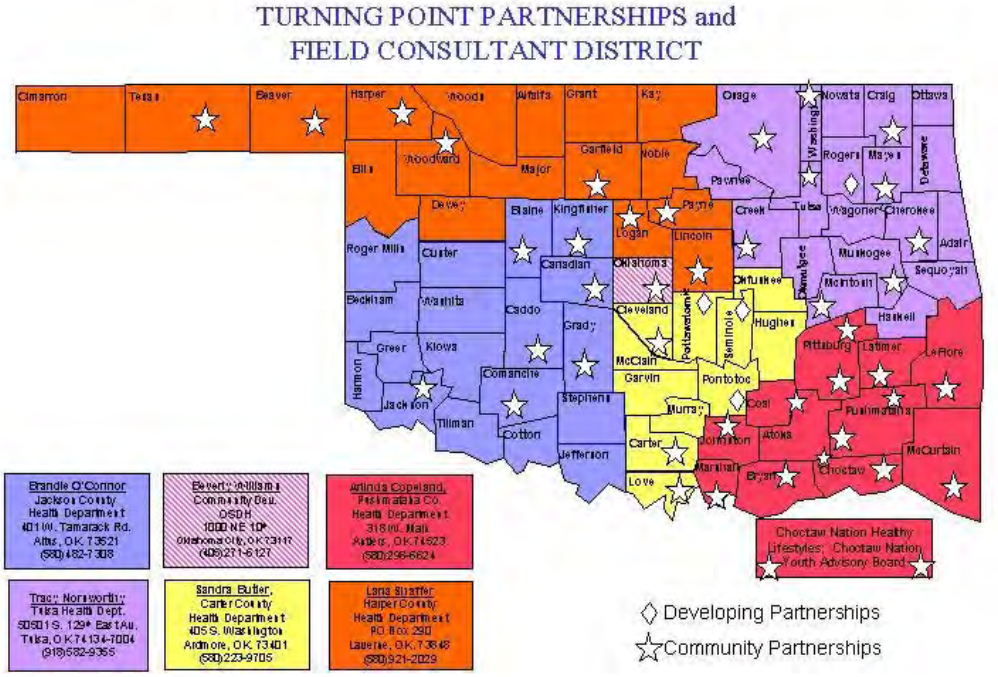
State of the County's Health Report

A Look Back To Move Forward

Coal County

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

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



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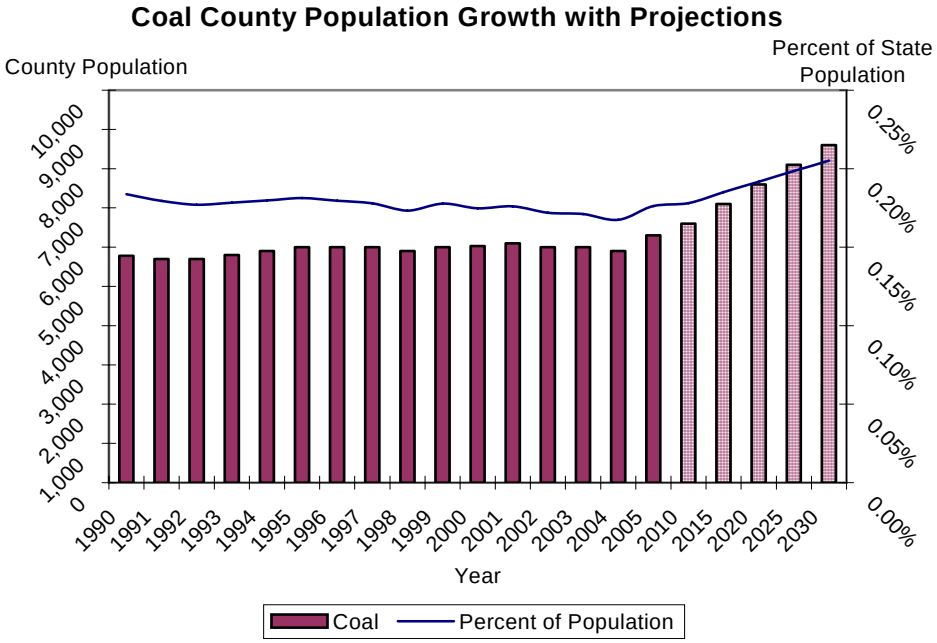
Demographics

** U.S. Census Bureau*

- Population estimates
  - 4% increase from 1990 to 2000 (5,780 to 6,031)
  - 2% decrease from 2000 to 2004
  - Ranked 57th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 75%
  - Native Americans =17%
  - Blacks =0%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 18%
  - Median age = 38.1 years
- Housing units
  - Occupied = 2,373 (86%)
  - Vacant = 371 (14%)
- Disability (ages 21 to 64) = 29.1% national = 19.2% state = 21.5%
- Individuals below poverty = 23.1% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Coal County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 367 people in Coal County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 37.5 deaths a year, heart disease accounts for almost $14 million a year in medical costs in Coal County.

Heart disease accounts for almost $14 million a year in medical costs in Coal County.

Alzheimer's disease and the complications associated with it have increased from the 16th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 100% increase in deaths.

Nutrition and Obesity

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

Data Not Available At This Time

Top 10 Causes of Death by Age Group

Coal County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 4	CANCER 1	UNINTENT. INJURY 5	UNINTENT. INJURY 7	UNINTENT. INJURY 11	HEART DISEASE 24	HEART DISEASE 41	HEART DISEASE 338	HEART DISEASE 413
2	PERINATAL PERIOD 3	UNINTENT. INJURY 1	HOMICIDE/ LEGAL 2	CANCER 2	HEART DISEASE 6	CANCER 12	CANCER 37	CANCER 128	CANCER 186
3	UNINTENT. INJURY 3		HEART DISEASE 1	SUICIDE 2	CANCER 5	LIVER DISEASE 4	UNINTENT. INJURY 6	STROKE 31	UNINTENT. INJURY 47
4	HEART DISEASE 2			HEART DISEASE 1	STROKE 2	STROKE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 20	STROKE 36
5	OTHER 2			HOMICIDE/ LEGAL 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	SUICIDE 2	SUICIDE 3	INFLUENZA/ PNEUMONIA 18	BRONCHITIS/ EMPHYSEMA/ ASTHMA 25
6				PNEUMONITIS 1	HOMICIDE/ LEGAL 1	UNINTENT. INJURY 2	NON-CANCEROUS TUMOR 2	KIDNEY DISEASE 18	INFLUENZA/ PNEUMONIA 19
7				OTHER 1	INFLUENZA/ PNEUMONIA 1	DIABETES MELLITUS 1	DIABETES MELLITUS 2	HYPERTENSION 17	KIDNEY DISEASE 19
8					SUICIDE 1	HOMICIDE/ LEGAL 1	FIVE CAUSES TIED 1	UNINTENT. INJURY 12	HYPERTENSION 17
9					OTHER 1	OTHER 4		DIABETES MELLITUS 11	DIABETES MELLITUS 14
10								SEPTICEMIA (BLOOD POISONING) 5	SUICIDE 9

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

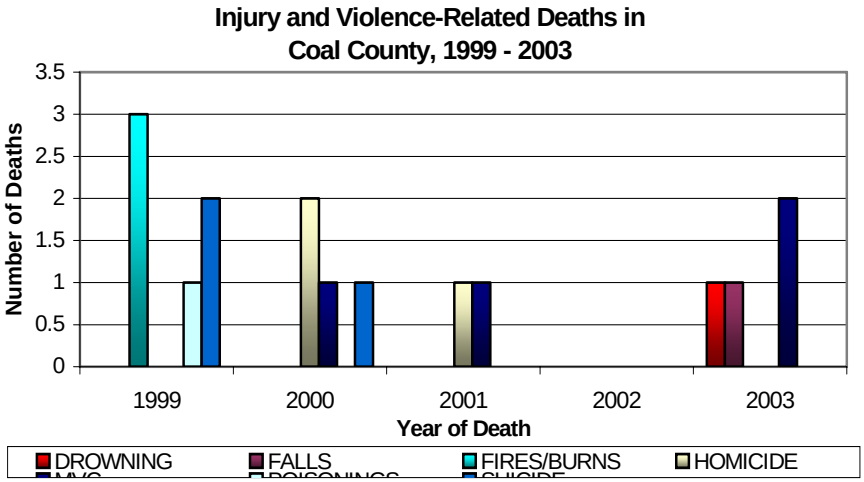
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Coal County. Unintentional injuries are the leading cause of death from ages 15 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Coal County which has an average of 0.8 motor vehicle-related deaths a year, that translates to almost $1 million a year.

Violence-related injuries (homicide and suicide) in Coal County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

Data Not Available At This Time

Physical Activity, Wellness and Diabetes

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

Data Not Available At This Time

Teen Pregnancy

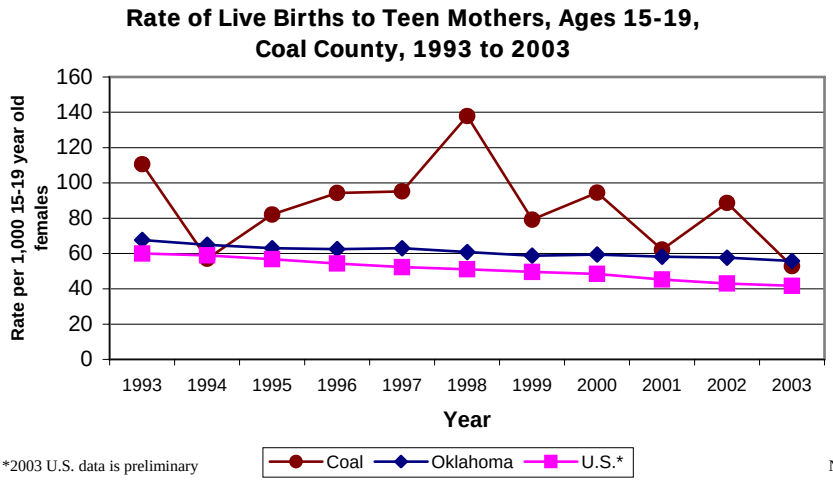
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Coal County had a teen birth rate of 52.9 in 2003 which was a 40% decrease from 2002 (88.7) and a 52% decrease since 1993 (110.6).

With an average of 18 births per year, teen pregnancy costs the citizens of Coal County $57,600.00 a year.



*2003 U.S. data is preliminary

Note: 2 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 23.1% of persons in Coal County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Coal County is 57% above the state (14.7%) and 86% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Coal County, 2000 Census

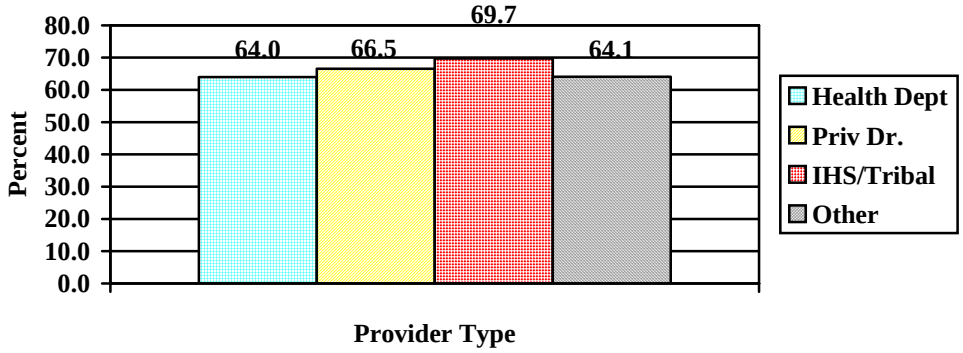
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	5,924	488	878	895	862	2,801
Cumulative Population		488	1,366	2,261	3,123	5,924
% of Total	100.0%	8.2%	14.8%	15.1%	14.6%	47.3%
Cumulative %		8.2%	23.1%	38.2%	52.7%	100.0%

OK By One - State Immunization Data

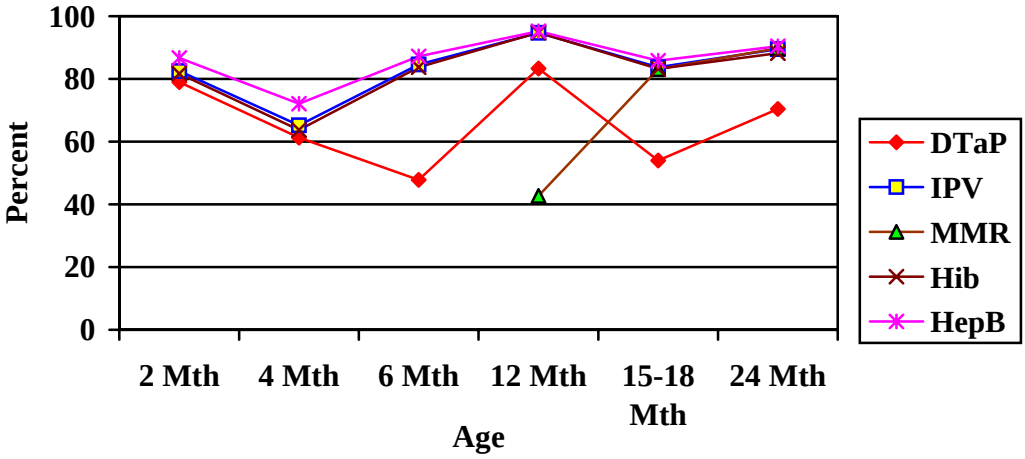
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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

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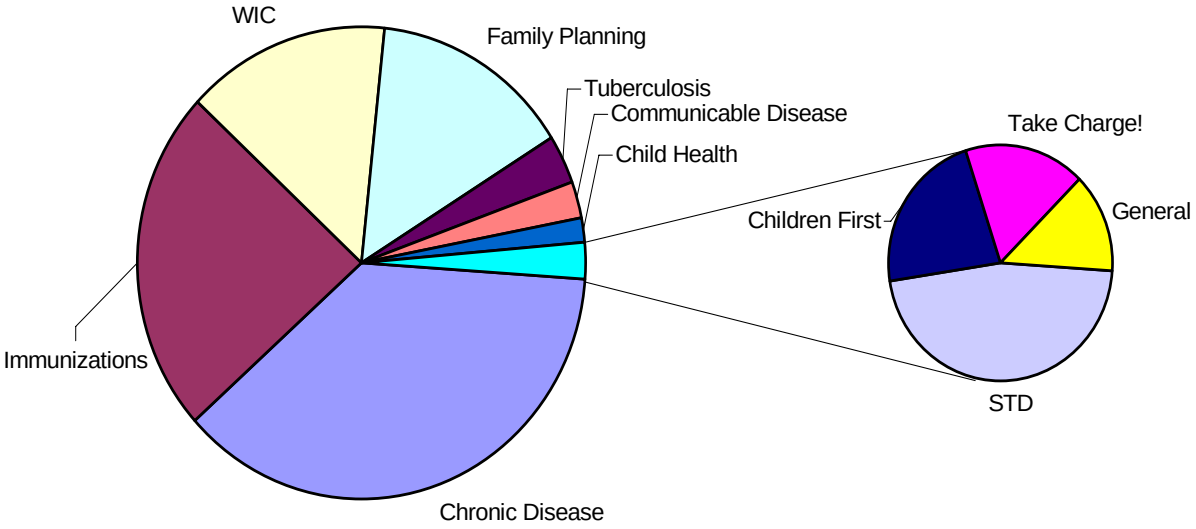
Attended Appointments for Coal County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 38 deaths a year
- $369,476.69 per death
- Total— $14,040,114.22 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 0.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$896,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 18 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $57,600.00 a year

Grand Total for Coal County:

$14,993,714.22

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Coal County Health Department
1404 South Highway 75
PO Box 365
Coalgate, OK 74538-0365
580-927-2367

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
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Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

Comanche County

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

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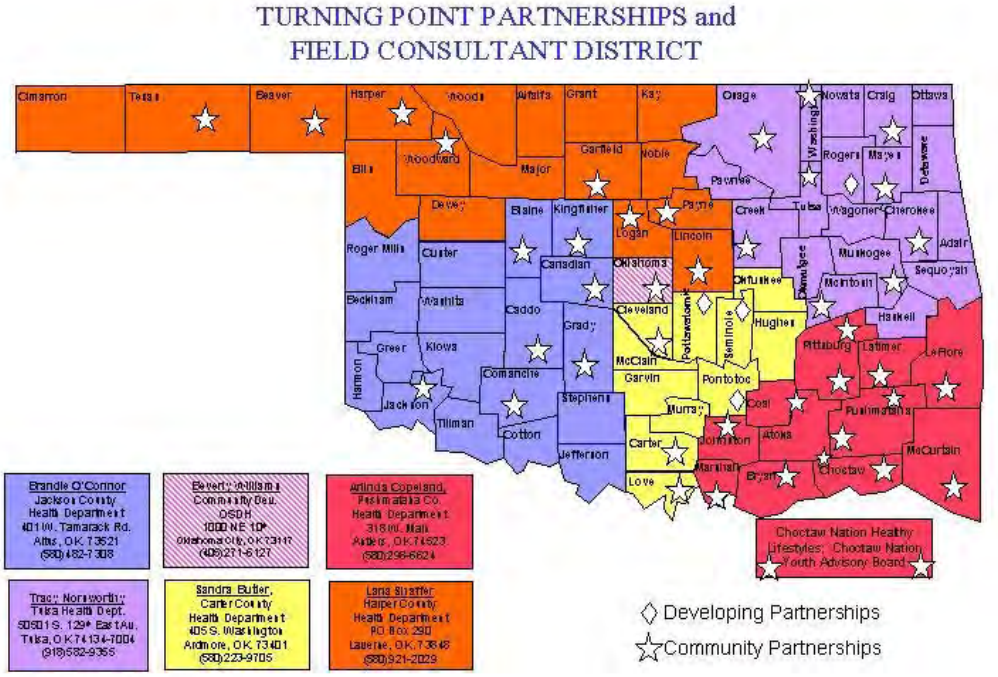

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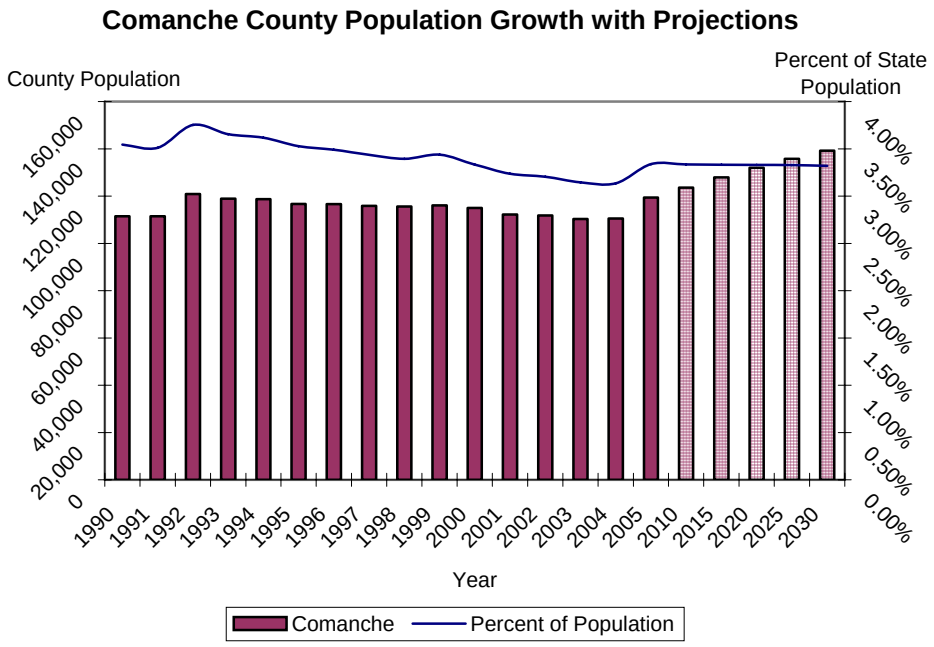
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% increase from 1990 to 2000 (111,486 to 114,996)
  - 4% decrease from 2000 to 2004
  - Ranked 65th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 8%
- Race
  - Whites = 65%
  - Native Americans =5%
  - Blacks =19%
  - Other/Multiple = 11%
- Age
  - Under 5 = 8%
  - Over 64 = 10%
  - Median age = 30.1 years
- Housing units
  - Occupied = 39,808 (88%)
  - Vacant = 5,608 (12%)
- Disability (ages 21 to 64) = 19.9% national = 19.2% state = 21.5%
- Individuals below poverty = 15.6% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Comanche County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,592 people in Comanche County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 250.0 deaths a year, heart disease accounts for over $92 million a year in medical costs in Comanche County.

Heart disease accounts for over $92 million a year in medical costs in Comanche County.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 84% increase in deaths.

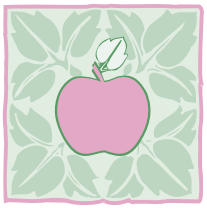
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 25.2% (28,700) of people in Comanche County were considered obese which accounted for an additional $11,336,500 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Comanche County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 87	UNINTENT. INJURY 19	UNINTENT. INJURY 71	UNINTENT. INJURY 44	CANCER 70	CANCER 184	CANCER 375	HEART DISEASE 2148	HEART DISEASE 2750
2	CONGENITAL ANOMALIES 35	CANCER 4	SUICIDE 43	SUICIDE 38	HEART DISEASE 58	HEART DISEASE 178	HEART DISEASE 335	CANCER 1425	CANCER 2088
3	UNINTENT. INJURY 20	HEART DISEASE 3	HOMICIDE/ LEGAL 32	HOMICIDE/ LEGAL 17	UNINTENT. INJURY 43	UNINTENT. INJURY 44	BRONCHITIS/ EMPHYSEMA/ ASTHMA 66	STROKE 597	STROKE 704
4	SIDS 13	HOMICIDE/ LEGAL 3	CANCER 11	HIV 16	SUICIDE 34	STROKE 32	STROKE 54	BRONCHITIS/ EMPHYSEMA/ ASTHMA 430	BRONCHITIS/ EMPHYSEMA/ ASTHMA 531
5	HEART DISEASE 5	SUICIDE 3	HEART DISEASE 9	CANCER 15	HIV 26	BRONCHITIS/ EMPHYSEMA/ ASTHMA 25	LIVER DISEASE 34	INFLUENZA/ PNEUMONIA 272	UNINTENT. INJURY 373
6	CANCER 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	CONGENITAL ANOMALIES 3	HEART DISEASE 14	HOMICIDE/ LEGAL 22	LIVER DISEASE 23	DIABETES MELLITUS 33	DIABETES MELLITUS 170	INFLUENZA/ PNEUMONIA 306
7	HOMICIDE/ LEGAL 3	CONGENITAL ANOMALIES 2	HIV 2	DIABETES MELLITUS 4	LIVER DISEASE 17	DIABETES MELLITUS 22	UNINTENT. INJURY 22	UNINTENT. INJURY 110	DIABETES MELLITUS 239
8	INFLUENZA/ PNEUMONIA 3	OTHER 6	INFLUENZA/ PNEUMONIA 2	LIVER DISEASE 4	STROKE 16	SUICIDE 22	KIDNEY DISEASE 17	KIDNEY DISEASE 108	SUICIDE 180
9	THREE CAUSES TIED 2		FIVE CAUSES TIED 1	STROKE 4	DIABETES MELLITUS 9	HOMICIDE/ LEGAL 11	SEPTICEMIA (BLOOD POISONING) 15	ALZHEIMER'S DISEASE 90	KIDNEY DISEASE 135
10				NON-CANCEROUS TUMOR 3	INFLUENZA/ PNEUMONIA 8	HIV 9	SUICIDE 15	SEPTICEMIA (BLOOD POISONING) 82	LIVER DISEASE 127

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

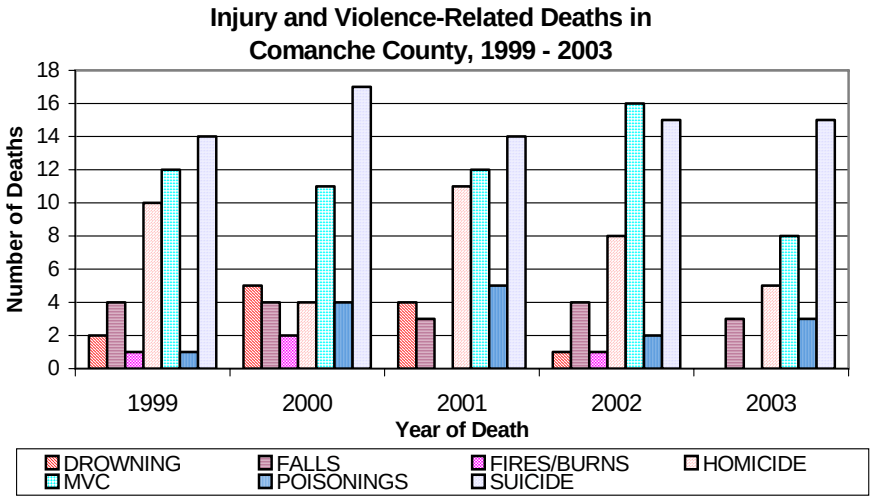
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Comanche County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Comanche County which has an average of 11.8 motor vehicle-related deaths a year, that translates to over $13 million a year.

Violence-related injuries (homicide and suicide) in Comanche County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 29.1% (33,142) of people in Comanche County use tobacco of some sort. Medical costs accumulated by those persons are over $109 million a year for Comanche County.

> *"Medical costs accumulated by those persons are over **$109 million a year** for Comanche County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 29.4% (33,484) of people in Comanche County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.5% (8,542) of Comanche County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $113,121,706.00 in one year for Comanche County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

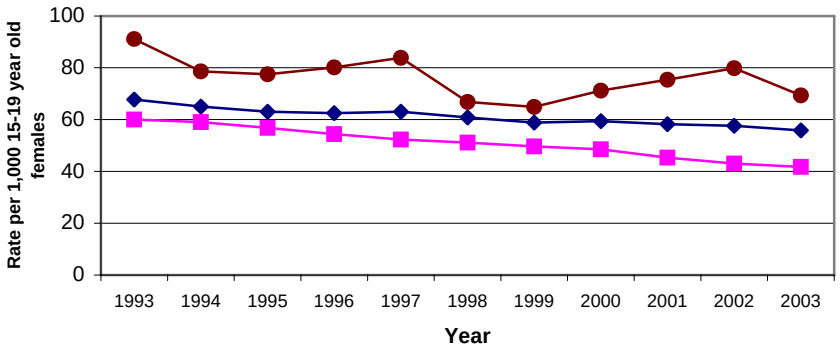
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Comanche County had a teen birth rate of 69.3 in 2003 which was a 13% decrease from 2002 (79.8) but a 24% decrease since 1993 (91.1).

With an average of 324 births per year, teen pregnancy costs the citizens of Comanche County $1,036,800.00 a year.

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



*2003 U.S. data is preliminary

Comanche — Oklahoma — U.S.*

Note: 56 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 15.6% of persons in Comanche County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Comanche County is 6% above the state (14.7%) and 26% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Comanche County, 2000 Census

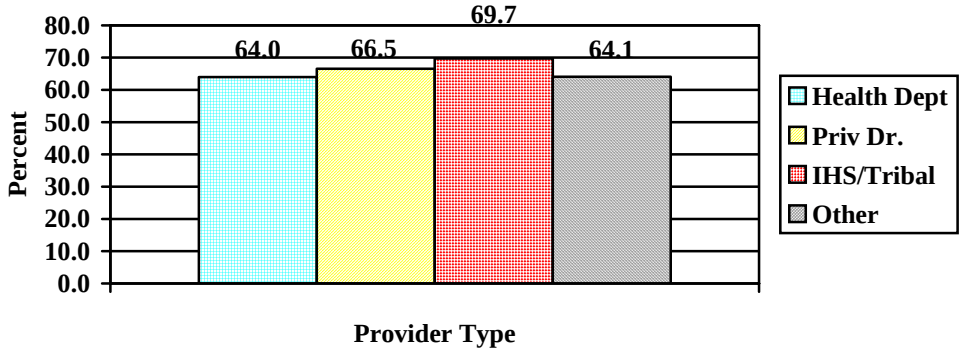
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	104,345	7,217	9,059	12,355	12,620	63,094
Cumulative Population		7,217	16,276	28,631	41,251	104,345
% of Total	100.0%	6.9%	8.7%	11.8%	12.1%	60.5%
Cumulative %		6.9%	15.6%	27.4%	39.5%	100.0%

OK By One - State Immunization Data

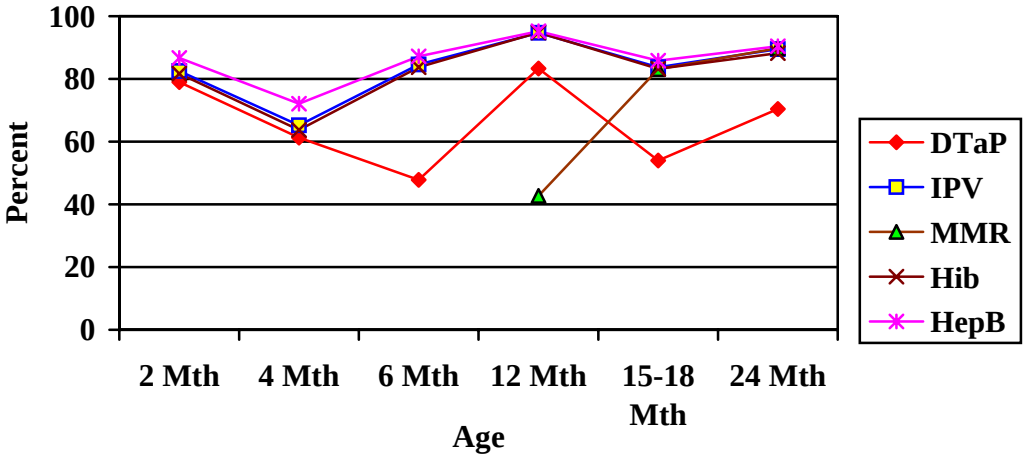
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

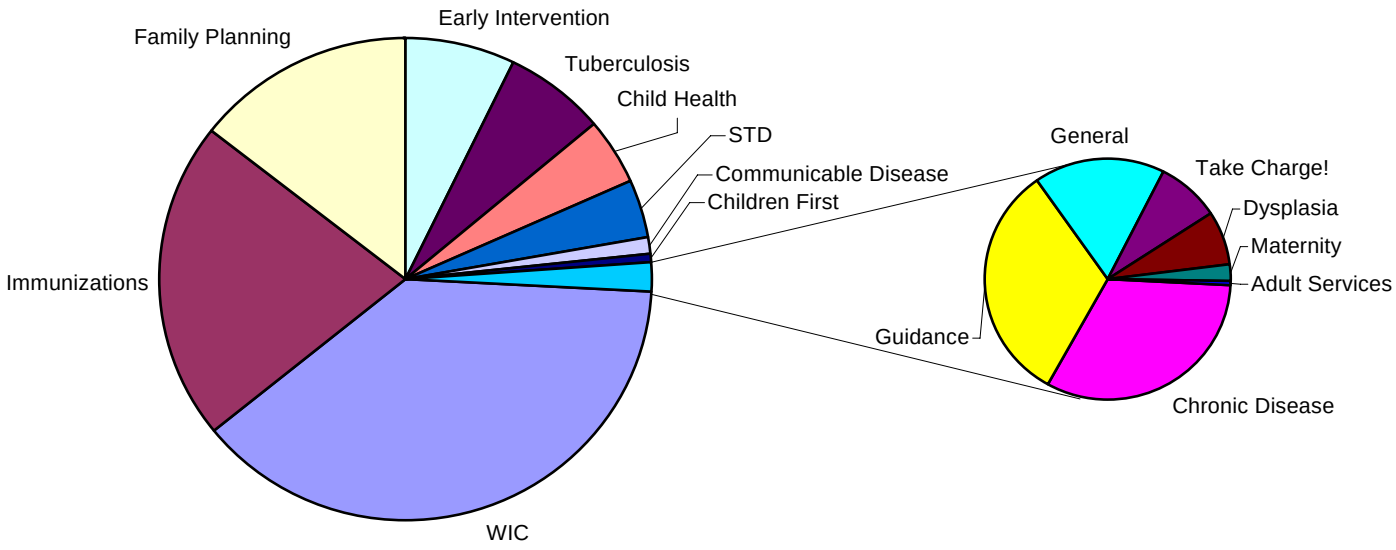


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 250 deaths a year
- $369,476.69 per death
- Total— $92,369,172.50 a year

Obesity

- 25.2% of population (28,700)
- $395.00 in additional medical costs per person
- Total—$11,336,500.00

Motor Vehicle-Related Injury Death

- Average 11.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$13,216,000.00 a year

Tobacco Use

- 29.1% of population (33,142)
- $3,300.00 in health care costs
- Total—$109,368,600.00 a year

Diabetes

- 7.5% of population (8,542)
- $13,243.00 in healthcare costs a year
- Total—$113,121,706.00 a year

Teen Pregnancy

- Average of 324 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $1,036,800.00 a year

Grand Total for Comanche County:

$340,448,778.50

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Comanche County Health Department
1010 S Sheridan Rd
PO Box 87
Lawton, OK 73501
580-2485890
Website: www. health.state.ok.us/chds/comanche/index.htm

Looking Back to Move Forward

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

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

Comanche County Turning Point Partnership

We want to say thank you to all the members of the Comanche County Turning Point Partnership.

- American Cancer Society
- Armed Services YMCA
- ASCOG
- Cameron University
- Center for Creative Living, Corp.
- Comanche County Health Department
- Comanche County Memorial Hospital
- KCCU
- Lawton Food Bank
- Lawton Ft. Sill Chamber Commerce & Industry
- Lawton Police Dept.
- Lawton/Ft. Sill Family YMCA
- Lawton/Ft. Sill United Way
- Marie Detty Youth & Family Services
- OSU Cooperative Extension Service
- Pregnancy Resource Center
- Reynolds Army Hospital
- Southwestern Medical Center
- Success By 6
- SW Oklahoma SAFE KIDS
- SWAN
- University of Oklahoma College of Nursing at Lawton
- USPHS, Lawton Indian Hospital
- OSU Cooperative Extension Service
- Comanche Tribe

OKLAHOMA STATE DEPARTMENT OF HEALTH

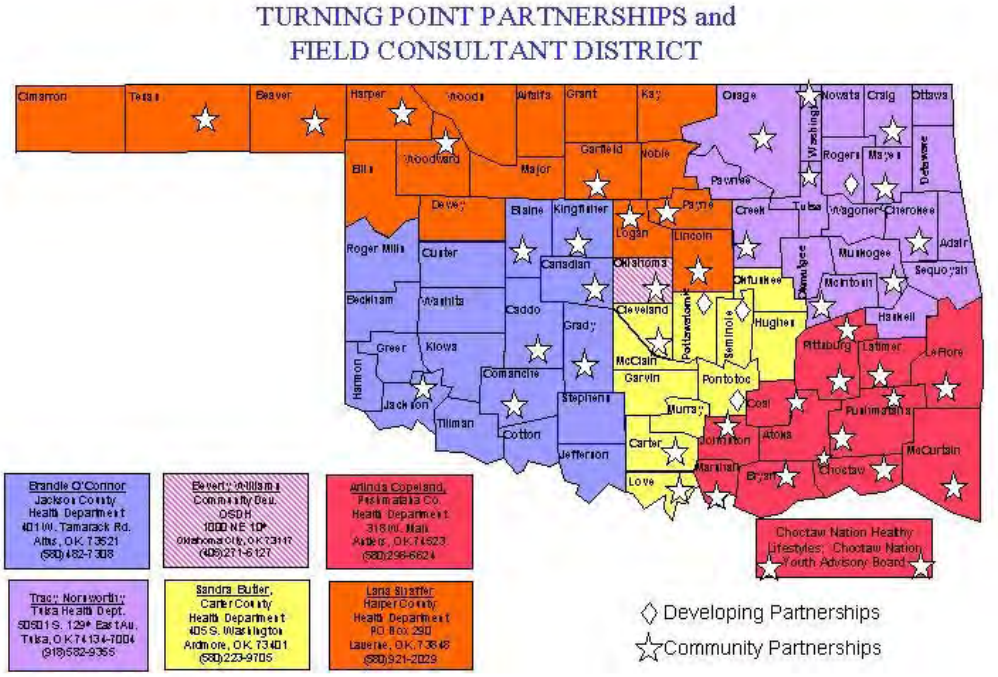
State of the County's Health Report

A Look Back To Move Forward

Cotton County

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

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



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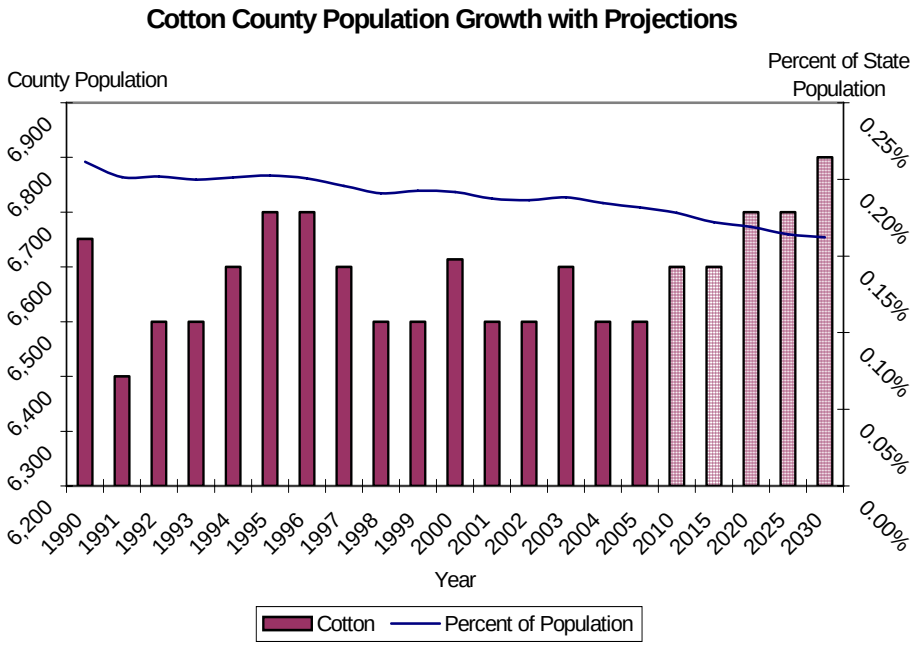
Demographics

** U.S. Census Bureau*

- Population estimates
  - 1% decrease from 1990 to 2000 (6,651 to 6,614)
  - 2% decrease from 2000 to 2004
  - Ranked 54th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 5%
- Race
  - Whites = 85%
  - Native Americans =7%
  - Blacks =3%
  - Other/Multiple = 5%
- Age
  - Under 5 = 7%
  - Over 64 = 18%
  - Median age = 38.6 years
- Housing units
  - Occupied = 2,614 (85%)
  - Vacant = 471 (15%)
- Disability (ages 21 to 64) = 19.1% national = 19.2% state = 21.5%
- Individuals below poverty = 18.2% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Cotton County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 434 people in Cotton County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 34.4 deaths a year, heart disease accounts for almost $13 million a year in medical costs in Cotton County.

Heart disease accounts for almost $13 million a year in medical costs in Cotton County.

Alzheimer's disease and the complications associated with it have increased from the 9th ranked cause of death (1983-1993) to the 7th ranked cause of death in persons 65 and older accounting for a 200% increase in deaths.

Nutrition and Obesity

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

No Data Available At This Time

Top 10 Causes of Death by Age Group

Cotton County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 5	MENINGITIS 1	UNINTENT. INJURY 8	DIABETES MELLITUS 2	HEART DISEASE 6	CANCER 10	CANCER 36	HEART DISEASE 330	HEART DISEASE 378
2	OTHER 4	UNINTENT. INJURY 1	SUICIDE 2	HEART DISEASE 2	UNINTENT. INJURY 6	HEART DISEASE 10	HEART DISEASE 29	CANCER 135	CANCER 184
3		OTHER 1	HEART DISEASE 1	UNINTENT. INJURY 2	HIV 3	UNINTENT. INJURY 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 6	STROKE 69	STROKE 71
4				CANCER 1	SUICIDE 3	DIABETES MELLITUS 2	UNINTENT. INJURY 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 35	UNINTENT. INJURY 49
5				HOMICIDE/ LEGAL 1	CANCER 2	INFLUENZA/ PNEUMONIA 2	INFLUENZA/ PNEUMONIA 2	INFLUENZA/ PNEUMONIA 22	BRONCHITIS/ EMPHYSEMA/ ASTHMA 42
6				SUICIDE 1	HOMICIDE/ LEGAL 2	AORTIC ANEURYSM 1	SUICIDE 2	UNINTENT. INJURY 21	INFLUENZA/ PNEUMONIA 26
7				OTHER 3	DIABETES MELLITUS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	AORTIC ANEURYSM 1	ALZHEIMER'S DISEASE 15	DIABETES MELLITUS 18
8						LIVER DISEASE 1	DIABETES MELLITUS 1	ATHERO-SCLEROSIS 12	ALZHEIMER'S DISEASE 15
9						STROKE 1	LIVER DISEASE 1	DIABETES MELLITUS 12	ATHERO-SCLEROSIS 12
10						SUICIDE 1	STROKE 1	KIDNEY DISEASE 10	SUICIDE 11

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

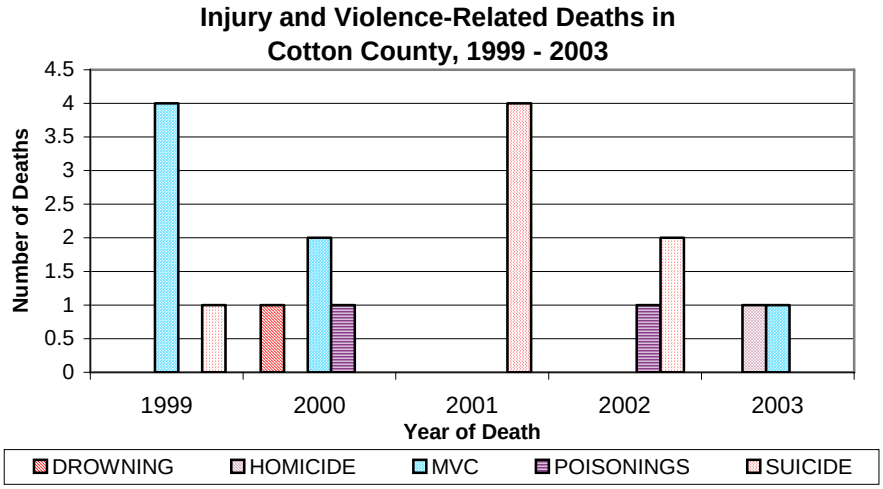
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Cotton County. Unintentional injuries are the leading cause of death from ages 15 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Cotton County which has an average of 1.4 motor vehicle-related deaths a year, that translates to almost $2 million a year.

Violence-related injuries (homicide and suicide) in Cotton County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

No Data Available At This Time

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & Ameri-

No Data Available At This Time

Teen Pregnancy

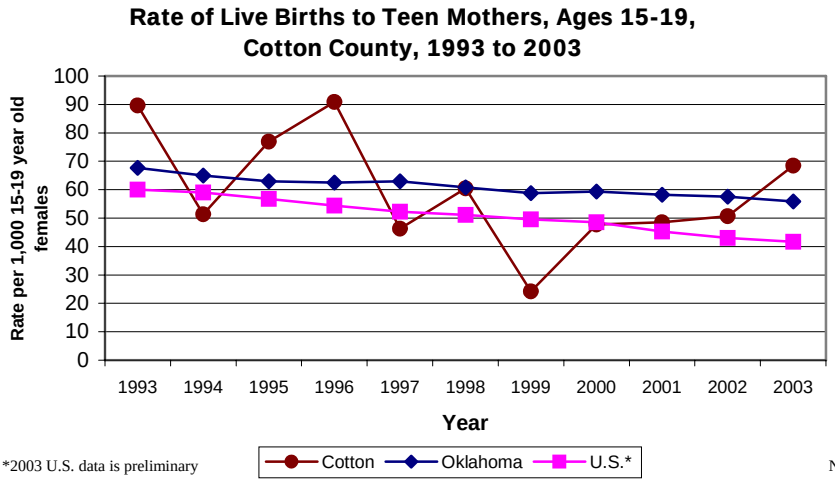
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Cotton County had a teen birth rate of 68.5 in 2003 which was a 35% increase from 2002 (50.7) and a 24% decrease since 1993 (89.6).

With an average of 13 births per year, teen pregnancy costs the citizens of Cotton County $41,600.00 a year.



*2003 U.S. data is preliminary

Note: 1 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 18.2% of persons in Cotton County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Cotton County is 24% above the state (14.7%) and 47% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Cotton County, 2000 Census

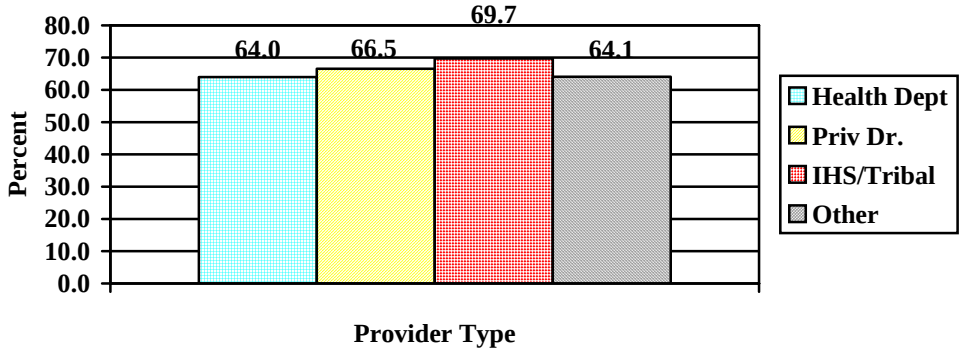
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	6,412	441	726	847	788	3,610
Cumulative Population		441	1,167	2,014	2,802	6,412
% of Total	100.0%	6.9%	11.3%	13.2%	12.3%	56.3%
Cumulative %		6.9%	18.2%	31.4%	43.7%	100.0%

OK By One - State Immunization Data

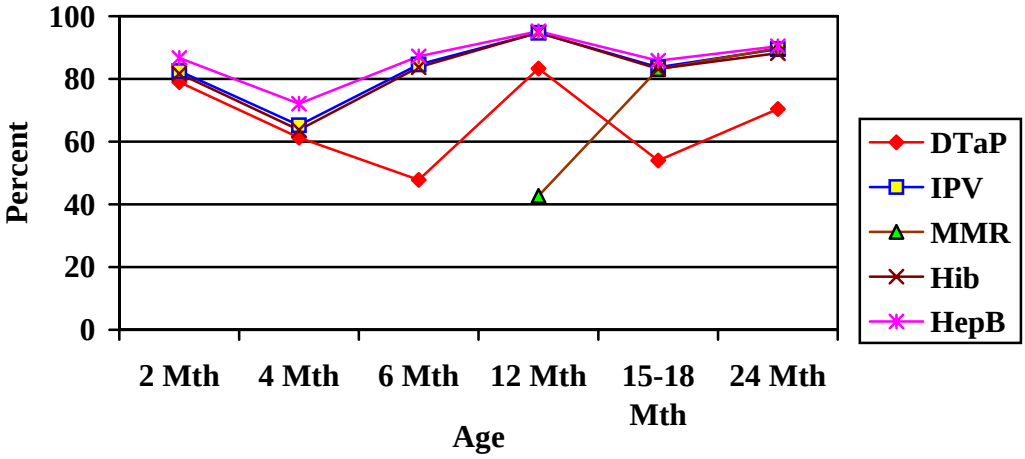
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

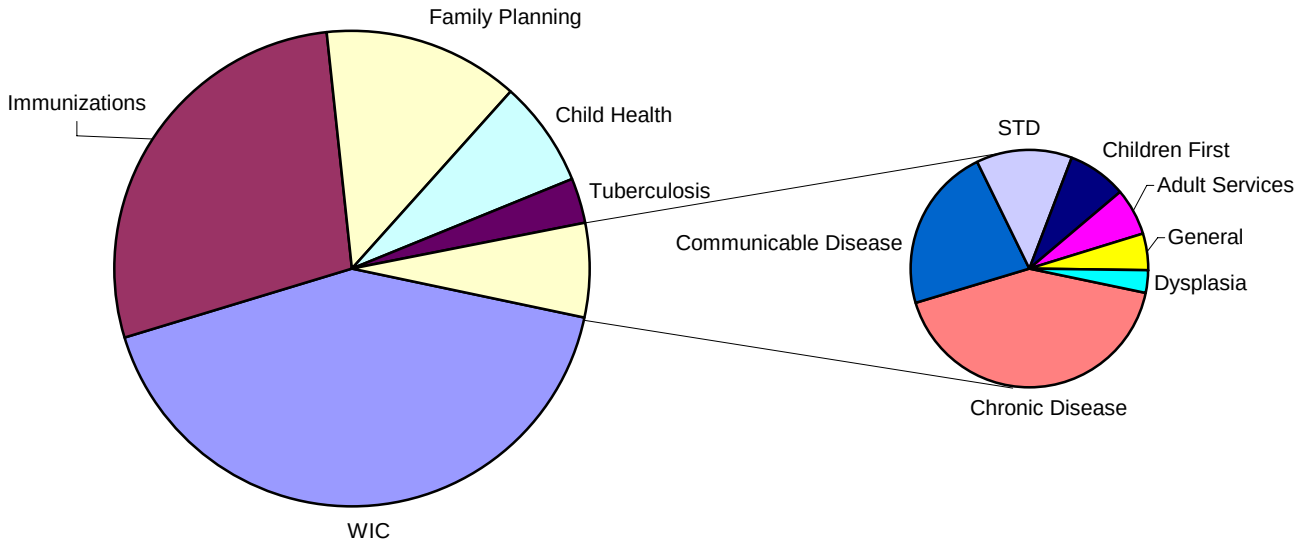


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 34 deaths a year
- $369,476.69 per death
- Total— $12,562,207.46 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 1.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$1,568,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 13 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $41,600.00 a year

Grand Total for Cotton County:

$14,171,807.46

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Room 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Cotton County Health Department
1501-A South 7th
Walters, OK 73572
580-875-6121

Looking Back to Move Forward

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

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Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

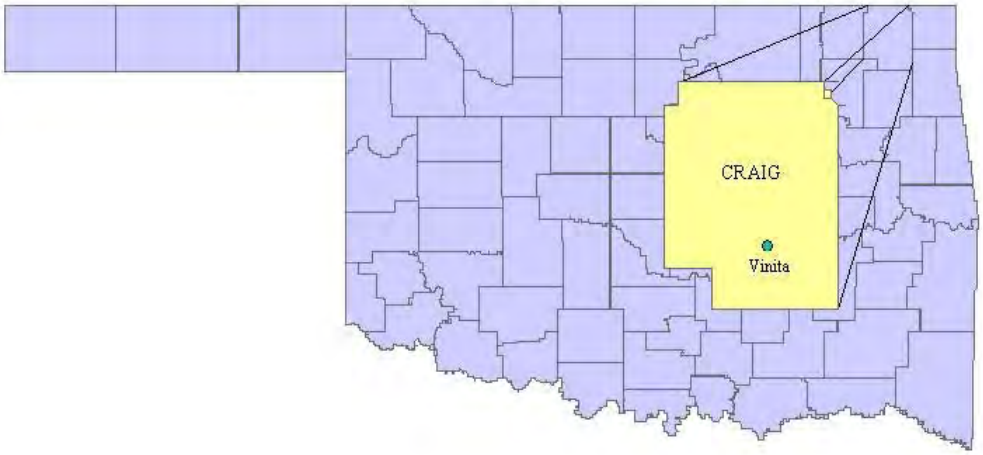
State of the County's Health Report

A Look Back To Move Forward

Craig County

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

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



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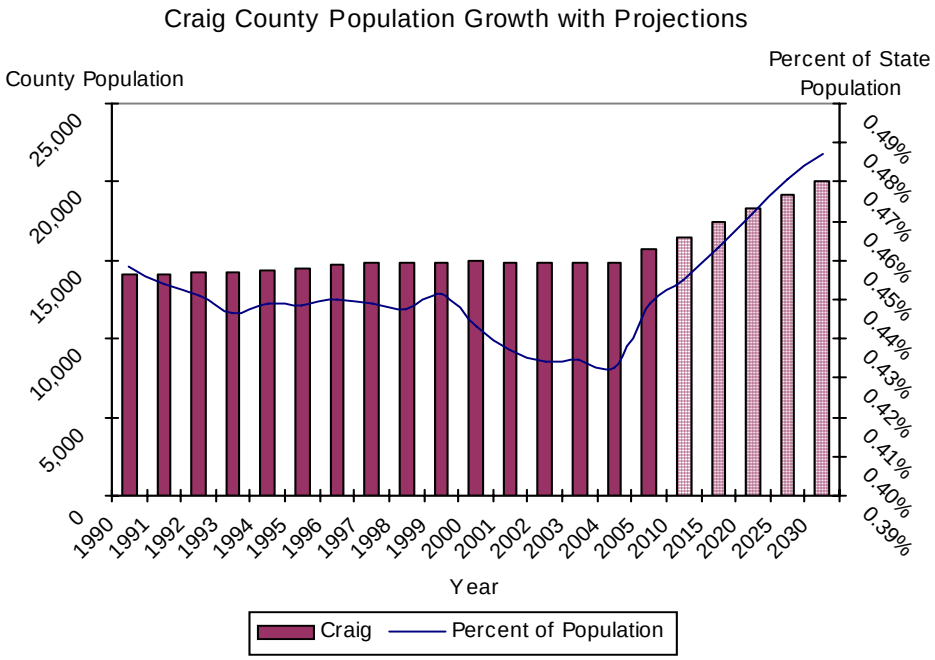
Demographics

- Population estimates
  - 6% increase from 1990 to 2000 (14,104 to 14,950)
  - 0% decrease from 2000 to 2004
  - Ranked 45th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 1%
- Race
  - Whites = 69%
  - Native Americans =«Indian %»
  - Blacks =3%
  - Other/Multiple = 12%
- Age
  - Under 5 = 6%
  - Over 64 = 16%
  - Median age = 39.3 years
- Housing units
  - Occupied = 5,620 (87%)
  - Vacant = 839 (13%)
- Disability (ages 21 to 64) = 25.3% national = 19.2% state = 21.5%
- Individuals below poverty = 13.7% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Craig County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 757 people in Craig County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 63.6 deaths a year, heart disease accounts for over $24 million a year in medical costs in Craig County.

Heart disease accounts for over $24 million a year in medical costs in CraigCounty.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 9thranked cause of death in persons 65 and older accounting for a 21% increase in deaths.

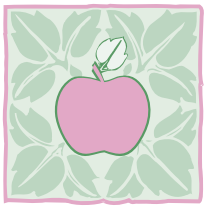
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 17.2% (2,559) of people in Craig County were considered obese which accounted for an additional $1,010,805 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Craig County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 7	UNINTENT. INJURY 3	UNINTENT. INJURY 15	HEART DISEASE 3	HEART DISEASE 13	CANCER 30	CANCER 86	HEART DISEASE 579	HEART DISEASE 700
2	CONGENITAL ANOMALIES 5	CANCER 1	SUICIDE 4	SUICIDE 3	SUICIDE 11	HEART DISEASE 30	HEART DISEASE 75	CANCER 323	CANCER 455
3	UNINTENT. INJURY 3		HOMICIDE/ LEGAL 3	UNINTENT. INJURY 3	CANCER 10	UNINTENT. INJURY 17	UNINTENT. INJURY 16	STROKE 146	STROKE 156
4	SEPTICEMIA (BLOOD POISONING) 2		CANCER 2	CANCER 2	UNINTENT. INJURY 9	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 11	INFLUENZA/ PNEUMONIA 89	UNINTENT. INJURY 108
5	NON-CANCEROUS TUMOR 1		GALLBLADDER DISORDER 1	HOMICIDE/ LEGAL 1	HOMICIDE/ LEGAL 4	INFLUENZA/ PNEUMONIA 3	STROKE 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 74	INFLUENZA/ PNEUMONIA 97
6	SIDS 1		OTHER 2	STROKE 1	INFLUENZA/ PNEUMONIA 2	LIVER DISEASE 3	DIABETES MELLITUS 4	UNINTENT. INJURY 42	BRONCHITIS/ EMPHYSEMA/ ASTHMA 90
7	OTHER 3			VIRAL HEPATITIS 1	SEVEN CAUSES TIED 1	STROKE 3	INFLUENZA/ PNEUMONIA 3	KIDNEY DISEASE 30	DIABETES MELLITUS 35
8				OTHER 2		HOMICIDE/ LEGAL 2	LIVER DISEASE 3	DIABETES MELLITUS 29	KIDNEY DISEASE 32
9						PNEUMONITIS 2	EIGHT CAUSES TIED 1	ALZHEIMER'S DISEASE 23	ALZHEIMER'S DISEASE 23
10						SUICIDE 2		PNEUMONITIS 20	PNEUMONITIS 23

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health — Jul-05

Injury and Violence

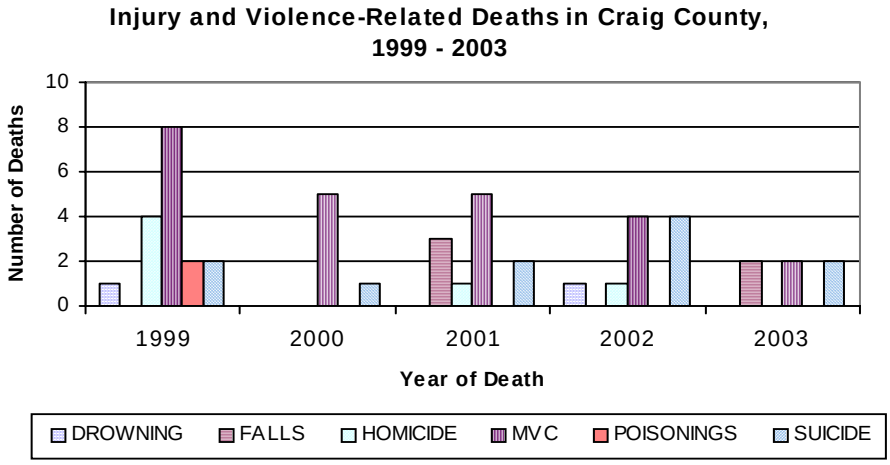
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Craig County. Unintentional injuries are the leading cause of death from ages 5 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Craig County which has an average of 4.8 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Craig County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 37.4% (5,565) of people in Craig County use tobacco of some sort. Medical costs accumulated by those persons are over $51 million a year for Craig County.

> *"Medical costs accumulated by those persons are over **$51 million a year** for Craig County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 49.6% (7,380) of people in Craig County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 11.2% (1,667) of Craig County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $22,076,081.00 in one year for Craig County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

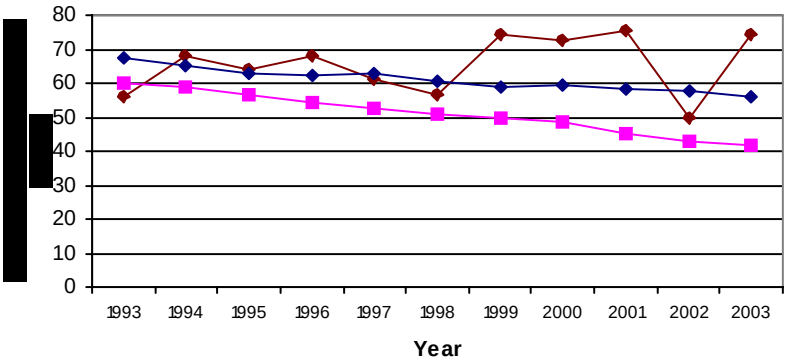
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Craig County had a teen birth rate of 74.4 in 2003 which was a 50% increase from 2002 (49.7) and a 32% increase since 1993 (56.2).

With an average of 32 births per year, teen pregnancy costs the citizens of Craig County $102,400.00 a year.

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



*2003 U.S. data is preliminary

Craig — Oklahoma — U.S.*

Note: 1 birth to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 13.7% of persons in Craig County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Craig County is 7% above the state (14.7%) and 10% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Craig County, 2000 Census

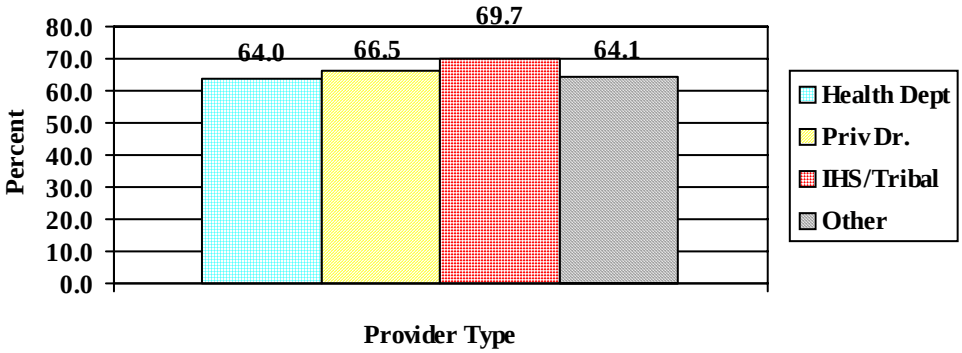
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	14,035	671	1,249	1,652	1,795	8,668
Cumulative Population		671	1,920	3,572	5,367	14,035
% of Total	100.0%	4.8%	8.9%	11.8%	12.8%	61.8%
Cumulative %		4.8%	13.7%	25.5%	38.2%	100.0%

OK By One - State Immunization Data

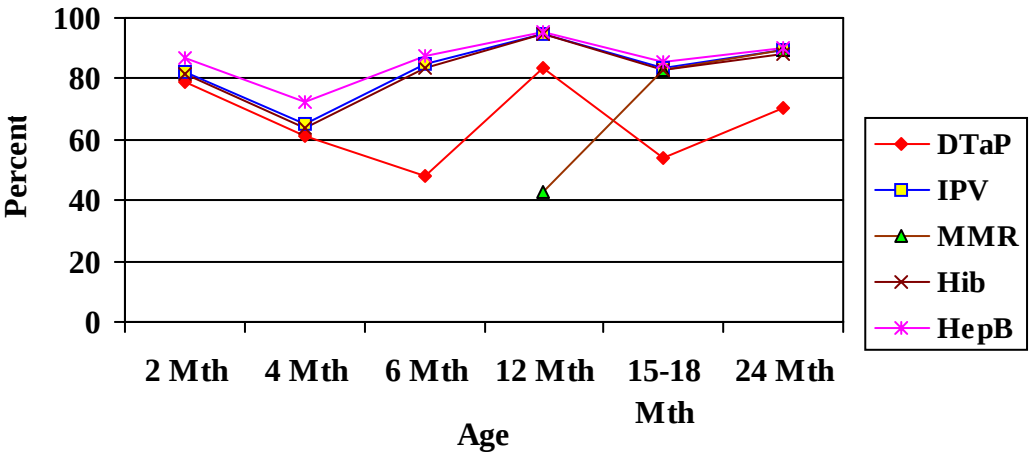
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

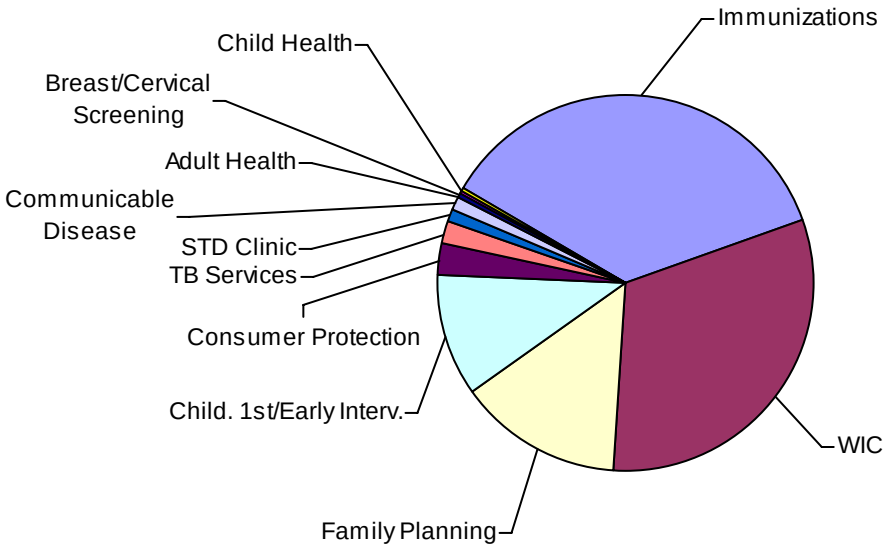


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 64 deaths a year
- $369,476.69 per death
- Total— $23,646,508.16 a year

Obesity

- 17.2% of population (2,559)
- $395.00 in additional medical costs per person
- Total—$1,010,805.00

Motor Vehicle-Related Injury Death

- Average 4.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,376,000.00 a year

Tobacco Use

- 37.4% of population (5,565)
- $3,300.00 in health care costs
- Total—$18,364,500.00 a year

Diabetes

- 11.2% of population (1,667)
- $13,243.00 in healthcare costs a year
- Total—$22,076,081.00 a year

Teen Pregnancy

- Average of 32 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $102,400.00 a year

Grand Total for Craig County:

$70,576,294.16

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Craig County Health Department
115 E Delaware
Vinita, Oklahoma 74301
918-256-7531

Looking Back to Move Forward

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

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

Craig County Community Partnership

We want to say Thank You to all the people that make the Craig County Community Partnership such a huge success. With milestones such as offering community based drug training seminars and obtaining a PEP grant for the Vinita Public Schools the Craig County Community Partnership is an example to live up to.

- Craig County General Hospital
- Local Town Mayors
- County Commissioners
- State Representative
- County Sheriff
- School Superintendents
- Department of Human Services
- Department of Mental Health and Substance Abuse
- Craig County Health Department
- Business Owners
- Faith Community
- Chamber of Commerce
- City Government
- Senior Citizens

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

Creek County

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

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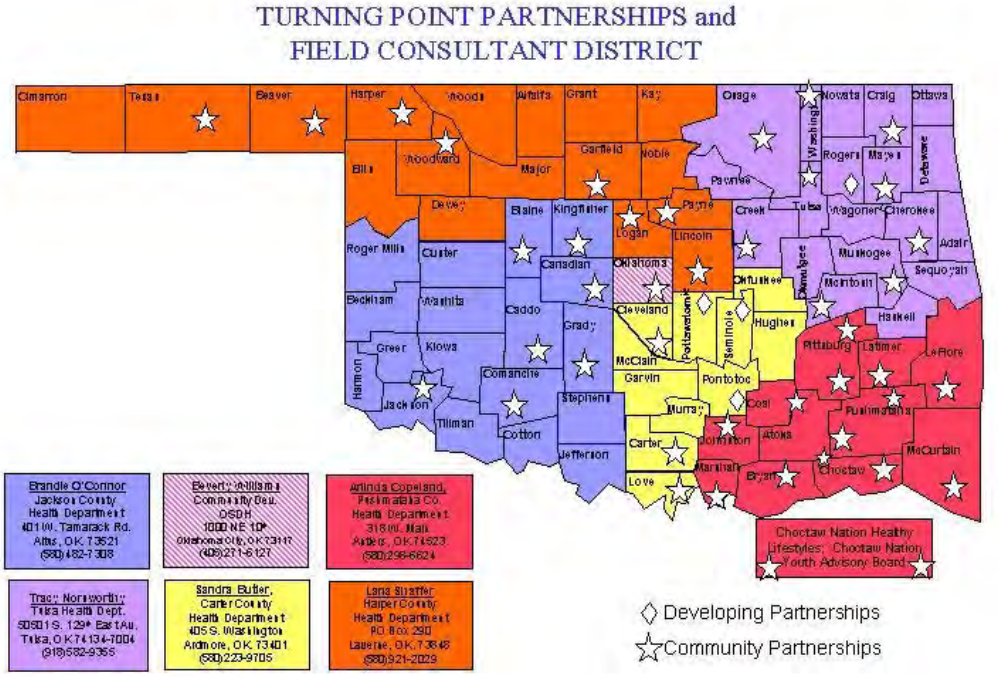

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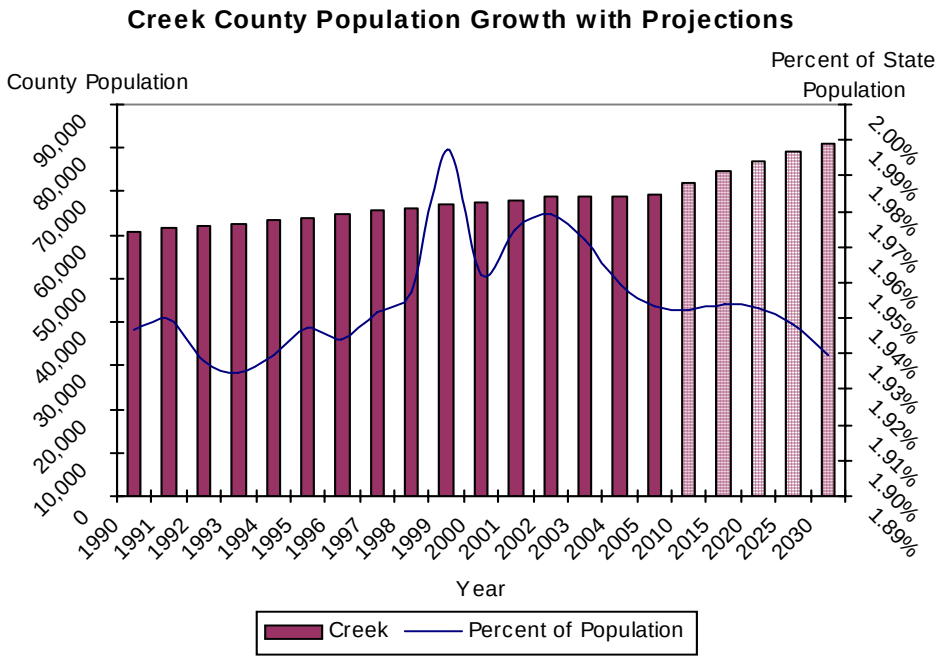
Demographics

- Population estimates
  - 11% increase from 1990 to 2000 (60,915 to 67,367)
  - 2% increase from 2000 to 2004
  - Ranked 24th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 82%
  - Native Americans =«Indian %»
  - Blacks =3%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 13%
  - Median age = 36.9 years
- Housing units
  - Occupied = 25,289 (90%)
  - Vacant = 2,697 (10%)
- Disability (ages 21 to 64) = 24.0% national = 19.2% state = 21.5%
- Individuals below poverty = 13.5% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Creek County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,329 people in Creek County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 225.9 deaths a year, heart disease accounts for over $84 million a year in medical costs in Creek County.

Heart disease accounts for over $84 million a year in medical costs in CreekCounty.

Alzheimer's disease and the complications associated with it have increased from the 15th ranked cause of death (1983-1993) to the 7th ranked cause of death in persons 65 and older accounting for a 658% increase in deaths.

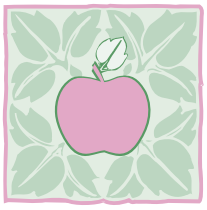
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 24.7% (16,992) of people in Creek County were considered obese which accounted for an additional $6,711,840 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Creek County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 24	UNINTENT. INJURY 11	UNINTENT. INJURY 62	UNINTENT. INJURY 45	UNINTENT. INJURY 64	CANCER 166	CANCER 331	HEART DISEASE 1994	HEART DISEASE 2486
2	CONGENITAL ANOMALIES 13	HEART DISEASE 3	SUICIDE 24	SUICIDE 15	HEART DISEASE 54	HEART DISEASE 152	HEART DISEASE 263	CANCER 1048	CANCER 1607
3	UNINTENT. INJURY 13	SUICIDE 3	CANCER 7	HOMICIDE/ LEGAL 14	CANCER 44	UNINTENT. INJURY 39	BRONCHITIS/ EMPHYSEMA/ ASTHMA 40	STROKE 438	STROKE 509
4	SIDS 8	CONGENITAL ANOMALIES 2	HOMICIDE/ LEGAL 5	HEART DISEASE 13	SUICIDE 18	LIVER DISEASE 26	STROKE 36	BRONCHITIS/ EMPHYSEMA/ ASTHMA 325	BRONCHITIS/ EMPHYSEMA/ ASTHMA 394
5	HEART DISEASE 5	HOMICIDE/ LEGAL 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	CANCER 8	DIABETES MELLITUS 11	STROKE 24	DIABETES MELLITUS 34	DIABETES MELLITUS 155	UNINTENT. INJURY 368
6	CANCER 2	CANCER 1	NON-CANCEROUS TUMOR 1	HIV 8	LIVER DISEASE 11	DIABETES MELLITUS 21	UNINTENT. INJURY 31	INFLUENZA/ PNEUMONIA 149	DIABETES MELLITUS 223
7	SEPTICEMIA (BLOOD POISONING) 2	NON-CANCEROUS TUMOR 1	CONGENITAL ANOMALIES 1	FIVE CAUSES TIED 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 9	BRONCHITIS/ EMPHYSEMA/ ASTHMA 16	INFLUENZA/ PNEUMONIA 13	ALZHEIMER'S DISEASE 144	INFLUENZA/ PNEUMONIA 175
8	FIVE CAUSES TIED 1	INFLUENZA/ PNEUMONIA 1	HEART DISEASE 1		HOMICIDE/ LEGAL 8	SUICIDE 13	LIVER DISEASE 12	UNINTENT. INJURY 102	ALZHEIMER'S DISEASE 146
9		OTHER 5	INFLUENZA/ PNEUMONIA 1		STROKE 8	HOMICIDE/ LEGAL 8	SUICIDE 8	ATHERO-SCLEROSIS 73	SUICIDE 97
10			SEPTICEMIA (BLOOD POISONING) 1		HIV 7	INFLUENZA/ PNEUMONIA 8	ATHERO-SCLEROSIS 7	KIDNEY DISEASE 69	ATHERO-SCLEROSIS 80

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

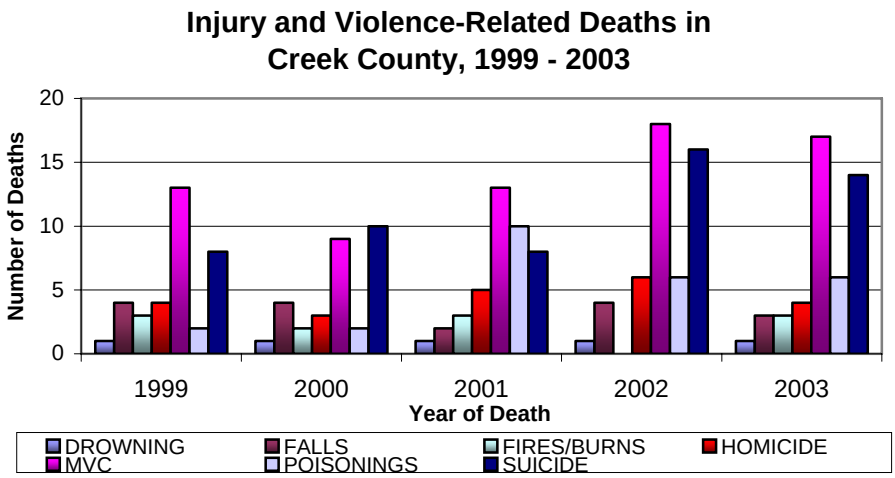
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Creek County which has an average of 14 motor vehicle-related deaths a year, that translates to almost $16 million a year.

Violence-related injuries (homicide and suicide) in Creek County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



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Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.6% (15,547) of people in Creek County use tobacco of some sort. Medical costs accumulated by those persons are over $21 million a year for Creek County.

> *"Medical costs accumulated by those persons are over **$21 million a year** for Creek County"*

Physical Activity, Wellness and Diabetes

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 36.4% (25,041) of people in Creek County had no leisure activity in the past month at the time they were surveyed.

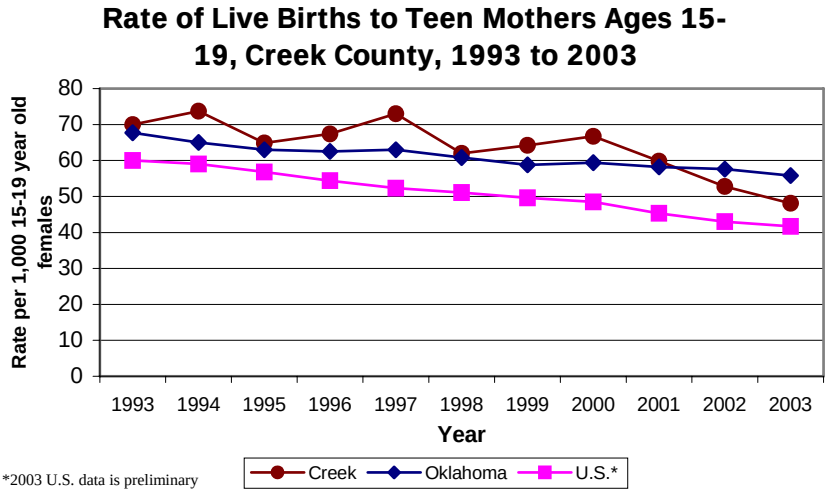
The BRFSS also indicated that 6.4% (4,403) of Creek County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $58,308,929.00 in one year for Creek County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 16 births to a mother 10-14 years of age occurred during the 11 year period.

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

According to Oklahoma Vital Statistics, Creek County had a teen birth rate of 48.1 in 2003 which was a 9% decrease from 2002 (52.8) and a 31% decrease since 1993 (70).

With an average of 155 births per year, teen pregnancy costs the citizens of Creek County $496,000.00 a year.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 13.5% of persons in Creek County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Creek County is 8% below the state (14.7%) and 9% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Creek County, 2000 Census

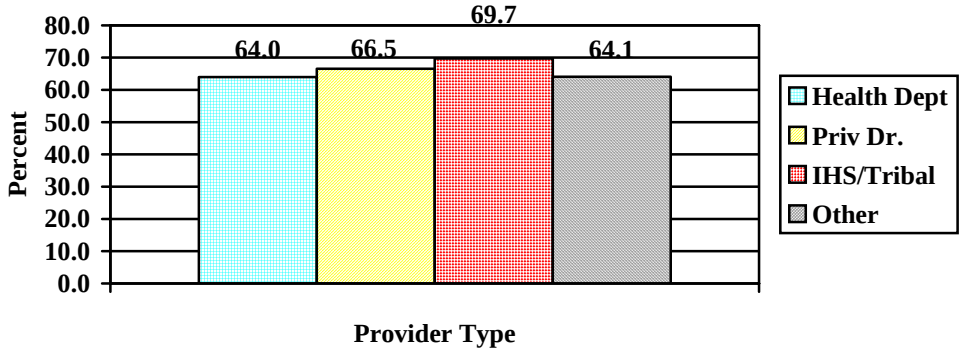
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	66,283	3,270	5,654	7,712	7,942	41,705
Cumulative Population		3,270	8,924	16,636	24,578	66,283
% of Total	100.0%	4.9%	8.5%	11.6%	12.0%	62.9%
Cumulative %		4.9%	13.5%	25.1%	37.1%	100.0%

OK By One - State Immunization Data

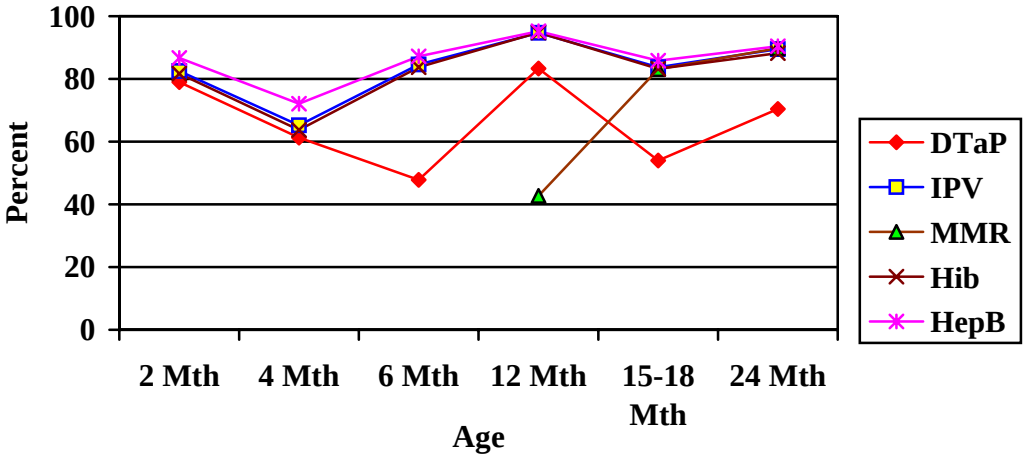
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

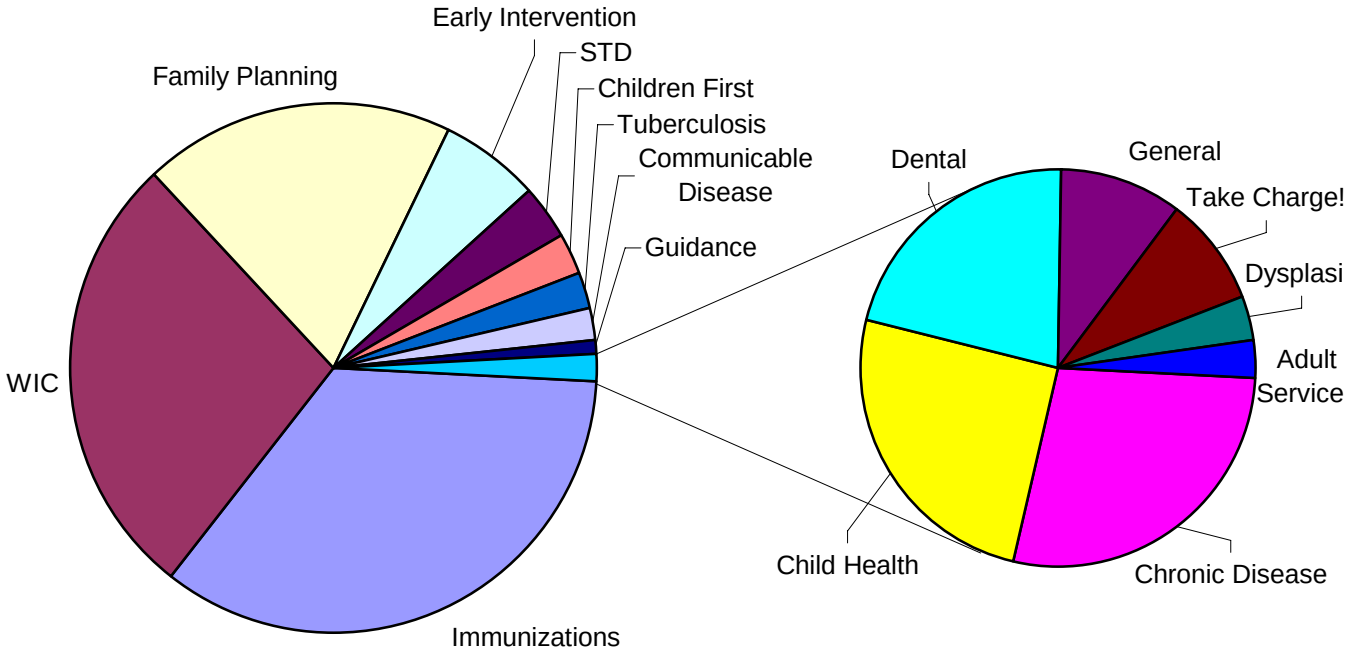


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services, OSDH*

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 226 deaths a year
- $369,476.69 per death
- Total— $83,501,731.94 a year

Obesity

- 24.7% of population (16,992)
- $395.00 in additional medical costs per person
- Total—$6,711,840.00

Motor Vehicle-Related Injury Death

- Average 14 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$15,680,000.00 a year

Tobacco Use

- 22.6% of population (15,547)
- $3,300.00 in health care costs
- Total—$51,305,100.00 a year

Diabetes

- 6.4% of population (4,403)
- $13,243.00 in healthcare costs a year
- Total—$58,308,929.00 a year

Teen Pregnancy

- Average of 155 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $496,000.00 a year

Grand Total for Creek County:

$216,003,600.94

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Creek County Health Department
1808 South Hickory
Sapulpa, OK 74066
918-224-5531

420 East Broadway
Drumright, OK 74030
918-352-9581

408 West 4th
Bristow, OK 74010
918-367-3341

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

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

Bristow Turning Point

We want to say thank you to all the people who have made Bristow Turning Point a success.

- Bristow Medical Center
- Bristow News
- Bristow Public Schools
- City of Bristow
- Community Bank
- Creek County Health Department
- KREK Radio
- Ministerial Alliance
- Spirit Bank
- Sports Complex

OKLAHOMA STATE DEPARTMENT OF HEALTH

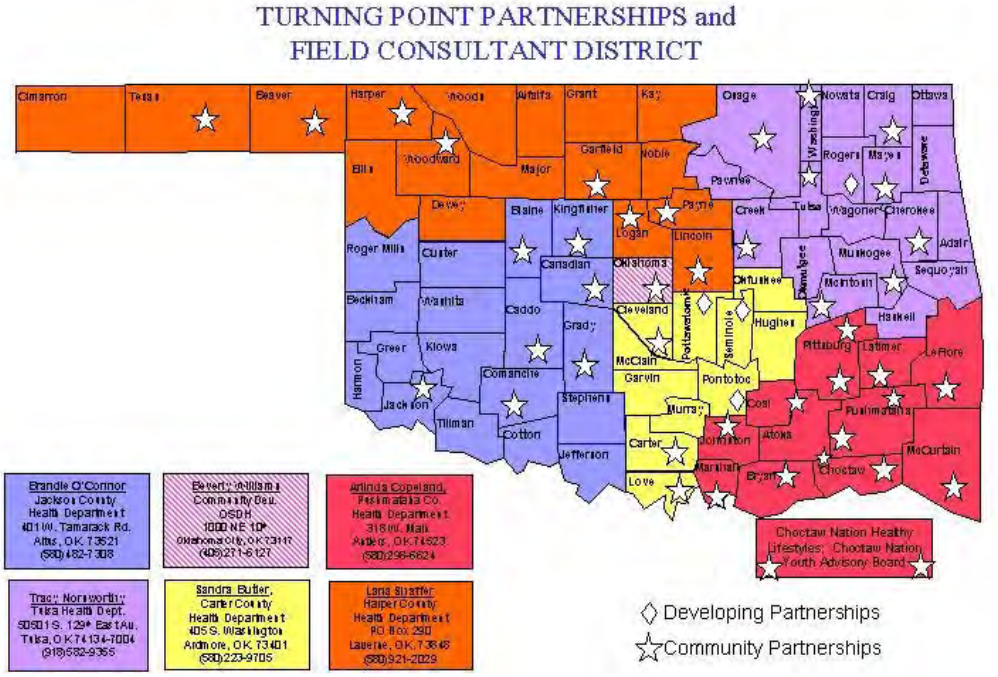
State of the County's Health Report

A Look Back To Move Forward

Custer County

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

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



Inside this issue:

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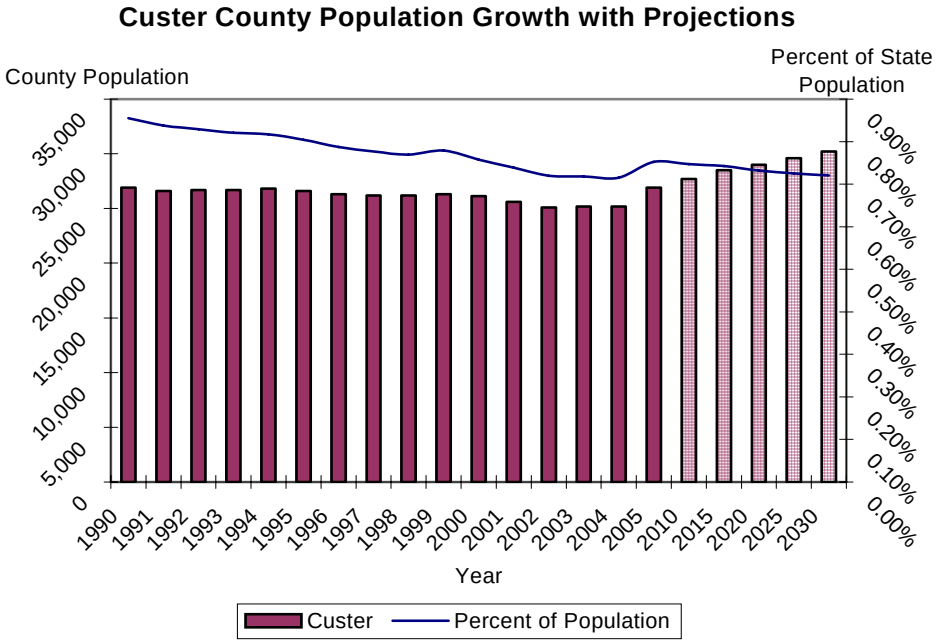
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% decrease from 1990 to 2000 (26,897 to 26,142)
  - 4% decrease from 2000 to 2004
  - Ranked 62nd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 9%
- Race
  - Whites = 81%
  - Native Americans =6%
  - Blacks =3%
  - Other/Multiple = 10%
- Age
  - Under 5 = 6%
  - Over 64 = 14%
  - Median age = 32.7 years
- Housing units
  - Occupied = 10,136 (87%)
  - Vacant = 1,539 (13%)
- Disability (ages 21 to 64) = 17.3% national = 19.2% state = 21.5%
- Individuals below poverty = 18.5% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Custer County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,073 people in Custer County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 105.5 deaths a year, heart disease accounts for almost $39 million a year in medical costs in Custer County.

Heart disease accounts for almost $39 million a year in medical costs in Custer County.

Alzheimer's disease and the complications associated with it have increased from the 15th ranked cause of death (1983-1993) to the 7th ranked cause of death in persons 65 and older accounting for a 525% increase in deaths.

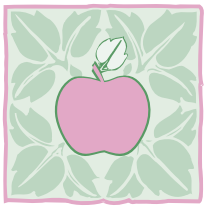
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 25.2% (6,290) of people in Custer County were considered obese which accounted for an additional $2,484,550 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Custer County 1993-2003

	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 15	UNINTENT. INJURY 7	UNINTENT. INJURY 30	UNINTENT. INJURY 16	CANCER 16	CANCER 54	HEART DISEASE 120	HEART DISEASE 978	HEART DISEASE 1161
2	UNINTENT. INJURY 9	CANCER 1	CANCER 2	CANCER 7	HEART DISEASE 14	HEART DISEASE 42	CANCER 103	CANCER 424	CANCER 607
3	CONGENITAL ANOMALIES 2	CONGENITAL ANOMALIES 1	HEART DISEASE 2	SUICIDE 7	UNINTENT. INJURY 14	DIABETES MELLITUS 13	STROKE 17	STROKE 161	STROKE 183
4	SEPTICEMIA (BLOOD POISONING) 1	OTHER 1	SUICIDE 2	HEART DISEASE 5	SUICIDE 5	UNINTENT. INJURY 13	BRONCHITIS/ EMPHYSEMA/ ASTHMA 13	INFLUENZA/ PNEUMONIA 121	UNINTENT. INJURY 142
5	SIDS 1		ANEMIA 1	HIV 4	LIVER DISEASE 4	STROKE 4	DIABETES MELLITUS 9	BRONCHITIS/ EMPHYSEMA/ ASTHMA 105	INFLUENZA/ PNEUMONIA 130
6	OTHER 3		CONGENITAL ANOMALIES 1	DIABETES MELLITUS 2	DIABETES MELLITUS 2	SUICIDE 4	UNINTENT. INJURY 9	DIABETES MELLITUS 74	BRONCHITIS/ EMPHYSEMA/ ASTHMA 122
7			HOMICIDE/ LEGAL 1	HOMICIDE/ LEGAL 2	HIV 2	VIRAL HEPATITIS 4	SEPTICEMIA (BLOOD POISONING) 5	ALZHEIMER'S DISEASE 50	DIABETES MELLITUS 100
8			INFLUENZA/ PNEUMONIA 1	SIX CAUSES TIED 1	HOMICIDE/ LEGAL 2	NON-CANCEROUS TUMOR 3	INFLUENZA/ PNEUMONIA 4	UNINTENT. INJURY 44	ALZHEIMER'S DISEASE 52
9			OTHER 5		INFLUENZA/ PNEUMONIA 2	SEPTICEMIA (BLOOD POISONING) 3	LIVER DISEASE 4	KIDNEY DISEASE 38	SEPTICEMIA (BLOOD POISONING) 43
10					THREE CAUSES TIED 1	THREE CAUSES TIED 2	SUICIDE 4	PNEUMONITIS 36	KIDNEY DISEASE 42

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

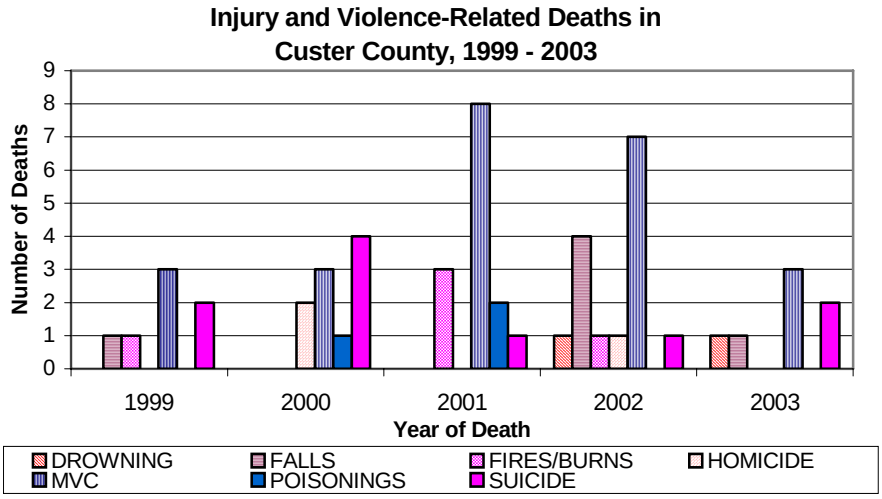
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Custer County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Custer County which has an average of 4.8 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Custer County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 25.7% (6,415) of people in Custer County use tobacco of some sort. Medical costs accumulated by those persons are over $38 million a year for Custer County.

> *"Medical costs accumulated by those persons are over **$38 million a year** for Custer County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 33.4% (8,337) of people in Custer County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 8.4% (2,097) of Custer County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $27,770,571.00 in one year for Custer County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

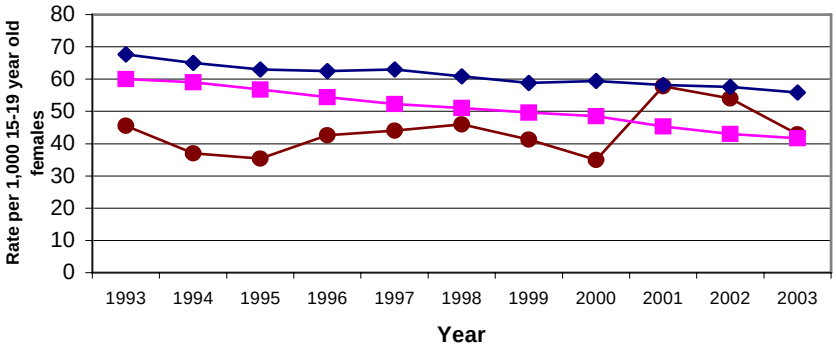
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Custer County had a teen birth rate of 42.9 in 2003 which was a 21% decrease from 2002 (54) but a 6% decrease since 1993 (45.6).

With an average of 55 births per year, teen pregnancy costs the citizens of Custer County $176,000.00 a year.

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



*2003 U.S. data is preliminary

Custer — Oklahoma — U.S.*

Note: 17 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 18.5% of persons in Custer County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Custer County is 26% above the state (14.7%) and 50% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Custer County, 2000 Census

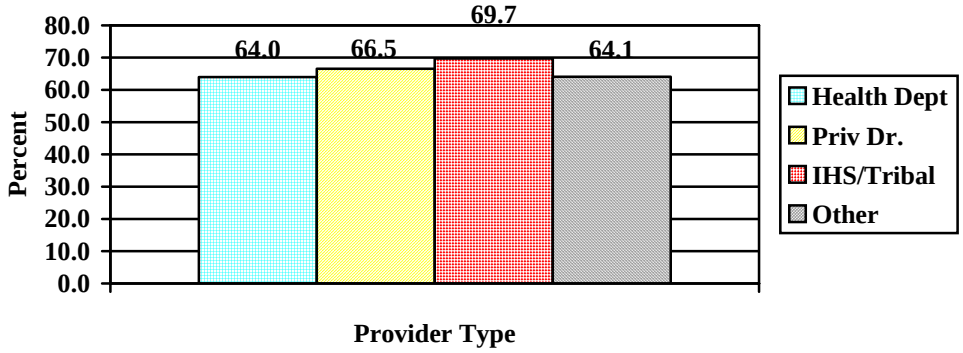
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	24,805	1,851	2,749	3,185	2,638	14,382
Cumulative Population		1,851	4,600	7,785	10,423	24,805
% of Total	100.0%	7.5%	11.1%	12.8%	10.6%	58.0%
Cumulative %		7.5%	18.5%	31.4%	42.0%	100.0%

OK By One - State Immunization Data

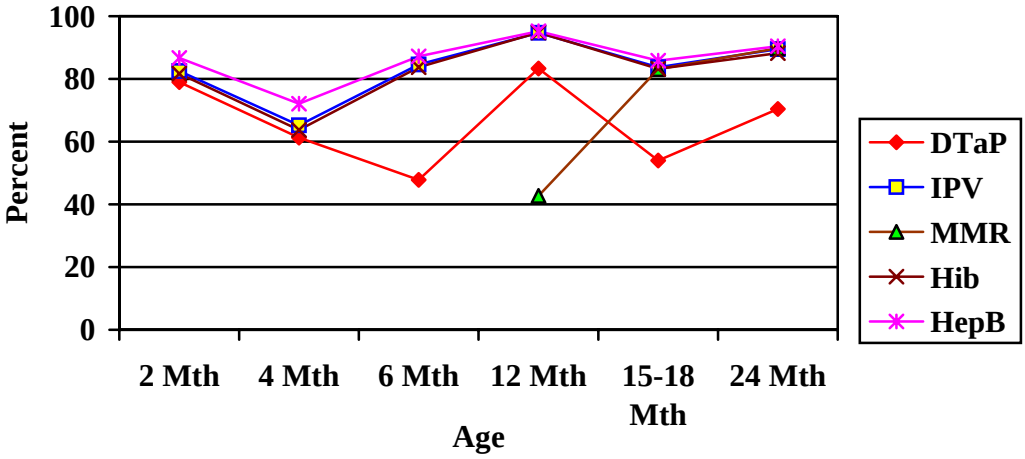
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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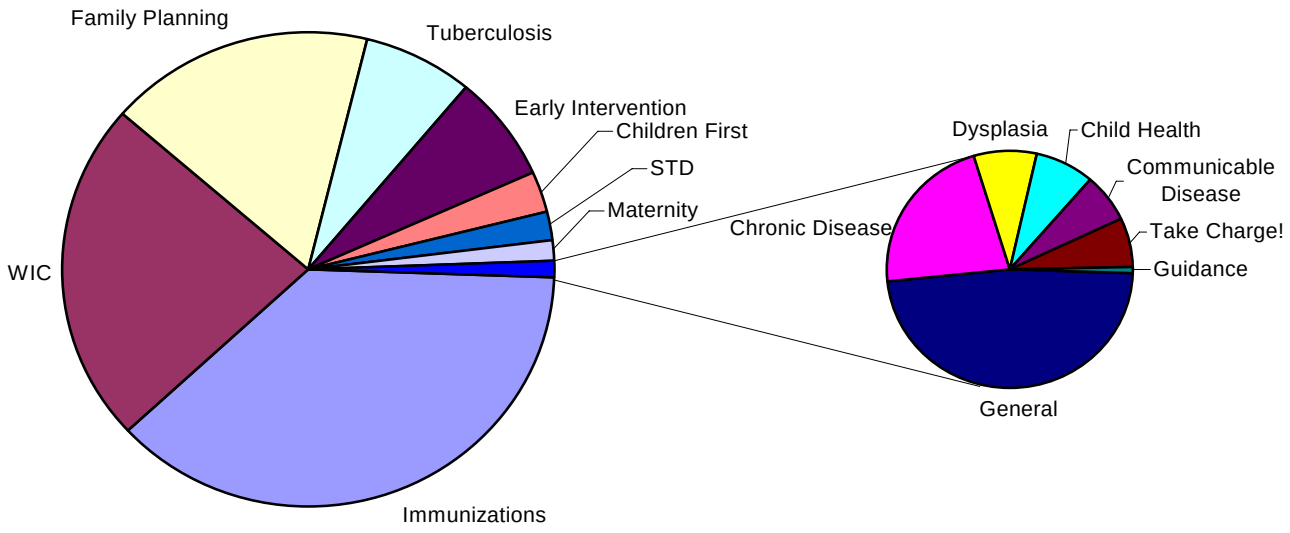

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 106 deaths a year
- $369,476.69 per death
- Total— $39,164,529.14 a year

Obesity

- 25.2% of population (6,290)
- $395.00 in additional medical costs per person
- Total—$2,484,550.00

Motor Vehicle-Related Injury Death

- Average 4.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,376,000.00 a year

Tobacco Use

- 25.7% of population (6,415)
- $3,300.00 in health care costs
- Total—$21,169,500.00 a year

Diabetes

- 8.4% of population (2,097)
- $13,243.00 in healthcare costs a year
- Total—$27,770,571.00 a year

Teen Pregnancy

- Average of 55 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $176,000.00 a year

Grand Total for Custer County:

$96,141,150.14

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Fax: 405-271-1225
Email: neil@health.ok.gov

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Clinton, OK 73601
580-323-2100

220 North Bradley
Weatherford, OK 73096
580-772-6417

Looking Back to Move Forward

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

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Custer County Turning Point

We want to say thank you to all the members of the Custer County Turning Point Coalition.

- Concerned Citizens
- County Commissioners
- Custer County Health Department
- Local Physicians

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

Delaware County

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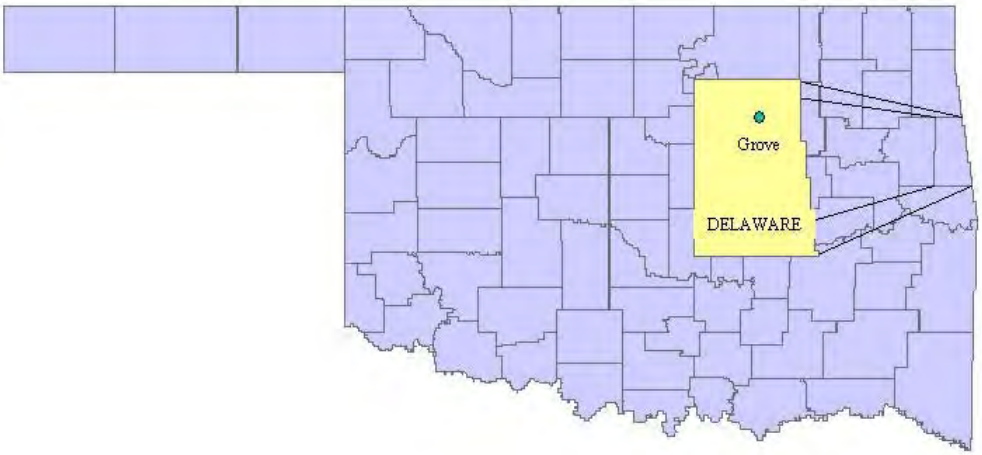

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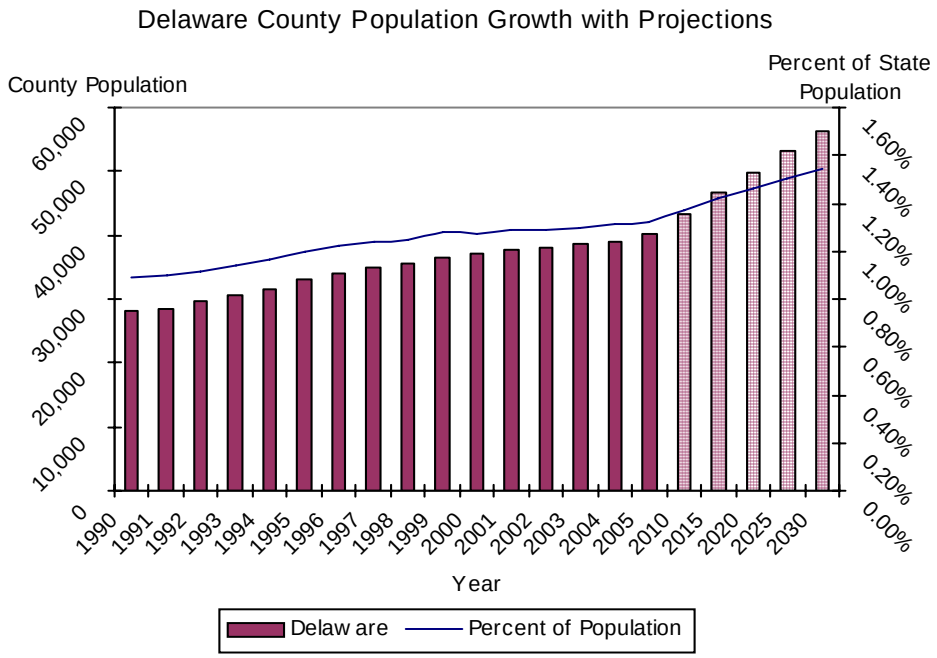
Demographics

- Population estimates
  - 32% increase from 1990 to 2000 (28,070 to 37,077)
  - 5% increase from 2000 to 2004
  - Ranked 7th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 70%
  - Native Americans =«Indian %»
  - Blacks =0%
  - Other/Multiple = 7%
- Age
  - Under 5 = 6%
  - Over 64 = 18%
  - Median age = 40.8 years
- Housing units
  - Occupied = 14,838 (67%)
  - Vacant = 7,452 (33%)
- Disability (ages 21 to 64) = 28.0% national = 19.2% state = 21.5%
- Individuals below poverty = 18.3% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Delaware County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,494 people in Delaware County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 161.9 deaths a year, heart disease accounts for almost $60 million a year in medical costs in Delaware County.

Heart disease accounts for almost $60 million a year in medical costs in DelawareCounty.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 7thranked cause of death in persons 65 and older accounting for a 469% increase in deaths.

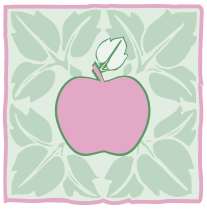
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 25.6% (9,910) of people in Delaware County were considered obese which accounted for an additional $3,914,450 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Delaware County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD	CONGENITAL ANOMALIES	UNINTENT. INJURY	UNINTENT. INJURY	UNINTENT. INJURY	CANCER	CANCER	HEART DISEASE	HEART DISEASE
	11	2	33	24	35	72	207	1500	1782
2	CONGENITAL ANOMALIES	UNINTENT. INJURY	SUICIDE	CANCER	HEART DISEASE	HEART DISEASE	HEART DISEASE	CANCER	CANCER
	5	2	8	10	32	58	181	740	1054
3	UNINTENT. INJURY	HEART DISEASE	HEART DISEASE	HEART DISEASE	CANCER	DIABETES MELLITUS	BRONCHITIS/ EMPHYSEMA / ASTHMA	BRONCHITIS/ EMPHYSEMA / ASTHMA	BRONCHITIS/ EMPHYSEMA / ASTHMA
	3	1	3	6	23	17	27	261	295
4	SIDS	INFLUENZA / PNEUMONIA	CANCER	SUICIDE	DIABETES MELLITUS	UNINTENT. INJURY	DIABETES MELLITUS	STROKE	STROKE
	2	1	2	4	10	16	22	256	286
5	INFLUENZA / PNEUMONIA	OTHER	OTHER	HOMICIDE/ LEGAL	SUICIDE	LIVER DISEASE	UNINTENT. INJURY	INFLUENZA / PNEUMONIA	UNINTENT. INJURY
	1	1	3	3	6	14	21	104	196
6	MENINGOCOC. INFECTION			NON-CANCEROUS TUMOR	LIVER DISEASE	SUICIDE	STROKE	DIABETES MELLITUS	DIABETES MELLITUS
	1			2	5	9	18	90	140
7	OTHER INTESTIONAL INFECTION			HIV	HIV	STROKE	KIDNEY DISEASE	ALZHEIMER'S DISEASE	INFLUENZA / PNEUMONIA
	1			2	4	7	7	74	117
8	SEPTICEMIA (BLOOD POISONING)			FOUR CAUSES TIED	STROKE	BRONCHITIS/ EMPHYSEMA / ASTHMA	ATHERO-SCLEROSIS	UNINTENT. INJURY	ALZHEIMER'S DISEASE
	1			1	4	6	6	62	79
9	OTHER				HOMICIDE/ LEGAL	INFLUENZA / PNEUMONIA	LIVER DISEASE	ATHERO-SCLEROSIS	ATHERO-SCLEROSIS
	10				3	6	6	53	61
10					CONGENITAL ANOMALIES	HOMICIDE/ LEGAL	ALZHEIMER'S DISEASE	KIDNEY DISEASE	KIDNEY DISEASE
					2	5	5	38	51

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health Jul-05

Injury and Violence

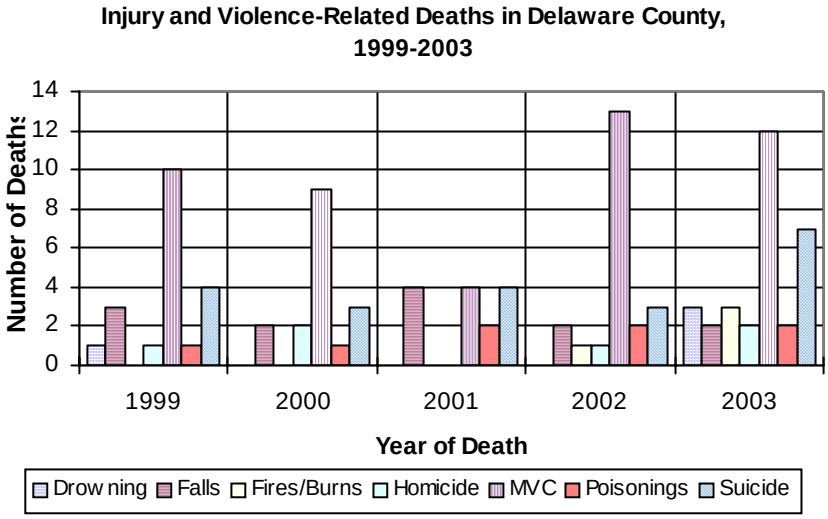
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Delaware County. Unintentional injuries are the leading cause of death from ages 15 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Delaware County which has an average of 9.6 motor vehicle-related deaths a year, that translates to almost $11 million a year.

Violence-related injuries (homicide and suicide) in Delaware County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 29.5% (11,419) of people in Delaware County use tobacco of some sort. Medical costs accumulated by those persons are almost $4 million a year for Delaware County.

> *"Medical costs accumulated by those persons are almost **$4 million a year** for Delaware County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 41.5% (16,064) of people in Delaware County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.7% (4,142) of Delaware County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $54,852,506.00 in one year for Delaware County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

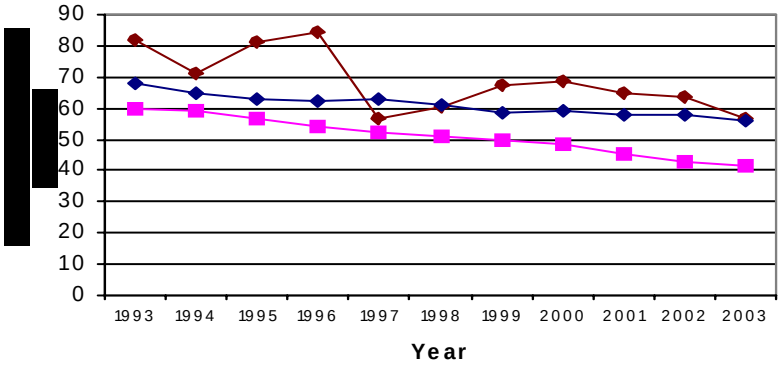
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Delaware County had a teen birth rate of 56.6 in 2003 which was a 11% decrease from 2002 (63.6) and a 31% decrease since 1993 (81.8).

With an average of 79 births per year, teen pregnancy costs the citizens of Delaware County $252,800.00 a year.

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



*2003 U.S. data is preliminary

Delaware — Oklahoma — U.S.*

Note: 16 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 18.3% of persons in Delaware County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Delaware County is 24% above the state (14.7%) and 47% above the nation (12.4%) for persons with incomes below the federal poverty level.

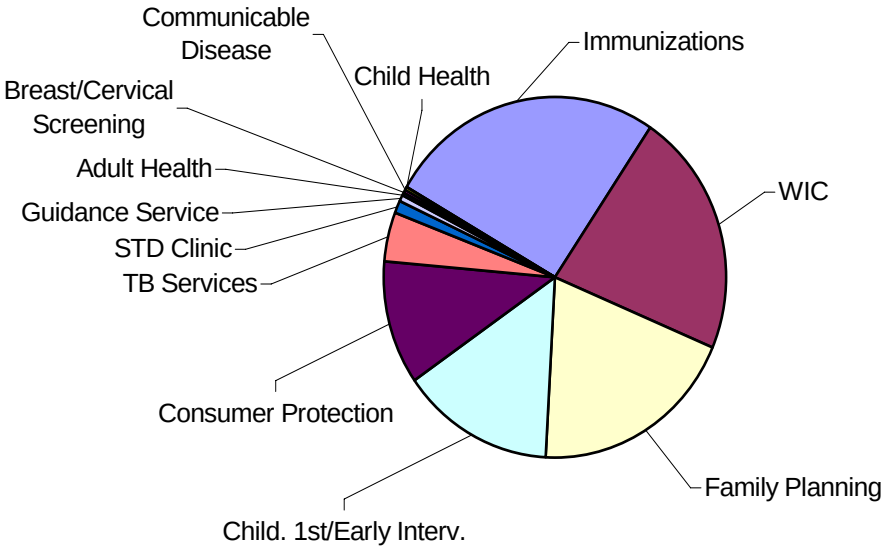
Income to Poverty Ratio, Delaware County, 2000 Census

Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	36,625	2,279	4,411	5,046	4,808	20,081
Cumulative Population		2,279	6,690	11,736	16,544	36,625
% of Total	100.0%	6.2%	12.0%	13.8%	13.1%	54.8%
Cumulative %		6.2%	18.3%	32.0%	45.2%	100.0%

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 162 deaths a year
- $369,476.69 per death
- Total— $59,855,223.78 a year

Obesity

- 25.6% of population (9,910)
- $395.00 in additional medical costs per person
- Total—$3,914,450.00

Motor Vehicle-Related Injury Death

- Average 9.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$10,752,000.00 a year

Tobacco Use

- 29.5% of population (11,419)
- $3,300.00 in health care costs
- Total—$37,682,700.00 a year

Diabetes

- 10.7% of population (4,142)
- $13,243.00 in healthcare costs a year
- Total—$54,852,506.00 a year

Teen Pregnancy

- Average of 79 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $252,800.00 a year

Grand Total for Delaware County:

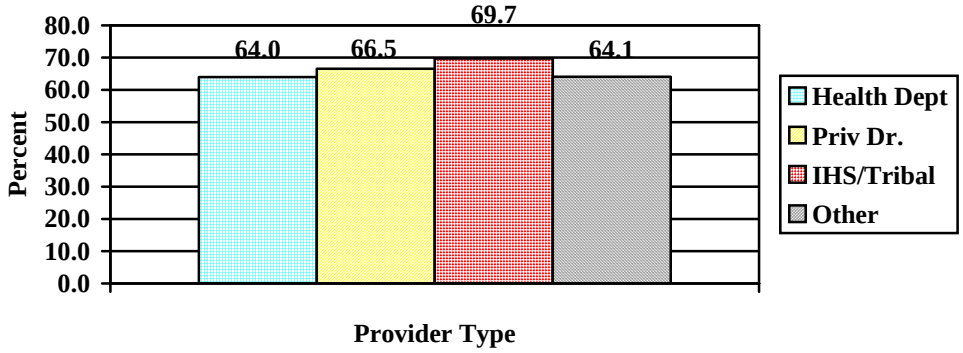
$167,309,679.78

OK By One - State Immunization Data

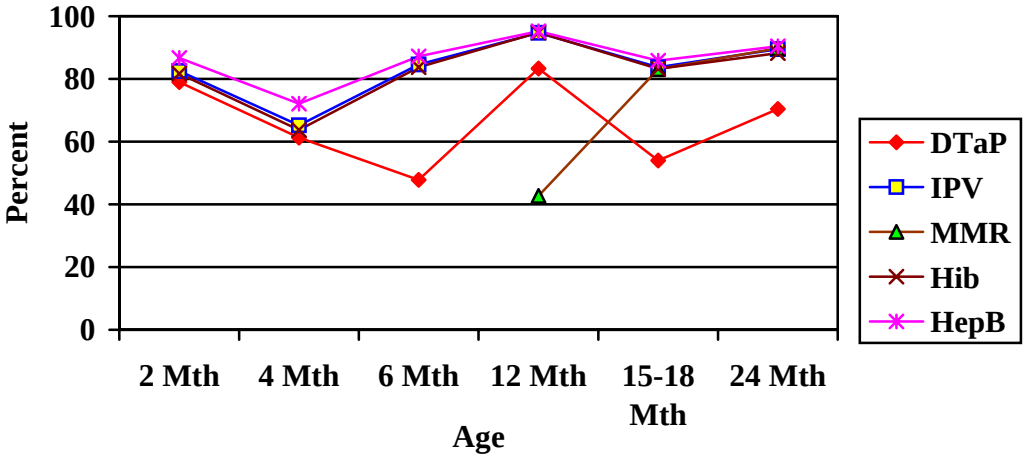
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Delaware County Health Department
Highway 59th West
PO Box drawer 370
Jay, Oklahoma 74346
918-253-4511

Looking Back to Move Forward

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

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

Oklahoma
Turning
POINT

Oklahoma Community Partners
in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

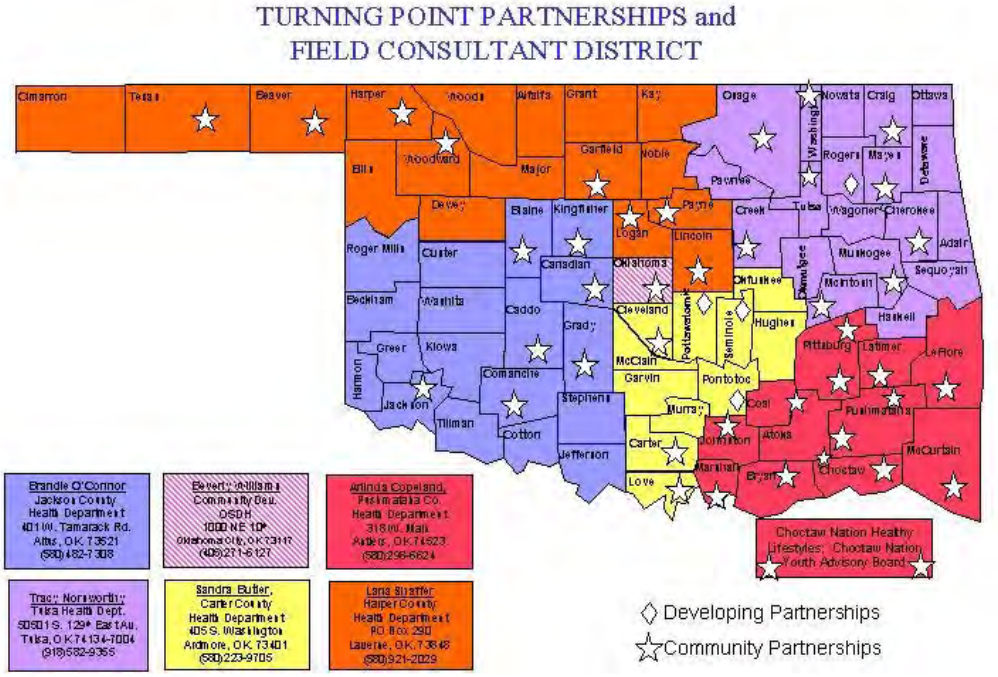
State of the County's Health Report

A Look Back To Move Forward

Dewey County

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

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



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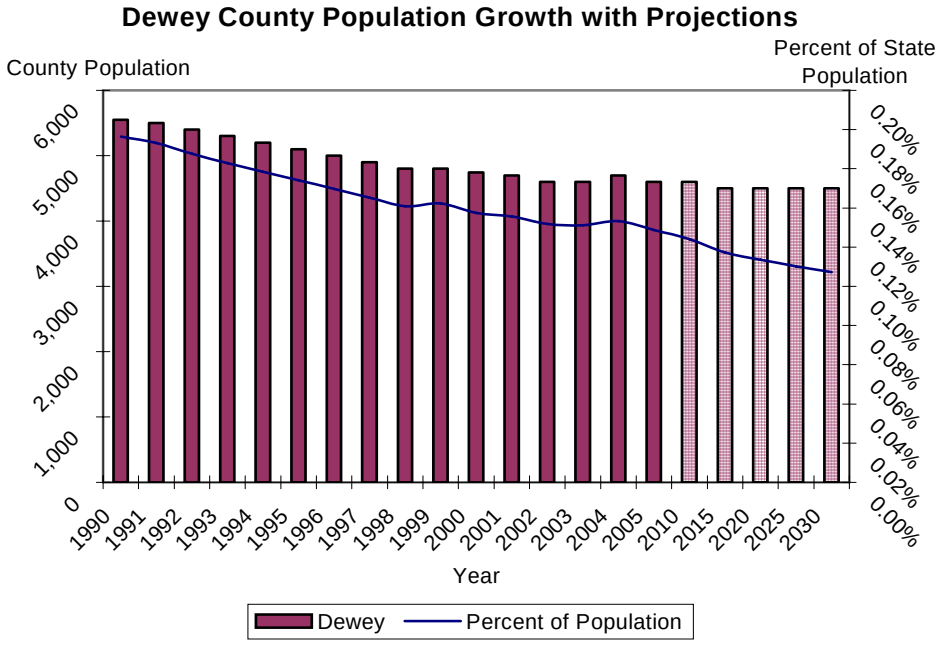
Demographics

** U.S. Census Bureau*

- Population estimates
  - 15% decrease from 1990 to 2000 (5,551 to 4,743)
  - 1% decrease from 2000 to 2004
  - Ranked 56th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 92%
  - Native Americans =5%
  - Blacks =0%
  - Other/Multiple = 3%
- Age
  - Under 5 = 5%
  - Over 64 = 21%
  - Median age = 43.0 years
- Housing units
  - Occupied = 1,962 (81%)
  - Vacant = 463 (19%)
- Disability (ages 21 to 64) = 20.5% national = 19.2% state = 21.5%
- Individuals below poverty = 15.0% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Dewey County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 294 people in Dewey County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 23.4 deaths a year, heart disease accounts for almost $8 million a year in medical costs in Dewey County.

Heart disease accounts for almost $8 million a year in medical costs in Dewey County.

Alzheimer's disease and the complications associated with it have increased from the 13th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 300% increase in deaths.

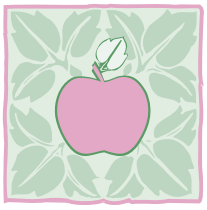
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 27.5% (1,251) of people in Dewey County were considered obese which accounted for an additional $494,145 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Dewey County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 3	UNINTENT. INJURY 2	UNINTENT. INJURY 7	UNINTENT. INJURY 5	HEART DISEASE 6	CANCER 6	CANCER 30	HEART DISEASE 222	HEART DISEASE 257
2	PERINATAL PERIOD 2	HOMICIDE/ LEGAL 1	HEART DISEASE 1	CANCER 1	UNINTENT. INJURY 3	HEART DISEASE 6	HEART DISEASE 20	CANCER 159	CANCER 199
3	SIDS 2		INFLUENZA/ PNEUMONIA 1	DIABETES MELLITUS 1	CANCER 2	ATHERO-SCLEROSIS 2	ATHERO-SCLEROSIS 5	STROKE 107	STROKE 113
4	UNINTENT. INJURY 2			HEART DISEASE 1	DIABETES MELLITUS 1	KIDNEY DISEASE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 5	ATHERO-SCLEROSIS 59	ATHERO-SCLEROSIS 66
5	CANCER 1			HOMICIDE/ LEGAL 1	LIVER DISEASE 1	LIVER DISEASE 2	STROKE 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 39	BRONCHITIS/ EMPHYSEMA/ ASTHMA 44
6	HEART DISEASE 1			SUICIDE 1	SEPTICEMIA (BLOOD POISONING) 1	UNINTENT. INJURY 2	UNINTENT. INJURY 4	DIABETES MELLITUS 28	UNINTENT. INJURY 42
7	OTHER 4			OTHER 1	SUICIDE 1	HOMICIDE/ LEGAL 1	DIABETES MELLITUS 2	INFLUENZA/ PNEUMONIA 23	DIABETES MELLITUS 32
8					OTHER 4	SEPTICEMIA (BLOOD POISONING) 1	SIX CAUSES TIED 1	UNINTENT. INJURY 17	INFLUENZA/ PNEUMONIA 24
9						STROKE 1		KIDNEY DISEASE 16	KIDNEY DISEASE 19
10						SUICIDE 1		ALZHEIMER'S DISEASE 12	ALZHEIMER'S DISEASE 13

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

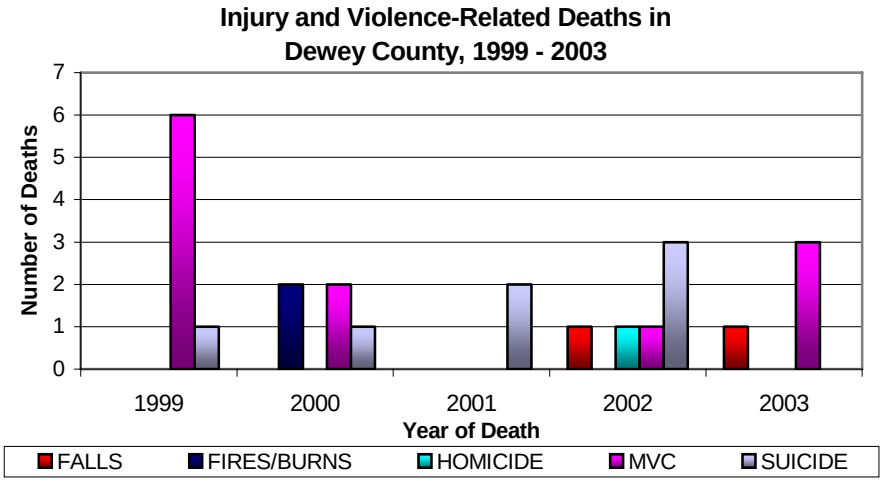
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Dewey County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Dewey County which has an average of 2.4 motor vehicle-related deaths a year, that translates to almost $3 million a year.

Violence-related injuries (homicide and suicide) in Dewey County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



*No homicides/legal intervention or poisoning deaths occurred during this time period

Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 27.3% (1,242) of people in Dewey County use tobacco of some sort. Medical costs accumulated by those persons are over $4 million a year for Dewey County.

> *"Medical costs accumulated by those persons are over **$4 million a year** for Dewey County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 29.4% (1,337) of people in Dewey County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 1.6% (73) of Dewey County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $966,739.00 in one year for Dewey County.

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

Teen Pregnancy

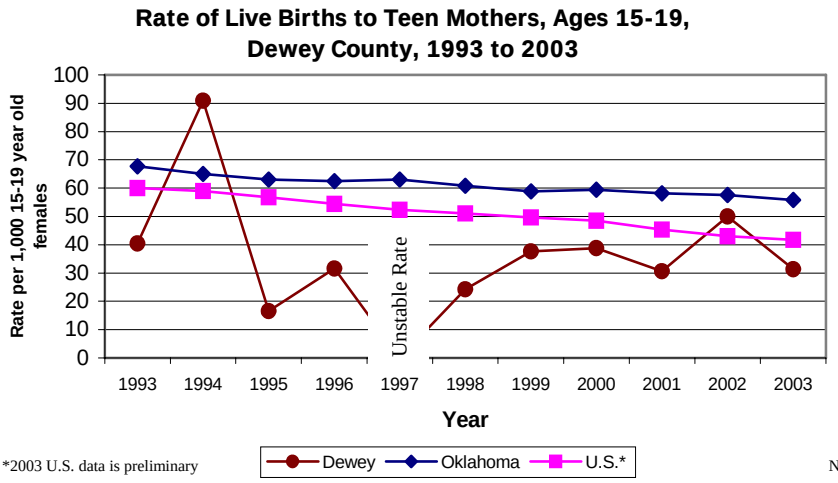
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Dewey County had a teen birth rate of 31.4 in 2003 which was a 37% decrease from 2002 (50) and a 22% decrease since 1993 (40.5).

With an average of 7 births per year, teen pregnancy costs the citizens of Dewey County $22,400.00 a year.



*2003 U.S. data is preliminary

Note: 0 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 15.0% of persons in Dewey County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Dewey County is 2% above the state (14.7%) and 21% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Dewey County, 2000 Census

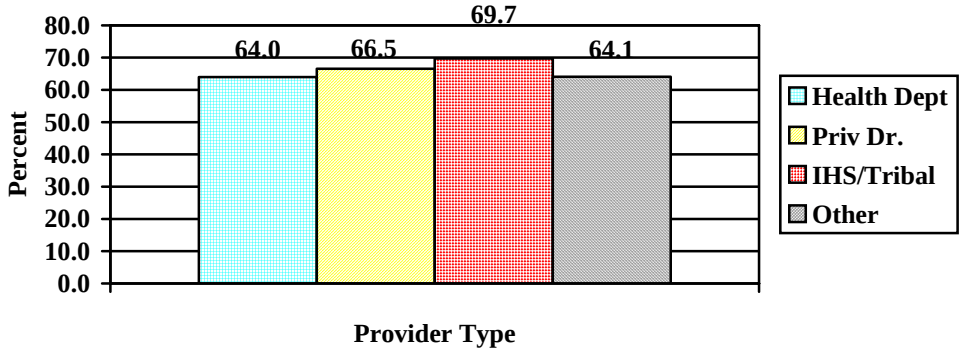
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	4,594	257	430	667	628	2,612
Cumulative Population		257	687	1,354	1,982	4,594
% of Total	100.0%	5.6%	9.4%	14.5%	13.7%	56.9%
Cumulative %		5.6%	15.0%	29.5%	43.1%	100.0%

OK By One - State Immunization Data

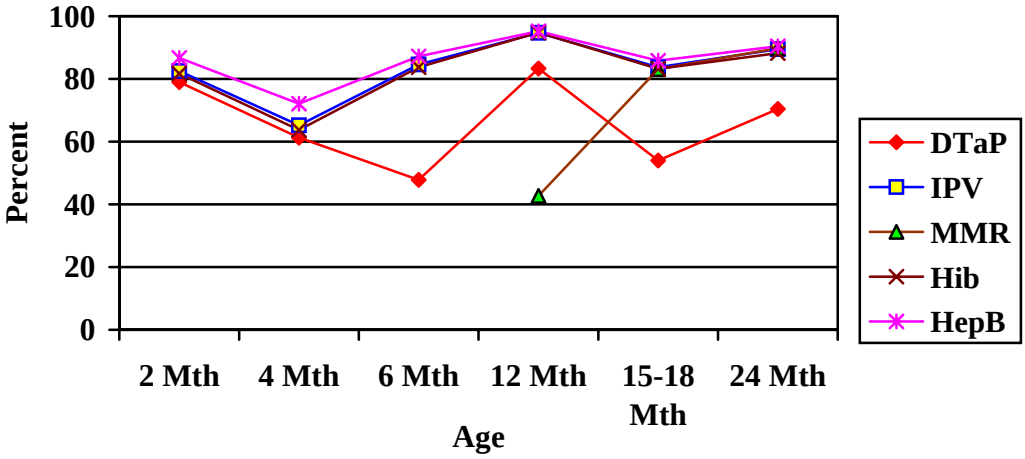
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

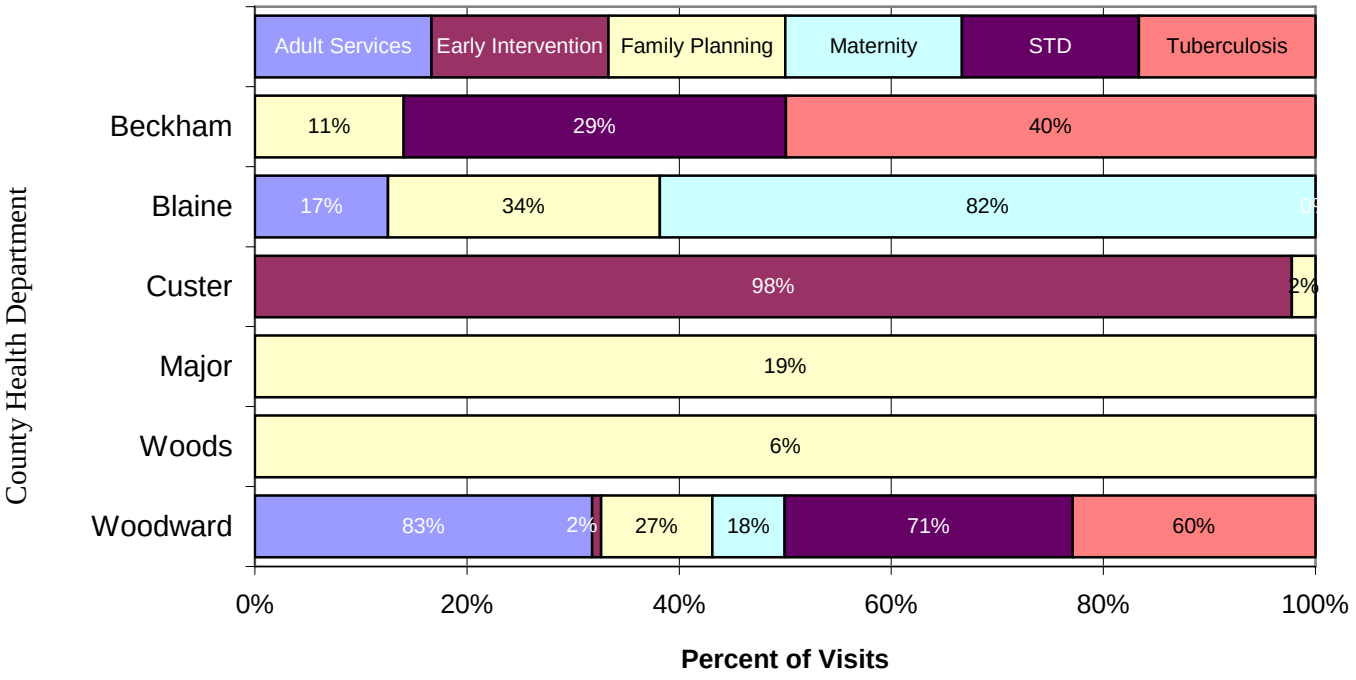


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services, OSDH*

Dewey County Resident Visits to County Health Departments by Health Service, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 23 deaths a year
- $369,476.69 per death
- Total— $8,497,963.87 a year

Obesity

- 27.5% of population (1,251)
- $395.00 in additional medical costs per person
- Total—$494,145.00

Motor Vehicle-Related Injury Death

- Average 2.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,688,000.00 a year

Tobacco Use

- 27.3% of population (1,242)
- $3,300.00 in health care costs
- Total - $4,098,600.00 a year

Diabetes

- 1.6% of population (73)
- $13,243.00 in healthcare costs a year
- Total—$966,739.00 a year

Teen Pregnancy

- Average of 7 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $22,400.00 a year

Grand Total for Dewey County:

$5,505,966.90

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Room 508
Oklahoma City, OK 73117
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Looking Back to Move Forward

Report compiled by:
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Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

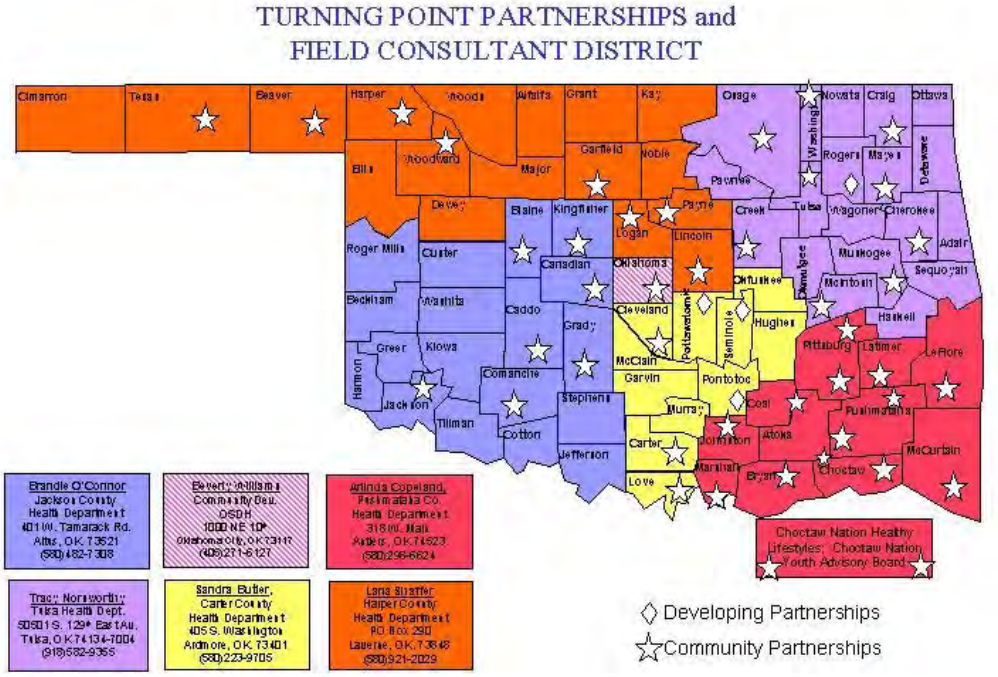
State of the County's Health Report

A Look Back To Move Forward

Ellis County

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

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



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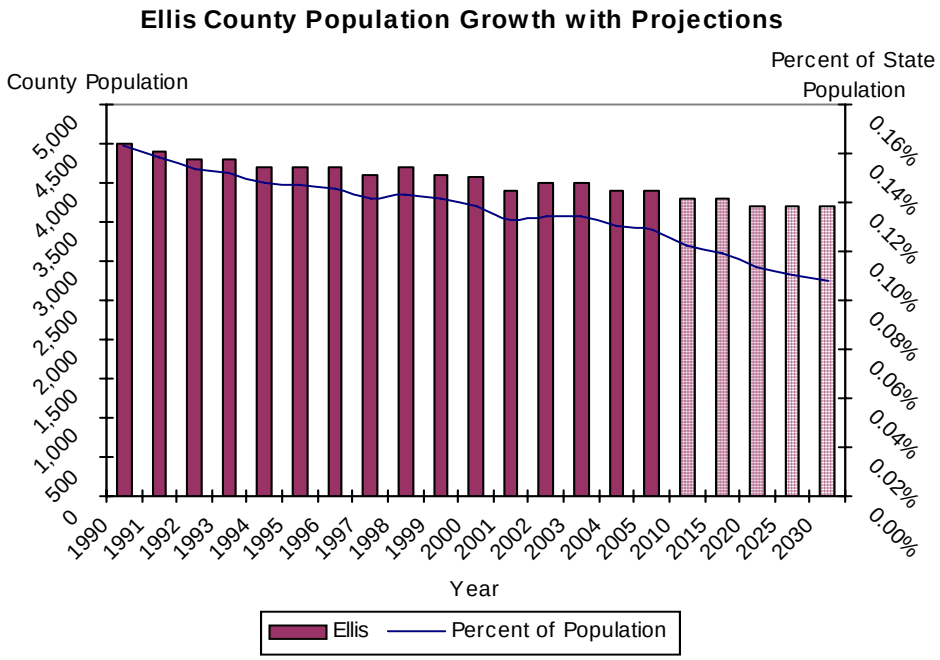
Demographics

** U.S. Census Bureau*

- Population estimates
  - 9% decrease from 1990 to 2000 (4,497 to 4,075)
  - 4% decrease from 2000 to 2004
  - Ranked 64th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 96%
  - Native Americans =1%
  - Blacks =0%
  - Other/Multiple = 2%
- Age
  - Under 5 = 5%
  - Over 64 = 22%
  - Median age = 45.3 years
- Housing units
  - Occupied = 1,769 (82%)
  - Vacant = 377 (18%)
- Disability (ages 21 to 64) = 23.7% national = 19.2% state = 21.5%
- Individuals below poverty = 12.5% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Ellis County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 281 people in Ellis County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 20.2 deaths a year, heart disease accounts for over $7 million a year in medical costs in Ellis County.

Heart disease accounts for over $7 million a year in medical costs in Ellis County.

Alzheimer's disease and the complications associated with it have increased from the 8th ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 133% increase in deaths.

Nutrition and Obesity

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

No Data Available At This Time

Top 10 Causes of Death by Age Group

Ellis County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 2		UNINTENT. INJURY 4	UNINTENT. INJURY 3	UNINTENT. INJURY 5	CANCER 5	HEART DISEASE 21	HEART DISEASE 195	HEART DISEASE 222
2	CANCER 1			CANCER 1	CANCER 2	HEART DISEASE 4	CANCER 20	CANCER 100	CANCER 129
3	CONGENITAL ANOMALIES 1			HOMICIDE/ LEGAL 1	HEART DISEASE 2	UNINTENT. INJURY 4	NON-CANCEROUS TUMOR 2	STROKE 56	STROKE 57
4	UNINTENT. INJURY 1				OTHER 1	DIABETES MELLITUS 3	KIDNEY DISEASE 2	INFLUENZA/ PNEUMONIA 30	INFLUENZA/ PNEUMONIA 31
5						BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	EIGHT CAUSES TIED 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 19	UNINTENT. INJURY 31
6						OTHER 4		ALZHEIMER'S DISEASE 14	BRONCHITIS/ EMPHYSEMA/ ASTHMA 21
7								DIABETES MELLITUS 14	DIABETES MELLITUS 18
8								UNINTENT. INJURY 13	ALZHEIMER'S DISEASE 14
9								ATHERO-SCLEROSIS 9	KIDNEY DISEASE 11
10								KIDNEY DISEASE 9	ATHERO-SCLEROSIS 9

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

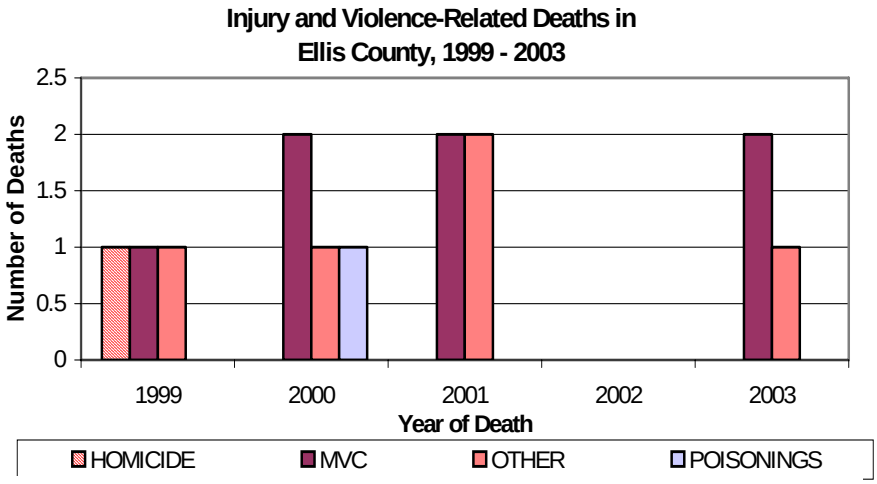
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Ellis County. Unintentional injuries are the leading cause of death from ages 15 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Ellis County which has an average of 1.4 motor vehicle-related deaths a year, that translates to almost $2 million a year.

Violence-related injuries (homicide and suicide) in Ellis County are ranked in the top 10 in one of the eight age groups (see Top 10 list on page 3).



*No fire/burn or homicides/legal intervention deaths occurred during this time period

Tobacco Use

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

No Data Available At This Time

Physical Activity, Wellness and Diabetes

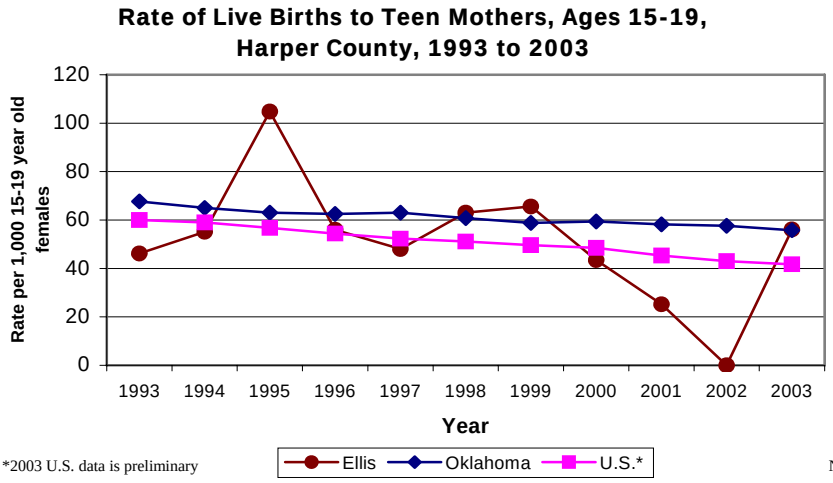
* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

No Data Available At This Time

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 2 births to a mother 10-14 years of age occurred during the 11 year period.

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

According to Oklahoma Vital Statistics, Ellis County had a teen birth rate of 56.1 in 2003 which was a #VALUE! decrease from 2002 (.) and a 21% increase since 1993 (46.2).

With an average of 6 births per year, teen pregnancy costs the citizens of Ellis County $19,200.00 a year.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 12.5% of persons in Ellis County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Ellis County is 15% below the state (14.7%) and 1% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Ellis County, 2000 Census

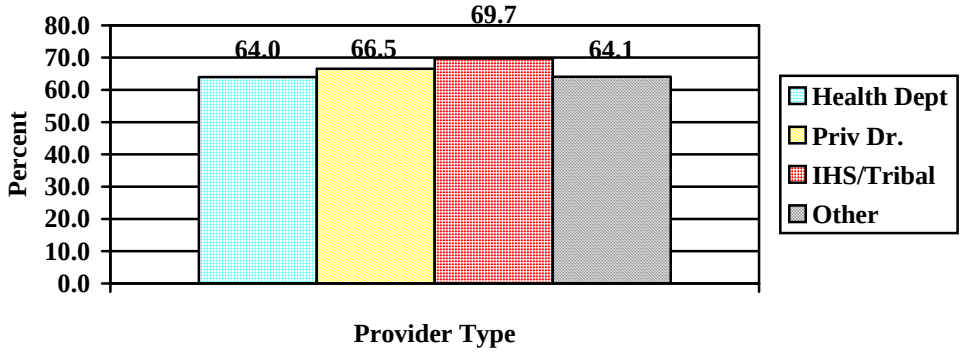
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	4,009	205	296	495	531	2,482
Cumulative Population		205	501	996	1,527	4,009
% of Total	100.0%	5.1%	7.4%	12.3%	13.2%	61.9%
Cumulative %		5.1%	12.5%	24.8%	38.1%	100.0%

OK By One - State Immunization Data

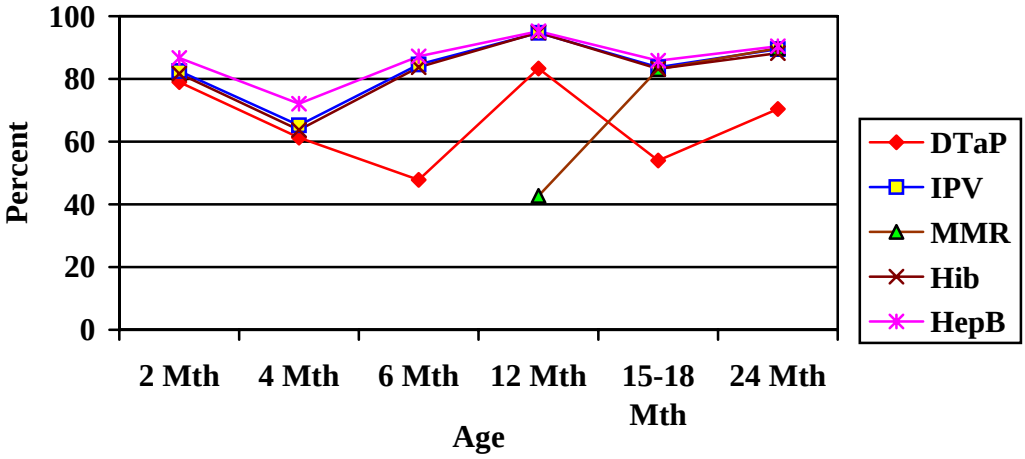
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



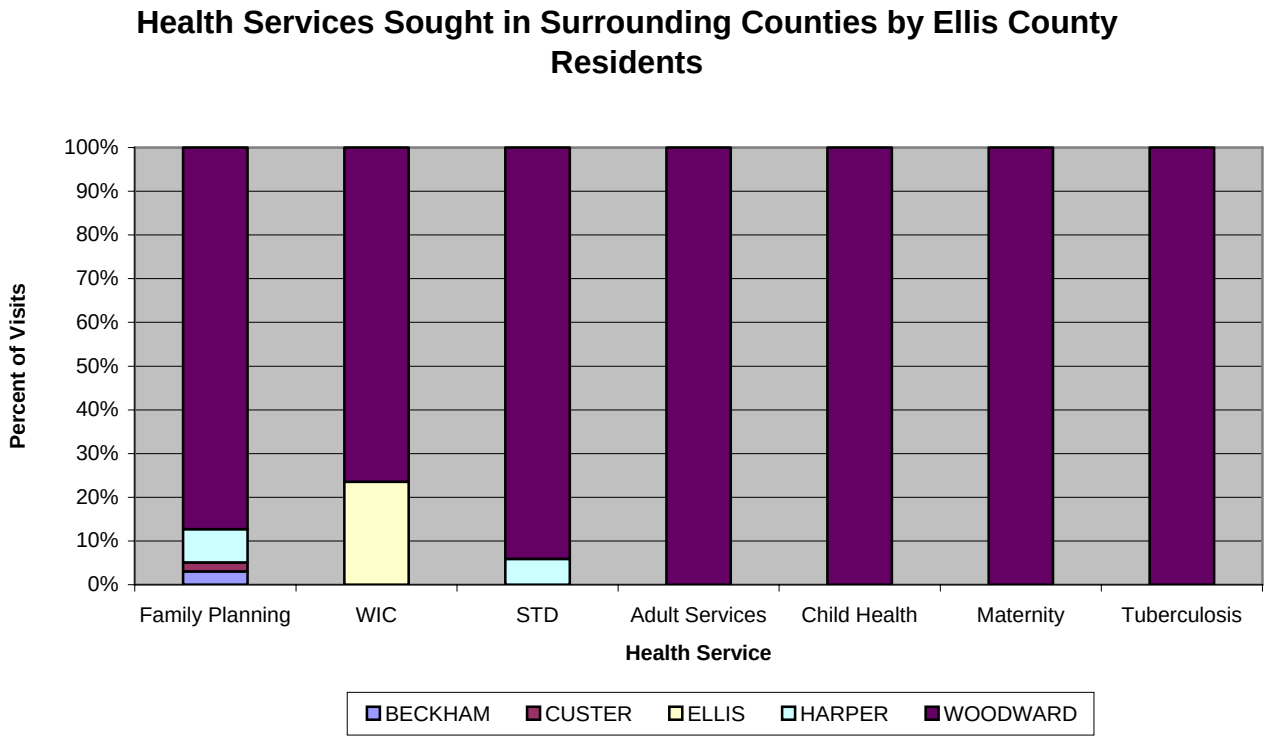
Oklahoma Children On Schedule by Antigen, 2004



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

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 20 deaths a year
- $369,476.69 per death
- Total— $7,389,533.80 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 1.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$1,568,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 6 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $19,200.00 a year

Grand Total for Ellis County:

$8,976,733.80

OKLAHOMA STATE DEPARTMENT OF HEALTH

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Community Development Service

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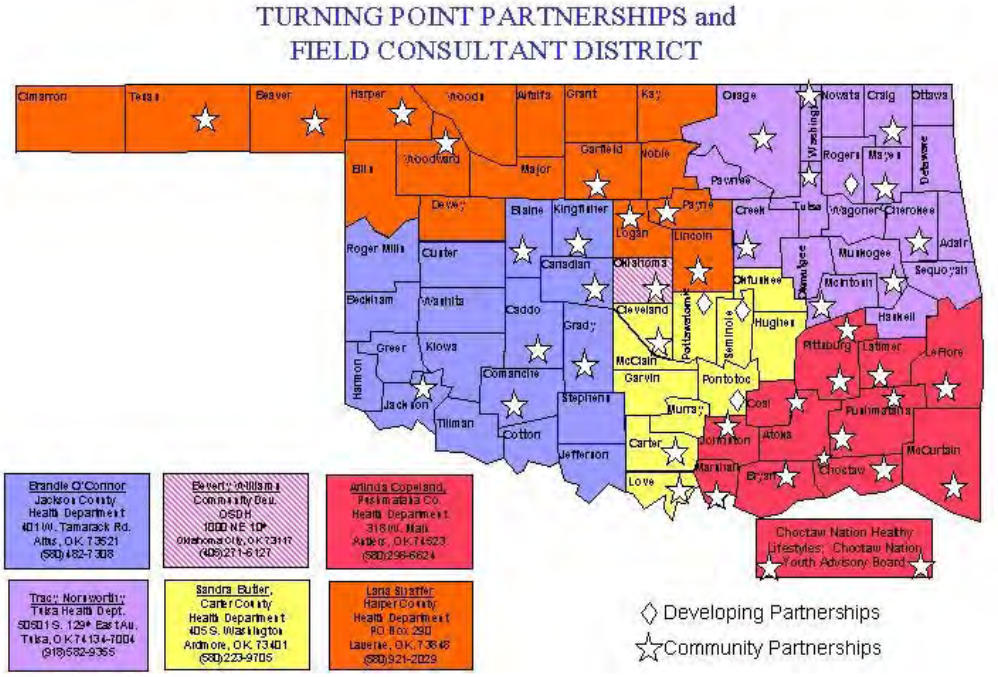

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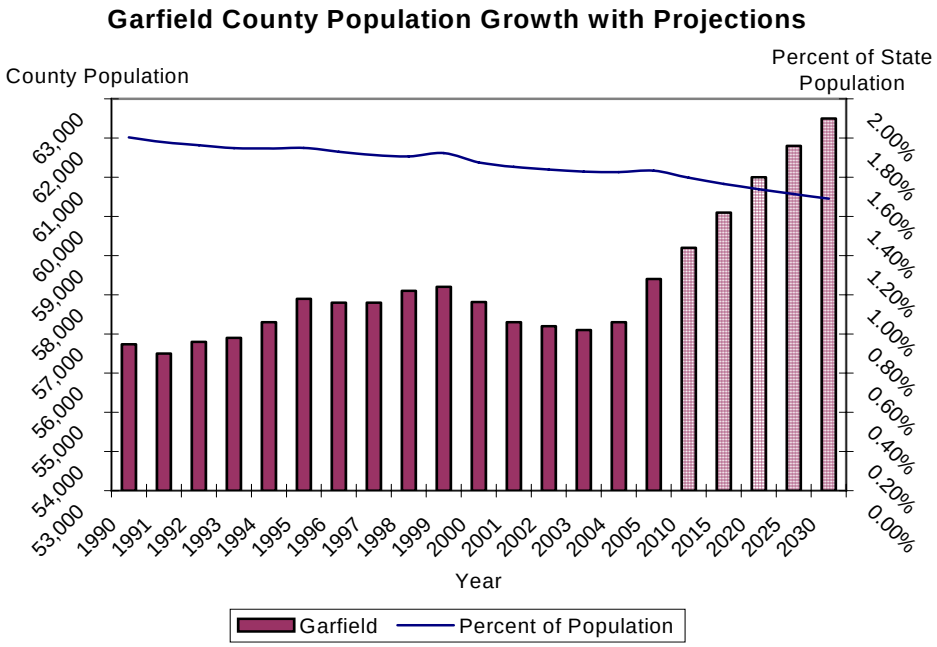
Demographics

** U.S. Census Bureau*

- Population estimates
  - 2% increase from 1990 to 2000 (56,735 to 57,813)
  - 1% decrease from 2000 to 2004
  - Ranked 49th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 89%
  - Native Americans =2%
  - Blacks =3%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 16%
  - Median age = 37.7 years
- Housing units
  - Occupied = 23,175 (89%)
  - Vacant = 2,872 (11%)
- Disability (ages 21 to 64) = 21.0% national = 19.2% state = 21.5%
- Individuals below poverty = 13.9% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Garfield County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,353 people in Garfield County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 203.5 deaths a year, heart disease accounts for over $75 million a year in medical costs in Garfield County.

Heart disease accounts for over $75 million a year in medical costs in Garfield County.

Alzheimer's disease and the complications associated with it have increased from the 12th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 169% increase in deaths.

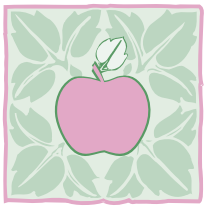
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 26.1% (14,904) of people in Garfield County were considered obese which accounted for an additional $5,887,080 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Garfield County 1993-2003

RANK	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 34	UNINTENT. INJURY 10	UNINTENT. INJURY 37	UNINTENT. INJURY 28	CANCER 45	HEART DISEASE 107	CANCER 244	HEART DISEASE 1877	HEART DISEASE 2240
2	CONGENITAL ANOMALIES 19	HOMICIDE/ LEGAL 2	SUICIDE 17	SUICIDE 15	HEART DISEASE 44	CANCER 102	HEART DISEASE 197	CANCER 1041	CANCER 1449
3	SIDS 13	CANCER 1	CANCER 6	CANCER 10	UNINTENT. INJURY 36	UNINTENT. INJURY 26	BRONCHITIS/ EMPHYSEMA/ ASTHMA 42	STROKE 603	STROKE 652
4	UNINTENT. INJURY 12	LIVER DISEASE 1	HEART DISEASE 4	HOMICIDE/ LEGAL 8	SUICIDE 18	LIVER DISEASE 18	DIABETES MELLITUS 32	BRONCHITIS/ EMPHYSEMA/ ASTHMA 359	BRONCHITIS/ EMPHYSEMA/ ASTHMA 410
5	HEART DISEASE 5	PEPTIC ULCER 1	HOMICIDE/ LEGAL 4	HEART DISEASE 5	HIV 10	DIABETES MELLITUS 14	STROKE 32	INFLUENZA/ PNEUMONIA 273	INFLUENZA/ PNEUMONIA 301
6	HOMICIDE/ LEGAL 4	SUICIDE 1	DIABETES MELLITUS 2	HIV 5	LIVER DISEASE 10	SUICIDE 12	UNINTENT. INJURY 23	DIABETES MELLITUS 195	UNINTENT. INJURY 281
7	SEPTICEMIA (BLOOD POISONING) 2	OTHER 6	HIV 2	CONGENITAL ANOMALIES 3	HOMICIDE/ LEGAL 9	INFLUENZA/ PNEUMONIA 10	LIVER DISEASE 14	PNEUMONITIS 110	DIABETES MELLITUS 251
8	ACUTE BRONCHITIS 1		STROKE 1	SIX CAUSES TIED 1	STROKE 8	STROKE 8	INFLUENZA/ PNEUMONIA 12	UNINTENT. INJURY 109	PNEUMONITIS 116
9	KIDNEY DISEASE 1		KIDNEY DISEASE 1		DIABETES MELLITUS 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	SUICIDE 9	ALZHEIMER'S DISEASE 78	SUICIDE 91
10	OTHER 15		OTHER 7		INFLUENZA/ PNEUMONIA 5	SEPTICEMIA (BLOOD POISONING) 5	KIDNEY DISEASE 8	KIDNEY DISEASE 78	KIDNEY DISEASE 90

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

Jul-05

Injury and Violence

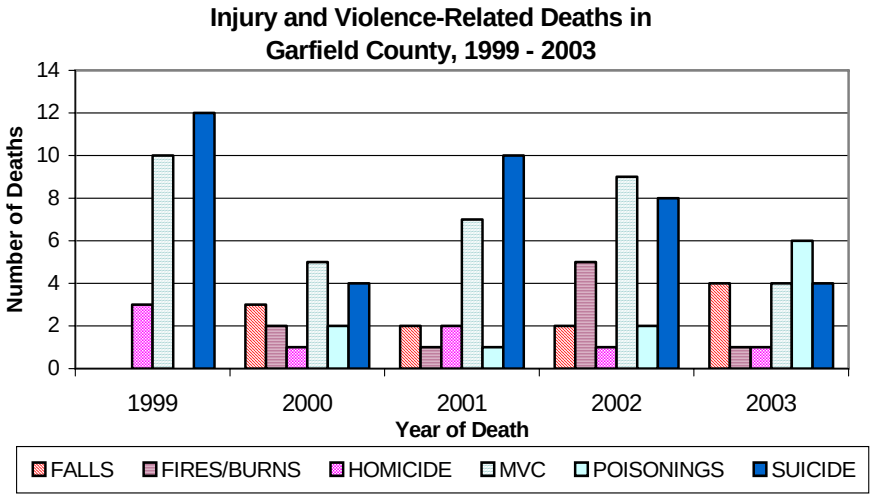
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Garfield County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Garfield County which has an average of 7 motor vehicle-related deaths a year, that translates to almost $8 million a year.

Violence-related injuries (homicide and suicide) in Garfield County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 27.9% (15,932) of people in Garfield County use tobacco of some sort. Medical costs accumulated by those persons are almost $53 million a year for Garfield County.

> *"Medical costs accumulated by those persons are almost **$53 million a year** for Garfield County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 26.5% (15,133) of people in Garfield County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.9% (3,940) of Garfield County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $52,177,420.00 in one year for Garfield County.

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

Teen Pregnancy

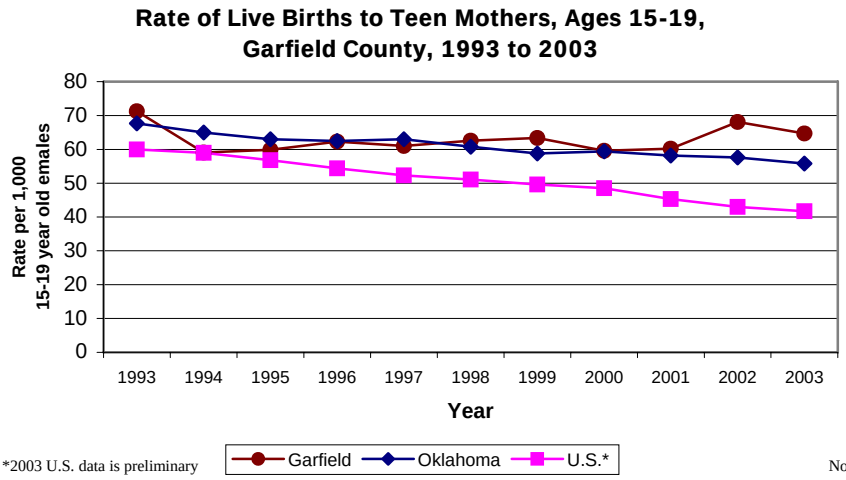
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Garfield County had a teen birth rate of 64.7 in 2003 which was a 5% decrease from 2002 (68.1) but a 9% decrease since 1993 (71.3).

With an average of 123 births per year, teen pregnancy costs the citizens of Garfield County $393,600.00 a year.



*2003 U.S. data is preliminary

Note: 17 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 13.9% of persons in Garfield County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Garfield County is 5% below the state (14.7%) and 12% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Garfield County, 2000 Census

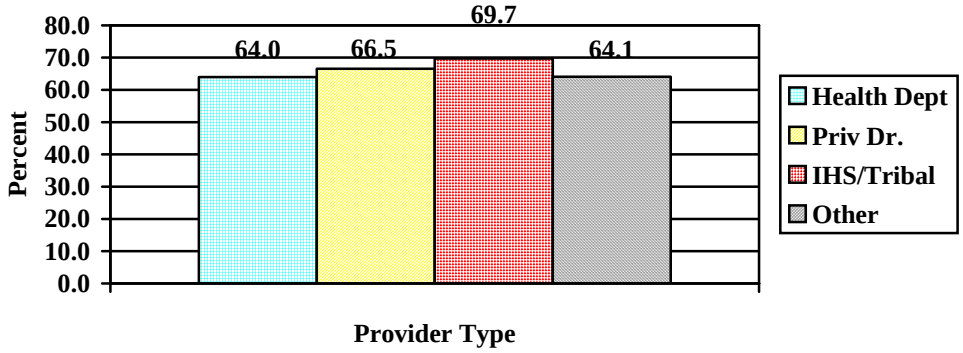
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	56,134	3,123	4,697	5,668	6,894	35,752
Cumulative Population		3,123	7,820	13,488	20,382	56,134
% of Total	100.0%	5.6%	8.4%	10.1%	12.3%	63.7%
Cumulative %		5.6%	13.9%	24.0%	36.3%	100.0%

OK By One - State Immunization Data

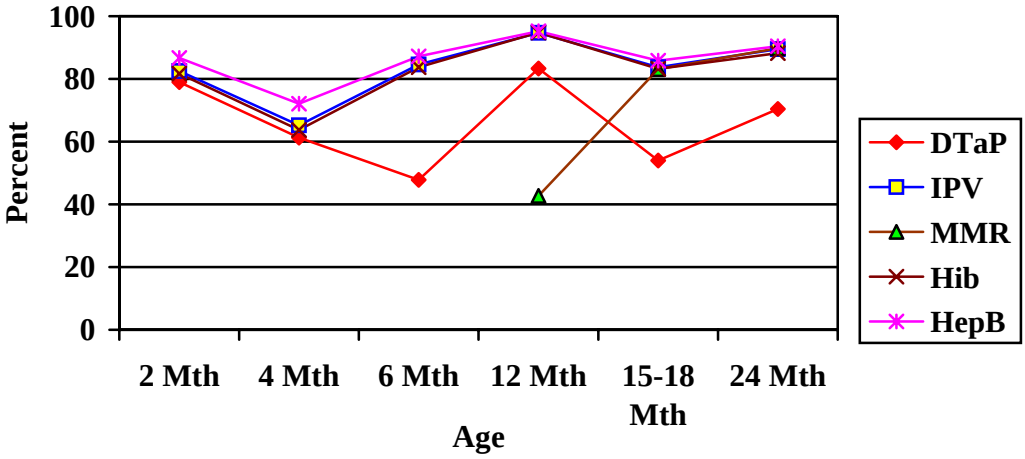
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

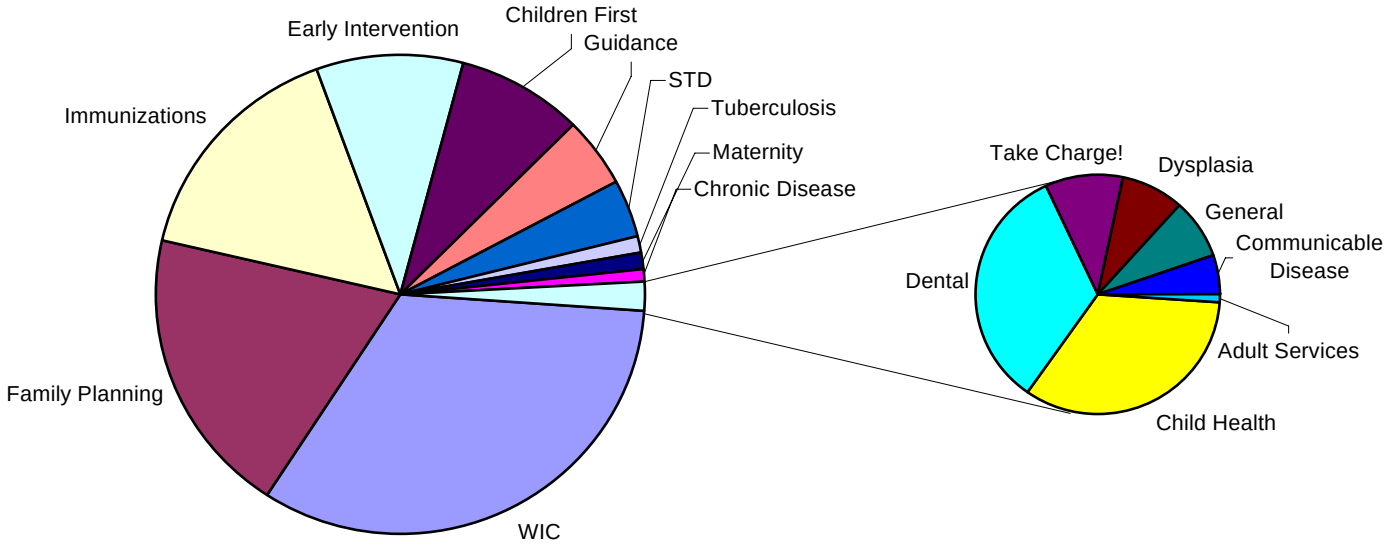


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 204 deaths a year
- $369,476.69 per death
- Total— $75,373,244.76 a year

Obesity

- 26.1% of population (14,904)
- $395.00 in additional medical costs per person
- Total—$5,887,080.00

Motor Vehicle-Related Injury Death

- Average 7 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$7,840,000.00 a year

Tobacco Use

- 27.9% of population (15,932)
- $3,300.00 in health care costs
- Total—$52,575,600.00 a year

Diabetes

- 6.9% of population (3,940)
- $13,243.00 in healthcare costs a year
- Total—$52,177,420.00 a year

Teen Pregnancy

- Average of 123 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $393,600.00 a year

Grand Total for Garfield County:

$194,246,944.76

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Garfield County Health Department
2501 Mercer Dr
PO Box 3266
Enid, Oklahoma 73702
580-238-7346

Looking Back to Move Forward

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

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Enid Metro. Area Human Service Commission

We want to say thank you to all the members of the
Enid Metro. Area Human Service Commission

- Advance Foods
- City of Enid
- Community Development Support Association
- County of Garfield
- Department of Human Services
- Enid Chamber of Commerce
- Enid Development Alliance
- Enid Family Medicine Clinic
- Enid Public Schools
- Garfield County Health Department
- INTEGRIS Bass Baptist Hospital
- Northern Oklahoma College
- Northern Oklahoma Resource Center
- Northwest Oklahoma Osteopathic Foundation
- Northwestern Oklahoma State University
- Oklahoma Blood Institute
- Oklahoma Employment Security Commission
- United Way of Enid and Northwest Oklahoma
- Youth & Family Services

OKLAHOMA STATE DEPARTMENT OF HEALTH

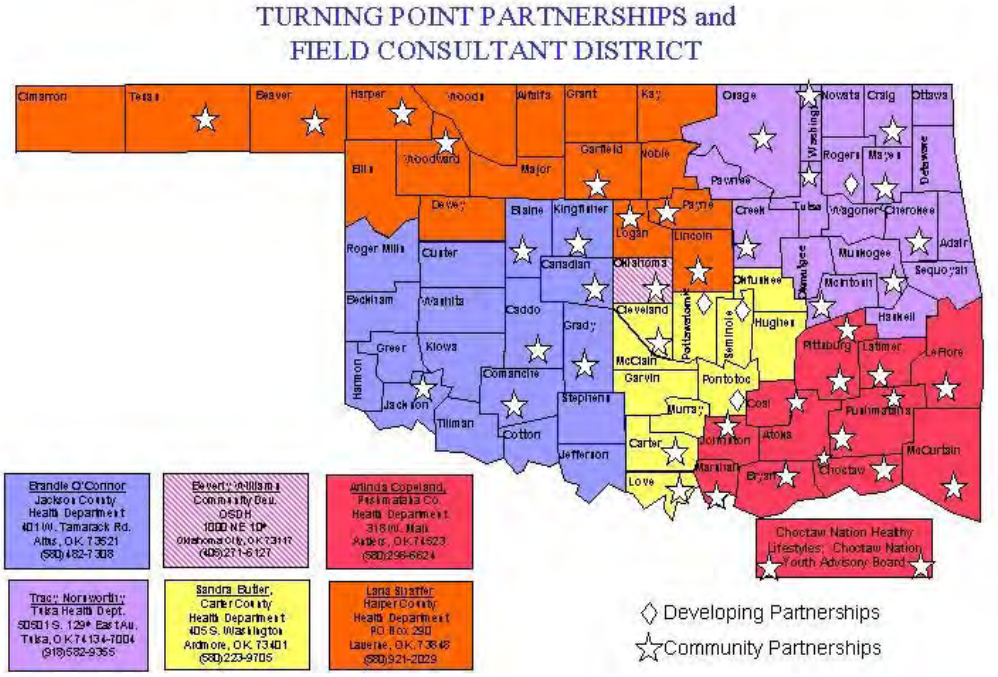
State of the County's Health Report

A Look Back To Move Forward

Grady County

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

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



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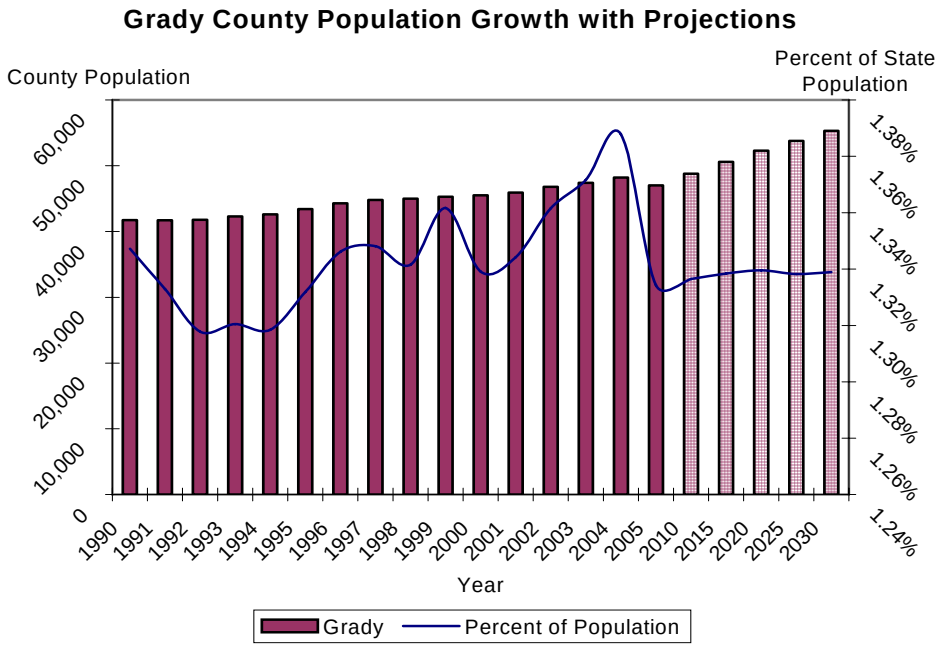
Demographics

- Population estimates
  - 9% increase from 1990 to 2000 (41,747 to 45,516)
  - 6% increase from 2000 to 2004
  - Ranked 6th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 87%
  - Native Americans =«Indian %»
  - Blacks =3%
  - Other/Multiple = 5%
- Age
  - Under 5 = 7%
  - Over 64 = 13%
  - Median age = 36.5 years
- Housing units
  - Occupied = 17,341 (89%)
  - Vacant = 2,103 (11%)
- Disability (ages 21 to 64) = 23.1% national = 19.2% state = 21.5%
- Individuals below poverty = 13.9% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Grady County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,569 people in Grady County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 163.8 deaths a year, heart disease accounts for almost $61 million a year in medical costs in Grady County.

Heart disease accounts for almost $61 million a year in medical costs in GradyCounty.

Alzheimer's disease and the complications associated with it have increased from the 12th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 235% increase in deaths.

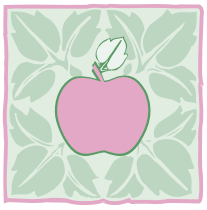
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 25.4% (12,050) of people in Grady County were considered obese which accounted for an additional $4,759,750 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Grady County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 18	UNINTENT. INJURY 12	UNINTENT. INJURY 45	UNINTENT. INJURY 29	UNINTENT. INJURY 40	CANCER 94	HEART DISEASE 198	HEART DISEASE 1464	HEART DISEASE 1802
2	CONGENITAL ANOMALIES 11	CANCER 4	SUICIDE 14	SUICIDE 17	HEART DISEASE 36	HEART DISEASE 88	CANCER 167	CANCER 753	CANCER 1060
3	UNINTENT. INJURY 11	HOMICIDE/ LEGAL 2	HEART DISEASE 8	HOMICIDE/ LEGAL 13	CANCER 32	UNINTENT. INJURY 25	BRONCHITIS/ EMPHYSEMA/ ASTHMA 28	STROKE 381	STROKE 402
4	HEART DISEASE 2	HEART DISEASE 1	HOMICIDE/ LEGAL 7	HIV 6	SUICIDE 14	SUICIDE 14	UNINTENT. INJURY 17	BRONCHITIS/ EMPHYSEMA/ ASTHMA 218	BRONCHITIS/ EMPHYSEMA/ ASTHMA 255
5	HOMICIDE/ LEGAL 2	INFLUENZA/ PNEUMONIA 1	CANCER 4	CANCER 6	HOMICIDE/ LEGAL 10	DIABETES MELLITUS 12	STROKE 11	INFLUENZA/ PNEUMONIA 136	UNINTENT. INJURY 253
6	SIDS 2	OTHER 1	CONGENITAL ANOMALIES 1	HEART DISEASE 5	LIVER DISEASE 6	LIVER DISEASE 9	DIABETES MELLITUS 11	DIABETES MELLITUS 82	INFLUENZA/ PNEUMONIA 154
7	INFLUENZA/ PNEUMONIA 1		STROKE 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	DIABETES MELLITUS 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 6	INFLUENZA/ PNEUMONIA 11	UNINTENT. INJURY 74	DIABETES MELLITUS 112
8	MENINGITIS 1		DIABETES 1	STROKE 1	STROKE 4	STROKE 4	SUICIDE 11	ATHERO-SCLEROSIS 64	SUICIDE 79
9	OTHER 14		OTHER 9	CONGENITAL ANOMALIES 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	INFLUENZA/ PNEUMONIA 4	LIVER DISEASE 8	BLOOD POISONING 63	BLOOD POISONING 74
10				FOUR CAUSES TIED 1	HIV 2	BLOOD POISONING 4	BLOOD POISONING 7	ALZHEIMER'S 57	ATHERO-SCLEROSIS 69

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Services, Oklahoma State Department of Health July 2005

Injury and Violence

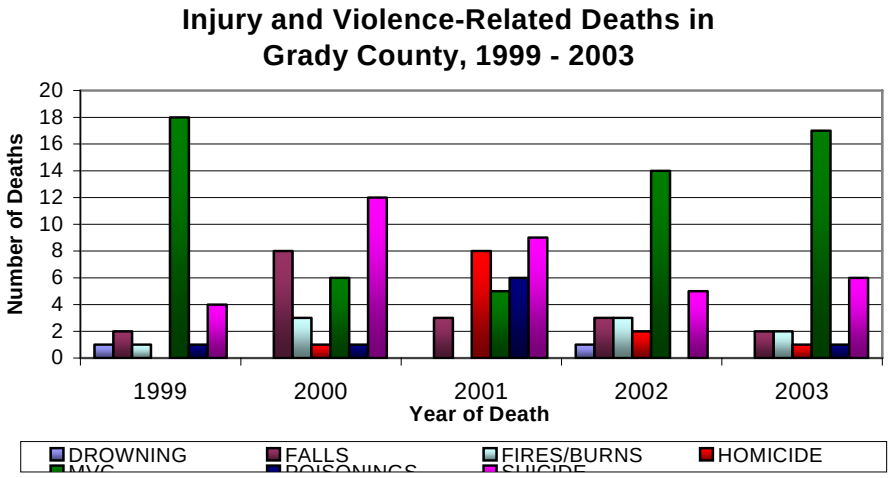
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Grady County which has an average of 12 motor vehicle-related deaths a year, that translates to over $13 million a year.

Violence-related injuries (homicide and suicide) in Grady County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 23.3% (11,053) of people in Grady County use tobacco of some sort. Medical costs accumulated by those persons are over $36 million a year for Grady County.

> *"Medical costs accumulated by those persons are over **$36 million a year** for Grady County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 26.7% (12,666) of people in Grady County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.7% (3,653) of Grady County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $48,376,679.00 in one year for Grady County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

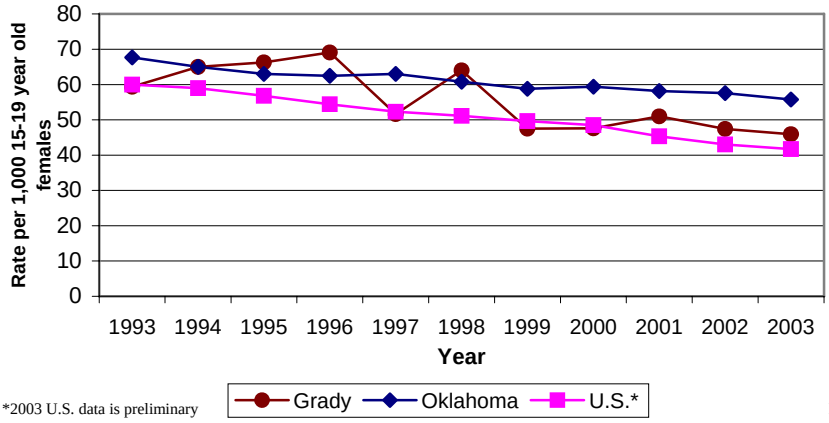
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Grady County had a teen birth rate of 45.9 in 2003 which was a 3% decrease from 2002 (47.4) and a 23% decrease since 1993 (59.4).

With an average of 97 births per year, teen pregnancy costs the citizens of Grady County $310,400.00 a year.

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



*2003 U.S. data is preliminary

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

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 13.9% of persons in Grady County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Grady County is 5% below the state (14.7%) and 12% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Grady County, 2000 Census

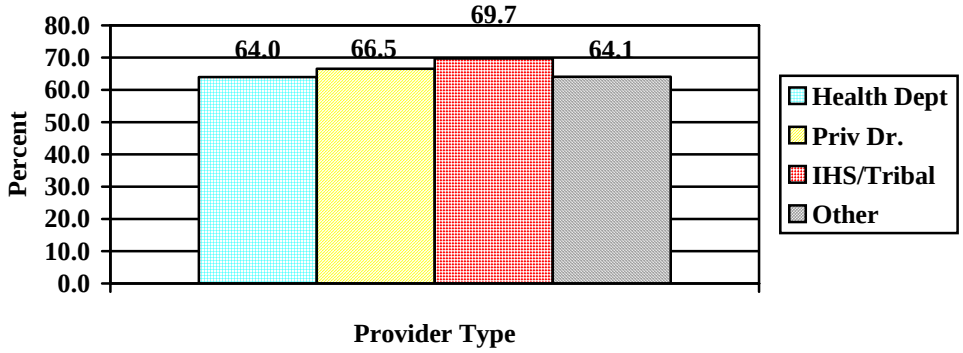
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	44,529	2,209	4,000	5,310	4,900	28,110
Cumulative Population		2,209	6,209	11,519	16,419	44,529
% of Total	100.0%	5.0%	9.0%	11.9%	11.0%	63.1%
Cumulative %		5.0%	13.9%	25.9%	36.9%	100.0%

OK By One - State Immunization Data

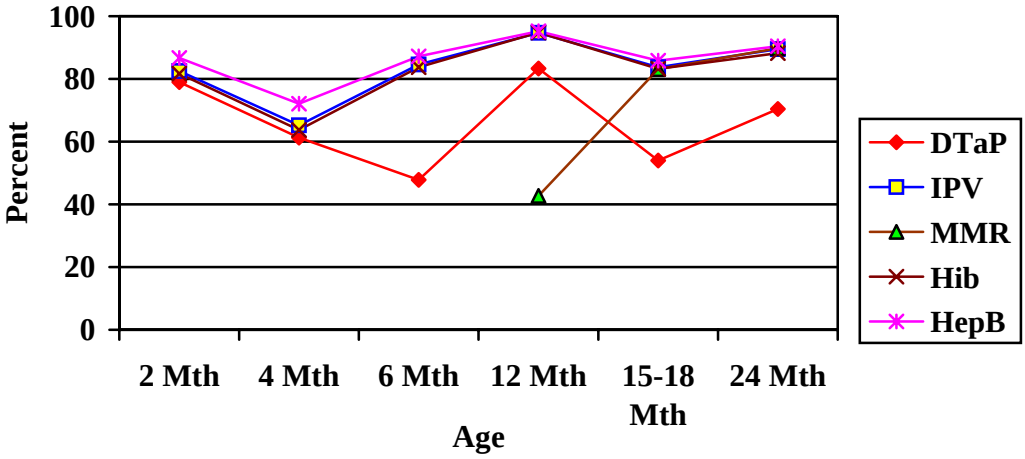
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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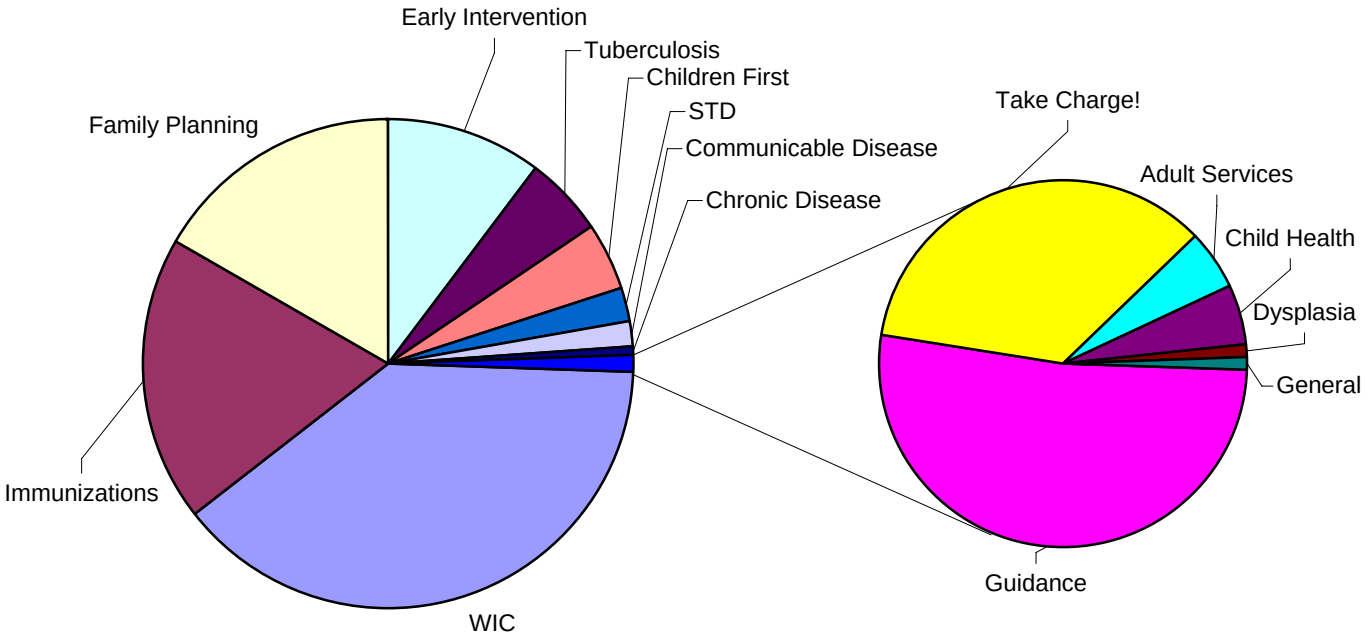

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 164 deaths a year
- $369,476.69 per death
- Total— $60,594,177.16 a year

Obesity

- 25.4% of population (12,050)
- $395.00 in additional medical costs per person
- Total—$4,759,750.00

Motor Vehicle-Related Injury Death

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

Tobacco Use

- 23.3% of population (11,053)
- $3,300.00 in health care costs
- Total—$36,474,900.00 a year

Diabetes

- 7.7% of population (3,653)
- $13,243.00 in healthcare costs a year
- Total—$48,376,679.00 a year

Teen Pregnancy

- Average of 97 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $310,400.00 a year

Grand Total for Grady County:

$163,955,906.16

Oklahoma Turning POINT

Oklahoma Community Partners in Public Health Innovation

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Grady County Health Department
2116 Iowa St
Chickasha, OK 73018
405-224-2022

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Get Fit Grady County

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- OSU Extension
- Canadian Valley Technology Center
- Grady County Health Department

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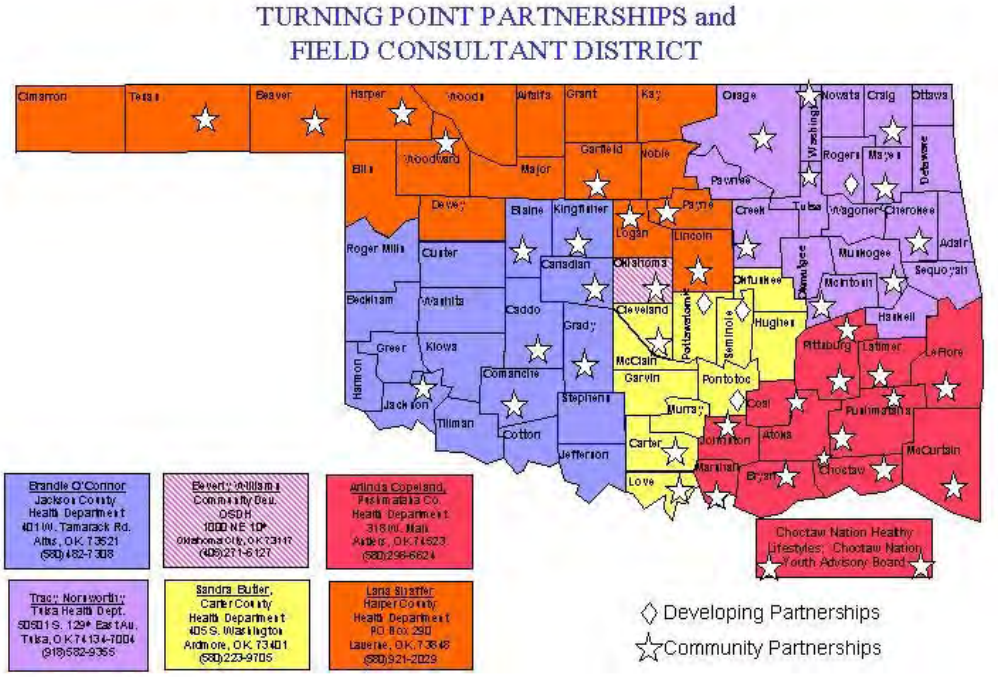

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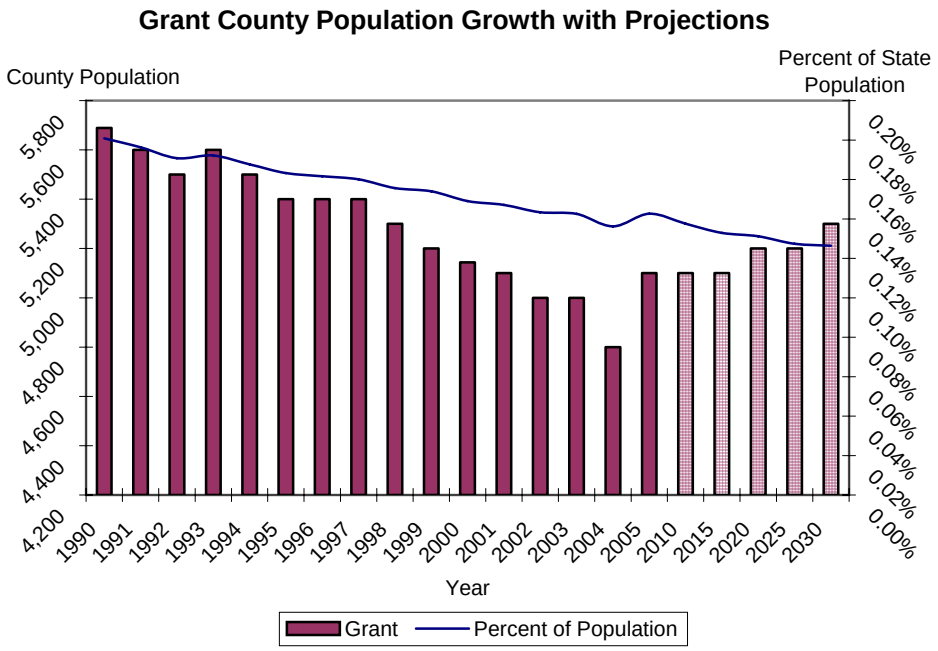
Demographics

** U.S. Census Bureau*

- Population estimates
  - 10% decrease from 1990 to 2000 (5,689 to 5,144)
  - 7% decrease from 2000 to 2004
  - Ranked 74th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 95%
  - Native Americans =2%
  - Blacks =0%
  - Other/Multiple = 2%
- Age
  - Under 5 = 5%
  - Over 64 = 21%
  - Median age = 41.4 years
- Housing units
  - Occupied = 2,089 (80%)
  - Vacant = 533 (20%)
- Disability (ages 21 to 64) = 16.9% national = 19.2% state = 21.5%
- Individuals below poverty = 13.7% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Grant County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 363 people in Grant County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 26.7 deaths a year, heart disease accounts for almost $10 million a year in medical costs in Grant County.

Heart disease accounts for almost $10 million a year in medical costs in Grant County.

Diabetes mellitus and the complications associated with it have increased from the 6th ranked cause of death (1983-1993) to the 5th ranked cause of death in persons 65 and older accounting for a 71% increase in deaths.

Nutrition and Obesity

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

No Data Available At This Time

Top 10 Causes of Death by Age Group

Grant County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 1	UNINTENT. INJURY 3	UNINTENT. INJURY 4	UNINTENT. INJURY 4	CANCER 3	CANCER 10	CANCER 19	HEART DISEASE 269	HEART DISEASE 295
2	UNINTENT. INJURY 1		OTHER 2	HIV 2	UNINTENT. INJURY 3	HEART DISEASE 5	HEART DISEASE 18	CANCER 125	CANCER 157
3	OTHER 2			DIABETES MELLITUS 1	HEART DISEASE 2	UNINTENT. INJURY 3	UNINTENT. INJURY 7	STROKE 53	STROKE 57
4				OTHER 3	STROKE 2	HOMICIDE/ LEGAL 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 34	UNINTENT. INJURY 48
5					DIABETES MELLITUS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	DIABETES MELLITUS 3	DIABETES MELLITUS 29	BRONCHITIS/ EMPHYSEMA/ ASTHMA 40
6					LIVER DISEASE 1	HIV 1	SUICIDE 3	UNINTENT. INJURY 23	DIABETES MELLITUS 34
7					SEPTICEMIA (BLOOD POISONING) 1	SEPTICEMIA (BLOOD POISONING) 1	KIDNEY DISEASE 2	INFLUENZA/ PNEUMONIA 18	INFLUENZA/ PNEUMONIA 20
8					SUICIDE 1	SUICIDE 1	STROKE 2	KIDNEY DISEASE 18	KIDNEY DISEASE 20
9						OTHER 4	THREE CAUSES TIED 1	SEPTICEMIA (BLOOD POISONING) 13	SEPTICEMIA (BLOOD POISONING) 15
10								ATHERO-SCLEROSIS 12	ATHERO-SCLEROSIS 12

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

July 200

Injury and Violence

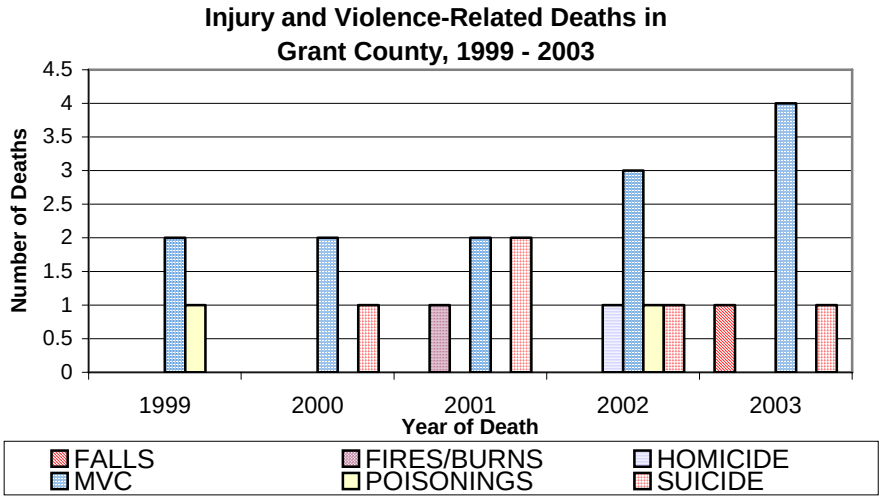
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Grant County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Grant County which has an average of 2.6 motor vehicle-related deaths a year, that translates to almost $3 million a year.

Violence-related injuries (homicide and suicide) in Grant County are ranked in the top 10 in three of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

No Data Available At This Time

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & Ameri-

No Data Available At This Time

Teen Pregnancy

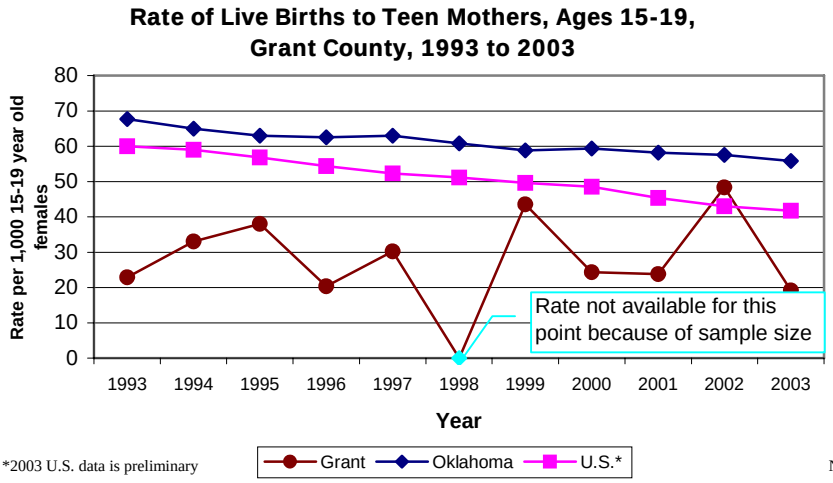
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Grant County had a teen birth rate of 19.2 in 2003 which was a 60% decrease from 2002 (48.3) and a 16% decrease since 1993 (22.9).

With an average of 6 births per year, teen pregnancy costs the citizens of Grant County $19,200.00 a year.



*2003 U.S. data is preliminary

Note: No births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 13.7% of persons in Grant County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Grant County is 7% above the state (14.7%) and 10% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Grant County, 2000 Census

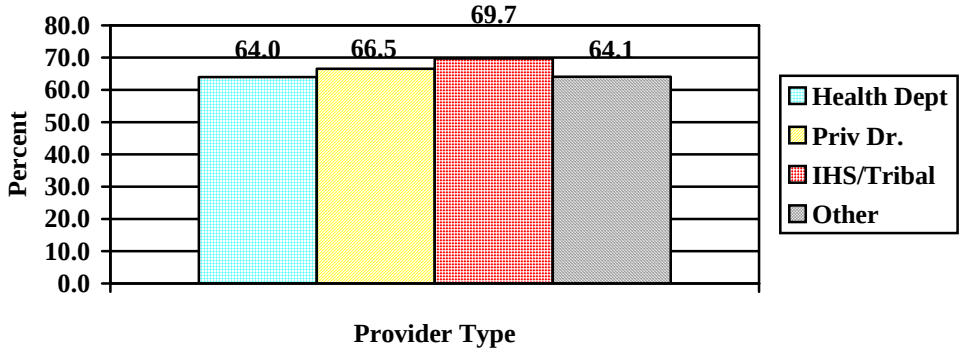
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	5,041	292	398	689	655	3,007
Cumulative Population		292	690	1,379	2,034	5,041
% of Total	100.0%	5.8%	7.9%	13.7%	13.0%	59.7%
Cumulative %		5.8%	13.7%	27.4%	40.3%	100.0%

OK By One - State Immunization Data

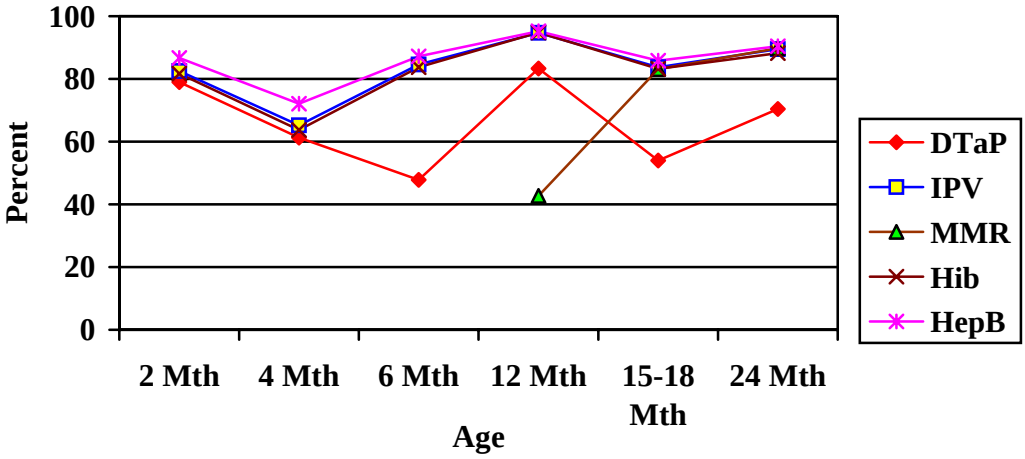
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

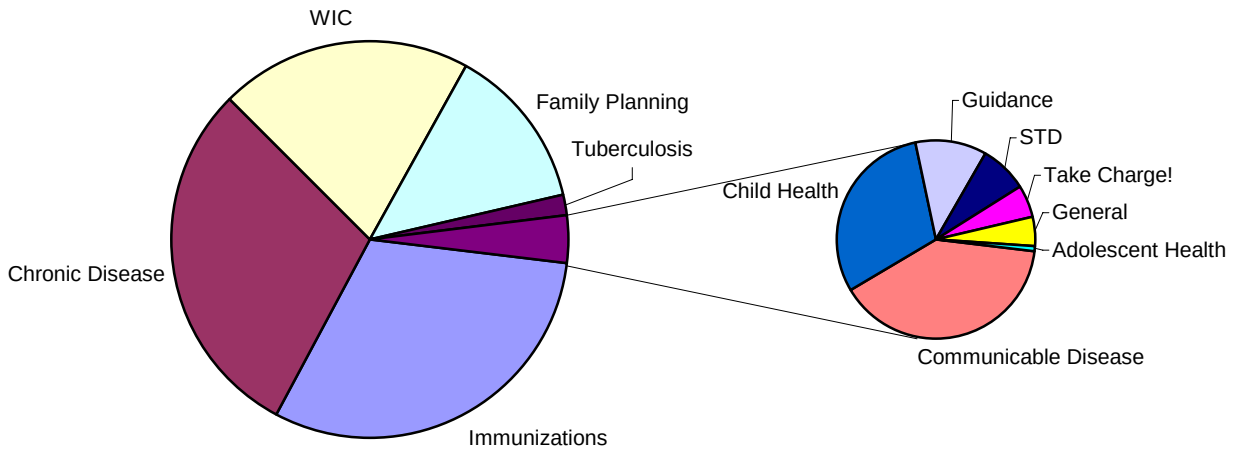


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 27 deaths a year
- $369,476.69 per death
- Total— $9,975,870.63 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 2.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,912,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 6 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $19,200.00 a year

Grand Total for Grant County:

$12,907,070.63

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Grant County Health Department
115 N Main
Medford, OK 73018
580-395-2906

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

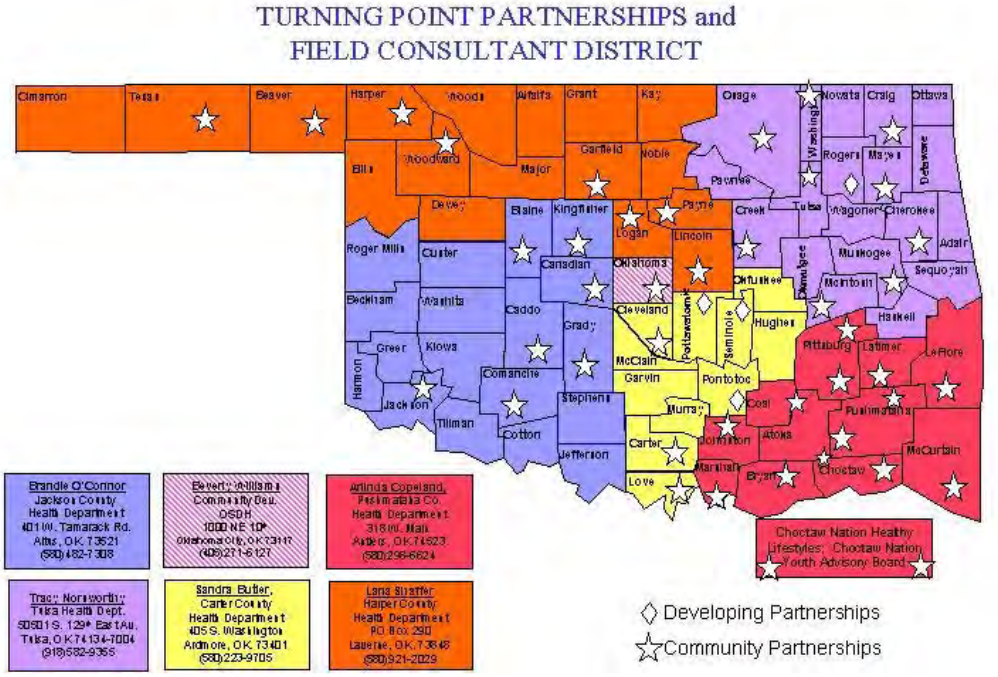
State of the County's Health Report

A Look Back To Move Forward

Greer County

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

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



Inside this issue:

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Top 10 Leading Causes of Death Table	3
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Poverty	5
OK By One—State Immunization Data	6
County Health Department Usage	7
Health Care Costs Summary	7
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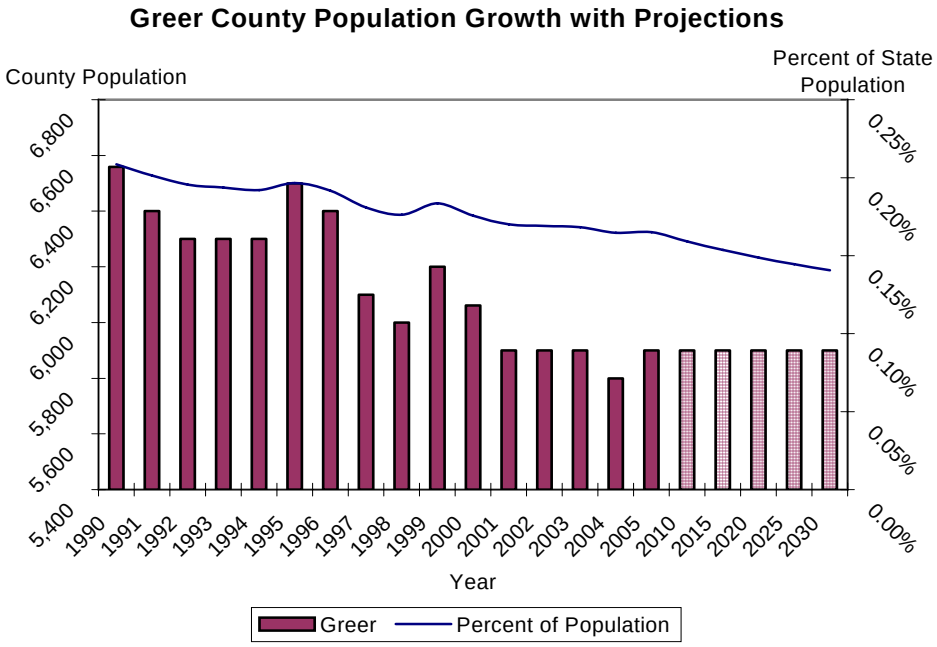
Demographics

** U.S. Census Bureau*

- Population estimates
  - 8% decrease from 1990 to 2000 (6,559 to 6,061)
  - 4% decrease from 2000 to 2004
  - Ranked 63rd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 7%
- Race
  - Whites = 81%
  - Native Americans =2%
  - Blacks =9%
  - Other/Multiple = 7%
- Age
  - Under 5 = 5%
  - Over 64 = 20%
  - Median age = 40.0 years
- Housing units
  - Occupied = 2,237 (80%)
  - Vacant = 551 (20%)
- Disability (ages 21 to 64) = 25.7% national = 19.2% state = 21.5%
- Individuals below poverty = 19.6% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Greer County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 417 people in Greer County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 33.2 deaths a year, heart disease accounts for over $12 million a year in medical costs in Greer County.

Heart disease accounts for over $12 million a year in medical costs in Greer County.

Alzheimer's disease and the complications associated with it have increased from the 20th ranked cause of death (1983-1993) to the 12th ranked cause of death in persons 65 and older accounting for a 200% increase in deaths.

Nutrition and Obesity

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

No Data Available At This Time

Top 10 Causes of Death by Age Group

Greer County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	HEART DISEASE 1	CANCER 1	UNINTENT. INJURY 7	HOMICIDE/ LEGAL 2	HEART DISEASE 8	HEART DISEASE 17	HEART DISEASE 27	HEART DISEASE 310	HEART DISEASE 365
2	PERINATAL PERIOD 1	UNINTENT. INJURY 1	HEART DISEASE 1	UNINTENT. INJURY 2	SUICIDE 2	CANCER 13	CANCER 19	CANCER 158	CANCER 193
3			HOMICIDE/ LEGAL 1	CANCER 1	CANCER 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 5	STROKE 104	STROKE 110
4			SUICIDE 1	HEART DISEASE 1	HOMICIDE/ LEGAL 1	STROKE 4	DIABETES MELLITUS 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 52	BRONCHITIS/ EMPHYSEMA/ ASTHMA 61
5				HIV 1	SEPTICEMIA (BLOOD POISONING) 1	UNINTENT. INJURY 2	LIVER DISEASE 2	INFLUENZA/ PNEUMONIA 48	INFLUENZA/ PNEUMONIA 49
6				SUICIDE 1	UNINTENT. INJURY 1	CONGENITAL ANOMALIES 1	STROKE 2	KIDNEY DISEASE 27	UNINTENT. INJURY 35
7					VIRAL HEPATITIS 1	DIABETES MELLITUS 1	SEVEN CAUSES TIED 1	UNINTENT. INJURY 21	KIDNEY DISEASE 27
8					OTHER 3	PEPTIC ULCER 1		DIABETES MELLITUS 12	DIABETES MELLITUS 16
9						SEPTICEMIA (BLOOD POISONING) 1		THREE CAUSES TIED 11	SEPTICEMIA (BLOOD POISONING) 13
10						OTHER 7			TWO CAUSES TIED 11

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

Injury and Violence

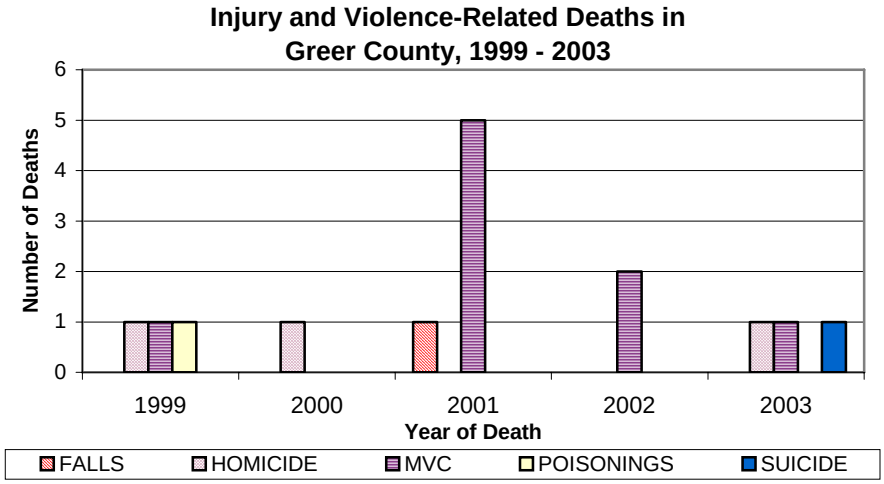
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Greer County. Unintentional injuries are the leading cause of death from ages 15 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Greer County which has an average of 1.8 motor vehicle-related deaths a year, that translates to over $2 million a year.

Violence-related injuries (homicide and suicide) in Greer County are ranked in the top 10 in three of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

No Data Available At This Time

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & Ameri-

No Data Available At This Time

Teen Pregnancy

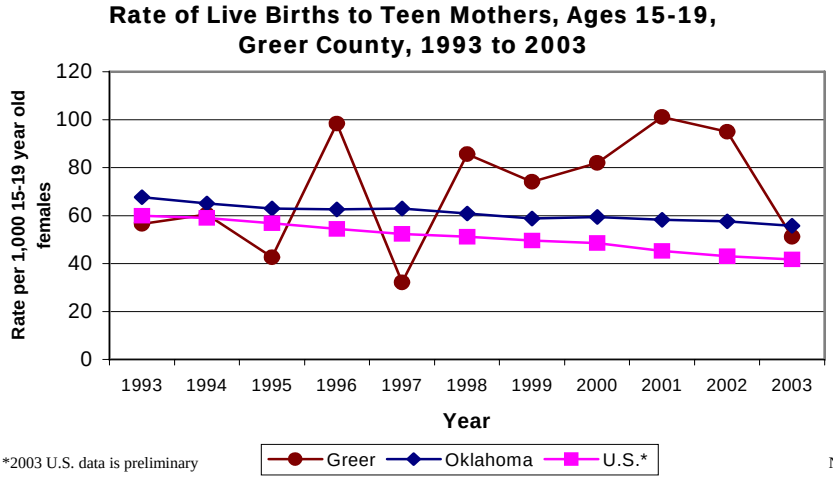
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Greer County had a teen birth rate of 51.1 in 2003 which was a 46% decrease from 2002 (95) and a 10% decrease since 1993 (56.5).

With an average of 13 births per year, teen pregnancy costs the citizens of Greer County $41,600.00 a year.



*2003 U.S. data is preliminary

Note: 6 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 19.6% of persons in Greer County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Greer County is 33% above the state (14.7%) and 58% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Greer County, 2000 Census

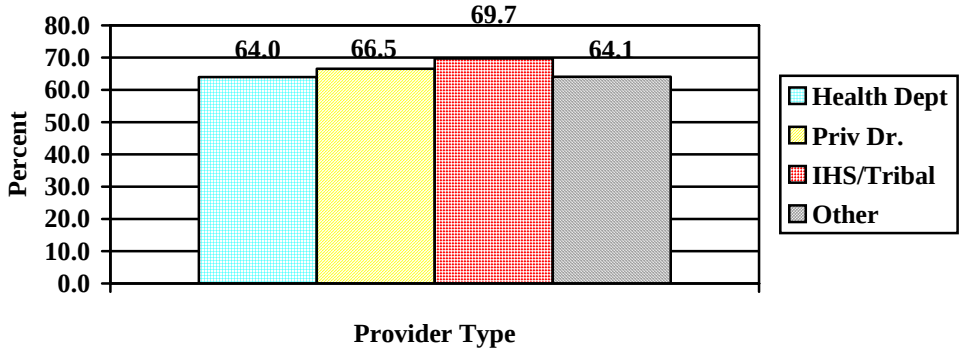
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	5,058	341	651	578	767	2,721
Cumulative Population		341	992	1,570	2,337	5,058
% of Total	100.0%	6.7%	12.9%	11.4%	15.2%	53.8%
Cumulative %		6.7%	19.6%	31.0%	46.2%	100.0%

OK By One - State Immunization Data

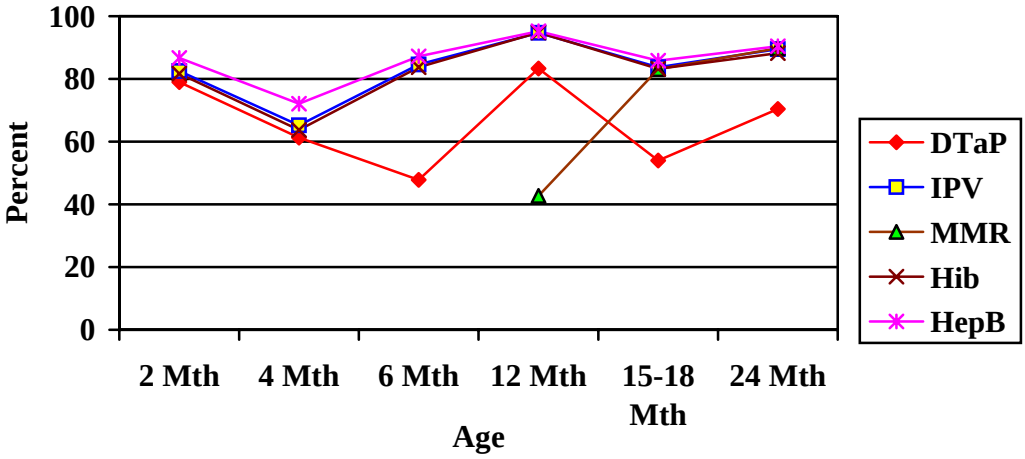
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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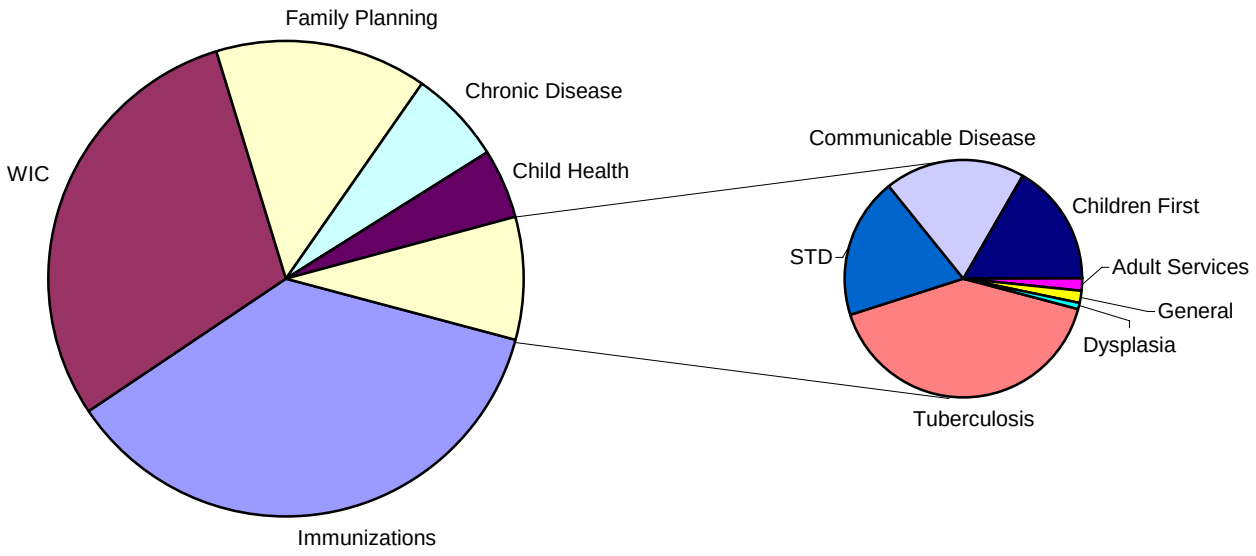
Attended Appointments for Greer County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 33 deaths a year
- $369,476.69 per death
- Total— $12,192,730.77 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 1.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,016,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 13 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $41,600.00 a year

Grand Total for Greer County:

$14,250,330.77

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Room 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Greer County Health Department
PO Box 1
2100 N. Louis Tittle
Mangum, OK 73554
580-782-5531

Looking Back to Move Forward

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

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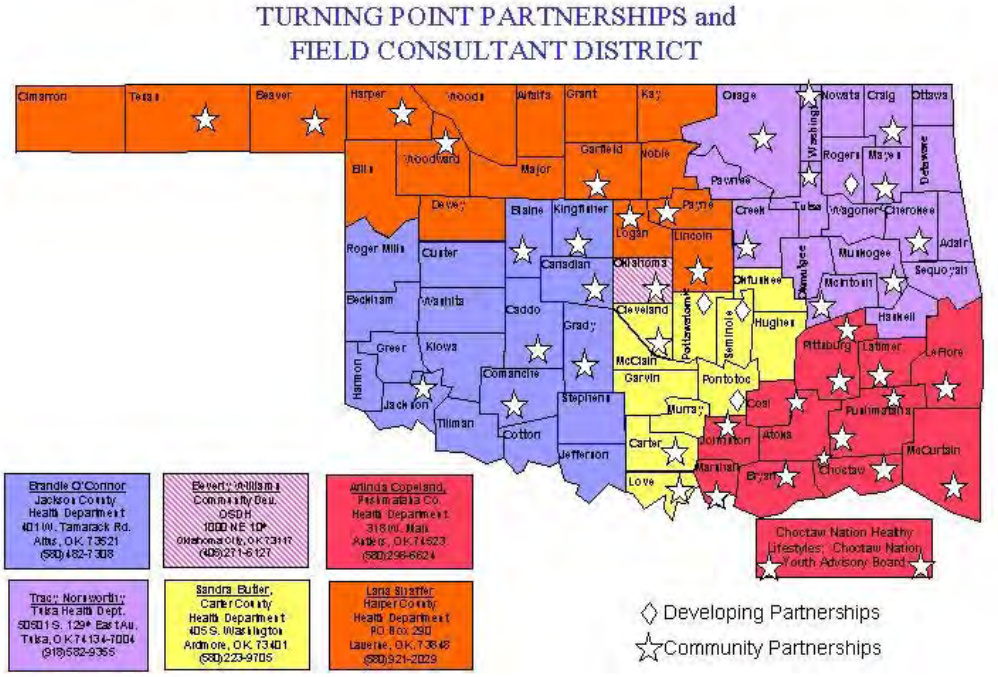

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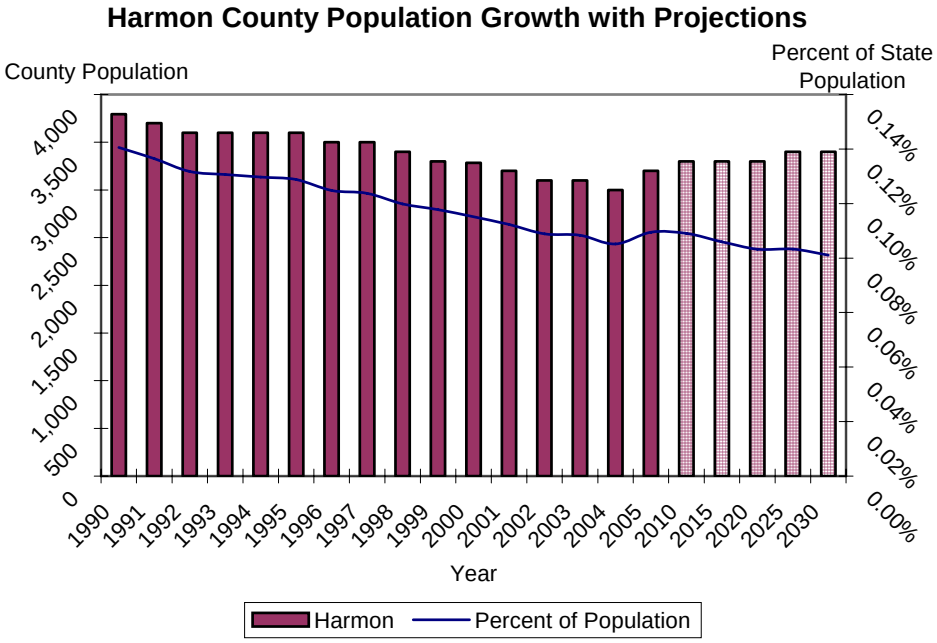
Demographics

** U.S. Census Bureau*

- Population estimates
  - 13% decrease from 1990 to 2000 (3,793 to 3,283)
  - 9% decrease from 2000 to 2004
  - Ranked 77th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 23%
- Race
  - Whites = 73%
  - Native Americans =1%
  - Blacks =10%
  - Other/Multiple = 16%
- Age
  - Under 5 = 6%
  - Over 64 = 21%
  - Median age = 39.9 years
- Housing units
  - Occupied = 1,266 (77%)
  - Vacant = 381 (23%)
- Disability (ages 21 to 64) = 23.4% national = 19.2% state = 21.5%
- Individuals below poverty = 29.7% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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Heart disease accounts for almost $8 million a year in medical costs in Harmon County.

Alzheimer's disease and the complications associated with it have increased from the 9th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 100% increase in deaths.

Nutrition and Obesity

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

Data Not Available At This Time

Top 10 Causes of Death by Age Group

Harmon County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 4	PERINATAL PERIOD 1	UNINTENT. INJURY 3	UNINTENT. INJURY 2	CANCER 6	CANCER 8	HEART DISEASE 18	HEART DISEASE 205	HEART DISEASE 231
2	PERINATAL PERIOD 2	UNINTENT. INJURY 1		CANCER 1	HEART DISEASE 2	HEART DISEASE 6	CANCER 12	CANCER 93	CANCER 121
3	UNINTENT. INJURY 1	OTHER 1		DIABETES MELLITUS 1	LIVER DISEASE 2	DIABETES MELLITUS 3	UNINTENT. INJURY 3	STROKE 45	STROKE 47
4				STROKE 1	SUICIDE 2	UNINTENT. INJURY 2	DIABETES MELLITUS 2	KIDNEY DISEASE 30	DIABETES MELLITUS 32
5				SUICIDE 1	KIDNEY INFECTION 1	EIGHT CAUSES TIED 1	LIVER DISEASE 2	INFLUENZA/ PNEUMONIA 29	KIDNEY DISEASE 31
6				OTHER 1	UNINTENT. INJURY 1		SIX CAUSES TIED 1	DIABETES MELLITUS 26	INFLUENZA/ PNEUMONIA 30
7					OTHER 1			BRONCHITIS/ EMPHYSEMA/ ASTHMA 17	UNINTENT. INJURY 21
8								ALZHEIMER'S DISEASE 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 19
9								UNINTENT. INJURY 8	ALZHEIMER'S DISEASE 8
10								PNEUMONITIS 5	TWO CAUSES TIED 6

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

July 2005

Injury and Violence

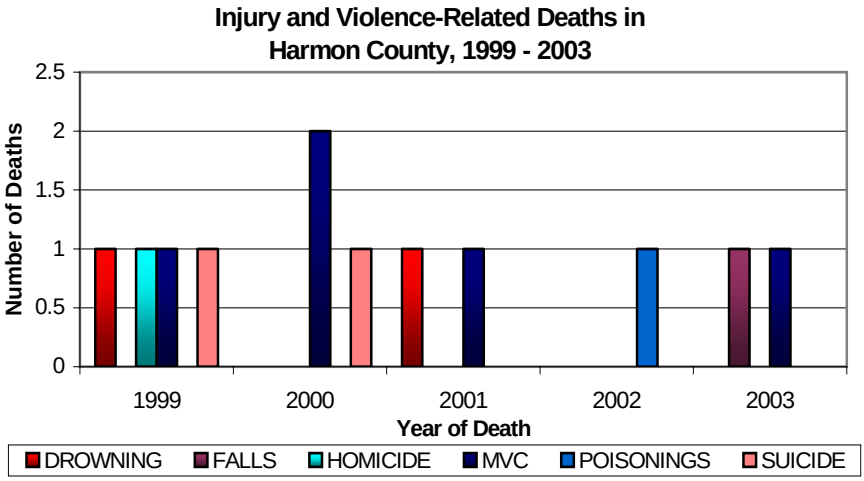
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Harmon County. Unintentional injuries are the leading cause of death from ages 15 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Harmon County which has an average of 1 motor vehicle-related deaths a year, that translates to over $1 million a year.

Violence-related injuries (homicide and suicide) in Harmon County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

Data Not Available At This Time

Physical Activity, Wellness and Diabetes

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

Data Not Available At This Time

Teen Pregnancy

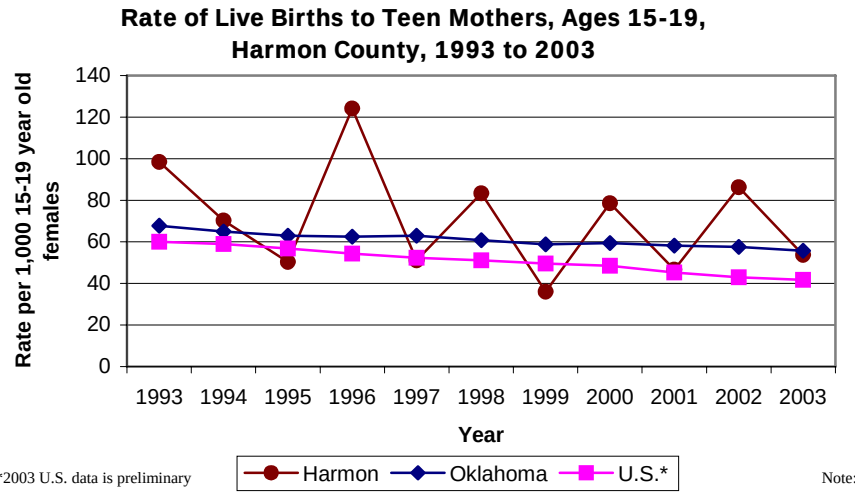
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Harmon County had a teen birth rate of 53.8 in 2003 which was a 38% decrease from 2002 (86.3) and a 45% decrease since 1993 (98.4).

With an average of 10 births per year, teen pregnancy costs the citizens of Harmon County $32,000.00 a year.



*2003 U.S. data is preliminary

Note: 4 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 29.7% of persons in Harmon County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Harmon County is 102% above the state (14.7%) and 140% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Harmon County, 2000 Census

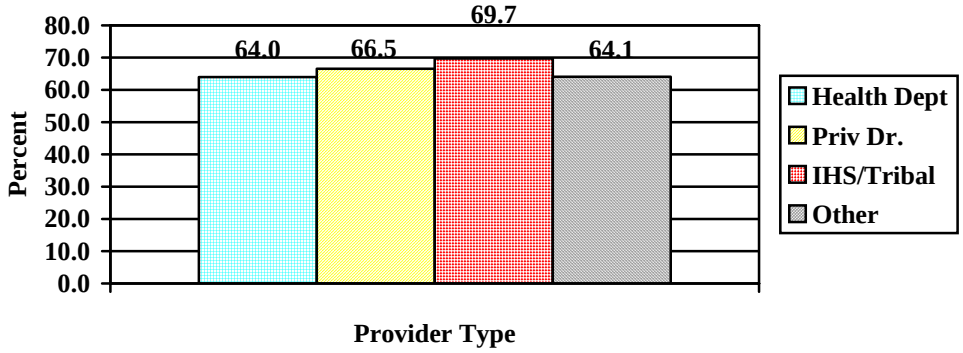
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	3,163	533	407	457	380	1,386
Cumulative Population		533	940	1,397	1,777	3,163
% of Total	100.0%	16.9%	12.9%	14.4%	12.0%	43.8%
Cumulative %		16.9%	29.7%	44.2%	56.2%	100.0%

OK By One - State Immunization Data

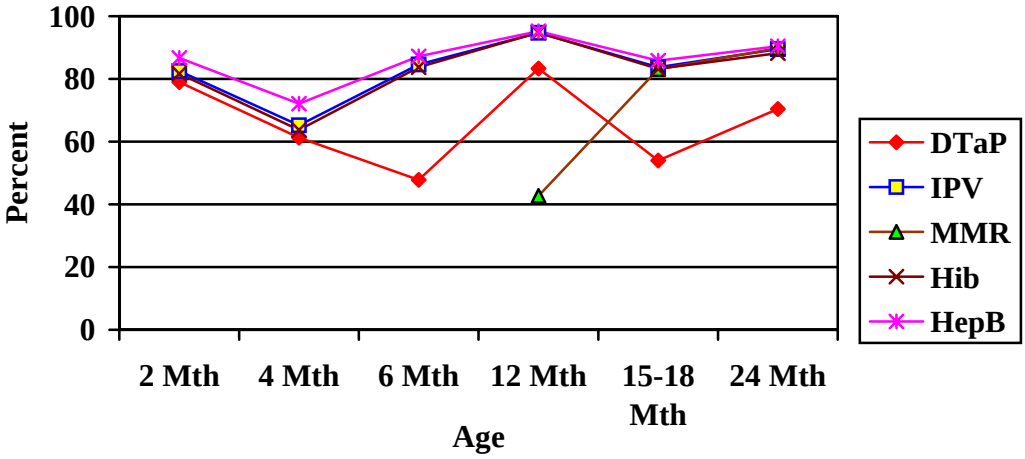
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

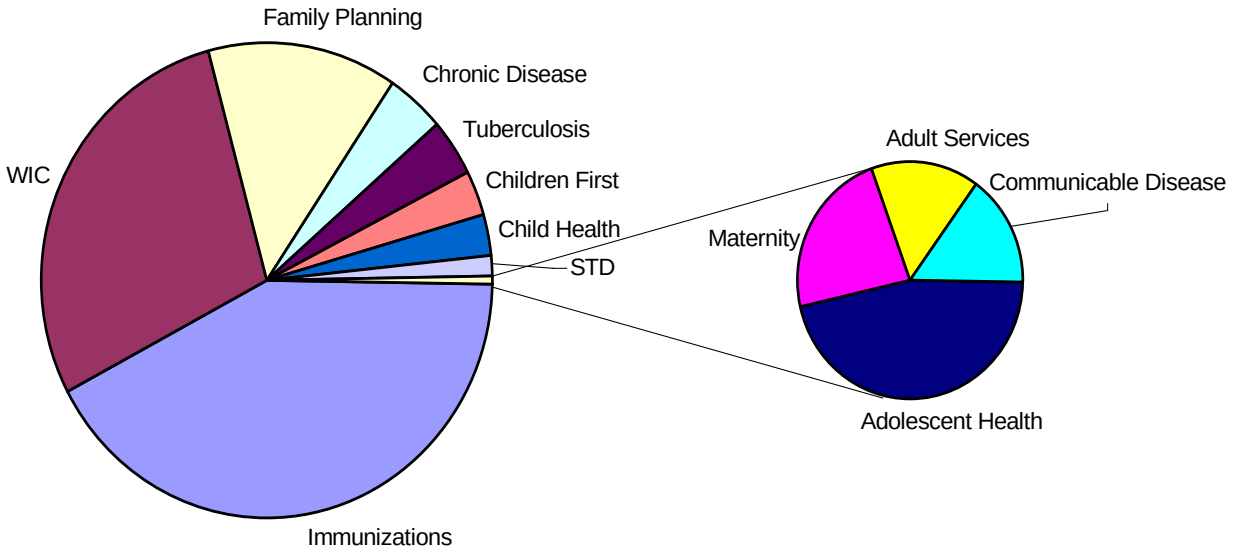


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 21 deaths a year
- $369,476.69 per death
- Total— $7,759,010.49 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

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

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 10 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $32,000.00 a year

Grand Total for Harmon County:

$8,911,010.49

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Harmon County Health Department
1104 N 7th St
Hollis, OK 73550
580-688-3348

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

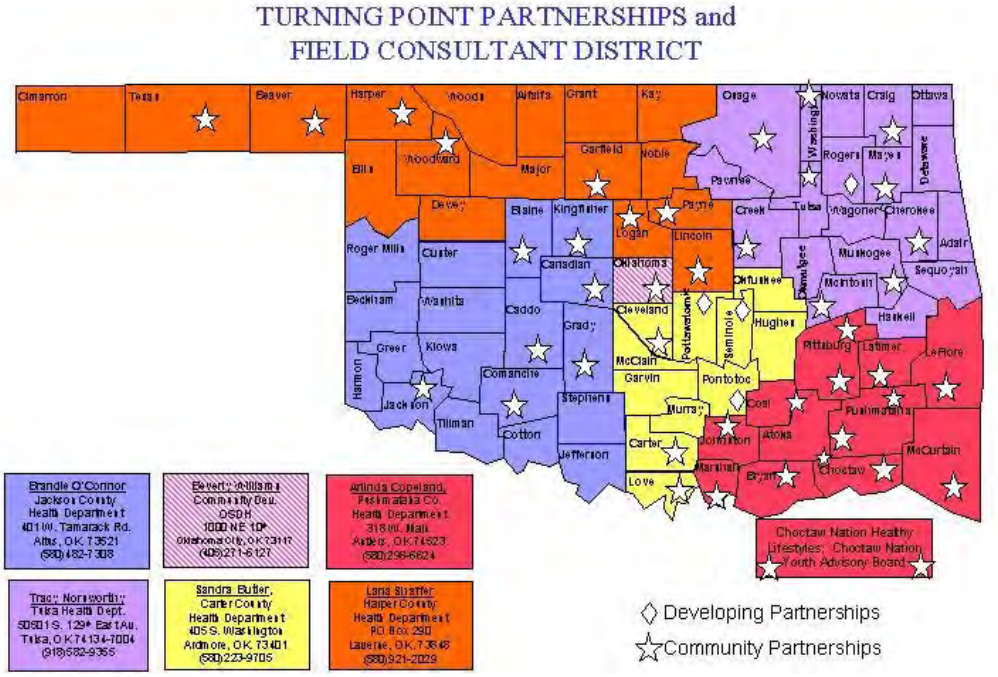
State of the County's Health Report

A Look Back To Move Forward

Haskell County

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

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



Inside this issue:

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County Health Department Usage	7
Health Care Costs Summary	7
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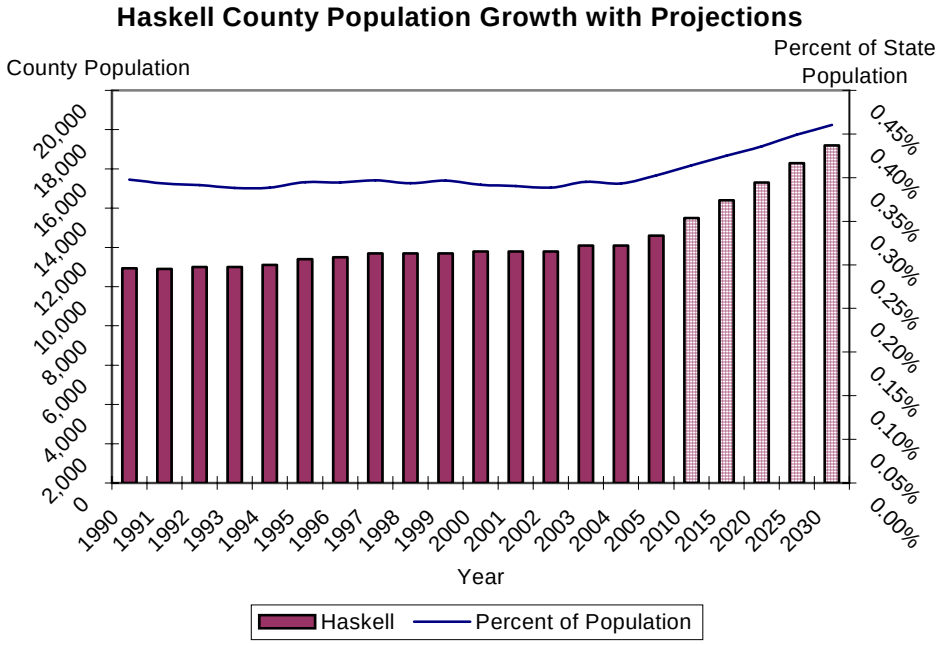
Demographics

** U.S. Census Bureau*

- Population estimates
  - 8% increase from 1990 to 2000 (10,940 to 11,792)
  - 3% increase from 2000 to 2004
  - Ranked 18th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 78%
  - Native Americans =15%
  - Blacks =1%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 17%
  - Median age = 38.6 years
- Housing units
  - Occupied = 4,624 (83%)
  - Vacant = 949 (17%)
- Disability (ages 21 to 64) = 29.1% national = 19.2% state = 21.5%
- Individuals below poverty = 20.5% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Haskell County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 664 people in Haskell County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 62.7 deaths a year, heart disease accounts for over $23 million a year in medical costs in Haskell County.

Heart disease accounts for over $23 million a year in medical costs in Haskell County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 100% increase in deaths.

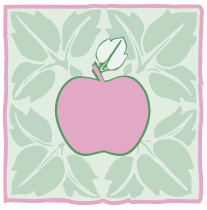
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 29.7% (3,577) of people in Haskell County were considered obese which accounted for an additional $1,412,915 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Haskell County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 7	UNINTENT. INJURY 9	UNINTENT. INJURY 17	UNINTENT. INJURY 7	UNINTENT. INJURY 12	CANCER 29	CANCER 78	HEART DISEASE 587	HEART DISEASE 690
2	CONGENITAL ANOMALIES 5	NON-CANCEROUS TUMOR 1	SUICIDE 2	HOMICIDE/ LEGAL 3	HEART DISEASE 9	HEART DISEASE 29	HEART DISEASE 61	CANCER 254	CANCER 372
3	SIDS 4	CANCER 1	CANCER 1	SUICIDE 3	CANCER 7	UNINTENT. INJURY 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 11	STROKE 93	STROKE 103
4	UNINTENT. INJURY 3	OTHER 2	OTHER 1	CANCER 2	SUICIDE 4	STROKE 5	UNINTENT. INJURY 11	INFLUENZA/ PNEUMONIA 65	UNINTENT. INJURY 90
5	HEART DISEASE 2			HEART DISEASE 2	HOMICIDE/ LEGAL 3	LIVER DISEASE 3	DIABETES MELLITUS 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 62	BRONCHITIS/ EMPHYSEMA/ ASTHMA 74
6	OTHER 4			OTHER 5	INFLUENZA/ PNEUMONIA 2	SUICIDE 3	KIDNEY DISEASE 4	DIABETES MELLITUS 51	INFLUENZA/ PNEUMONIA 72
7					ANEMIA 1	DIABETES MELLITUS 2	LIVER DISEASE 4	KIDNEY DISEASE 25	DIABETES MELLITUS 59
8					KIDNEY DISEASE 1	HOMICIDE/ LEGAL 2	STROKE 4	UNINTENT. INJURY 25	KIDNEY DISEASE 32
9					LIVER DISEASE 1	INFLUENZA/ PNEUMONIA 2	INFLUENZA/ PNEUMONIA 3	SEPTICEMIA (BLOOD POISONING) 23	SEPTICEMIA (BLOOD POISONING) 24
10					STROKE 1	KIDNEY DISEASE 2	THREE CAUSES TIED 2	ALZHEIMER'S DISEASE 12	SUICIDE 19

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

July 2005

Injury and Violence

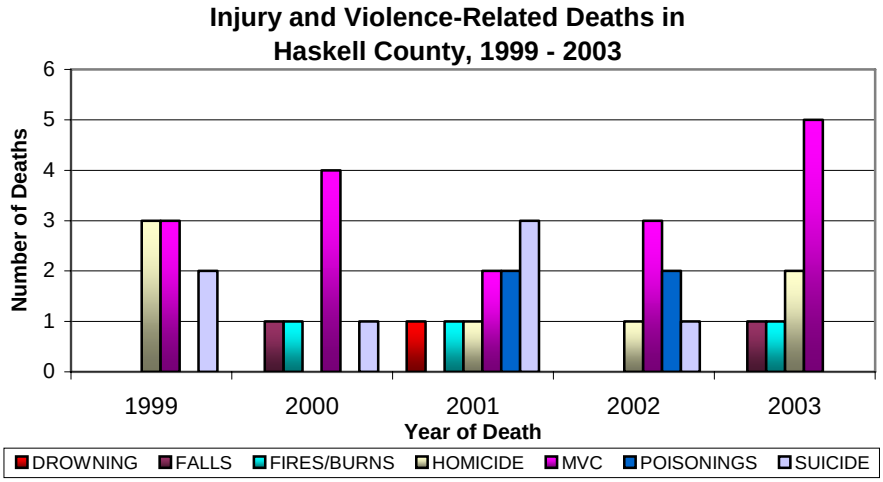
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Haskell County which has an average of 3.4 motor vehicle-related deaths a year, that translates to almost $4 million a year.

Violence-related injuries (homicide and suicide) in Haskell County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 28.7% (3,457) of people in Haskell County use tobacco of some sort. Medical costs accumulated by those persons are over $11 million a year for Haskell County.

*"Medical costs accumulated by those persons are over **$11 million a year** for Haskell County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 41.3% (4,974) of people in Haskell County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.4% (891) of Haskell County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $11,799,513.00 in one year for Haskell County.

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

Teen Pregnancy

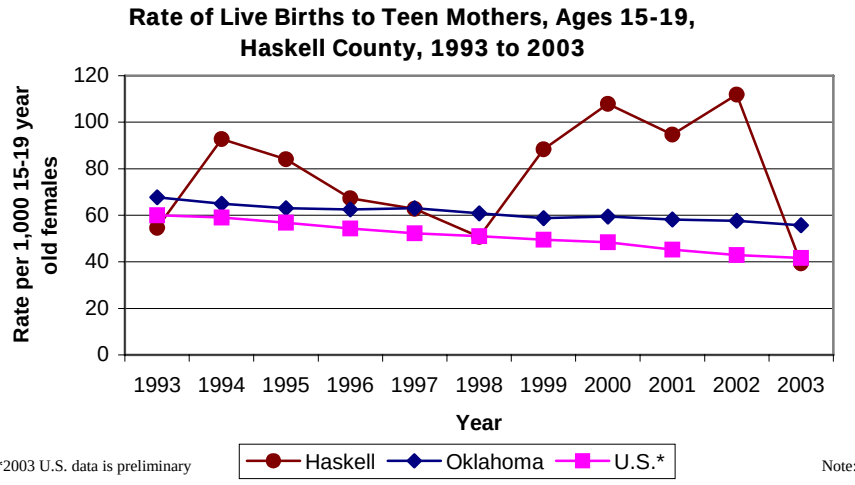
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Haskell County had a teen birth rate of 39.3 in 2003 which was a 65% decrease from 2002 (111.9) and a 28% decrease since 1993 (54.7).

With an average of 33 births per year, teen pregnancy costs the citizens of Haskell County $105,600.00 a year.



*2003 U.S. data is preliminary

Note: 3 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 20.5% of persons in Haskell County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Haskell County is 39% above the state (14.7%) and 65% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Haskell County, 2000 Census

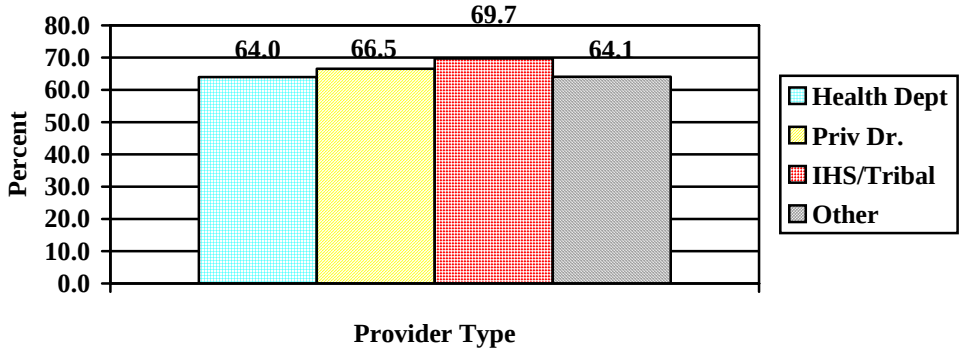
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	11,594	864	1,513	1,797	1,790	5,630
Cumulative Population		864	2,377	4,174	5,964	11,594
% of Total	100.0%	7.5%	13.0%	15.5%	15.4%	48.6%
Cumulative %		7.5%	20.5%	36.0%	51.4%	100.0%

OK By One - State Immunization Data

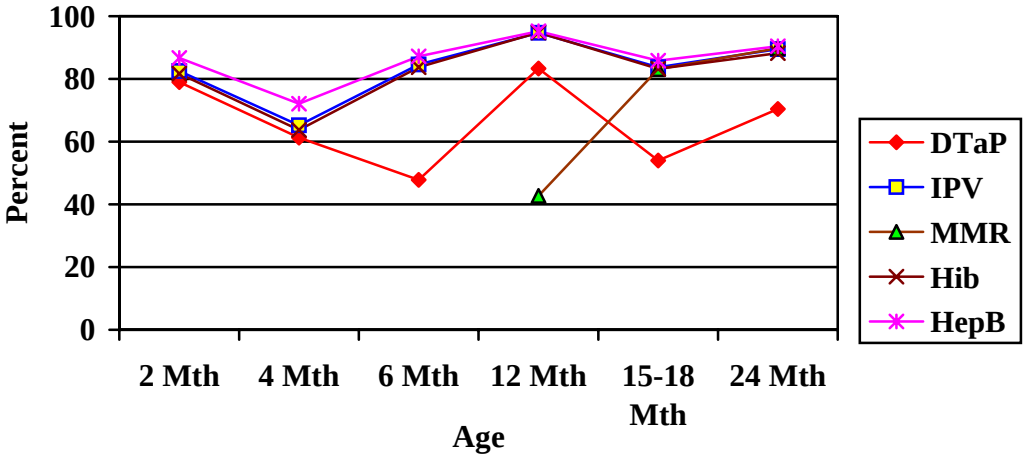
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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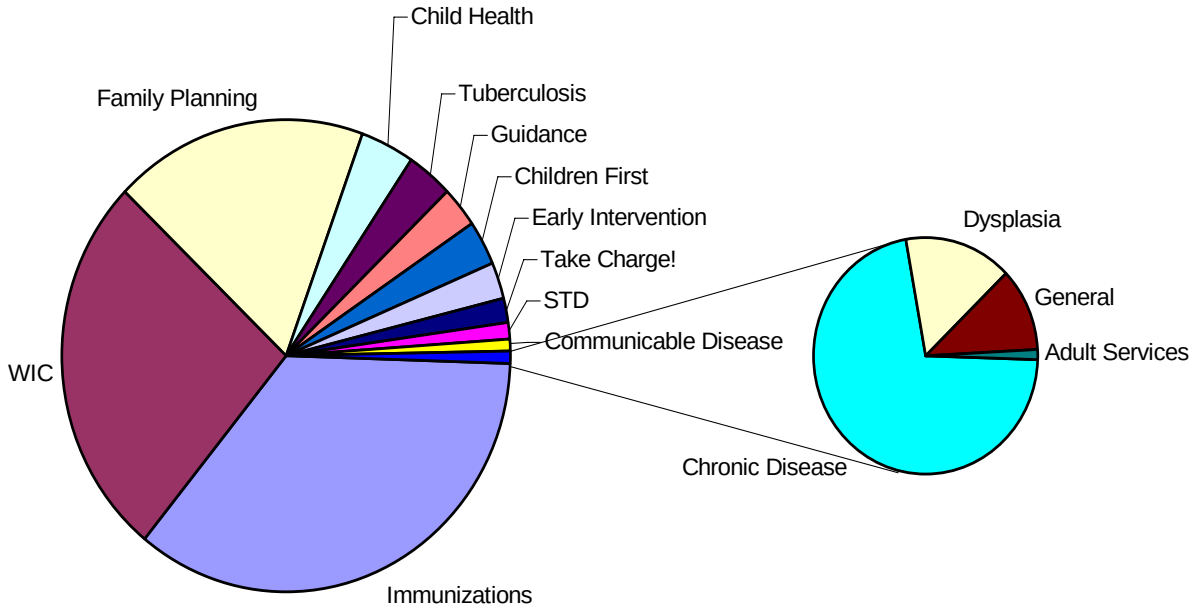

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 63 deaths a year
- $369,476.69 per death
- Total— $23,277,031.47 a year

Obesity

- 29.7% of population (3,577)
- $395.00 in additional medical costs per person
- Total—$1,412,915.00

Motor Vehicle-Related Injury Death

- Average 3.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$3,808,000.00 a year

Tobacco Use

- 28.7% of population (3,457)
- $3,300.00 in health care costs
- Total - $11,408,100.00 a year

Diabetes

- 7.4% of population (891)
- $13,243.00 in healthcare costs a year
- Total—$11,799,513.00 a year

Teen Pregnancy

- Average of 33 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $105,600.00 a year

Grand Total for Haskell County:

$51,811,159.47

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Haskell County Health Department
1407 NE D St
Stigler, OK 74462
918-967-3304

Looking Back to Move Forward

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

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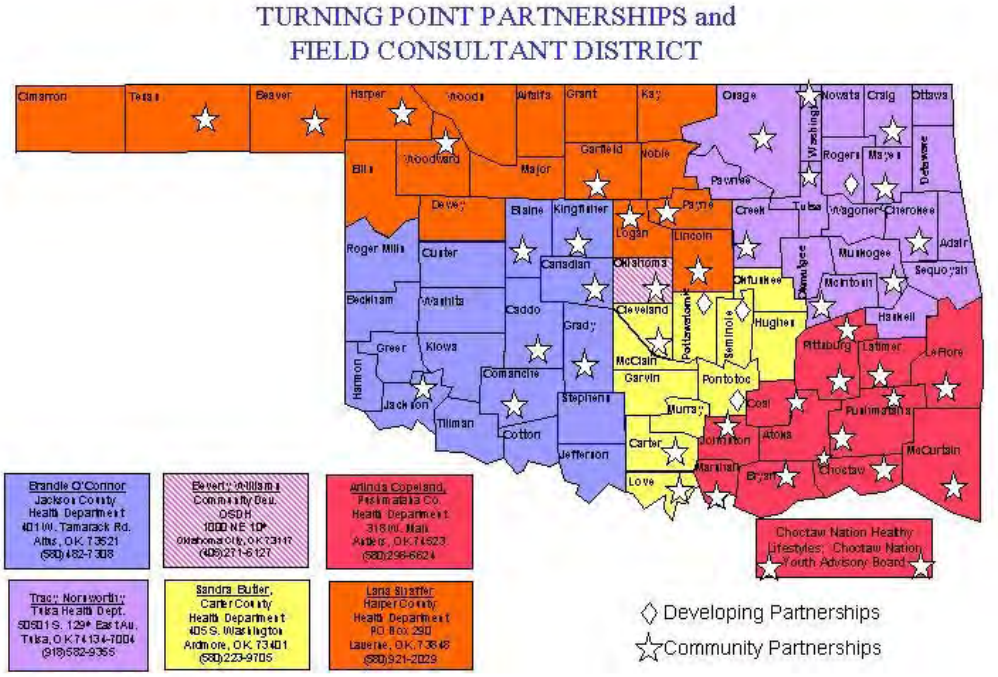

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Health Care Costs Summary	7
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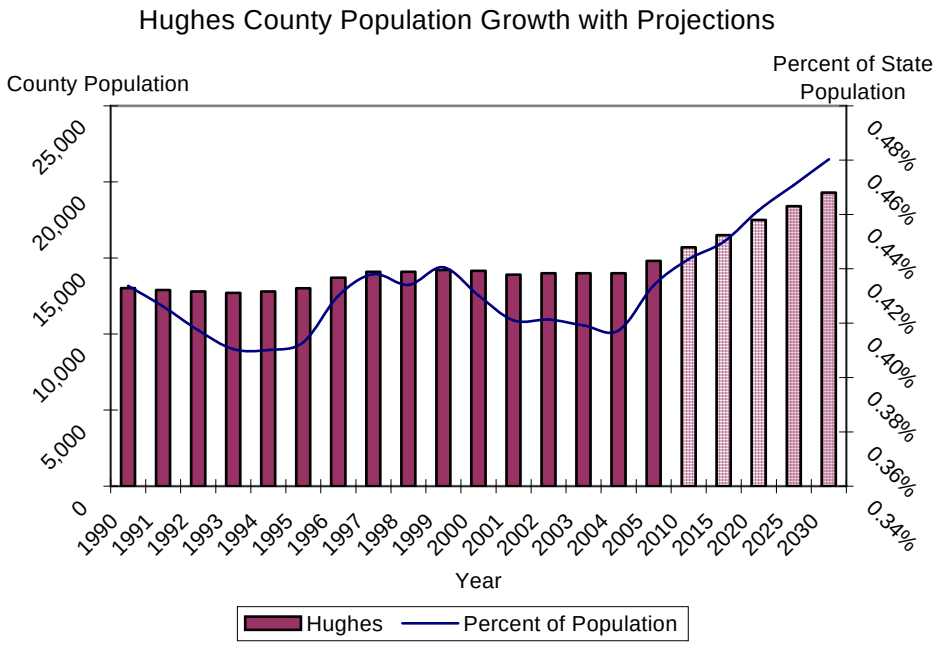
Demographics

** U.S. Census Bureau*

- Population estimates
  - 9% increase from 1990 to 2000 (13,014 to 14,154)
  - 1% decrease from 2000 to 2004
  - Ranked 50th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 73%
  - Native Americans =«Indian %»
  - Blacks =4%
  - Other/Multiple = 7%
- Age
  - Under 5 = 6%
  - Over 64 = 19%
  - Median age = 39.3 years
- Housing units
  - Occupied = 5,319 (85%)
  - Vacant = 918 (15%)
- Disability (ages 21 to 64) = 28.0% national = 19.2% state = 21.5%
- Individuals below poverty = 21.9% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Hughes County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 980 people in Hughes County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 84.3 deaths a year, heart disease accounts for over $31 million a year in medical costs in Hughes County.

Heart disease accounts for over $31 million a year in medical costs in HughesCounty.

Alzheimer's disease and the complications associated with it have increased from the 17th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 500% increase in deaths.

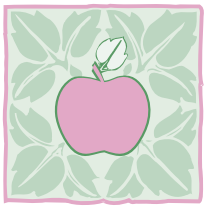
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 23.2% (3,224) of people in Hughes County were considered obese which accounted for an additional $1,273,480 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Hughes County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 6	UNINTENT. INJURY 3	UNINTENT. INJURY 16	UNINTENT. INJURY 17	CANCER 11	CANCER 33	CANCER 75	HEART DISEASE 817	HEART DISEASE 927
2	CONGENITAL ANOMALIES 3	CANCER 1	SUICIDE 2	SUICIDE 8	UNINTENT. INJURY 9	HEART DISEASE 25	HEART DISEASE 75	CANCER 333	CANCER 454
3	HEART DISEASE 2		CONGENITAL ANOMALIES 1	CANCER 1	HEART DISEASE 6	UNINTENT. INJURY 11	BRONCHITIS/ EMPHYSEMA/ ASTHMA 14	STROKE 134	STROKE 152
4	SIDS 2		HEART DISEASE 1	HEART DISEASE 1	HOMICIDE/ LEGAL 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 6	DIABETES MELLITUS 13	BRONCHITIS/ EMPHYSEMA/ ASTHMA 88	BRONCHITIS/ EMPHYSEMA/ ASTHMA 108
5	NON-CANCEROUS TUMOR 1		HOMICIDE/ LEGAL 1	HIV 1	SUICIDE 3	LIVER DISEASE 6	STROKE 11	INFLUENZA/ PNEUMONIA 69	UNINTENT. INJURY 101
6	HOMICIDE/ LEGAL 1		OTHER 2	STROKE 1	SEPTICEMIA (BLOOD POISONING) 2	DIABETES MELLITUS 5	LIVER DISEASE 7	DIABETES MELLITUS 45	INFLUENZA/ PNEUMONIA 70
7	KIDNEY DISEASE 1			OTHER 4	STROKE 2	STROKE 4	UNINTENT. INJURY 7	ATHERO-SCLEROSIS 39	DIABETES MELLITUS 64
8	UNINTENT. INJURY 1				NON-CANCEROUS TUMOR 1	SUICIDE 2	SEPTICEMIA (BLOOD POISONING) 3	UNINTENT. INJURY 35	ATHERO-SCLEROSIS 40
9	OTHER 3				DIABETES MELLITUS 1	FIVE CAUSES TIED 1	GALLBLADDER DISORDER 2	KIDNEY DISEASE 27	KIDNEY DISEASE 31
10					KIDNEY DISEASE 1		HYPERTENSION 2	SEPTICEMIA (BLOOD POISONING) 21	SEPTICEMIA (BLOOD POISONING) 26

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

July-05

Injury and Violence

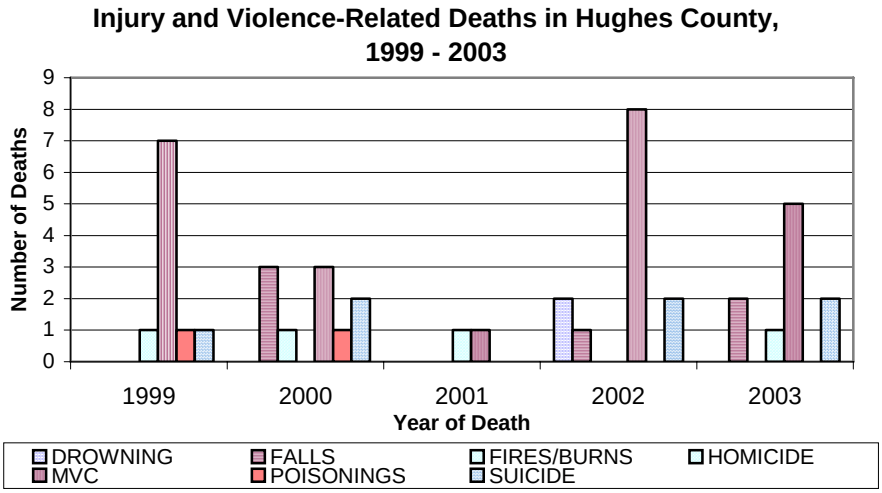
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Hughes County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Hughes County which has an average of 4.8 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Hughes County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 30.3% (4,211) of people in Hughes County use tobacco of some sort. Medical costs accumulated by those persons are almost $14 million a year for Hughes County.

> *"Medical costs accumulated by those persons are almost **$14 million a year** for Hughes County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 34.7% (4,823) of people in Hughes County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 8.8% (1,223) of Hughes County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $16,196,189.00 in one year for Hughes County.

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

Teen Pregnancy

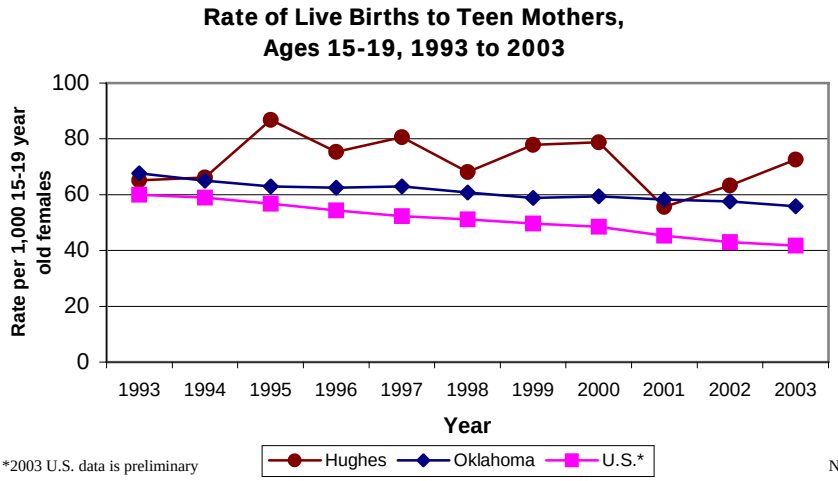
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Hughes County had a teen birth rate of 72.6 in 2003 which was a 15% increase from 2002 (63.3) and a 12% increase since 1993 (65.1).

With an average of 32 births per year, teen pregnancy costs the citizens of Hughes County $102,400.00 a year.



*2003 U.S. data is preliminary

Note: 5 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 21.9% of persons in Hughes County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Hughes County is 49% above the state (14.7%) and 77% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Hughes County, 2000 Census

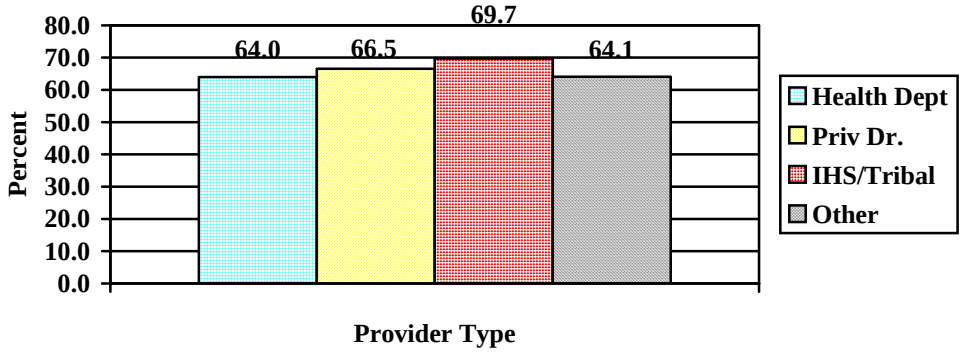
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	12,869	1,132	1,690	2,290	1,639	6,118
Cumulative Population		1,132	2,822	5,112	6,751	12,869
% of Total	100.0%	8.8%	13.1%	17.8%	12.7%	47.5%
Cumulative %		8.8%	21.9%	39.7%	52.5%	100.0%

OK By One - State Immunization Data

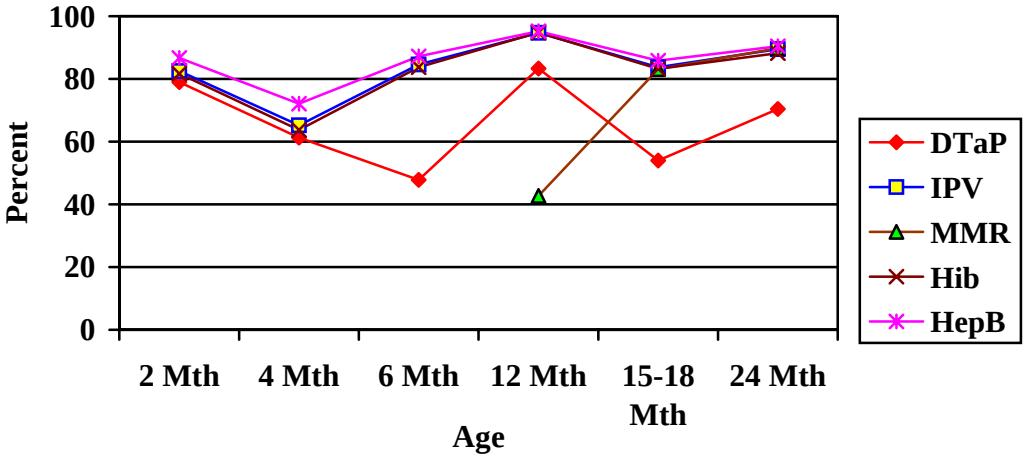
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

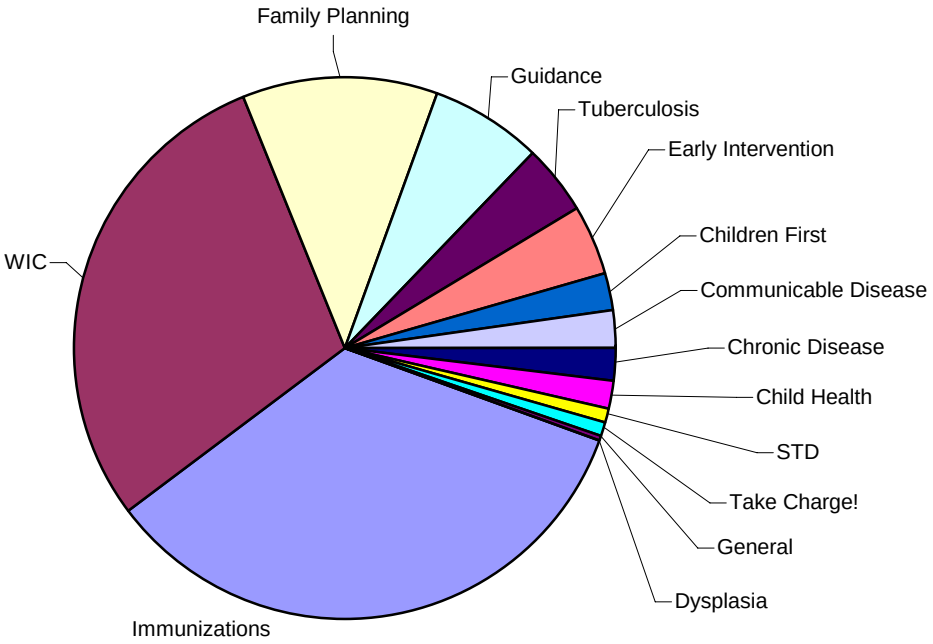


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 84 deaths a year
- $369,476.69 per death
- Total— $31,036,041.96 a year

Obesity

- 23.2% of population (3,224)
- $395.00 in additional medical costs per person
- Total—$1,273,480.00

Motor Vehicle-Related Injury Death

- Average 4.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,376,000.00 a year

Tobacco Use

- 30.3% of population (4,211)
- $3,300.00 in health care costs
- Total—$13,896,300.00 a year

Diabetes

- 8.8% of population (1,223)
- $13,243.00 in healthcare costs a year
- Total—$16,196,189.00 a year

Teen Pregnancy

- Average of 32 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $102,400.00 a year

Grand Total for Hughes County:

$67,880,410.96

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Hughes County Health Department
200 McDougal Dr
Holdenville, Oklahoma 74848
405-379-3313

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

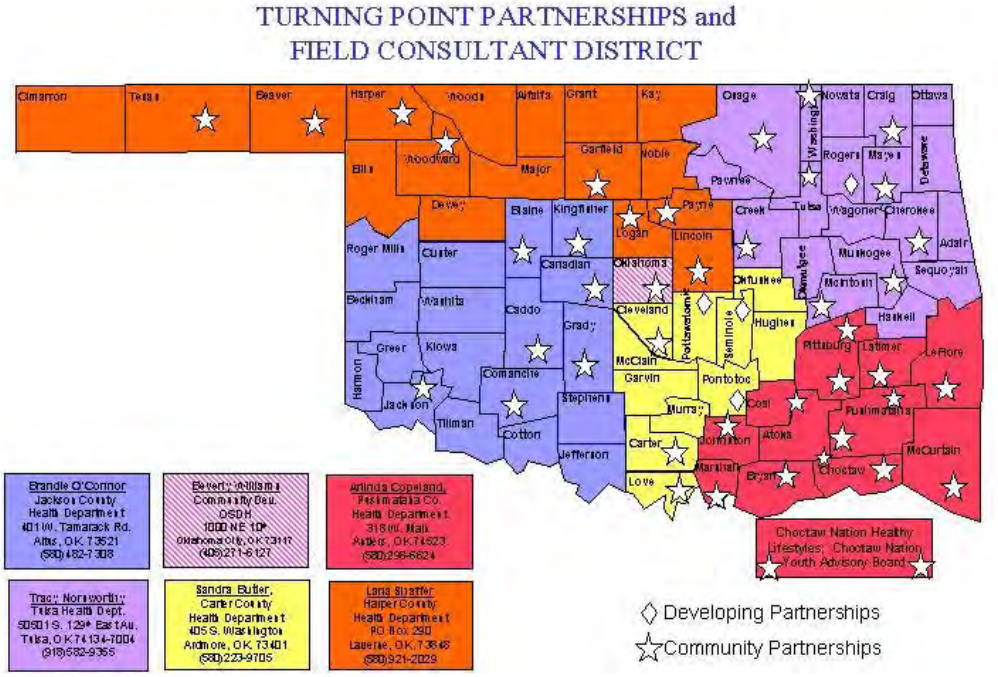
State of the County's Health Report

A Look Back To Move Forward

Jackson County

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

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



Inside this issue:

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Tobacco use	4
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County Health Department Usage	7
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Demographics

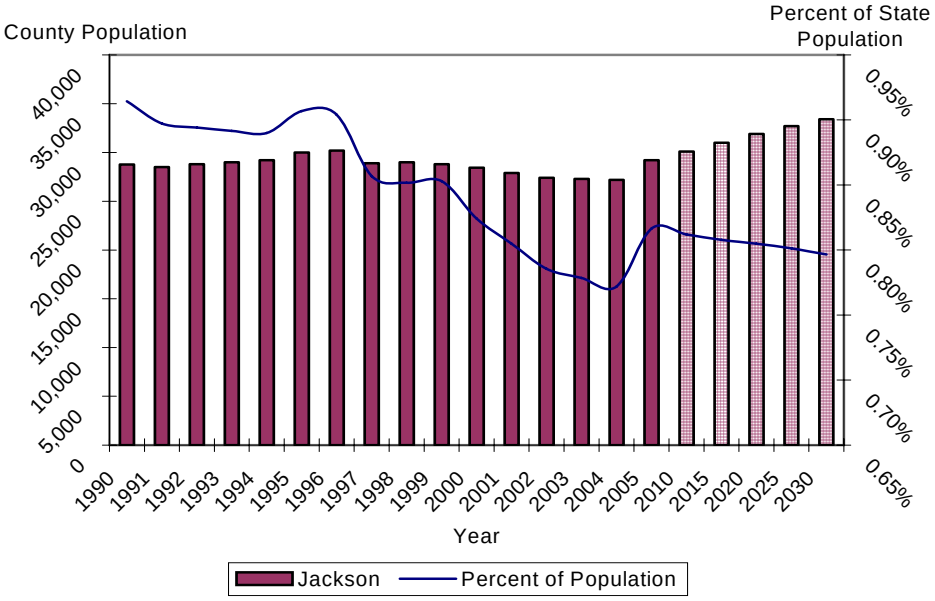
** U.S. Census Bureau*

- Population estimates
  - 1% decrease from 1990 to 2000 (28,764 to 28,439)
  - 4% decrease from 2000 to 2004
  - Ranked 66th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 16%
- Race
  - Whites = 76%
  - Native Americans =2%
  - Blacks =8%
  - Other/Multiple = 14%
- Age
  - Under 5 = 8%
  - Over 64 = 12%
  - Median age = 33.0 years
- Housing units
  - Occupied = 10,590 (86%)
  - Vacant = 1,787 (14%)
- Disability (ages 21 to 64) = 17.0% national = 19.2% state = 21.5%
- Individuals below poverty = 16.2% national = 12.4% state = 14.7%

Jackson County Population Growth with Projections



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Jackson County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 952 people in Jackson County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 88.6 deaths a year, heart disease accounts for almost $33 million a year in medical costs in Jackson County.

Heart disease accounts for almost $33 million a year in medical costs in Jackson County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 7th ranked cause of death in persons 65 and older accounting for a 133% increase in deaths.

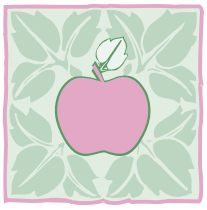
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 28.3% (7,737) of people in Jackson County were considered obese which accounted for an additional $3,056,115 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Jackson County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 15	UNINTENT. INJURY 3	UNINTENT. INJURY 22	UNINTENT. INJURY 14	CANCER 15	HEART DISEASE 49	CANCER 97	HEART DISEASE 809	HEART DISEASE 976
2	CONGENITAL ANOMALIES 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	HOMICIDE/ LEGAL 8	SUICIDE 9	HEART DISEASE 14	CANCER 38	HEART DISEASE 96	CANCER 397	CANCER 556
3	UNINTENT. INJURY 5	OTHER 2	SUICIDE 8	CANCER 4	UNINTENT. INJURY 11	UNINTENT. INJURY 13	BRONCHITIS/ EMPHYSEMA/ ASTHMA 21	STROKE 323	STROKE 347
4	HEART DISEASE 3		CONGENITAL ANOMALIES 4	HEART DISEASE 3	SUICIDE 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 8	STROKE 12	BRONCHITIS/ EMPHYSEMA/ ASTHMA 129	BRONCHITIS/ EMPHYSEMA/ ASTHMA 161
5	HOMICIDE/ LEGAL 3		CANCER 3	HOMICIDE/ LEGAL 3	DIABETES MELLITUS 4	DIABETES MELLITUS 8	LIVER DISEASE 10	INFLUENZA/ PNEUMONIA 106	INFLUENZA/ PNEUMONIA 120
6	HERNIA 1		STROKE 1	DIABETES MELLITUS 2	INFLUENZA/ PNEUMONIA 3	LIVER DISEASE 8	UNINTENT. INJURY 9	KIDNEY DISEASE 43	UNINTENT. INJURY 102
7	KIDNEY DISEASE 1		HEART DISEASE 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	HOMICIDE/ LEGAL 2	STROKE 6	DIABETES MELLITUS 8	ALZHEIMER'S DISEASE 35	DIABETES MELLITUS 57
8	SEPTICEMIA (BLOOD POISOINING) 1		SEPTICEMIA (BLOOD POISOINING) 1	CONGENITAL ANOMALIES 6	LIVER DISEASE 2	HOMICIDE/ LEGAL 6	INFLUENZA/ PNEUMONIA 7	DIABETES MELLITUS 35	KIDNEY DISEASE 50
9	OTHER 6		OTHER 2	NUTRITIONAL DEFICIENCY 1	KIDNEY DISEASE 2	SUICIDE 6	KIDNEY DISEASE 3	PNEUMONITIS 27	SUICIDE 38
10					HIV 1	SEPTICEMIA (BLOOD POISOINING) 5	TWO CAISES TIED 2	UNINTENT. INJURY 24	ALZHEIMER'S DISEASE 36

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health Jul-05

Injury and Violence

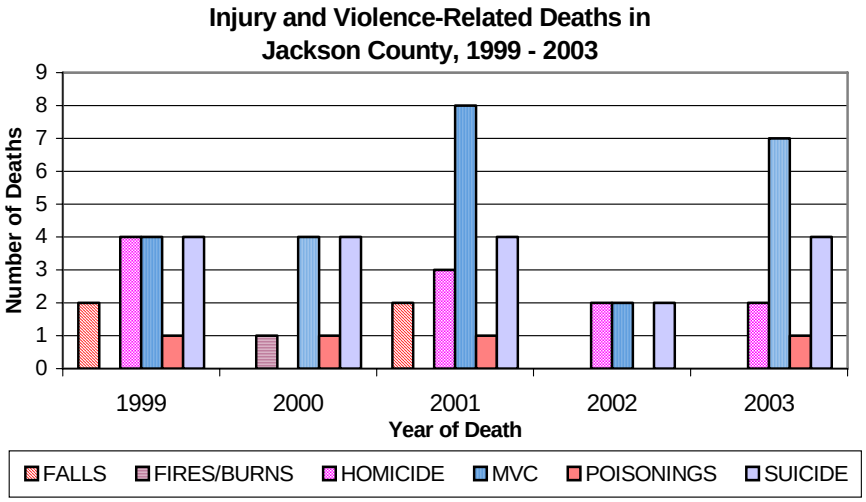
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Jackson County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Jackson County which has an average of 5 motor vehicle-related deaths a year, that translates to almost $6 million a year.

Violence-related injuries (homicide and suicide) in Jackson County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 26.9% (7,354) of people in Jackson County use tobacco of some sort. Medical costs accumulated by those persons are over $24 million a year for Jackson County.

> *"Medical costs accumulated by those persons are over **$24 million a year** for Jackson County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 31.1% (8,502) of people in Jackson County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 12.9% (3,527) of Jackson County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $46,708,061.00 in one year for Jackson County.

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

Teen Pregnancy

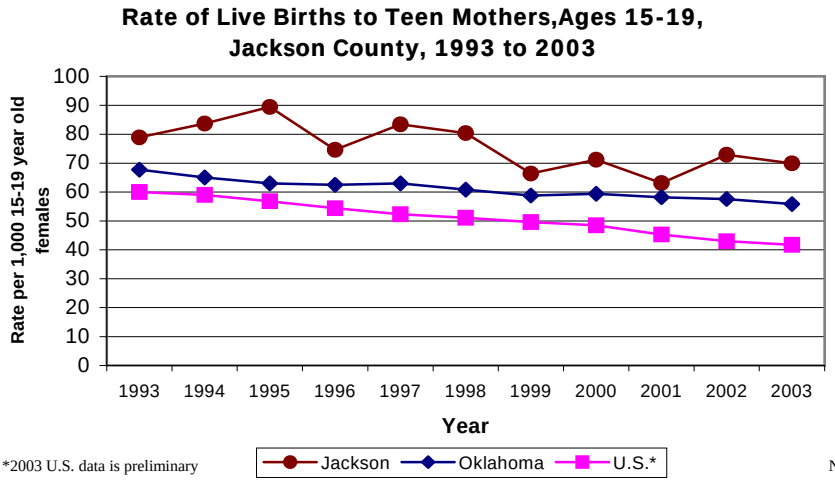
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Jackson County had a teen birth rate of 69.9 in 2003 which was a 4% decrease from 2002 (72.9) and a 11% decrease since 1993 (78.9).

With an average of 80 births per year, teen pregnancy costs the citizens of Jackson County $256,000.00 a year.



*2003 U.S. data is preliminary

Note: 21 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 16.2% of persons in Jackson County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Jackson County is 10% above the state (14.7%) and 31% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Jackson County, 2000 Census

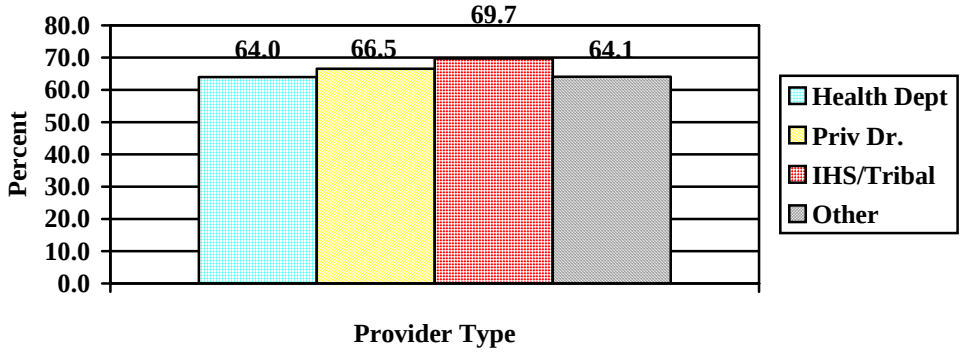
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	27,597	1,851	2,627	3,940	2,954	16,225
Cumulative Population		1,851	4,478	8,418	11,372	27,597
% of Total	100.0%	6.7%	9.5%	14.3%	10.7%	58.8%
Cumulative %		6.7%	16.2%	30.5%	41.2%	100.0%

OK By One - State Immunization Data

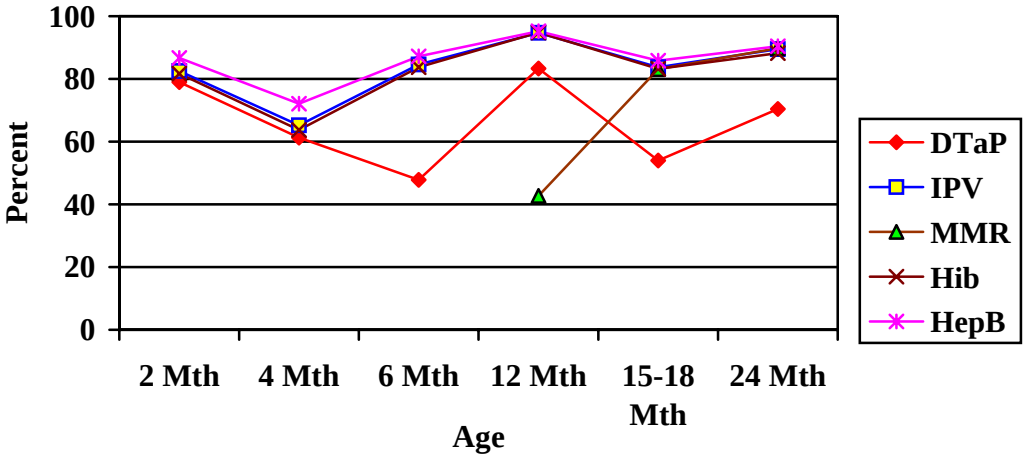
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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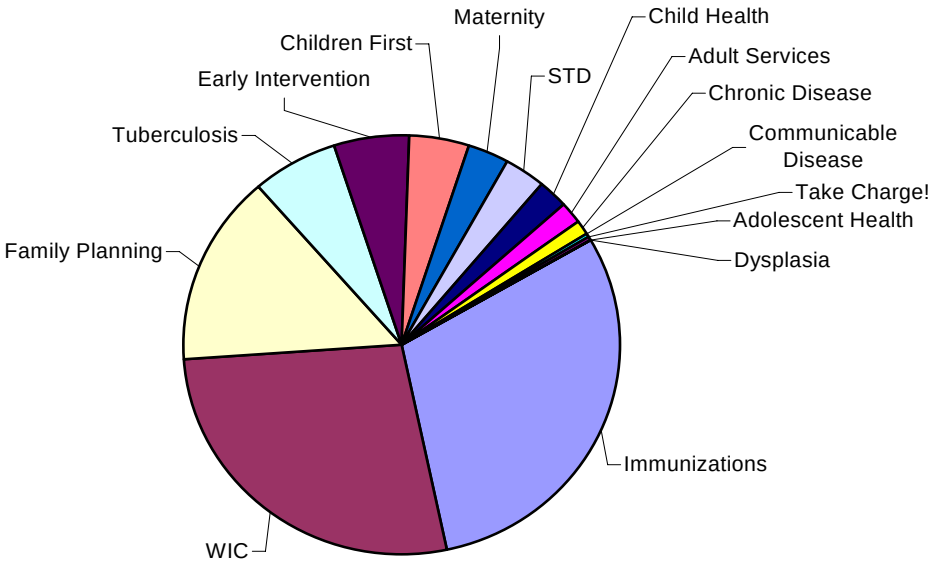
** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 89 deaths a year
- $369,476.69 per death
- Total— $32,883,425.41 a year

Obesity

- 28.3% of population (7,737)
- $395.00 in additional medical costs per person
- Total—$3,056,115.00

Motor Vehicle-Related Injury Death

- Average 5 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,600,000.00 a year

Tobacco Use

- 26.9% of population (7,354)
- $3,300.00 in health care costs
- Total—$24,268,200.00 a year

Diabetes

- 12.9% of population (3,527)
- $13,243.00 in healthcare costs a year
- Total—$46,708,061.00 a year

Teen Pregnancy

- Average of 80 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $256,000.00 a year

Grand Total for Jackson County:

$112,771,801.41

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Jackson County Health Department
401 W Tamarack Rd
Altus, OK 73521-1599
580-482-7308

Looking Back to Move Forward

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

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

Jackson County Community Health Action Team

We would like to say thank you to all the people and organizations that make the Jackson County Community Health Action Team a role model for the rest. With major accomplishments, such as a local seat belt ordinance in Altus, a free community health clinic to serve those most in need and the passing of a 24/7 tobacco policy in Altus schools, you are paving the way for a healthier future for all Jackson County residents.

- Altus Chamber of Commerce
- Altus Police Dept.
- Oklahoma Highway Patrol
- Altus City Planning Dept.
- State political leaders (Senator and Representative)
- Jackson County Memorial Hospital
- Jackson County Health Department
- United Way
- Faith Community
- Southwest Community Action
- OSU Extension
- Altus Air Force Base
- Southwestern Youth Services
- Concerned Citizens
- Workforce Oklahoma
- Altus Public Schools
- Local Physicians, Pharmacists, and Attorneys
- KeyB radio station
- CASA (Court Appointed Special Advocates) of Southwest Oklahoma
- Western Oklahoma State College
- ACMI House
- Communities of Promise
- Retired Senior Volunteer Program (RSVP)
- Blair Public School
- Wichita Mountains Prevention Network
- Oklahoma Commission on Children and Youth

OKLAHOMA STATE DEPARTMENT OF HEALTH

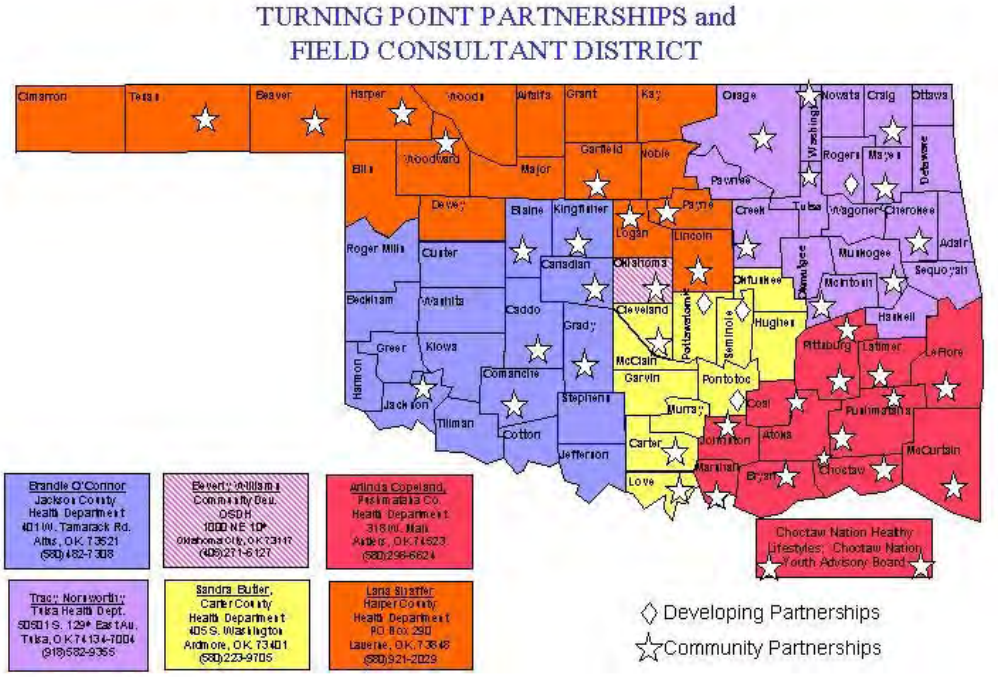
State of the County's Health Report

A Look Back To Move Forward

Jefferson County

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

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



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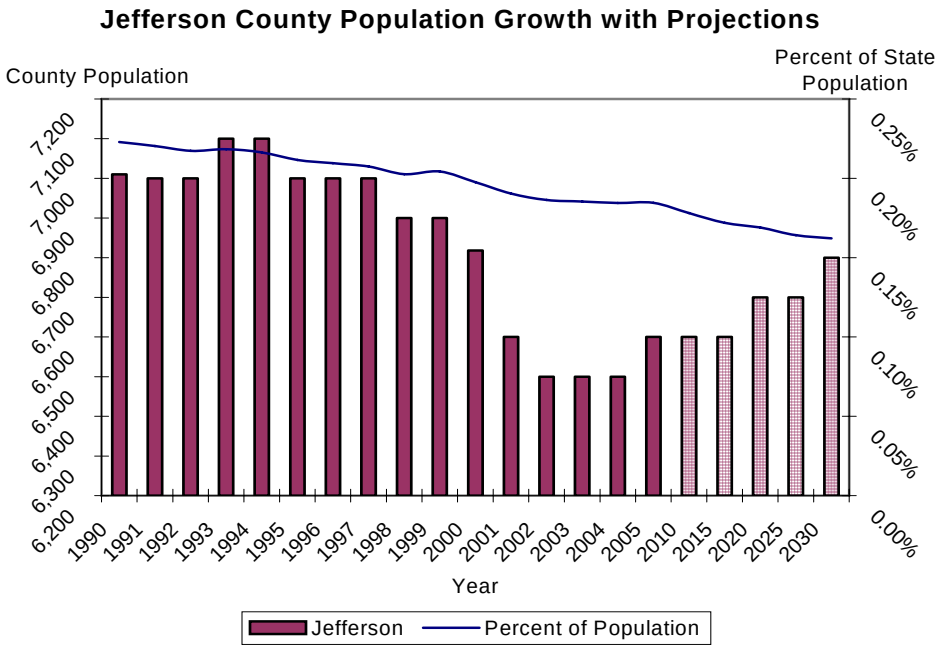
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% decrease from 1990 to 2000 (7,010 to 6,818)
  - 5% decrease from 2000 to 2004
  - Ranked 70th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 7%
- Race
  - Whites = 87%
  - Native Americans =5%
  - Blacks =1%
  - Other/Multiple = 7%
- Age
  - Under 5 = 6%
  - Over 64 = 20%
  - Median age = 40.4 years
- Housing units
  - Occupied = 2,716 (81%)
  - Vacant = 657 (19%)
- Disability (ages 21 to 64) = 26.5% national = 19.2% state = 21.5%
- Individuals below poverty = 19.2% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Jefferson County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 557 people in Jefferson County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 39.5 deaths a year, heart disease accounts for almost $15 million a year in medical costs in Jefferson County.

Heart disease accounts for almost $15 million a year in medical costs in Jefferson County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 483% increase in deaths.

Nutrition and Obesity

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

No Data Available At This Time

Top 10 Causes of Death by Age Group

Jefferson County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 3	UNINTENT. INJURY 3	UNINTENT. INJURY 4	UNINTENT. INJURY 6	HEART DISEASE 5	HEART DISEASE 18	HEART DISEASE 40	HEART DISEASE 371	HEART DISEASE 435
2	PERINATAL PERIOD 2	CANCER 1	SUICIDE 3	SUICIDE 4	UNINTENT. INJURY 5	CANCER 12	CANCER 23	CANCER 174	CANCER 213
3	HOMICIDE/ LEGAL 1	SUICIDE 1	HOMICIDE/ LEGAL 1	HIV 1	CANCER 3	UNINTENT. INJURY 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 5	STROKE 95	STROKE 105
4	UNINTENT. INJURY 1		OTHER 1	STROKE 1	HIV 2	STROKE 6	DIABETES MELLITUS 5	INFLUENZA/ PNEUMONIA 41	UNINTENT. INJURY 55
5				OTHER 2	LIVER DISEASE 2	SUICIDE 5	INFLUENZA/ PNEUMONIA 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 39	BRONCHITIS/ EMPHYSEMA/ ASTHMA 47
6					SUICIDE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	UNINTENT. INJURY 5	ALZHEIMER'S DISEASE 35	INFLUENZA/ PNEUMONIA 46
7					FIVE CAUSES TIED 1	DIABETES MELLITUS 2	LIVER DISEASE 3	DIABETES MELLITUS 33	DIABETES MELLITUS 41
8						HOMICIDE/ LEGAL 2	SUICIDE 3	UNINTENT. INJURY 23	ALZHEIMER'S DISEASE 36
9						FIVE CAUSES TIED 1	STROKE 2	ATHERO-SCLEROSIS 22	ATHERO-SCLEROSIS 24
10							PNEUMONITIS 2	KIDNEY DISEASE 16	SUICIDE 24

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

Injury and Violence

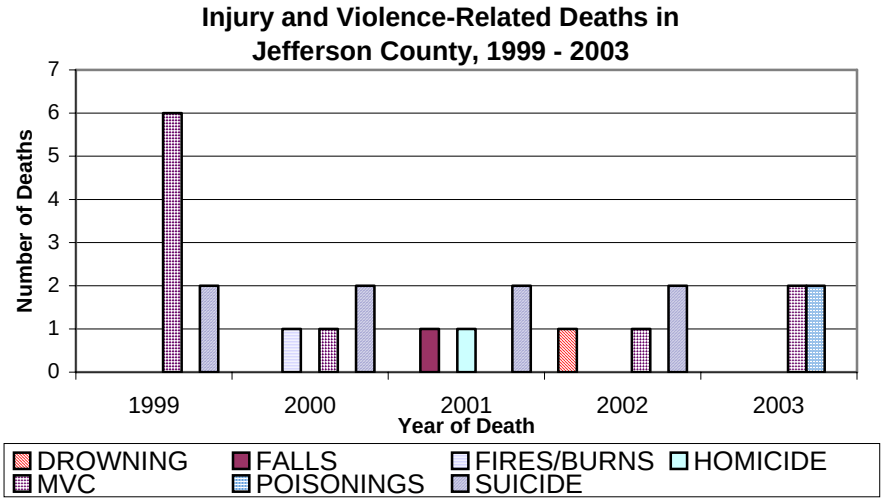
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Jefferson County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Jefferson County which has an average of 2 motor vehicle-related deaths a year, that translates to over $2 million a year.

Violence-related injuries (homicide and suicide) in Jefferson County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

No Data Available At This Time

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & Ameri-

No Data Available At This Time

Teen Pregnancy

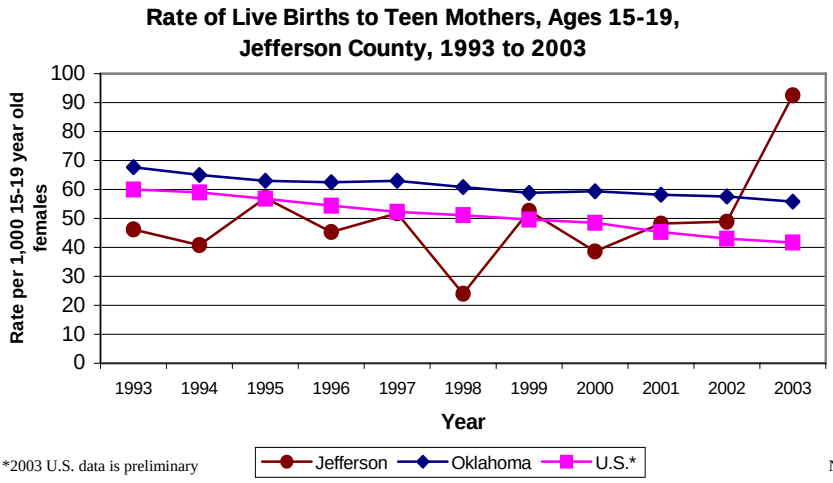
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Jefferson County had a teen birth rate of 92.5 in 2003 which was a 89% increase from 2002 (48.9) and a 100% increase since 1993 (46.2).

With an average of 12 births per year, teen pregnancy costs the citizens of Jefferson County $38,400.00 a year.



*2003 U.S. data is preliminary

Note: No births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 19.2% of persons in Jefferson County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Jefferson County is 31% above the state (14.7%) and 55% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Jefferson County, 2000 Census

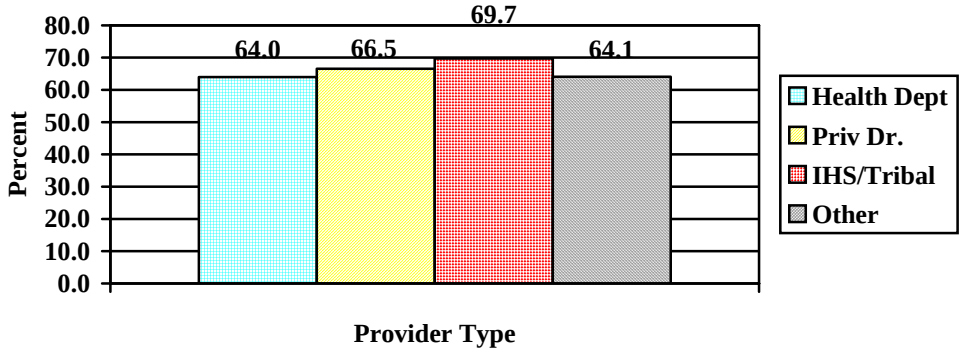
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	6,442	445	794	1,116	978	3,109
Cumulative Population		445	1,239	2,355	3,333	6,442
% of Total	100.0%	6.9%	12.3%	17.3%	15.2%	48.3%
Cumulative %		6.9%	19.2%	36.6%	51.7%	100.0%

OK By One - State Immunization Data

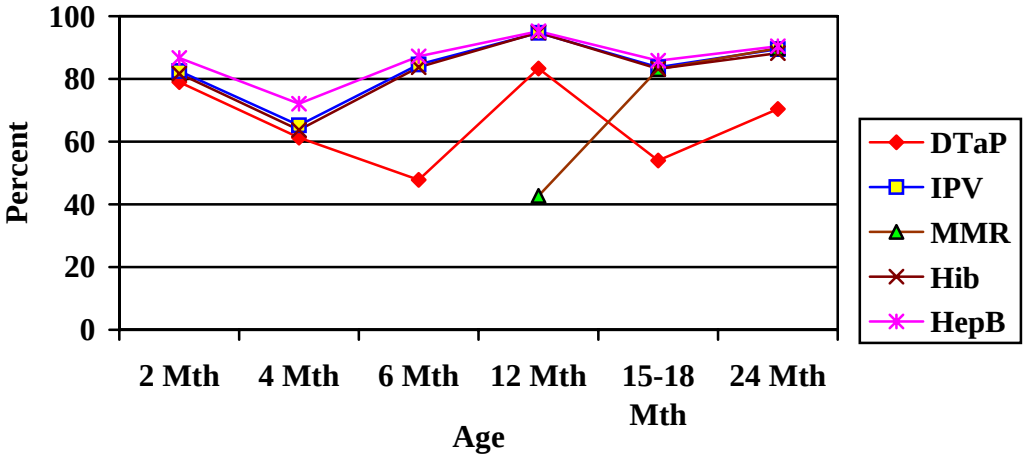
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



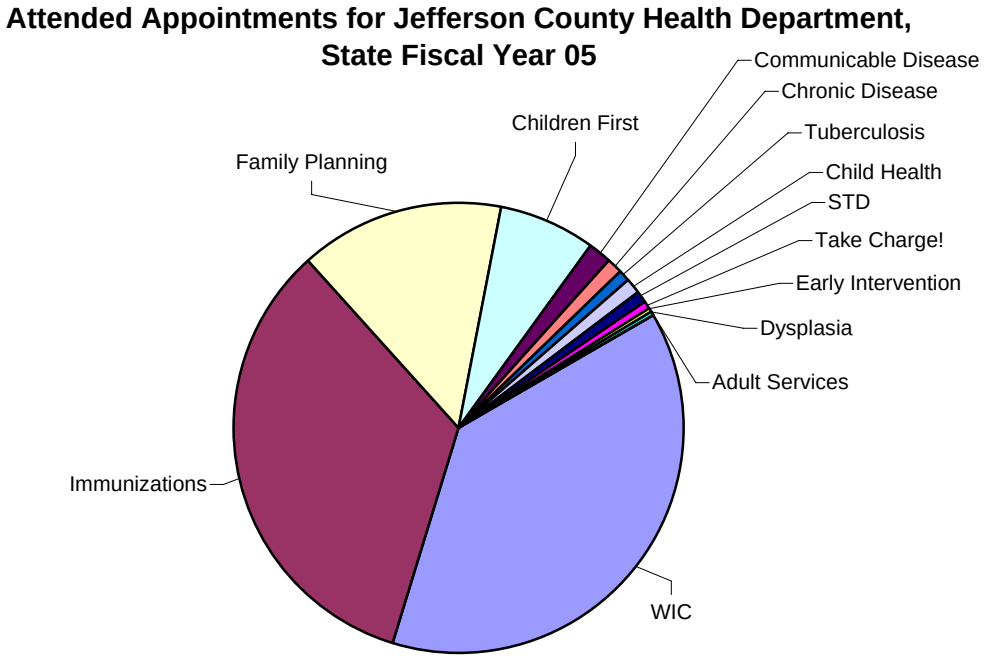
Oklahoma Children On Schedule by Antigen, 2004



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

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 40 deaths a year
- $369,476.69 per death
- Total— $14,779,067.60 a year

Obesity

- Data Not Available At This Time

Motor Vehicle-Related Injury Death

- Average 2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,240,000.00 a year

Tobacco Use

- Data Not Available At This Time

Diabetes

- Data Not Available At This Time

Teen Pregnancy

- Average of 12 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $38,400.00 a year

Grand Total for Jefferson County:

$17,057,467.60

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Jefferson County Health Department
107 East Anderson Ave
Waurika, OK 73573-3029
580-228-2313

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Report compiled by:
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Oklahoma Turning POINT

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OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

Johnston County

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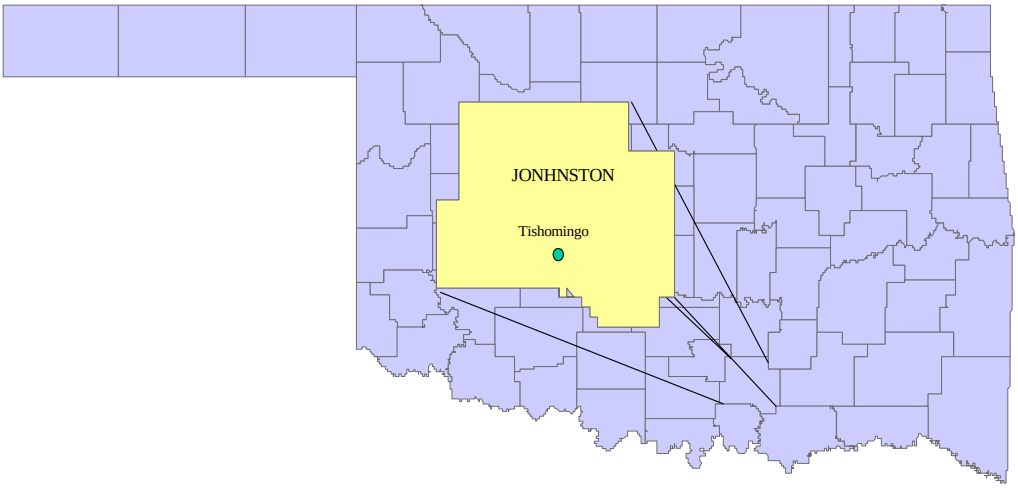

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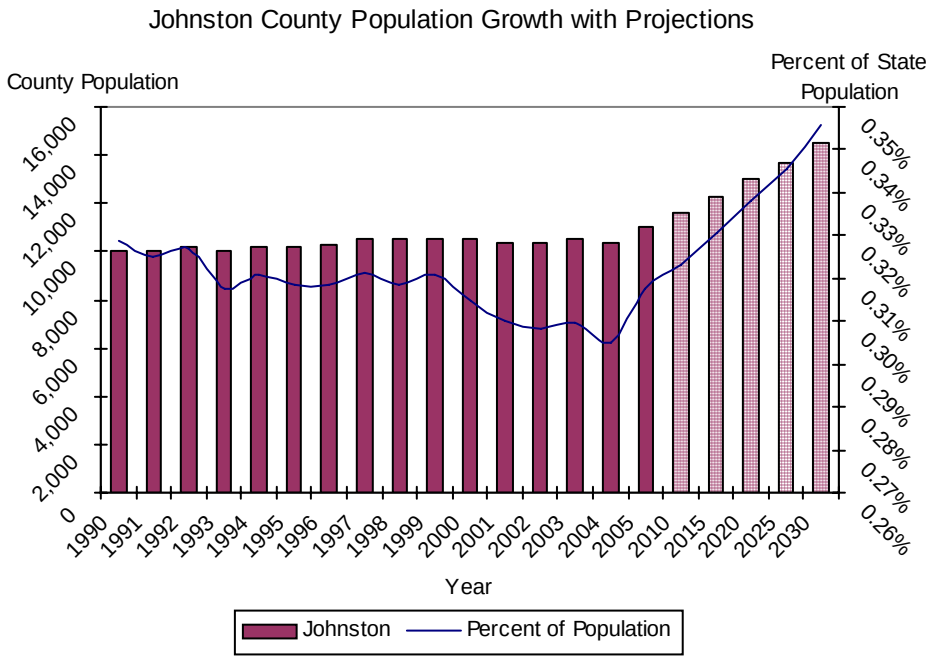
Demographics

** U.S. Census Bureau*

- Population estimates
  - 5% increase from 1990 to 2000 (10,032 to 10,513)
  - 1% decrease from 2000 to 2004
  - Ranked 46th in state for growth

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 76%
  - Native Americans =15%
  - Blacks =2%
  - Other/Multiple = 7%
- Age
  - Under 5 = 6%
  - Over 64 = 15%
  - Median age = 38.0 years
- Housing units
  - Occupied = 4,057 (85%)
  - Vacant = 725 (15%)
- Disability (ages 21 to 64) = 31.4% national = 19.2% state = 21.5%
- Individuals below poverty = 15.9% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Johnston County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1609 people in Johnston County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 45 deaths a year, heart disease accounts for almost $17 million a year in medical costs in Johnston County.

Heart disease accounts for almost $17 million a year in medical costs in Johnston County.

Alzheimer's disease and the complications associated have not increased in ranked cause of death, still the 9th ranked cause of death in persons 65 and older but it has accounted for a 120% increase in deaths.

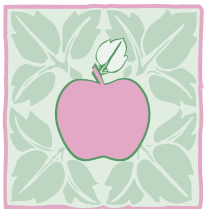
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 26.0% (2,736) of people in Johnston County were considered obese which accounted for an additional $1,080,720 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Johnston County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 4	STROKE 1	UNINTENT. INJURY 12	UNINTENT. INJURY 11	UNINTENT. INJURY 16	CANCER 26	HEART DISEASE 57	HEART DISEASE 397	HEART DISEASE 496
2	HEART DISEASE 3		SUICIDE 3	SUICIDE 4	CANCER 14	HEART DISEASE 26	CANCER 48	CANCER 189	CANCER 281
3	HOMICIDE/ LEGAL 1		BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	CANCER 3	HEART DISEASE 11	UNINTENT. INJURY 13	BRONCHITIS/ EMPHYSEMA/ ASTHMA 9	STROKE 80	STROKE 98
4	PERINATAL PERIOD 1		CONGENITAL ANOMALIES 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	SUICIDE 4	DIABETES MELLITUS 7	STROKE 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 70	BRONCHITIS/ EMPHYSEMA/ ASTHMA 84
5	OTHER 3		HOMICIDE/ LEGAL 1	DIABETES MELLITUS 1	STROKE 3	STROKE 5	DIABETES MELLITUS 4	INFLUENZA/ PNEUMONIA 57	UNINTENT. INJURY 78
6			CANCER 1	HEART DISEASE 1	LIVER DISEASE 2	SUICIDE 4	KIDNEY DISEASE 3	DIABETES MELLITUS 32	INFLUENZA/ PNEUMONIA 61
7			OTHER 2	HOMICIDE/ LEGAL 1	DIABETES MELLITUS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	UNINTENT. INJURY 3	KIDNEY DISEASE 27	DIABETES MELLITUS 45
8				SEPTICEMIA (BLOOD POISONING) 1	HIV 1	HIV 2	INFLUENZA/ PNEUMONIA 2	UNINTENT. INJURY 23	KIDNEY DISEASE 31
9				VIRAL HEPATITIS 1	HYPERTENSION 1	SIX CAUSES TIED 1	LIVER DISEASE 2	ALZHEIMER'S DISEASE 22	ALZHEIMER'S DISEASE 22
10				OTHER 3	INFLUENZA/ PNEUMONIA 1		SEVEN CAUSES TIED 1	SEPTICEMIA (BLOOD POISONING) 20	SEPTICEMIA (BLOOD POISONING) 21

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health July 2005

Injury and Violence

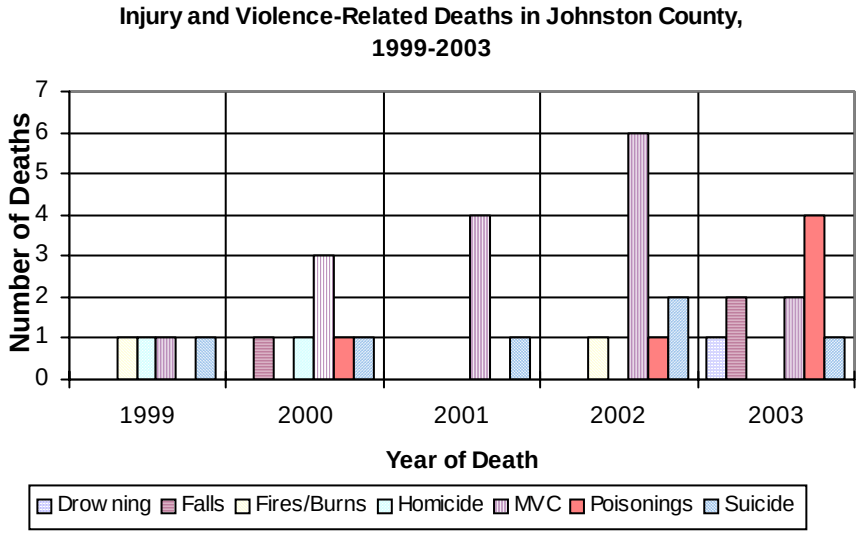
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Johnston County. Unintentional injuries are the leading cause of death from ages 15 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Johnston County which has an average of 3.2 motor vehicle-related deaths a year, that translates to almost $4 million a year.

Violence-related injuries (homicide and suicide) in Johnston County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 21.7% (2,851) of people in Johnston County use tobacco of some sort. Medical costs accumulated by those persons are over $9 million a year for Johnston County.

*"Medical costs accumulated by those persons are over **$9 million a year** for Johnston County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 39.8% (4,188) of people in Johnston County had no leisure activity in the past month at the time they were surveyed.

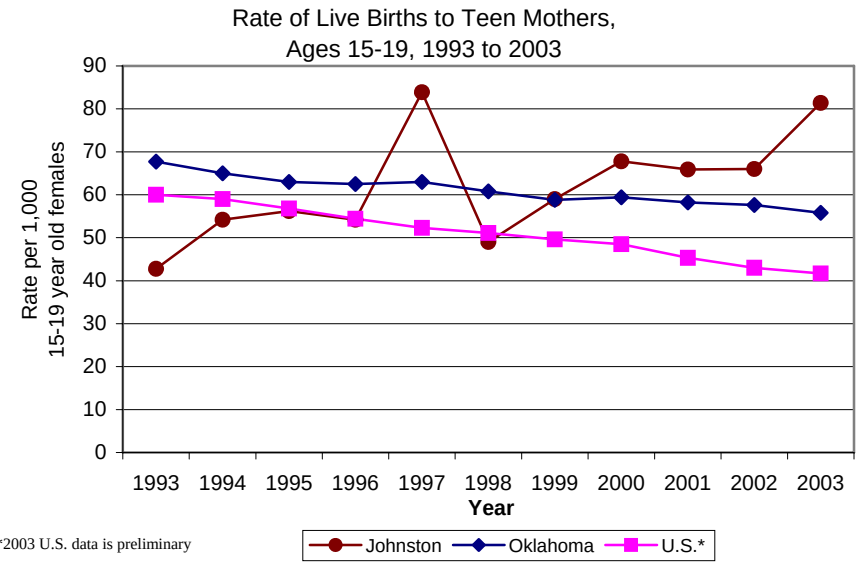
The BRFSS also indicated that 9.3% (979) of Johnston County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $12,964,897 in one year for Johnston County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

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

According to Oklahoma Vital Statistics, Johnston County had a teen birth rate of 81.4 in 2003 which was a 23% increase from 2002 (66.0) and a 90% increase since 1993 (42.8).

With an average of 25 births per year, teen pregnancy costs the citizens of Johnston County $80,000 a year.

Note: Four births to a mother 10-14 years of age occurred during the 11

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 22% of persons in Johnston County for whom poverty status was known had an income below what was need to live at the federal poverty level. Johnston County is 50% above the state (14.7%) and 77% above the nation (12.4%) for persons with incomes below the federal poverty level.

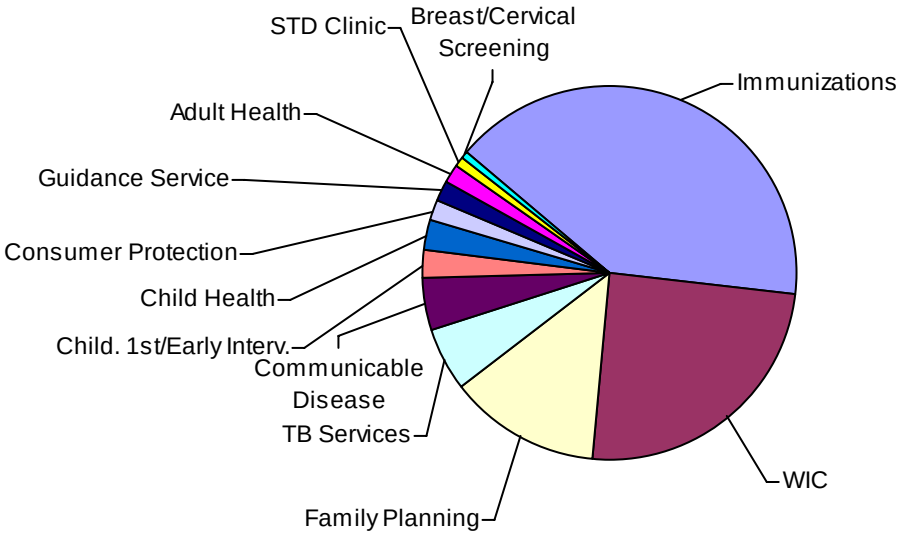
Income to Poverty Ratio, Johnston County, 2000 Census

Poverty level	Total	50% below	51% to 99% below	Poverty Level to 149% above	150% to 199% above	200% and above
Population	10,213	837	1,409	1,575	1,367	5,025
Cumulative Population		837	2,246	3,821	5,188	10,213
% of Total	100%	8.2%	13.8%	15.4%	13.4%	49.2%
Cumulative %		8.2%	22.0%	37.4%	50.8%	100%

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 45 deaths a year
- $369,476.69 per death
- Total— $16,626,451.05 a year

Obesity

- 26.0% of population (2,736)
- $395.00 in additional medical costs per person
- Total—$1,080,720.00

Motor Vehicle-Related Injury Death

- Average 3.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$3,584,000.00 a year

Tobacco Use

- 27.1% of population (2,851)
- $3,300.00 in health care costs
- Total—$9,408,300.00 a year

Diabetes

- 9.3% of population (979)
- $13,243.00 in healthcare costs a year
- Total—$12,964,897.00 a year

Teen Pregnancy

- Average of 25 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total—$80,000.00 a year

Grand Total for Johnston County:

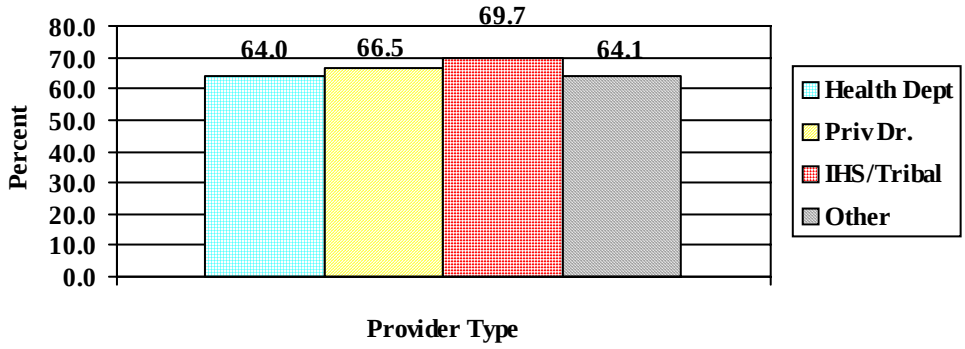
$43,744,368.05

OK By One - State Immunization Data

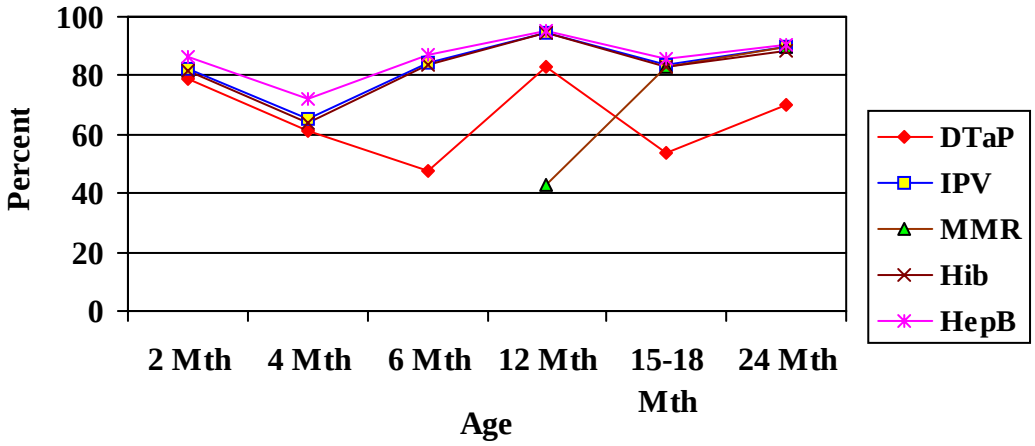
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Johnston County Health Department
1080 S Byrd
PO Box 486
Tishomingo, Oklahoma 73460
580-371-2470

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

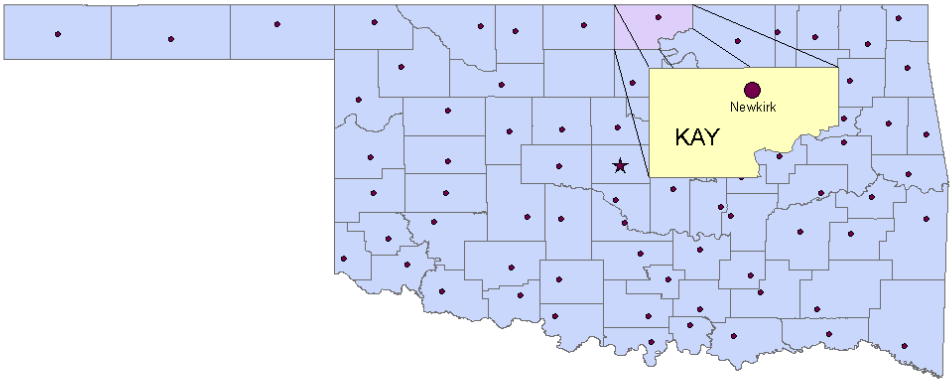
State of the County's Health Report

A Look Back To Move Forward

Kay County

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

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



Inside this issue:

County Demographics	2
Top 10 Leading Causes of Death	2
Nutrition & Obesity	2
Top 10 Leading Causes of Death Table	3
Injury & Violence	4
Tobacco Use	4
Physical Activity, Wellness & Diabetes	4
County Health Department Usage	5
Health Care Costs Summary	5
Turning Point	6

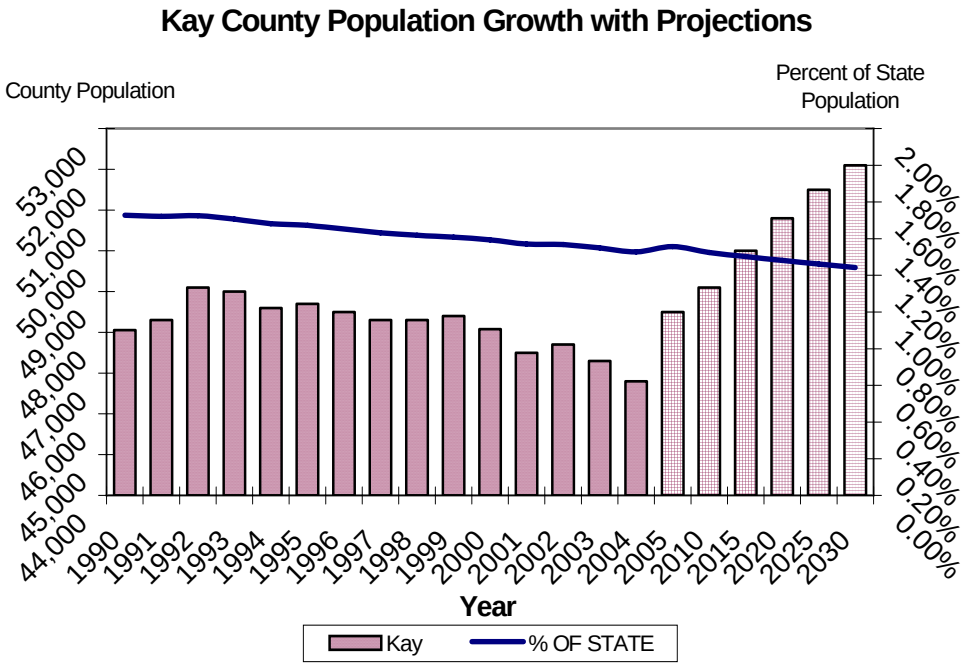
Demographics

** U.S. Census Bureau*

- Population estimates
  - no significant increase from 1990 to 2000 (48,056 to 48,080)
  - 2.7% decrease from 2000 to 2004
  - Ranked 60th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 84%
  - Native Americans = 8%
  - Blacks = 2%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 17%
  - Median age = 38.1 years
- Housing units
  - Occupied = 19,157
  - Vacant = 2,647
- Disability (ages 21 to 64) = 21.8% national average = 19.2%
- Families below poverty = 12.4% national average = 9.2%



** Vital Statistics,* Health Care Information Systems, OSDH &

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Kay County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,395 people in Kay County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 212 deaths a year, heart disease accounts for almost $78 million a year in medical costs in Kay County.

Heart disease accounts for almost $78 million a year in medical costs in Kay County.

Alzheimer's disease and the complications associated has increased from the 14th ranked cause of death (1983-1993) to the 9th leading cause of death in persons 65 and older accounting for a 273% increase in deaths.

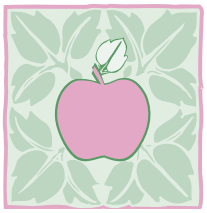
** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 30.5% (14,664) of people in Kay County were considered obese which accounted for an additional $5,792,438 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Kay County 1993-2003

	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 19	UNINTENTIONAL INJURY 11	UNINTENTIONAL INJURY 46	SUICIDE 23	CANCER 39	HEART DISEASE 100	CANCER 226	HEART DISEASE 1987	HEART DISEASE 2332
2	PERINATAL PERIOD 18	CANCER 3	SUICIDE 13	UNINTENTIONAL INJURY 20	UNINTENTIONAL INJURY 34	CANCER 80	HEART DISEASE 203	CANCER 1016	CANCER 1376
3	UNINTENTIONAL INJURY 9	SUICIDE 2	CANCER 3	CANCER 9	HEART DISEASE 30	UNINTENTIONAL INJURY 19	BRONCHITIS/ EMPHYSEMA/ ASTHMA 29	STROKE 465	STROKE 505
4	SIDS 4	MENINGITIS 1	HOMICIDE/ LEGAL INTERV. 3	HEART DISEASE 9	SUICIDE 20	LIVER DISEASE 14	STROKE 23	BRONCHITIS/ EMPHYSEMA/ ASTHMA 291	BRONCHITIS/ EMPHYSEMA/ ASTHMA 330
5	HOMICIDE/ LEGAL INTERV. 2	OTHER 2	HEART DISEASE 2	HOMICIDE/ LEGAL INTERV. 9	DIABETES MELLITUS 7	DIABETES MELLITUS 13	UNINTENTIONAL INJURY 19	INFLUENZA/ PNEUMONIA 186	UNINTENTIONAL INJURY 287
6	ACUTE BRONCHITIS 1		SEVEN CAUSES TIED 1	STROKE 3	STROKE 6	SUICIDE 12	DIABETES MELLITUS 16	DIABETES MELLITUS 164	INFLUENZA/ PNEUMONIA 203
7	INFLUENZA/ PNEUMONIA 1			BENIGN TUMOR 2	HIV 5	STROKE 8	LIVER DISEASE 11	UNINTENTIONAL INJURY 128	DIABETES MELLITUS 202
8	MENINGITIS 1			BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	LIVER DISEASE 5	BRONCHITIS/ EM-PHYSEMA/ ASTHMA 7	INFLUENZA/ PNEUMONIA 9	KIDNEY DISEASE 66	SUICIDE 95
9	MENINGOCOC-CAL INFECTION 1			DIABETES MELLITUS 2	HOMICIDE/ LEGAL INTERV. 4	VIRAL HEPATITIS 4	SUICIDE 9	ALZHEIMER'S DISEASE 62	KIDNEY DISEASE 73
10	OTHER 21			INFLUENZA/ PNEUMONIA 2	VIRAL HEPATITIS 3	SEPTICEMIA (BLOOD POISONING) 3	SEPTICEMIA (BLOOD POISONING) 6	SEPTICEMIA (BLOOD POISONING) 51	ALZHEIMER'S DISEASE 65

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

Injury and Violence

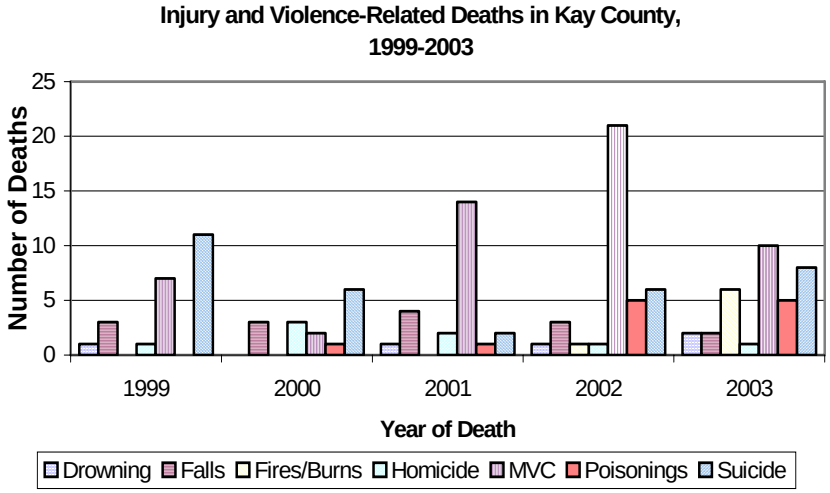
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Kay County. Unintentional injuries are the leading cause of death from ages 5 to 24 and the 2nd cause of death in ages 25 to 44 in Kay County.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Kay County which has an average of 11 motor vehicle-related deaths a year, that translates to over $12 million a year.

Violence-related injuries (homicide and suicide) in Kay County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 25.7% (12,357) of people in Kay County use tobacco of some sort. Medical costs accumulated by those persons are over $40 million a year for Kay County.

*"Medical costs accumulated by those persons are over **$40 million a year** for Kay County"*

Physical Activity, Wellness and Diabetes

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

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

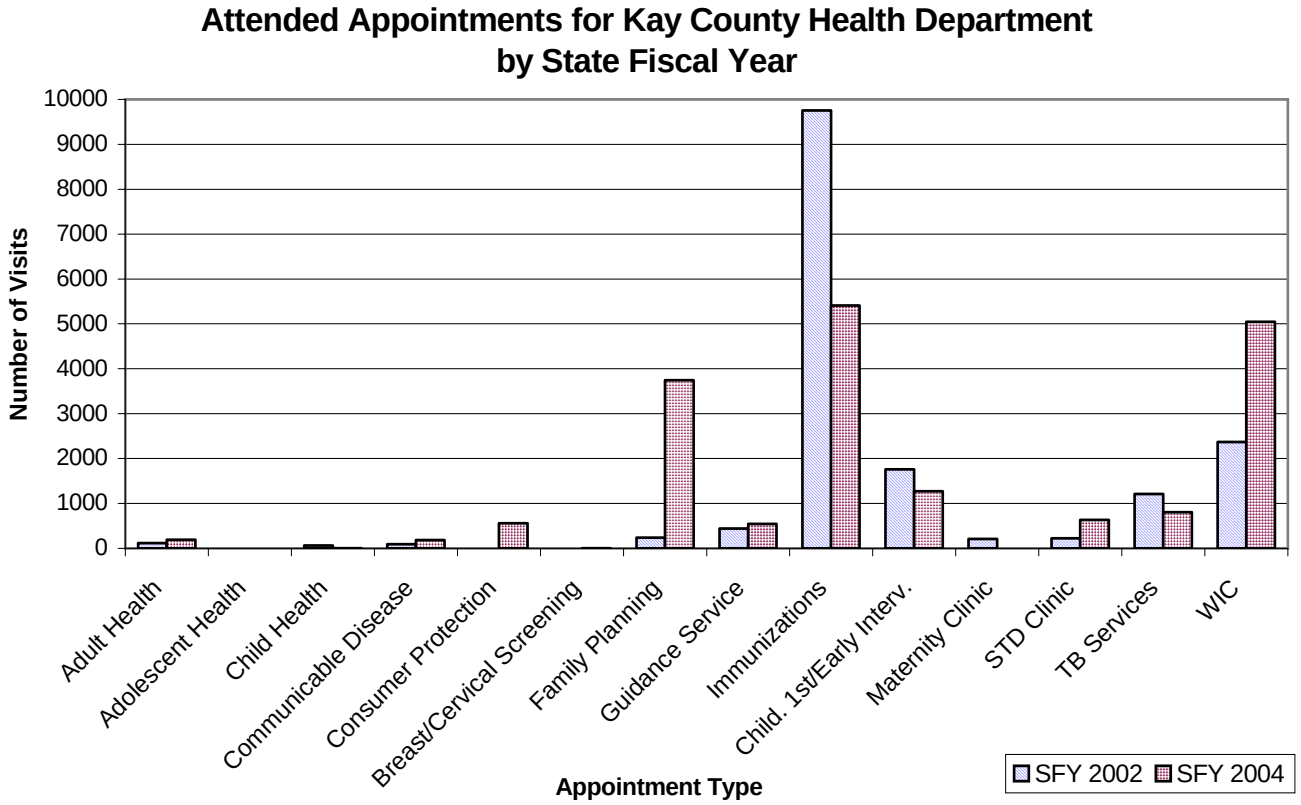
According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 27.6% (13,270) of people in Kay County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.6% (5,096) of Kay County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $67,486,328 in one year for Kay County.

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

County Health Department Usage

** PHOCIS, Community Health Services, OSDH*



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 212 deaths a year
- $369,476.69 per death
- Total—$78,329,058.28 a year

Obesity

- 30.5% of population (14,664)
- $395 in additional medical costs per person
- Total—$5,792,438.00

Motor Vehicle-Related Injury Death

- Average 11 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$12,320,000.00 a year

Tobacco Use

- 25.7% of population (12,357)
- $3,300 in health care costs
- Total—$40,778,100.00 a year

Diabetes

- 10.6% of population (5,096)
- $13,243 in healthcare costs a year
- Total—$67,486,328 a year

Grand Total for Kay County:

$204,705,924.28

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Development Service

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Email: neil@health.ok.gov

Looking Back to Move Forward

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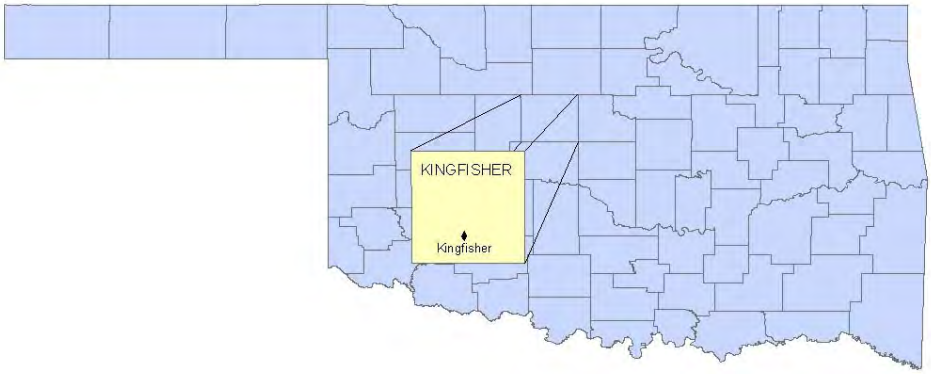

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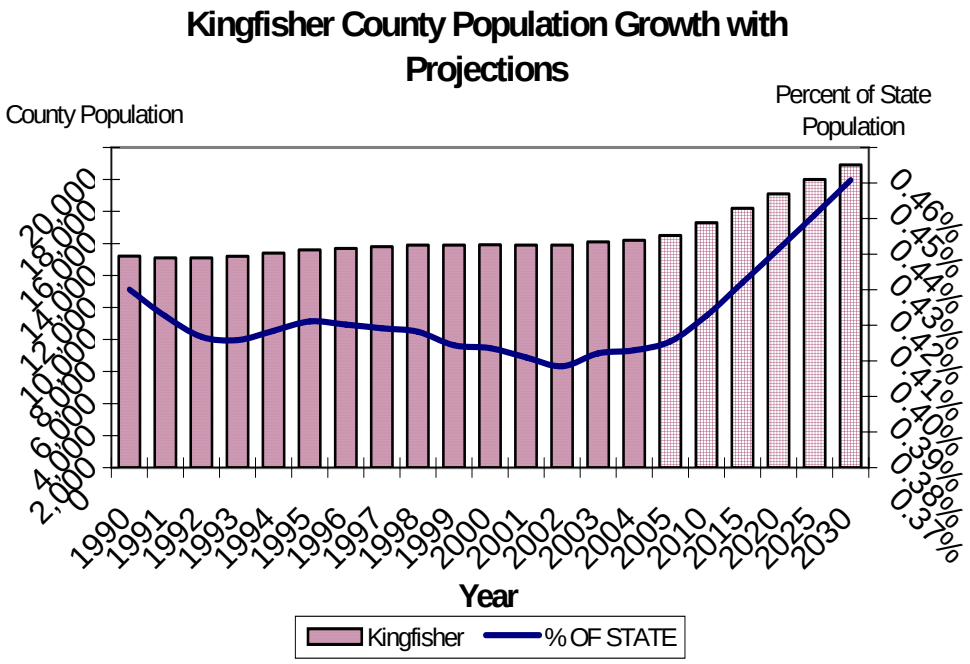
Poverty	5
County Health Department Usage	6
Health Care Costs Summary	6
Turning Point	7

Demographics

- Population estimates
  - 5% increase from 1990 to 2000 (13,212 to 13,926)
  - 2.0% increase from 2000 to 2004
  - Ranked 25th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 7%
- Race
  - Whites = 88%
  - Native Americans = 3%
  - Blacks = 2%
  - Other/Multiple = 7%
- Age
  - Under 5 = 6%
  - Over 64 = 15%
  - Median age = 38.0 years
- Housing units
  - Occupied = 5,879
  - Vacant = 632
- Disability (ages 21 to 64) = 19.1% national average = 19.2%
- Families below poverty = 8.5% national average = 9.2%



Top 10 Leading Causes of Death

* *Vital Statistics,* Health Care Information Systems, OSDH &

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Kingfisher County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 587 people in Kingfisher County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 50 deaths a year, heart disease accounts for over $18 million a year in medical costs in Kingfisher County.

Heart disease accounts for over $18 million a year in medical costs in Kingfisher County.

Diabetes and the complications associated has increased from the 9th ranked cause of death (1983-1993) to the 6th leading cause of death in persons 65 and older accounting for a 77% increase in deaths.

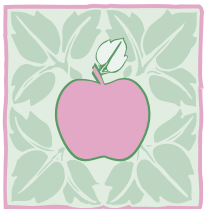
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 30.7% (4,319) of people in Kingfisher County were considered obese which accounted for an additional $1,706,005 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Kingfisher County 1993-2003

	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 4	UNINTENTIONAL INJURY 7	UNINTENTIONAL INJURY 17	UNINTENTIONAL INJURY 9	UNINTENTIONAL INJURY 13	HEART DISEASE 28	CANCER 65	HEART DISEASE 467	HEART DISEASE 553
2	HEART DISEASE 1	CANCER 1	CANCER 1	SUICIDE 5	HEART DISEASE 9	CANCER 15	HEART DISEASE 45	CANCER 218	CANCER 312
3	MENINGITIS 1	HOMICIDE/ LEGAL INTERV. 1	HEART DISEASE 1	CANCER 4	CANCER 8	UNINTENTIONAL INJURY 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 9	STROKE 110	STROKE 119
4	SIDS 1		SUICIDE 1	HIV 2	SUICIDE 4	LIVER DISEASE 6	UNINTENTIONAL INJURY 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 76	UNINTENTIONAL INJURY 89
5	OTHER 1		OTHER 1	HOMICIDE/ LEGAL INTERV. 2	HIV 3	STROKE 5	DIABETES MELLITUS 3	INFLUENZA/ PNEUMONIA 69	BRONCHITIS/ EMPHYSEMA/ ASTHMA 87
6				CONGENITAL ANOLMALIES 1	INFLUENZA/ PNEUMONIA 2	DIABETES MELLITUS 3	INFLUENZA/ PNEUMONIA 3	DIABETES MELLITUS 39	INFLUENZA/ PNEUMONIA 76
7				DIABETES MELLITUS 1	LIVER DISEASE 2	SUICIDE 3	KIDNEY DISEASE 3	ATHEROSCLERO-SIS 28	DIABETES MELLITUS 46
8				HEART DISEASE 1	HOMICIDE/ LEGAL INTERV. 1	BRONCHITIS/ EM-PHYSEMA/ ASTHMA 2	LIVER DISEASE 3	UNINTENTIONAL INJURY 28	ATHEROSCLERO-SIS 28
9					STROKE 1	HIV 2	STROKE 3	KIDNEY DISEASE 21	KIDNEY DISEASE 24
10					OTHER 4	INFLUENZA/ PNEUMONIA 2	SUICIDE 3	ALZHEIMER'S DISEASE 17	ALZHEIMER'S DISEASE 22

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

Injury and Violence

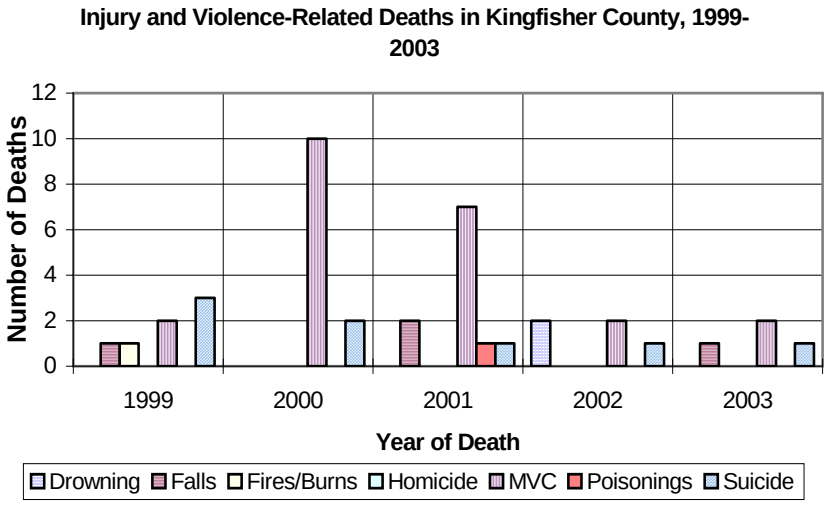
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Kingfisher County which has an average of 5 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Kingfisher County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.5% (3,165) of people in Kingfisher County use tobacco of some sort. Medical costs accumulated by those persons are over $10 million a year for Kingfisher County.

*"Medical costs accumulated by those persons are over **$10 million a year** for Kingfisher County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 32.6% (4,586) of people in Kingfisher County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.7% (942) of Kingfisher County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $12,474,906 in one year for Kingfisher County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

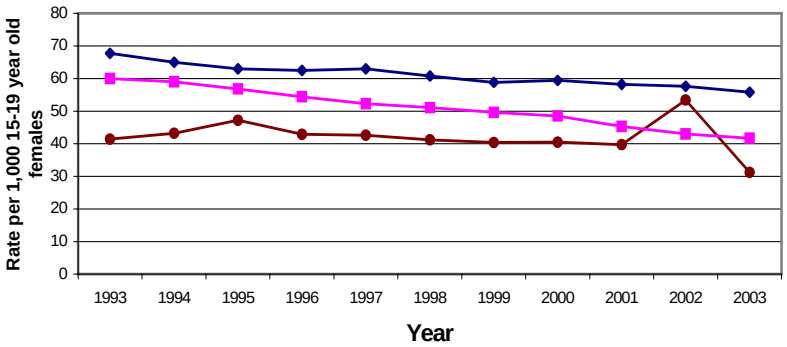
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Kingfisher County had a teen birth rate of 31.2 in 2003 which was a 42% decrease from 2002 (53.4) but only a 25% decrease since 1993 (41.4).

With an average of 23 births per year, teen pregnancy costs the citizens of Kingfisher County $73,600.00 a year.

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



*2003 U.S. data is preliminary

Kingfisher — Oklahoma — U.S.*

Note: Only 1 birth to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 10.8% of persons in Kingfisher County for whom poverty status was known had an income below what was need to live at the federal poverty level. Kingfisher County is 27% below the state and 13% below the nation for persons with incomes below the federal poverty level.

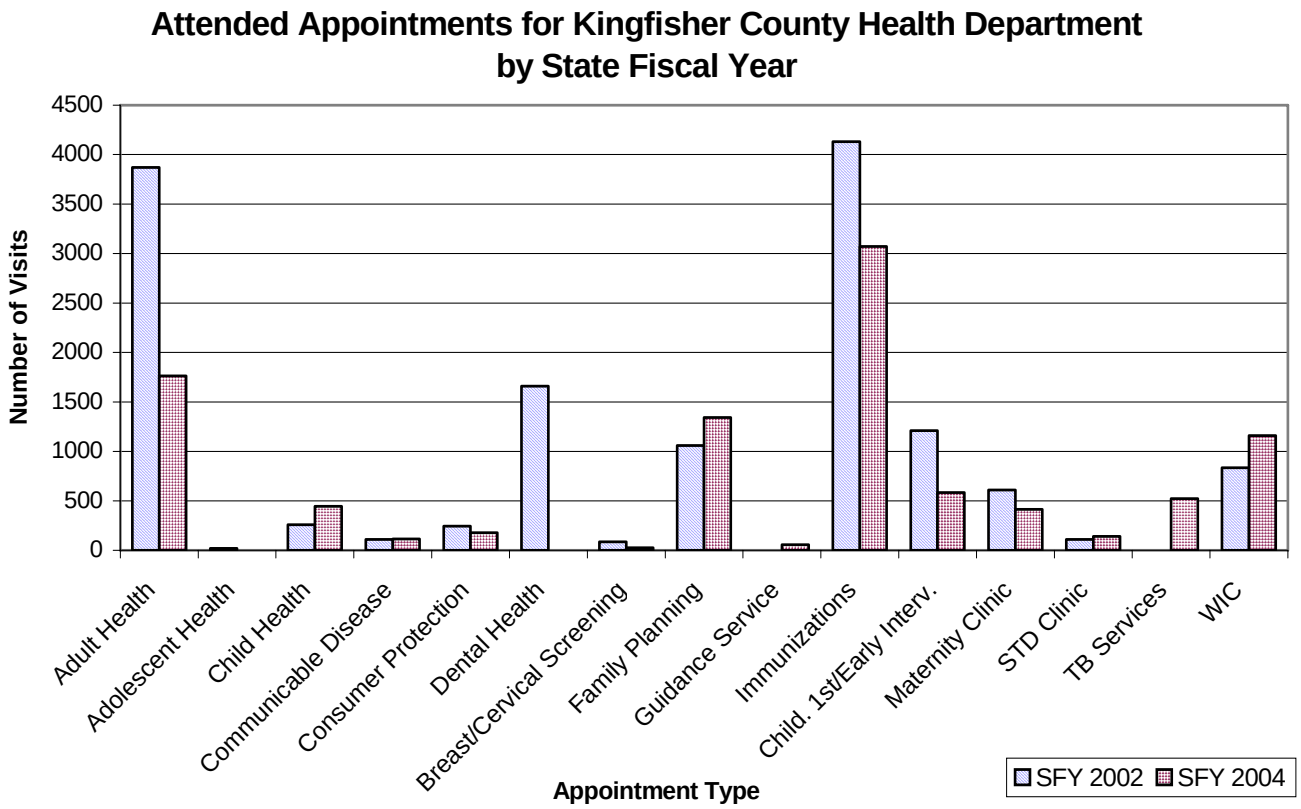
Income to Poverty Ratio Comparison, Kingfisher County, 1990 and 2000 Census

1990 Census	Total	Under .50	.50 to .74	.75 to .99	1.00 to 1.24	1.25 to 1.49	1.50 to 1.74	1.75 to 1.84	1.85 to 1.89	2.00 and over
Population	12,985	459	443	497	1003	819	1062	238	449	8015
Cumulative Population		459	902	1,399	2,402	3,221	4,283	4,521	4,970	12,985
% of Total	100.0%	3.5%	3.4%	3.8%	7.7%	6.3%	8.2%	1.8%	3.5%	61.7%
Cumulative %		3.5%	6.9%	10.8%	18.5%	24.8%	33.0%	34.8%	38.3%	100.0%
2000 Census	Total	Under .50	.50 to .74	.75 to .99	1.00 to 1.24	1.25 to 1.49	1.50 to 1.74	1.75 to 1.84	1.85 to 1.89	2.00 and over
Population	13,630	638	333	501	626	870	795	481	401	8,985
Cumulative Population		638	971	1,472	2,098	2,968	3,763	4,244	4,645	13,630
% of Total	100.0%	4.7%	2.4%	3.7%	4.6%	6.4%	5.8%	3.5%	2.9%	65.9%
Cumulative %		4.7%	7.1%	10.8%	15.4%	21.8%	27.6%	31.1%	34.1%	100.0%
2000 -1990 Differential										
Population Difference	645	179	(110)	4	(377)	51	(267)	243	(48)	970
% Difference	5.0%	39.0%	-24.8%	0.8%	-37.6%	6.2%	-25.1%	102.1%	-10.7%	12.1%

* Note: ratio< 1, income is less than the poverty level; ratio = 1.00, income and poverty are the same; ratio > 1, income is higher than poverty level

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 50 deaths a year
- $369,476.69 per death
- Total—$18,574,600.87 a year

Obesity

- 30.7% of population (4,319)
- $395.00 in additional medical costs per person
- Total—$1,706,005.00

Motor Vehicle-Related Injury Death

- Average 5 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,600,000.00 a year

Tobacco Use

- 22.5% of population (3,165)
- $3,300.00 in health care costs
- Total—$10,444,500.00 a year

Diabetes

- 6.7% of population (942)
- $13,243.00 in healthcare costs a year
- Total—$12,474,906.00 a year

Teen Pregnancy

- Average of 23 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total—$73,600.00 a year

Grand Total for Kingfisher County:

$48,873,611.87

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117

Phone: 405-271-6127
Fax: 405-271-1225
Email: neil@health.ok.gov

Looking Back to Move Forward

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

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

Kingfisher County Community Advisory Board

We want to say Thank You to all the people that make the Kingfisher County Community Advisory Board such a huge success.

- Kingfisher County Department of Human Services
- Kingfisher County Health Department
- Russell-Murray Hospice
- Kingfisher Hospital
- Kingfisher Public Schools
- Kingfisher Chamber of Commerce
- Ministerial Alliance
- Kingfisher Trails Committee
- Kingfisher County Clerks Office
- OSU Extension Office
- Wheatland Mental Health
- St. Peter and Paul Private School
- Business Community
- Oklahoma Commission on Children and Youth
- Concerned Citizens
- Sooner SUCCESS

OKLAHOMA STATE DEPARTMENT OF HEALTH

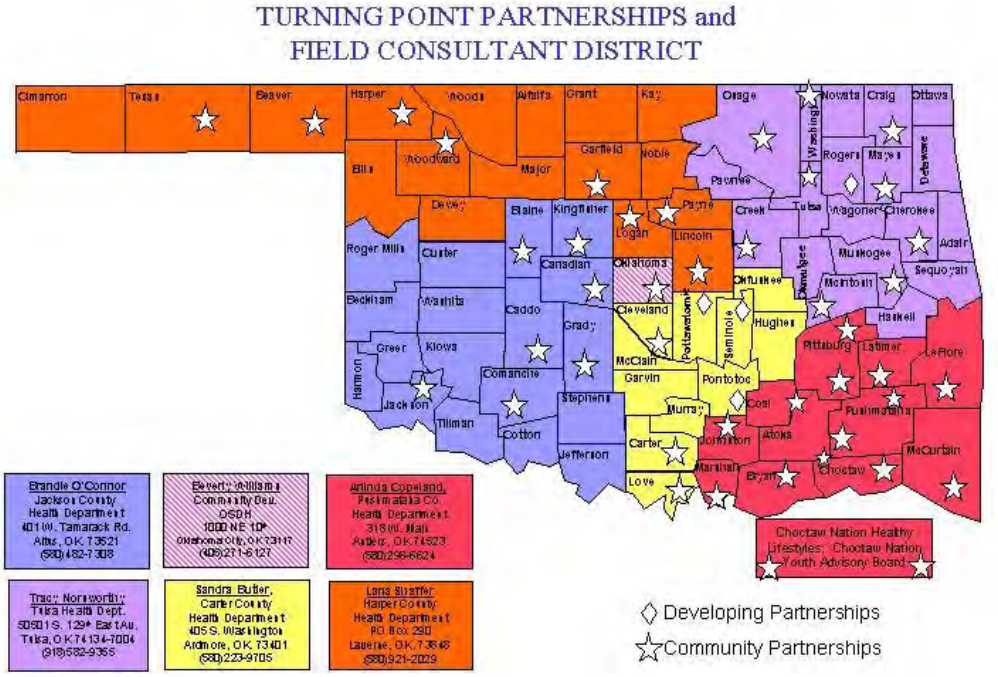
State of the County's Health Report

A Look Back To Move Forward

Kiowa County

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

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



Inside this issue:

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County Health Department Usage	7
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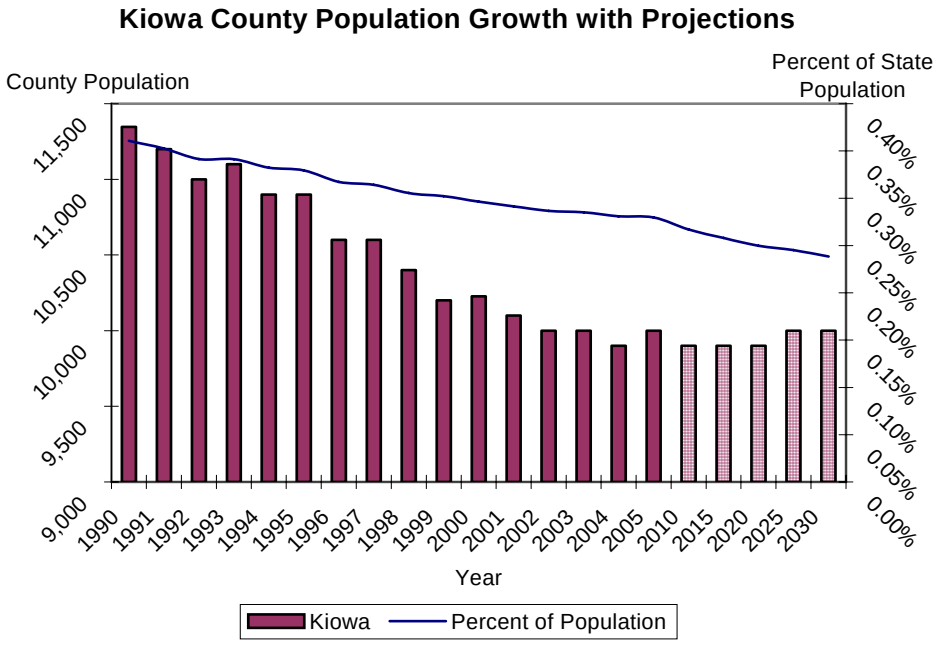
Demographics

** U.S. Census Bureau*

- Population estimates
  - 10% decrease from 1990 to 2000 (11,347 to 10,227)
  - 3% decrease from 2000 to 2004
  - Ranked 61st for growth in state

2000 Census

- Hispanic/Latino ethnicity = 7%
- Race
  - Whites = 84%
  - Native Americans =6%
  - Blacks =5%
  - Other/Multiple = 5%
- Age
  - Under 5 = 6%
  - Over 64 = 20%
  - Median age = 40.9 years
- Housing units
  - Occupied = 4,208 (79%)
  - Vacant = 1,096 (21%)
- Disability (ages 21 to 64) = 21.0% national = 19.2% state = 21.5%
- Individuals below poverty = 19.3% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Kiowa County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 816 people in Kiowa County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 61.5 deaths a year, heart disease accounts for almost $23 million a year in medical costs in Kiowa County.

Heart disease accounts for almost $23 million a year in medical costs in Kiowa County.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 123% increase in deaths.

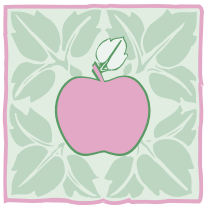
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 30.3% (3,023) of people in Kiowa County were considered obese which accounted for an additional $1,194,085 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Kiowa County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 6	UNINTENT. INJURY 2	UNINTENT. INJURY 11	UNINTENT. INJURY 8	CANCER 11	HEART DISEASE 25	HEART DISEASE 57	HEART DISEASE 585	HEART DISEASE 677
2	CONGENITAL ANOMALIES 4	CONGENITAL ANOMALIES 1	SUICIDE 2	SUICIDE 3	UNINTENT. INJURY 10	CANCER 23	CANCER 54	CANCER 285	CANCER 375
3	UNINTENT. INJURY 3		CANCER 1	CANCER 1	HEART DISEASE 9	LIVER DISEASE 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 11	STROKE 167	STROKE 178
4	SIDS 1		HIV 1	HEART DISEASE 1	STROKE 2	STROKE 4	UNINTENT. INJURY 11	INFLUENZA/ PNEUMONIA 89	BRONCHITIS/ EMPHYSEMA/ ASTHMA 98
5	OTHER 4		HOMICIDE/ LEGAL 1	HOMICIDE/ LEGAL 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	UNINTENT. INJURY 4	DIABETES MELLITUS 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 84	INFLUENZA/ PNEUMONIA 95
6			OTHER 2	LIVER DISEASE 1	DIABETES MELLITUS 1	INFLUENZA/ PNEUMONIA 3	LIVER DISEASE 4	DIABETES MELLITUS 44	UNINTENT. INJURY 79
7				STROKE 1	HIV 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	STROKE 4	KIDNEY DISEASE 30	DIABETES MELLITUS 53
8				OTHER 3	INFLUENZA/ PNEUMONIA 1	DIABETES MELLITUS 2	SUICIDE 4	UNINTENT. INJURY 30	KIDNEY DISEASE 30
9					SUICIDE 1	FOUR CAUSES TIED 1	INFLUENZA/ PNEUMONIA 2	ALZHEIMER'S DISEASE 29	ALZHEIMER'S DISEASE 29
10					OTHER 9		PNEUMONITIS 2	SEPTICEMIA (BLOOD POISONING) 26	SEPTICEMIA (BLOOD POISONING) 28

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

Injury and Violence

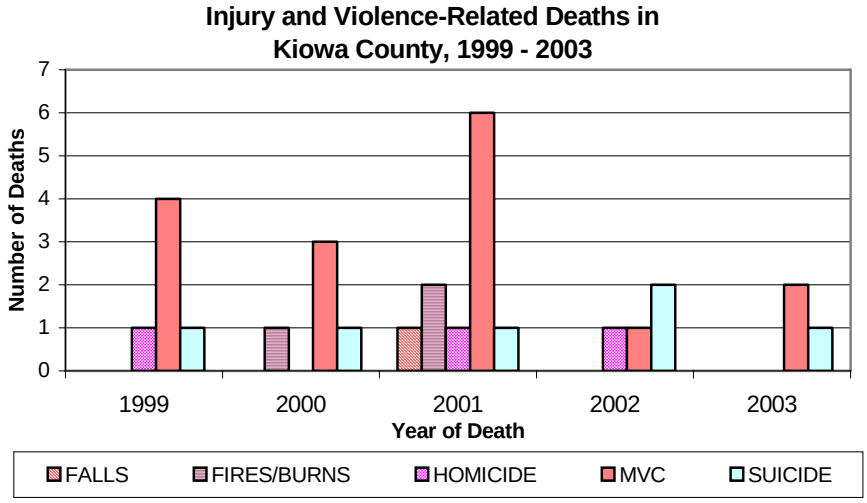
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Kiowa County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Kiowa County which has an average of 3.2 motor vehicle-related deaths a year, that translates to almost $4 million a year.

Violence-related injuries (homicide and suicide) in Kiowa County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 32.8% (3,272) of people in Kiowa County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 15.9% (1,586) of Kiowa County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $21,003,398.00 in one year for Kiowa County.

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

Teen Pregnancy

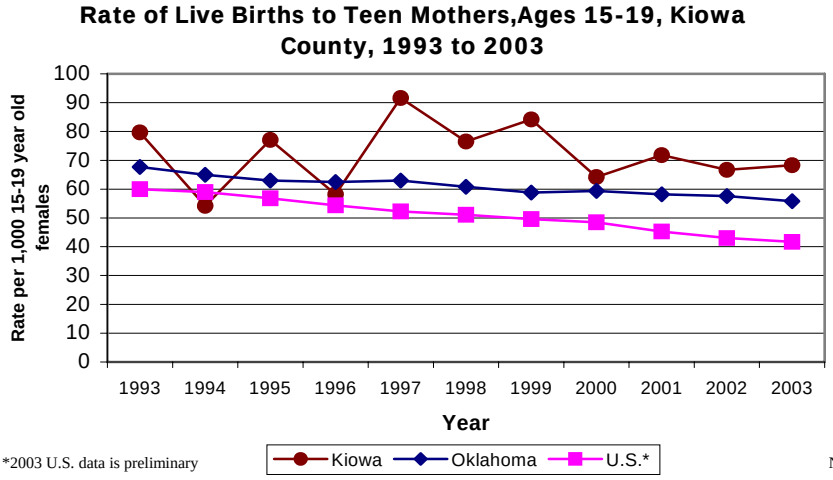
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Kiowa County had a teen birth rate of 68.3 in 2003 which was a 2% increase from 2002 (66.7) and a 14% decrease since 1993 (79.7).

With an average of 27 births per year, teen pregnancy costs the citizens of Kiowa County $86,400.00 a year.



*2003 U.S. data is preliminary

Note: 6 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 19.3% of persons in Kiowa County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Kiowa County is 31% above the state (14.7%) and 56% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Kiowa County, 2000 Census

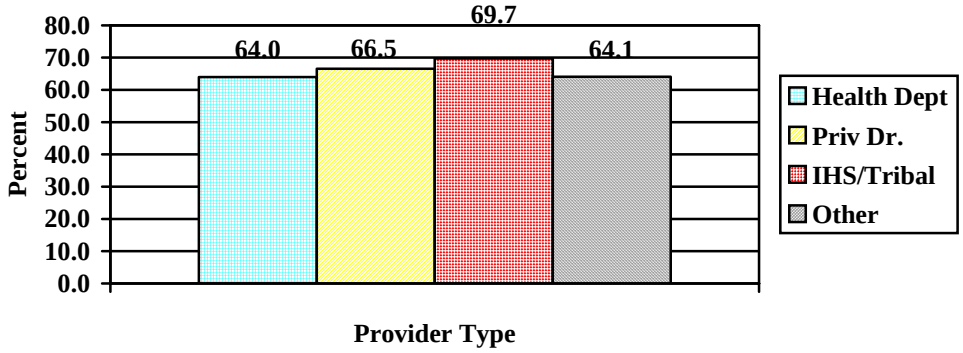
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	9,864	899	1,003	1,414	1,197	5,351
Cumulative Population		899	1,902	3,316	4,513	9,864
% of Total	100.0%	9.1%	10.2%	14.3%	12.1%	54.2%
Cumulative %		9.1%	19.3%	33.6%	45.8%	100.0%

OK By One - State Immunization Data

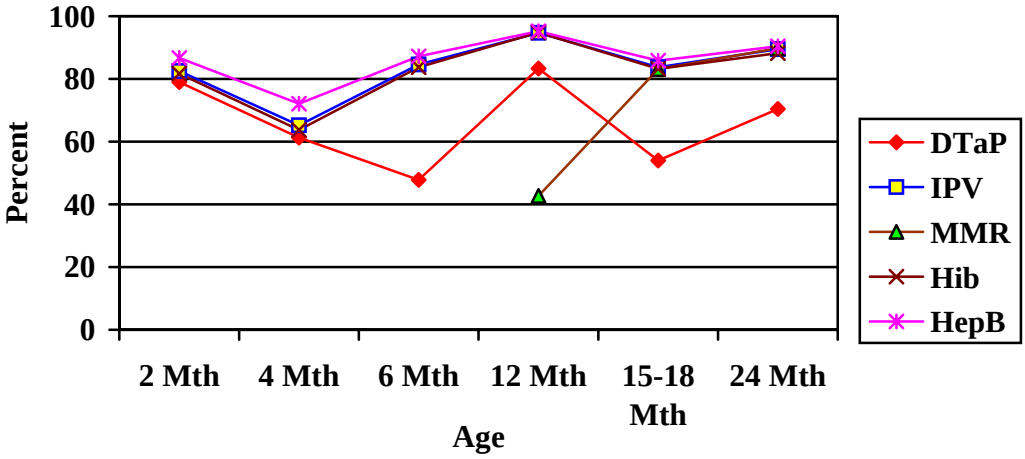
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

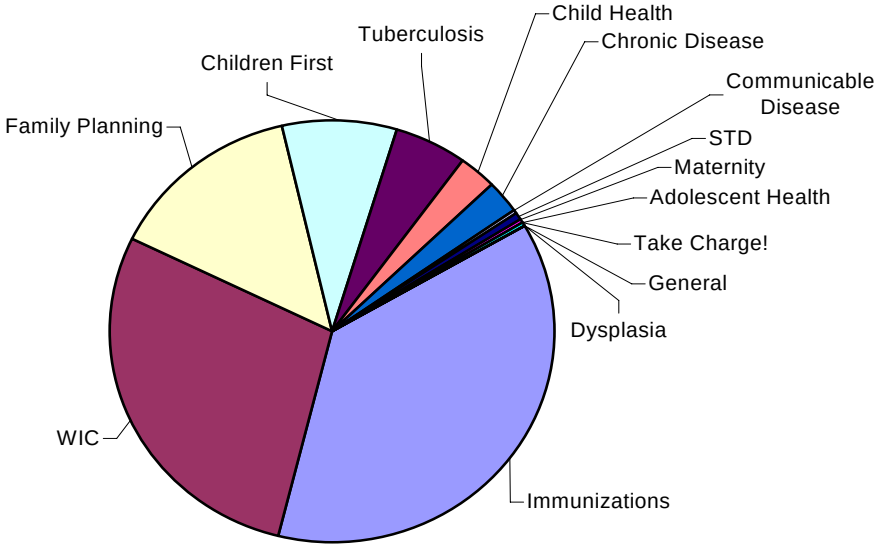


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 62 deaths a year
- $369,476.69 per death
- Total— $22,907,554.78 a year

Obesity

- 30.3% of population (3,023)
- $395.00 in additional medical costs per person
- Total—$1,194,085.00

Motor Vehicle-Related Injury Death

- Average 3.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$3,584,000.00 a year

Tobacco Use

- 32.6% of population (3,253)
- $3,300.00 in health care costs
- Total—$10,734,900.00 a year

Diabetes

- 15.9% of population (1,586)
- $13,243.00 in healthcare costs a year
- Total—$21,003,398.00 a year

Teen Pregnancy

- Average of 27 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $86,400.00 a year

Grand Total for Kiowa County:

$59,510,337.78

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Phone: 405-271-6127
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Email: neil@health.ok.gov

Kiowa County Health Department
431 W. Elm
Hobart, OK 73651
580-726-3316

Looking Back to Move Forward

Report compiled by:
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Health Care Information Systems, OSDH

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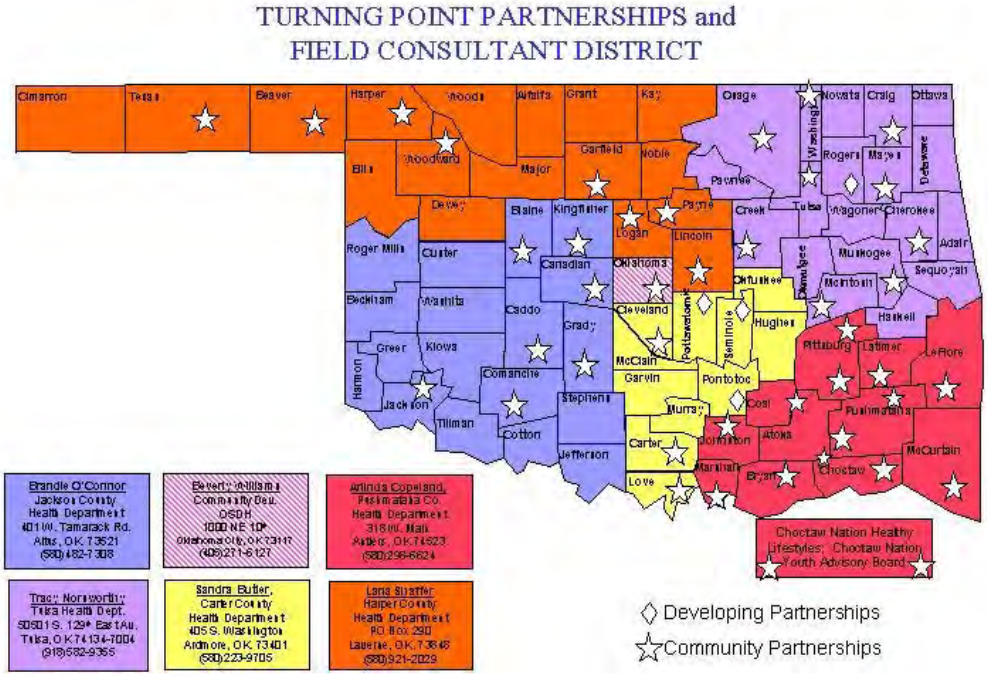

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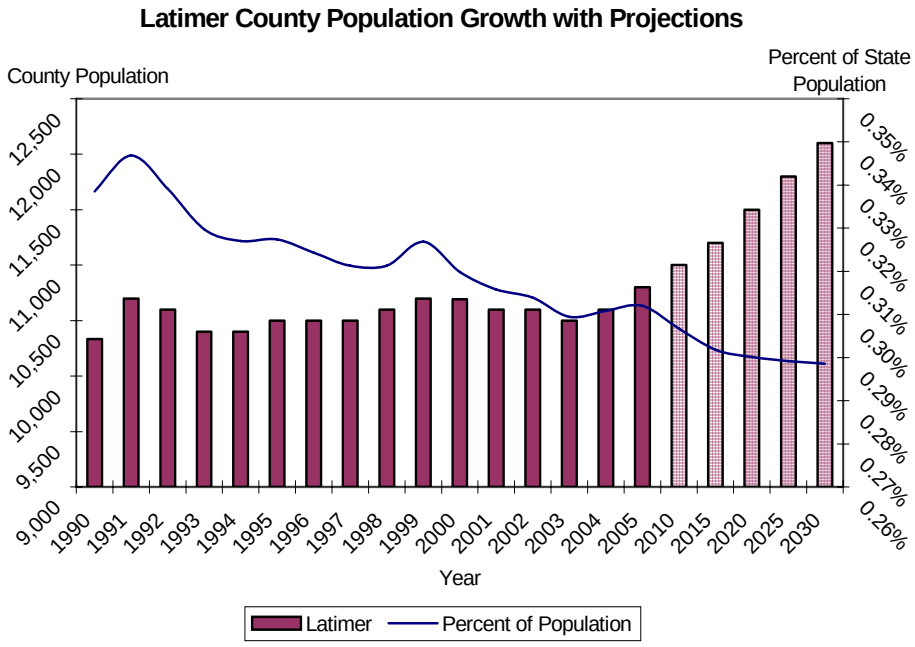
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% increase from 1990 to 2000 (10,333 to 10,692)
  - 1% decrease from 2000 to 2004
  - Ranked 44th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 73%
  - Native Americans =19%
  - Blacks =1%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 16%
  - Median age = 36.8 years
- Housing units
  - Occupied = 3,951 (84%)
  - Vacant = 758 (16%)
- Disability (ages 21 to 64) = 29.7% national = 19.2% state = 21.5%
- Individuals below poverty = 22.7% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Latimer County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 521 people in Latimer County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 45.9 deaths a year, heart disease accounts for almost $17 million a year in medical costs in Latimer County.

Heart disease accounts for almost $17 million a year in medical costs in Latimer County.

Alzheimer's disease and the complications associated with it have increased from the 12th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 175% increase in deaths.

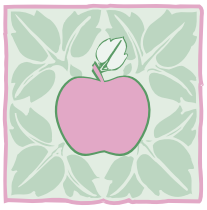
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 24.7% (2,612) of people in Latimer County were considered obese which accounted for an additional $1,031,740 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Latimer County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 5	HEART DISEASE 2	UNINTENT. INJURY 17	SUICIDE 4	HEART DISEASE 10	HEART DISEASE 27	HEART DISEASE 48	HEART DISEASE 418	HEART DISEASE 505
2	PERINATAL PERIOD 5	HOMICIDE/ LEGAL 2	HOMICIDE/ LEGAL 3	UNINTENT. INJURY 4	UNINTENT. INJURY 10	CANCER 20	CANCER 47	CANCER 230	CANCER 309
3	STROKE 1	CONGENITAL ANOMALIES 1	SUICIDE 2	CANCER 2	CANCER 9	UNINTENT. INJURY 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 78	BRONCHITIS/ EMPHYSEMA/ ASTHMA 88
4	HOMICIDE/ LEGAL 1	SUICIDE 1	CANCER 1	HOMICIDE/ LEGAL 2	HOMICIDE/ LEGAL 3	DIABETES MELLITUS 5	UNINTENT. INJURY 6	STROKE 63	STROKE 69
5	SIDS 1	UNINTENT. INJURY 1	OTHER 1	HIV 1	SUICIDE 3	LIVER DISEASE 5	STROKE 4	INFLUENZA/ PNEUMONIA 50	UNINTENT. INJURY 68
6	UNINTENT. INJURY 1	OTHER 1		OTHER 4	DIABETES MELLITUS 2	HOMICIDE/ LEGAL 4	INFLUENZA/ PNEUMONIA 3	DIABETES MELLITUS 31	INFLUENZA/ PNEUMONIA 54
7	OTHER 4				LIVER DISEASE 2	SEPTICEMIA (BLOOD POISONING) 3	SEPTICEMIA (BLOOD POISONING) 3	UNINTENT. INJURY 22	DIABETES MELLITUS 38
8					FOUR CAUSES TIED 1	SUICIDE 3	HOMICIDE/ LEGAL 2	ATHERO-SCLEROSIS 14	LIVER DISEASE 21
9						BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	LIVER DISEASE 2	KIDNEY DISEASE 13	HOMICIDE/ LEGAL 17
10						SIX CAUSES TIED 1	FIVE CAUSES TIED 1	LIVER DISEASE 12	SUICIDE 17

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

Injury and Violence

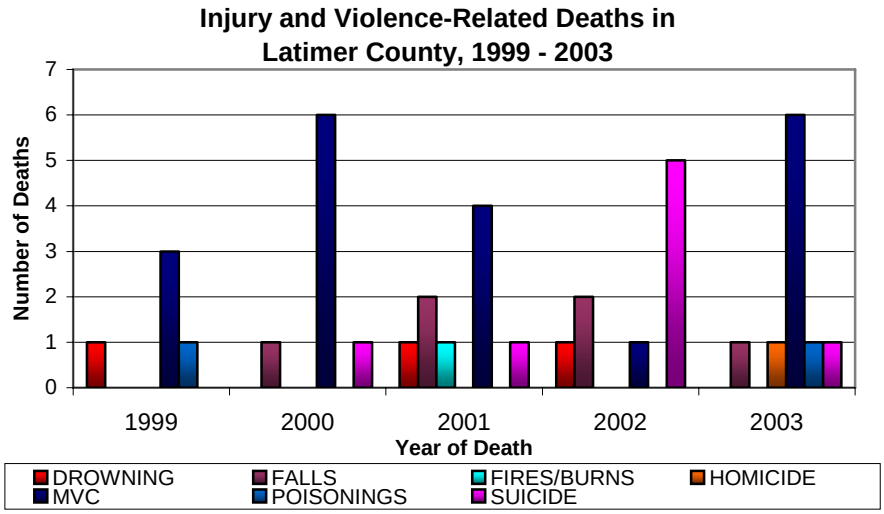
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Latimer County. Unintentional injuries are the leading cause of death from ages 15 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Latimer County which has an average of 4 motor vehicle-related deaths a year, that translates to over $4 million a year.

Violence-related injuries (homicide and suicide) in Latimer County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 37% (3,913) of people in Latimer County use tobacco of some sort. Medical costs accumulated by those persons are almost $13 million a year for Latimer County.

> *"Medical costs accumulated by those persons are almost **$13 million a year** for Latimer County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 20.6% (2,178) of people in Latimer County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 11% (1,163) of Latimer County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $15,401,609.00 in one year for Latimer County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

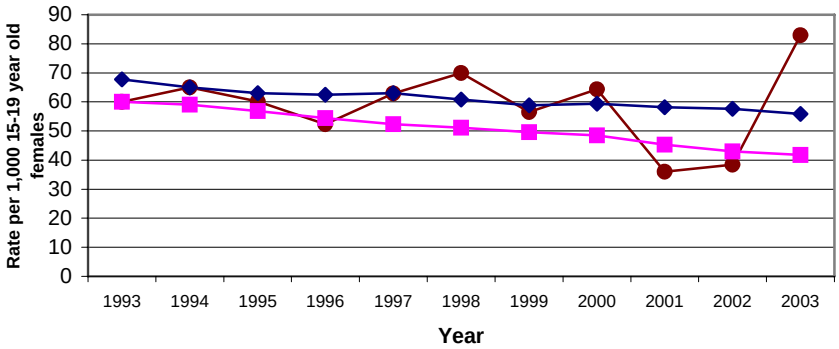
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Latimer County had a teen birth rate of 38.5 in 2003 which was a 7% increase from 2002 (36) but a 46% decrease since 1993 (71.7).

With an average of 28 births per year, teen pregnancy costs the citizens of Latimer County $89,600.00 a year.

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



*2003 U.S. data is preliminary

Latimer — Oklahoma — U.S.*

Note: 6 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 22.7% of persons in Latimer County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Latimer County is similar to the state (14.7%) and 83% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Latimer County, 2000 Census

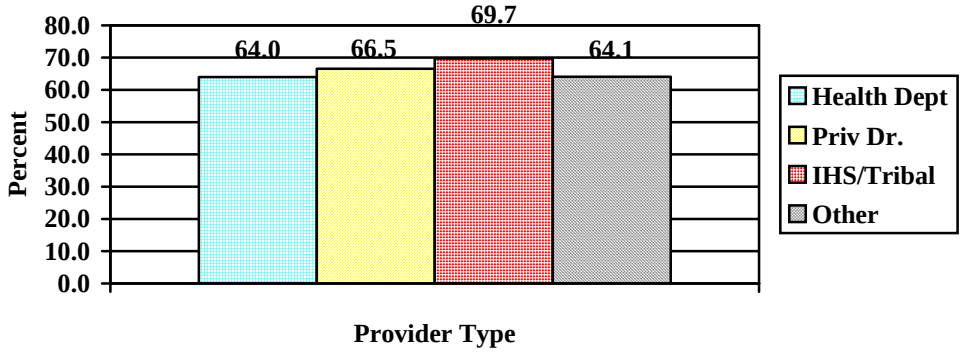
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	10,021	867	1,408	1,551	1,273	4,922
Cumulative Population		867	2,275	3,826	5,099	10,021
% of Total	100.0%	8.7%	14.1%	15.5%	12.7%	49.1%
Cumulative %		8.7%	22.7%	38.2%	50.9%	100.0%

OK By One - State Immunization Data

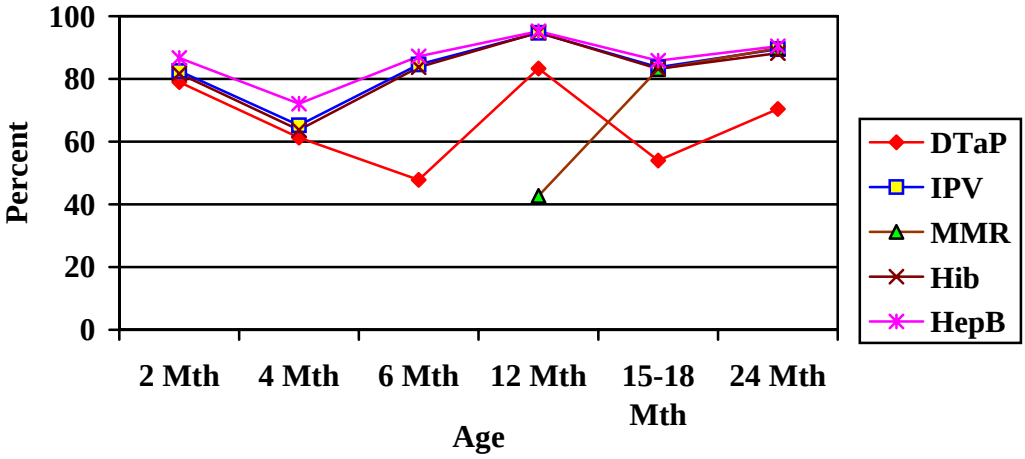
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

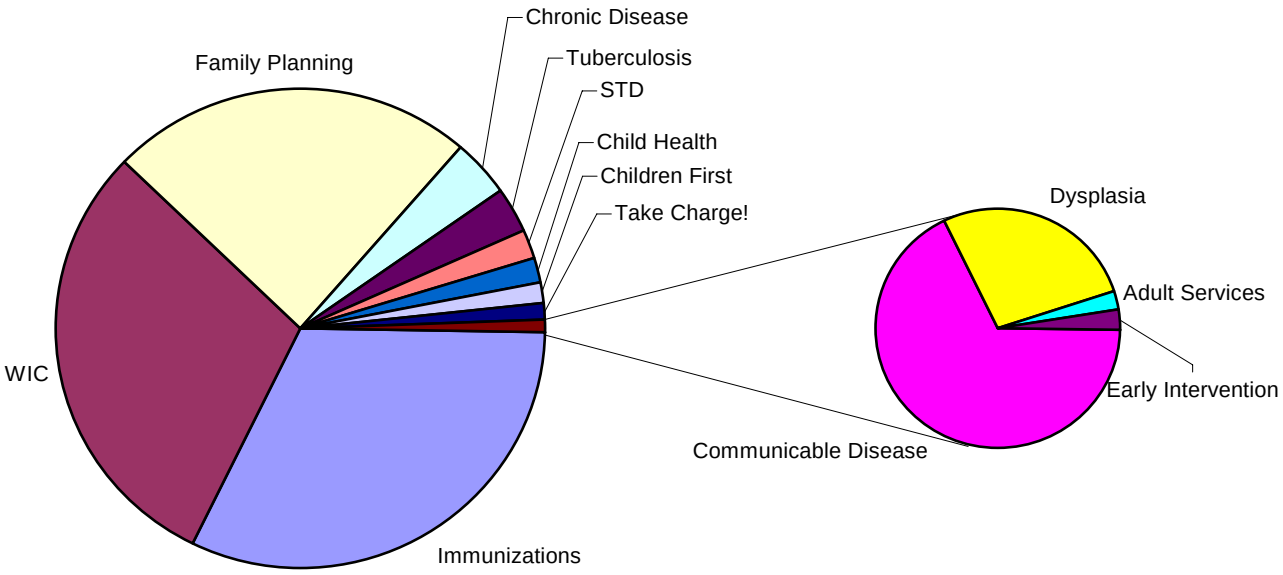


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 46 deaths a year
- $369,476.69 per death
- Total— $16,995,927.74 a year

Obesity

- 24.7% of population (2,612)
- $395.00 in additional medical costs per person
- Total—$1,031,740.00

Motor Vehicle-Related Injury Death

- Average 4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,480,000.00 a year

Tobacco Use

- 37% of population (3,913)
- $3,300.00 in health care costs
- Total—$12,912,900.00 a year

Diabetes

- 11% of population (1,163)
- $13,243.00 in healthcare costs a year
- Total—$15,401,609.00 a year

Teen Pregnancy

- Average of 28 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $89,600.00 a year

Grand Total for Latimer County:

$50,911,776.74

Oklahoma Turning POINT

Oklahoma Community Partners in Public Health Innovation

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Latimer County Health Department
201 West Maiin
Wilburton, OK 74578
918-465-5673

Looking Back to Move Forward

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

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

Living in Latimer Community Coalition

We want to say thank you to all the members of the Living in Latimer Community Coalition.

- Arts Council
- CAMHC
- CASA
- Choctaw Nation Healthy Lifestyles/CORE Capacity/ Project CHIILD
- CNHSA
- Community Care Center (Long Term Care)
- Community Leaders & Volunteers
- Department of Human Services
- Eastern State College
- Faith Community
- Families
- KEC

OKLAHOMA STATE DEPARTMENT OF HEALTH

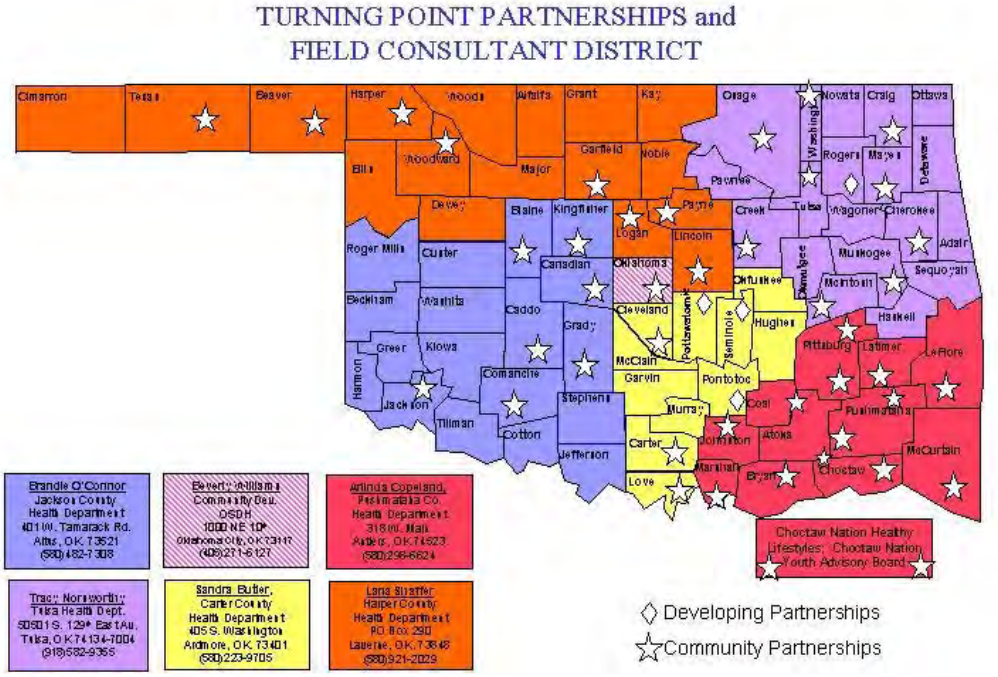
State of the County's Health Report

A Look Back To Move Forward

LeFlore County

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

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



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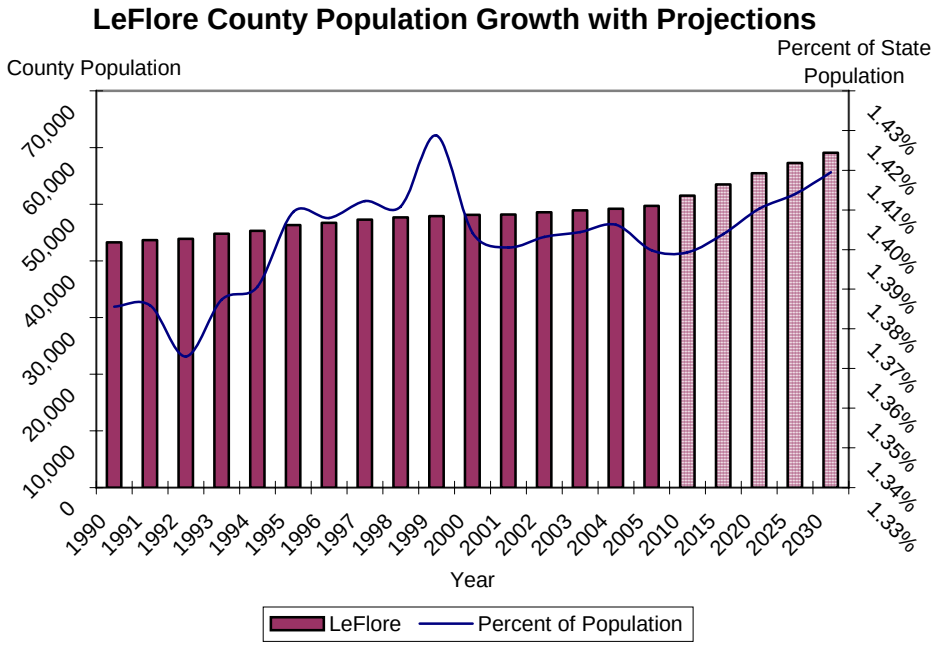
Demographics

** U.S. Census Bureau*

- Population estimates
  - 11% increase from 1990 to 2000 (43,270 to 48,109)
  - 2% increase from 2000 to 2004
  - Ranked 22nd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 80%
  - Native Americans =11%
  - Blacks =2%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 14%
  - Median age = 36.1 years
- Housing units
  - Occupied = 17,861 (89%)
  - Vacant = 2,281 (11%)
- Disability (ages 21 to 64) = 25.6% national = 19.2% state = 21.5%
- Individuals below poverty = 19.1% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in LeFlore County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,051 people in LeFlore County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 181.5 deaths a year, heart disease accounts for over $67 million a year in medical costs in LeFlore County.

Heart disease accounts for over $67 million a year in medical costs in LeFlore County.

Alzheimer's disease and the complications associated with it have increased from the 16th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 306% increase in deaths.

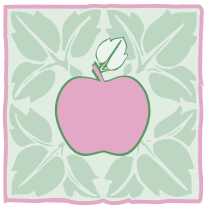
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 27.8% (13,593) of people in LeFlore County were considered obese which accounted for an additional $5,369,235 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

LeFlore County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 18	UNINTENT. INJURY 10	UNINTENT. INJURY 41	UNINTENT. INJURY 48	CANCER 42	CANCER 118	HEART DISEASE 246	HEART DISEASE 1588	HEART DISEASE 1996
2	CONGENITAL ANOMALIES 11	CANCER 3	SUICIDE 12	CANCER 15	HEART DISEASE 42	HEART DISEASE 110	CANCER 218	CANCER 865	CANCER 1264
3	UNINTENT. INJURY 7	HOMICIDE/ LEGAL 2	HOMICIDE/ LEGAL 5	HEART DISEASE 9	UNINTENT. INJURY 41	UNINTENT. INJURY 37	BRONCHITIS/ EMPHYSEMA/ ASTHMA 35	STROKE 324	STROKE 359
4	SIDS 5	PERINATAL PERIOD 2	CANCER 3	HOMICIDE/ LEGAL 8	HOMICIDE/ LEGAL 14	DIABETES MELLITUS 16	UNINTENT. INJURY 32	INFLUENZA/ PNEUMONIA 265	UNINTENT. INJURY 301
5	HEART DISEASE 1	ACUTE BRONCHITIS 1	DIABETES MELLITUS 1	HIV 7	SUICIDE 13	LIVER DISEASE 15	DIABETES MELLITUS 31	BRONCHITIS/ EMPHYSEMA/ ASTHMA 250	BRONCHITIS/ EMPHYSEMA/ ASTHMA 298
6	HOMICIDE/ LEGAL 1	SEPTICEMIA (BLOOD POISONING) 1	INFLUENZA/ PNEUMONIA 1	SUICIDE 5	DIABETES MELLITUS 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 10	STROKE 22	DIABETES MELLITUS 96	INFLUENZA/ PNEUMONIA 292
7	MENINGOCOC. INFECTION 1	OTHER 1	PNEUMONITIS 1	NON-CANCEROUS TUMOR 2	HIV 7	SUICIDE 10	LIVER DISEASE 13	UNINTENT. INJURY 85	DIABETES MELLITUS 152
8	OTHER 22			INFLUENZA/ PNEUMONIA 2	STROKE 6	INFLUENZA/ PNEUMONIA 9	INFLUENZA/ PNEUMONIA 12	ALZHEIMER'S DISEASE 65	KIDNEY DISEASE 69
9				SEPTICEMIA (BLOOD POISONING) 2	KIDNEY DISEASE 5	KIDNEY DISEASE 8	SEPTICEMIA (BLOOD POISONING) 7	KIDNEY DISEASE 52	ALZHEIMER'S DISEASE 65
10				FIVE CAUSES TIED 1	LIVER DISEASE 5	STROKE 6	SUICIDE 5	SEPTICEMIA (BLOOD POISONING) 40	SUICIDE 63

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Oklahoma State Department of Health

July 2005

Injury and Violence

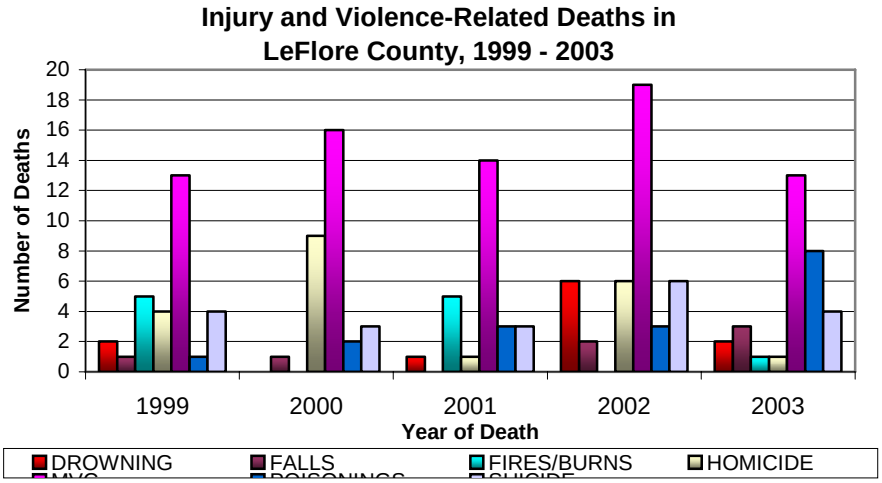
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in LeFlore County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For LeFlore County which has an average of 15 motor vehicle-related deaths a year, that translates to almost $17 million a year.

Violence-related injuries (homicide and suicide) in LeFlore County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 31.5% (15,402) of people in LeFlore County use tobacco of some sort. Medical costs accumulated by those persons are almost $51 million a year for LeFlore County.

> *"Medical costs accumulated by those persons are almost **$51 million a year** for LeFlore County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 30.8% (15,060) of people in LeFlore County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.7% (3,765) of LeFlore County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $49,859,895.00 in one year for LeFlore County.

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

Teen Pregnancy

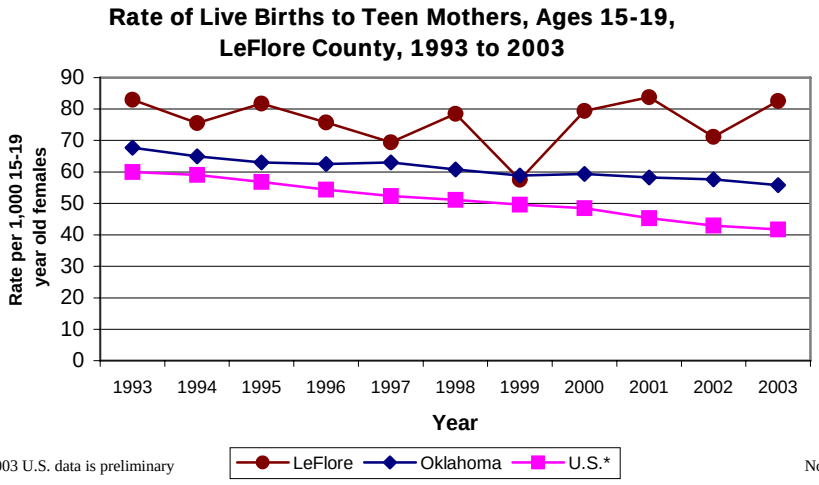
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, LeFlore County had a teen birth rate of 82.6 in 2003 which was a 16% increase from 2002 (71.2) and a 0% decrease since 1993 (83).

With an average of 132 births per year, teen pregnancy costs the citizens of LeFlore County $422,400.00 a year.



*2003 U.S. data is preliminary

Note: 25 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 19.1% of persons in LeFlore County for whom poverty status was known had an income below what was needed to live at the federal poverty level. LeFlore County is 30% above the state (14.7%) and 54% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, LeFlore County, 2000 Census

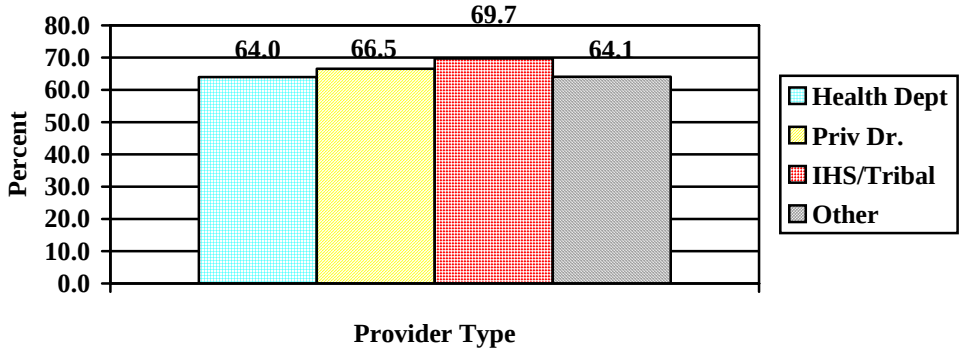
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	46,443	3,597	5,260	6,683	6,398	24,505
Cumulative Population		3,597	8,857	15,540	21,938	46,443
% of Total	100.0%	7.7%	11.3%	14.4%	13.8%	52.8%
Cumulative %		7.7%	19.1%	33.5%	47.2%	100.0%

OK By One - State Immunization Data

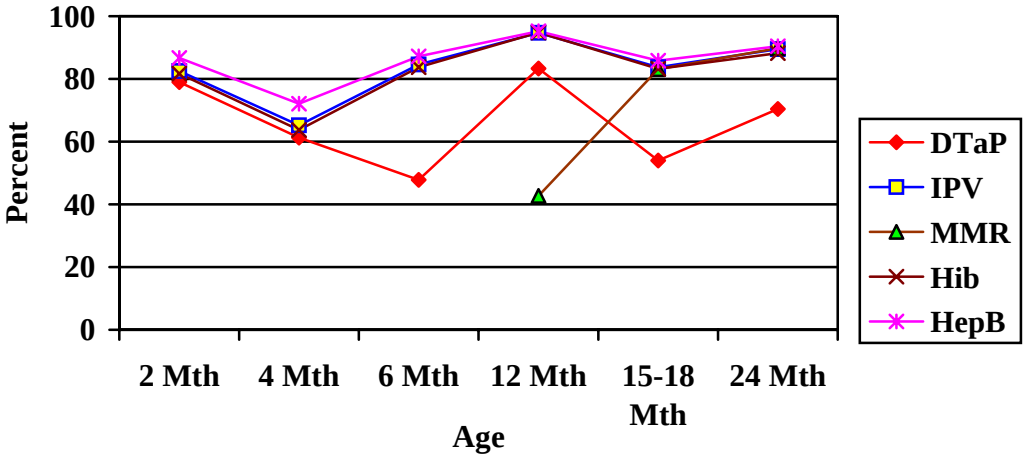
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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

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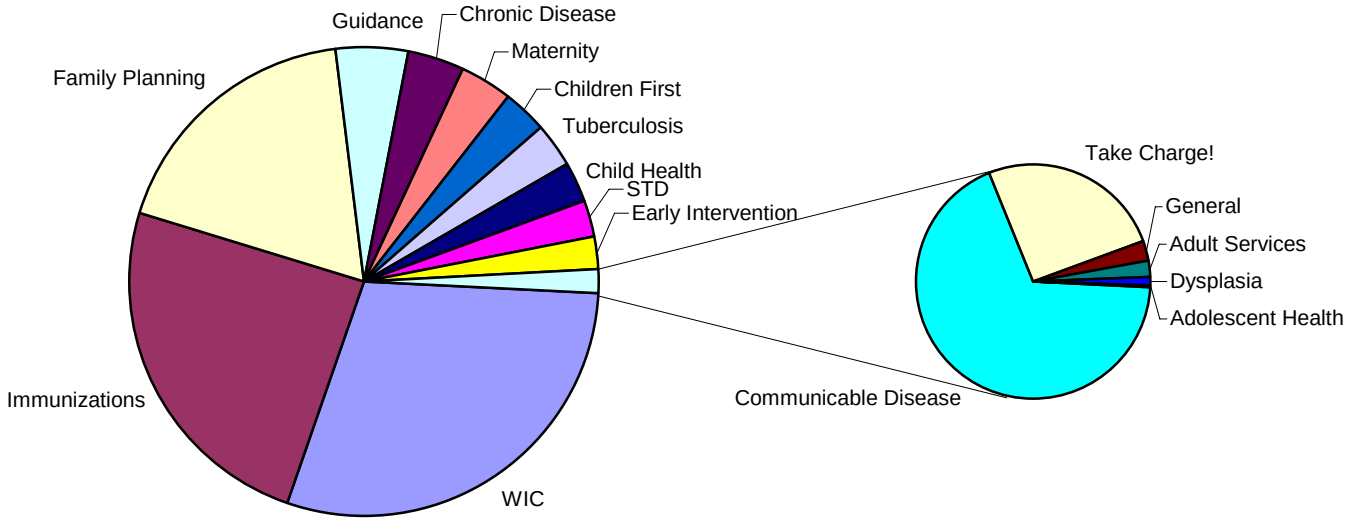
** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 182 deaths a year
- $369,476.69 per death
- Total— $67,244,757.58 a year

Obesity

- 27.8% of population (13,593)
- $395.00 in additional medical costs per person
- Total—$5,369,235.00

Motor Vehicle-Related Injury Death

- Average 15 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$16,800,000.00 a year

Tobacco Use

- 31.5% of population (15,402)
- $3,300.00 in health care costs
- Total - $50,826,600.00 a year

Diabetes

- 7.7% of population (3,765)
- $13,243.00 in healthcare costs a year
- Total—$49,859,895.00 a year

Teen Pregnancy

- Average of 132 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $422,400.00 a year

Grand Total for LeFlore County:
$190,522,887.58

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Oklahoma City, OK 73117
Phone: 405-271-6127
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1212 Reynolds
PO Box 37
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918-647-8601

205 Dallas St
PO Box 964
Talihina, OK 74571
918-567-2141

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

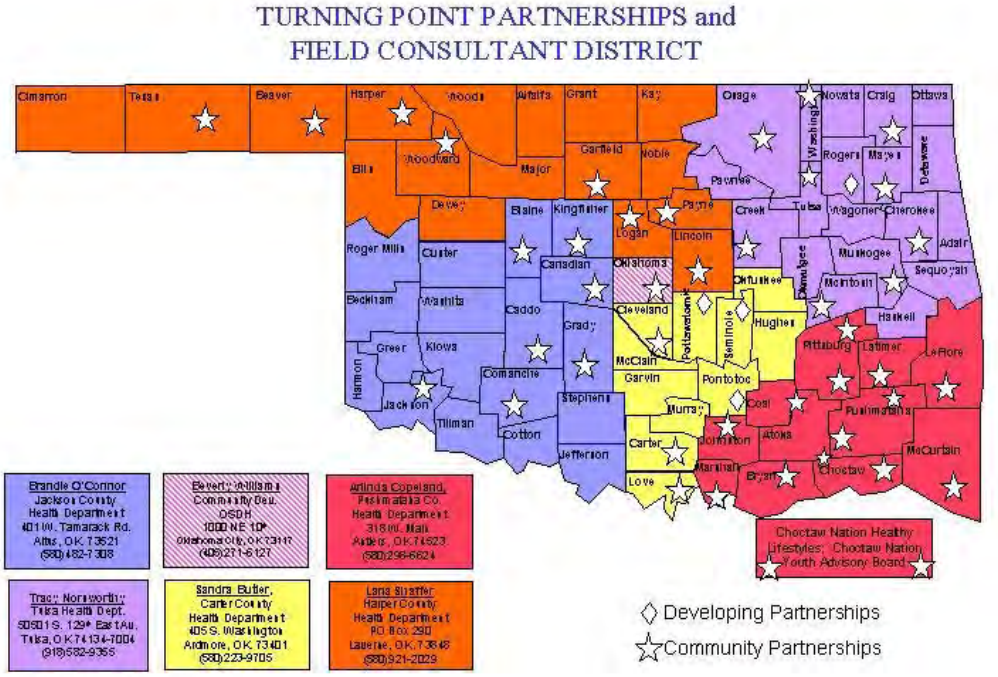
State of the County's Health Report

A Look Back To Move Forward

Lincoln County

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

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



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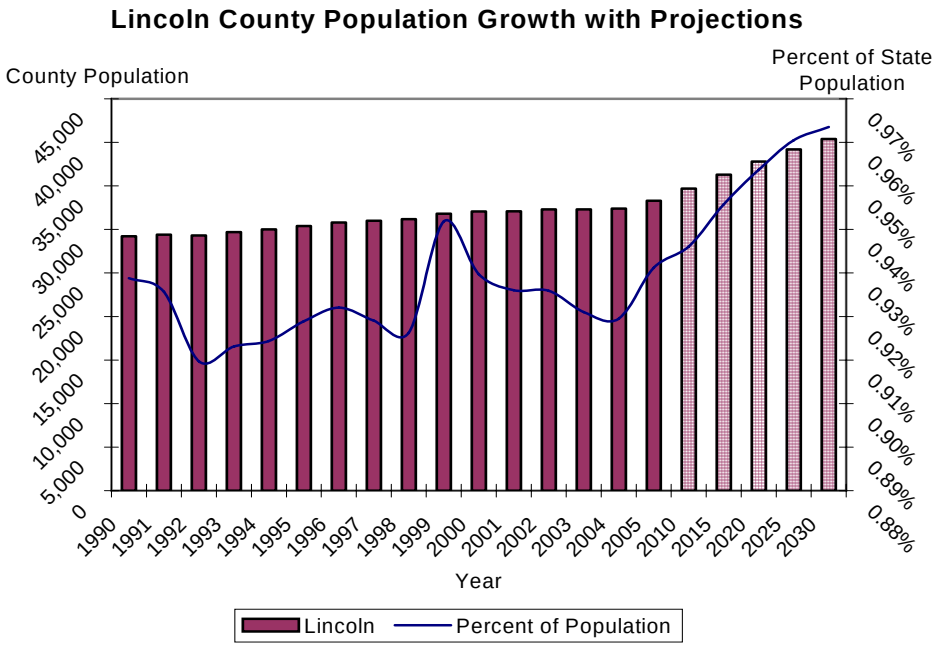
Demographics

** U.S. Census Bureau*

- Population estimates
  - 10% increase from 1990 to 2000 (29,216 to 32,080)
  - 1% increase from 2000 to 2004
  - Ranked 32nd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 86%
  - Native Americans =7%
  - Blacks =2%
  - Other/Multiple = 5%
- Age
  - Under 5 = 7%
  - Over 64 = 14%
  - Median age = 37.5 years
- Housing units
  - Occupied = 12,178 (89%)
  - Vacant = 1,534 (11%)
- Disability (ages 21 to 64) = 24.4% national = 19.2% state = 21.5%
- Individuals below poverty = 14.5% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Lincoln County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,251 people in Lincoln County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 111.8 deaths a year, heart disease accounts for over $41 million a year in medical costs in Lincoln County.

Heart disease accounts for over $41 million a year in medical costs in Lincoln County.

Alzheimer's disease and the complications associated with it have increased from the 16th ranked cause of death (1983-1993) to the 12th ranked cause of death in persons 65 and older accounting for a 217% increase in deaths.

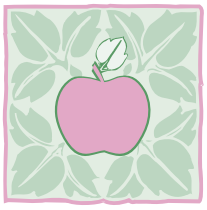
** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 34% (10,969) of people in Lincoln County were considered obese which accounted for an additional $4,332,755 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Lincoln County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 11	UNINTENT. INJURY 9	UNINTENT. INJURY 28	UNINTENT. INJURY 25	UNINTENT. INJURY 29	CANCER 73	HEART DISEASE 139	HEART DISEASE 996	HEART DISEASE 1230
2	PERINATAL PERIOD 11	HOMICIDE/ LEGAL 1	SUICIDE 9	SUICIDE 10	HEART DISEASE 24	HEART DISEASE 67	CANCER 123	CANCER 547	CANCER 774
3	UNINTENT. INJURY 6	SUICIDE 1	HOMICIDE/ LEGAL 4	HIV 5	CANCER 24	UNINTENT. INJURY 13	UNINTENT. INJURY 22	STROKE 223	STROKE 250
4	SIDS 3	OTHER 6	CANCER 2	HOMICIDE/ LEGAL 5	SUICIDE 13	STROKE 6	DIABETES MELLITUS 21	BRONCHITIS/ EMPHYSEMA/ ASTHMA 160	UNINTENT. INJURY 198
5	HEART DISEASE 2		SEPTICEMIA (BLOOD POISONING) 1	CANCER 4	LIVER DISEASE 4	DIABETES MELLITUS 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 19	INFLUENZA 148	BRONCHITIS/ EMPHYSEMA/ ASTHMA 186
6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1		OTHER 7	STROKE 2	HIV 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 5	STROKE 17	UNINTENT. INJURY 64	INFLUENZA/ PNEUMONIA 158
7	INFLUENZA/ PNEUMONIA 1			DIABETES MELLITUS 2	SEPTICEMIA (BLOOD POISONING) 3	SEPTICEMIA (BLOOD POISONING) 5	LIVER DISEASE 9	KIDNEY DISEASE 46	DIABETES MELLITUS 75
8	CANCER 1			HEART DISEASE 2	STROKE 2	SUICIDE 5	INFLUENZA/ PNEUMONIA 7	DIABETES MELLITUS 44	KIDNEY DISEASE 51
	KIDNEY DISEASE 1			NON-CANCEROUS TUMOR 1	DIABETES MELLITUS 2	LIVER DISEASE 4	SUICIDE 5	SEPTICEMIA (BLOOD POISONING) 39	SUICIDE 81
10	OTHER 12			OTHER 8	TWO CAUSES TIED 2	FOUR CAUSES TIED 2	KIDNEY DISEASE 3	ATHERO-SCLEROSIS 36	SEPTICEMIA (BLOOD POISONING) 49

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

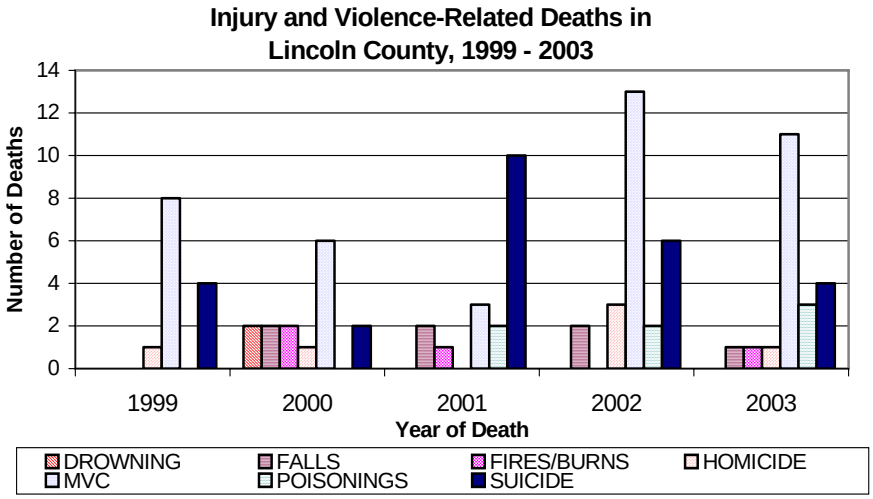
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Lincoln County which has an average of 8.2 motor vehicle-related deaths a year, that translates to over $9 million a year.

Violence-related injuries (homicide and suicide) in Lincoln County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22% (7,098) of people in Lincoln County use tobacco of some sort. Medical costs accumulated by those persons are over $23 million a year for Lincoln County.

> *"Medical costs accumulated by those persons are over **$23 million a year** for Lincoln County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 36.1% (11,647) of people in Lincoln County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.5% (2,097) of Lincoln County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $27,770,571.00 in one year for Lincoln County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

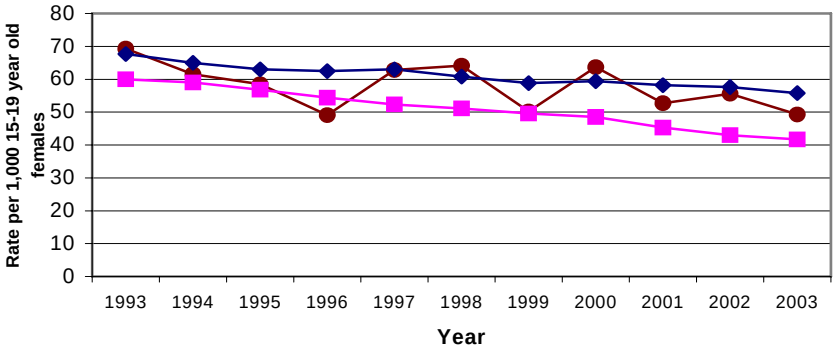
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Lincoln County had a teen birth rate of 49.3 in 2003 which was a 11% decrease from 2002 (55.6) but a 29% decrease since 1993 (69.3).

With an average of 69 births per year, teen pregnancy costs the citizens of Lincoln County $220,800.00 a year.

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



*2003 U.S. data is preliminary

Lincoln — Oklahoma — U.S.*

Note: 7 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 14.5% of persons in Lincoln County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Lincoln County is similar to the state (14.7%) and 17% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Lincoln County, 2000 Census

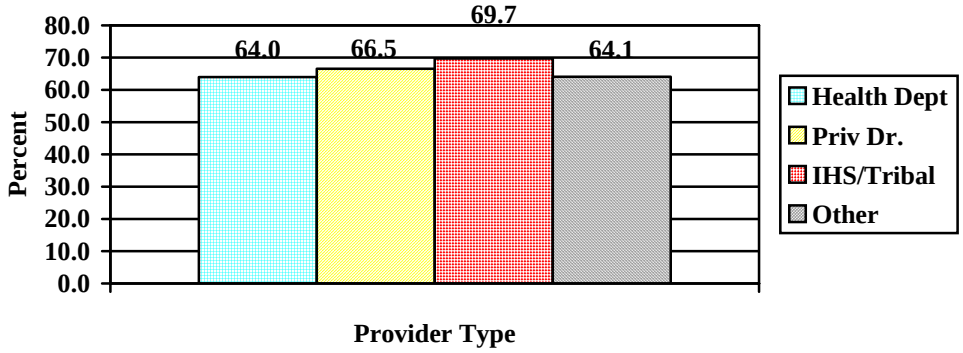
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	31,675	1,736	2,855	4,012	4,175	18,897
Cumulative Population		1,736	4,591	8,603	12,778	31,675
% of Total	100.0%	5.5%	9.0%	12.7%	13.2%	59.7%
Cumulative %		5.5%	14.5%	27.2%	40.3%	100.0%

OK By One - State Immunization Data

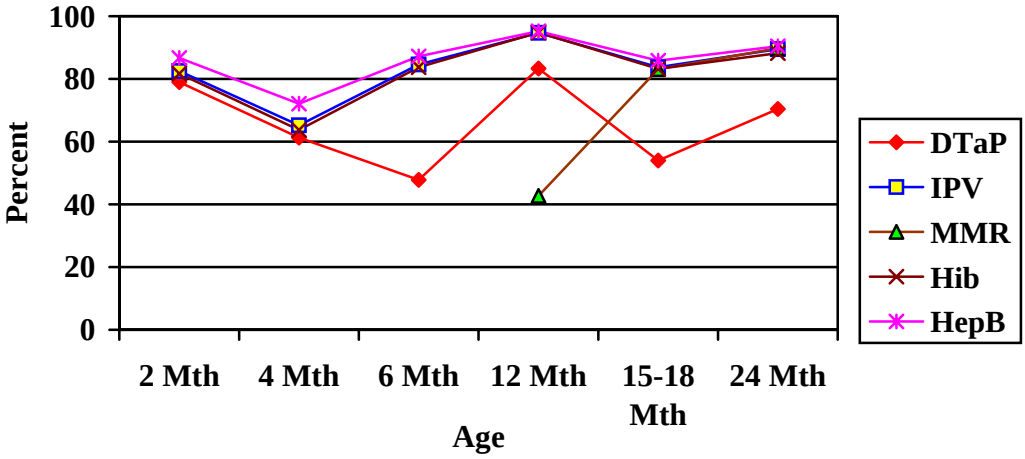
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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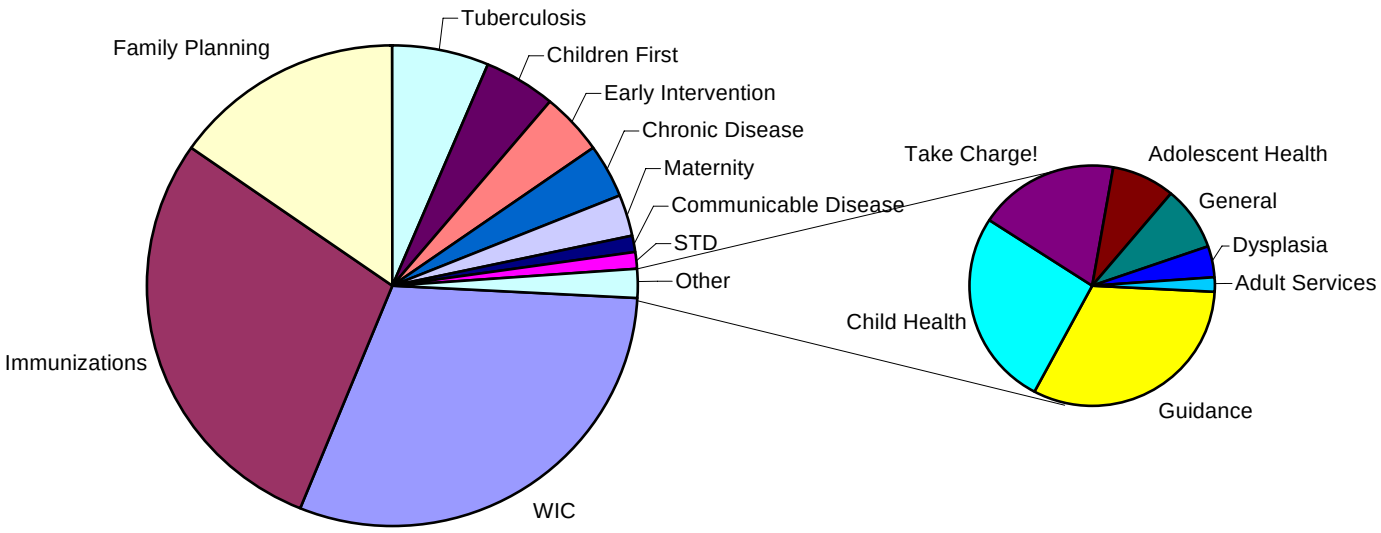

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 112 deaths a year
- $369,476.69 per death
- Total— $41,381,389.28 a year

Obesity

- 34% of population (10,969)
- $395.00 in additional medical costs per person
- Total—$4,332,755.00

Motor Vehicle-Related Injury Death

- Average 8.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$9,184,000.00 a year

Tobacco Use

- 22% of population (7,098)
- $3,300.00 in health care costs
- Total—$23,423,400.00 a year

Diabetes

- 6.5% of population (2,097)
- $13,243.00 in healthcare costs a year
- Total—$27,770,571.00 a year

Teen Pregnancy

- Average of 69 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $220,800.00 a year

Grand Total for Lincoln County:

$106,312,915.28

Oklahoma Turning POINT

Oklahoma Community Partners in Public Health Innovation

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Lincoln County Health Department
101 Meadow Lane
Chandler, OK 74834
405-258-2640

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Lincoln County Community Health Advisory Board

We want to say thank you to all the members of the Lincoln County Community Health Advisory Board.

- Central Oklahoma Community Action Agency, Inc.
- Chandler City Government
- Chandler Food Pantry
- Community Representatives
- Faith Groups
- Langston University (Families First Nutrition Ed.)
- Lincoln County Department of Human Service
- Lincoln County Health Department
- Lincoln County News
- OSU Extension
- OU College of Nursing
- Sac and Fox Nation

OKLAHOMA STATE DEPARTMENT OF HEALTH

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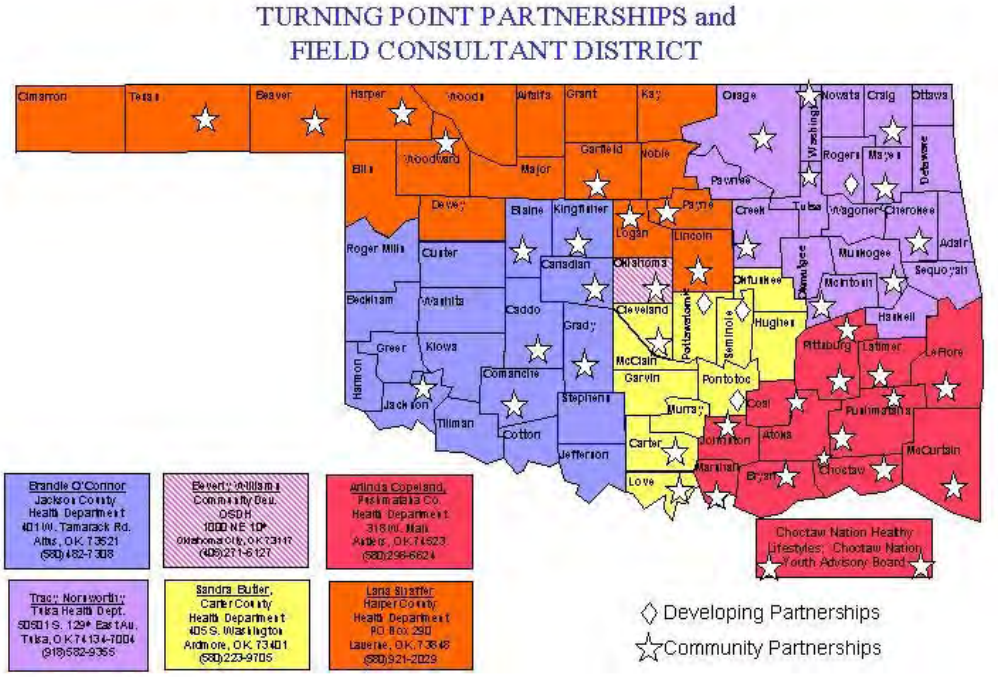

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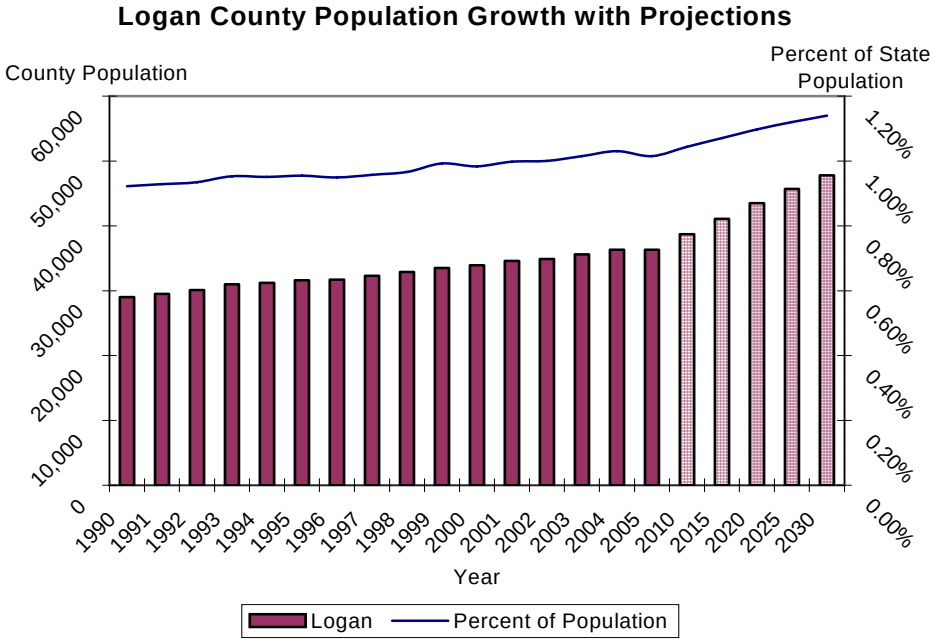
Demographics

** U.S. Census Bureau*

- Population estimates
  - 17% increase from 1990 to 2000 (29,011 to 33,924)
  - 7% increase from 2000 to 2004
  - Ranked 4th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 82%
  - Native Americans =3%
  - Blacks =11%
  - Other/Multiple = 4%
- Age
  - Under 5 = 6%
  - Over 64 = 12%
  - Median age = 36.1 years
- Housing units
  - Occupied = 12,389 (89%)
  - Vacant = 1,517 (11%)
- Disability (ages 21 to 64) = 21.5% national = 19.2% state = 21.5%
- Individuals below poverty = 12.9% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Logan County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,200 people in Logan County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 99.9 deaths a year, heart disease accounts for almost $37 million a year in medical costs in Logan County.

Heart disease accounts for almost $37 million a year in medical costs in Logan County.

Alzheimer's disease and the complications associated with it have increased from the 22nd ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 6200% increase in deaths.

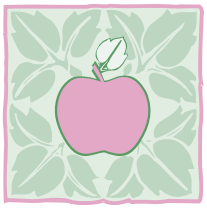
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 26.2% (9,280) of people in Logan County were considered obese which accounted for an additional $3,665,600 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Logan County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 10	UNINTENT. INJURY 7	UNINTENT. INJURY 22	UNINTENT. INJURY 25	CANCER 22	CANCER 60	CANCER 114	HEART DISEASE 925	HEART DISEASE 1099
2	PERINATAL PERIOD 7	HOMICIDE/ LEGAL 1	HOMICIDE/ LEGAL 5	SUICIDE 9	HEART DISEASE 18	HEART DISEASE 50	HEART DISEASE 100	CANCER 522	CANCER 724
3	UNINTENT. INJURY 7	MENINGOCOC. INFECTION 1	SUICIDE 5	CANCER 5	UNINTENT. INJURY 10	UNINTENT. INJURY 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 16	STROKE 340	STROKE 368
4	HEART DISEASE 3	OTHER 2	HEART DISEASE 1	HIV 3	HIV 8	STROKE 8	STROKE 15	INFLUENZA/ PNEUMONIA 138	BRONCHITIS/ EMPHYSEMA/ ASTHMA 153
5	HOMICIDE/ LEGAL 2		HIV 1	STROKE 2	SUICIDE 5	HOMICIDE/ LEGAL 6	UNINTENT. INJURY 14	BRONCHITIS/ EMPHYSEMA/ ASTHMA 135	INFLUENZA/ PNEUMONIA 148
6	SIDS 2		INFLUENZA/ PNEUMONIA 1	HEART DISEASE 2	LIVER DISEASE 3	LIVER DISEASE 5	DIABETES MELLITUS 11	ALZHEIMER'S DISEASE 63	UNINTENT. INJURY 131
7	STROKE 1		CANCER 1	HOMICIDE/ LEGAL 2	STROKE 2	SUICIDE 5	SUICIDE 8	DIABETES MELLITUS 49	ALZHEIMER'S DISEASE 66
8	HERNIA 1		MENINGITIS 1	DIABETES MELLITUS 1	DIABETES MELLITUS 2	INFLUENZA/ PNEUMONIA 4	SEPTICEMIA (BLOOD POISOINING) 4	UNINTENT. INJURY 36	DIABETES MELLITUS 65
	OTHER INSTENSTINAL INFECTION 1		OTHER 1	INFLUENZA/ PNEUMONIA 1	HOMICIDE/ LEGAL 2	SEPTICEMIA (BLOOD POISOINING) 3	ALZHEIMER'S DISEASE 3	KIDNEY DISEASE 33	KIDNEY DISEASE 37
10	PNEUMONITIS 1			TWO CAUSES TIED 1	INFLUENZA/ PNEUMONIA 2	DIABETES MELLITUS 2	KIDNEY DISEASE 3	SEPTICEMIA (BLOOD POISOINING) 24	SUICIDE 37

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health Jul-05

Injury and Violence

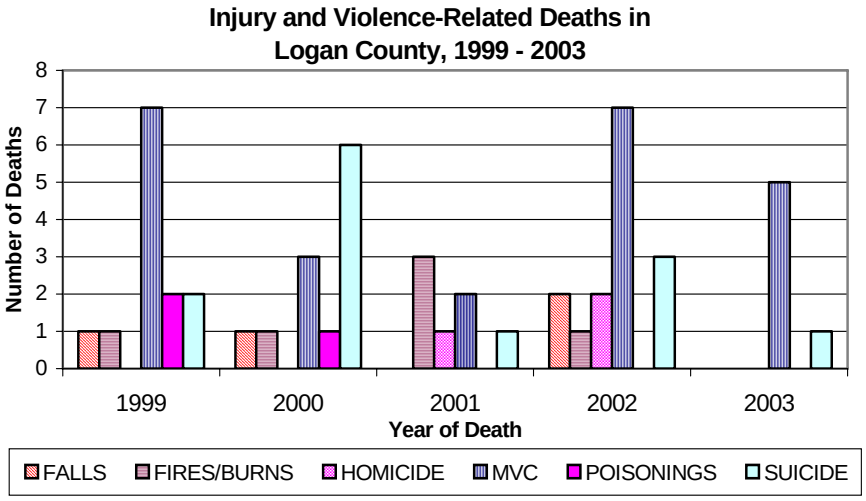
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Logan County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Logan County which has an average of 4.8 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Logan County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.8% (8,076) of people in Logan County use tobacco of some sort. Medical costs accumulated by those persons are almost $27 million a year for Logan County.

> *"Medical costs accumulated by those persons are almost **$27 million a year** for Logan County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 32.8% (11,618) of people in Logan County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.7% (2,373) of Logan County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $31,425,639.00 in one year for Logan County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

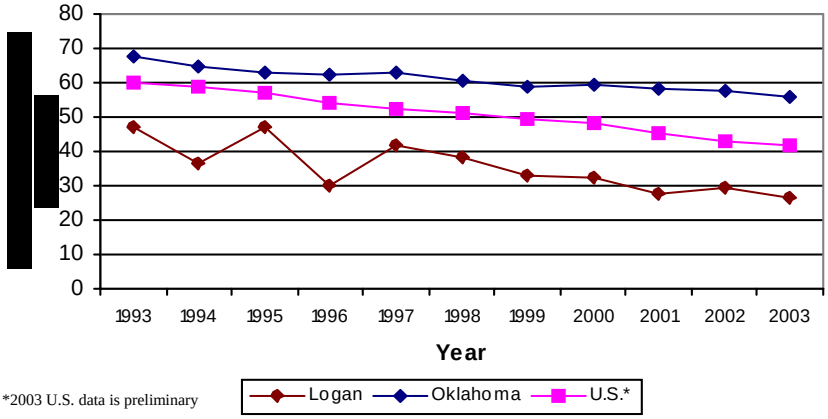
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Logan County had a teen birth rate of 26.5 in 2003 which was a 10% decrease from 2002 (29.4) but a 44% decrease since 1993 (47.2).

With an average of 53 births per year, teen pregnancy costs the citizens of Logan County $169,600.00 a year.

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



*2003 U.S. data is preliminary

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

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 12.9% of persons in Logan County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Logan County is 13% above the state (14.7%) and 4% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Logan County, 2000 Census

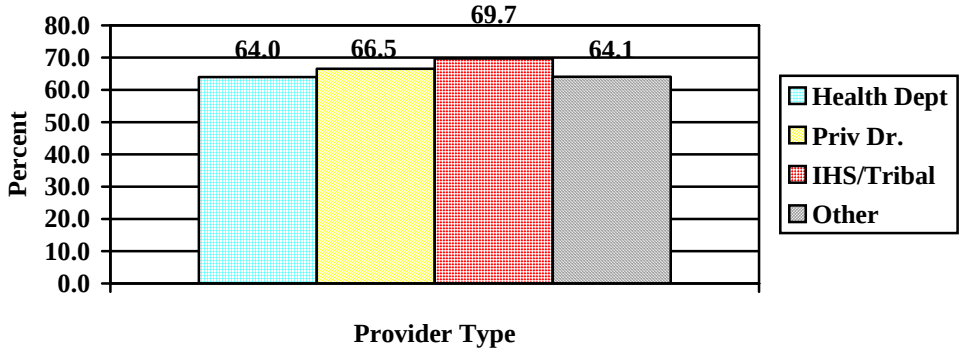
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	10,378	549	1,202	1,408	1,322	5,897
Cumulative Population		549	1,751	3,159	4,481	10,378
% of Total	100.0%	5.3%	11.6%	13.6%	12.7%	56.8%
Cumulative %		5.3%	16.9%	30.4%	43.2%	100.0%

OK By One - State Immunization Data

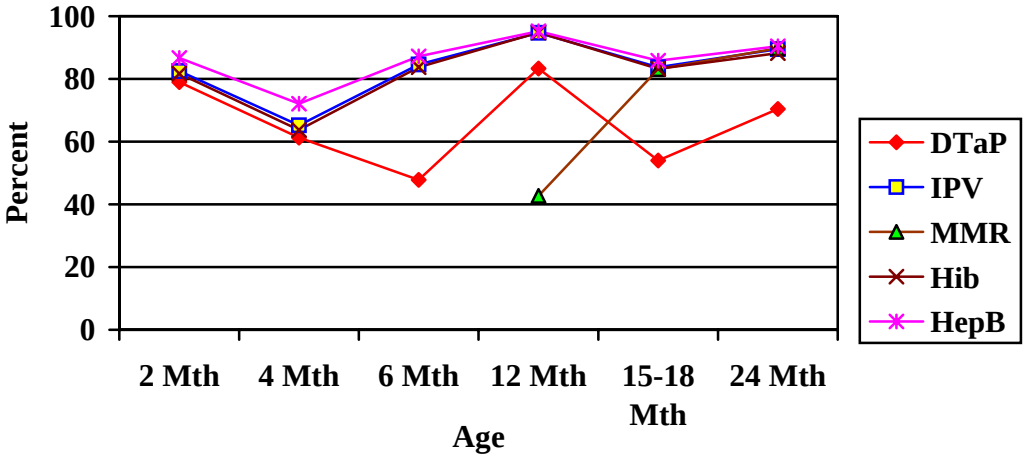
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

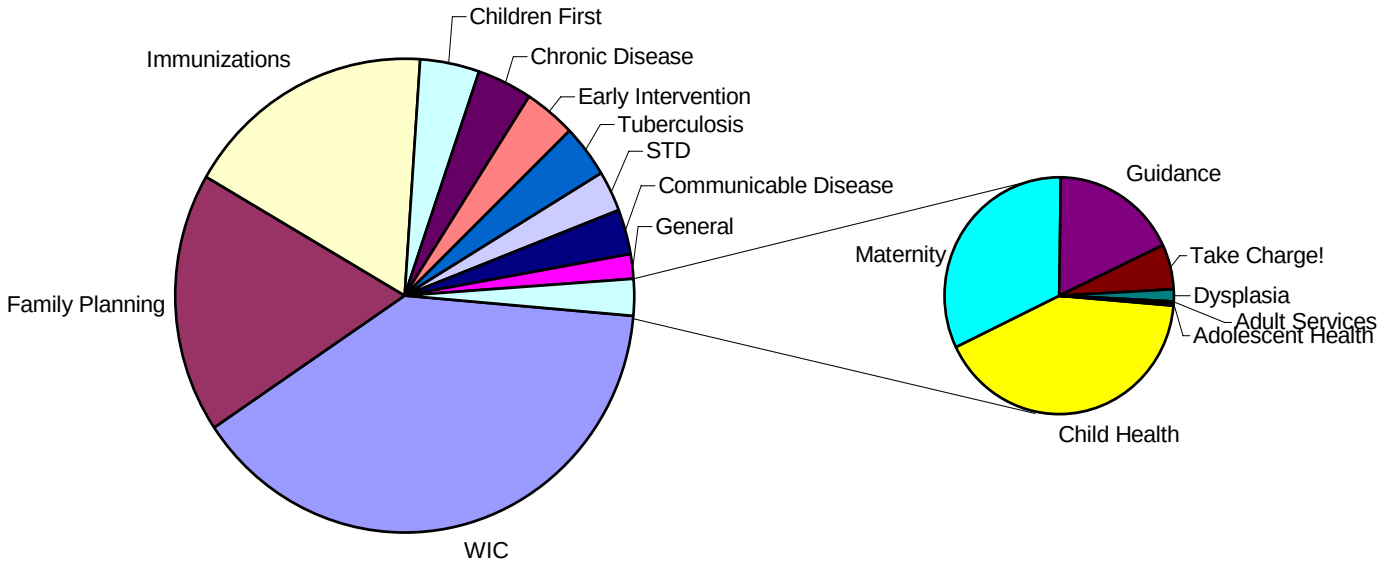


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 100 deaths a year
- $369,476.69 per death
- Total— $36,947,669.00 a year

Obesity

- 26.2% of population (9,280)
- $395.00 in additional medical costs per person
- Total—$3,665,600.00

Motor Vehicle-Related Injury Death

- Average 4.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,376,000.00 a year

Tobacco Use

- 22.8% of population (8,076)
- $3,300.00 in health care costs
- Total—$26,650,800.00 a year

Diabetes

- 6.7% of population (2,373)
- $13,243.00 in healthcare costs a year
- Total—$31,425,639.00 a year

Teen Pregnancy

- Average of 53 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $169,600.00 a year

Grand Total for Logan County:

$104,235,308.00

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Logan County Health Department
215 Fairgrounds Rd, Suite A
Guthrie, OK 73044
405-282-3485

Looking Back to Move Forward

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

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

Logan County Better Health Committee

We want to say thank you to all the members of the Logan County Better Health Committee.

- United Way
- Logan County Health Department
- Logan Co.Youth and Family Service
- Logan Co.Department of Human Serves
- Guthrie Schools
- Logan Hospital
- Eldercare
- Job Corps.
- Headstart
- City of Guthrie
- Wheatland Mental Health
- Logan Co.Office of Workforce Dev.
- County Commissioners
- Coyle Fire Dept.
- Citizens from Crescent, Mulhall, Langston, Coyle and Guthrie
- Ministerial Alliance
- OSU Extension
- Guthrie Police Dept.
- Guthrie Fire Dept.
- Langston Police Dept.
- United Way
- COCCA
- Coyle Schools
- Langston University
- Eagle Ridge Treatment Center
- Ministerial Alliance

OKLAHOMA STATE DEPARTMENT OF HEALTH

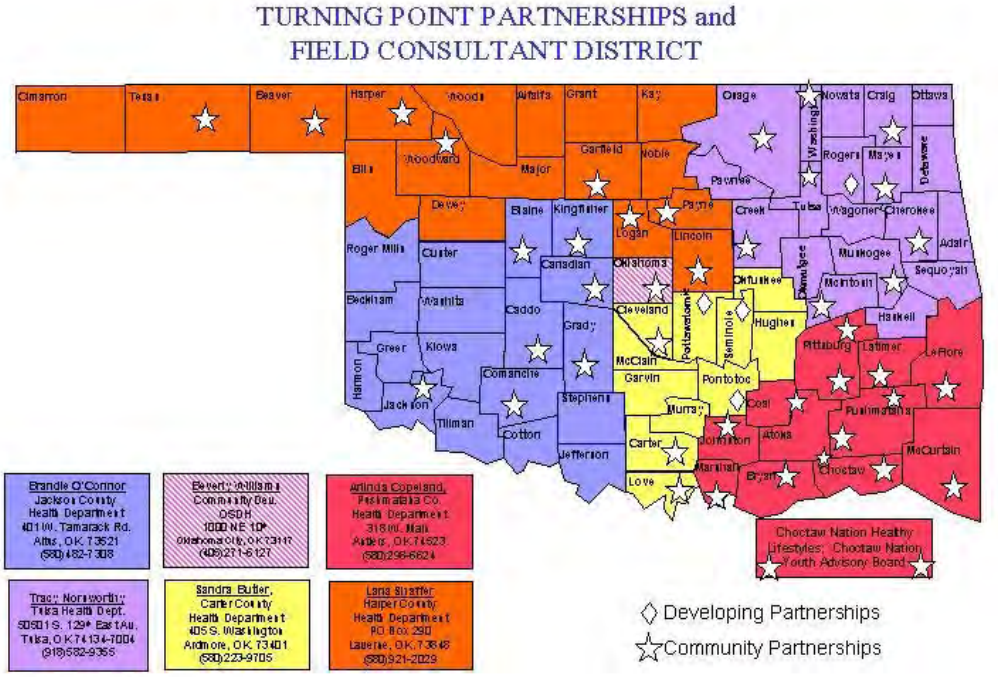
State of the County's Health Report

A Look Back To Move Forward

Love County

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

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



Inside this issue:

County Demographics	2
Top 10 Leading Causes of Death	2
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Top 10 Leading Causes of Death Table	3
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County Health Department Usage	7
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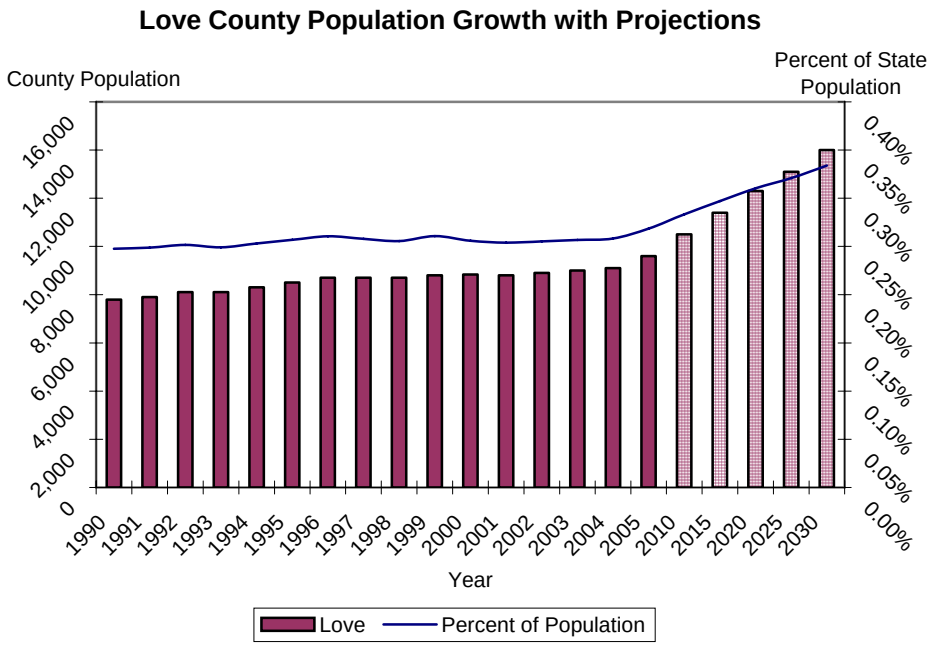
Demographics

** U.S. Census Bureau*

- Population estimates
  - 13% increase from 1990 to 2000 (7,788 to 8,831)
  - 3% increase from 2000 to 2004
  - Ranked 12th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 7%
- Race
  - Whites = 84%
  - Native Americans =6%
  - Blacks =2%
  - Other/Multiple = 7%
- Age
  - Under 5 = 6%
  - Over 64 = 16%
  - Median age = 39.4 years
- Housing units
  - Occupied = 3,442 (85%)
  - Vacant = 624 (15%)
- Disability (ages 21 to 64) = 22.8% national = 19.2% state = 21.5%
- Individuals below poverty = 11.8% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Love County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 377 people in Love County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 32.5 deaths a year, heart disease accounts for over $12 million a year in medical costs in Love County.

Heart disease accounts for over $12 million a year in medical costs in Love County.

Deaths due to atherosclerosis, also known as hardening of the arteries, decreased from the 9th leading cause of death (1983-1993) to the 18th leading cause of death, accounting for a 83% decrease in deaths.

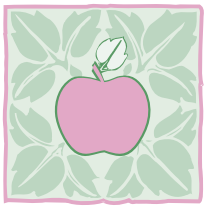
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 22.8% (2,030) of people in Love County were considered obese which accounted for an additional $801,850 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Love County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 2	UNINTENT. INJURY 1	UNINTENT. INJURY 6	UNINTENT. INJURY 8	UNINTENT. INJURY 11	CANCER 23	HEART DISEASE 40	HEART DISEASE 290	HEART DISEASE 358
2	PERINATAL PERIOD 2	OTHER 1	SUICIDE 3	SUICIDE 4	HEART DISEASE 9	HEART DISEASE 18	CANCER 39	CANCER 175	CANCER 247
3	UNINTENT. INJURY 1		HEART DISEASE 1	CANCER 2	CANCER 8	UNINTENT. INJURY 6	UNINTENT. INJURY 5	STROKE 54	STROKE 62
4	OTHER 5		OTHER 3	CONGENITAL ANOMALIES 1	HOMICIDE/ LEGAL 3	STROKE 4	BRONCHITIS EMPHYSEMA/ ASTHMA 4	INFLUENZA/ PNEUMONIA 49	UNINTENT. INJURY 57
5				HOMICIDE/ LEGAL 1	DIABETES MELLITUS 2	BRONCHITIS EMPHYSEMA/ ASTHMA 2	STROKE 4	BRONCHITIS EMPHYSEMA/ ASTHMA 46	BRONCHITIS EMPHYSEMA/ ASTHMA 52
6				SEPTICEMIA (BLOOD POISONING) 1	SUICIDE 2	SUICIDE 2	DIABETES MELLITUS 4	DIABETES MELLITUS 22	INFLUENZA/ PNEUMONIA 50
7				OTHER 1	CONGENITAL ANOMALIES 1	HIV 1	NON-CANCEROUS TUMOR 2	KIDNEY DISEASE 21	DIABETES MELLITUS 28
8					HYPERTENSION 1	HOMICIDE/ LEGAL 1	LIVER DISEASE 2	UNINTENT. INJURY 19	KIDNEY DISEASE 21
					LIVER DISEASE 1	INFLUENZA/ PNEUMONIA 1	SEPTICEMIA (BLOOD POISONING) 1	SEPTICEMIA (BLOOD POISONING) 6	SUICIDE 15
10					OTHER 6	LIVER DISEASE 1	SUICIDE 1	ALZHEIMER'S DISEASE 5	SEPTICEMIA (BLOOD POISONING) 8

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

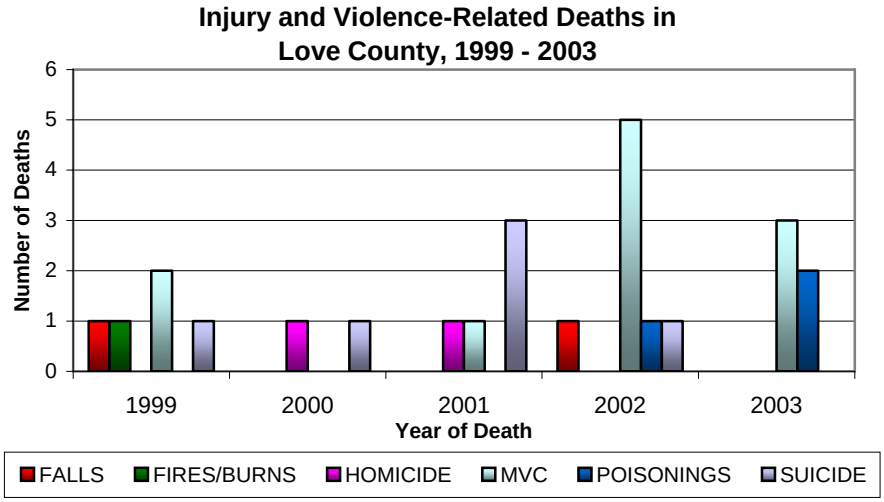
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Love County which has an average of 2.2 motor vehicle-related deaths a year, that translates to over $2 million a year.

Violence-related injuries (homicide and suicide) in Love County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 26.1% (2,324) of people in Love County use tobacco of some sort. Medical costs accumulated by those persons are almost $8 million a year for Love County.

> *"Medical costs accumulated by those persons are almost **$8 million a year** for Love County"*

Physical Activity, Wellness and Diabetes

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 29.6% (2,636) of people in Love County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 16.1% (1,434) of Love County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $18,990,462.00 in one year for Love County.

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

Teen Pregnancy

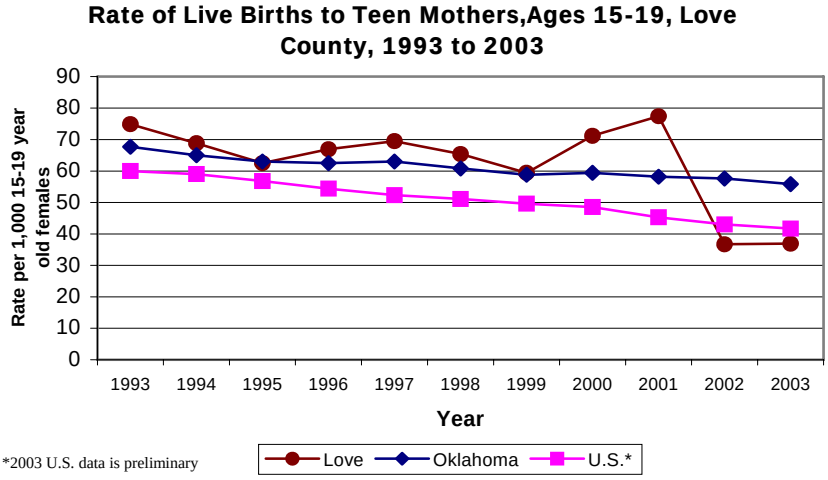
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Love County had a teen birth rate of 36.9 in 2003 which was a 1% increase from 2002 (36.7) and a 51% decrease since 1993 (74.9).

With an average of 18 births per year, teen pregnancy costs the citizens of Love County $57,600.00 a year.



*2003 U.S. data is preliminary

Note: 3 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 11.8% of persons in Love County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Love County is 20% below the state (14.7%) and 5% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Love County, 2000 Census

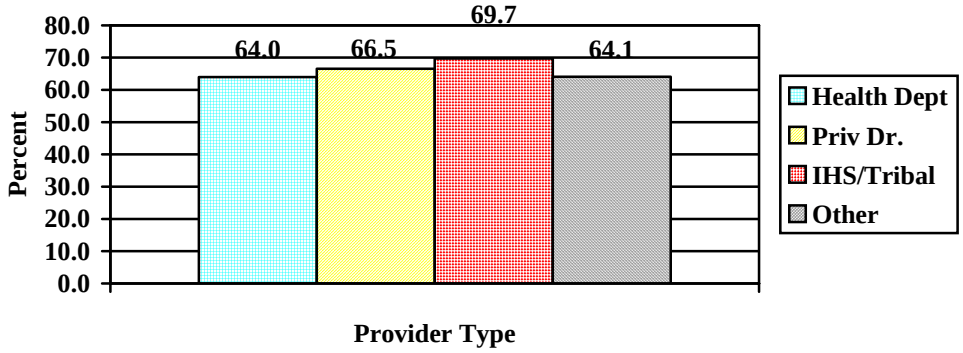
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	8,714	398	631	1,234	1,030	5,421
Cumulative Population		398	1,029	2,263	3,293	8,714
% of Total	100.0%	4.6%	7.2%	14.2%	11.8%	62.2%
Cumulative %		4.6%	11.8%	26.0%	37.8%	100.0%

OK By One - State Immunization Data

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

2003-04 Immunization Coverage Rates

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



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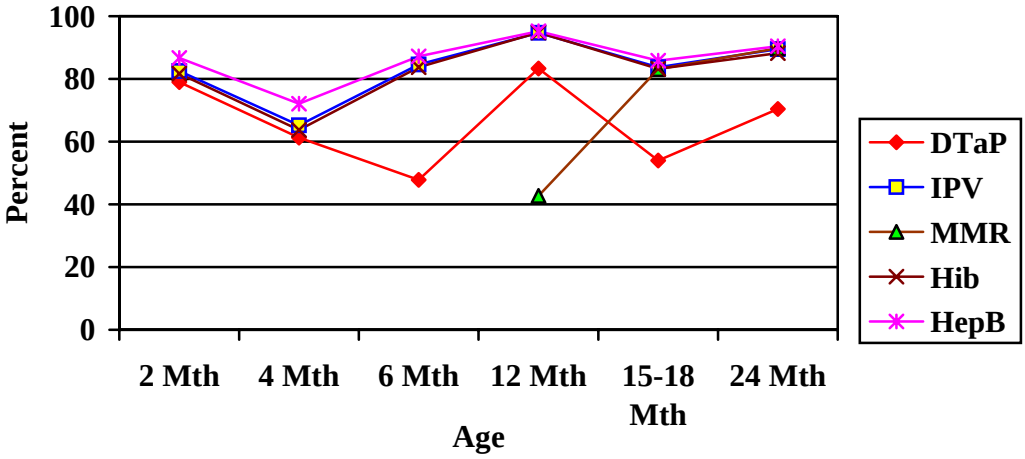

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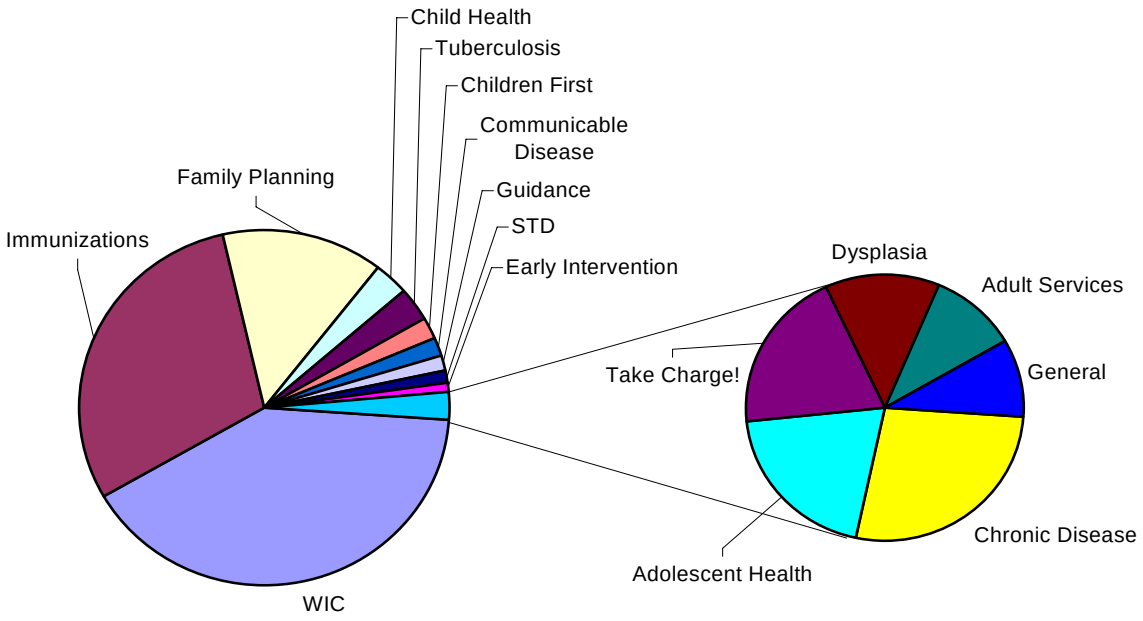


Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 33 deaths a year
- $369,476.69 per death
- Total— $12,192,730.77 a year

Obesity

- 22.8% of population (2,030)
- $395.00 in additional medical costs per person
- Total—$801,850.00

Motor Vehicle-Related Injury Death

- Average 2.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,464,000.00 a year

Tobacco Use

- 26.1% of population (2,324)
- $3,300.00 in health care costs
- Total—$7,669,200.00 a year

Diabetes

- 16.1% of population (1,434)
- $13,243.00 in healthcare costs a year
- Total—$18,990,462.00 a year

Teen Pregnancy

- Average of 18 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $57,600.00 a year

Grand Total for Love County:

$42,175,842.77

Oklahoma Turning POINT

Oklahoma Community Partners in Public Health Innovation

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

Love County Health Department
200 C.E. Colston Drive
Marietta, OK 73448
580-276-2531

Looking Back to Move Forward

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

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

Love County Child Abuse Task Force and Turning Point Partnership

Thank you Love County Child Abuse Task Force and Turning Point Partnership for all the work that you do!

- Barbara Sessions
- Chamber of Commerce
- Community Children's Shelter
- Department of Human Services
- Family Shelter of Southern Oklahoma
- First National Bank
- Greenville School System
- Juvenile Services
- Lake County Nursing Home
- Love County Chamber of Commerce
- Love County Farm Bureau
- Love County Health Center
- Love County Health Department
- Love County Hospital
- Love County Sheriff
- Marietta City
- Marietta Lions Club
- Marietta Police Department
- Marietta School System
- Mental Health Services of Southern Oklahoma
- OSU Extension Services
- Thacker Ville School System
- Turner School System
- Yvonne McGinnis, R.N.

OKLAHOMA STATE DEPARTMENT OF HEALTH

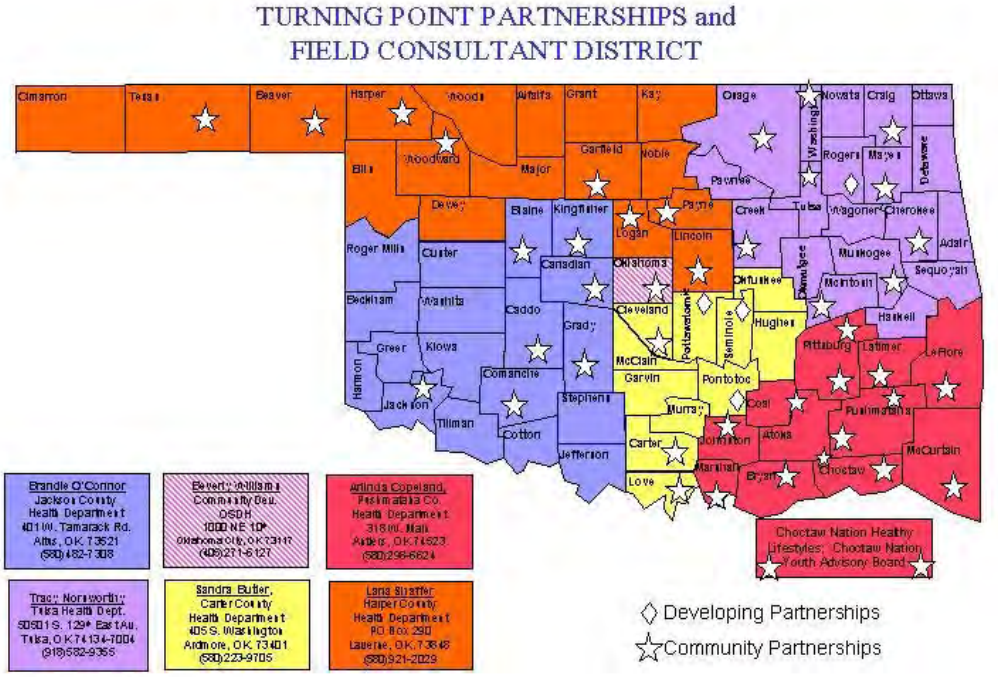
State of the County's Health Report

A Look Back To Move Forward

Major County

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

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



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Demographics

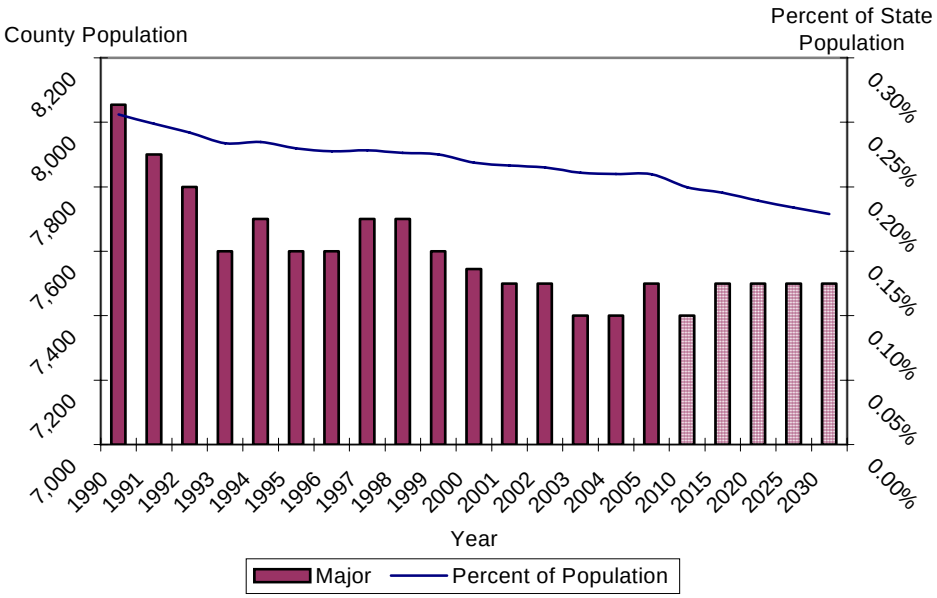
** U.S. Census Bureau*

- Population estimates
  - 6% decrease from 1990 to 2000 (8,055 to 7,545)
  - 2% decrease from 2000 to 2004
  - Ranked 59th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 95%
  - Native Americans =1%
  - Blacks =0%
  - Other/Multiple = 4%
- Age
  - Under 5 = 6%
  - Over 64 = 19%
  - Median age = 41.6 years
- Housing units
  - Occupied = 3,046 (86%)
  - Vacant = 494 (14%)
- Disability (ages 21 to 64) = 16.2% national = 19.2% state = 21.5%
- Individuals below poverty = 12.0% national = 12.4% state = 14.7%

Major County Population Growth with Projections



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Major County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 391 people in Major County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 39.2 deaths a year, heart disease accounts for over $14 million a year in medical costs in Major County.

Heart disease accounts for over $14 million a year in medical costs in Major County.

Alzheimer's disease and the complications associated with it changed from 14th ranked cause of death (1983-1993) to the 12th ranked cause of death in people 65 and older accounting for a 25% increase in deaths.

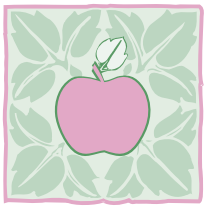
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 37.6% (2,791) of people in Major County were considered obese which accounted for an additional $1,102,445 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Major County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 2	CANCER 2	UNINTENT. INJURY 8	UNINTENT. INJURY 7	UNINTENT. INJURY 8	HEART DISEASE 14	CANCER 28	HEART DISEASE 392	HEART DISEASE 431
2	UNINTENT. INJURY 2	UNINTENT. INJURY 1	CANCER 1	CANCER 5	SUICIDE 4	CANCER 6	HEART DISEASE 21	CANCER 140	CANCER 184
3	HEART DISEASE 1		SUICIDE 1	SUICIDE 2	HEART DISEASE 3	UNINTENT. INJURY 2	BRONCHITIS EMPHYSEMA/ ASTHMA 5	STROKE 75	STROKE 79
4	PERINATAL PERIOD 1			DIABETES MELLITUS 1	CANCER 2	NON-CANCEROUS TUMOR 1	STROKE 3	BRONCHITIS EMPHYSEMA/ ASTHMA 39	BRONCHITIS EMPHYSEMA/ ASTHMA 44
5	SEPTICEMIA (BLOOD POISONING) 1			HIV 1	NON-CANCEROUS TUMOR 1	STROKE 1	DIABETES MELLITUS 3	INFLUENZA/ PNEUMONIA 33	UNINTENT. INJURY 42
6	OTHER 1			HOMICIDE/ LEGAL 1	DIABETES MELLITUS 1	SUICIDE 1	UNINTENT. INJURY 2	KIDNEY DISEASE 27	INFLUENZA/ PNEUMONIA 35
7					INFLUENZA/ PNEUMONIA 1	OTHER 9	ATHERO-SCLEROSIS 1	ATHERO-SCLEROSIS 17	KIDNEY DISEASE 28
8					LIVER DISEASE 1		GALLBLADDER DISORDER 1	DIABETES MELLITUS 15	DIABETES MELLITUS 21
					OTHER 6		INFLUENZA/ PNEUMONIA 1	UNINTENT. INJURY 12	ATHERO-SCLEROSIS 18
10							FIVE CAUSES TIED 1	PNEUMONITIS 8	SUICIDE 15

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

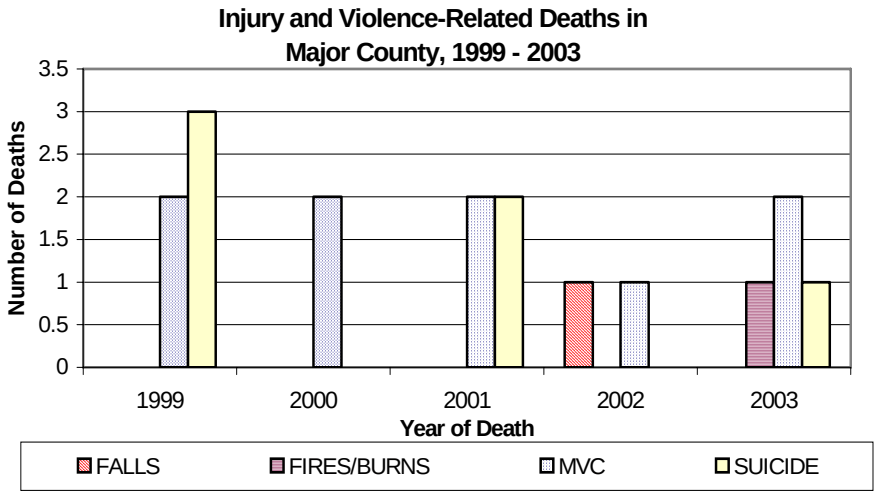
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

This trend does not change much in Major County. Unintentional injuries are the leading cause of death from ages 15 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Major County which has an average of 1.8 motor vehicle-related deaths a year, that translates to over $2 million a year.

Violence-related injuries (homicide and suicide) in Major County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 6% (445) of people in Major County use tobacco of some sort. Medical costs accumulated by those persons are over $1 million a year for Major County.

*"Medical costs accumulated by those persons are over **$1 million a year** for Major County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 38.6% (2,865) of people in Major County had no leisure activity in the past month at the time they were surveyed.

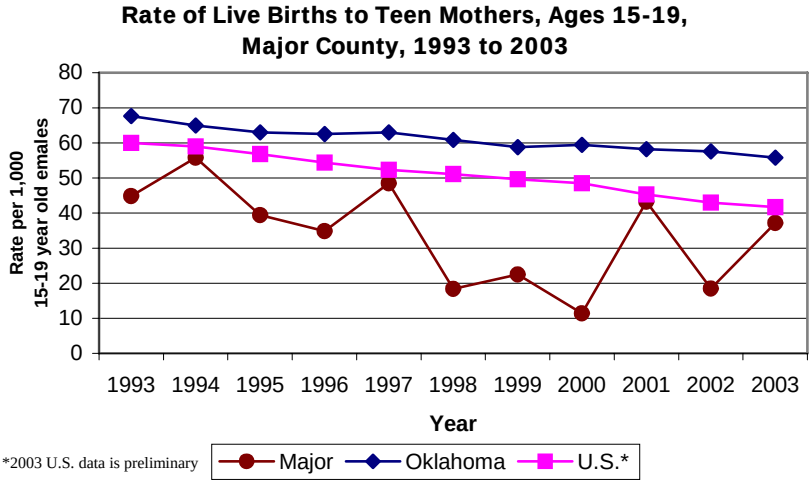
The BRFSS also indicated that 7.3% (542) of Major County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $7,177,706.00 in one year for Major County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 1 births to a mother 10-14 years of age occurred during the 11 year period.

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

According to Oklahoma Vital Statistics, Major County had a teen birth rate of 37.2 in 2003 which was a 101% increase from 2002 (18.5) but a 17% decrease since 1993 (44.9).

With an average of 9 births per year, teen pregnancy costs the citizens of Major County $28,800.00 a year.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 12.0% of persons in Major County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Major County is 18% below the state (14.7%) and 3% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Major County, 2000 Census

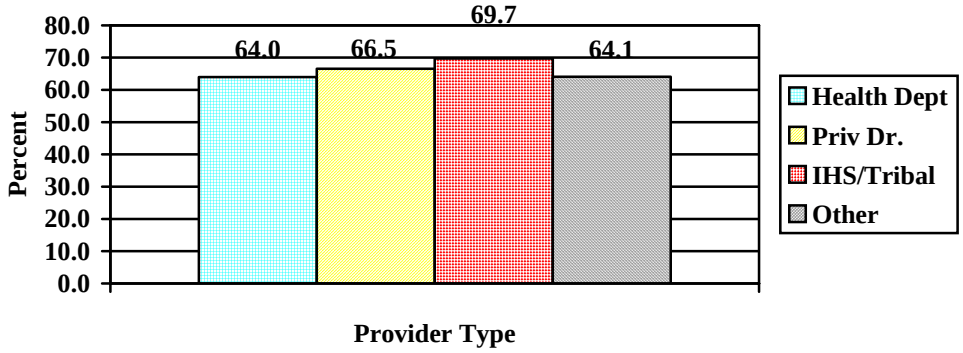
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	7,408	358	533	886	929	4,702
Cumulative Population		358	891	1,777	2,706	7,408
% of Total	100.0%	4.8%	7.2%	12.0%	12.5%	63.5%
Cumulative %		4.8%	12.0%	24.0%	36.5%	100.0%

OK By One - State Immunization Data

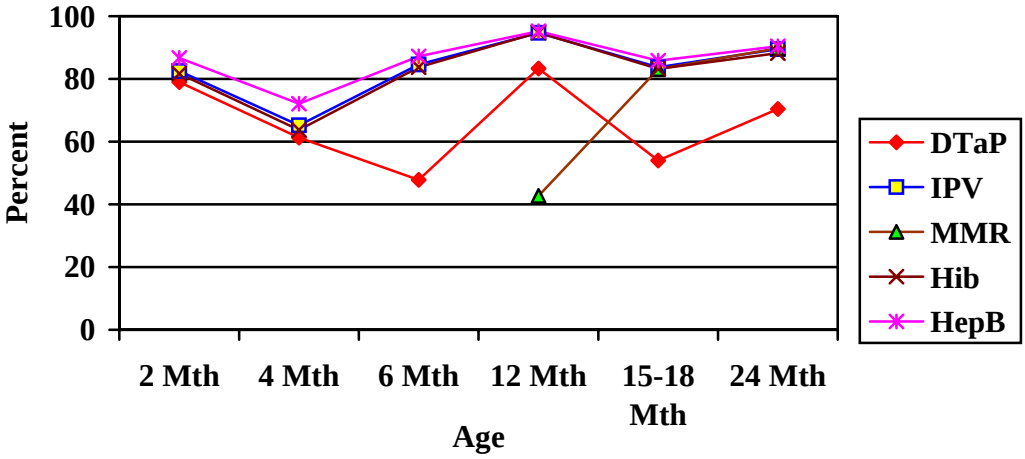
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

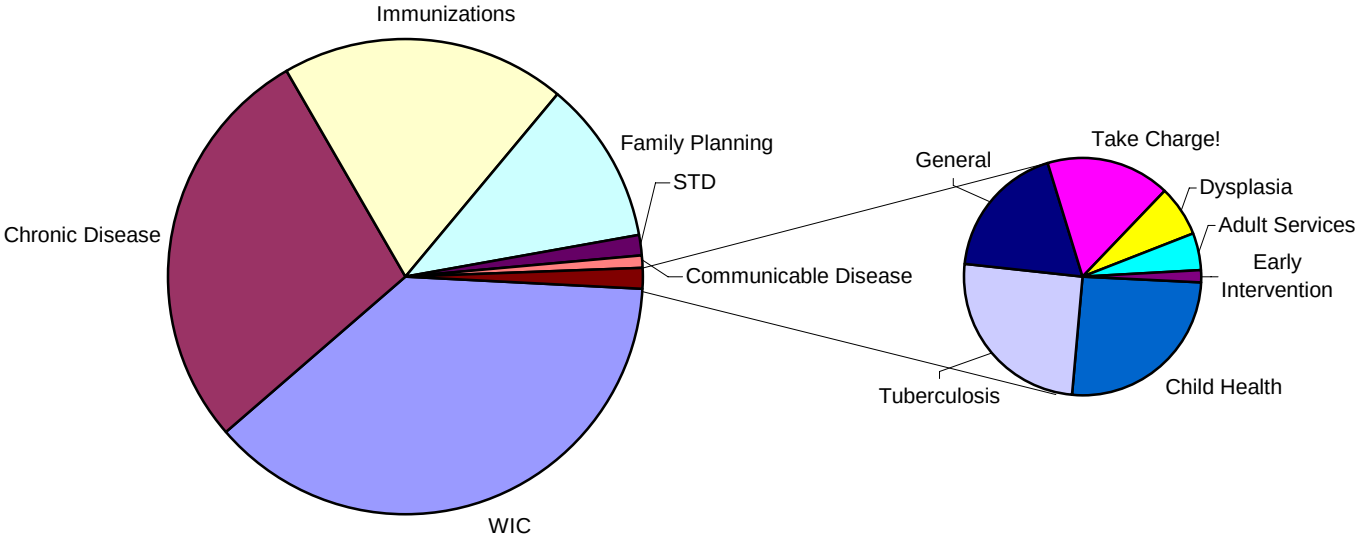


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 39 deaths a year
- $369,476.69 per death
- Total— $14,409,590.91 a year

Obesity

- 37.6% of population (2,791)
- $395.00 in additional medical costs per person
- Total—$1,102,445.00

Motor Vehicle-Related Injury Death

- Average 1.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,016,000.00 a year

Tobacco Use

- 6% of population (445)
- $3,300.00 in health care costs
- Total—$1,468,500.00 a year

Diabetes

- 7.3% of population (542)
- $13,243.00 in healthcare costs a year
- Total—$7,177,706.00 a year

Teen Pregnancy

- Average of 9 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $28,800.00 a year

Grand Total for Major County:

$26,203,041.91

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Oklahoma City, OK 73117
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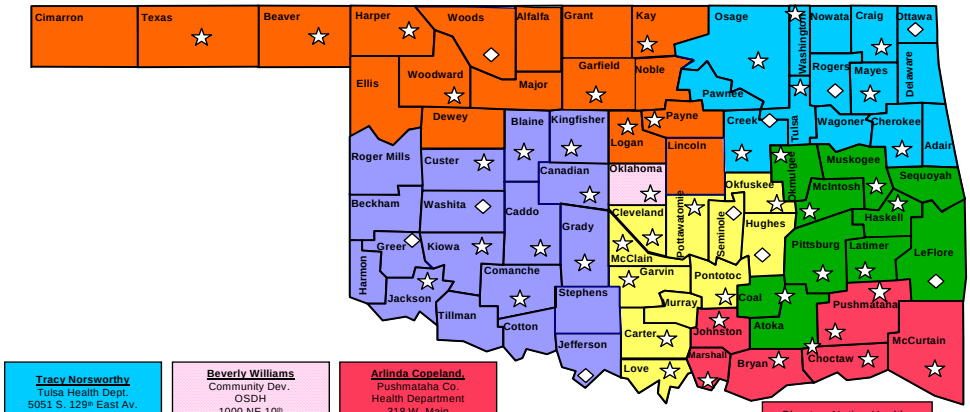
TURNING POINT PARTNERSHIPS and
FIELD CONSULTANTS DISTRICTS



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Tammy Randazzo
Pittsburg County
Health Department
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McAlester, Oklahoma 74501
(918) 423-1267

☆ Community Partnerships
◇ Developing Partnerships

Field Consultant Districts 5-15-06

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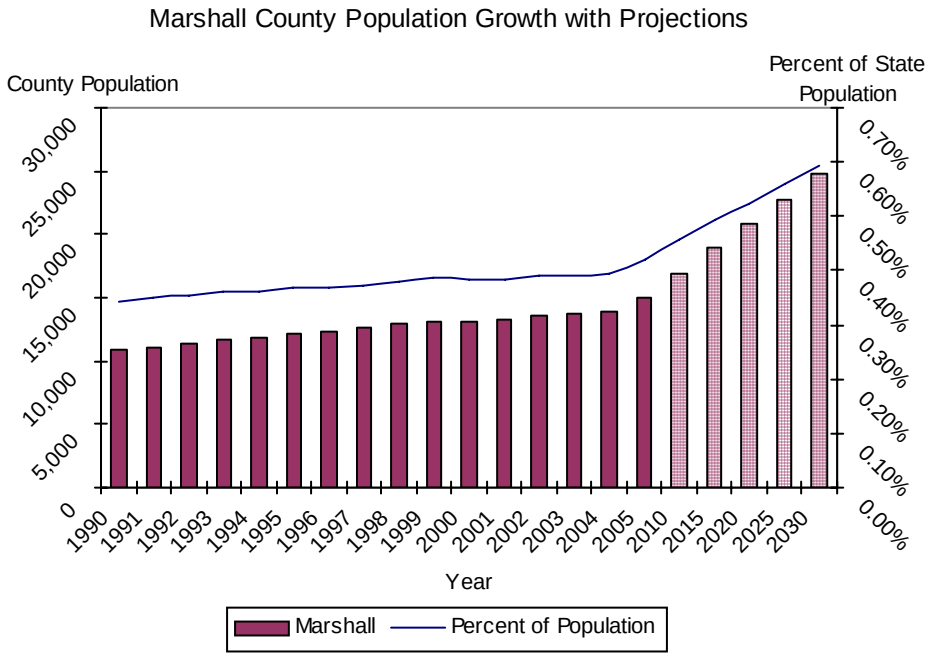
Demographics

- Population estimates
  - 22% increase from 1990 to 2000 (10,829 to 13,184)
  - 5% increase from 2000 to 2004
  - Ranked 8th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 9%
- Race
  - Whites = 78%
  - Native Americans =9%
  - Blacks =2%
  - Other/Multiple = 11%
- Age
  - Under 5 = 6%
  - Over 64 = 20%
  - Median age = 41.3 years
- Housing units
  - Occupied = 5,371 (63%)
  - Vacant = 3,146 (37%)
- Disability (ages 21 to 64) = 28.0% national average = 19.2%
- Individuals below poverty = 17.9% national = 12.4% state = 14.7%



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

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Marshall County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 725 people in Marshall County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 61 deaths a year, heart disease accounts for almost $23 million a year in medical costs in Marshall County.

Heart disease accounts for almost $23 million a year in medical costs in Marshall County.

Alzheimer's disease and the complications associated have increased from the 11th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 186% increase in deaths.

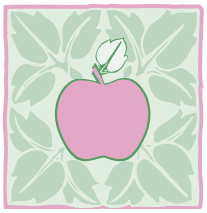
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 44.9% (6,130) of people in Marshall County were considered obese which accounted for an additional $2,421,350 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Marshall County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES	UNINTENT. INJURY	UNINTENT. INJURY	UNINTENT. INJURY	UNINTENT. INJURY	HEART DISEASE	CANCER	HEART DISEASE	HEART DISEASE
	4	3	10	8	11	31	78	574	670
2	PERINATAL PERIOD	NON-CANCEROUS TUMOR	SUICIDE	HIV	HEART DISEASE	CANCER	HEART DISEASE	CANCER	CANCER
	3	1	5	2	9	19	55	288	394
3	UNINTENT. INJURY	OTHER	CANCER	SUICIDE	CANCER	UNINTENT. INJURY	BRONCHITIS EMPHYSEMA / ASTHMA	STROKE	STROKE
	3	1	2	2	6	12	9	95	110
4	STROKE		STROKE	STROKE	SUICIDE	BRONCHITIS EMPHYSEMA / ASTHMA	STROKE	BRONCHITIS EMPHYSEMA / ASTHMA	UNINTENT. INJURY
	1		1	1	5	5	7	70	81
5	MENINGITIS		CONGENITAL ANOMALIES	DIABETES MELLITUS	STROKE	LIVER DISEASE	DIABETES MELLITUS	INFLUENZA / PNEUMONIA	INFLUENZA / PNEUMONIA
	1		1	1	2	4	6	70	74
6	SEPTICEMIA (BLOOD POISONING)			HEART DISEASE	DIABETES MELLITUS	SUICIDE	UNINTENT. INJURY	DIABETES MELLITUS	DIABETES MELLITUS
	1			1	2	4	5	36	47
7	SIDS			HOMICIDE/ LEGAL	HIV	STROKE	INFLUENZA / PNEUMONIA	UNINTENT. INJURY	KIDNEY DISEASE
	1			1	2	3	3	29	29
8	OTHER			CANCER	HOMICIDE/ LEGAL	DIABETES MELLITUS	LIVER DISEASE	KIDNEY DISEASE	SUICIDE
	4			1	2	2	3	27	21
				SEPTICEMIA (BLOOD POISONING)	VIRAL HEPATITIS	VIRAL HEPATITIS	ATHERO-SCLEROSIS	ALZHEIMER'S DISEASE	ALZHEIMER'S DISEASE
				1	2	2	1	20	20
10					TWO CAUSES TIED	SIX CAUSES TIED	SIX CAUSES TIED	SEPTICEMIA (BLOOD POISONING)	SEPTICEMIA (BLOOD POISONING)
					1	1	1	14	18

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health — July 2005

Injury and Violence

* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

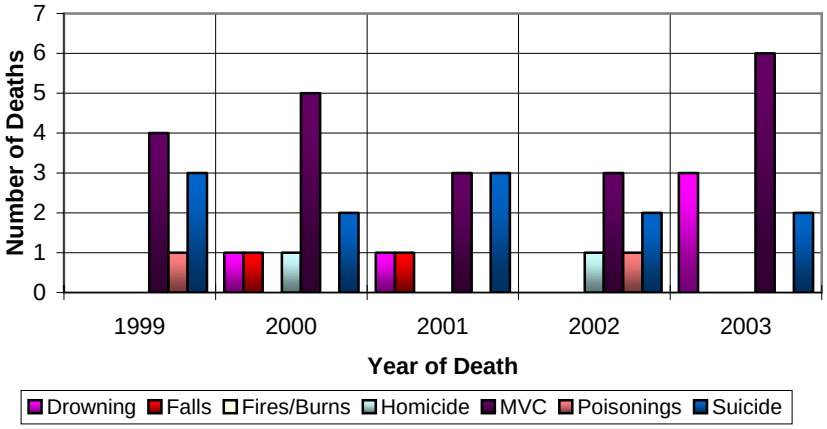
Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Marshall County which has an average of 4.2 motor vehicle-related deaths a year, that translates to almost $5 million a year.

Violence-related injuries (homicide and suicide) in Marshall County are ranked in the top 10 in three of the eight age groups (see Top 10 list on page 3).

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



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 30.4% (4,150) of people in Marshall County use tobacco of some sort. Medical costs accumulated by those persons are almost $14 million a year for Marshall County.

*"Medical costs accumulated by those persons are almost **$14 million a year** for Marshall County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 36.6% (4,997) of people in Marshall County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 4.6% (628) of Marshall County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $8,316,604 in one year for Marshall County.

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

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

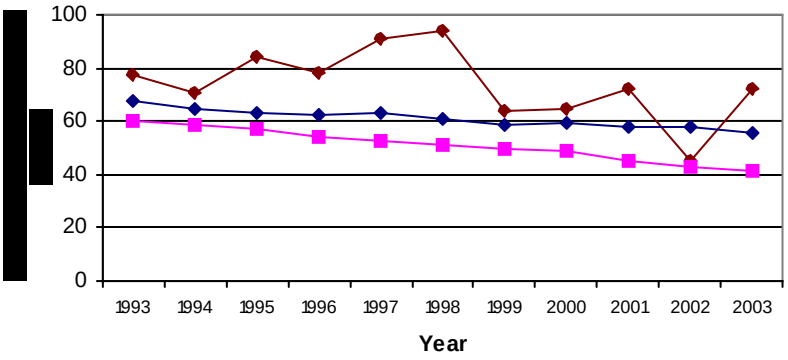
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Marshall County had a teen birth rate of 72 in 2003 which was a 60% increase from 2002 (44.9) but a 7% decrease since 1993 (77.6).

With an average of 29 births per year, teen pregnancy costs the citizens of Marshall County $92,800 a year.

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



*2003 U.S. data is preliminary

Marshall — Oklahoma — U.S.*

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

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 17.9% of persons in Marshall County for whom poverty status was known had an income below what was need to live at the federal poverty level. Marshall County is 22% above the state (14.7%) and 44% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Marshall County, 2000 Census

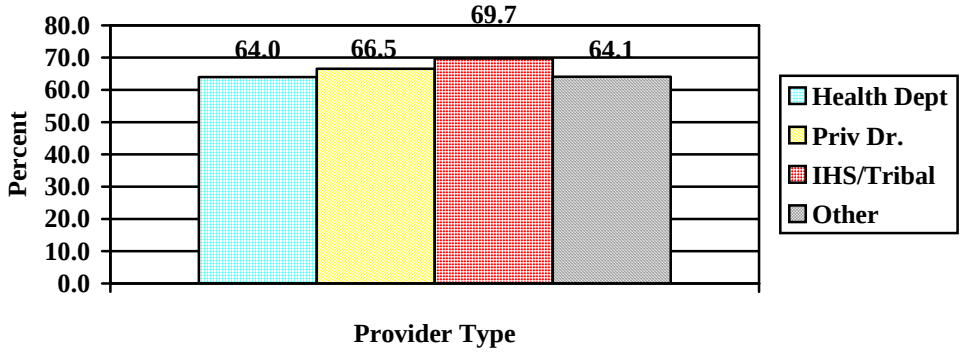
Poverty Level	Total	50% below	51% to 99% below	100% to 149% above	150% to 199% above	200% and above
Population	12,888	934	1,376	2,049	1,650	6,879
Cumulative Population		934	2,310	4,359	6,009	12,888
% of Total	100.0%	7.2%	10.7%	15.9%	12.8%	53.4%
Cumulative %		7.2%	17.9%	33.8%	46.6%	100.0%

OK By One - State Immunization Data

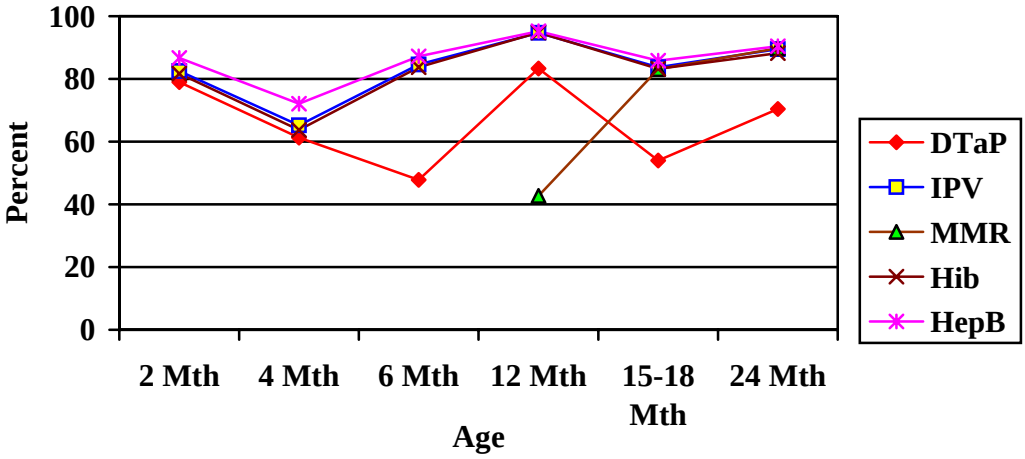
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

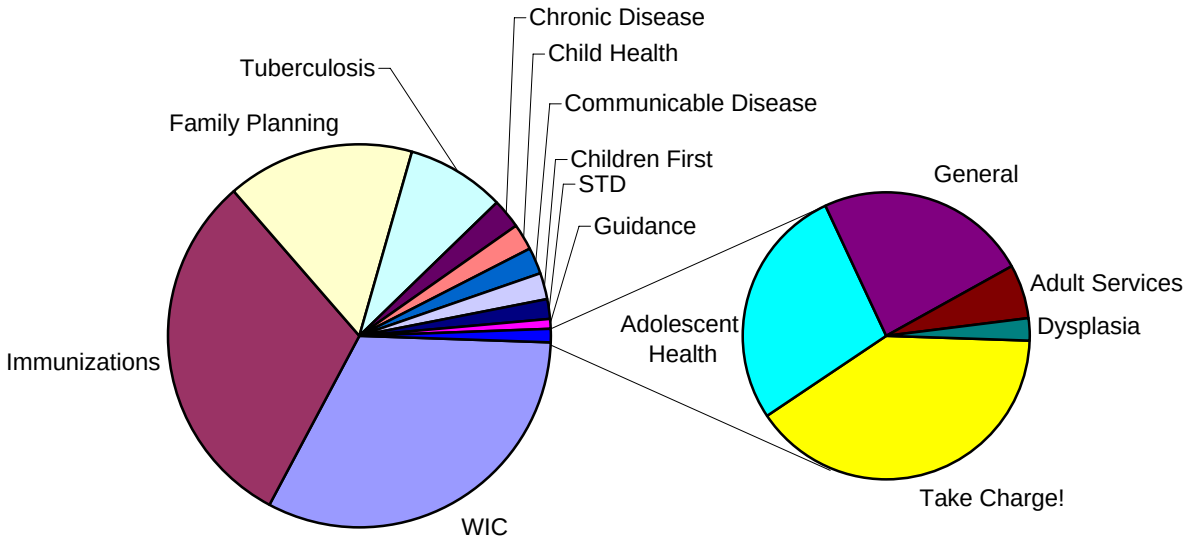


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 61 deaths a year
- $369,476.69 per death
- Total—$22,538,078.09 a year

Obesity

- 44.9% of population (6,130)
- $395.00 in additional medical costs per person
- Total—$2,421,350.00

Motor Vehicle-Related Injury Death

- Average 4.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,704,000.00 a year

Tobacco Use

- 30.4% of population (4,150)
- $3,300.00 in health care costs
- Total—$13,695,000.00 a year

Diabetes

- 4.6% of population (628)
- $13,243.00 in healthcare costs a year
- Total—$8,316,604.00 a year

Teen Pregnancy

- Average of 29 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total—$92,800.00 a year

Grand Total for Marshall County:

$51,767,832.09

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Marshall County Health Department
310 W Lillie Blvd
PO Box 476
Madill, Oklahoma 73446
(580) 795-3705

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

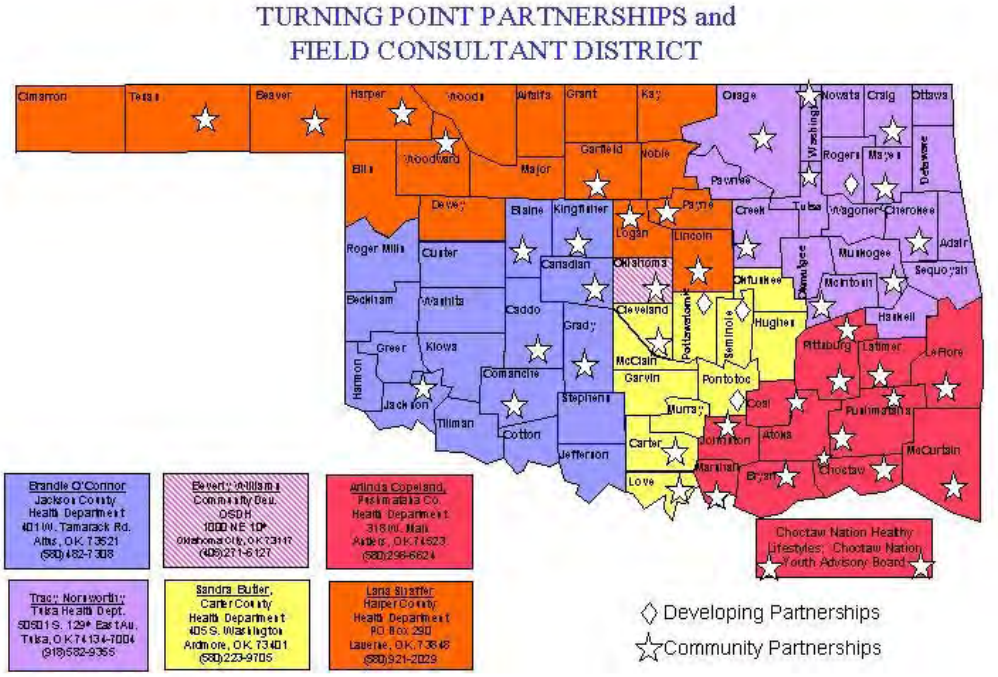
State of the County's Health Report

A Look Back To Move Forward

Mayes County

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

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



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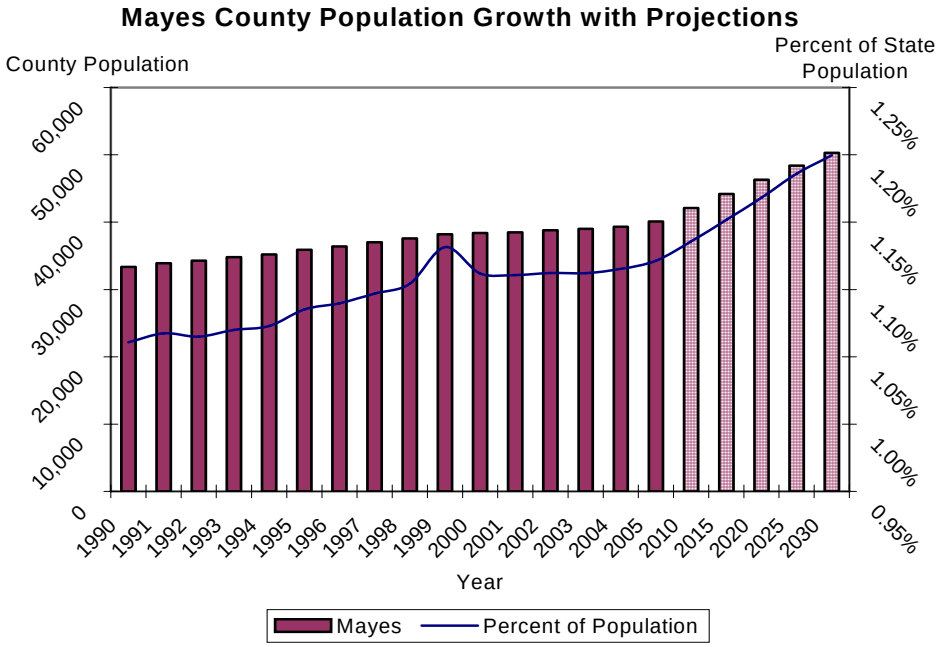
Demographics

** U.S. Census Bureau*

- Population estimates
  - 15% increase from 1990 to 2000 (33,366 to 38,369)
  - 2% increase from 2000 to 2004
  - Ranked 21st for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 72%
  - Native Americans =19%
  - Blacks =0%
  - Other/Multiple = 8%
- Age
  - Under 5 = 7%
  - Over 64 = 15%
  - Median age = 37.2 years
- Housing units
  - Occupied = 14,823 (85%)
  - Vacant = 2,600 (15%)
- Disability (ages 21 to 64) = 24.1% national = 19.2% state = 21.5%
- Individuals below poverty = 14.3% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Mayes County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,458 people in Mayes County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 126.5 deaths a year, heart disease accounts for almost $47 million a year in medical costs in Mayes County.

Heart disease accounts for almost $47 million a year in medical costs in Mayes County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 114% increase in deaths.

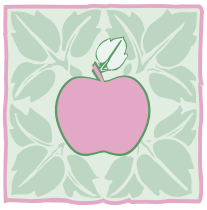
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 22.8% (8,862) of people in Mayes County were considered obese which accounted for an additional $3,500,490 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

Mayes County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 15	UNINTENT. INJURY 4	UNINTENT. INJURY 44	UNINTENT. INJURY 38	UNINTENT. INJURY 49	CANCER 98	CANCER 180	HEART DISEASE 1138	HEART DISEASE 1391
2	UNINTENT. INJURY 12	CANCER 3	SUICIDE 10	CANCER 10	CANCER 28	HEART DISEASE 74	HEART DISEASE 150	CANCER 697	CANCER 1018
3	PERINATAL PERIOD 11	CONGENITAL ANOMALIES 1	BRONCHITIS EMPHYSEMA/ ASTHMA 3	SUICIDE 10	HEART DISEASE 22	UNINTENT. INJURY 27	BRONCHITIS EMPHYSEMA/ ASTHMA 28	STROKE 288	STROKE 319
4	SIDS 3	HOMICIDE/ LEGAL 1	NON-CANCEROUS TUMOR 1	HOMICIDE/ LEGAL 7	SUICIDE 14	DIABETES MELLITUS 13	UNINTENT. INJURY 24	BRONCHITIS EMPHYSEMA/ ASTHMA 184	UNINTENT. INJURY 287
5	HOMICIDE/ LEGAL 2	OTHER 2	DIABETES MELLITUS 1	HEART DISEASE 6	HIV 5	SUICIDE 9	STROKE 21	INFLUENZA/ PNEUMONIA 116	BRONCHITIS EMPHYSEMA/ ASTHMA 221
6	SEPTICEMIA (BLOOD POISONING) 2		HEART DISEASE 1	CONGENITAL ANOMALIES 2	HOMICIDE/ LEGAL 5	LIVER DISEASE 8	DIABETES MELLITUS 12	UNINTENT. INJURY 89	INFLUENZA/ PNEUMONIA 130
7	NON-CANCEROUS TUMOR 1		HOMICIDE/ LEGAL 1	HIV 2	STROKE 4	HOMICIDE/ LEGAL 6	INFLUENZA/ PNEUMONIA 9	DIABETES MELLITUS 74	DIABETES MELLITUS 102
8	CANCER 1		INFLUENZA/ PNEUMONIA 1	INFLUENZA/ PNEUMONIA 2	BRONCHITIS EMPHYSEMA/ ASTHMA 2	STROKE 5	LIVER DISEASE 6	KIDNEY DISEASE 64	KIDNEY DISEASE 74
	OTHER 14		CANCER 1	STROKE 1	DIABETES MELLITUS 2	BRONCHITIS EMPHYSEMA/ ASTHMA 4	KIDNEY DISEASE 6	SEPTICEMIA (BLOOD POISONING) 52	SUICIDE 65
10			OTHER 7	TWO CAUSES TIED 1	SEPTICEMIA (BLOOD POISONING) 2	KIDNEY DISEASE 3	SEPTICEMIA (BLOOD POISONING) 6	ALZHEIMER'S DISEASE 45	SEPTICEMIA (BLOOD POISONING) 62

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

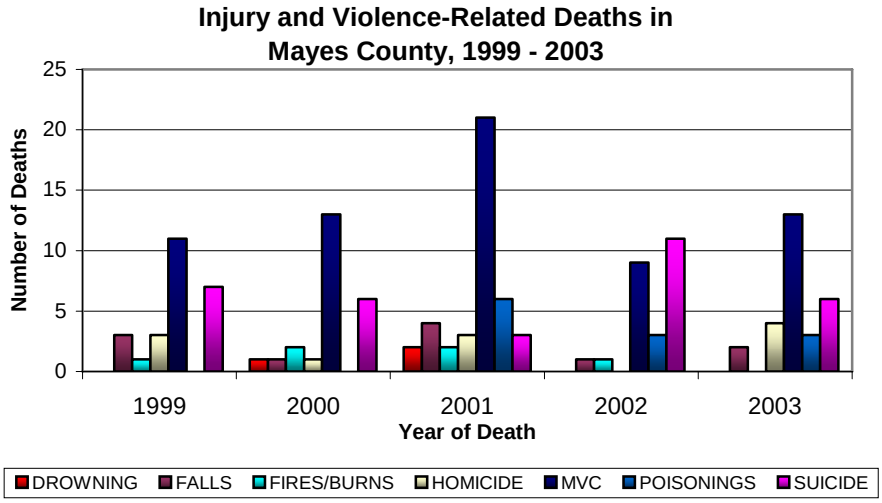
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Mayes County which has an average of 13.4 motor vehicle-related deaths a year, that translates to over $15 million a year.

Violence-related injuries (homicide and suicide) in Mayes County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.4% (8,707) of people in Mayes County use tobacco of some sort. Medical costs accumulated by those persons are almost $29 million a year for Mayes County.

> *"Medical costs accumulated by those persons are almost **$29 million a year** for Mayes County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 29.2% (11,350) of people in Mayes County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.6% (2,954) of Mayes County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $39,119,822.00 in one year for Mayes County.

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

Teen Pregnancy

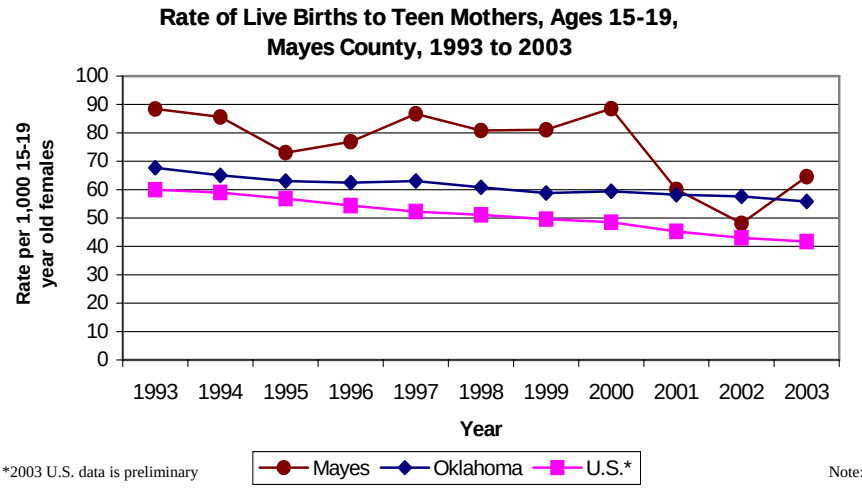
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, Mayes County had a teen birth rate of 64.6 in 2003 which was a 34% increase from 2002 (48.1) and a 27% decrease since 1993 (88.4).

With an average of 99 births per year, teen pregnancy costs the citizens of Mayes County $316,800.00 a year.



*2003 U.S. data is preliminary

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

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 14.3% of persons in Mayes County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Mayes County is 3% above the state (14.7%) and 15% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, McClain County, 2000 Census

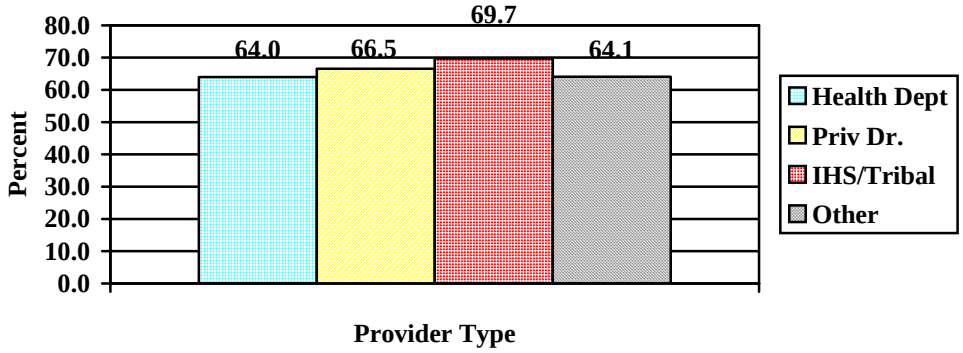
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	27,465	907	1,979	2,789	3,297	18,493
Cumulative Population		907	2,886	5,675	8,972	27,465
% of Total	100.0%	3.3%	7.2%	10.2%	12.0%	67.3%
Cumulative %		3.3%	10.5%	20.7%	32.7%	100.0%

OK By One - State Immunization Data

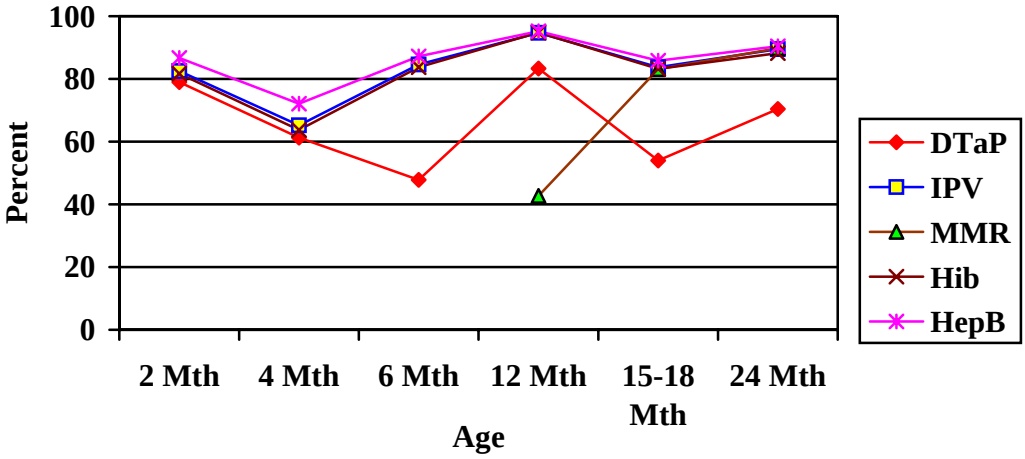
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004



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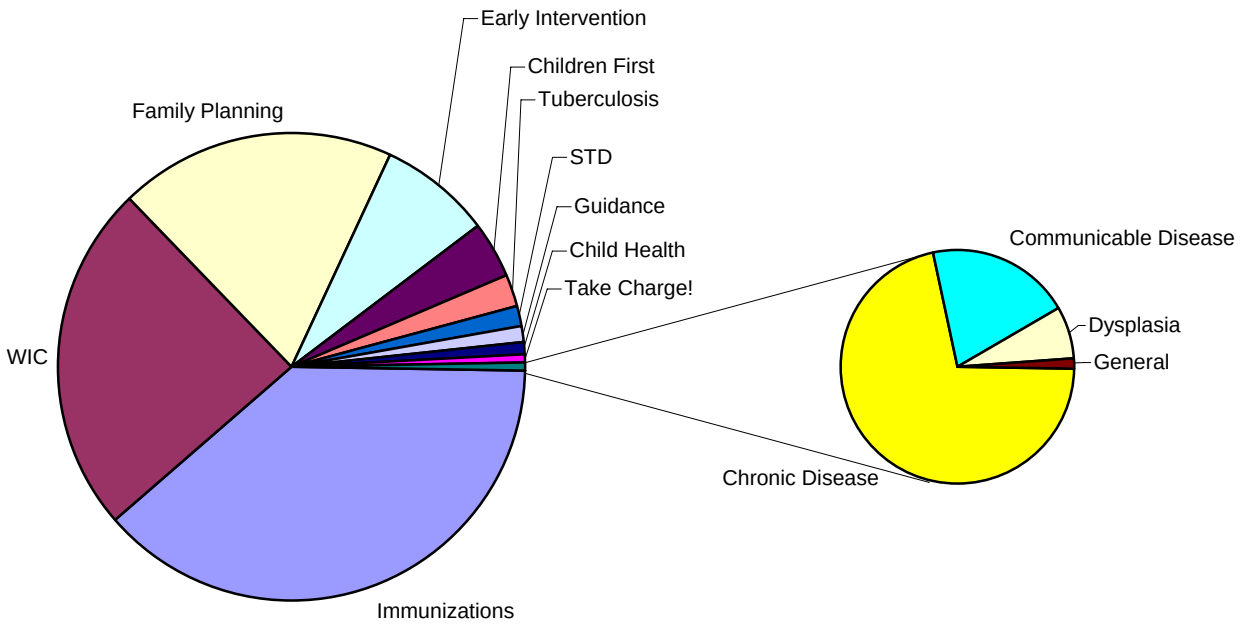

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 127 deaths a year
- $369,476.69 per death
- Total— $46,923,539.63 a year

Obesity

- 22.8% of population (8,862)
- $395.00 in additional medical costs per person
- Total—$3,500,490.00

Motor Vehicle-Related Injury Death

- Average 13.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$15,008,000.00 a year

Tobacco Use

- 22.4% of population (8,707)
- $3,300.00 in health care costs
- Total - $28,733,100.00 a year

Diabetes

- 7.6% of population (2,954)
- $13,243.00 in healthcare costs a year
- Total—$39,119,822.00 a year

Teen Pregnancy

- Average of 99 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $316,800.00 a year

Grand Total for Mayes County:

$133,601,751.63

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Oklahoma City, OK 73117
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Fax: 405-271-1225
Email: miriamm@health.ok.gov

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111 Northeast First
Pryor, OK 74361
918-825-4224
Website: http://www.health.ok.gov/chds/mayes

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Report compiled by:
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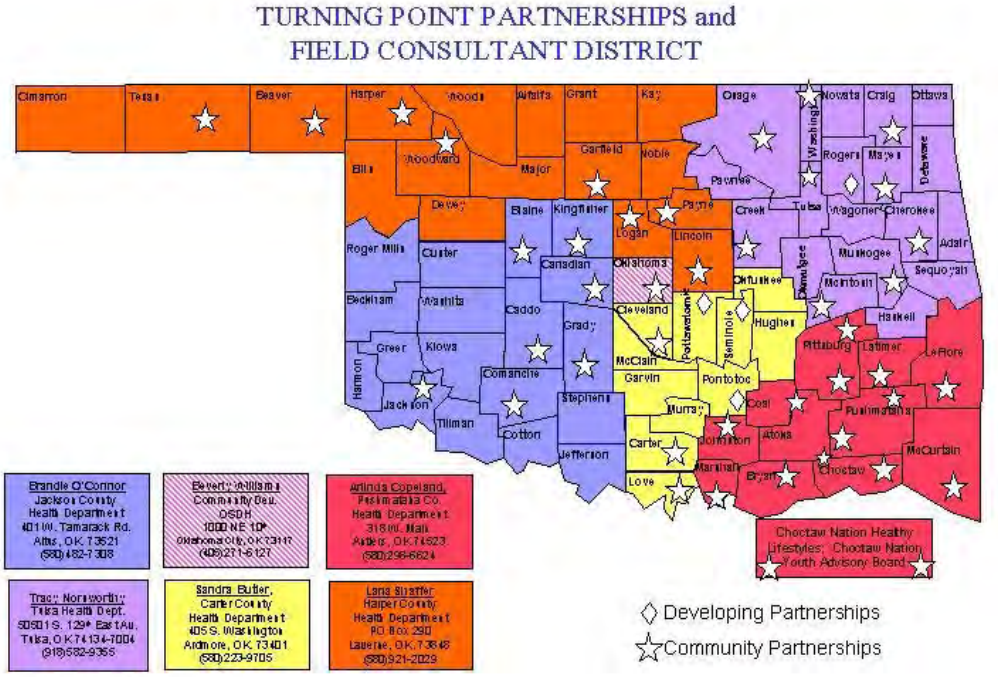

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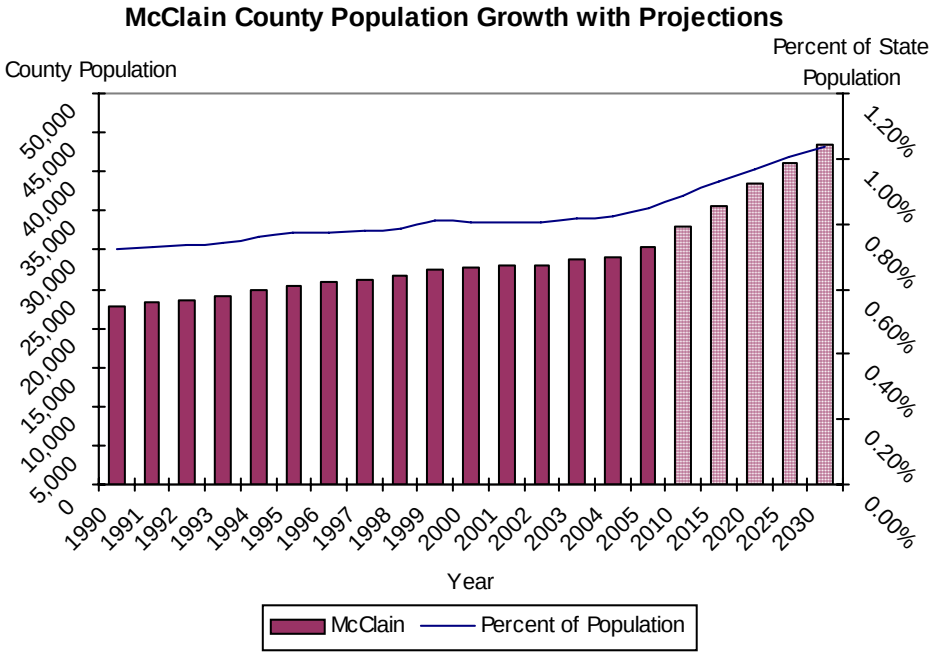
Demographics

** U.S. Census Bureau*

- Population estimates
  - 22% increase from 1990 to 2000 (22,795 to 27,740)
  - 5% increase from 2000 to 2004
  - Ranked 9th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 5%
- Race
  - Whites = 87%
  - Native Americans =6%
  - Blacks =1%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 12%
  - Median age = 36.9 years
- Housing units
  - Occupied = 10,331 (92%)
  - Vacant = 858 (8%)
- Disability (ages 21 to 64) = 20.6% national = 19.2% state = 21.5%
- Individuals below poverty = 10.5% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in McClain County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 762 people in McClain County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 73.3 deaths a year, heart disease accounts for over $27 million a year in medical costs in McClain County.

Heart disease accounts for over $27 million a year in medical costs in McClain County.

Alzheimer's disease and the complications associated with it have increased from the 13th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 20% increase in deaths.

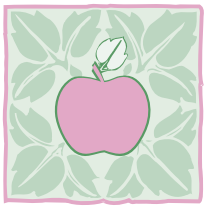
Nutrition and Obesity

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

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

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 25% (7,149) of people in McClain County were considered obese which accounted for an additional $2,823,855 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



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

Top 10 Causes of Death by Age Group

McClain County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD	UNINTENT. INJURY	UNINTENT. INJURY	UNINTENT. INJURY	UNINTENT. INJURY	CANCER	CANCER	HEART DISEASE	HEART DISEASE
	14	7	28	30	18	52	111	652	806
2	CONGENITAL ANOMALIES	NON-CANCEROUS TUMOR	HOMICIDE/ LEGAL	SUICIDE	CANCER	HEART DISEASE	HEART DISEASE	CANCER	CANCER
	6	1	4	7	16	51	87	388	572
3	INFLUENZA/ PNEUMONIA	HEART DISEASE	SUICIDE	HEART DISEASE	SUICIDE	UNINTENT. INJURY	BRONCHITIS EMPHYSEMA/ ASTHMA	STROKE	STROKE
	2	1	4	3	11	14	21	159	177
4	UNINTENT. INJURY	HOMICIDE/ LEGAL	HEART DISEASE	HIV	HEART DISEASE	BRONCHITIS EMPHYSEMA/ ASTHMA	UNINTENT. INJURY	BRONCHITIS EMPHYSEMA/ ASTHMA	BRONCHITIS EMPHYSEMA/ ASTHMA
	2	1	2	3	9	9	17	133	167
5	HEART DISEASE	CANCER	STROKE	HOMICIDE/ LEGAL	BRONCHITIS EMPHYSEMA/ ASTHMA	LIVER DISEASE	STROKE	INFLUENZA/ PNEUMONIA	UNINTENT. INJURY
	1	1	1	3	4	6	13	104	158
6	CANCER	SUICIDE	INFLUENZA/ PNEUMONIA	CANCER	HOMICIDE/ LEGAL	SUICIDE	DIABETES MELLITUS	DIABETES MELLITUS	INFLUENZA/ PNEUMONIA
	1	1	1	2	4	6	13	43	114
7		OTHER	CANCER	CONGENITAL ANOMALIES	DIABETES MELLITUS	DIABETES MELLITUS	INFLUENZA/ PNEUMONIA	UNINTENT. INJURY	DIABETES MELLITUS
		2	1	1	2	5	6	42	63
8			MENINGOCOC. INFECTION	MENINGITIS	NON-CANCEROUS TUMOR	ATHERO-SCLEROSIS	LIVER DISEASE	KIDNEY DISEASE	SUICIDE
			1	1	1	3	6	35	43
			OTHER	OTHER	STROKE	STROKE	ATHERO-SCLEROSIS	ATHERO-SCLEROSIS	KIDNEY DISEASE
			4	5	1	2	5	18	37
10					THREE CAUSES TIED	THREE CAUSES TIED	SEPTICEMIA (BLOOD POISONING)	PNEUMONITIS	ATHERO-SCLEROSIS
					1	2	3	15	26

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

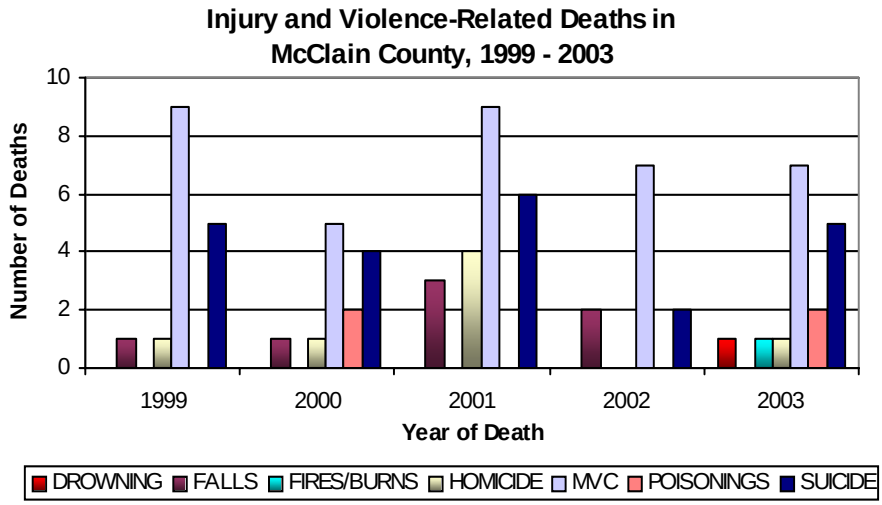
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

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

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

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For McClain County which has an average of 7.4 motor vehicle-related deaths a year, that translates to over $8 million a year.

Violence-related injuries (homicide and suicide) in McClain County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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

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

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 21% (6,005) of people in McClain County use tobacco of some sort. Medical costs accumulated by those persons are almost $20 million a year for McClain County.

> *"Medical costs accumulated by those persons are almost **$20 million a year** for McClain County"*

Physical Activity, Wellness and Diabetes

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

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

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 26.1% (7,463) of people in McClain County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.9% (1,973) of McClain County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $26,128,439.00 in one year for McClain County.

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

Teen Pregnancy

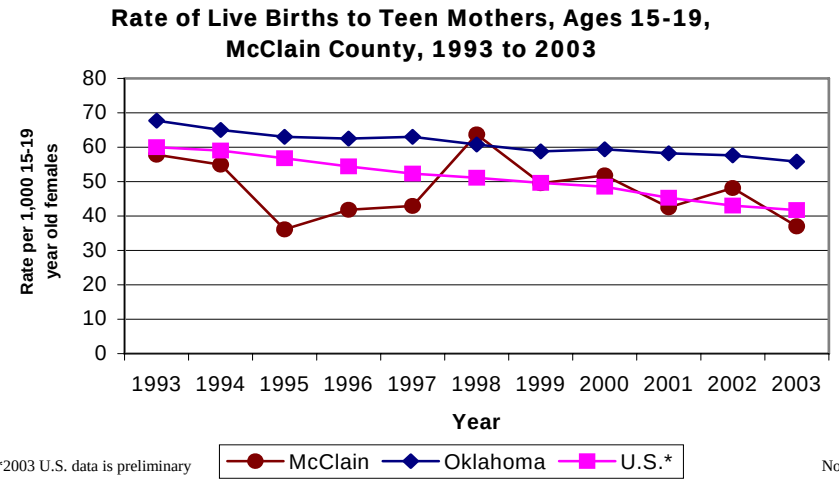
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

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

According to Oklahoma Vital Statistics, McClain County had a teen birth rate of 37 in 2003 which was a 23% decrease from 2002 (48.1) and a 36% decrease since 1993 (57.8).

With an average of 47 births per year, teen pregnancy costs the citizens of McClain County $150,400.00 a year.



*2003 U.S. data is preliminary

Note: 3 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

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

According to the 2000 census, 10.5% of persons in McClain County for whom poverty status was known had an income below what was needed to live at the federal poverty level. McClain County is 29% above the state (14.7%) and 15% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, McClain County, 2000 Census

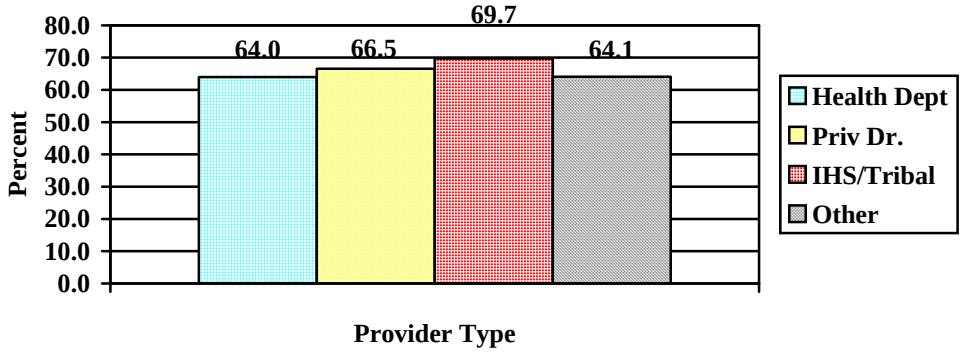
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	27,465	907	1,979	2,789	3,297	18,493
Cumulative Population		907	2,886	5,675	8,972	27,465
% of Total	100.0%	3.3%	7.2%	10.2%	12.0%	67.3%
Cumulative %		3.3%	10.5%	20.7%	32.7%	100.0%

OK By One - State Immunization Data

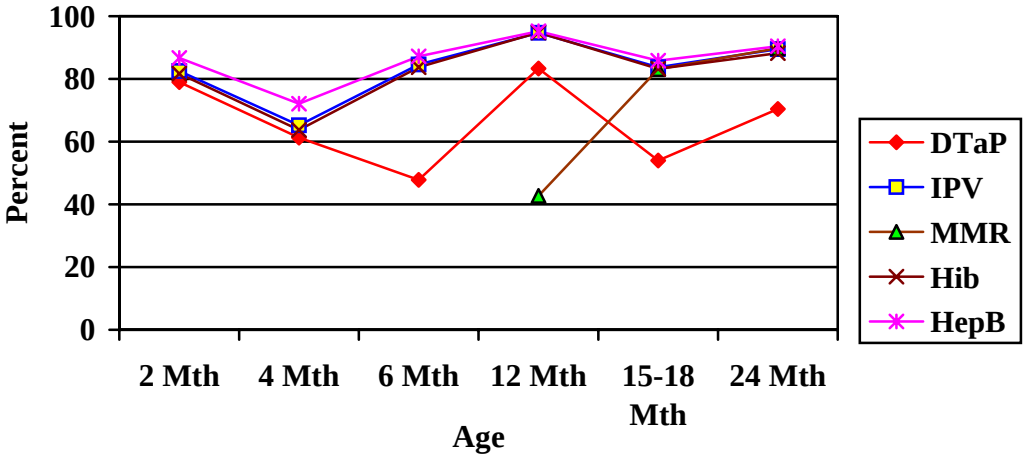
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

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



Oklahoma Children On Schedule by Antigen, 2004

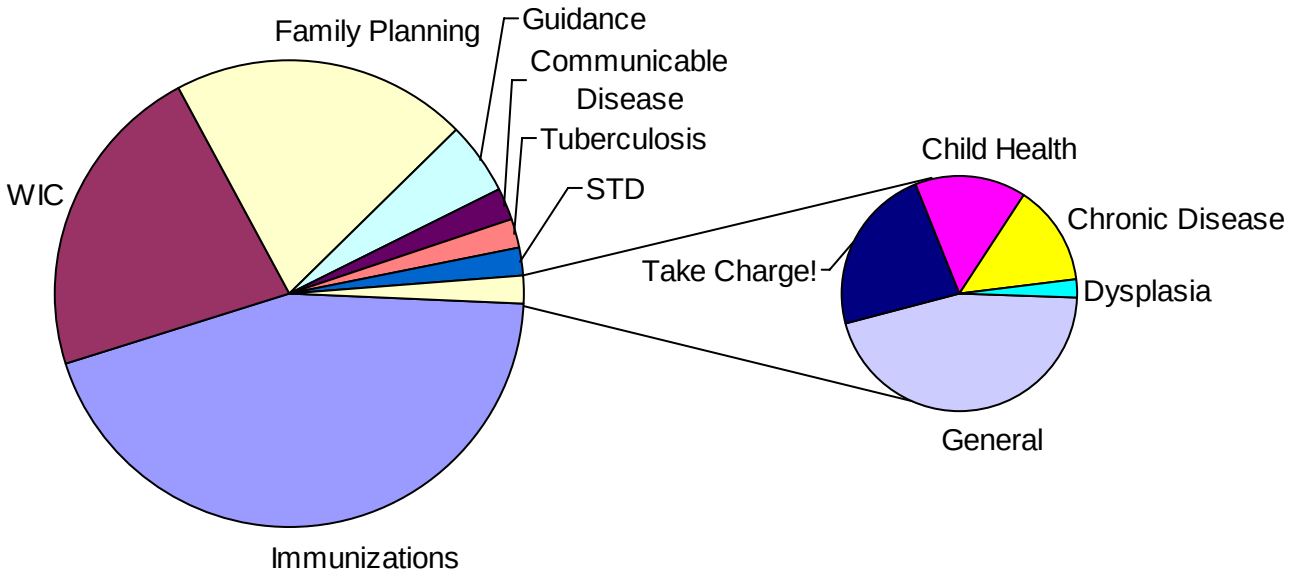


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

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



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 73 deaths a year
- $369,476.69 per death
- Total— $26,971,798.37 a year

Obesity

- 25% of population (7,149)
- $395.00 in additional medical costs per person
- Total—$2,823,855.00

Motor Vehicle-Related Injury Death

- Average 7.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$8,288,000.00 a year

Tobacco Use

- 21% of population (6,005)
- $3,300.00 in health care costs
- Total - $19,816,500.00 a year

Diabetes

- 6.9% of population (1,973)
- $13,243.00 in healthcare costs a year
- Total—$26,128,439.00 a year

Teen Pregnancy

- Average of 47 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $150,400.00 a year

Grand Total for McClain County:

$84,178,992.37

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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

McClain County Health Department
919 North Ninth St
Purcell, OK 73080
405-527-6541

107 South Main
Blanchard, OK 73010
405-485-3319

Looking Back to Move Forward

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

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

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

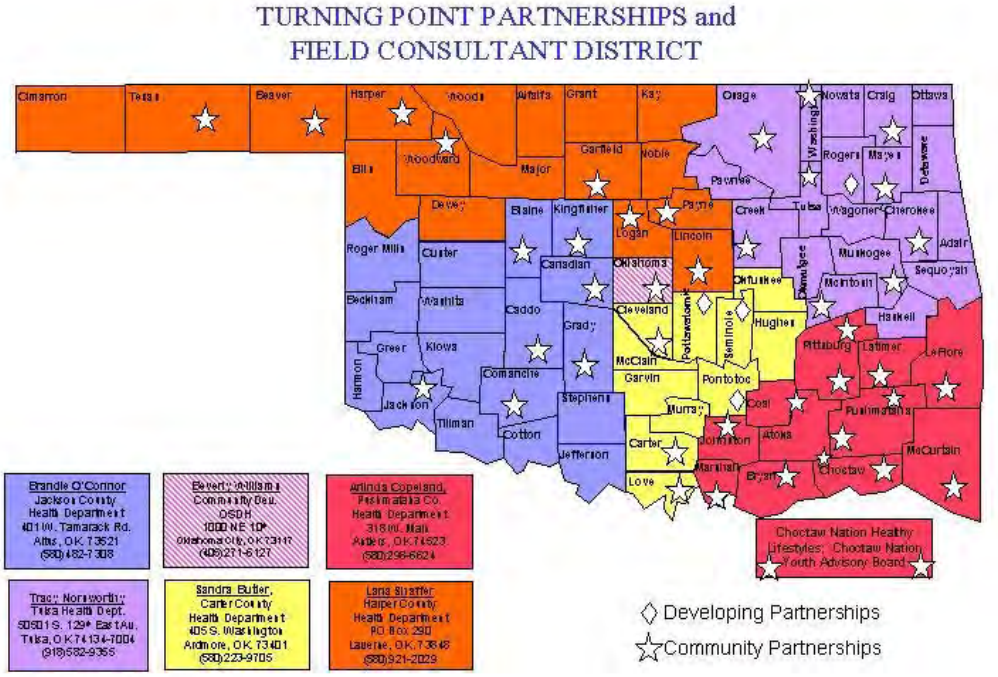
State of the County's Health Report

A Look Back To Move Forward

McCurtain County

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

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



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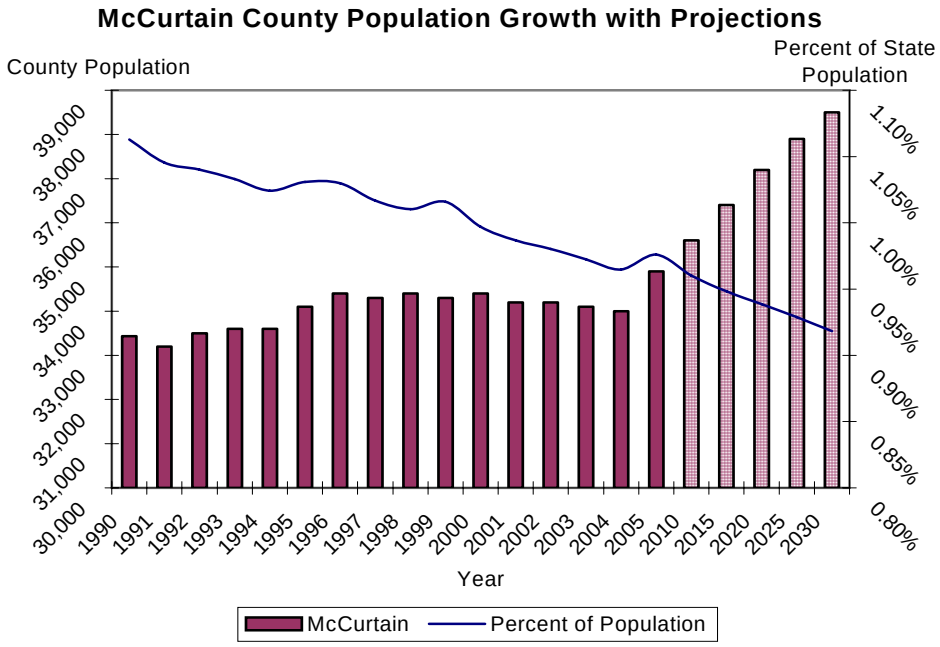
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% increase from 1990 to 2000 (33,433 to 34,402)
  - 1% decrease from 2000 to 2004
  - Ranked 51st for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 71%
  - Native Americans =14%
  - Blacks =9%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 14%
  - Median age = 36.0 years
- Housing units
  - Occupied = 13,216 (86%)
  - Vacant = 2,211 (14%)
- Disability (ages 21 to 64) = 27.5% national = 19.2% state = 21.5%
- Individuals below poverty = 24.7% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

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

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in McCurtain County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,565 people in McCurtain County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 126.9 deaths a year, heart disease accounts for almost $47 million a year in medical costs in McCurtain County.

Heart disease accounts for almost $47 million a year in medical costs in McCurtain

Alzheimer's disease and the complications associated with it have increased from the 18th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 325% increase in deaths.

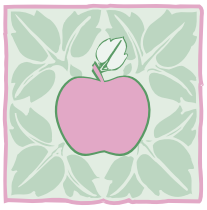
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 28.9% (9,828) of people in McCurtain County were considered obese which accounted for an additional $3,882,060 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

McCurtain County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 10	UNINTENT. INJURY 9	UNINTENT. INJURY 50	UNINTENT. INJURY 42	HEART DISEASE 37	HEART DISEASE 77	CANCER 176	HEART DISEASE 1130	HEART DISEASE 1396
2	PERINATAL PERIOD 9	HOMICIDE/ LEGAL 5	HOMICIDE/ LEGAL 18	HOMICIDE/ LEGAL 19	UNINTENT. INJURY 35	CANCER 63	HEART DISEASE 143	CANCER 610	CANCER 893
3	UNINTENT. INJURY 7	SUICIDE 3	SUICIDE 10	SUICIDE 7	CANCER 30	UNINTENT. INJURY 27	STROKE 25	STROKE 204	UNINTENT. INJURY 263
4	SIDS 4	OTHER 1	OTHER 4	HEART DISEASE 4	SUICIDE 16	STROKE 17	BRONCHITIS EMPHYSEMA/ ASTHMA 24	BRONCHITIS EMPHYSEMA/ ASTHMA 193	STROKE 255
5	STROKE 2			CANCER 4	HOMICIDE/ LEGAL 13	DIABETES MELLITUS 12	UNINTENT. INJURY 24	DIABETES MELLITUS 109	BRONCHITIS EMPHYSEMA/ ASTHMA 231
6	HEART DISEASE 2			STROKE 2	DIABETES MELLITUS 7	HOMICIDE/ LEGAL 11	DIABETES MELLITUS 20	INFLUENZA/ PNEUMONIA 107	DIABETES MELLITUS 148
7	CANCER 2			HIV 2	STROKE 5	LIVER DISEASE 11	LIVER DISEASE 17	UNINTENT. INJURY 69	INFLUENZA/ PNEUMONIA 117
8	ANEMIA 1			ACUTE BRONCHITIS 1	LIVER DISEASE 4	BRONCHITIS EMPHYSEMA/ ASTHMA 10	HOMICIDE/ LEGAL 6	SEPTICEMIA (BLOOD POISONING) 61	HOMICIDE/ LEGAL 73
	HERNIA 1			COMPLICATED PREGNANCY 1	BRONCHITIS EMPHYSEMA/ ASTHMA 2	SUICIDE 9	INFLUENZA/ PNEUMONIA 4	KIDNEY DISEASE 46	SEPTICEMIA (BLOOD POISONING) 69
10	FOUR CAUSES TIED 1			KIDNEY DISEASE 1	INFLUENZA/ PNEUMONIA 2	HYPERTENSION 4	SEPTICEMIA (BLOOD POISONING) 4	HYPERTENSION 37	SUICIDE 55

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

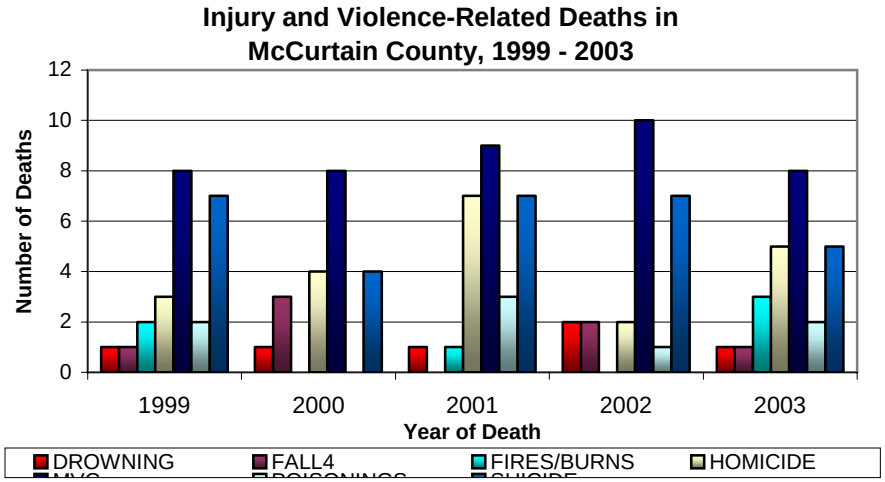
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in McCurtain County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For McCurtain County which has an average of 8.6 motor vehicle-related deaths a year, that translates to almost $10 million a year.

Violence-related injuries (homicide and suicide) in McCurtain County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 25.7% (8,740) of people in McCurtain County use tobacco of some sort. Medical costs accumulated by those persons are almost $29 million a year for McCurtain County.

*"Medical costs accumulated by those persons are almost **$29 million a year** for McCurtain County"*

Physical Activity, Wellness and Diabetes

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The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 39.7% (13,500) of people in McCurtain County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.1% (2,074) of McCurtain County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $27,465,982.00 in one year for McCurtain County.

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Teen Pregnancy

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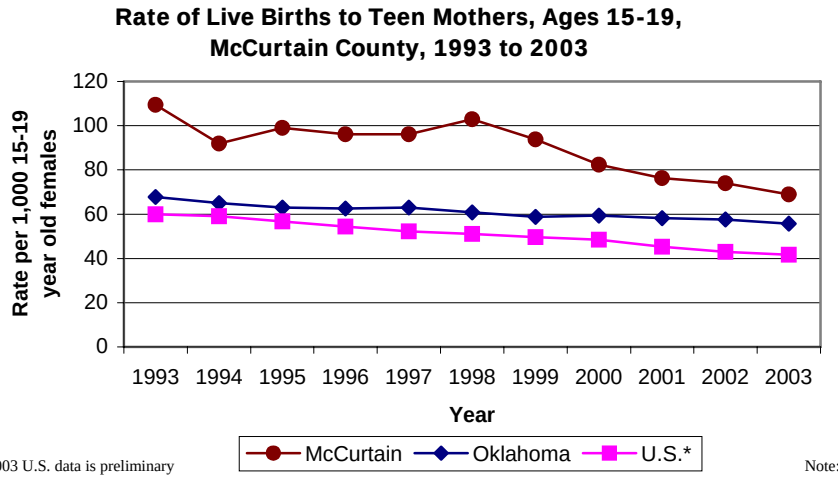
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, McCurtain County had a teen birth rate of 68.9 in 2003 which was a 7% decrease from 2002 (74) and a 37% decrease since 1993 (109.4).

With an average of 116 births per year, teen pregnancy costs the citizens of McCurtain County $371,200.00 a year.

Note: 23 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 24.7% of persons in McCurtain County for whom poverty status was known had an income below what was needed to live at the federal poverty level. McCurtain County is 68% above the state (14.7%) and 99% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, McCurtain County, 2000 Census

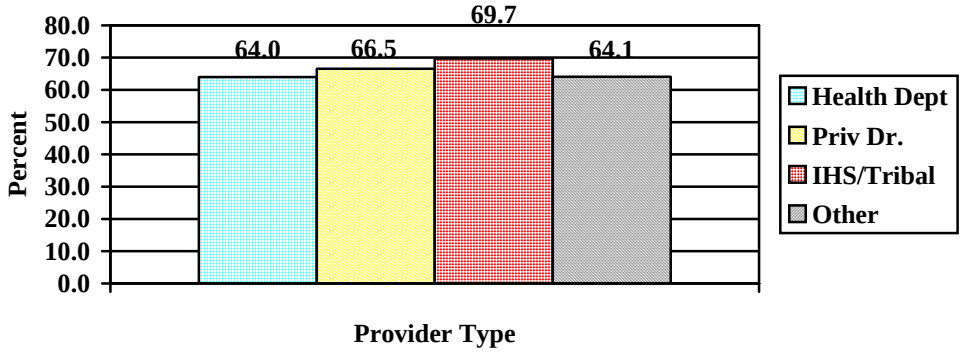
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	33,786	2,952	5,403	5,282	4,332	15,817
Cumulative Population		2,952	8,355	13,637	17,969	33,786
% of Total	100.0%	8.7%	16.0%	15.6%	12.8%	46.8%
Cumulative %		8.7%	24.7%	40.4%	53.2%	100.0%

OK By One - State Immunization Data

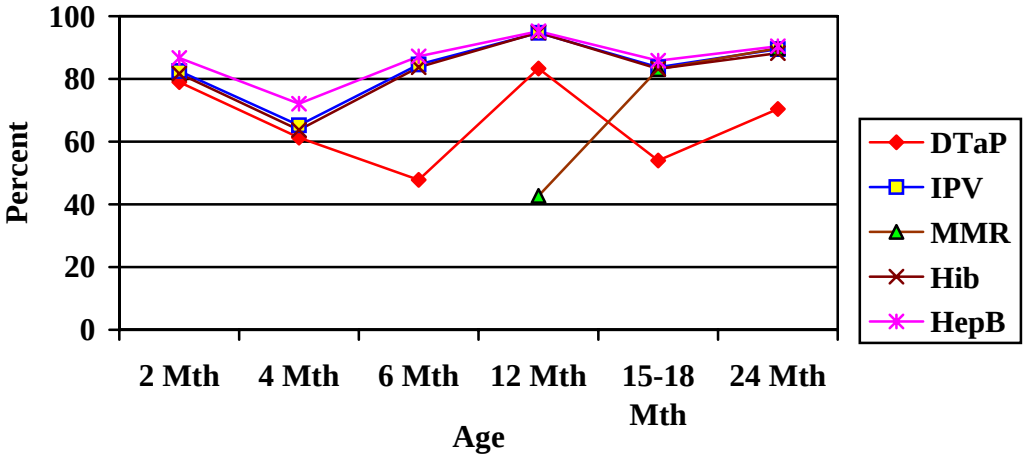
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

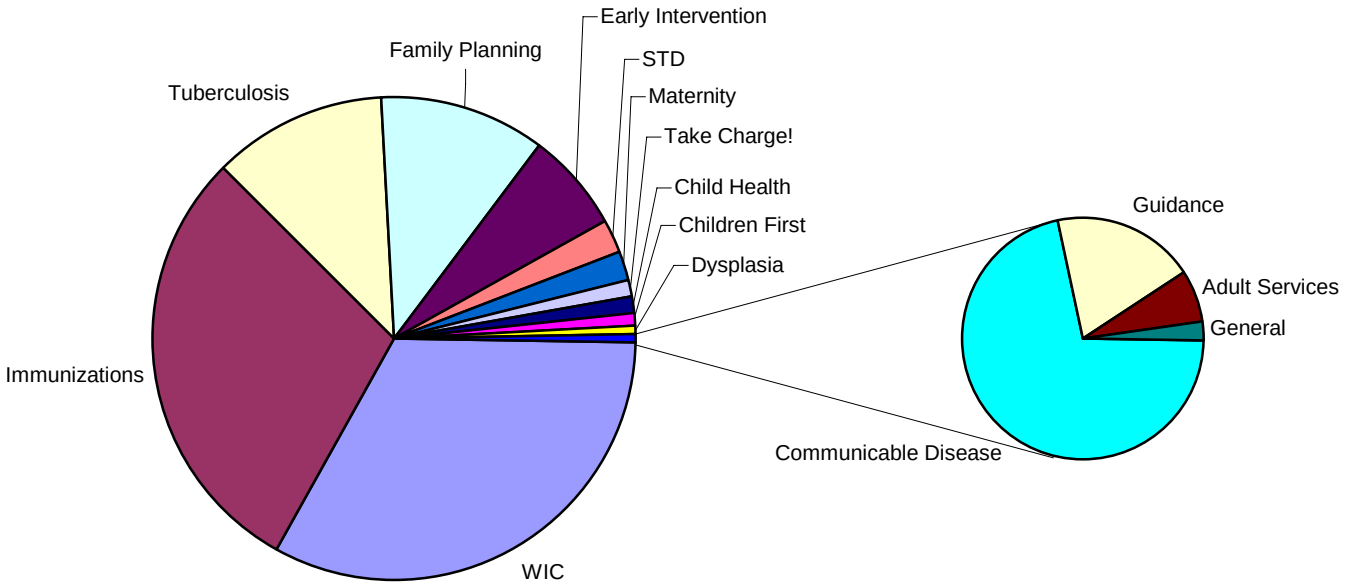


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for McCurtain County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 127 deaths a year
- $369,476.69 per death
- Total— $46,923,539.63 a year

Obesity

- 28.9% of population (9,828)
- $395.00 in additional medical costs per person
- Total—$3,882,060.00

Motor Vehicle-Related Injury Death

- Average 8.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$9,632,000.00 a year

Tobacco Use

- 25.7% of population (8,740)
- $3,300.00 in health care costs
- Total - $28,842,000.00 a year

Diabetes

- 6.1% of population (2,074)
- $13,243.00 in healthcare costs a year
- Total—$27,465,982.00 a year

Teen Pregnancy

- Average of 116 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $371,200.00 a year

Grand Total for McCurtain County:

$117,116,781.63

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Room 508
Oklahoma City, OK 73117
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McCurtain County Health Department
1400 Lynn Lane
Idabel, OK 74745
580-286-6620

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
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Kelly Baker, MPH
Health Care Information Systems, OSDH

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McCurtain County Coalition For Change

We want to say Thank You to the members of the Coalition For Change in McCurtain County. You are doing a wonderful job!

- Area Prevention Resource Center (APRC)
- Choctaw Nation of Oklahoma
- City of Idabel
- Idabel Minority Action Committee (IMAC)
- Little Dixie Community Action Agency
- McCurtain County Health Department
- McCurtain County Hospital
- McCurtain County Interlocal Cooperative/McCare
- McCurtain County Sheriff Department
- Oklahoma State Department of Health Turning Point staff
- Oklahoma State Department of Human Services
- Oklahoma State University Cooperative Extension Service
- Others
- Six School Districts

OKLAHOMA STATE DEPARTMENT OF HEALTH

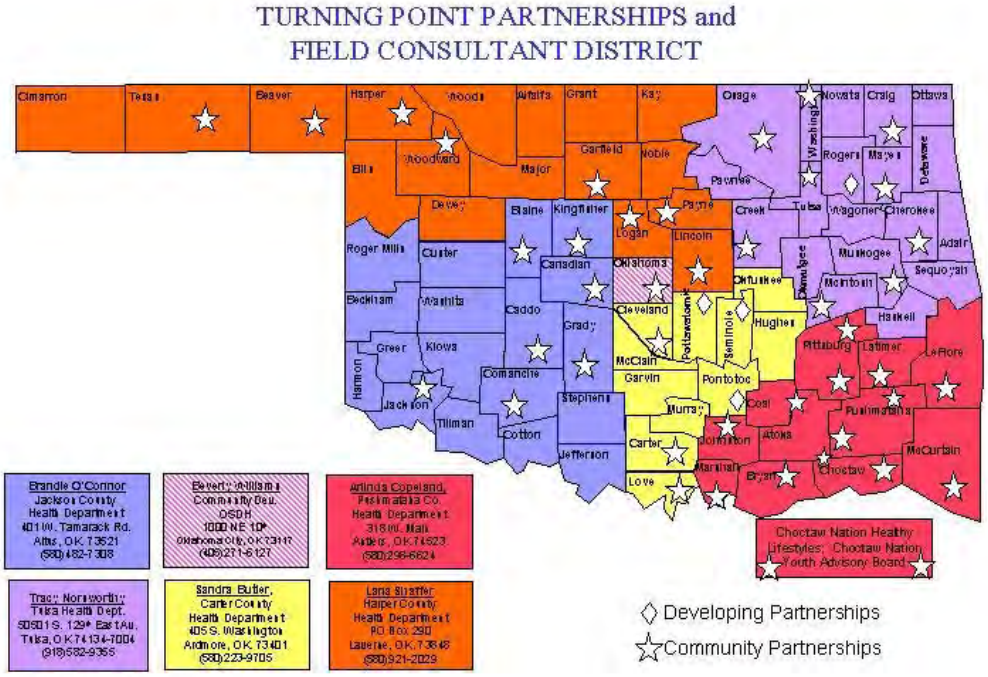
State of the County's Health Report

A Look Back To Move Forward

McIntosh County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of McIntosh County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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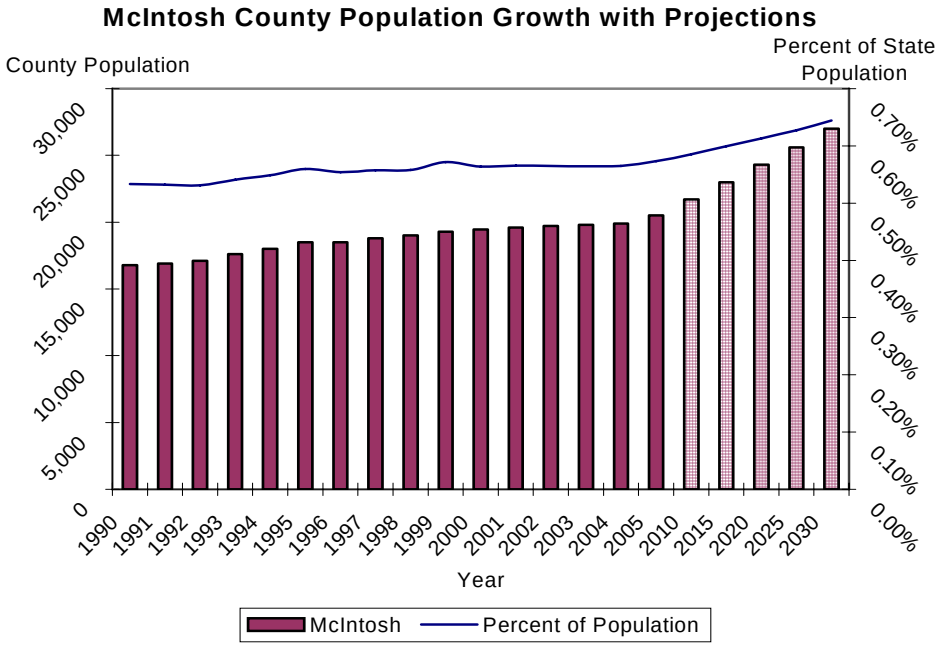
Demographics

** U.S. Census Bureau*

- Population estimates
  - 16% increase from 1990 to 2000 (16,779 to 19,456)
  - 2% increase from 2000 to 2004
  - Ranked 19th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 1%
- Race
  - Whites = 73%
  - Native Americans =16%
  - Blacks =4%
  - Other/Multiple = 7%
- Age
  - Under 5 = 5%
  - Over 64 = 22%
  - Median age = 44.1 years
- Housing units
  - Occupied = 8,085 (64%)
  - Vacant = 4,555 (36%)
- Disability (ages 21 to 64) = 29.1% national = 19.2% state = 21.5%
- Individuals below poverty = 18.2% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in McIntosh County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,014 people in McIntosh County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 105.7 deaths a year, heart disease accounts for over $39 million a year in medical costs in McIntosh County.

Heart disease accounts for over $39 million a year in medical costs in McIntosh County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 75% increase in deaths.

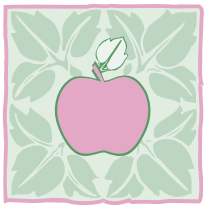
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 22.8% (4,500) of people in McIntosh County were considered obese which accounted for an additional $1,777,500 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

McIntosh County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 12	UNINTENT. INJURY 3	UNINTENT. INJURY 18	UNINTENT. INJURY 15	UNINTENT. INJURY 14	HEART DISEASE 54	CANCER 120	HEART DISEASE 979	HEART DISEASE 1163
2	UNINTENT. INJURY 4		SUICIDE 3	SUICIDE 9	HEART DISEASE 13	CANCER 40	HEART DISEASE 112	CANCER 468	CANCER 640
3	CONGENITAL ANOMALIES 3		CONGENITAL ANOMALIES 2	CANCER 5	HOMICIDE/ LEGAL 10	UNINTENT. INJURY 11	BRONCHITIS EMPHYSEMA/ ASTHMA 20	BRONCHITIS EMPHYSEMA/ ASTHMA 152	BRONCHITIS EMPHYSEMA/ ASTHMA 175
4	SIDS 3		ANEMIA 1	HEART DISEASE 5	SUICIDE 8	SUICIDE 9	UNINTENT. INJURY 16	INFLUENZA/ PNEUMONIA 138	STROKE 152
5	INFLUENZA/ PNEUMONIA 2		INFLUENZA/ PNEUMONIA 1	HIV 3	CANCER 6	LIVER DISEASE 8	STROKE 15	STROKE 128	INFLUENZA/ PNEUMONIA 150
6	HERNIA 1		CANCER 1	HOMICIDE/ LEGAL 2	STROKE 4	INFLUENZA/ PNEUMONIA 5	LIVER DISEASE 10	UNINTENT. INJURY 43	UNINTENT. INJURY 124
7	KIDNEY DISEASE 1		OTHER 1	BRONCHITIS EMPHYSEMA/ ASTHMA 1	LIVER DISEASE 4	DIABETES MELLITUS 4	DIABETES MELLITUS 8	KIDNEY DISEASE 39	DIABETES MELLITUS 50
8	SEPTICEMIA (BLOOD POISONING) 1			STROKE 1	HIV 3	STROKE 3	KIDNEY DISEASE 6	DIABETES MELLITUS 36	KIDNEY DISEASE 49
	OTHER 3			DIABETES MELLITUS 1	CONGENITAL ANOMALIES 2	BRONCHITIS EMPHYSEMA/ ASTHMA 2	INFLUENZA/ PNEUMONIA 4	SEPTICEMIA (BLOOD POISONING) 27	SUICIDE 43
10				KIDNEY DISEASE 1	DIABETES MELLITUS 1	HIV 2	SEPTICEMIA (BLOOD POISONING) 4	ALZHEIMER'S DISEASE 21	LIVER DISEASE 35

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

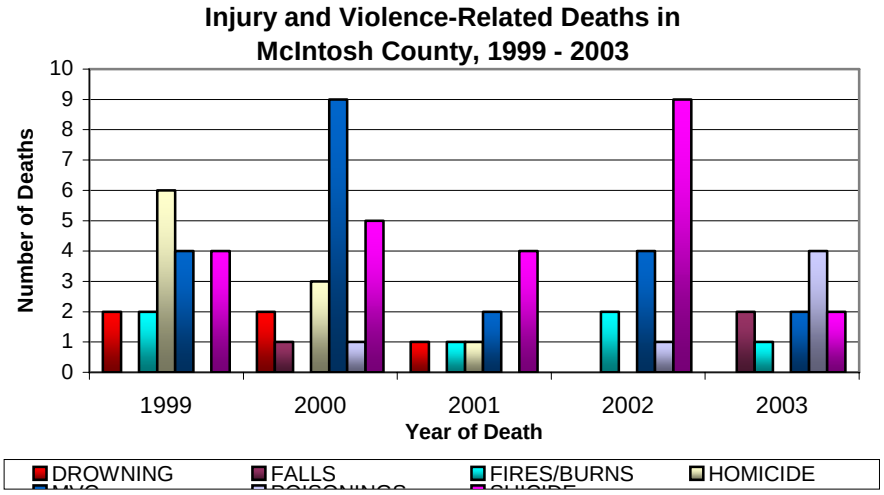
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in McIntosh County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For McIntosh County which has an average of 4.2 motor vehicle-related deaths a year, that translates to almost $5 million a year.

Violence-related injuries (homicide and suicide) in McIntosh County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 30.2% (5,960) of people in McIntosh County use tobacco of some sort. Medical costs accumulated by those persons are almost $20 million a year for McIntosh County.

*"Medical costs accumulated by those persons are almost **$20 million a year** for McIntosh County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 36.8% (7,262) of people in McIntosh County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.2% (2,013) of McIntosh County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $26,658,159.00 in one year for McIntosh County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

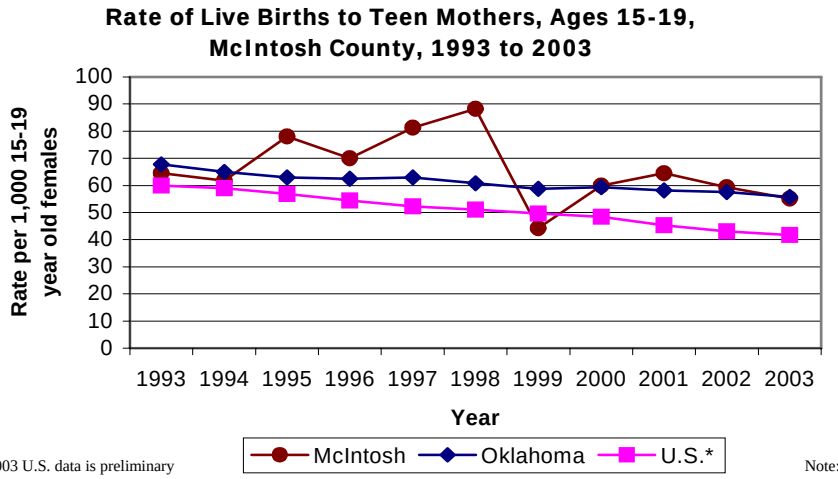
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, McIntosh County had a teen birth rate of 55.2 in 2003 which was a 7% decrease from 2002 (59.4) and a 14% decrease since 1993 (64.5).

With an average of 41 births per year, teen pregnancy costs the citizens of McIntosh County $131,200.00 a year.



*2003 U.S. data is preliminary

Note: 6 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 18.2% of persons in McIntosh County for whom poverty status was known had an income below what was needed to live at the federal poverty level. McIntosh County is 24% above the state (14.7%) and 47% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, McIntosh County, 2000 Census

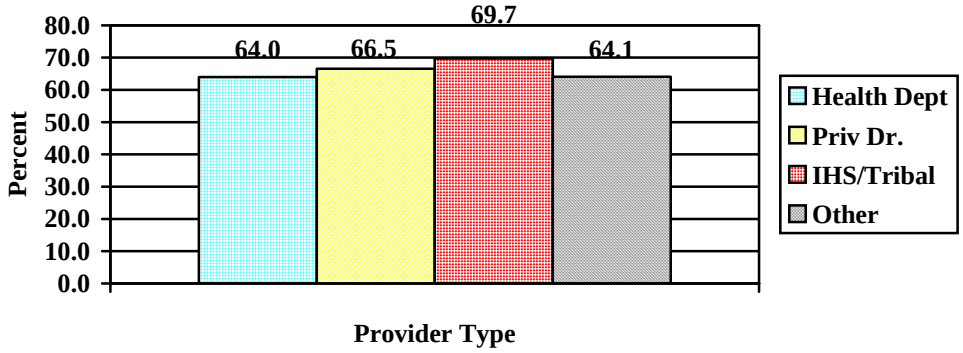
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	19,026	1,336	2,123	2,644	2,562	10,361
Cumulative Population		1,336	3,459	6,103	8,665	19,026
% of Total	100.0%	7.0%	11.2%	13.9%	13.5%	54.5%
Cumulative %		7.0%	18.2%	32.1%	45.5%	100.0%

OK By One - State Immunization Data

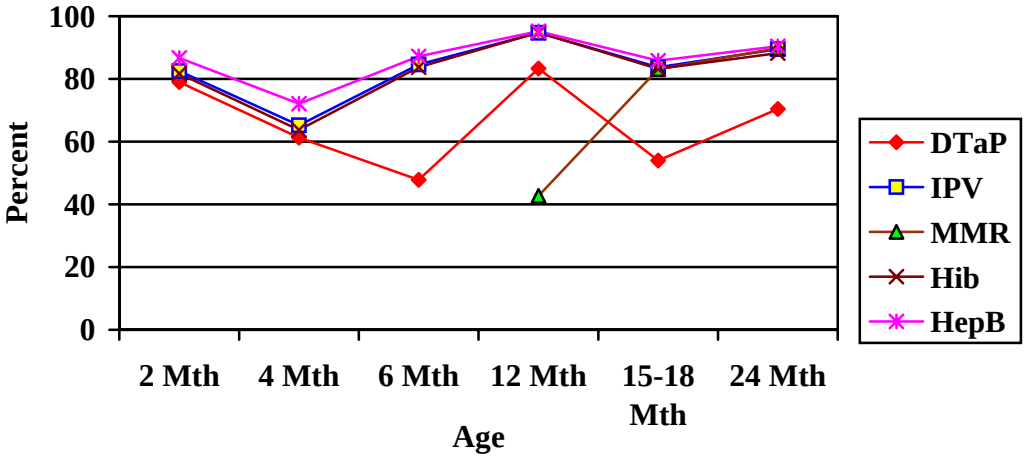
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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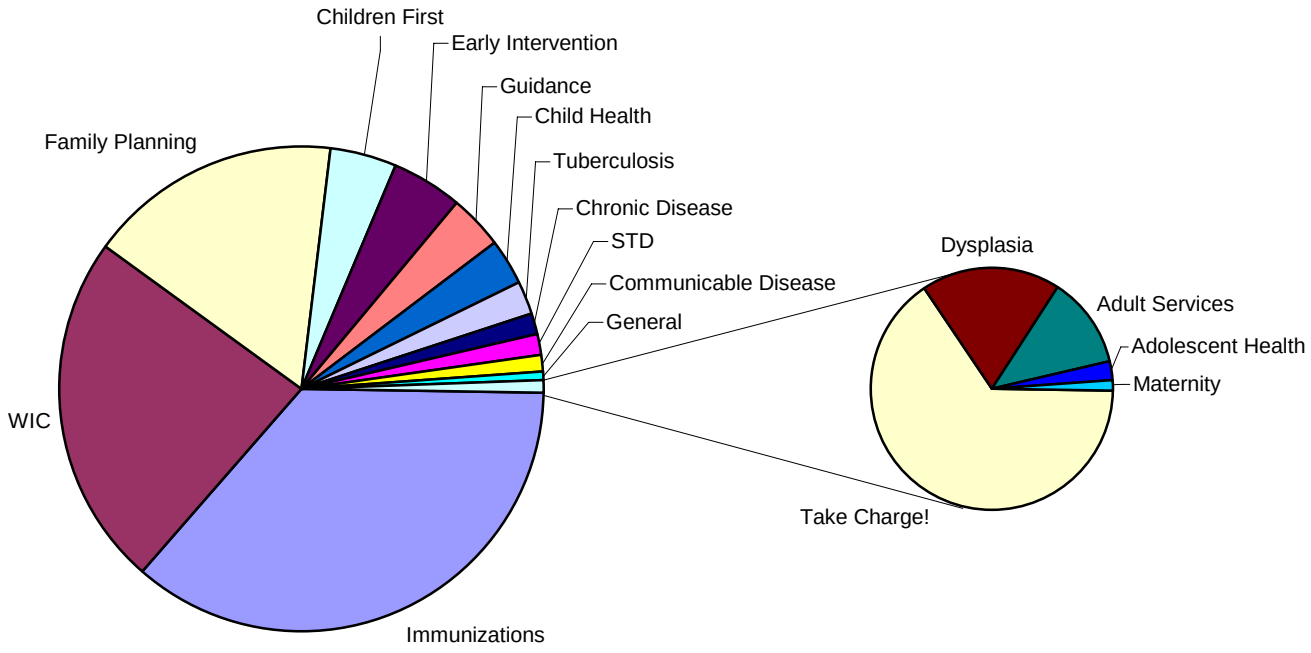

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 106 deaths a year
- $369,476.69 per death
- Total— $39,164,529.14 a year

Obesity

- 22.8% of population (4,500)
- $395.00 in additional medical costs per person
- Total—$1,777,500.00

Motor Vehicle-Related Injury Death

- Average 4.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,704,000.00 a year

Tobacco Use

- 30.2% of population (5,960)
- $3,300.00 in health care costs
- Total - $19,668,000.00 a year

Diabetes

- 10.2% of population (2,013)
- $13,243.00 in healthcare costs a year
- Total—$26,658,159.00 a year

Teen Pregnancy

- Average of 41 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $131,200.00 a year

Grand Total for McIntosh County:

$92,103,388.14

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Room 508
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211 W. Gentry
Checotah, OK 74426
918-473-5416

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McIntosh County Coalition for a Healthy Community

We want to say Thank You to the members of the McIntosh County Coalition for a Healthy Community. You are doing a wonderful job!

- Juvenile Services
- OCCY
- Community Youth
- County Public Schools
- P.A.R.B.
- DHS
- McIntosh County Health Department

OKLAHOMA STATE DEPARTMENT OF HEALTH

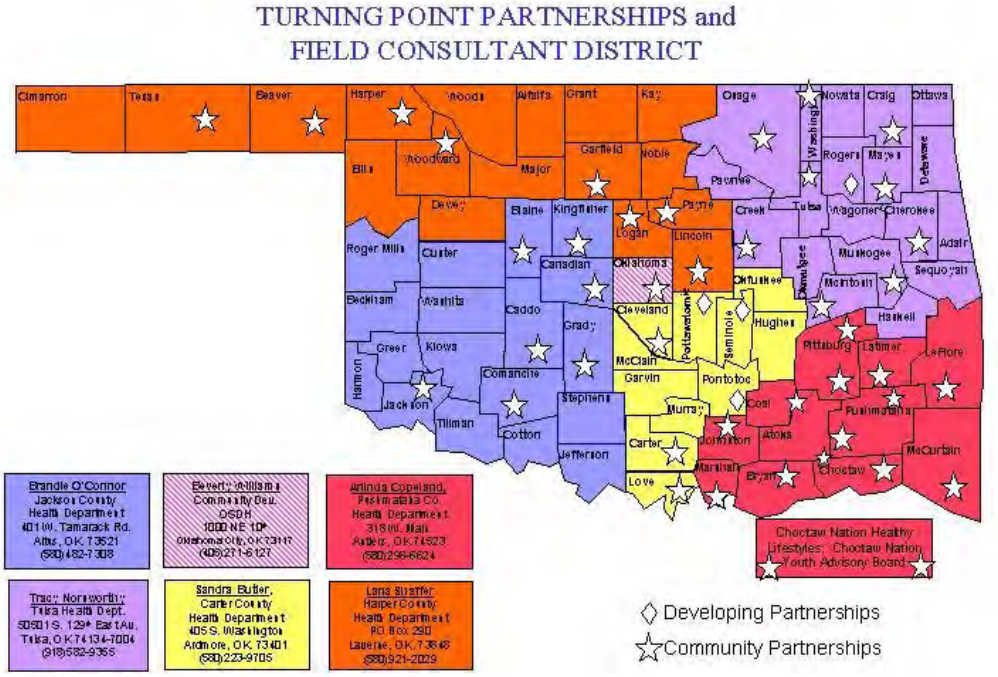
State of the County's Health Report

A Look Back To Move Forward

Murray County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Murray County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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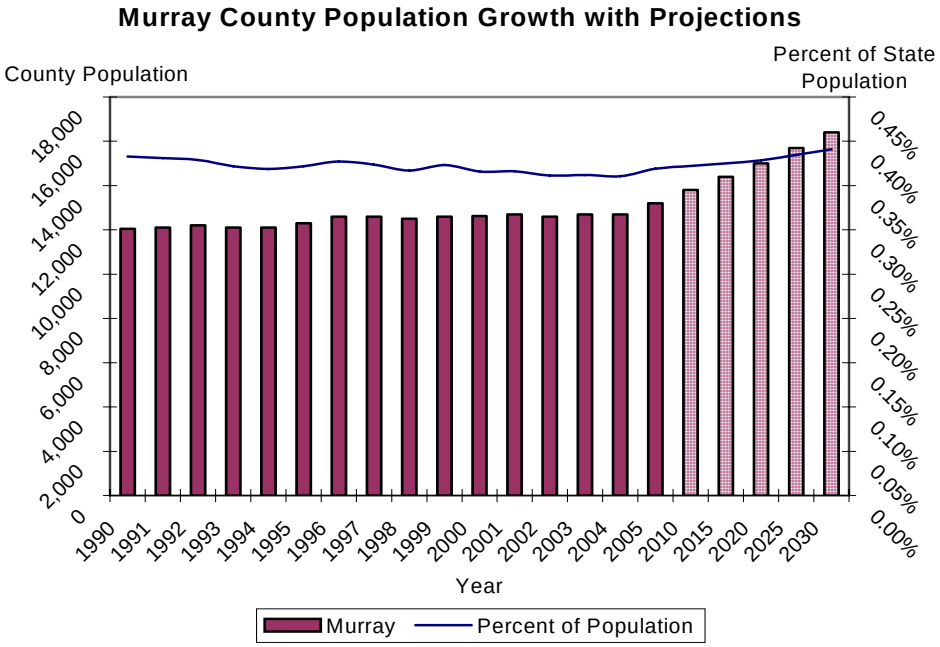
Demographics

- Population estimates
  - 5% increase from 1990 to 2000 (12,042 to 12,623)
  - 1% increase from 2000 to 2004
  - Ranked 36th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 81%
  - Native Americans =«Indian %»
  - Blacks =2%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 18%
  - Median age = 39.8 years
- Housing units
  - Occupied = 5,003 (77%)
  - Vacant = 1,476 (23%)
- Disability (ages 21 to 64) = 24.9% national = 19.2% state = 21.5%
- Individuals below poverty = 14.1% national = 12.4% state = 14.7%



* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Murray County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 721 people in Murray County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 66.8 deaths a year, heart disease accounts for almost $25 million a year in medical costs in Murray County.

Heart disease accounts for almost $25 million a year in medical costs in MurrayCounty.

Alzheimer's disease and the complications associated with it have increased from the 14th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 83% increase in deaths.

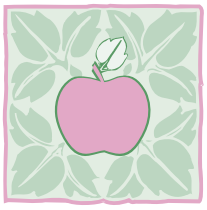
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 14.5% (1,844) of people in Murray County were considered obese which accounted for an additional $728,380 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Murray County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	SIDS 4	UNINTENT. INJURY 2	UNINTENT. INJURY 22	SUICIDE 9	UNINTENT. INJURY 12	HEART DISEASE 29	CANCER 77	HEART DISEASE 623	HEART DISEASE 735
2	UNINTENT. INJURY 4	SUICIDE 1	HOMICIDE/ LEGAL 1	UNINTENT. INJURY 6	CANCER 10	CANCER 25	HEART DISEASE 70	CANCER 295	CANCER 410
3	CONGENITAL ANOMALIES 3		SUICIDE 1	DIABETES MELLITUS 1	HEART DISEASE 10	SUICIDE 7	BRONCHITIS EMPHYSEMA/ ASTHMA 11	INFLUENZA/ PNEUMONIA 98	INFLUENZA/ PNEUMONIA 106
4	PERINATAL PERIOD 3		OTHER 2	HEART DISEASE 1	SUICIDE 3	LIVER DISEASE 6	LIVER DISEASE 9	STROKE 89	BRONCHITIS EMPHYSEMA/ ASTHMA 105
5	HEART DISEASE 2			HOMICIDE/ LEGAL 1	INFLUENZA/ PNEUMONIA 2	UNINTENT. INJURY 6	STROKE 8	BRONCHITIS EMPHYSEMA/ ASTHMA 88	STROKE 98
6	CANCER 2			SEPTICEMIA (BLOOD POISONING) 1	LIVER DISEASE 2	BRONCHITIS EMPHYSEMA/ ASTHMA 5	KIDNEY DISEASE 6	DIABETES MELLITUS 45	UNINTENT. INJURY 95
7	KIDNEY DISEASE 1				SEPTICEMIA (BLOOD POISONING) 2	CONGENITAL ANOMALIES 3	UNINTENT. INJURY 6	UNINTENT. INJURY 37	DIABETES MELLITUS 51
8	OTHER 1				BRONCHITIS EMPHYSEMA/ ASTHMA 1	INFLUENZA/ PNEUMONIA 2	INFLUENZA/ PNEUMONIA 4	KIDNEY DISEASE 26	KIDNEY DISEASE 34
					DIABETES MELLITUS 1	SEPTICEMIA (BLOOD POISONING) 2	SUICIDE 4	SEPTICEMIA (BLOOD POISONING) 26	SEPTICEMIA (BLOOD POISONING) 32
10					HIV 1	VIRAL HEPATITIS 2	DIABETES MELLITUS 3	PNEUMONITIS 14	SUICIDE 28

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

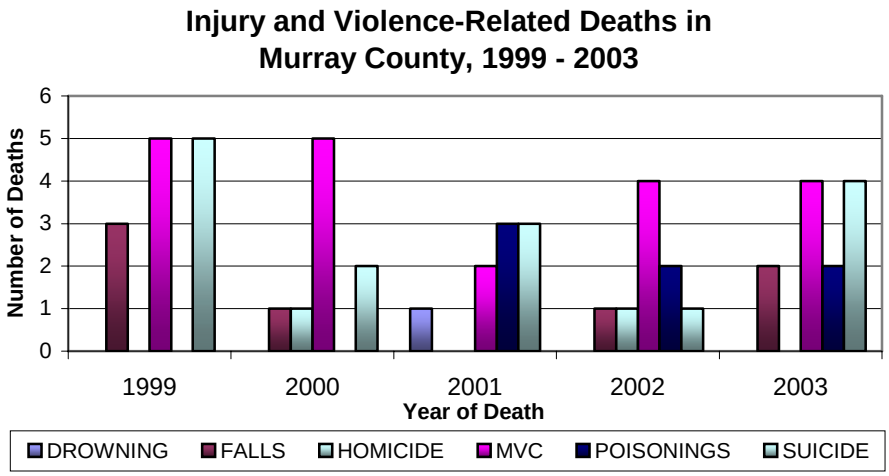
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Murray County. Unintentional injuries are the leading cause of death from ages 5 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Murray County which has an average of 4 motor vehicle-related deaths a year, that translates to over $4 million a year.

Violence-related injuries (homicide and suicide) in Murray County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 37.1% (4,718) of people in Murray County use tobacco of some sort. Medical costs accumulated by those persons are almost $16 million a year for Murray County.

> *"Medical costs accumulated by those persons are almost **$16 million a year** for Murray County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 25.2% (3,205) of people in Murray County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.6% (1,348) of Murray County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $17,851,564.00 in one year for Murray County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

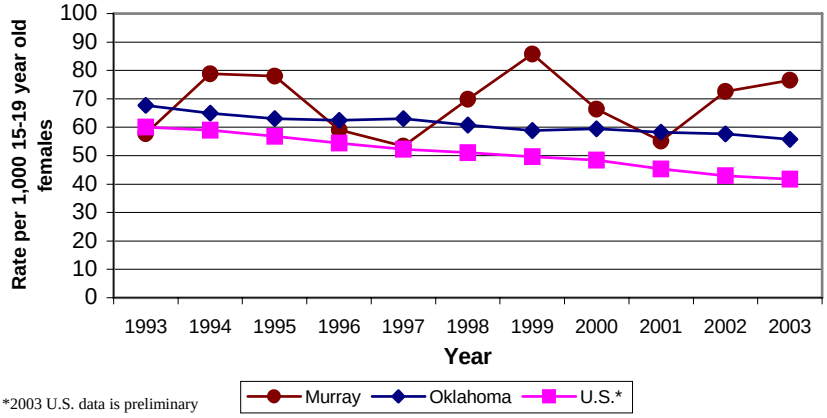
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Murray County had a teen birth rate of 76.5 in 2003 which was a 5% increase from 2002 (72.6) and a 32% increase since 1993 (57.8).

With an average of 30 births per year, teen pregnancy costs the citizens of Murray County $96,000.00 a year.

Rate of Live Births to Teen Mothers Ages 15-19, Murray County, 1993 to 2003



*2003 U.S. data is preliminary

Note: 4 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 14.1% of persons in Murray County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Murray County is 4% below the state (14.7%) and 14% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Murray County, 2000 Census

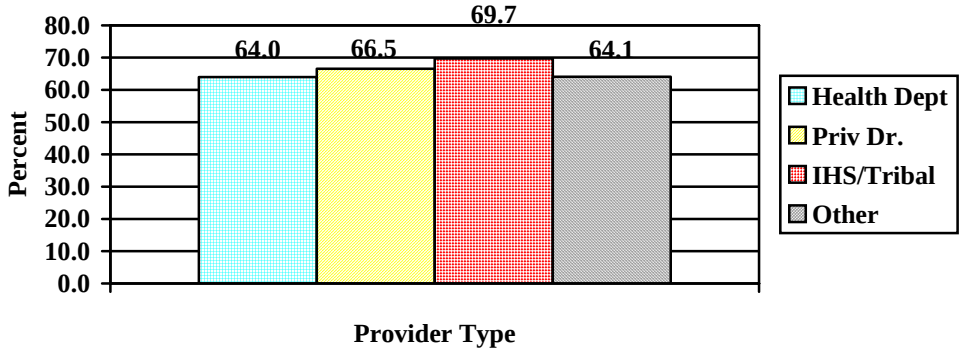
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	12,287	695	1,035	1,602	1,485	7,470
Cumulative Population		695	1,730	3,332	4,817	12,287
% of Total	100.0%	5.7%	8.4%	13.0%	12.1%	60.8%
Cumulative %		5.7%	14.1%	27.1%	39.2%	100.0%

OK By One - State Immunization Data

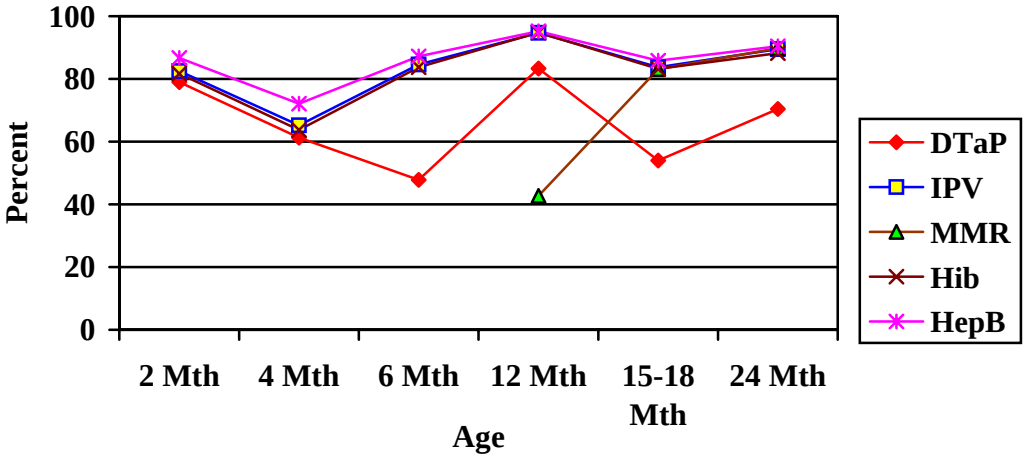
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

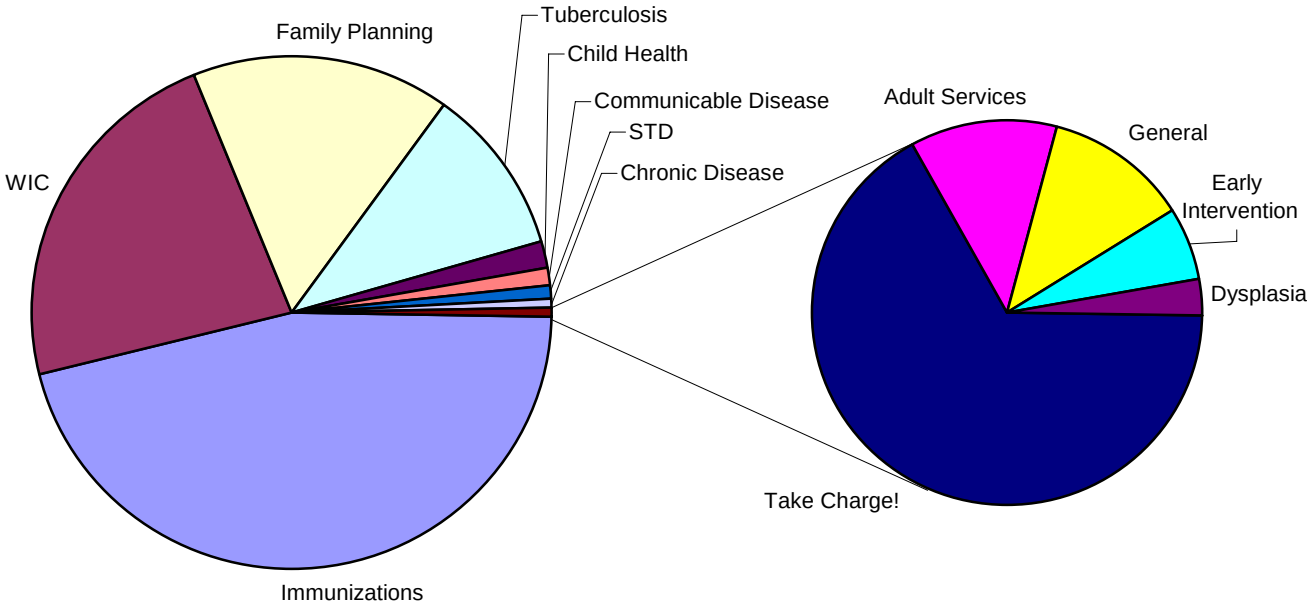


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for Murray County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 67 deaths a year
- $369,476.69 per death
- Total— $24,754,938.23 a year

Obesity

- 14.5% of population (1,844)
- $395.00 in additional medical costs per person
- Total—$728,380.00

Motor Vehicle-Related Injury Death

- Average 4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,480,000.00 a year

Tobacco Use

- 37.1% of population (4,718)
- $3,300.00 in health care costs
- Total—$15,569,400.00 a year

Diabetes

- 10.6% of population (1,348)
- $13,243.00 in healthcare costs a year
- Total—$17,851,564.00 a year

Teen Pregnancy

- Average of 30 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $96,000.00 a year

Grand Total for Murray County:

$63,480,282.23

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Murray County Health Department
730 Cambridge Drive
Sulphur, OK 73086
580-622-3716

A Look Back
To Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma
Turning
POINT

Oklahoma Community Partners
in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

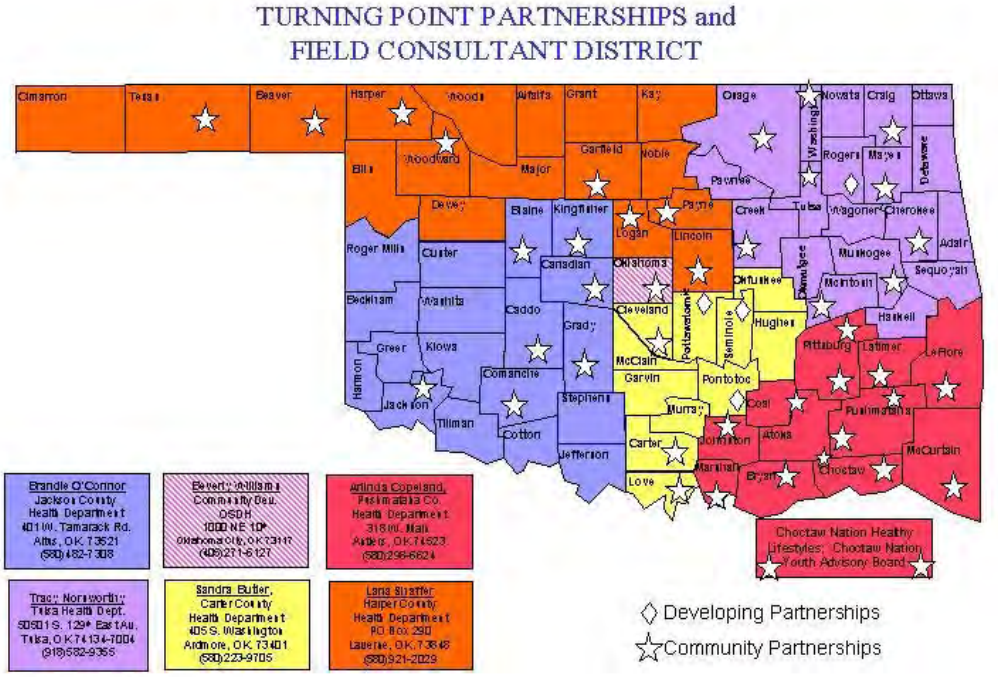
State of the County's Health Report

A Look Back To Move Forward

Muskogee County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Muskogee County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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Top 10 Leading Causes of Death Table	3
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Tobacco use	4
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County Health Department Usage	7
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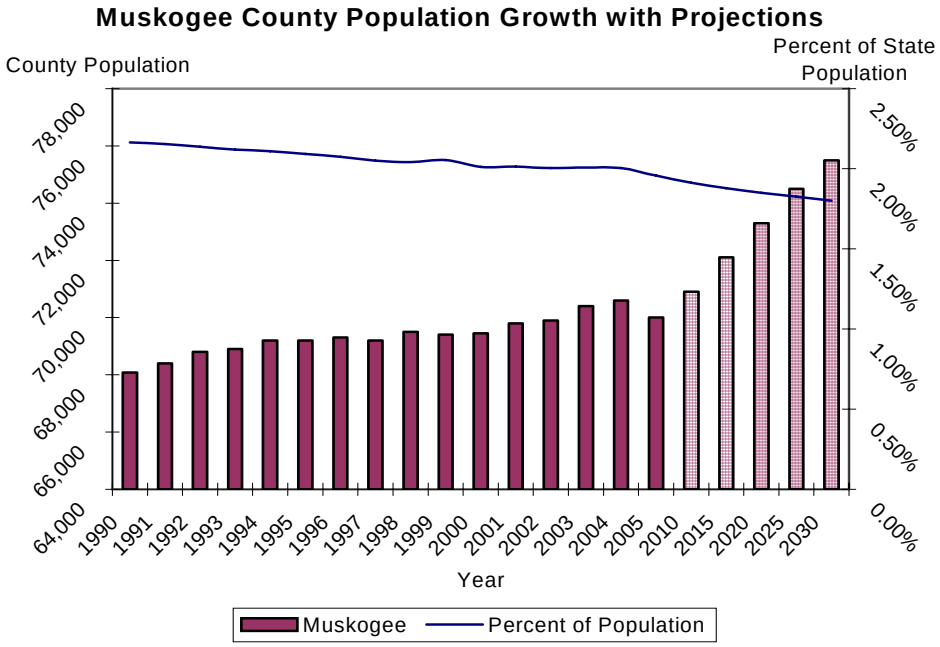
Demographics

** U.S. Census Bureau*

- Population estimates
  - 2% increase from 1990 to 2000 (68,078 to 69,451)
  - 2% increase from 2000 to 2004
  - Ranked 26th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 64%
  - Native Americans =15%
  - Blacks =13%
  - Other/Multiple = 8%
- Age
  - Under 5 = 7%
  - Over 64 = 15%
  - Median age = 37.0 years
- Housing units
  - Occupied = 26,458 (89%)
  - Vacant = 3,117 (11%)
- Disability (ages 21 to 64) = 27.1% national = 19.2% state = 21.5%
- Individuals below poverty = 17.9% national = 12.4% state = 14.7%



** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Muskogee County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 3,237 people in Muskogee County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 268.0 deaths a year, heart disease accounts for over $99 million a year in medical costs in Muskogee County.

Heart disease accounts for over $99 million a year in medical costs in Muskogee County.

Alzheimer's disease and the complications associated with it have increased from the 12th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 443% increase in deaths.

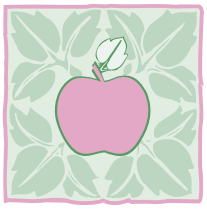
** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2001-2005, 27.9% (19,601) of people in Muskogee County were considered obese which accounted for an additional $7,742,395 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Muskogee County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 20	UNINTENT. INJURY 12	UNINTENT. INJURY 59	UNINTENT. INJURY 46	UNINTENT. INJURY 60	HEART DISEASE 160	CANCER 309	HEART DISEASE 2429	HEART DISEASE 2951
2	PERINATAL PERIOD 16	HOMICIDE/ LEGAL 3	HOMICIDE/ LEGAL 24	CANCER 22	CANCER 53	CANCER 122	HEART DISEASE 289	CANCER 1417	CANCER 1929
3	SIDS 14	BRONCHITIS EMPHYSEMA/ ASTHMA 2	SUICIDE 17	HOMICIDE/ LEGAL 21	HEART DISEASE 51	UNINTENT. INJURY 47	BRONCHITIS EMPHYSEMA/ ASTHMA 64	BRONCHITIS EMPHYSEMA/ ASTHMA 560	BRONCHITIS EMPHYSEMA/ ASTHMA 649
4	UNINTENT. INJURY 14	CANCER 2	HEART DISEASE 4	SUICIDE 14	SUICIDE 23	STROKE 22	UNINTENT. INJURY 34	STROKE 439	STROKE 501
5	SEPTICEMIA (BLOOD POISONING) 4	CONGENITAL ANOMALIES 1	CANCER 4	HEART DISEASE 12	HOMICIDE/ LEGAL 17	BRONCHITIS EMPHYSEMA/ ASTHMA 20	STROKE 24	INFLUENZA/ PNEUMONIA 380	INFLUENZA/ PNEUMONIA 419
6	HEART DISEASE 3	PERINATAL PERIOD 1	INFLUENZA/ PNEUMONIA 2	HIV 9	HIV 15	DIABETES MELLITUS 20	DIABETES MELLITUS 22	ATHERO-SCLEROSIS 196	UNINTENT. INJURY 385
7	HOMICIDE/ LEGAL 3	SUICIDE 1	ANEMIA 1	DIABETES MELLITUS 5	LIVER DISEASE 14	LIVER DISEASE 19	INFLUENZA/ PNEUMONIA 16	DIABETES MELLITUS 140	ATHERO-SCLEROSIS 203
8	INFLUENZA/ PNEUMONIA 2	OTHER 5	BRONCHITIS EMPHYSEMA/ ASTHMA 1	INFLUENZA/ PNEUMONIA 5	STROKE 12	INFLUENZA/ PNEUMONIA 12	LIVER DISEASE 12	ALZHEIMER'S DISEASE 125	DIABETES MELLITUS 199
	MENINGOCOC. INFECTION 2		DIABETES MELLITUS 1	STROKE 3	DIABETES MELLITUS 11	SUICIDE 10	KIDNEY DISEASE 12	UNINTENT. INJURY 113	ALZHEIMER'S DISEASE 127
10	ANEMIA 1		KIDNEY DISEASE 1	NON-CANCEROUS TUMOR 1	SEPTICEMIA (BLOOD POISONING) 5	HOMICIDE/ LEGAL 9	TWO CAUSES TIED 9	KIDNEY DISEASE 108	KIDNEY DISEASE 124

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

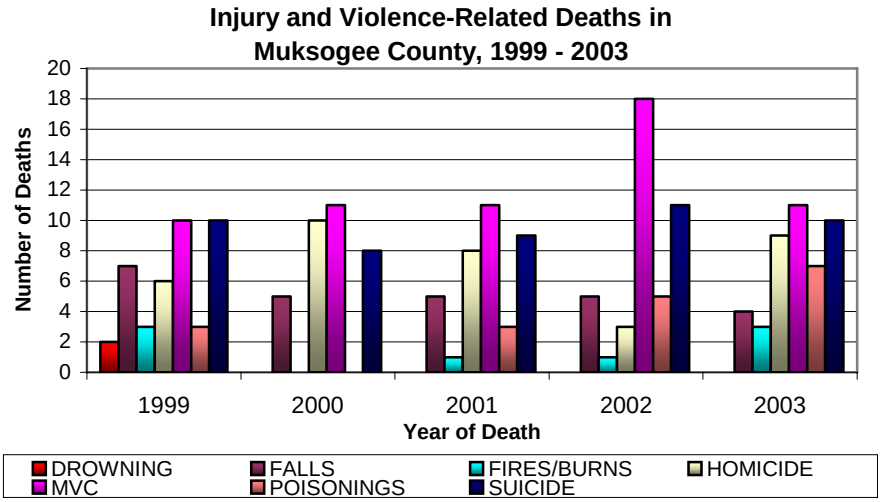
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Muskogee County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Muskogee County which has an average of 12.2 motor vehicle-related deaths a year, that translates to almost $14 million a year.

Violence-related injuries (homicide and suicide) in Muskogee County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 25.6% (1,7985) of people in Muskogee County use tobacco of some sort. Medical costs accumulated by those persons are over $59 million a year for Muskogee County.

> *"Medical costs accumulated by those persons are over **$59 million a year** for Muskogee County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 37.7% (26,486) of people in Muskogee County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 9.2% (6,463) of Muskogee County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $85,589,509.00 in one year for Muskogee County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

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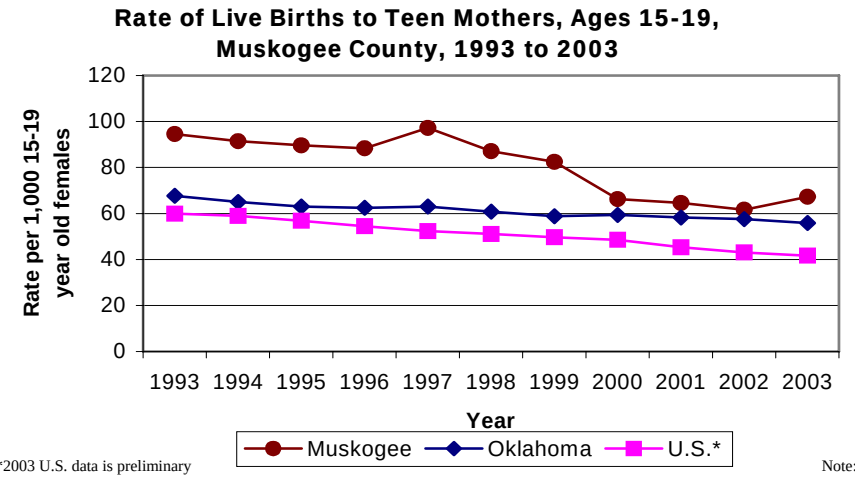
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 39 births to a mother 10-14 years of age occurred during the 11 year period.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Muskogee County had a teen birth rate of 67.3 in 2003 which was a 9% increase from 2002 (61.6) and a 29% decrease since 1993 (94.5).

With an average of 206 births per year, teen pregnancy costs the citizens of Muskogee County $659,200.00 a year.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 17.9% of persons in Muskogee County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Muskogee County is 22% above the state (14.7%) and 44% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Muskogee County, 2000 Census

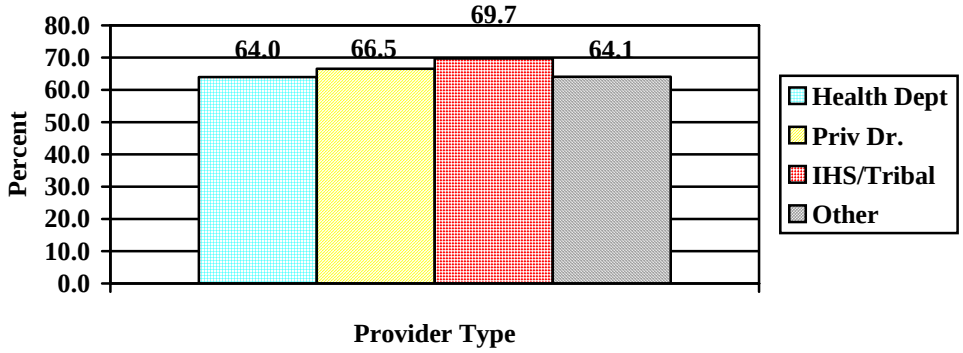
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	66,136	4,599	7,247	9,376	7,665	37,249
Cumulative Population		4,599	11,846	21,222	28,887	66,136
% of Total	100.0%	7.0%	11.0%	14.2%	11.6%	56.3%
Cumulative %		7.0%	17.9%	32.1%	43.7%	100.0%

OK By One - State Immunization Data

** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



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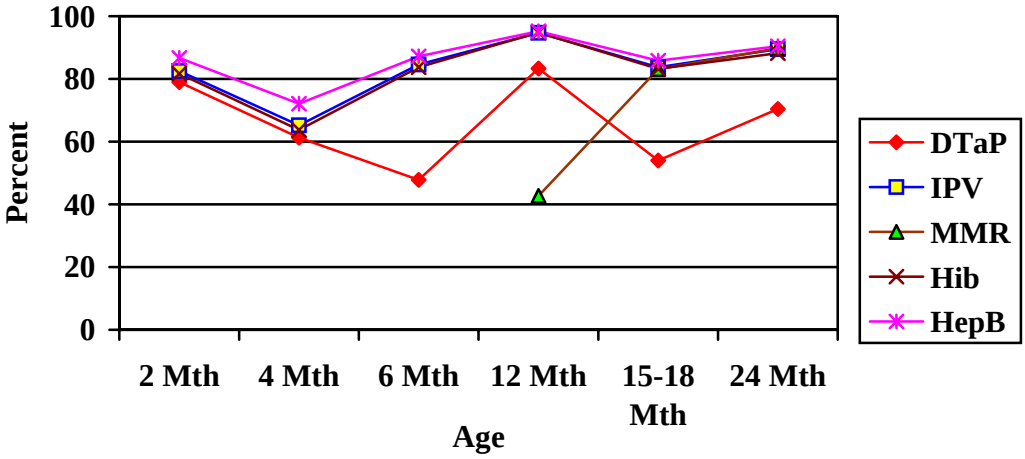

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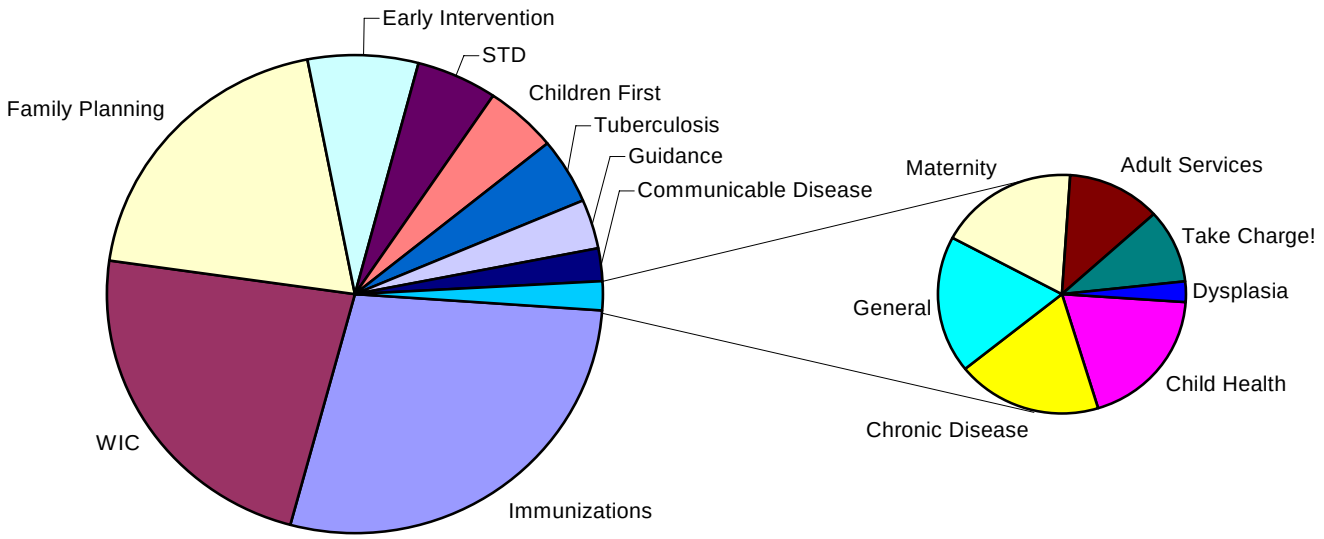
County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for Muskogee County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 268 deaths a year
- $369,476.69 per death
- Total— $99,019,752.92 a year

Obesity

- 27.9% of population (19,601)
- $395.00 in additional medical costs per person
- Total—$7,742,395.00

Motor Vehicle-Related Injury Death

- Average 12.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$13,664,000.00 a year

Tobacco Use

- 25.6% of population (1,7985)
- $3,300.00 in health care costs
- Total - $59,350,500.00 a year

Diabetes

- 9.2% of population (6,463)
- $13,243.00 in healthcare costs a year
- Total—$85,589,509.00 a year

Teen Pregnancy

- Average of 206 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $659,200.00 a year

Grand Total for Muskogee County:

$266,025,356.92

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Room 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
Email: miriamm@health.ok.gov

Muskogee County Health Department
530 South 34th St
Muskogee, OK 74401
918-683-0321

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Muskogee County Turning Point

We want to say Thank You to the members of the Muskogee County Turning Point Coalition. You are doing a wonderful job!

- Muskogee Parks & Recreation
- Muskogee County Health Department
- DHS
- Muskogee Regional Medical Center
- MCHB
- Cherokee Nation Muskogee Health Center
- ECOMAA
- APRC
- Haskell Public Schools
- Muskogee Public Schools
- Muskogee Phoenix

OKLAHOMA STATE DEPARTMENT OF HEALTH

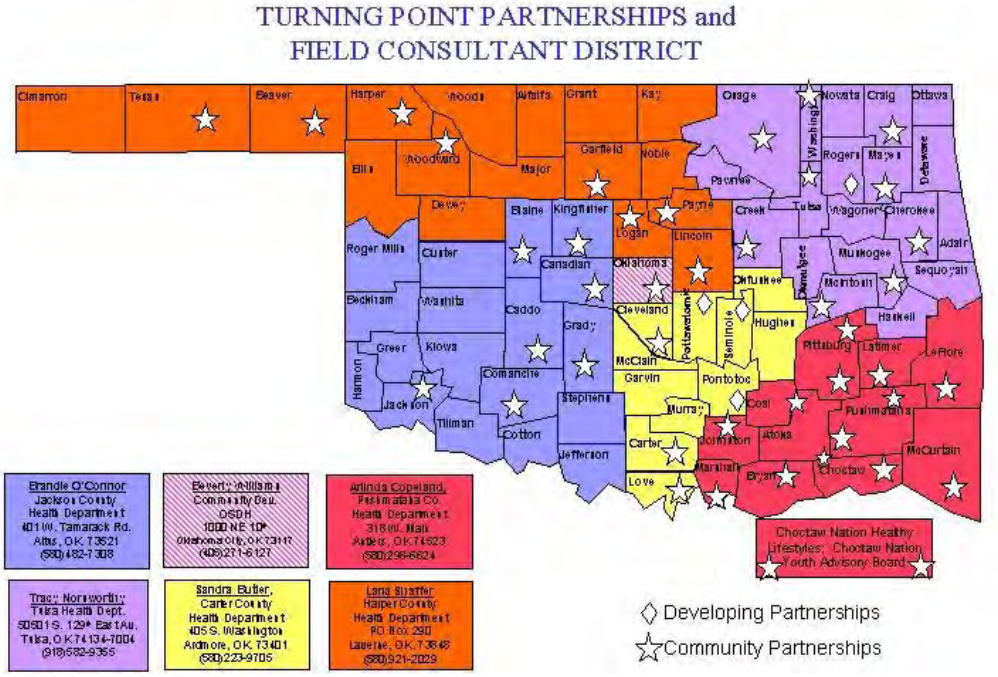
State of the County's Health Report

A Look Back To Move Forward

Noble County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Noble County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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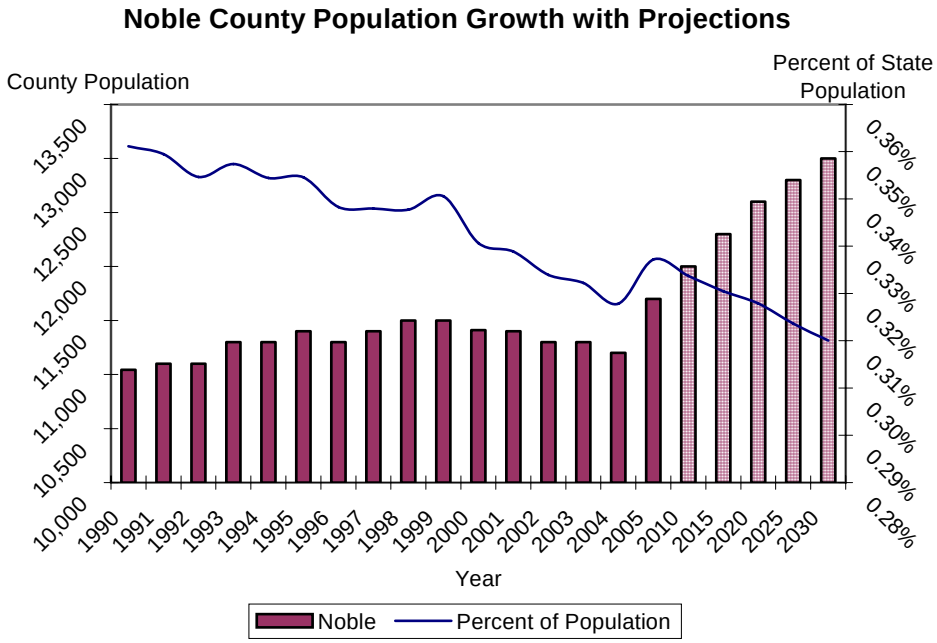
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% increase from 1990 to 2000 (11,045 to 11,411)
  - 2% decrease from 2000 to 2004
  - Ranked 55th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 86%
  - Native Americans =«Indian %»
  - Blacks =2%
  - Other/Multiple = 4%
- Age
  - Under 5 = 6%
  - Over 64 = 15%
  - Median age = 38.3 years
- Housing units
  - Occupied = 4,504 (89%)
  - Vacant = 578 (11%)
- Disability (ages 21 to 64) = 19.8% national = 19.2% state = 21.5%
- Individuals below poverty = 12.8% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Noble County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 618 people in Noble County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 42.8 deaths a year, heart disease accounts for almost $16 million a year in medical costs in Noble County.

Heart disease accounts for almost $16 million a year in medical costs in NobleCounty.

Alzheimer's disease and the complications associated with it have increased from the 15th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 425% increase in deaths.

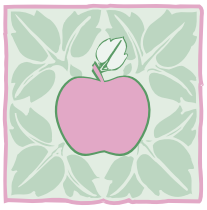
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 18.3% (2,059) of people in Noble County were considered obese which accounted for an additional $813,305 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Noble County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 6	UNINTENT. INJURY 3	UNINTENT. INJURY 6	UNINTENT. INJURY 9	UNINTENT. INJURY 10	HEART DISEASE 20	CANCER 54	HEART DISEASE 391	HEART DISEASE 471
2	HOMICIDE/ LEGAL 1	OTHER 1	SUICIDE 2	CANCER 3	HEART DISEASE 9	CANCER 20	HEART DISEASE 50	CANCER 221	CANCER 307
3	CANCER 1		HEART DISEASE 1	SUICIDE 3	CANCER 8	UNINTENT. INJURY 11	STROKE 6	STROKE 84	STROKE 93
4			HOMICIDE/ LEGAL 1	HIV 1	SUICIDE 6	LIVER DISEASE 5	BRONCHITIS EMPHYSEMA/ ASTHMA 5	INFLUENZA/ PNEUMONIA 67	UNINTENT. INJURY 75
5			OTHER 1	OTHER 3	HIV 2	STROKE 3	INFLUENZA/ PNEUMONIA 5	BRONCHITIS EMPHYSEMA/ ASTHMA 61	INFLUENZA/ PNEUMONIA 74
6					ANEMIA 1	DIABETES MELLITUS 3	LIVER DISEASE 5	DIABETES MELLITUS 36	BRONCHITIS EMPHYSEMA/ ASTHMA 69
7					BRONCHITIS EMPHYSEMA/ ASTHMA 1	HOMICIDE/ LEGAL 3	UNINTENT. INJURY 5	UNINTENT. INJURY 31	DIABETES MELLITUS 42
8					DIABETES MELLITUS 1	BRONCHITIS EMPHYSEMA/ ASTHMA 2	AORTIC ANEURYSM 2	KIDNEY DISEASE 28	KIDNEY DISEASE 29
					HOMICIDE/ LEGAL 1	INFLUENZA/ PNEUMONIA 2	ATHERO-SCLEROSIS 2	ALZHEIMER'S DISEASE 21	ALZHEIMER'S DISEASE 21
10					SEPTICEMIA (BLOOD POISONING) 1	TWO CAUSES TIED 1	TWO CAUSES TIED 2	PNEUMONITIS 9	LIVER DISEASE 16

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

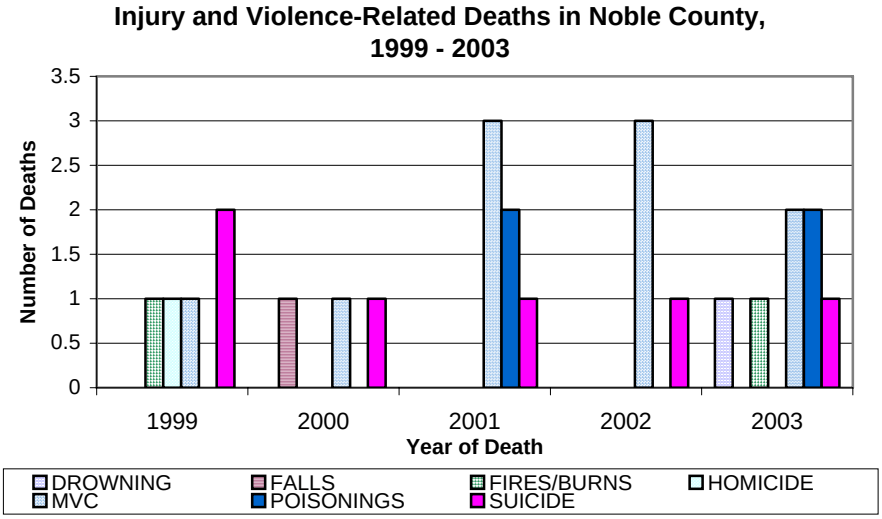
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Noble County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Noble County which has an average of 2 motor vehicle-related deaths a year, that translates to over $2 million a year.

Violence-related injuries (homicide and suicide) in Noble County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.7% (2,554) of people in Noble County use tobacco of some sort. Medical costs accumulated by those persons are over $8 million a year for Noble County.

*"Medical costs accumulated by those persons are over **$8 million a year** for Noble County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 33.8% (3,803) of people in Noble County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 5.5% (619) of Noble County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $8,197,417.00 in one year for Noble County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

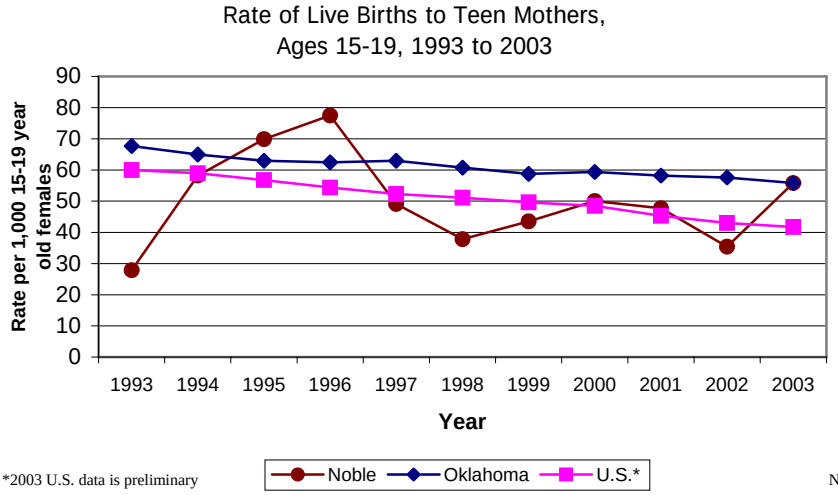
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Noble County had a teen birth rate of 55.8 in 2003 which was a 58% increase from 2002 (35.4) and a 100% increase since 1993 (27.9).

With an average of 19 births per year, teen pregnancy costs the citizens of Noble County $60,800.00 a year.



*2003 U.S. data is preliminary

Note: 2 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 12.8% of persons in Noble County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Noble County is 13% below the state (14.7%) and 3% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Noble County, 2000 Census

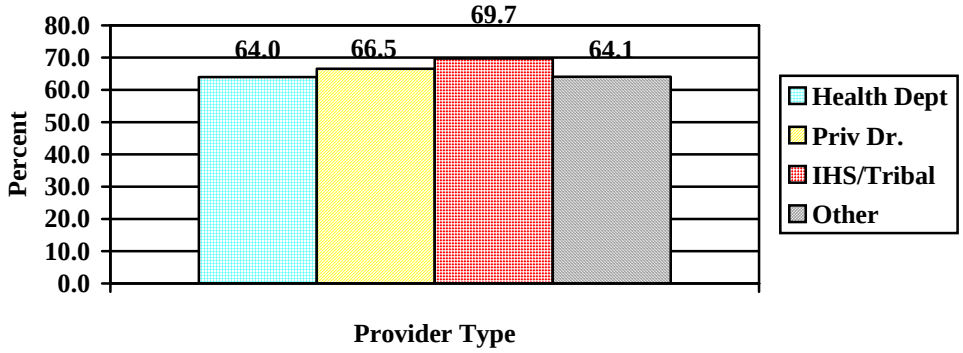
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	11,108	576	847	1,151	1,162	7,372
Cumulative Population		576	1,423	2,574	3,736	11,108
% of Total	100.0%	5.2%	7.6%	10.4%	10.5%	66.4%
Cumulative %		5.2%	12.8%	23.2%	33.6%	100.0%

OK By One - State Immunization Data

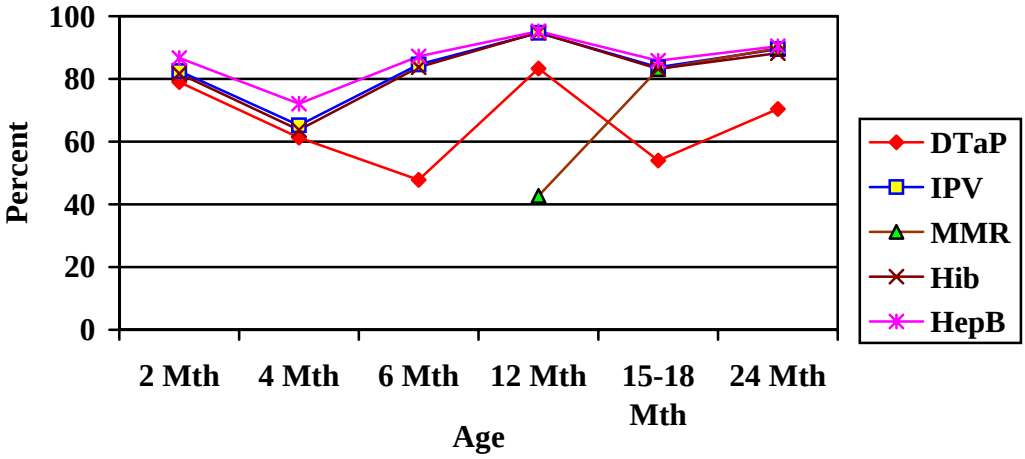
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



**Note: County level data will be available soon.

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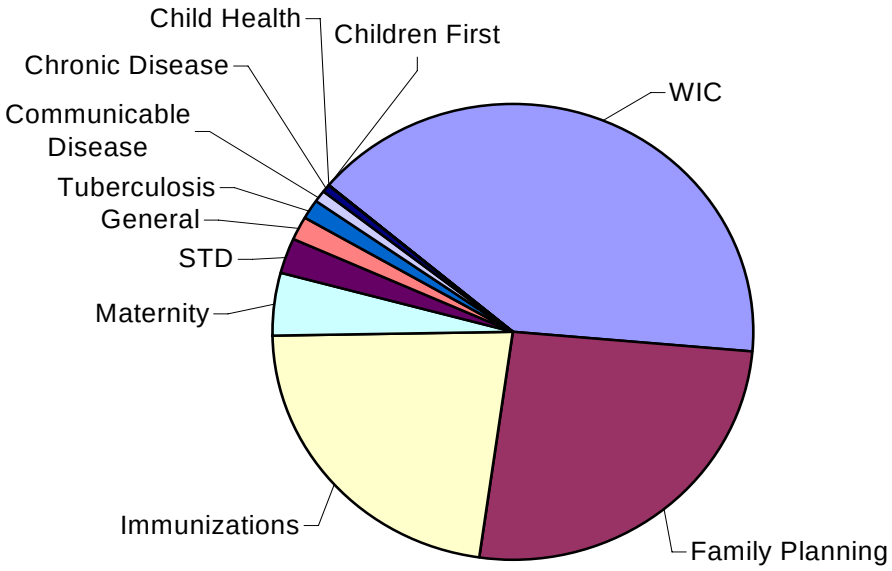
Attended Appointments for Noble County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 43 deaths a year
- $369,476.69 per death
- Total— $15,887,497.67 a year

Obesity

- 18.3% of population (2,059)
- $395.00 in additional medical costs per person
- Total—$813,305.00

Motor Vehicle-Related Injury Death

- Average 2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,240,000.00 a year

Tobacco Use

- 22.7% of population (2,554)
- $3,300.00 in health care costs
- Total—$8,428,200.00 a year

Diabetes

- 5.5% of population (619)
- $13,243.00 in healthcare costs a year
- Total—$8,197,417.00 a year

Teen Pregnancy

- Average of 19 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $60,800.00 a year

Grand Total for Noble County:

$35,627,219.67

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
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Email: neil@health.ok.gov

Noble County Health Department
300 E astFir St
Perry, Oklahoma 73077
580-336-2257

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Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

A Look Back To Move Forward

Nowata County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

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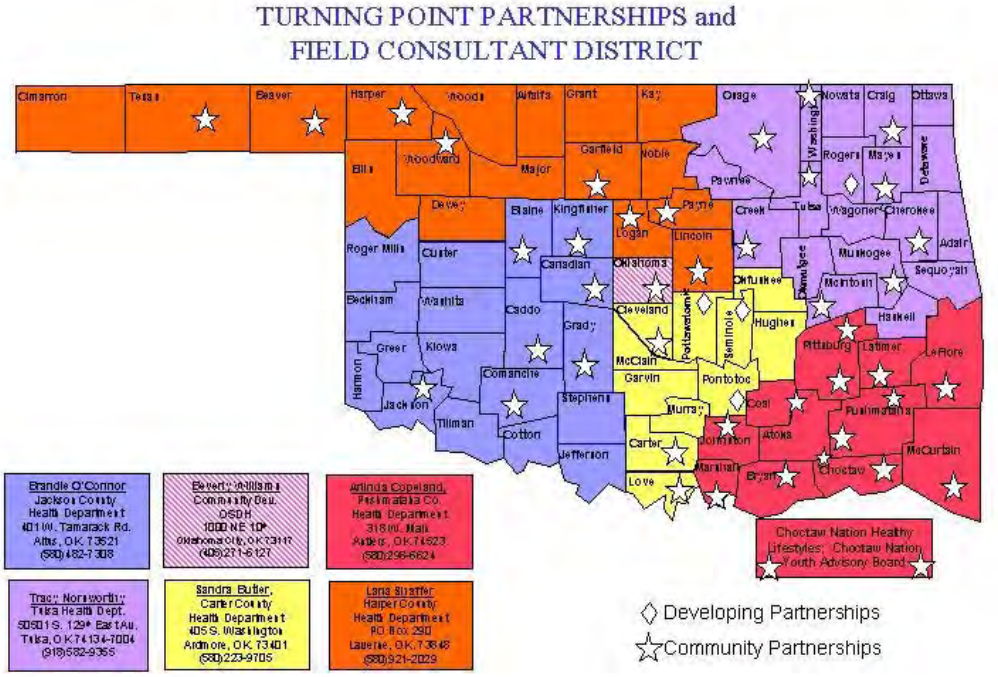

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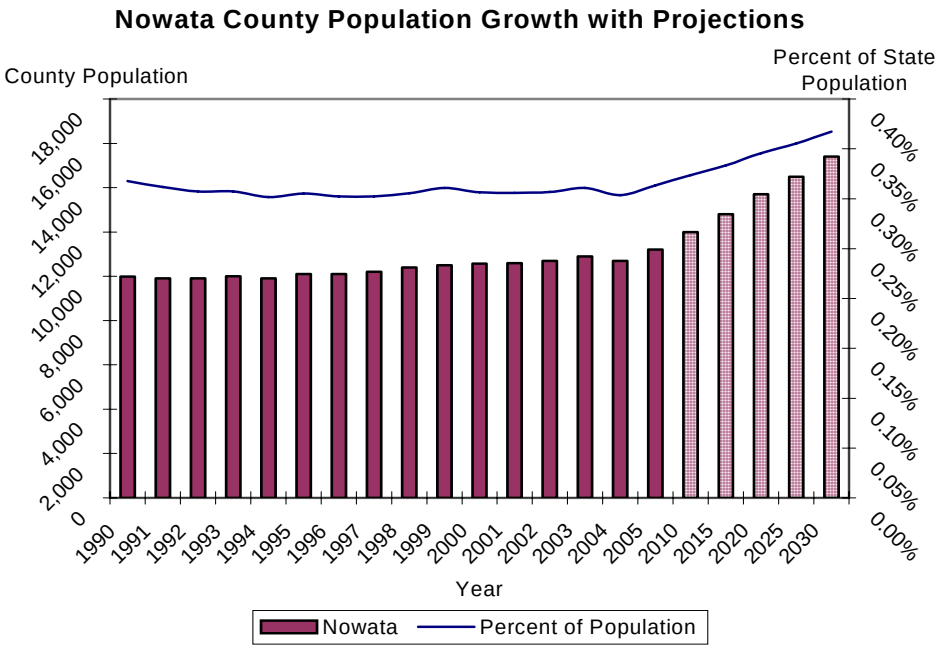
County Health Department Usage	7
Health Care Costs Summary	7
Turning Point	8

Demographics

- Population estimates
  - 6% increase from 1990 to 2000 (9,992 to 10,569)
  - 1% increase from 2000 to 2004
  - Ranked 28th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 1%
- Race
  - Whites = 72%
  - Native Americans =17%
  - Blacks =2%
  - Other/Multiple = 9%
- Age
  - Under 5 = 7%
  - Over 64 = 17%
  - Median age = 39.0 years
- Housing units
  - Occupied = 4,147 (88%)
  - Vacant = 558 (12%)
- Disability (ages 21 to 64) = 26.7% national = 19.2% state = 21.5%
- Individuals below poverty = 14.1% national = 12.4% state = 14.7%



* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Nowata County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 559 people in Nowata County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 42.8 deaths a year, heart disease accounts for almost $16 million a year in medical costs in Nowata County.

Heart disease accounts for almost $16 million a year in medical costs in NowataCounty.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 182% increase in deaths.

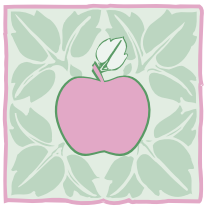
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 24% (2,601) of people in Nowata County were considered obese which accounted for an additional $1,027,395 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Nowata County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 3	UNINTENT. INJURY 2	UNINTENT. INJURY 15	UNINTENT. INJURY 7	CANCER 10	CANCER 33	CANCER 62	HEART DISEASE 401	HEART DISEASE 471
2	CANCER 1	CANCER 1	SUICIDE 2	HEART DISEASE 3	UNINTENT. INJURY 9	HEART DISEASE 18	HEART DISEASE 41	CANCER 214	CANCER 321
3	KIDNEY DISEASE 1	OTHER 1	HEART DISEASE 1	SUICIDE 2	HEART DISEASE 7	UNINTENT. INJURY 14	BRONCHITIS EMPHYSEMA/ ASTHMA 8	STROKE 89	STROKE 98
4	PARKINSON'S DISEASE 1		INFLUENZA/ PNEUMONIA 1	BRONCHITIS EMPHYSEMA/ ASTHMA 1	STROKE 2	DIABETES MELLITUS 2	STROKE 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 54	UNINTENT. INJURY 73
5	PERINATAL PERIOD 1			HIV 1	HOMICIDE 2	ATHERO-SCLEROSIS 1	UNINTENT. INJURY 6	INFLUENZA/ PNEUMONIA 52	BRONCHITIS EMPHYSEMA/ ASTHMA 63
6	SIDS 1				INFLUENZA/ PNEUMONIA 2	STROKE 1	BENINGN NEOPLASM 4	ALZHEIMER'S DISEASE 31	INFLUENZA/ PNEUMONIA 57
7	OTHER 4				DIABETES MELLITUS 1	LIVER DISEASE 1	DIABETES MELLITUS 2	DIABETES MELLITUS 20	ALZHEIMER'S DISEASE 32
8					GALLBLADDER DISORDER 1	SUICIDE 1	INFLUENZA/ PNEUMONIA 2	KIDNEY DISEASE 20	DIABETES MELLITUS 25
					HIV 1	OTHER 17	ALZHEIMER'S DISEASE 1	UNINTENT. INJURY 20	KIDNEY DISEASE 22
10					LIVER DISEASE 1		SEVEN CAUSES TIED 1	SEPTICEMIA (BLOOD POISONING) 12	SEPTICEMIA (BLOOD POISONING) 14

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

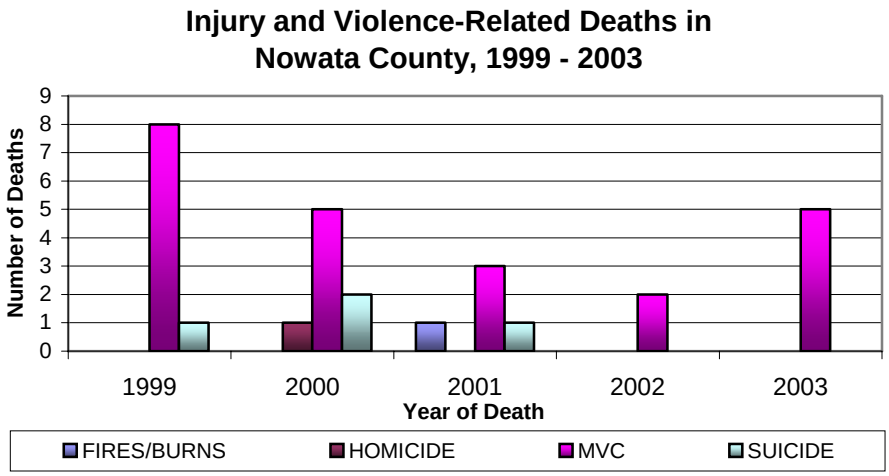
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Nowata County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Nowata County which has an average of 4.6 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Nowata County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.2% (2,406) of people in Nowata County use tobacco of some sort. Medical costs accumulated by those persons are almost $8 million a year for Nowata County.

> *"Medical costs accumulated by those persons are almost **$8 million a year** for Nowata County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 37.1% (4,020) of people in Nowata County had no leisure activity in the past month at the time they were surveyed.

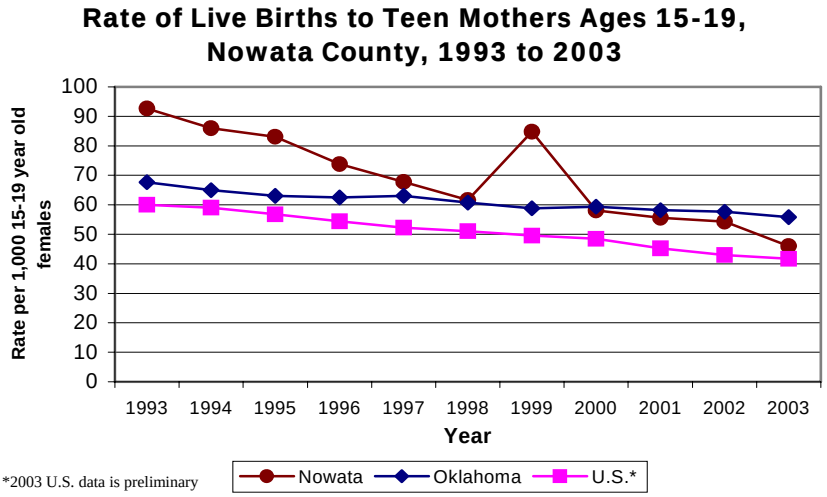
The BRFSS also indicated that 17.8% (1,929) of Nowata County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $25,545,747.00 in one year for Nowata County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Nowata County had a teen birth rate of 46 in 2003 which was a 15% decrease from 2002 (54.3) and a 50% decrease since 1993 (92.7).

With an average of 24 births per year, teen pregnancy costs the citizens of Nowata County $76,800.00 a year.

Note: 2 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 14.1% of persons in Nowata County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Nowata County is 4% below the state (14.7%) and 14% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Nowata County, 2000 Census

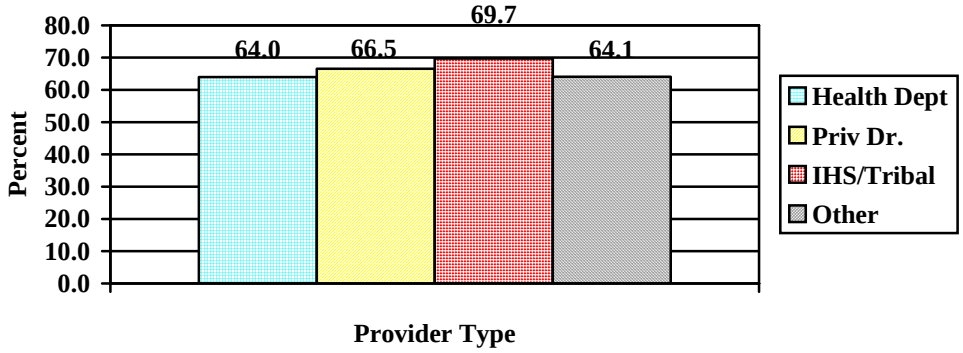
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	10,331	547	907	1,298	1,281	6,298
Cumulative Population		547	1,454	2,752	4,033	10,331
% of Total	100.0%	5.3%	8.8%	12.6%	12.4%	61.0%
Cumulative %		5.3%	14.1%	26.6%	39.0%	100.0%

OK By One - State Immunization Data

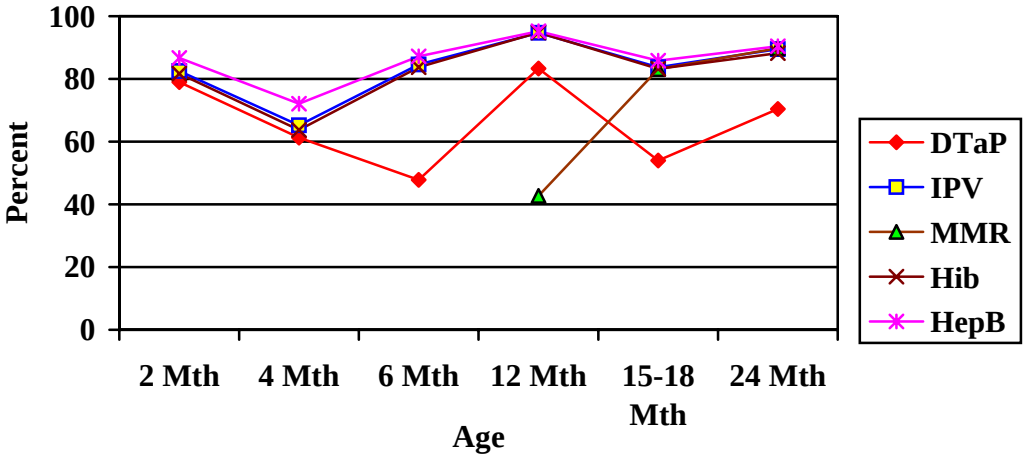
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

No Data Available At This Time

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 43 deaths a year
- $369,476.69 per death
- Total— $15,887,497.67 a year

Obesity

- 24% of population (2,601)
- $395.00 in additional medical costs per person
- Total—$1,027,395.00

Motor Vehicle-Related Injury Death

- Average 4.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,152,000.00 a year

Tobacco Use

- 22.2% of population (2,406)
- $3,300.00 in health care costs
- Total—$7,939,800.00 a year

Diabetes

- 17.8% of population (1,929)
- $13,243.00 in healthcare costs a year
- Total—$25,545,747.00 a year

Teen Pregnancy

- Average of 24 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $76,800.00 a year

Grand Total for Nowata County:

$55,629,239.67

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
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A Look Back To Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

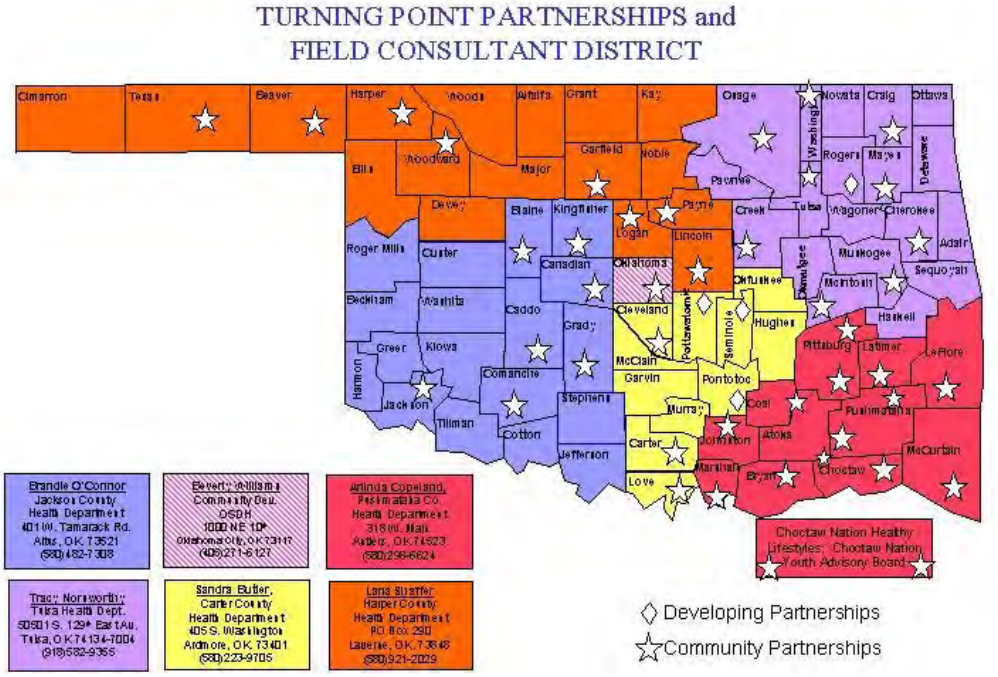
State of the County's Health Report

A Look Back To Move Forward

Okfuskee County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Okfuskee County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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Poverty	5
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County Health Department Usage	7
Health Care Costs Summary	7
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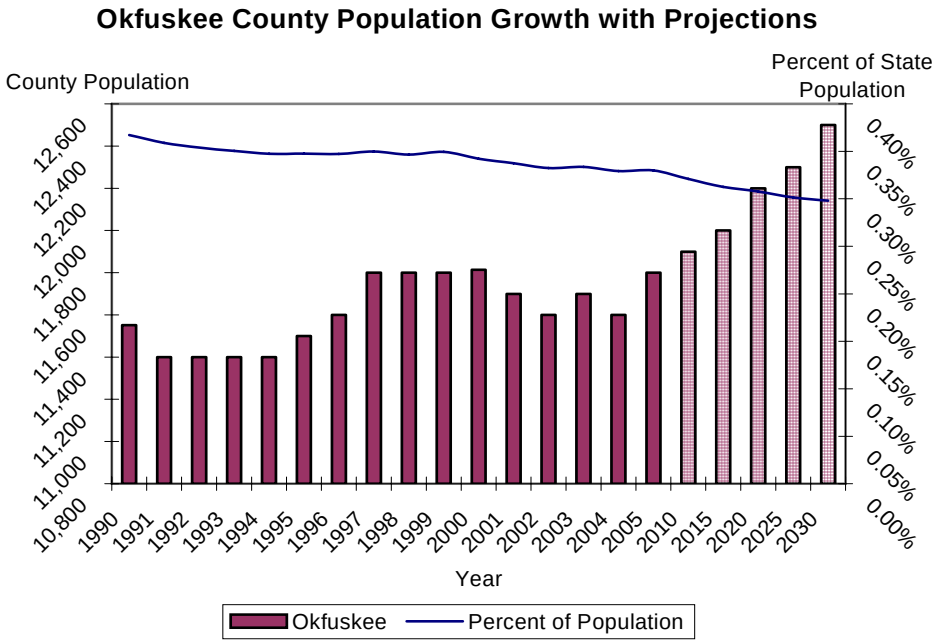
Demographics

** U.S. Census Bureau*

- Population estimates
  - 2% increase from 1990 to 2000 (11,551 to 11,814)
  - 2% decrease from 2000 to 2004
  - Ranked 53rd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 65%
  - Native Americans =«Indian %»
  - Blacks =10%
  - Other/Multiple = 6%
- Age
  - Under 5 = 6%
  - Over 64 = 16%
  - Median age = 38.6 years
- Housing units
  - Occupied = 4,270 (83%)
  - Vacant = 844 (17%)
- Disability (ages 21 to 64) = 26.7% national = 19.2% state = 21.5%
- Individuals below poverty = 23.0% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Okfuskee County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 816 people in Okfuskee County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 55.0 deaths a year, heart disease accounts for over $20 million a year in medical costs in Okfuskee County.

Heart disease accounts for over $20 million a year in medical costs in OkfuskeeCounty.

Alzheimer's disease and the complications associated with it have increased from the 15th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 275% increase in deaths.

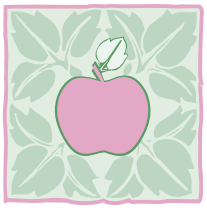
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 21.2% (2,476) of people in Okfuskee County were considered obese which accounted for an additional $978,020 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Okfuskee County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 7	UNINTENT. INJURY 2	UNINTENT. INJURY 8	UNINTENT. INJURY 10	HEART DISEASE 9	HEART DISEASE 34	CANCER 69	HEART DISEASE 508	HEART DISEASE 605
2	CONGENITAL ANOMALIES 2	NON-CANCEROUS TUMOR 1	HOMICIDE/ LEGAL 2	SUICIDE 5	UNINTENT. INJURY 8	CANCER 23	HEART DISEASE 49	CANCER 234	CANCER 337
3	UNINTENT. INJURY 2	CANCER 1	HEART DISEASE 1	HEART DISEASE 4	CANCER 6	UNINTENT. INJURY 11	STROKE 10	STROKE 102	STROKE 116
4	INFLUENZA/ PNEUMONIA 1		INFLUENZA/ PNEUMONIA 1	CANCER 4	HOMICIDE/ LEGAL 3	DIABETES MELLITUS 10	BRONCHITIS EMPHYSEMA/ ASTHMA 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 57	UNINTENT. INJURY 73
5	MENINGOCOC. INFECTION 1		SUICIDE 1	ANEMIA 2	LIVER DISEASE 2	SUICIDE 5	DIABETES MELLITUS 7	DIABETES MELLITUS 51	DIABETES MELLITUS 68
6	OTHER 3			HOMICIDE/ LEGAL 2	SUICIDE 2	STROKE 2	UNINTENT. INJURY 6	INFLUENZA/ PNEUMONIA 47	BRONCHITIS EMPHYSEMA/ ASTHMA 67
7				NON-CANCEROUS TUMOR 1	NON-CANCEROUS TUMOR 1	HOMICIDE/ LEGAL 2	LIVER DISEASE 3	SEPTICEMIA (BLOOD POISONING) 36	INFLUENZA/ PNEUMONIA 52
8				STROKE 1	BRONCHITIS EMPHYSEMA/ ASTHMA 1	LIVER DISEASE 2	KIDNEY DISEASE 3	UNINTENT. INJURY 26	SEPTICEMIA (BLOOD POISONING) 38
				CONGENITAL ANOMALIES 1	STROKE 1	BRONCHITIS EMPHYSEMA/ ASTHMA 1	INFLUENZA/ PNEUMONIA 2	KIDNEY DISEASE 25	KIDNEY DISEASE 28
10					HIV 1	NUTRITIONAL DEFICIENCY 1	FIVE CAUSES TIED 1	ALZHEIMER'S DISEASE 15	SUICIDE 19

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

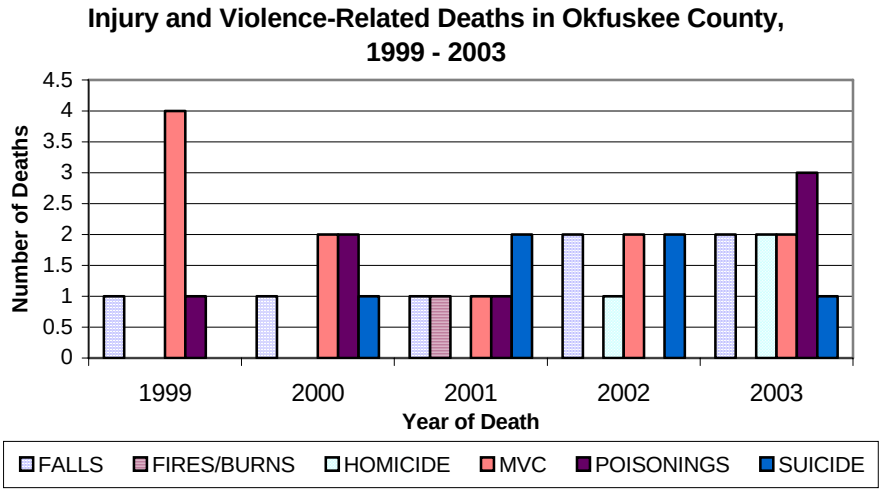
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Okfuskee County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Okfuskee County which has an average of 2.2 motor vehicle-related deaths a year, that translates to over $2 million a year.

Violence-related injuries (homicide and suicide) in Okfuskee County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 32% (3,737) of people in Okfuskee County use tobacco of some sort. Medical costs accumulated by those persons are over $12 million a year for Okfuskee County.

> *"Medical costs accumulated by those persons are over **$12 million a year** for Okfuskee County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 32.8% (3,831) of people in Okfuskee County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 11.1% (1,296) of Okfuskee County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $17,162,928.00 in one year for Okfuskee County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

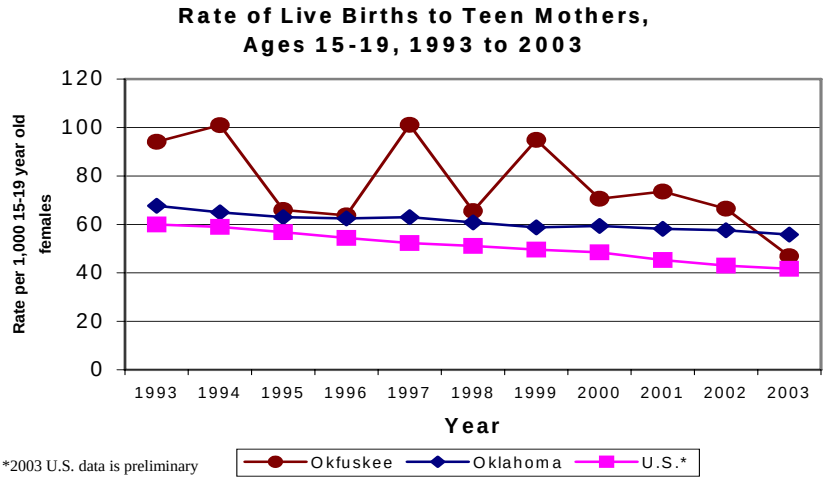
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Okfuskee County had a teen birth rate of 46.9 in 2003 which was a 29% decrease from 2002 (66.5) and a 50% decrease since 1993 (94.1).

With an average of 32 births per year, teen pregnancy costs the citizens of Okfuskee County $102,400.00 a year.



*2003 U.S. data is preliminary

Note: 8 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 23.0% of persons in Okfuskee County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Okfuskee County is 57% above the state (14.7%) and 86% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Okfuskee County, 2000 Census

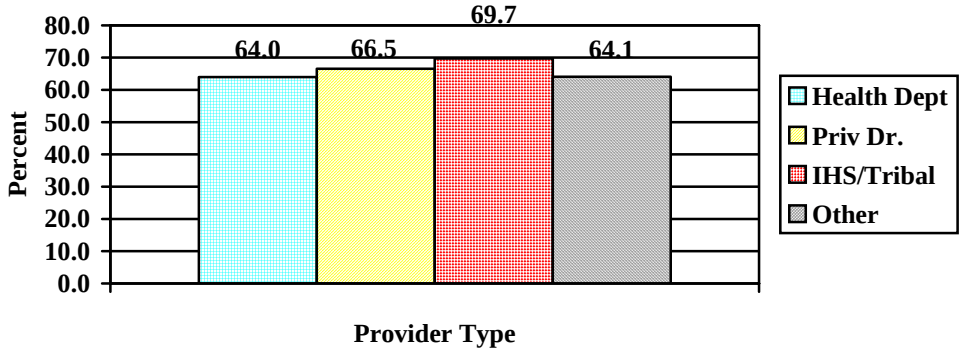
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	10,897	1,048	1,460	1,654	1,690	5,045
Cumulative Population		1,048	2,508	4,162	5,852	10,897
% of Total	100.0%	9.6%	13.4%	15.2%	15.5%	46.3%
Cumulative %		9.6%	23.0%	38.2%	53.7%	100.0%

OK By One - State Immunization Data

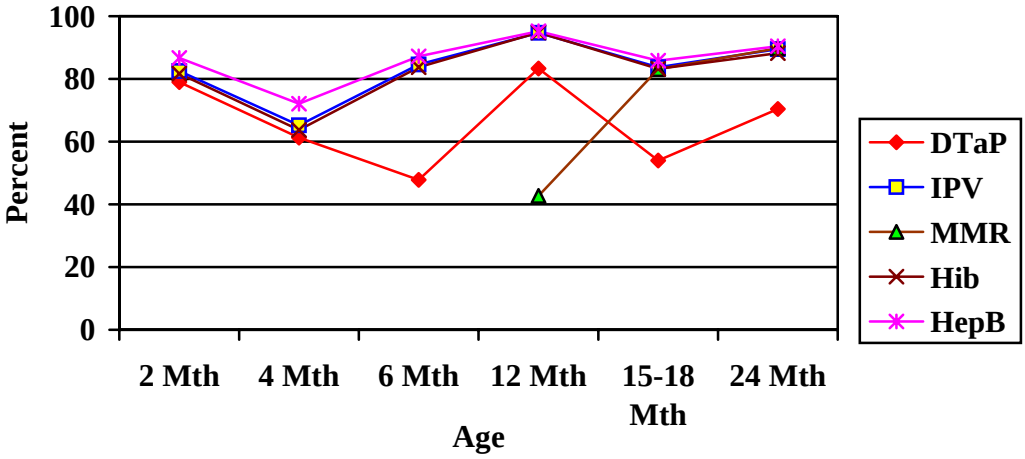
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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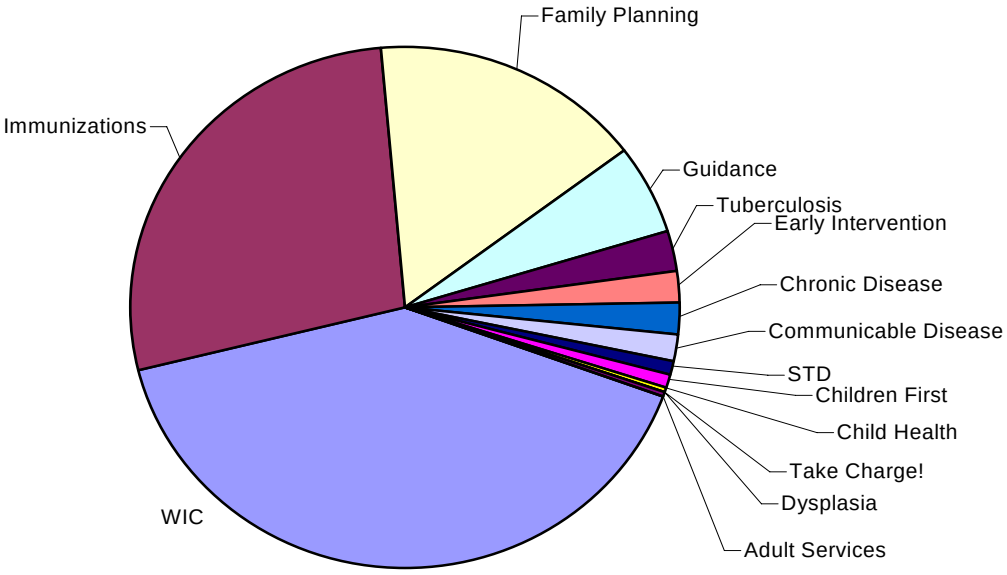
County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for Okfuskee County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 55 deaths a year
- $369,476.69 per death
- Total— $20,321,217.95 a year

Obesity

- 21.2% of population (2,476)
- $395.00 in additional medical costs per person
- Total—$978,020.00

Motor Vehicle-Related Injury Death

- Average 2.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,464,000.00 a year

Tobacco Use

- 32% of population (3,737)
- $3,300.00 in health care costs
- Total—$12,332,100.00 a year

Diabetes

- 11.1% of population (1,296)
- $13,243.00 in healthcare costs a year
- Total—$17,162,928.00 a year

Teen Pregnancy

- Average of 32 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $102,400.00 a year

Grand Total for Okfuskee County:

$53,360,665.95

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
Email: neil@health.ok.gov

Okfuskee County Health Department
125 N 2nd
Okemah, Oklahoma 74859
918-623-1800

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

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OKLAHOMA STATE DEPARTMENT OF HEALTH

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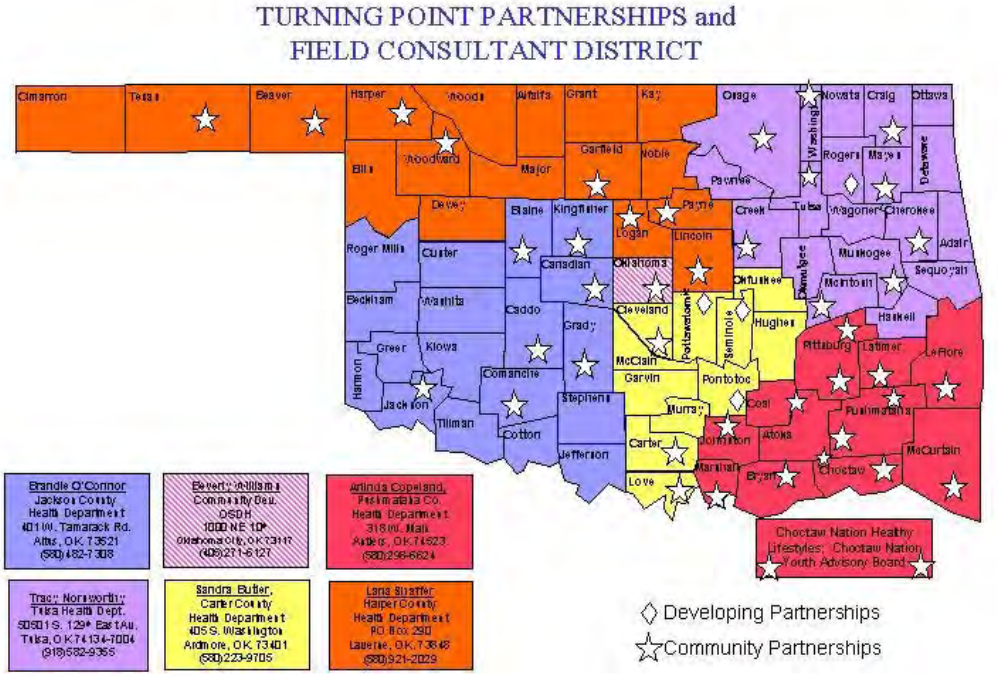

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Teen Pregnancy	5
Poverty	5
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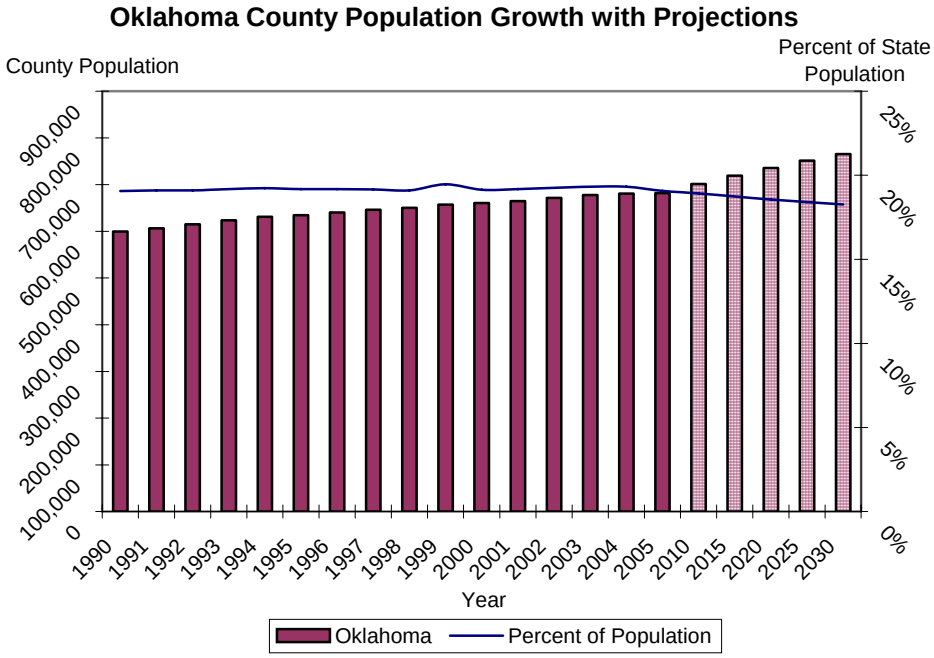
Health Care Costs Summary	7
Turning Point	8

Demographics

- Population estimates
  - 10% increase from 1990 to 2000 (599,611 to 660,448)
  - 3% increase from 2000 to 2004
  - Ranked 15th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 9%
- Race
  - Whites = 70%
  - Native Americans =3%
  - Blacks =15%
  - Other/Multiple = 11%
- Age
  - Under 5 = 7%
  - Over 64 = 12%
  - Median age = 34.2 years
- Housing units
  - Occupied = 266,834 (90%)
  - Vacant = 28,186 (10%)
- Disability (ages 21 to 64) = 21.7% national = 19.2% state = 21.5%
- Individuals below poverty = 15.3% national = 12.4% state = 14.7%



* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Oklahoma County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 19,162 people in Oklahoma County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 1895.5 deaths a year, heart disease accounts for over $701 million a year in medical costs in Oklahoma County.

Heart disease accounts for over $701 million a year in medical costs in OklahomaCounty.

Alzheimer's disease and the complications associated with it have increased from the 13th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 264% increase in deaths.

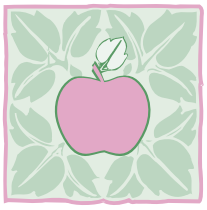
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 22.5% (152,115) of people in Oklahoma County were considered obese which accounted for an additional $60,085,425 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Oklahoma County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 485	UNINTENT. INJURY 77	UNINTENT. INJURY 357	UNINTENT. INJURY 325	HEART DISEASE 487	CANCER 1259	CANCER 2465	HEART DISEASE 16639	HEART DISEASE 20863
2	CONGENITAL ANOMALIES 245	CANCER 35	HOMICIDE/ LEGAL 216	SUICIDE 225	CANCER 476	HEART DISEASE 1252	HEART DISEASE 2276	CANCER 9800	CANCER 14226
3	SIDS 93	CONGENITAL ANOMALIES 19	SUICIDE 170	HOMICIDE/ LEGAL 183	UNINTENT. INJURY 423	UNINTENT. INJURY 331	BRONCHITIS/ EMPHYSEMA/ ASTHMA 416	STROKE 4281	STROKE 5021
4	UNINTENT. INJURY 92	HOMICIDE/ LEGAL 17	CANCER 45	HIV 176	SUICIDE 258	STROKE 221	STROKE 348	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3034	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3597
5	HOMICIDE/ LEGAL 51	SUICIDE 14	HEART DISEASE 43	CANCER 127	HIV 242	LIVER DISEASE 210	DIABETES 236	INFLUENZA/ PNEUMONIA 1693	UNINTENT. INJURY 2760
6	HEART DISEASE 35	HEART DISEASE 11	BRONCHITIS 14	HEART DISEASE 108	HOMICIDE/ LEGAL 162	SUICIDE 176	UNINTENT. INJURY 210	DIABETES 1250	INFLUENZA/ PNEUMONIA 1946
7	SEPTICEMIA (BLOOD POISONING) 18	BRONCHITIS 6	STROKE 9	STROKE 22	STROKE 127	DIABETES 131	LIVER DISEASE 166	UNINTENT. INJURY 941	DIABETES MELLITUS 1711
8	INFLUENZA/ PNEUMONIA 15	SEPTICEMIA (BLOOD POISONING) 6	NON-CANCEROUS TMOR 8	DIABETES MELLITUS 18	LIVER DISEASE 120	HIV 111	SEPTICEMIA (BLOOD POISONING) 103	ALZHEIMER'S DISEASE 858	SUICIDE 1099
	CANCER 15	INFLUENZA/ PNEUMONIA 4	CONGENITAL ANOMALIES 8	INFLUENZA/ PNEUMONIA 17	DIABETES 67	HOMICIDE/ LEGAL 105	SUICIDE 103	ATHEROSCLER OSIS 843	KIDNEY DISEASE 919
10	KIDNEY DISEASE 14	STROKE 3	DIABETES 8	SEPTICEMIA (BLOOD POISONING) 15	INFLUENZA/ PNEUMONIA 41	BRONCHITIS/ EMPHYSEMA/ ASTHMA 87	INFLUENZA/ PNEUMONIA 99	KIDNEY DISEASE 769	SEPTICEMIA (BLOOD POISONING) 896

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

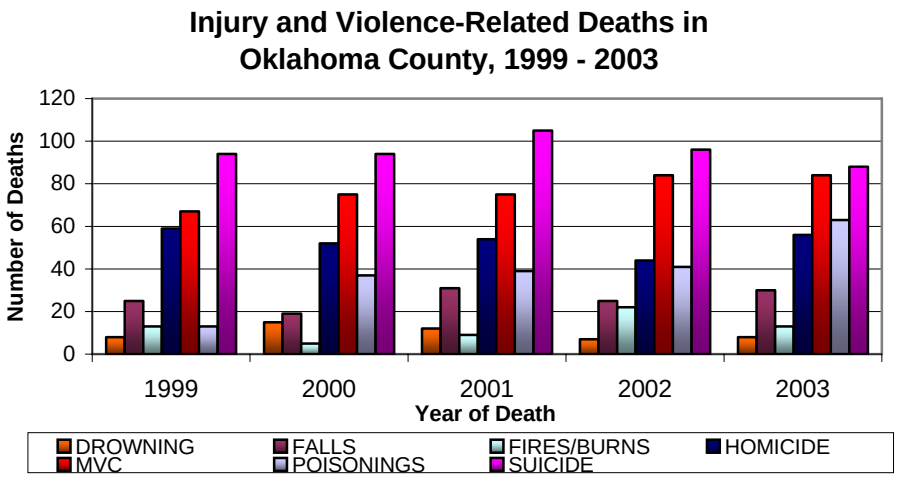
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Oklahoma County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Oklahoma County which has an average of 77 motor vehicle-related deaths a year, that translates to over $86 million a year.

Violence-related injuries (homicide and suicide) in Oklahoma County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 24.4% (164,960) of people in Oklahoma County use tobacco of some sort. Medical costs accumulated by those persons are over $544 million a year for Oklahoma County.

> *"Medical costs accumulated by those persons are over **$544 million a year** for Oklahoma County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 28.3% (191,327) of people in Oklahoma County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.1% (41,240) of Oklahoma County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $546,141,320.00 in one year for Oklahoma County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

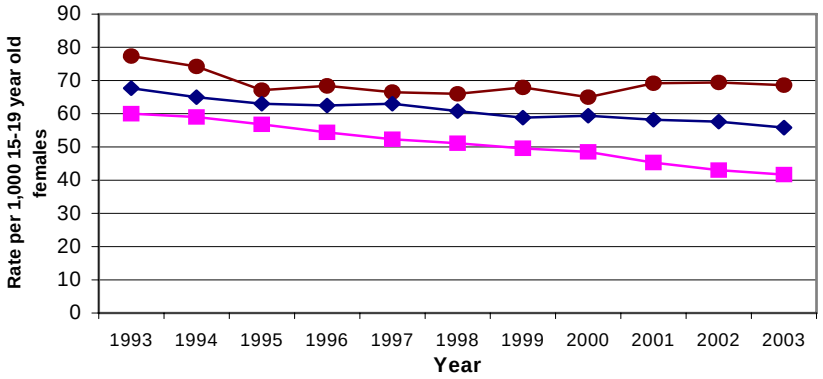
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Oklahoma County had a teen birth rate of 68.6 in 2003 which was a 1% decrease from 2002 (69.4) and a 11% decrease since 1993 (77.4).

With an average of 1579 births per year, teen pregnancy costs the citizens of Oklahoma County $5,052,800.00 a year.

Rate of Live Births to Teen Mothers Ages 15-19, Oklahoma County, 1993 to 2003



*2003 U.S. data is preliminary

Oklahoma — Oklahoma — U.S.*

Note: 392 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 15.3% of persons in Oklahoma County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Oklahoma County is 4% above the state (14.7%) and 23% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Oklahoma County, 2000 Census

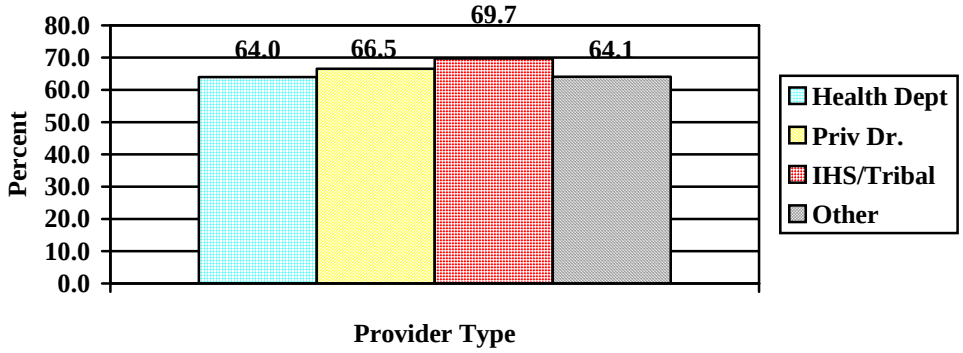
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	643,433	45,669	52,476	66,825	64,269	414,194
Cumulative Population		45,669	98,145	164,970	229,239	643,433
% of Total	100.0%	7.1%	8.2%	10.4%	10.0%	64.4%
Cumulative %		7.1%	15.3%	25.6%	35.6%	100.0%

OK By One - State Immunization Data

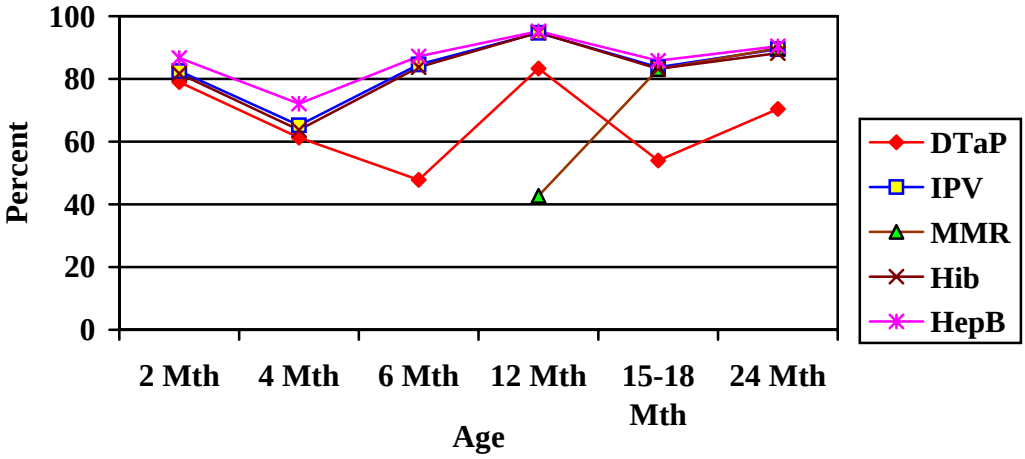
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



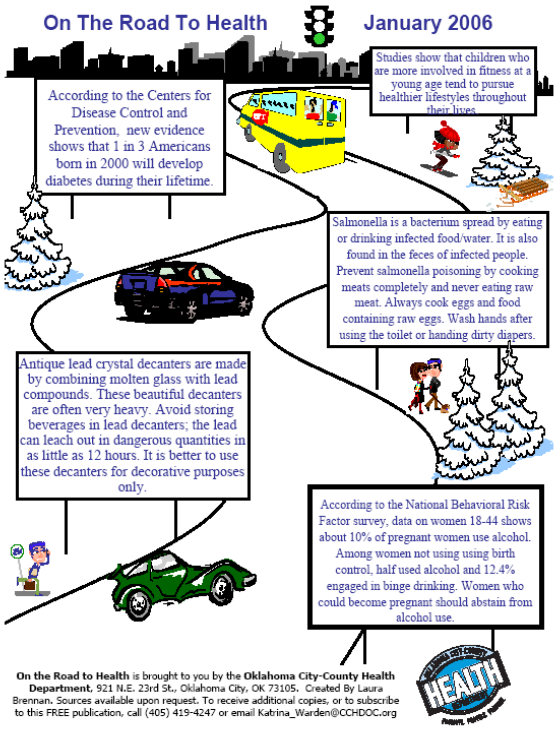
**Note: County level data will be available soon.

County Health Department

Through Community Resources Development, OCCHD works with organizations in Oklahoma County to:

- Raise awareness of public health issues in community groups
- Identify difficulties people have in finding and using health care
- Assist community leaders in identifying Oklahoma's health care needs and in finding resources to meet those needs
- Educate policymakers about problems Oklahoma families face and recommend solutions to meet those needs.
- Educate the public on a variety of health issues.

For more information: 419-4247
For the latest copy of On The Road To Health:
http://www.cchdoc.com/Community%20Resourses.htm



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 1896 deaths a year
- $369,476.69 per death
- Total— $700,527,804.24 a year

Obesity

- 22.5% of population (152,115)
- $395.00 in additional medical costs per person
- Total—$60,085,425.00

Motor Vehicle-Related Injury Death

- Average 77 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$86,240,000.00 a year

Tobacco Use

- 24.4% of population (164,960)
- $3,300.00 in health care costs
- Total—$544,368,000.00 a year

Diabetes

- 6.1% of population (41,240)
- $13,243.00 in healthcare costs a year
- Total—$546,141,320.00 a year

Teen Pregnancy

- Average of 1579 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $5,052,800.00 a year

Grand Total for Oklahoma County:

$1,942,415,349.24

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Oklahoma County Health Department
921 Northeast 23rd Street
Oklahoma City, OK 73105
405-427-8651
Website: http://www.cchdoc.com/

A Look Back
To Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Thank you Central Oklahoma Turning Point!

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

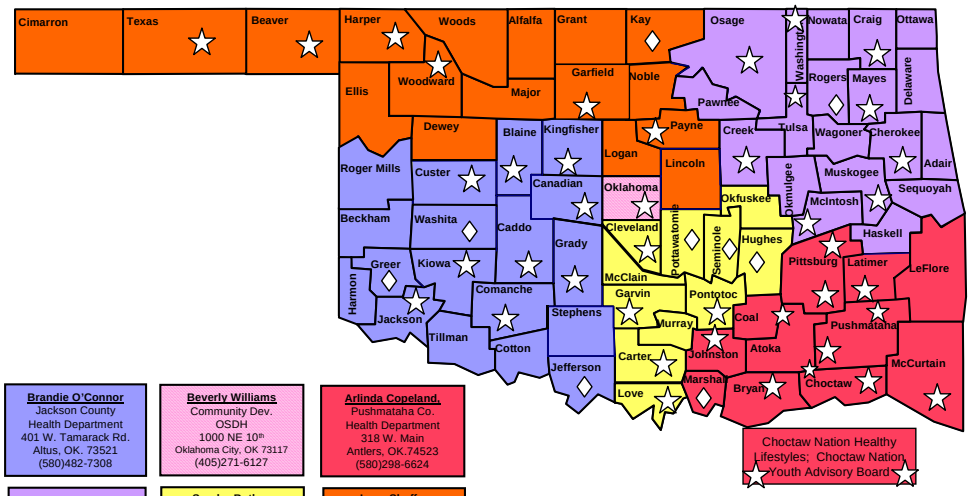
A Look Back To Move Forward

Osage County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Osage County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.

TURNING POINT PARTNERSHIPS and
FIELD CONSULTANT DISTRICT



Field Rep Districts 9-13-05

Inside this issue:

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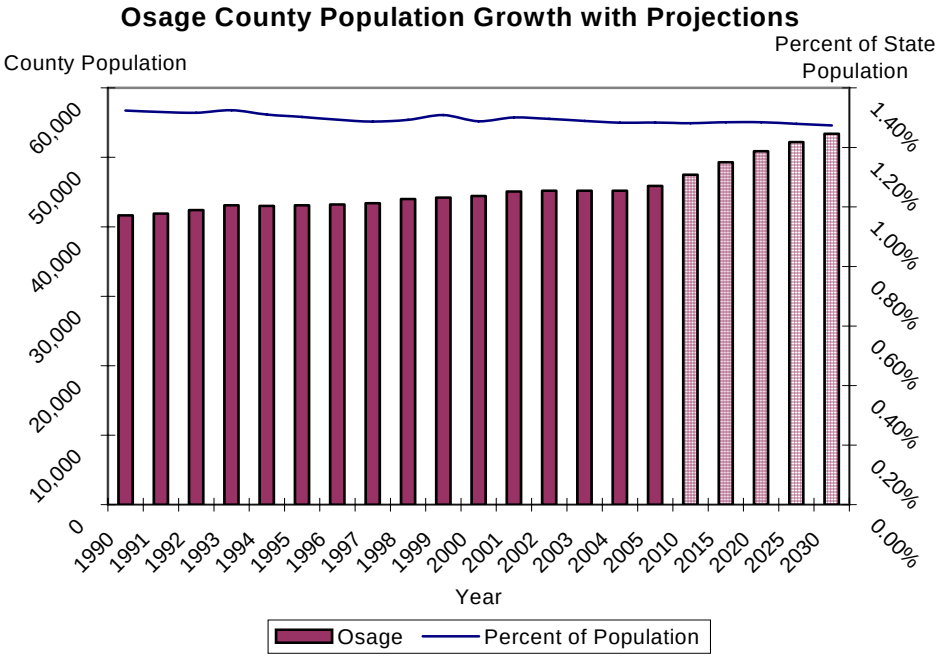
Demographics

- Population estimates
  - 7% increase from 1990 to 2000 (41,645 to 44,437)
  - 2% increase from 2000 to 2004
  - Ranked 27th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 67%
  - Native Americans =14%
  - Blacks =11%
  - Other/Multiple = 8%
- Age
  - Under 5 = 6%
  - Over 64 = 13%
  - Median age = 38.1 years
- Housing units
  - Occupied = 16,617 (88%)
  - Vacant = 2,209 (12%)
- Disability (ages 21 to 64) = 23.0% national = 19.2% state = 21.5%
- Individuals below poverty = 13.2% national = 12.4% state = 14.7%



* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Osage County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,352 people in Osage County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 121.9 deaths a year, heart disease accounts for over $45 million a year in medical costs in Osage County.

Heart disease accounts for over $45 million a year in medical costs in OsageCounty.

Alzheimer's disease and the complications associated with it have increased from the 21st ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 725% increase in deaths.

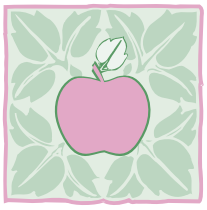
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 27.2% (12,308) of people in Osage County were considered obese which accounted for an additional $4,861,660 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Osage County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 9	UNINTENT. INJURY 7	UNINTENT. INJURY 41	UNINTENT. INJURY 29	CANCER 36	HEART DISEASE 100	CANCER 187	HEART DISEASE 1078	HEART DISEASE 1341
2	CONGENITAL ANOMALIES 7	CANCER 2	HOMICIDE/ LEGAL 9	SUICIDE 14	UNINTENT. INJURY 35	CANCER 76	HEART DISEASE 142	CANCER 666	CANCER 980
3	SIDS 6	SUICIDE 2	SUICIDE 6	HOMICIDE/ LEGAL 7	HEART DISEASE 16	UNINTENT. INJURY 27	BRONCHITIS/ EMPHYSEMA/ ASTHMA 31	STROKE 226	STROKE 251
4	UNINTENT. INJURY 2	CONGENITAL ANOMALIES 1	CANCER 5	CANCER 7	SUICIDE 13	STROKE 10	DIABETES MELLITUS 19	BRONCHITIS/ EMPHYSEMA/ ASTHMA 180	BRONCHITIS/ EMPHYSEMA/ ASTHMA 221
5	HEART DISEASE 1	OTHER 1	HEART DISEASE 2	HIV 5	DIABETES MELLITUS 7	DIABETES MELLITUS 10	UNINTENT. INJURY 17	INFLUENZA/ PNEUMONIA 88	UNINTENT. INJURY 215
6	HYPERTENSION 1		CONGENITAL ANOMALIES 1	HEART DISEASE 2	HIV 6	SUICIDE 8	LIVER DISEASE 12	DIABETES MELLITUS 77	DIABETES MELLITUS 113
7	CANCER 1		INFLUENZA/ PNEUMONIA 1	NON-CANCEROUS TUMOR 1	HOMICIDE/ LEGAL 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	STROKE 11	UNINTENT. INJURY 57	INFLUENZA/ PNEUMONIA 99
8	SEPTICEMIA (BLOOD POISONING) 1		OTHER 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	STROKE 4	LIVER DISEASE 7	SUICIDE 6	ATHERO-SCLEROSIS 41	SUICIDE 66
	OTHER 5			CONGENITAL ANOMALIES 1	LIVER DISEASE 3	INFLUENZA/ PNEUMONIA 5	INFLUENZA/ PNEUMONIA 4	KIDNEY DISEASE 38	KIDNEY DISEASE 44
10				TWO CAUSES TIED 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	KIDNEY DISEASE 4	THREE CAUSES TIED 2	ALZHEIMER'S DISEASE 33	ATHERO-SCLEROSIS 42

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

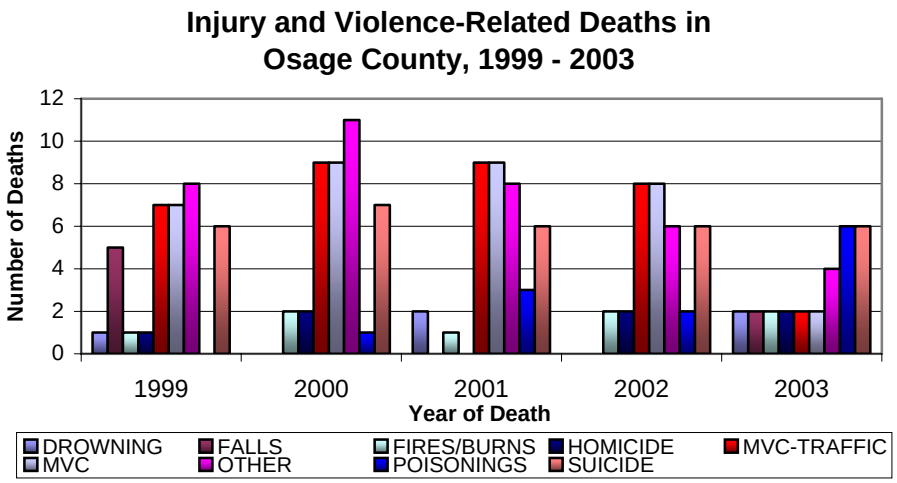
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Osage County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Osage County which has an average of 7 motor vehicle-related deaths a year, that translates to almost $8 million a year.

Violence-related injuries (homicide and suicide) in Osage County are ranked in the top 10 in five of the six age groups (see Top 10 list on page 3).



Tobacco Use

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According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 28.5% (12,896) of people in Osage County use tobacco of some sort. Medical costs accumulated by those persons are almost $43 million a year for Osage County.

*"Medical costs accumulated by those persons are almost **$43 million a year** for Osage County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 33.3% (15,068) of people in Osage County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.6% (4,796) of Osage County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $63,513,428.00 in one year for Osage County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

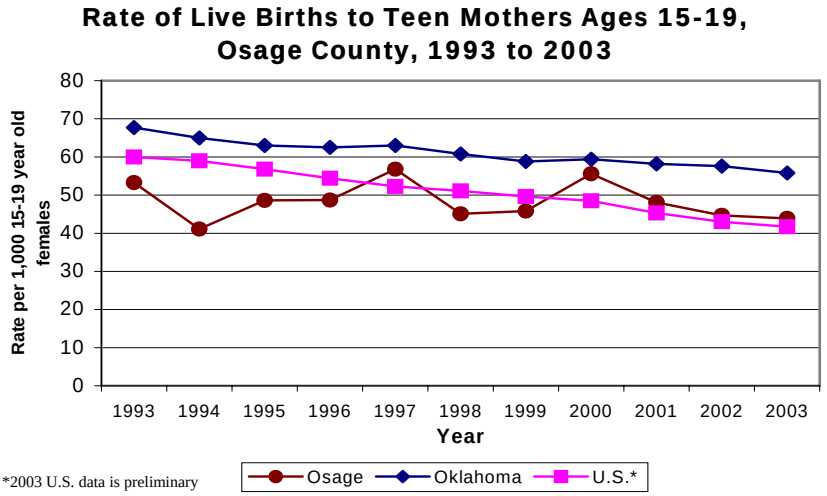
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Osage County had a teen birth rate of 43.9 in 2003 which was a 2% decrease from 2002 (44.7) and a 18% decrease since 1993 (53.3).

With an average of 74 births per year, teen pregnancy costs the citizens of Osage County $236,800.00 a year.



*2003 U.S. data is preliminary

Note: 13 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 13.2% of persons in Osage County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Osage County is 10% below the state (14.7%) and 7% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Osage County, 2000 Census

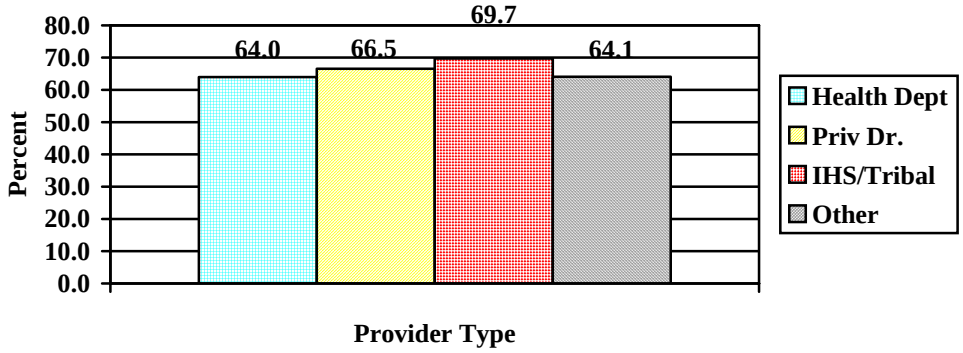
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	42,735	2,204	3,447	4,677	4,832	27,575
Cumulative Population		2,204	5,651	10,328	15,160	42,735
% of Total	100.0%	5.2%	8.1%	10.9%	11.3%	64.5%
Cumulative %		5.2%	13.2%	24.2%	35.5%	100.0%

OK By One - State Immunization Data

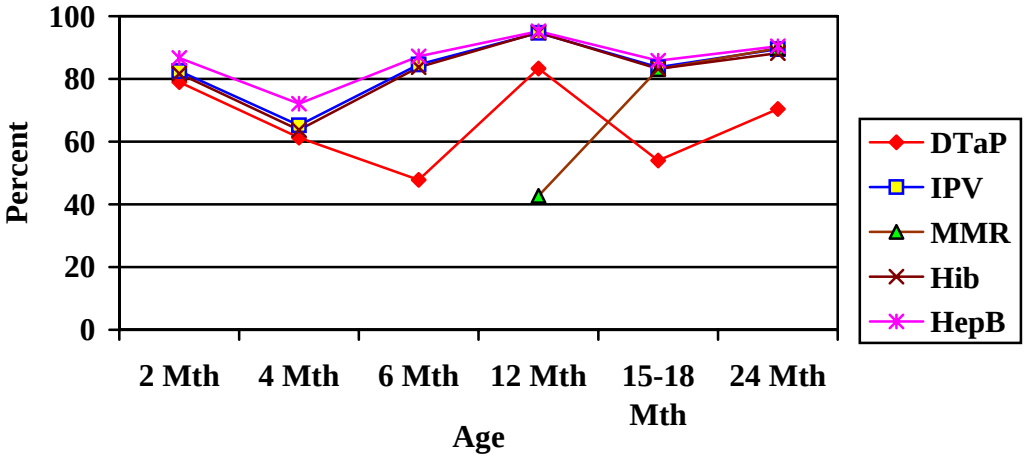
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



**Note: County level data will be available soon.

County Health Department Usage

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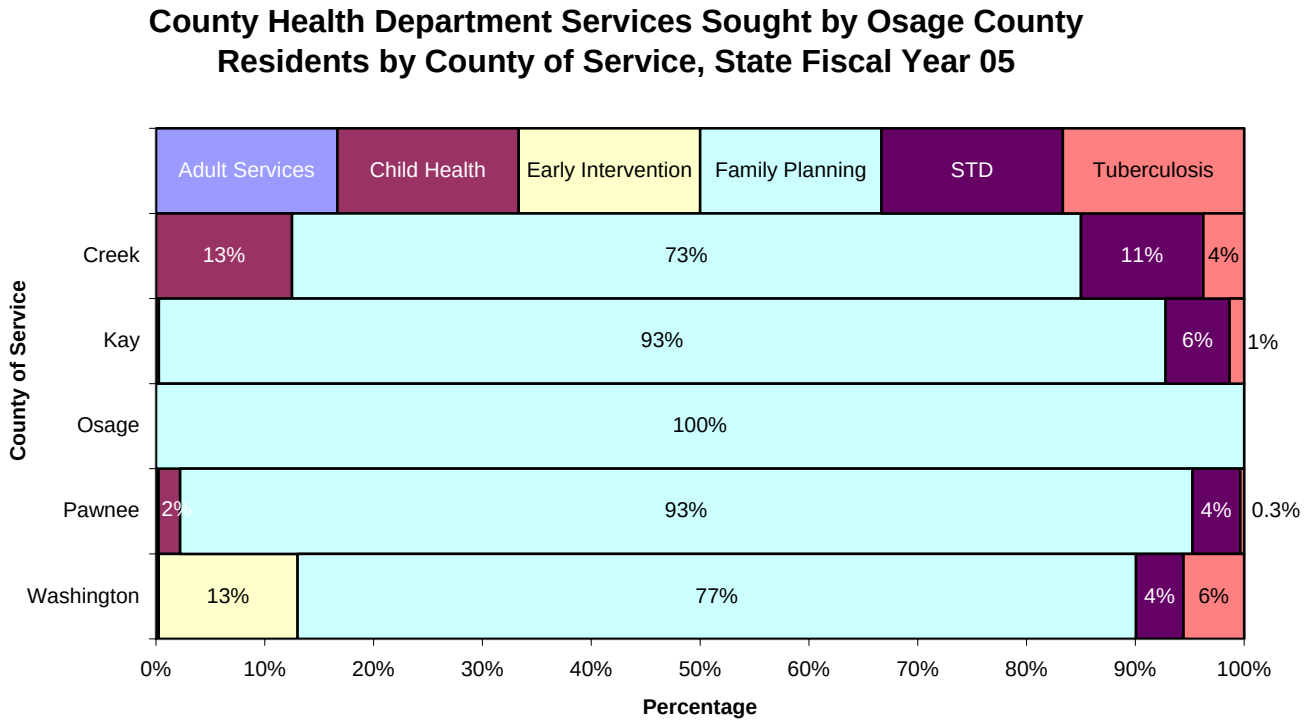

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 122 deaths a year
- $369,476.69 per death
- Total— $45,076,156.18 a year

Obesity

- 27.2% of population (12,308)
- $395.00 in additional medical costs per person
- Total—$4,861,660.00

Motor Vehicle-Related Injury Death

- Average 7 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$7,840,000.00 a year

Tobacco Use

- 28.5% of population (12,896)
- $3,300.00 in health care costs
- Total—$42,556,800.00 a year

Diabetes

- 10.6% of population (4,796)
- $13,243.00 in healthcare costs a year
- Total—$63,513,428.00 a year

Teen Pregnancy

- Average of 74 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $236,800.00 a year

Grand Total for Osage County:

$164,084,844.18

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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A Look Back To Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

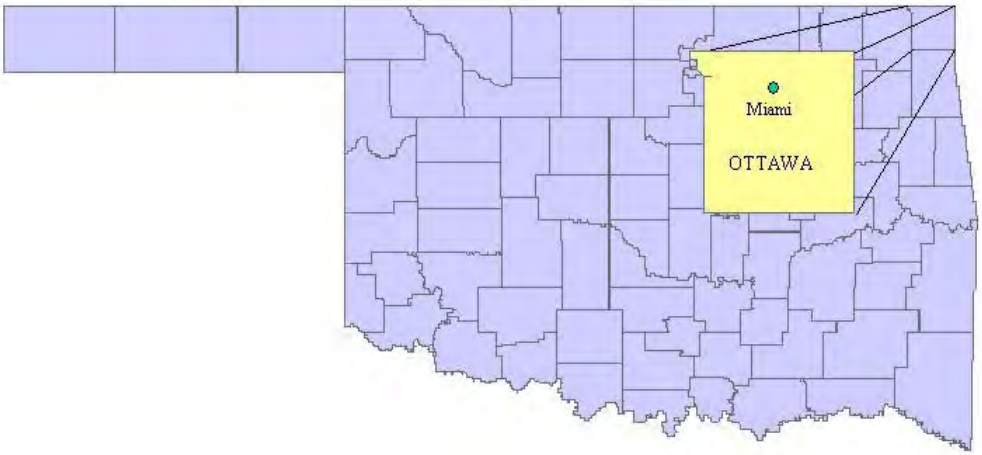
State of the County's Health Report

A Look Back To Move Forward

Ottawa County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Ottawa County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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Top 10 Leading Causes of Death Table	3
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Teen Pregnancy	5
Poverty	5
OK By One—State Immunization Data	6
County Health Department Usage	7
Health Care Costs Summary	7
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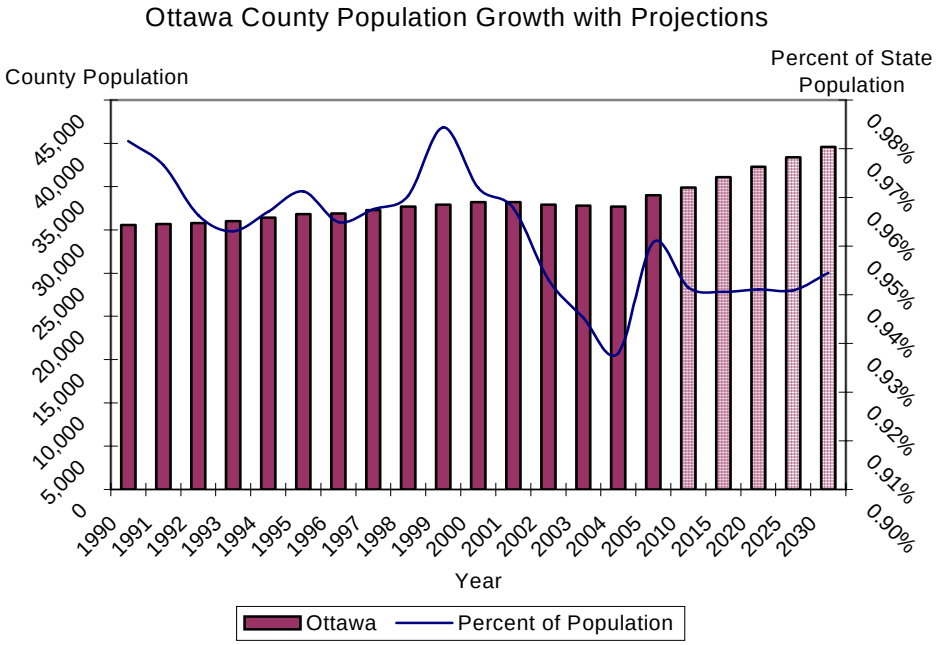
Demographics

- Population estimates
  - 9% increase from 1990 to 2000 (30,561 to 33,194)
  - 1% decrease from 2000 to 2004
  - Ranked 52nd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 74%
  - Native Americans =«Indian %»
  - Blacks =1%
  - Other/Multiple = 9%
- Age
  - Under 5 = 7%
  - Over 64 = 17%
  - Median age = 37.3 years
- Housing units
  - Occupied = 12,984 (87%)
  - Vacant = 1,858 (13%)
- Disability (ages 21 to 64) = 26.3% national = 19.2% state = 21.5%
- Individuals below poverty = 16.6% national = 12.4% state = 14.7%



* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Ottawa County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,574 people in Ottawa County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 136.1 deaths a year, heart disease accounts for over $50 million a year in medical costs in Ottawa County.

Heart disease accounts for over $50 million a year in medical costs in OttawaCounty.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 9thranked cause of death in persons 65 and older accounting for a 70% increase in deaths.

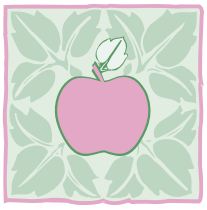
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 25.5% (8,354) of people in Ottawa County were considered obese which accounted for an additional $3,299,830 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Ottawa County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 9	UNINTENT. INJURY 13	UNINTENT. INJURY 31	UNINTENT. INJURY 27	UNINTENT. INJURY 27	CANCER 82	CANCER 152	HEART DISEASE 1271	HEART DISEASE 1497
2	CONGENITAL ANOMALIES 8	HOMICIDE/ LEGAL 2	SUICIDE 11	SUICIDE 10	HEART DISEASE 19	HEART DISEASE 65	HEART DISEASE 137	CANCER 810	CANCER 1073
3	SIDS 4	STROKE 1	HOMICIDE/ LEGAL 3	CANCER 9	CANCER 19	UNINTENT. INJURY 26	BRONCHITIS/ EMPHYSEMA/ ASTHMA 29	STROKE 297	STROKE 332
4	UNINTENT. INJURY 3	CONGENITAL ANOMALIES 1	CONGENITAL ANOMALIES 2	HOMICIDE/ LEGAL 6	SUICIDE 10	SUICIDE 13	STROKE 20	BRONCHITIS/ EMPHYSEMA/ ASTHMA 238	BRONCHITIS/ EMPHYSEMA/ ASTHMA 274
5	INFLUENZA/ PNEUMONIA 1	HEART DISEASE 1	HEART DISEASE 2	HIV 4	HOMICIDE/ LEGAL 6	LIVER DISEASE 11	DIABETES MELLITUS 18	INFLUENZA/ PNEUMONIA 113	UNINTENT. INJURY 227
6	SEPTICEMIA (BLOOD POISONING) 1	MENINGOCOC. INFECTION 1	AORTIC ANEURYSM 1	CONGENITAL ANOMALIES 2	STROKE 4	STROKE 9	UNINTENT. INJURY 16	DIABETES MELLITUS 92	INFLUENZA/ PNEUMONIA 123
7	OTHER 10	OTHER 2	COMPLICATED PREGNANCY 1	DIABETES MELLITUS 2	INFLUENZA/ PNEUMONIA 3	DIABETES MELLITUS 8	SUICIDE 11	UNINTENT. INJURY 84	DIABETES MELLITUS 122
8			CANCER 1	HEART DISEASE 2	LIVER DISEASE 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	LIVER DISEASE 7	KIDNEY DISEASE 69	KIDNEY DISEASE 76
9			OTHER 4	STROKE 1	DIABETES MELLITUS 2	SEPTICEMIA (BLOOD POISONING) 4	HYPERTENSION 6	ALZHEIMER'S DISEASE 46	SUICIDE 69
10				LIVER DISEASE 1	KIDNEY DISEASE 2	TWO CAUSES TIED 2	KIDNEY DISEASE 5	ATHERO-SCLEROSIS 42	ALZHEIMER'S DISEASE 46

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health

July 2005

Injury and Violence

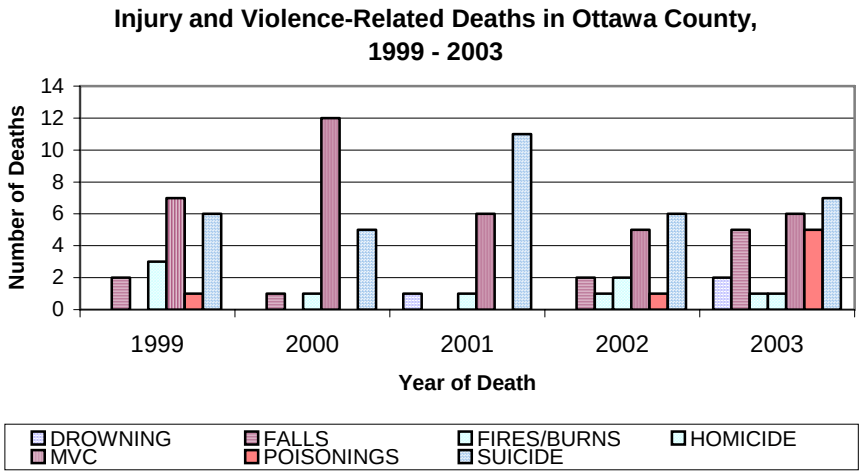
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Ottawa County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Ottawa County which has an average of 7.2 motor vehicle-related deaths a year, that translates to over $8 million a year.

Violence-related injuries (homicide and suicide) in Ottawa County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 32.5% (10,647) of people in Ottawa County use tobacco of some sort. Medical costs accumulated by those persons are over $35 million a year for Ottawa County.

*"Medical costs accumulated by those persons are over **$35 million a year** for Ottawa County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 31.2% (10,221) of people in Ottawa County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 12% (3,931) of Ottawa County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $52,058,233.00 in one year for Ottawa County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

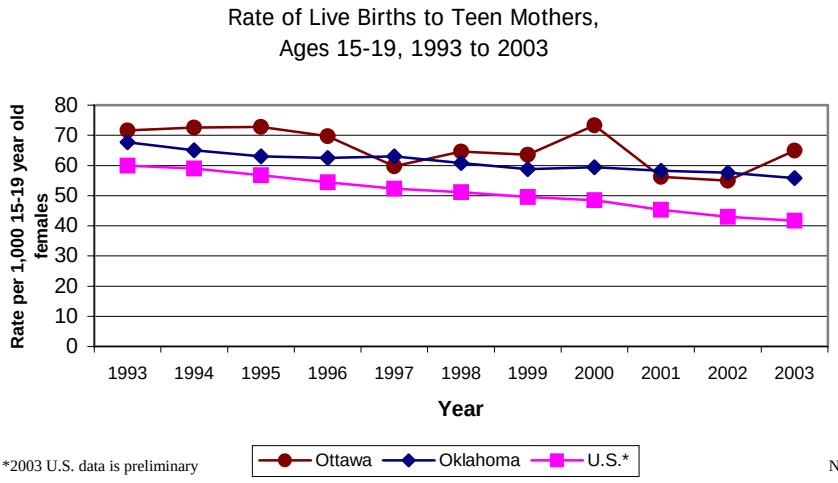
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Ottawa County had a teen birth rate of 64.9 in 2003 which was a 18% increase from 2002 (55) and a 9% decrease since 1993 (71.6).

With an average of 81 births per year, teen pregnancy costs the citizens of Ottawa County $259,200.00 a year.



*2003 U.S. data is preliminary

Note: 19 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 16.6% of persons in Ottawa County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Ottawa County is 13% above the state (14.7%) and 34% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Ottawa County, 2000 Census

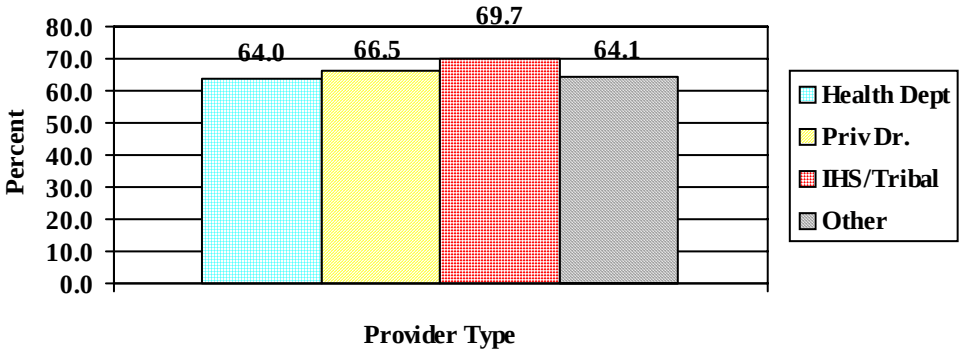
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	32,129	1,988	3,340	4,857	4,196	17,748
Cumulative Population		1,988	5,328	10,185	14,381	32,129
% of Total	100.0%	6.2%	10.4%	15.1%	13.1%	55.2%
Cumulative %		6.2%	16.6%	31.7%	44.8%	100.0%

OK By One - State Immunization Data

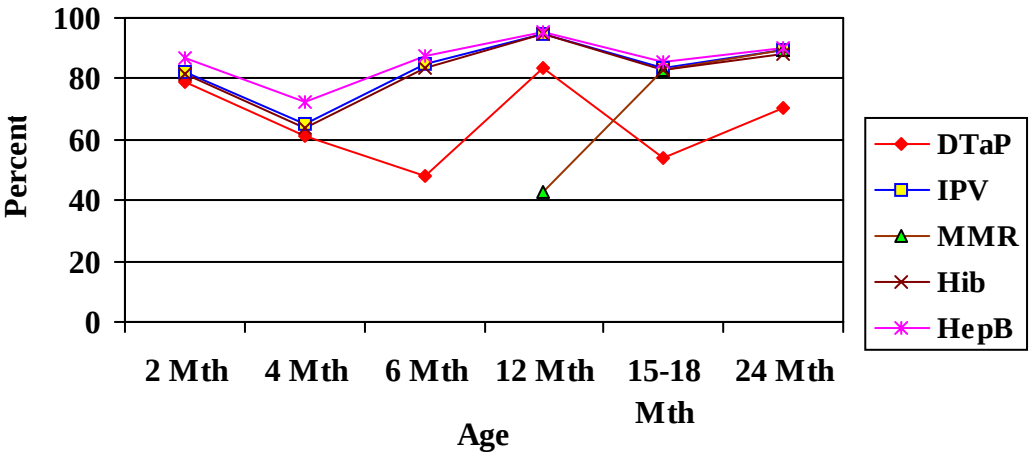
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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County Health Department Usage

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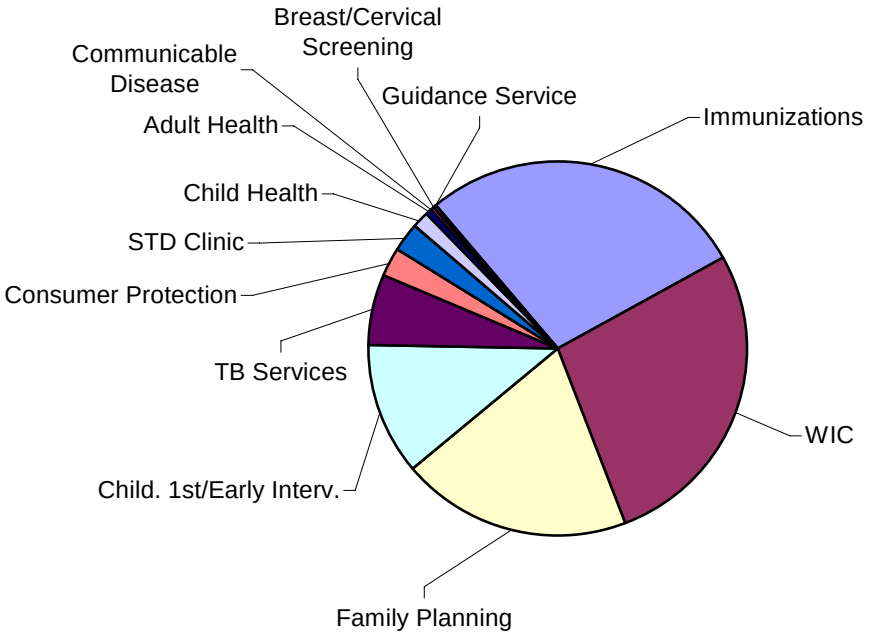
Attended Appointments for Ottawa County Health Department, State Fiscal Year 04



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 136 deaths a year
- $369,476.69 per death
- Total— $50,248,829.84 a year

Obesity

- 25.5% of population (8,354)
- $395.00 in additional medical costs per person
- Total—$3,299,830.00

Motor Vehicle-Related Injury Death

- Average 7.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$8,064,000.00 a year

Tobacco Use

- 32.5% of population (10,647)
- $3,300.00 in health care costs
- Total—$35,135,100.00 a year

Diabetes

- 12% of population (3,931)
- $13,243.00 in healthcare costs a year
- Total—$52,058,233.00 a year

Teen Pregnancy

- Average of 81 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $259,200.00 a year

Grand Total for Ottawa County:

$149,065,192.84

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
Email: neil@health.ok.gov

Ottawa County Health Department
1930 North Elm
Miami, Oklahoma 74354
918-540-2481

Looking Back to Move Forward

Report compiled by:
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Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

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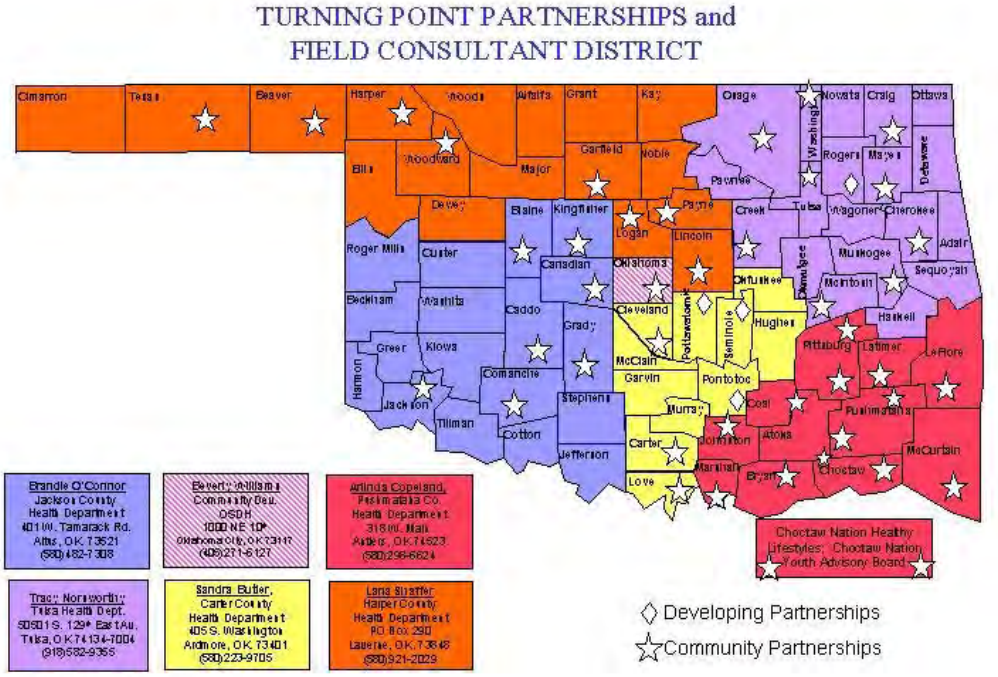

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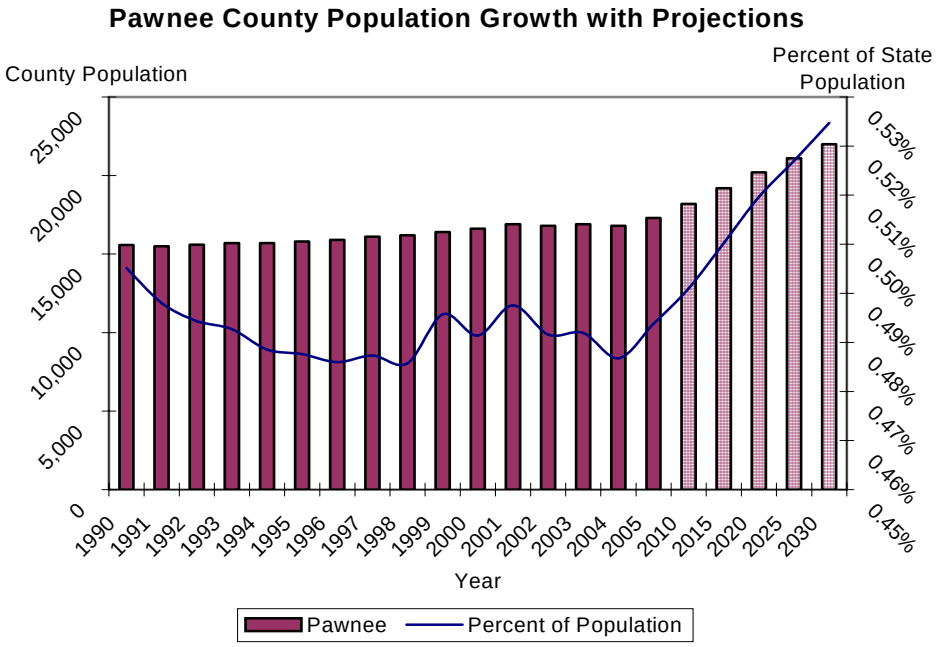
Demographics

** U.S. Census Bureau*

- Population estimates
  - 7% increase from 1990 to 2000 (15,575 to 16,612)
  - 1% increase from 2000 to 2004
  - Ranked 30th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 1%
- Race
  - Whites = 82%
  - Native Americans =12%
  - Blacks =1%
  - Other/Multiple = 5%
- Age
  - Under 5 = 6%
  - Over 64 = 15%
  - Median age = 38.5 years
- Housing units
  - Occupied = 6,383 (86%)
  - Vacant = 1,081 (14%)
- Disability (ages 21 to 64) = 23.1% national = 19.2% state = 21.5%
- Individuals below poverty = 13.0% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Pawnee County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 652 people in Pawnee County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 62.9 deaths a year, heart disease accounts for over $23 million a year in medical costs in Pawnee County.

Heart disease accounts for over $23 million a year in medical costs in Pawnee County.

Alzheimer's disease and the complications associated with it did not change in the rankings from the previous 11-year period (1983-1993). It is still the 12th ranked cause of death in people 65 and older but the number of deaths increased 125%.

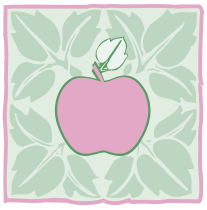
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 28.2% (4,734) of people in Pawnee County were considered obese which accounted for an additional $1,869,930 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Pawnee County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 3	UNINTENT. INJURY 4	UNINTENT. INJURY 14	UNINTENT. INJURY 15	UNINTENT. INJURY 24	CANCER 45	CANCER 84	HEART DISEASE 579	HEART DISEASE 693
2	CANCER 2	SUICIDE 1	SUICIDE 4	CANCER 4	CANCER 14	HEART DISEASE 31	HEART DISEASE 69	CANCER 296	CANCER 446
3	PERINATAL PERIOD 2		HOMICIDE/ LEGAL 3	SUICIDE 4	HEART DISEASE 10	UNINTENT. INJURY 15	BRONCHITIS/ EMPHYSEMA/ ASTHMA 11	STROKE 137	STROKE 155
4	UNINTENT. INJURY 2		BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	CONGENITAL ANOMALIES 2	SUICIDE 7	LIVER DISEASE 8	STROKE 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 92	UNINTENT. INJURY 107
5	HEART DISEASE 1		CONGENITAL ANOMALIES 1	HEART DISEASE 2	STROKE 5	SUICIDE 4	DIABETES MELLITUS 7	INFLUENZA/ PNEUMONIA 46	BRONCHITIS/ EMPHYSEMA/ ASTHMA 105
6	HERNIA 1		CANCER 1	HOMICIDE 2	HOMICIDE/ LEGAL 3	STROKE 3	LIVER DISEASE 7	KIDNEY DISEASE 40	INFLUENZA/ PNEUMONIA 51
7	SEPTICEMIA (BLOOD POISONING) 1		OTHER 2	NON-CANCEROUS TUMOR 1	LIVER DISEASE 2	DIABETES MELLITUS 1	UNINTENT. INJURY 6	DIABETES MELLITUS 34	DIABETES MELLITUS 44
8	SIDS 1			COMPLICATED PREGNANCY 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	HYPERTENSION 1	INFLUENZA/ PNEUMONIA 3	ATHERO-SCLEROSIS 33	KIDNEY DISEASE 42
9	OTHER 2			DIABETES MELLITUS 1	DIABETES MELLITUS 1	INFLUENZA/ PNEUMONIA 1	SEPTICEMIA (BLOOD POISONING) 3	UNINTENT. INJURY 27	ATHERO-SCLEROSIS 34
10				OTHER 6	TWO CAUSES TIED 1	TWO CAUSES TIED 1	EIGHT CAUSES TIED 1	PNEUMONITIS 21	LIVER DISEASE 29

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

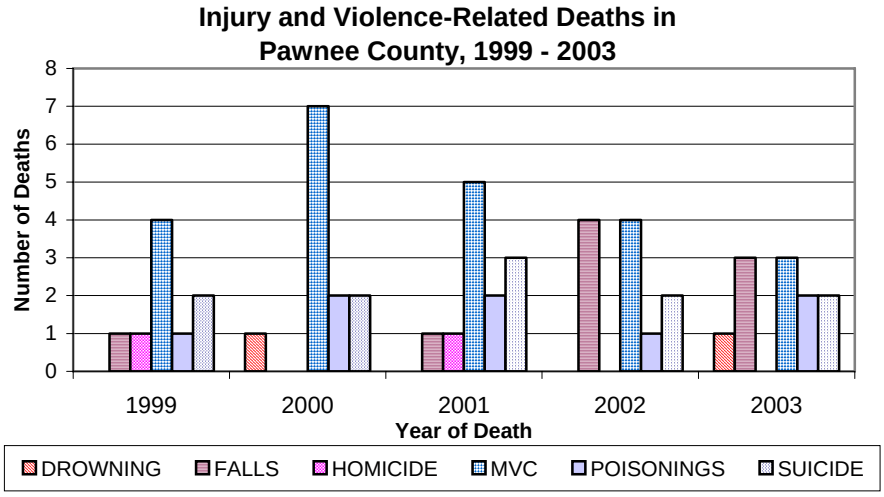
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Pawnee County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Pawnee County which has an average of 4.6 motor vehicle-related deaths a year, that translates to over $5 million a year.

Violence-related injuries (homicide and suicide) in Pawnee County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 44.8% (7,521) of people in Pawnee County use tobacco of some sort. Medical costs accumulated by those persons are almost $25 million a year for Pawnee County.

> *"Medical costs accumulated by those persons are almost **$25 million a year** for Pawnee County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 41.9% (7,035) of people in Pawnee County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.3% (1,226) of Pawnee County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $16,235,918.00 in one year for Pawnee County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

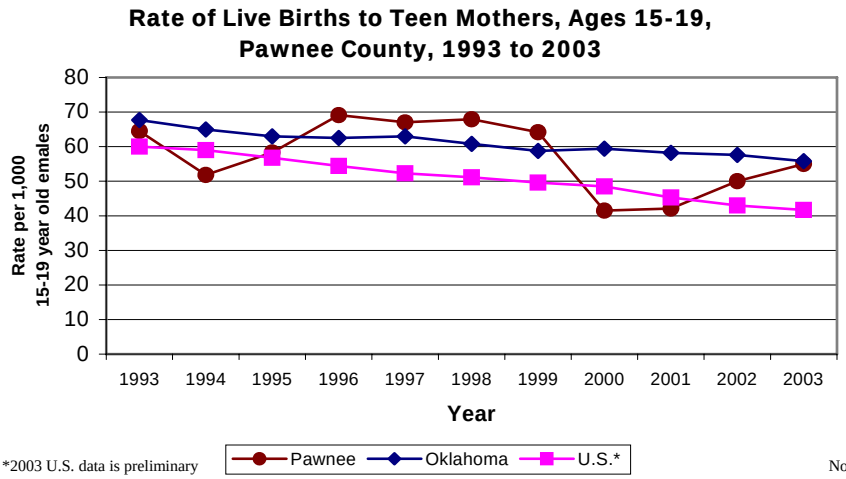
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Pawnee County had a teen birth rate of 55 in 2003 which was a 10% increase from 2002 (50) but a 15% decrease since 1993 (64.5).

With an average of 33 births per year, teen pregnancy costs the citizens of Pawnee County $105,600.00 a year.



*2003 U.S. data is preliminary

Note: 5 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 13.0% of persons in Pawnee County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Pawnee County is 11% below the state (14.7%) and 5% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Pawnee County, 2000 Census

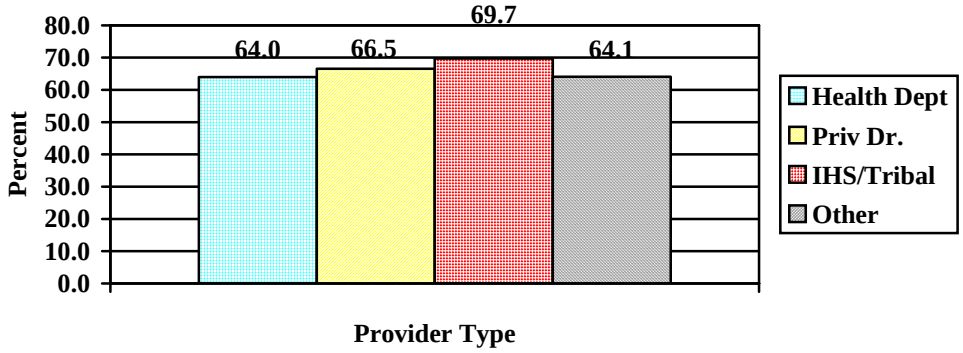
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	16,389	739	1,397	2,014	2,159	10,080
Cumulative Population		739	2,136	4,150	6,309	16,389
% of Total	100.0%	4.5%	8.5%	12.3%	13.2%	61.5%
Cumulative %		4.5%	13.0%	25.3%	38.5%	100.0%

OK By One - State Immunization Data

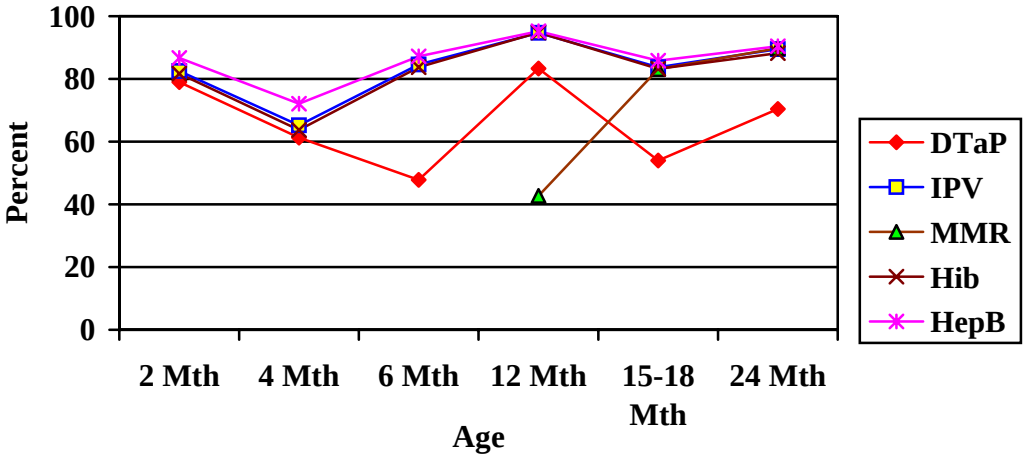
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

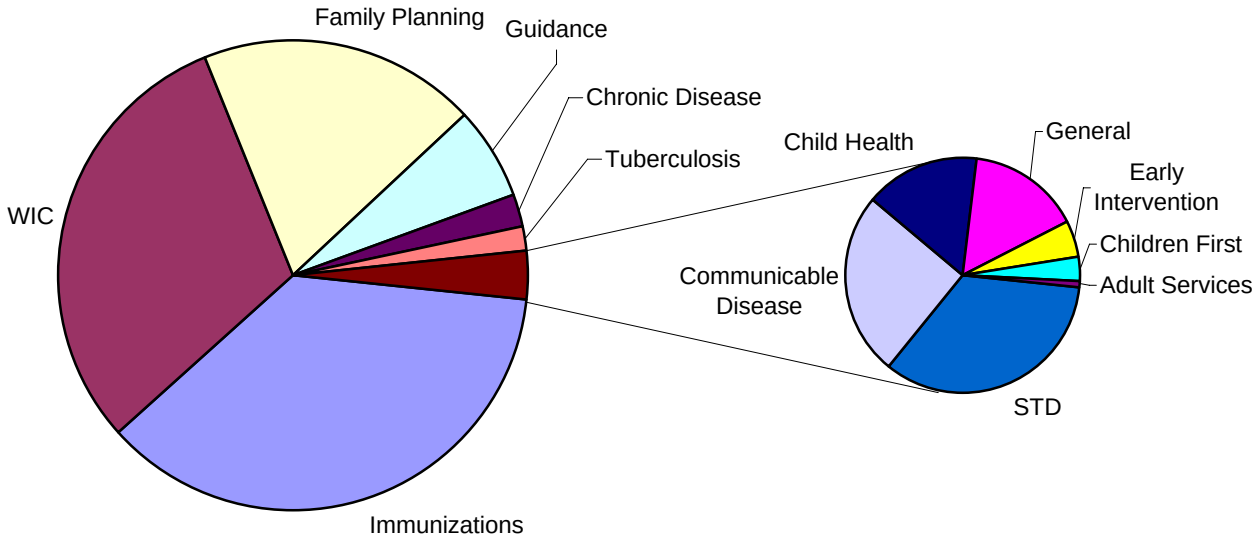


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services, OSDH*

Attended Appointments for Pawnee County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 63 deaths a year
- $369,476.69 per death
- Total— $23,277,031.47 a year

Obesity

- 28.2% of population (4,734)
- $395.00 in additional medical costs per person
- Total—$1,869,930.00

Motor Vehicle-Related Injury Death

- Average 4.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$5,152,000.00 a year

Tobacco Use

- 44.8% of population (7,521)
- $3,300.00 in health care costs
- Total—$24,819,300.00 a year

Diabetes

- 7.3% of population (1,226)
- $13,243.00 in healthcare costs a year
- Total—$16,235,918.00 a year

Teen Pregnancy

- Average of 33 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $105,600.00 a year

Grand Total for Pawnee County:

$71,459,779.47

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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1390 W Cherokee
Cleveland, OK 74020
918-358-2546

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

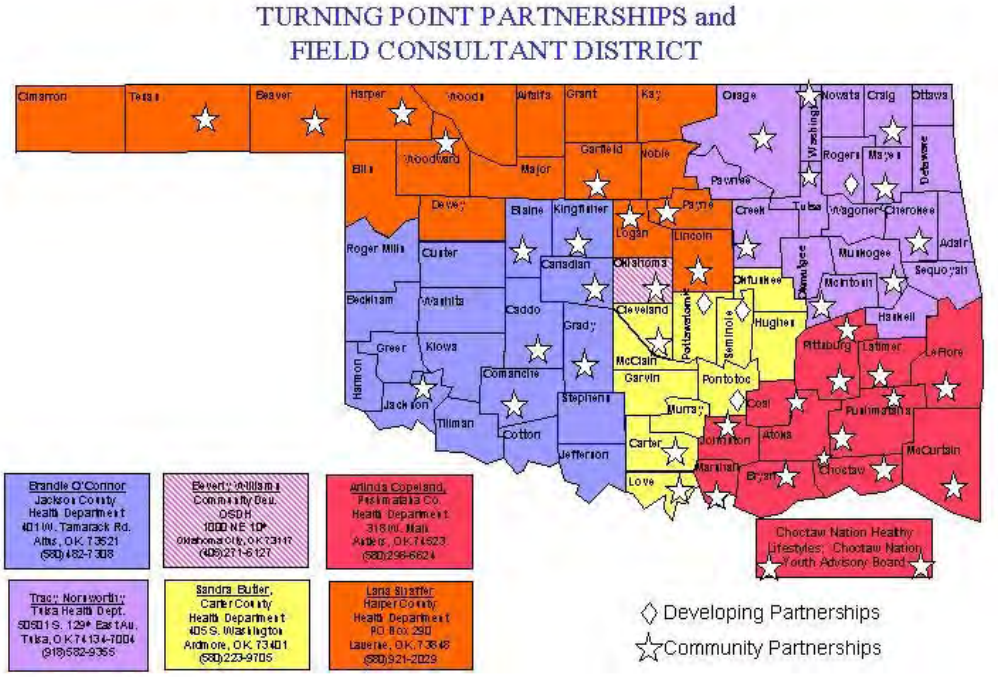
State of the County's Health Report

A Look Back To Move Forward

Payne County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Payne County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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Top 10 Leading Causes of Death	2
Nutrition & Obesity	2
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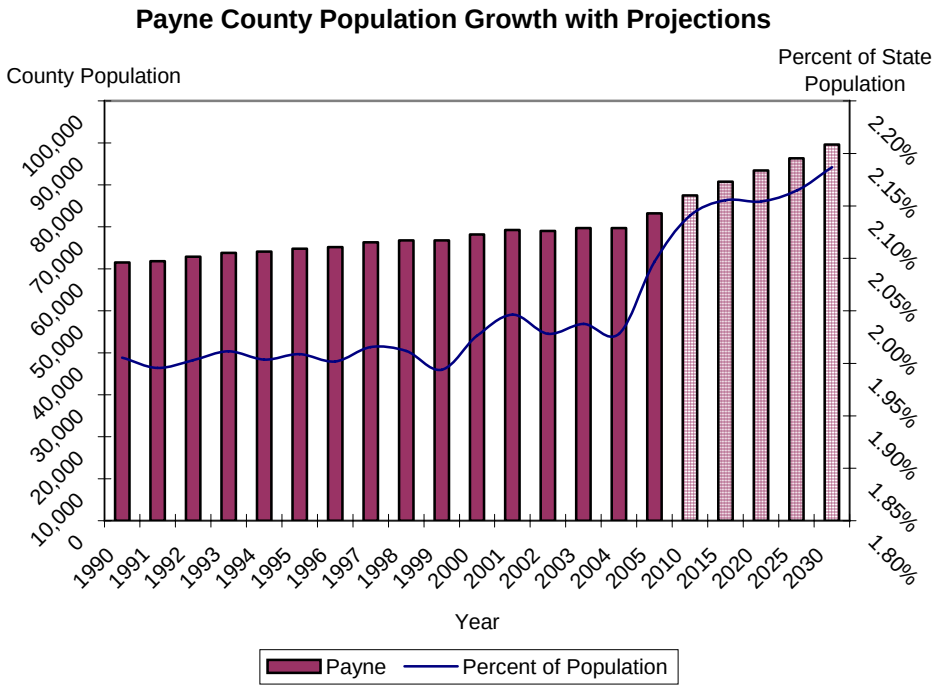
Demographics

** U.S. Census Bureau*

- Population estimates
  - 11% increase from 1990 to 2000 (61,507 to 68,190)
  - 2% increase from 2000 to 2004
  - Ranked 23rd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 84%
  - Native Americans =5%
  - Blacks =4%
  - Other/Multiple = 7%
- Age
  - Under 5 = 5%
  - Over 64 = 11%
  - Median age = 27.6 years
- Housing units
  - Occupied = 26,680 (91%)
  - Vacant = 2,646 (9%)
- Disability (ages 21 to 64) = 14.5% national = 19.2% state = 21.5%
- Individuals below poverty = 20.3% national = 12.4% state = 14.7%



Top 10 Leading

** Vital Statistics,* Health Care Information Systems, OSDH &

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Payne County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,779 people in Payne County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 162.1 deaths a year, heart disease accounts for almost $60 million a year in medical costs in Payne County.

Heart disease accounts for almost $60 million a year in medical costs in Payne County.

Alzheimer's disease and the complications associated with it have increased from the 14th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 485% increase in deaths.

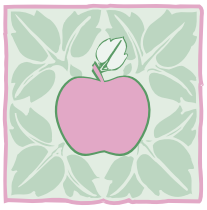
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 21.4% (15,207) of people in Payne County were considered obese which accounted for an additional $6,006,765 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Payne County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 18	UNINTENT. INJURY 8	UNINTENT. INJURY 45	UNINTENT. INJURY 38	CANCER 45	CANCER 87	CANCER 155	HEART DISEASE 1519	HEART DISEASE 1783
2	PERINATAL PERIOD 18	CANCER 3	SUICIDE 8	CANCER 16	UNINTENT. INJURY 35	HEART DISEASE 85	HEART DISEASE 144	CANCER 866	CANCER 1176
3	UNINTENT. INJURY 6	SEPTICEMIA (BLOOD POISOINING) 1	HOMIICIDE/ LEGAL 5	SUICIDE 12	HEART DISEASE 29	UNINTENT. INJURY 26	BRONCHITIS 27	STROKE 354	STROKE 382
4	SIDS 3	OTHER 2	CONGENITAL ANOMALIES 2	HIV 5	SUICIDE 14	LIVER DISEASE 11	UNINTENT. INJURY 21	BRONCHITIS/ EMPHYSEMA/ ASTHMA 257	BRONCHITIS/ EMPHYSEMA/ ASTHMA 298
5	HEART DISEASE 2		HEART DISEASE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	HIV 6	SUICIDE 9	STROKE 13	INFLUENZA/ PNEUMONIA 196	UNINTENT. INJURY 270
6	HOMIICIDE/ LEGAL 2		HYPERTENSION 1	HEART DISEASE 2	HOMIICIDE/ LEGAL 5	STROKE 8	INFLUENZA/ PNEUMONIA 11	UNINTENT. INJURY 91	INFLUENZA/ PNEUMONIA 217
7	CANCER 2		CANCER 1	HOMIICIDE/ LEGAL 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	DIABETES MELLITUS 10	DIABETES MELLITUS 86	DIABETES MELLITUS 103
8	SEPTICEMIA (BLOOD POISONING) 2		KIDNEY DISEASE 1	INFLUENZA/ PNEUMONIA 2	STROKE 4	INFLUENZA/ PNEUMONIA 5	SEPTICEMIA (BLOOD POISONING) 9	ALZHEIMER'S DISEASE 76	SEPTICEMIA (BLOOD POISONING) 85
9	STROKE 1		PERINATAL PERIOD 1	AORTIC ANEURYSM 1	DIABETES MELLITUS 4	KIDNEY DISEASE 5	SUICIDE 8	SEPTICEMIA (BLOOD POISONING) 68	ALZHEIMER'S DISEASE 78
10	INFLUENZA/ PNEUMONIA 1		OTHER 4	TWO CAUSES TIED 1	INFLUENZA/ PNEUMONIA 2	HIV 4	LIVER DISEASE 5	KIDNEY DISEASE 65	KIDNEY DISEASE 72

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

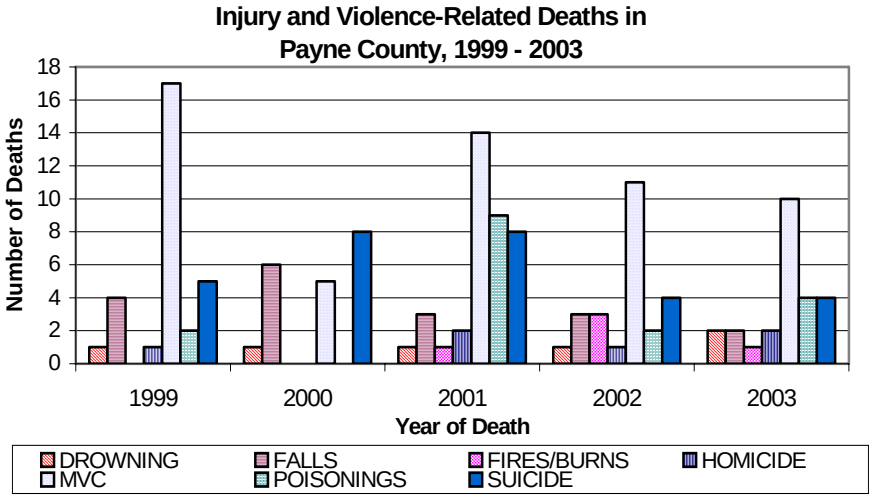
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Payne County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Payne County which has an average of 11.4 motor vehicle-related deaths a year, that translates to almost $13 million a year.

Violence-related injuries (homicide and suicide) in Payne County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 19% (13,501) of people in Payne County use tobacco of some sort. Medical costs accumulated by those persons are almost $45 million a year for Payne County.

> *"Medical costs accumulated by those persons are almost **$45 million a year** for Payne County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 22.8% (16,201) of people in Payne County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.5% (4,619) of Payne County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $61,169,417.00 in one year for Payne County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

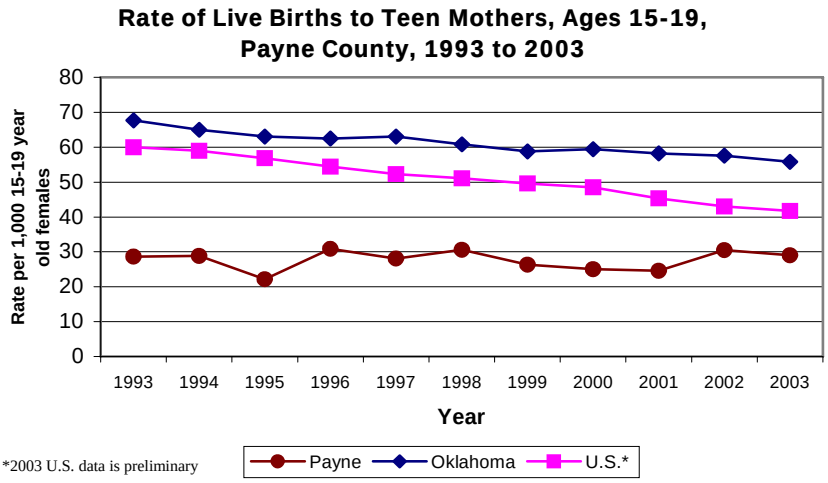
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Payne County had a teen birth rate of 29 in 2003 which was a 5% decrease from 2002 (30.5) but a 1% increase since 1993 (28.6).

With an average of 96 births per year, teen pregnancy costs the citizens of Payne County $307,200.00 a year.



*2003 U.S. data is preliminary

Note: 13 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 20.3% of persons in Payne County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Payne County is 38% above the state (14.7%) and 63% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Payne County, 2000 Census

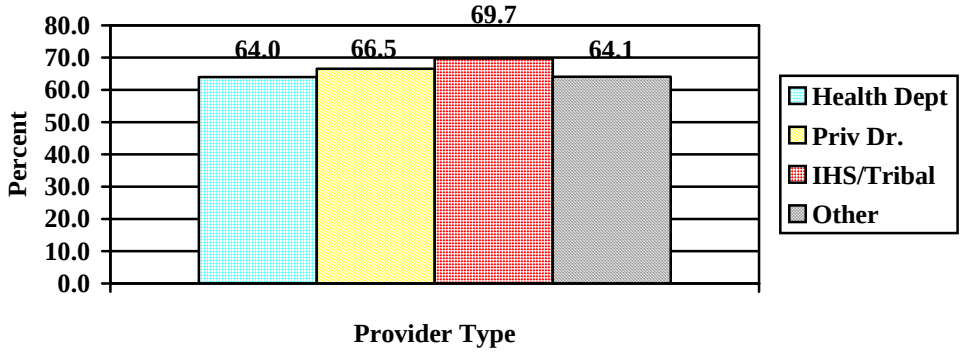
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	61,380	5,966	6,465	6,850	6,493	35,606
Cumulative Population		5,966	12,431	19,281	25,774	61,380
% of Total	100.0%	9.7%	10.5%	11.2%	10.6%	58.0%
Cumulative %		9.7%	20.3%	31.4%	42.0%	100.0%

OK By One - State Immunization Data

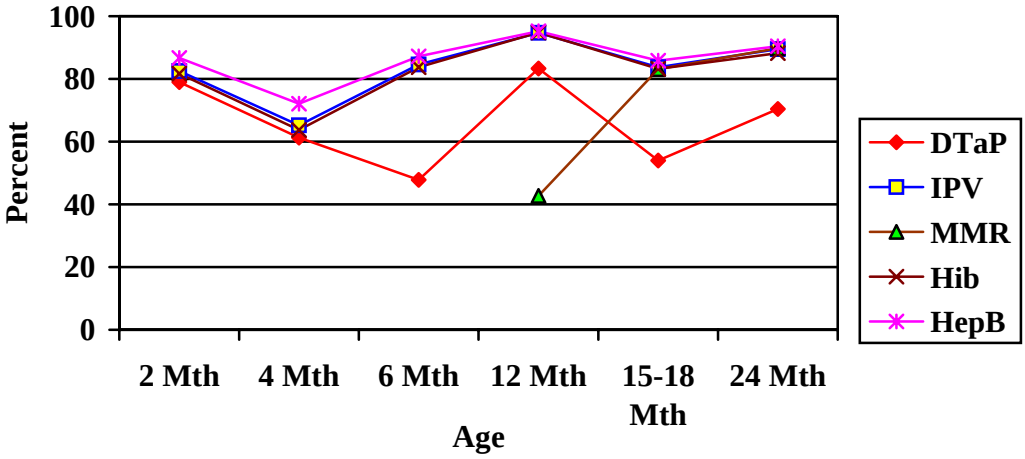
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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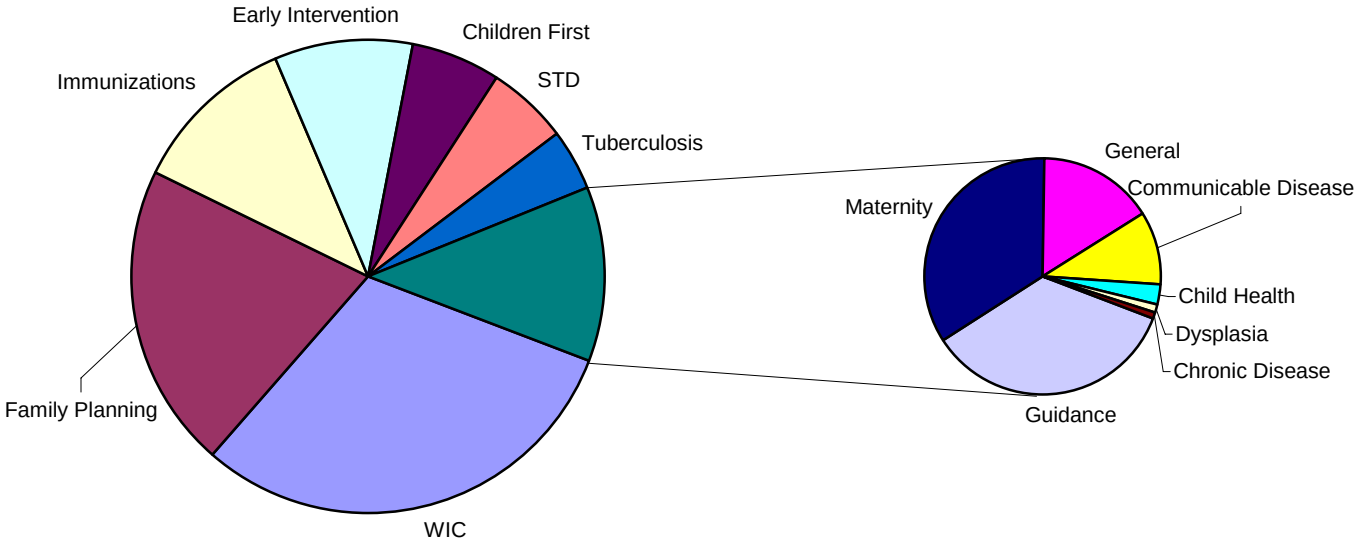

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 162 deaths a year
- $369,476.69 per death
- Total— $59,855,223.78 a year

Obesity

- 21.4% of population (15,207)
- $395.00 in additional medical costs per person
- Total—$6,006,765.00

Motor Vehicle-Related Injury Death

- Average 11.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$12,768,000.00 a year

Tobacco Use

- 19% of population (13,501)
- $3,300.00 in health care costs
- Total—$44,553,300.00 a year

Diabetes

- 6.5% of population (4,619)
- $13,243.00 in healthcare costs a year
- Total—$61,169,417.00 a year

Teen Pregnancy

- Average of 96 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $307,200.00 a year

Grand Total for Payne County:

$184,659,905.78

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Phone: 405-271-6127
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Email: neil@health.ok.gov

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918-225-3377
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Looking Back to Move Forward

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The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Payne County- Stillwater Mayor's Wellness Committee

We want to say thank you to all the members of the Stillwater Mayor's Wellness Committee.

- American Cancer Society
- City of Stillwater
- COCAA
- Community Volunteers
- Department of Human Services
- Mission of Hope
- OSU
- OSU School of Applied Health & Educational Psychology
- OSU Service-Learning Volunteer Center
- OSU Center for Health Sciences - PaNOK Area Prevention Resource Center
- Payne County Counseling
- Payne County Health Department
- Starting Point II
- Stillwater Housing Authority
- Stillwater Medical Center
- Youth and Family Services

OKLAHOMA STATE DEPARTMENT OF HEALTH

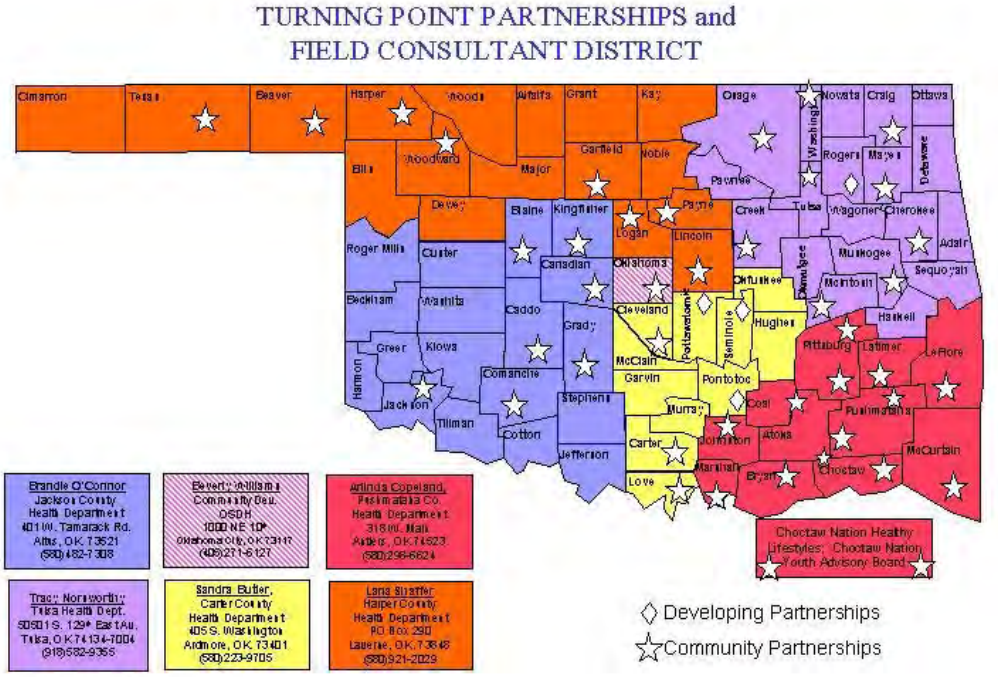
State of the County's Health Report

A Look Back To Move Forward

Pittsburg County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Pittsburg County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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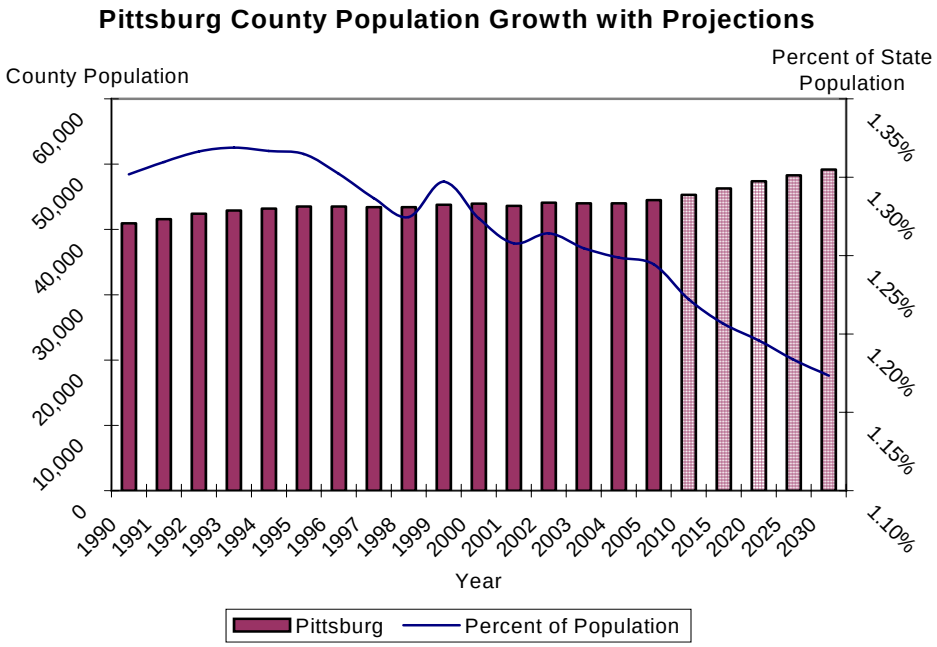
Demographics

** U.S. Census Bureau*

- Population estimates
  - 7% increase from 1990 to 2000 (40,950 to 43,953)
  - 0% increase from 2000 to 2004
  - Ranked 42nd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 77%
  - Native Americans =12%
  - Blacks =4%
  - Other/Multiple = 6%
- Age
  - Under 5 = 6%
  - Over 64 = 17%
  - Median age = 39.4 years
- Housing units
  - Occupied = 17,157 (80%)
  - Vacant = 4,363 (20%)
- Disability (ages 21 to 64) = 27.0% national = 19.2% state = 21.5%
- Individuals below poverty = 17.2% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Pittsburg County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,983 people in Pittsburg County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 196.1 deaths a year, heart disease accounts for over $72 million a year in medical costs in Pittsburg County.

Heart disease accounts for over $72 million a year in medical costs in Pittsburg County.

Alzheimer's disease and the complications associated with it have increased from the 12th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 232% increase in deaths.

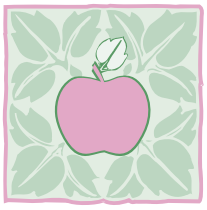
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 24.9% (10,998) of people in Pittsburg County were considered obese which accounted for an additional $4,344,210 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Pittsburg County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 17	UNINTENT. INJURY 8	UNINTENT. INJURY 36	UNINTENT. INJURY 27	UNINTENT. INJURY 49	CANCER 109	CANCER 251	HEART DISEASE 1841	HEART DISEASE 2157
2	PERINATAL PERIOD 14	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	SUICIDE 13	CANCER 11	HEART DISEASE 31	HEART DISEASE 88	HEART DISEASE 190	CANCER 904	CANCER 1307
3	UNINTENT. INJURY 13	CANCER 1	HOMICIDE/ LEGAL 9	SUICIDE 11	CANCER 27	UNINTENT. INJURY 32	BRONCHITIS/ EMPHYSEMA/ ASTHMA 41	STROKE 263	STROKE 306
4	HOMICIDE/ LEGAL 3	CONGENITAL ANOMALIES 1	CANCER 4	HOMICIDE/ LEGAL 9	SUICIDE 22	LIVER DISEASE 15	STROKE 28	INFLUENZA/ PNEUMONIA 259	UNINTENT. INJURY 287
5	SEPTICEMIA (BLOOD POISONING) 2	OTHER 4	AORTIC ANEURYSM 1	HEART DISEASE 5	HOMICIDE/ LEGAL 16	STROKE 9	UNINTENT. INJURY 24	BRONCHITIS/ EMPHYSEMA/ ASTHMA 217	INFLUENZA/ PNEUMONIA 285
6	SIDS 2		HEART DISEASE 1	HIV 3	HIV 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	DIABETES MELLITUS 21	ATHERO-SCLEROSIS 166	BRONCHITIS/ EMPHYSEMA/ ASTHMA 268
7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1		LIVER DISEASE 1	DIABETES MELLITUS 1	STROKE 5	DIABETES MELLITUS 7	LIVER DISEASE 19	UNINTENT. INJURY 98	ATHERO-SCLEROSIS 178
8	HEART DISEASE 1		OTHER 7	STROKE 1	LIVER DISEASE 4	INFLUENZA/ PNEUMONIA 7	INFLUENZA/ PNEUMONIA 15	ALZHEIMER'S DISEASE 63	DIABETES MELLITUS 91
9	INFLUENZA/ PNEUMONIA 1				INFLUENZA/ PNEUMONIA 3	HOMICIDE/ LEGAL 5	ATHERO-SCLEROSIS 9	DIABETES MELLITUS 61	LIVER DISEASE 70
10	KIDNEY DISEASE 1				MENINGITIS 3	SUICIDE 5	SEPTICEMIA (BLOOD POISONING) 6	KIDNEY DISEASE 58	TWO CAUSES TIED 67

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health

July 200

Injury and Violence

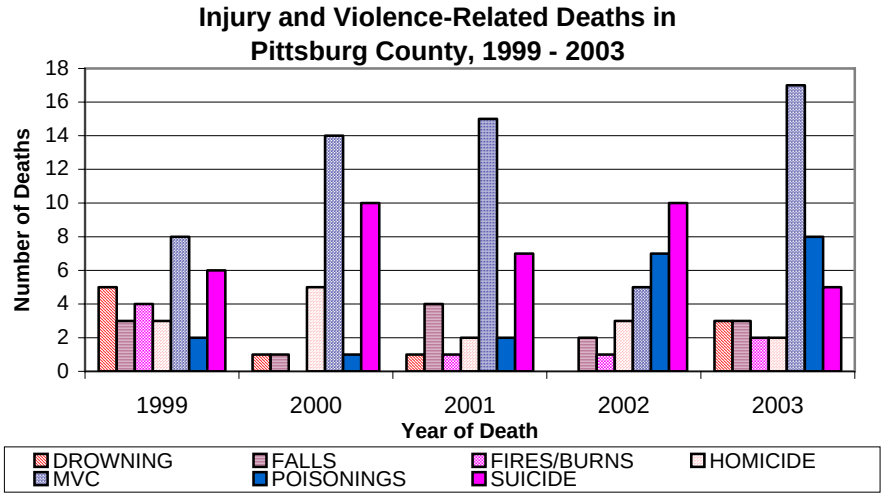
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Pittsburg County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Pittsburg County which has an average of 11.8 motor vehicle-related deaths a year, that translates to over $13 million a year.

Violence-related injuries (homicide and suicide) in Pittsburg County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 29.9% (13,206) of people in Pittsburg County use tobacco of some sort. Medical costs accumulated by those persons are almost $44 million a year for Pittsburg County.

> *"Medical costs accumulated by those persons are almost **$44 million a year** for Pittsburg County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 32.7% (14,443) of people in Pittsburg County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 7.5% (3,313) of Pittsburg County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $43,874,059.00 in one year for Pittsburg County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

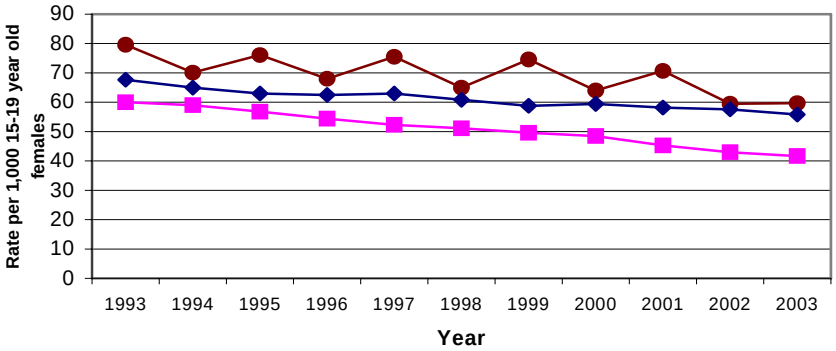
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Pittsburg County had a teen birth rate of 59.7 in 2003 which was a 0% increase from 2002 (59.5) but a 25% decrease since 1993 (79.6).

With an average of 99 births per year, teen pregnancy costs the citizens of Pittsburg County $316,800.00 a year.

Rate of Live Births to Teen Mothers, Ages 15-19, Pittsburg County, 1993 to 2003



*2003 U.S. data is preliminary

Pittsburg — Oklahoma — U.S.*

Note: 17 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 17.2% of persons in Pittsburg County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Pittsburg County is 17% above the state (14.7%) and 39% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Pittsburg County, 2000 Census

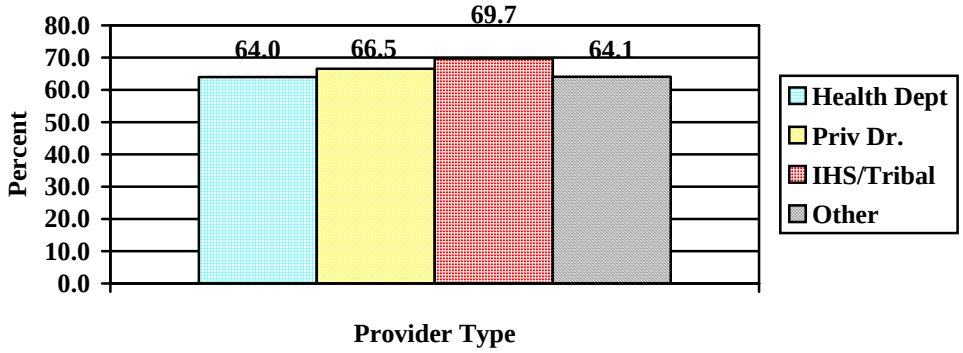
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	40,975	2,721	4,328	5,014	5,315	23,597
Cumulative Population		2,721	7,049	12,063	17,378	40,975
% of Total	100.0%	6.6%	10.6%	12.2%	13.0%	57.6%
Cumulative %		6.6%	17.2%	29.4%	42.4%	100.0%

OK By One - State Immunization Data

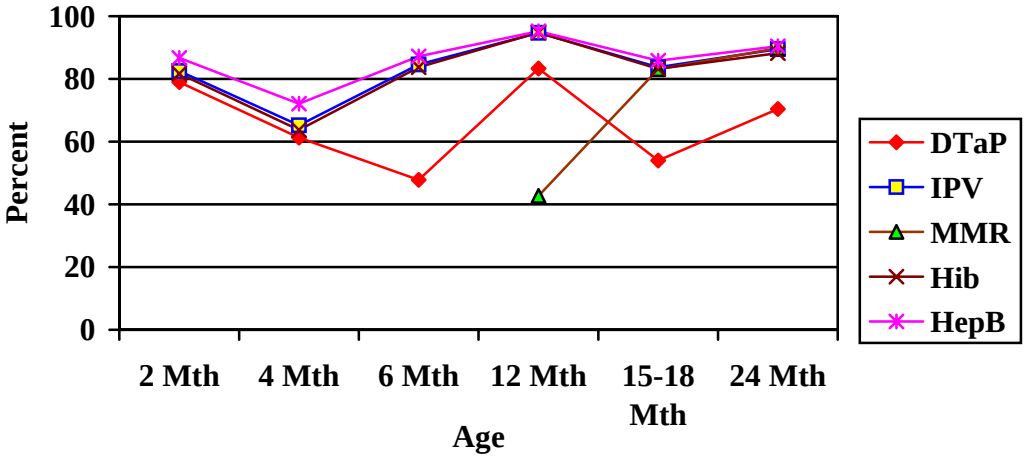
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

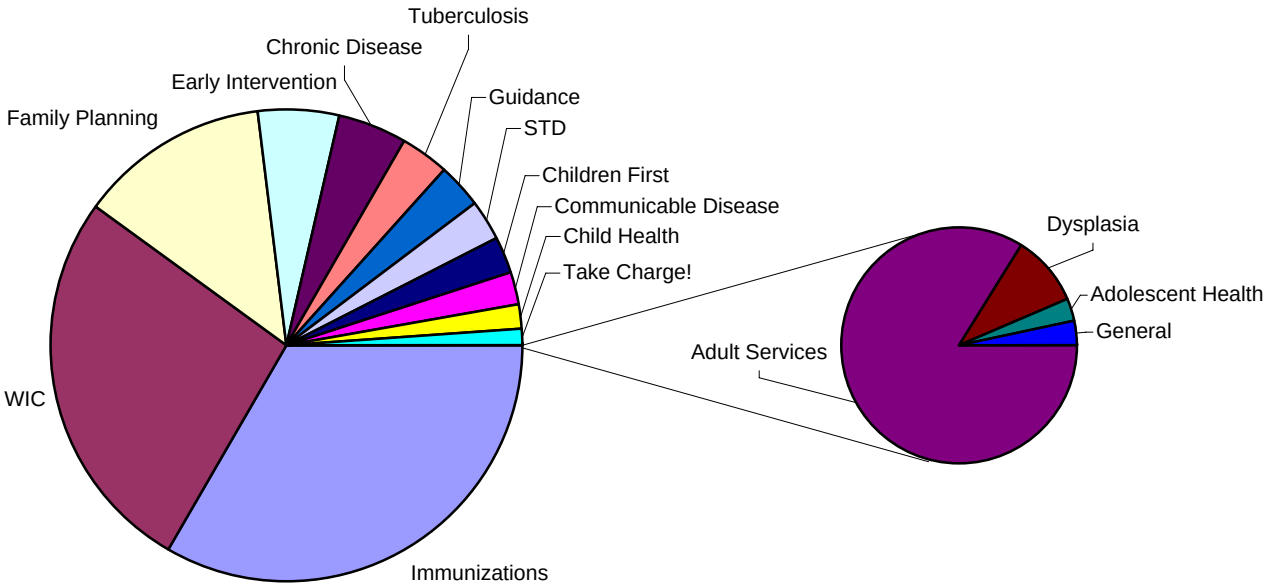


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for Pittsburg County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 196 deaths a year
- $369,476.69 per death
- Total— $72,417,431.24 a year

Obesity

- 24.9% of population (10,998)
- $395.00 in additional medical costs per person
- Total—$4,344,210.00

Motor Vehicle-Related Injury Death

- Average 11.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$13,216,000.00 a year

Tobacco Use

- 29.9% of population (13,206)
- $3,300.00 in health care costs
- Total—$43,579,800.00 a year

Diabetes

- 7.5% of population (3,313)
- $13,243.00 in healthcare costs a year
- Total—$43,874,059.00 a year

Teen Pregnancy

- Average of 99 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $316,800.00 a year

Grand Total for Pittsburg County:

$177,748,300.24

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
Email: neil@health.ok.gov

Pittsburg County Health Department
620 S Third
McAlester, OK 74501
918-423-1267

Looking Back to Move Forward

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Pittsburg County— Local Service Coalition

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- Carl Albert Community Mental Health Center
- CASA of Southeast Oklahoma
- Child Care of South East Oklahoma
- Choctaw CARES Project
- Choctaw Nation Core Capacity
- Community Volunteers
- Concerned Citizens
- Counseling Center of S.E. Oklahoma
- Department of Human Services
- East Central University -McAlester Campus
- Eastern Oklahoma Youth Services
- Elected Officials
- First Baptist Church
- Independent Partners
- Kiamichi Technology Center
- Law Enforcement
- McAlester Public Schools
- Oklahoma Juvenile Authority
- Oklahoman For Independent Living
- OSU Extension Center
- Pittsburg County Child Advocacy Center/ PC CARE
- Pittsburg County Health Department
- Professional Counseling and Consulting
- Public Schools
- The Oaks, Area Prevention Resource Center
- Turning Point of Oklahoma
- Workforce Oklahoma
- Youth Emergency Shelter

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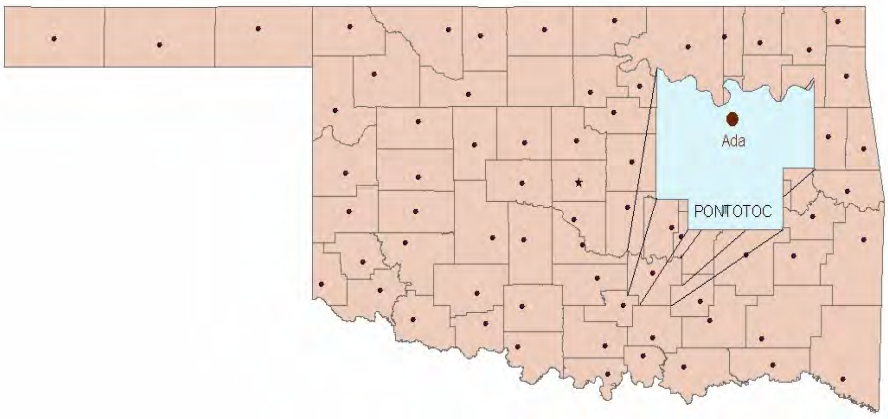

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Demographics

- Population estimates
  - 3% increase from 1990 to 2000 (34,119 to 35,143)
  - no change from 2000 to 2004
  - Ranked 43rd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 76%
  - Native Americans =16%
  - Blacks =2%
  - Other/Multiple = 7%
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  - Median age = 35.7 years
- Housing units
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  - Vacant = 1,597 (10%)
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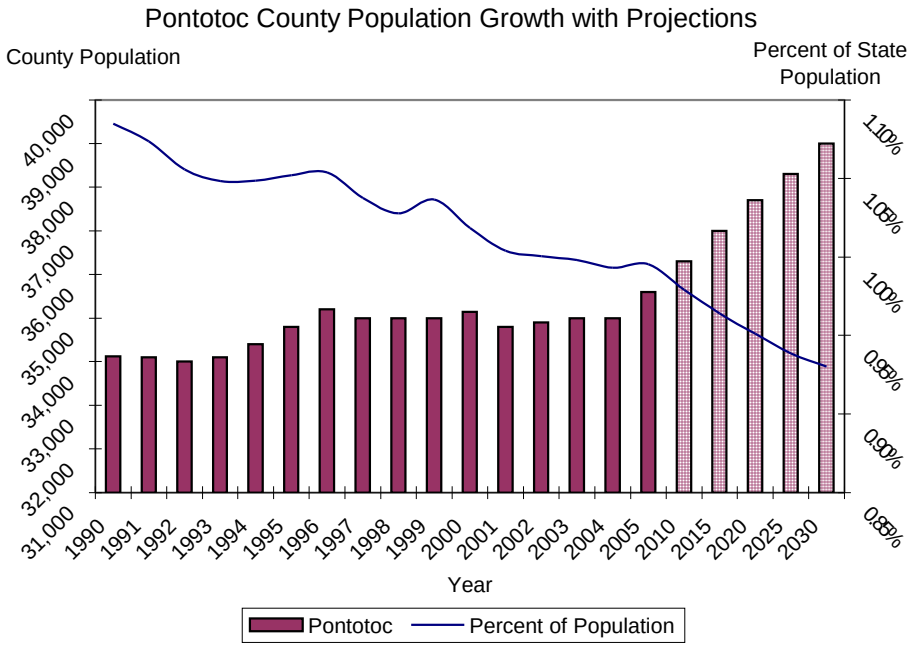

* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

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Alzheimer's disease and the complications associated have increased from the 15th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 100% increase in deaths.

* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

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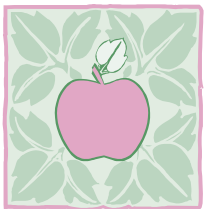
In 2002-2004, 25.3% (8,899) of people in Pontotoc County were considered obese which accounted for an additional $3,515,105 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Pontotoc County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 15	UNINTENT. INJURY 7	UNINTENT. INJURY 37	UNINTENT. INJURY 22	UNINTENT. INJURY 35	HEART DISEASE 71	HEART DISEASE 151	HEART DISEASE 1284	HEART DISEASE 1544
2	CONGENITAL ANOMALIES 13	CANCER 2	SUICIDE 8	CANCER 8	HEART DISEASE 31	CANCER 59	CANCER 149	CANCER 682	CANCER 927
3	UNINTENT. INJURY 7	CONGENITAL ANOMALIES 1	HOMICIDE/ LEGAL 6	SUICIDE 7	CANCER 22	UNINTENT. INJURY 23	BRONCHITIS/ EMPHYSEMA/ ASTHMA 30	STROKE 440	STROKE 470
4	SIDS 3	HEART DISEASE 1	CANCER 4	HOMICIDE/ LEGAL 5	SUICIDE 19	LIVER DISEASE 14	LIVER DISEASE 17	BRONCHITIS/ EMPHYSEMA/ ASTHMA 204	BRONCHITIS/ EMPHYSEMA/ ASTHMA 247
5	APPENDIX DISEASE 1	HIV 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	HEART DISEASE 4	HOMICIDE/ LEGAL 7	STROKE 11	STROKE 15	INFLUENZA/ PNEUMONIA 202	INFLUENZA/ PNEUMONIA 214
6	NON-CANCEROUS TUMOR 1	HOMICIDE/ LEGAL 1	COMPLICATED PREGNANCY 1	CONGENITAL ANOMALIES 2	STROKE 4	SUICIDE 11	UNINTENT. INJURY 14	DIABETES MELLITUS 88	UNINTENT. INJURY 213
7	HEART DISEASE 1	SEPTICEMIA (BLOOD POISONING) 1	CONGENITAL ANOMALIES 1	HIV 2	DIABETES MELLITUS 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 9	DIABETES MELLITUS 11	SEPTICEMIA (BLOOD POISONING) 72	DIABETES MELLITUS 110
8	HERNIA 1	SUICIDE 1	DIABETES MELLITUS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	VIRAL HEPATITIS 4	DIABETES MELLITUS 6	INFLUENZA/ PNEUMONIA 6	UNINTENT. INJURY 68	SEPTICEMIA (BLOOD POISONING) 82
9	INFLUENZA/ PNEUMONIA 1	OTHER 1	HEART DISEASE 1	OTHER 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	HOMICIDE/ LEGAL 6	SEPTICEMIA (BLOOD POISONING) 6	KIDNEY DISEASE 55	KIDNEY DISEASE 69
10	THREE CAUSES TIED 1		TWO CAUSES TIED 1		KIDNEY DISEASE 1	INFLUENZA/ PNEUMONIA 4	SUICIDE 6	ATHERO-SCLEROSIS 47	SUICIDE 62

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

* *Vital Statistics,* Health Care Information Systems, OSDH & National Safety Council

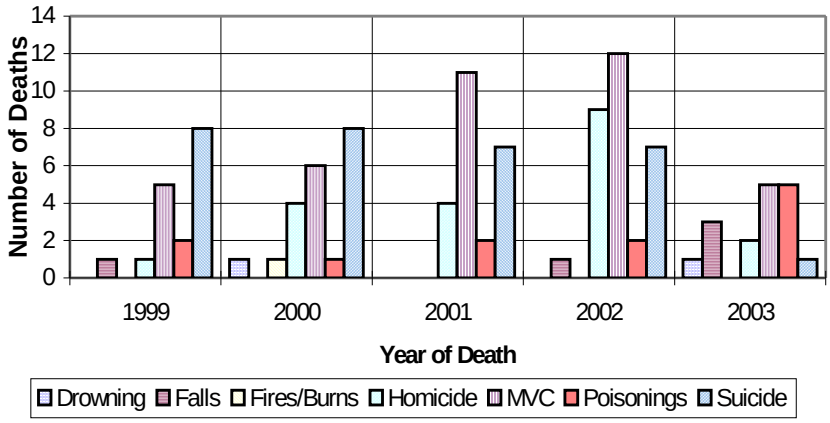
Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Pontotoc County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Pontotoc County which has an average of 7.8 motor vehicle-related deaths a year, that translates to almost $9 million a year.

Violence-related injuries (homicide and suicide) in Pontotoc County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).

Injury and Violence-Related Deaths in Pontotoc County, 1999-2003



Tobacco Use

* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 29.8% (10,482) of people in Pontotoc County use tobacco of some sort. Medical costs accumulated by those persons are almost $35 million a year for Pontotoc County.

*"Medical costs accumulated by those persons are almost **$35 million a year** for Pontotoc County"*

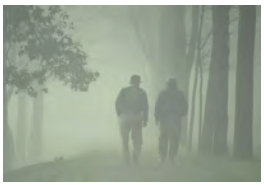
Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 28.3% (9,954) of people in Pontotoc County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.9% (2,427) of Pontotoc County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $32,140,761 in one year for Pontotoc County.



Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics,* Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

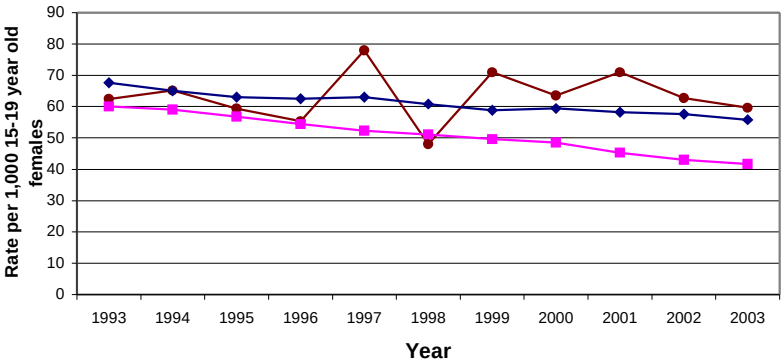
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Pontotoc County had a teen birth rate of 59.6 in 2003 which was a 5% decrease from 2002 (62.7) and only a 4% decrease since 1993 (62.4).

With an average of 81 births per year, teen pregnancy costs the citizens of Pontotoc County $259,200 a year.

Rate of Live Births to Teen Mothers, Ages 15-19, 1993 to 2003



*2003 U.S. data is preliminary

Pontotoc — Oklahoma — U.S.*

Note: Eleven births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 16.5% of persons in Pontotoc County for whom poverty status was known had an income below what was need to live at the federal poverty level. Pontotoc County is 12% above the state and 33% above the nation for persons with incomes below the federal poverty level.

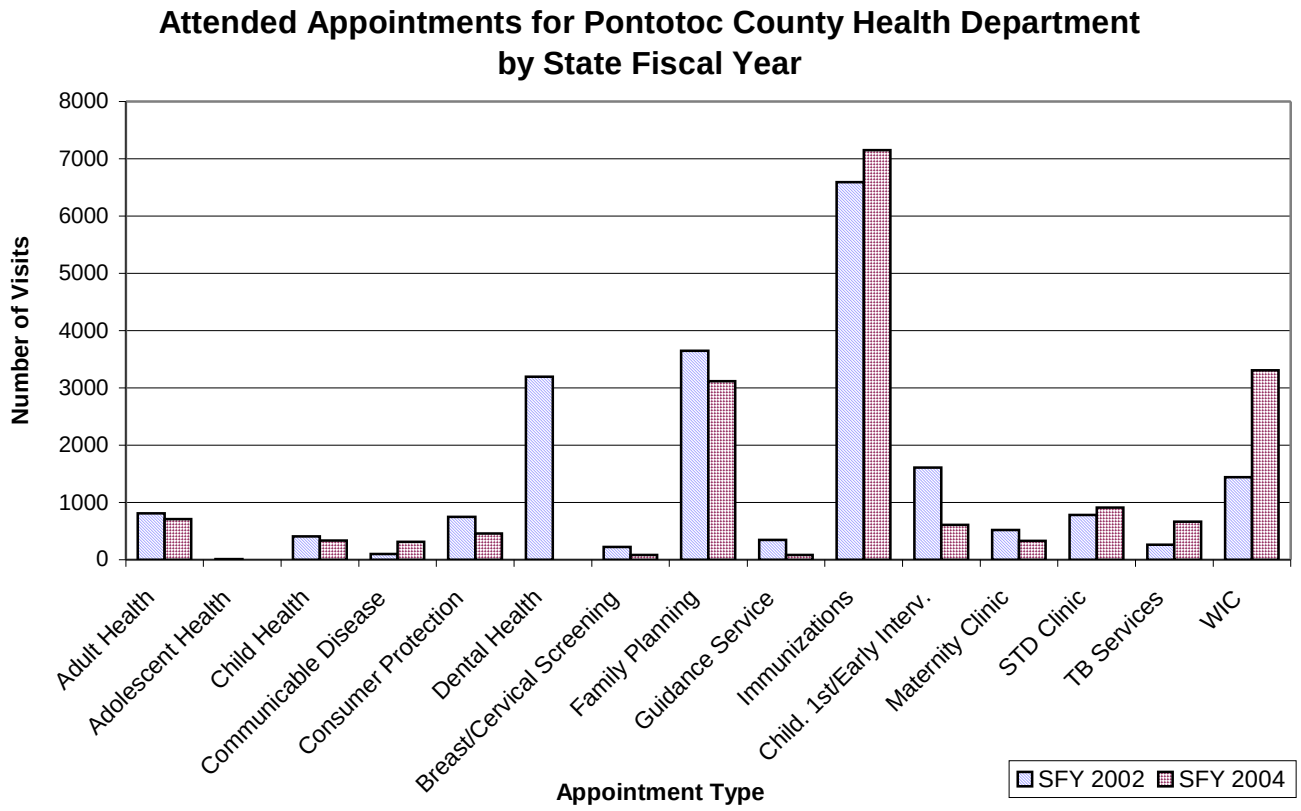
Income to Poverty Ratio Comparison, Pontotoc County, 1990 and 2000 Census

1990 Census	Total	Under .50	.50 to .74	.75 to .99	1.00 to 1.24	1.25 to 1.49	1.50 to 1.74	1.75 to 1.84	1.85 to 1.89	2.00 and over
Population	32,759	2,632	1,989	2,503	2,854	1,904	2,147	978	1,081	16,671
Cumulative Population		2,632	4,621	7,124	9,978	11,882	14,029	15,007	16,088	32,759
% of Total	100.0%	8.0%	6.1%	7.6%	8.7%	5.8%	6.6%	3.0%	3.3%	50.9%
Cumulative %		8.0%	14.1%	21.7%	30.5%	36.3%	42.8%	45.8%	49.1%	100.0%
2000 Census	Total	Under .50	.50 to .74	.75 to .99	1.00 to 1.24	1.25 to 1.49	1.50 to 1.74	1.75 to 1.84	1.85 to 1.89	2.00 and over
Population	33,936	2,056	1,523	2,022	2,381	2,672	2,059	1,031	837	19,355
Cumulative Population		2,056	3,579	5,601	7,982	10,654	12,713	13,744	14,581	33,936
% of Total	100.0%	6.1%	4.5%	6.0%	7.0%	7.9%	6.1%	3.0%	2.5%	57.0%
Cumulative %		6.1%	10.5%	16.5%	23.5%	31.4%	37.5%	40.5%	43.0%	100.0%
2000 -1990 Differential										
Population Difference	1,177	(576)	(466)	(481)	(473)	768	(88)	53	(244)	2,684
% Difference	3.6%	-21.9%	-23.4%	-19.2%	-16.6%	40.3%	-4.1%	5.4%	-22.6%	16.1%

* Note: ratio< 1, income is less than the poverty level; ratio = 1.00, income and poverty are the same; ratio > 1, income is higher than poverty level

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 140 deaths a year
- $369,476.69 per death
- Total—$51,874,527.28 a year

Obesity

- 25.3% of population (8,899)
- $395.00 in additional medical costs per person
- Total—$3,515,105.00

Motor Vehicle-Related Injury Death

- Average 7.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$8,736,000.00 a year

Tobacco Use

- 29.8% of population (10,482)
- $3,300.00 in health care costs
- Total—$34,590,600.00 a year

Diabetes

- 6.9% of population (2,427)
- $13,243.00 in healthcare costs a year
- Total—$32,140,761.00 a year

Teen Pregnancy

- Average of 81 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total—$259,200.00 a year

Grand Total for Pontotoc County:

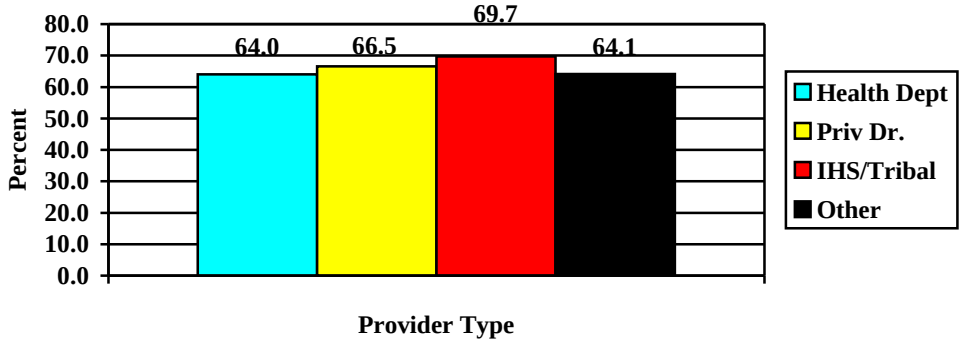
$131,116,193.28

OK By One - State Immunization Data

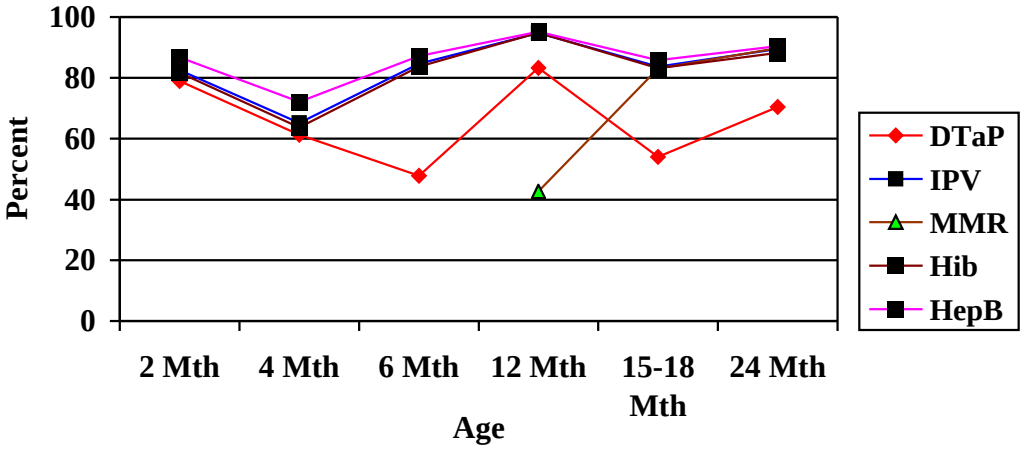
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



**Note: County level data will be available soon.

OKLAHOMA STATE DEPARTMENT OF HEALTH

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Community Development Service

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Oklahoma City, OK 73117

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Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the department of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Pontotoc County—Success By Six Community Coalition

We want to say Thank You to all the people that make the Success By Six Community Coalition such a huge success.

OKLAHOMA STATE DEPARTMENT OF HEALTH

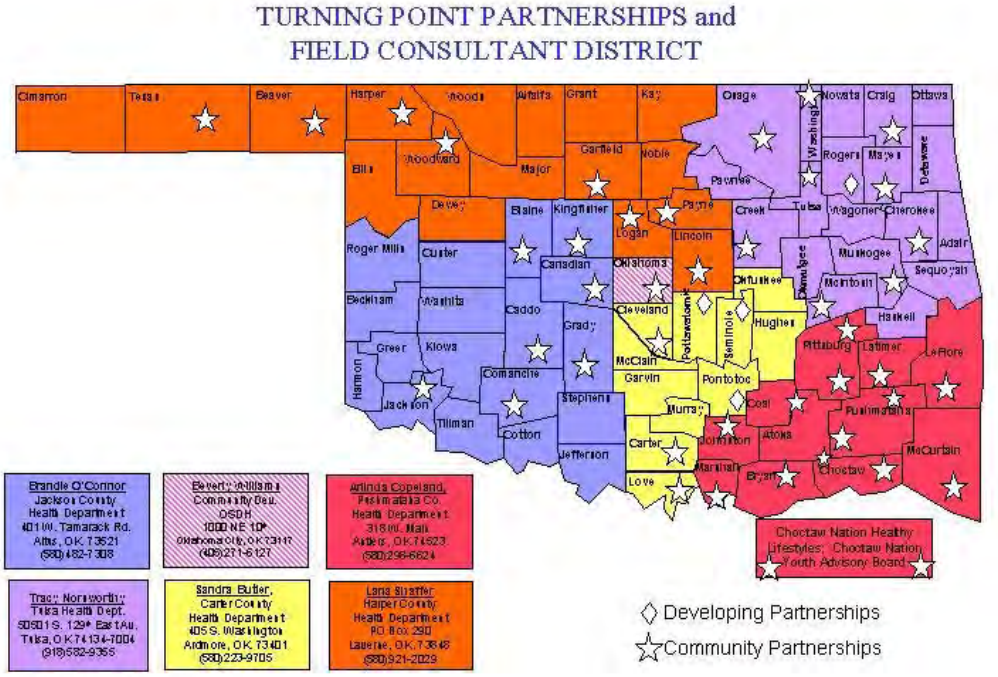
State of the County's Health Report

A Look Back To Move Forward

Pottawatomie County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Pottawatomie County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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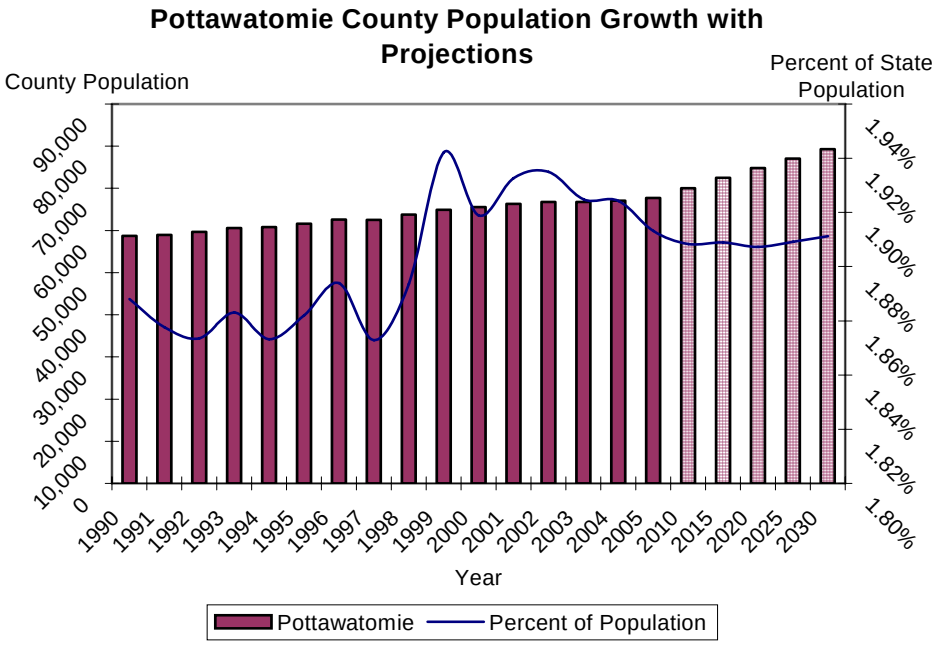
Demographics

** U.S. Census Bureau*

- Population estimates
  - 12% increase from 1990 to 2000 (58,760 to 65,521)
  - 2% increase from 2000 to 2004
  - Ranked 20th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 80%
  - Native Americans =«Indian %»
  - Blacks =3%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 14%
  - Median age = 35.5 years
- Housing units
  - Occupied = 24,540 (90%)
  - Vacant = 2,762 (10%)
- Disability (ages 21 to 64) = 23.3% national = 19.2% state = 21.5%
- Individuals below poverty = 14.6% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Pottawatomie County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,497 people in Pottawatomie County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 243.9 deaths a year, heart disease accounts for over $90 million a year in medical costs in Pottawatomie County.

Heart disease accounts for over $90 million a year in medical costs in PottawatomieCounty

Alzheimer's disease and the complications associated with it have increased from the 18th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 713% increase in deaths.

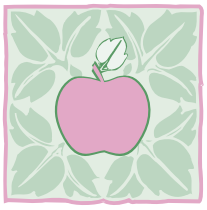
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 28% (18,857) of people in Pottawatomie County were considered obese which accounted for an additional $7,448,515 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Pottawatomie County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 33	UNINTENT. INJURY 17	UNINTENT. INJURY 52	UNINTENT. INJURY 45	HEART DISEASE 52	HEART DISEASE 131	CANCER 290	HEART DISEASE 2212	HEART DISEASE 2684
2	CONGENITAL ANOMALIES 29	HEART DISEASE 5	SUICIDE 15	SUICIDE 17	UNINTENT. INJURY 52	CANCER 119	HEART DISEASE 268	CANCER 1068	CANCER 1535
3	SIDS 13	CANCER 3	HEART DISEASE 6	HOMICIDE/ LEGAL 14	CANCER 41	UNINTENT. INJURY 29	BRONCHITIS/ EMPHYSEMA/ ASTHMA 46	STROKE 485	STROKE 552
4	UNINTENT. INJURY 5	CONGENITAL ANOMALIES 1	HOMICIDE/ LEGAL 6	HIV 11	SUICIDE 20	STROKE 24	DIABETES MELLITUS 32	BRONCHITIS/ EMPHYSEMA/ ASTHMA 357	BRONCHITIS/ EMPHYSEMA/ ASTHMA 418
5	CANCER 4	HOMICIDE/ LEGAL 1	CANCER 4	HEART DISEASE 9	STROKE 13	SUICIDE 23	UNINTENT. INJURY 29	INFLUENZA/ PNEUMONIA 302	UNINTENT. INJURY 339
6	ACUTE BRONCHITIS 3	SUICIDE 1	INFLUENZA/ PNEUMONIA 2	CANCER 6	HIV 8	DIABETES MELLITUS 17	STROKE 23	SEPTICEMIA (BLOOD POISONING) 121	INFLUENZA/ PNEUMONIA 330
7	INFLUENZA/ PNEUMONIA 2		STROKE 2	STROKE 4	HOMICIDE/ LEGAL 8	LIVER DISEASE 17	LIVER DISEASE 14	UNINTENT. INJURY 110	DIABETES MELLITUS 164
8	KIDNEY DISEASE 2		NON-CANCEROUS TUMOR 1	INFLUENZA/ PNEUMONIA 3	DIABETES MELLITUS 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 12	SEPTICEMIA (BLOOD POISONING) 11	DIABETES MELLITUS 106	SEPTICEMIA (BLOOD POISONING) 145
9	FOUR CAUSES TIED 4		DIABETES MELLITUS 1	FOUR CAUSES TIED 2	LIVER DISEASE 6	THREE CAUSES TIED 8	SUICIDE 10	KIDNEY DISEASE 77	SUICIDE 111
10			VIRAL HEPATITIS 1		VIRAL HEPATITIS 5		INFLUENZA/ PNEUMONIA 9	ALZHEIMER'S DISEASE 65	KIDNEY DISEASE 89

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health

Produced by: Injury Prevention Service, Disease and Prevention Servivce, Oklahoma State Department of Health July-05

Injury and Violence

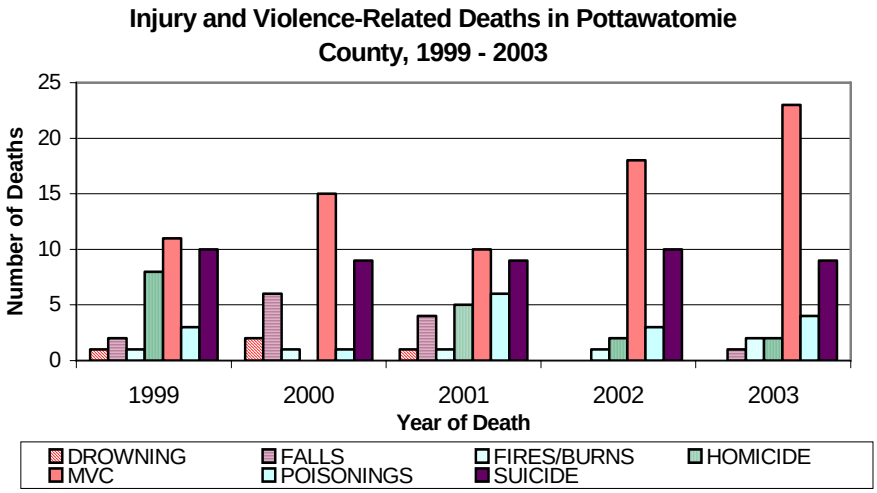
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Pottawatomie County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Pottawatomie County which has an average of 15.4 motor vehicle-related deaths a year, that translates to over $17 million a year.

Violence-related injuries (homicide and suicide) in Pottawatomie County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 27.6% (18,588) of people in Pottawatomie County use tobacco of some sort. Medical costs accumulated by those persons are over $61 million a year for Pottawatomie County.

> *"Medical costs accumulated by those persons are over **$61 million a year** for Pottawatomie County"*

Physical Activity, Wellness and Diabetes

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According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 33.3% (22,427) of people in Pottawatomie County had no leisure activity in the past month at the time they were surveyed.

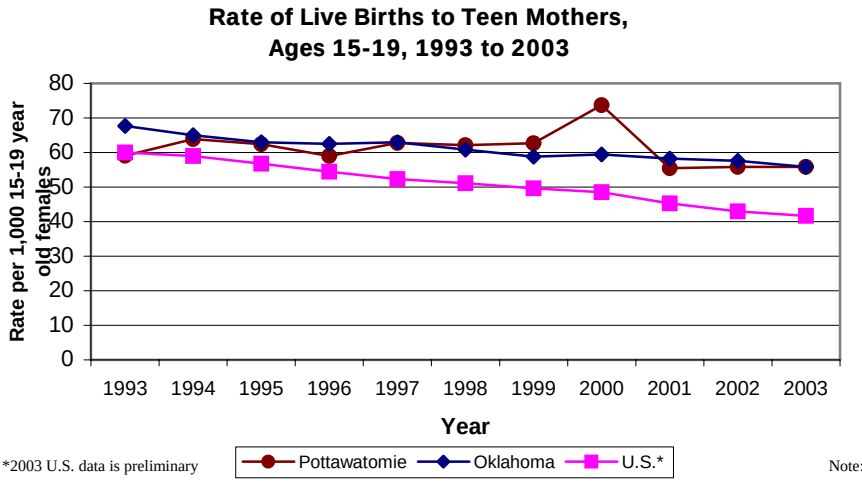
The BRFSS also indicated that 8.1% (5,455) of Pottawatomie County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $72,240,565.00 in one year for Pottawatomie County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Pottawatomie County had a teen birth rate of 55.8 in 2003 which was a 0% decrease from 2002 (55.8) and a 6% decrease since 1993 (59.1).

With an average of 156 births per year, teen pregnancy costs the citizens of Pottawatomie County $499,200.00 a year.

Note: 24 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 14.6% of persons in Pottawatomie County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Pottawatomie County is equal to the state (14.7%) and 18% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Pottawatomie County, 2000 Census

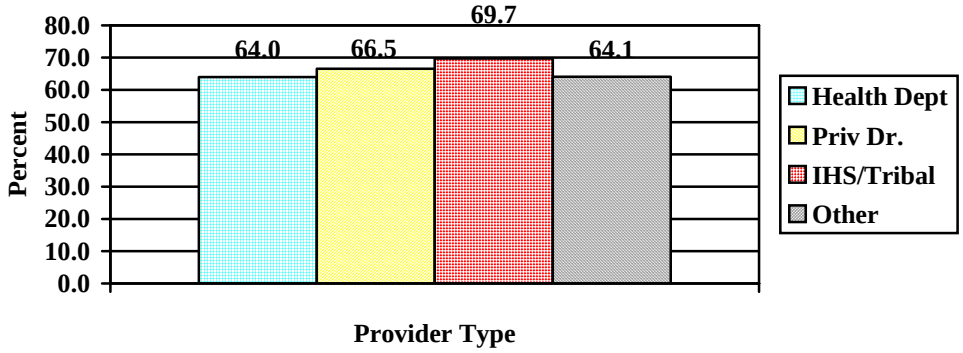
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	62,429	3,552	5,569	7,893	7,304	38,111
Cumulative Population		3,552	9,121	17,014	24,318	62,429
% of Total	100.0%	5.7%	8.9%	12.6%	11.7%	61.0%
Cumulative %		5.7%	14.6%	27.3%	39.0%	100.0%

OK By One - State Immunization Data

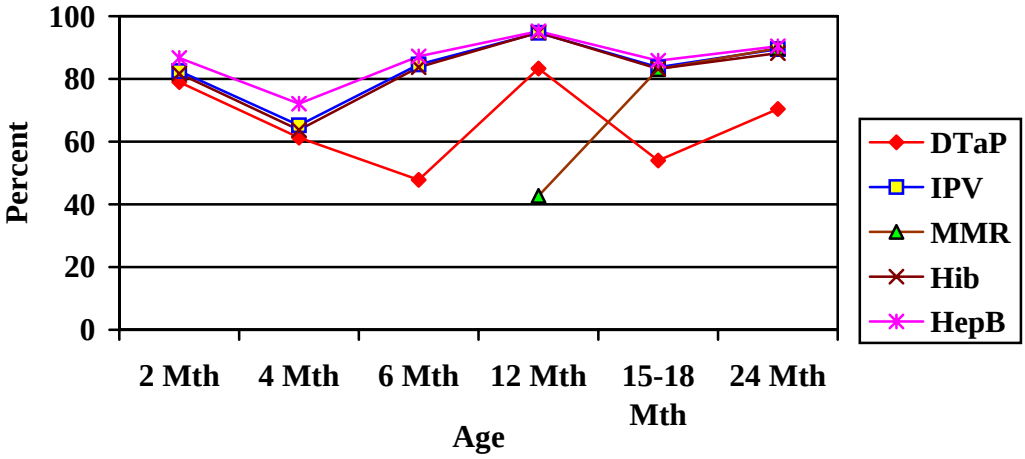
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

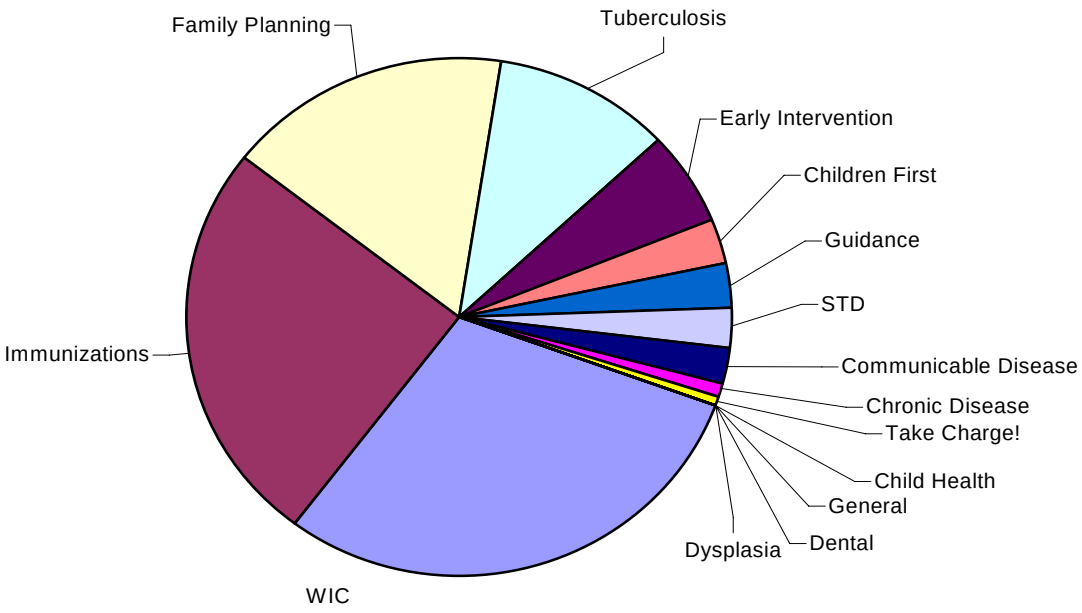


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for Pottawatomie County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 244 deaths a year
- $369,476.69 per death
- Total— $90,152,312.36 a year

Obesity

- 28% of population (18,857)
- $395.00 in additional medical costs per person
- Total—$7,448,515.00

Motor Vehicle-Related Injury Death

- Average 15.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$17,248,000.00 a year

Tobacco Use

- 27.6% of population (18,588)
- $3,300.00 in health care costs
- Total—$61,340,400.00 a year

Diabetes

- 8.1% of population (5,455)
- $13,243.00 in healthcare costs a year
- Total—$72,240,565.00 a year

Teen Pregnancy

- Average of 156 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $499,200.00 a year

Grand Total for Pottawatomie County:

$248,928,992.36

OKLAHOMA STATE DEPARTMENT OF HEALTH

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Community Development Service

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Shawnee, Oklahoma 74801-8698
405-273-2157

Looking Back to Move Forward

Report compiled by:
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The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

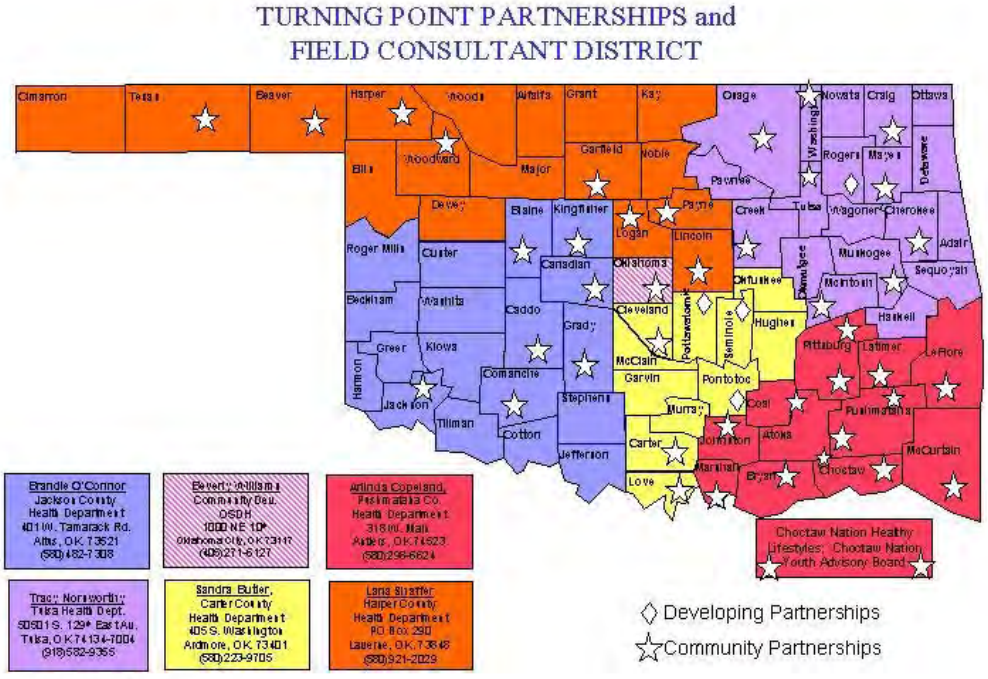
State of the County's Health Report

A Look Back To Move Forward

Pushmataha County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Pushmataha County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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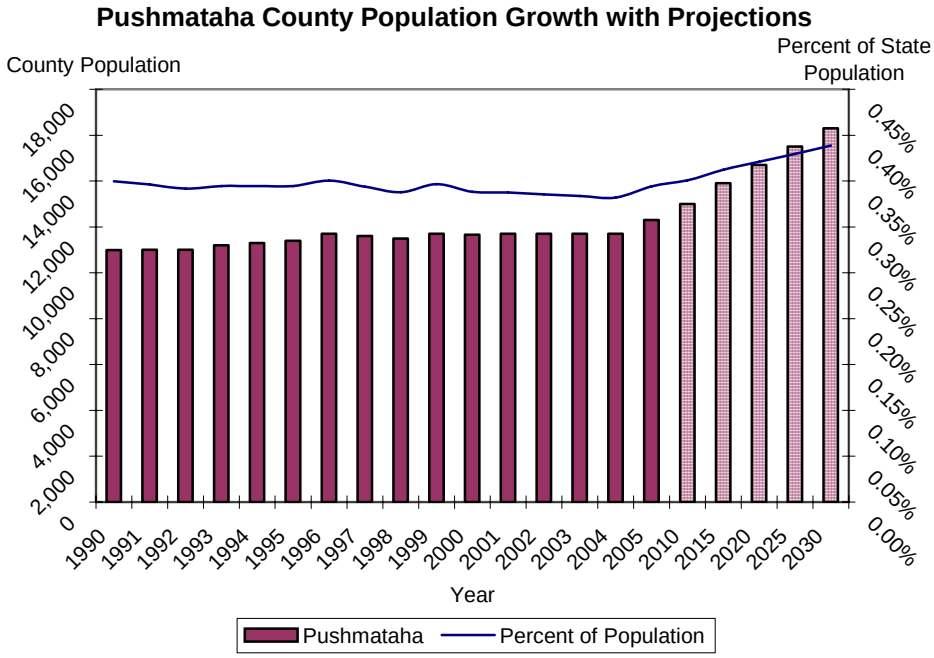
Demographics

- Population estimates
  - 6% increase from 1990 to 2000 (10,997 to 11,667)
  - 0% increase from 2000 to 2004
  - Ranked 37th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 78%
  - Native Americans =16%
  - Blacks =1%
  - Other/Multiple = 6%
- Age
  - Under 5 = 6%
  - Over 64 = 18%
  - Median age = 40.1 years
- Housing units
  - Occupied = 4,739 (82%)
  - Vacant = 1,056 (18%)
- Disability (ages 21 to 64) = 32.1% national = 19.2% state = 21.5%
- Individuals below poverty = 23.2% national = 12.4% state = 14.7%



* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Pushmataha County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 602 people in Pushmataha County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 61.1 deaths a year, heart disease accounts for almost $23 million a year in medical costs in Pushmataha County.

Heart disease accounts for almost $23 million a year in medical costs in PushmatahaCounty.

Alzheimer's disease and the complications associated with it have increased from the 15th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 467% increase in deaths.

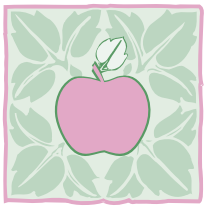
* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & *Health Affairs Journal*, R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 25% (2,938) of people in Pushmataha County were considered obese which accounted for an additional $1,160,510 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Pushmataha County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 5	UNINTENT. INJURY 3	UNINTENT. INJURY 8	UNINTENT. INJURY 13	HEART DISEASE 15	HEART DISEASE 33	HEART DISEASE 75	HEART DISEASE 545	HEART DISEASE 672
2	PERINATAL PERIOD 3	HOMICIDE/ LEGAL 1	SUICIDE 5	CANCER 2	CANCER 10	CANCER 30	CANCER 71	CANCER 261	CANCER 375
3	SIDS 2	OTHER 1	HEART DISEASE 3	STROKE 1	SUICIDE 8	UNINTENT. INJURY 14	BRONCHITIS/ EMPHYSEMA/ ASTHMA 12	STROKE 85	STROKE 101
4	ACUTE BRONCHITIS 1		HOMICIDE/ LEGAL 3	DIABETES MELLITUS 1	UNINTENT. INJURY 8	LIVER DISEASE 5	UNINTENT. INJURY 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 75	BRONCHITIS/ EMPHYSEMA/ ASTHMA 88
5	HOMICIDE/ LEGAL 1		OTHER 1	HEART DISEASE 1	HOMICIDE/ LEGAL 3	SUICIDE 5	STROKE 9	INFLUENZA/ PNEUMONIA 65	UNINTENT. INJURY 85
6	CANCER 1			HIV 1	LIVER DISEASE 3	STROKE 4	SUICIDE 6	ATHERO-SCLEROSIS 39	INFLUENZA/ PNEUMONIA 69
7	UNINTENT. INJURY 1			HOMICIDE/ LEGAL 1	STROKE 2	KIDNEY DISEASE 3	DIABETES MELLITUS 3	UNINTENT. INJURY 28	ATHERO-SCLEROSIS 41
8	OTHER 4			LIVER DISEASE 1	NON-CANCEROUS TUMOR 1	ATHERO-SCLEROSIS 1	INFLUENZA/ PNEUMONIA 3	DIABETES MELLITUS 25	DIABETES MELLITUS 32
9				KIDNEY DISEASE 1	CONGENITAL ANOMALIES 1	NON-CANCEROUS TUMOR 1	LIVER DISEASE 2	KIDNEY DISEASE 22	SUICIDE 30
10				SUICIDE 1	THREE CAUSES TIED 1	FIVE CAUSES TIED 1	TWO CAUSES TIED 2	SEPTICEMIA (BLOOD POISOINING) 22	KIDNEY DISEASE 28

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

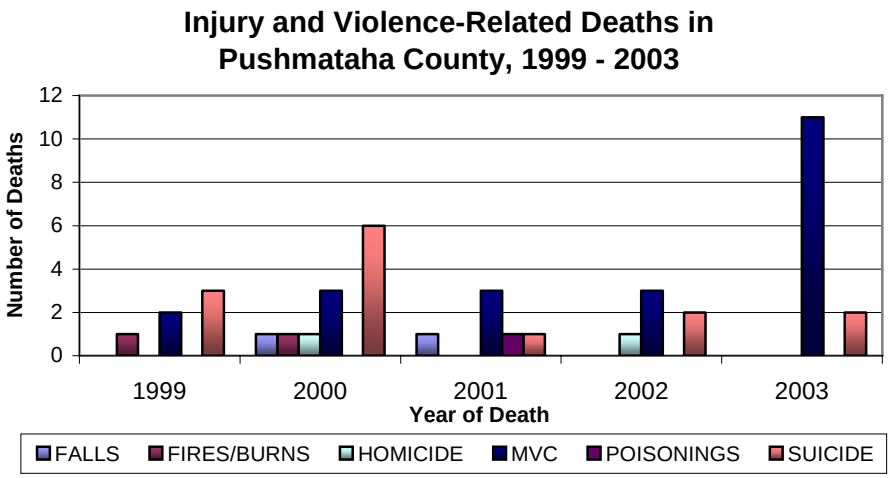
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Pushmataha County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Pushmataha County which has an average of 4.4 motor vehicle-related deaths a year, that translates to almost $5 million a year.

Violence-related injuries (homicide and suicide) in Pushmataha County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 33.5% (3,936) of people in Pushmataha County use tobacco of some sort. Medical costs accumulated by those persons are almost $13 million a year for Pushmataha County.

> *"Medical costs accumulated by those persons are almost **$13 million a year** for Pushmataha County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 27.9% (3,278) of people in Pushmataha County had no leisure activity in the past month at the time they were surveyed.

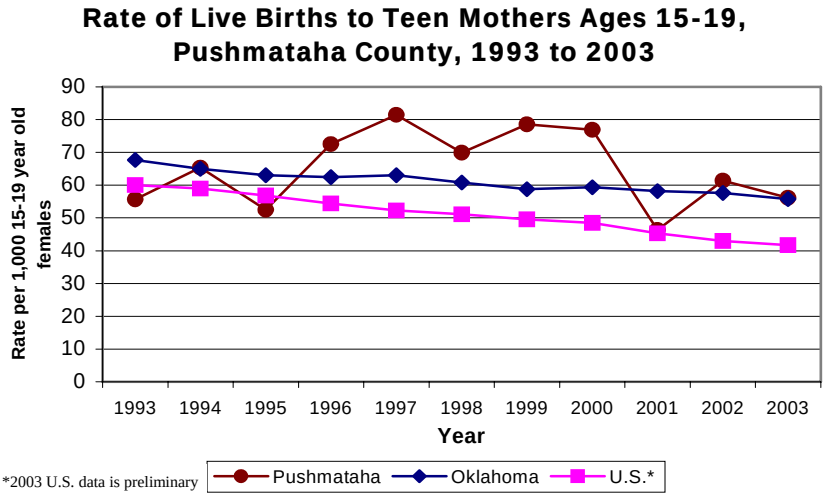
The BRFSS also indicated that 5.7% (670) of Pushmataha County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $8,872,810.00 in one year for Pushmataha County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: No births to a mother 10-14 years of age occurred during the 11 year period.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Pushmataha County had a teen birth rate of 56.2 in 2003 which was a 8% decrease from 2002 (61.4) and a 1% increase since 1993 (55.7).

With an average of 27 births per year, teen pregnancy costs the citizens of Pushmataha County $86,400.00 a year.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 23.2% of persons in Pushmataha County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Pushmataha County is 58% above the state (14.7%) and 87% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Pushmataha County, 2000 Census

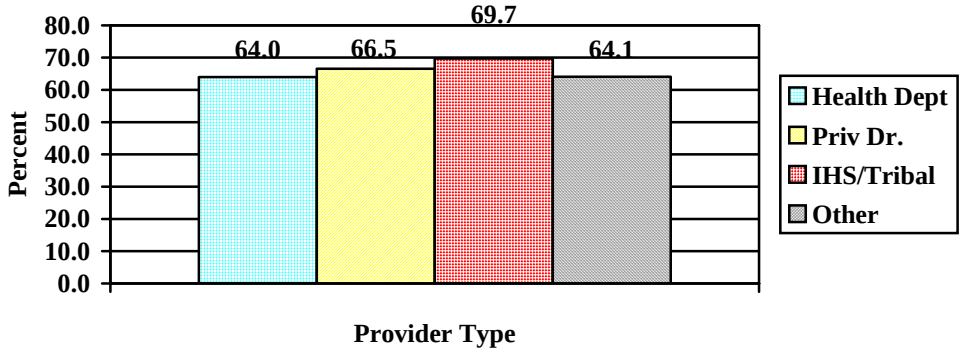
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	11,404	925	1,716	1,845	1,645	5,273
Cumulative Population		925	2,641	4,486	6,131	11,404
% of Total	100.0%	8.1%	15.0%	16.2%	14.4%	46.2%
Cumulative %		8.1%	23.2%	39.3%	53.8%	100.0%

OK By One - State Immunization Data

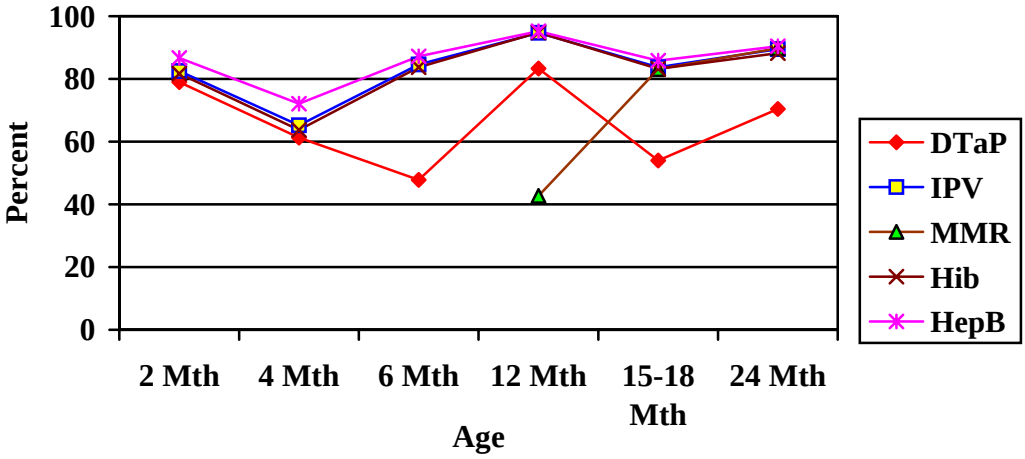
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

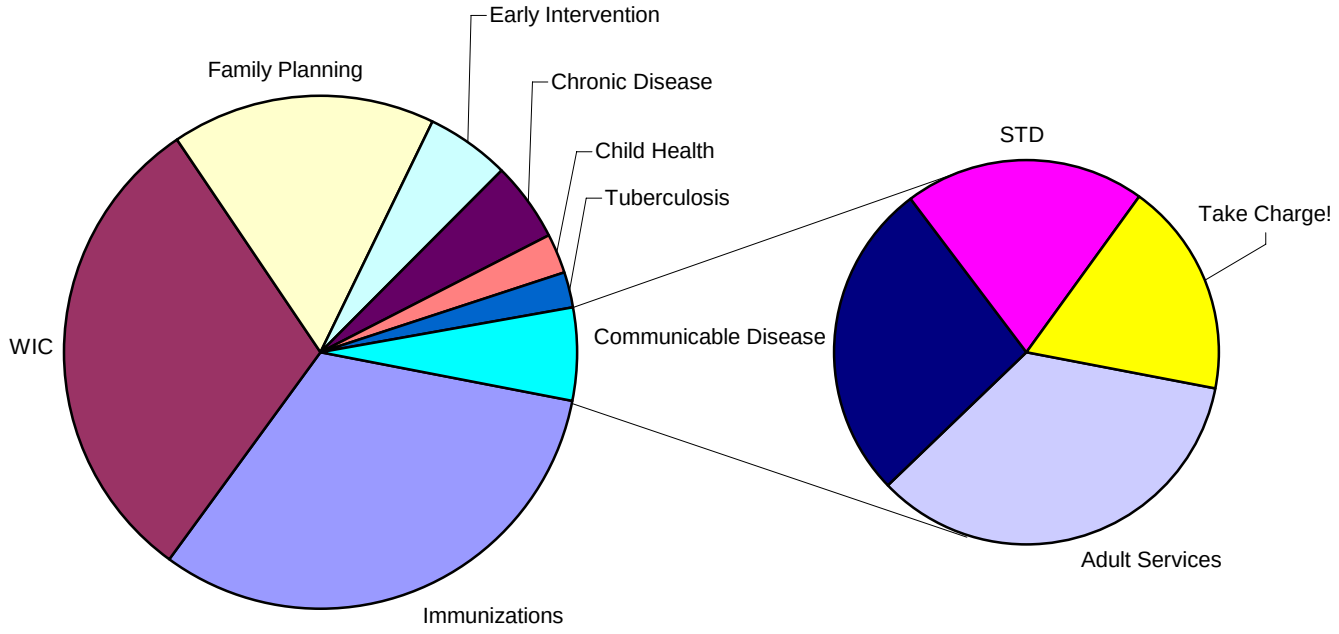


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

Attended Appointments for Pushamataha County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 61 deaths a year
- $369,476.69 per death
- Total— $22,538,078.09 a year

Obesity

- 25% of population (2,938)
- $395.00 in additional medical costs per person
- Total—$1,160,510.00

Motor Vehicle-Related Injury Death

- Average 4.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,928,000.00 a year

Tobacco Use

- 33.5% of population (3,936)
- $3,300.00 in health care costs
- Total—$12,988,800.00 a year

Diabetes

- 5.7% of population (670)
- $13,243.00 in healthcare costs a year
- Total—$8,872,810.00 a year

Teen Pregnancy

- Average of 27 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $86,400.00 a year

Grand Total for Pushmataha County:

$50,574,598.09

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225

Pushmataha County Health Department
318 W Main
Antlers, OK 74523
580-298-6624

Po Box 118
Highway 2 & Cherokee St
Clayton, OK 74536
918-569-7973

A Look Back
To Move Forward

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A Look Back To Move Forward

Roger Mills County

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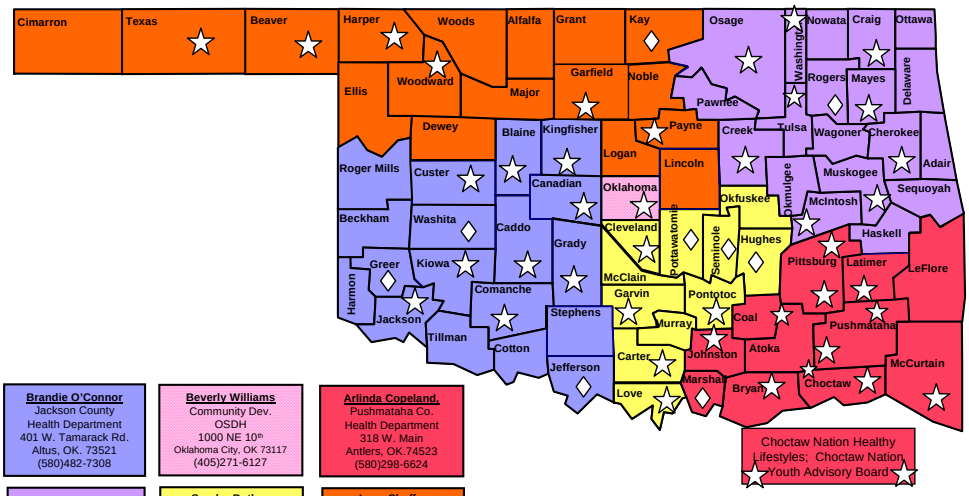
TURNING POINT PARTNERSHIPS and
FIELD CONSULTANT DISTRICT



Field Rep Districts 9-13-05

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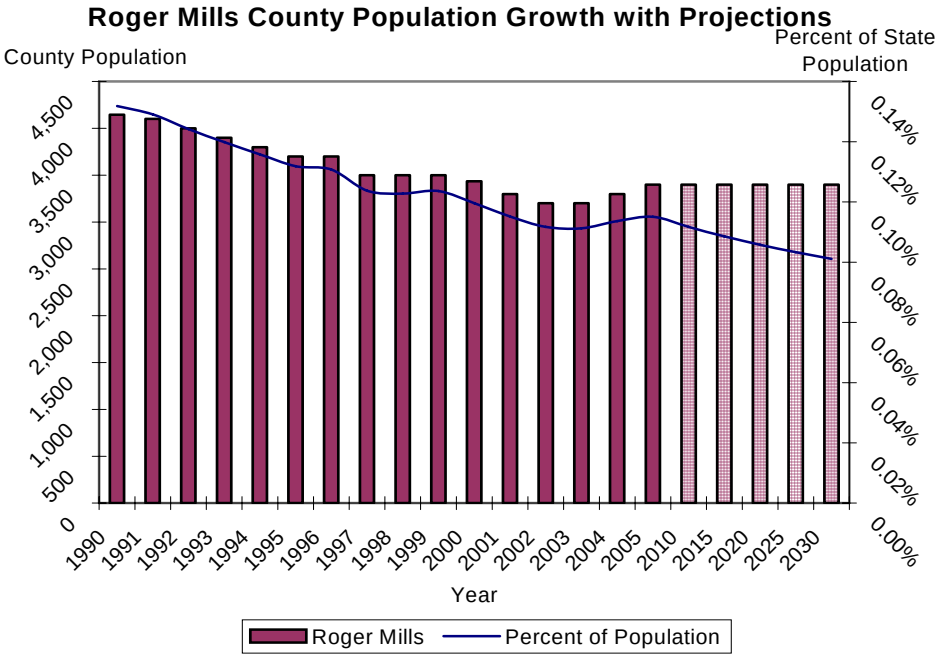
Demographics

- Population estimates
  - 17% decrease from 1990 to 2000 (4,147 to 3,436)
  - 4% decrease from 2000 to 2004
  - Ranked 69th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 92%
  - Native Americans =5%
  - Blacks =0%
  - Other/Multiple = 2%
- Age
  - Under 5 = 5%
  - Over 64 = 19%
  - Median age = 41.7 years
- Housing units
  - Occupied = 1,428 (82%)
  - Vacant = 321 (18%)
- Disability (ages 21 to 64) = 19.1%
  national = 19.2% state = 21.5%
- Individuals below poverty = 16.3%
  national = 12.4% state = 14.7%



* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Roger Mills County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 220 people in Roger Mills County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 16.6 deaths a year, heart disease accounts for over $6 million a year in medical costs in Roger Mills County.

Heart disease accounts for over $6 million a year in medical costs in Roger MillsCounty.

Alzheimer's disease and the complications associated with it have increased from the 9th ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 200% increase in deaths.

* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

Data Not Available At This Time

Top 10 Causes of Death by Age Group

Rogers Mills County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 3	UNINTENT. INJURY 1	UNINTENT. INJURY 7	UNINTENT. INJURY 3	UNINTENT. INJURY 5	HEART DISEASE 7	CANCER 19	HEART DISEASE 159	HEART DISEASE 183
2	UNINTENT. INJURY 3		SUICIDE 2	ALZHEIMER'S DISEASE 1	CANCER 2	CANCER 4	HEART DISEASE 16	CANCER 50	CANCER 75
3	PERINATAL PERIOD 2		OTHER 2	SUICIDE 1	SUICIDE 2	STROKE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	STROKE 37	STROKE 41
4					BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	LIVER DISEASE 2	STROKE 2	INFLUENZA/ PNEUMONIA 22	UNINTENT. INJURY 27
5					CONGENITAL ANOMALIES 1	SUICIDE 1	DIABETES MELLITUS 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 18	BRONCHITIS/ EMPHYSEMA/ ASTHMA 23
6					HEART DISEASE 1		OTHER 4	ALZHEIMER'S DISEASE 9	INFLUENZA/ PNEUMONIA 22
7								DIABETES MELLITUS 8	ALZHEIMER'S DISEASE 10
8								UNINTENT. INJURY 8	DIABETES MELLITUS 10
9								KIDNEY DISEASE 5	SUICIDE 7
10								ATHERO-SCLEROSIS 3	CONGENITAL ANOMALIES 5

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

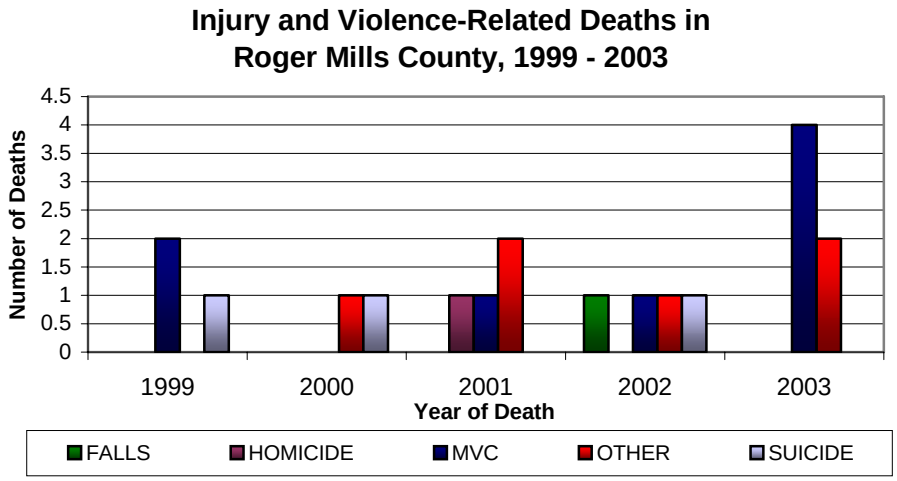
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Roger Mills County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Roger Mills County which has an average of 1.6 motor vehicle-related deaths a year, that translates to almost $2 million a year.

Violence-related injuries (homicide and suicide) in Roger Mills County are ranked in the top 10 in four of the six age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

Data Not Available At This Time

Physical Activity, Wellness and Diabetes

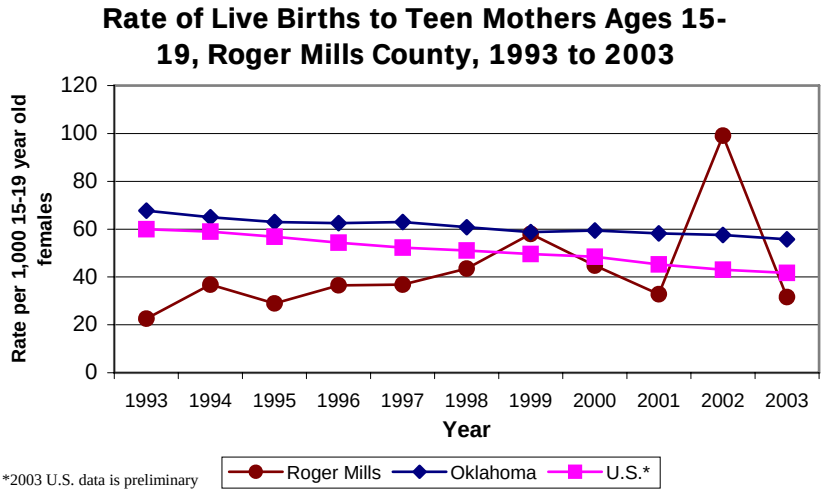
* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

Data Not Available At This Time

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 1 births to a mother 10-14 years of age occurred during the 11 year period.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Roger Mills County had a teen birth rate of 31.6 in 2003 which was a 68% decrease from 2002 (99.1) and a 40% increase since 1993 (22.6).

With an average of 5 births per year, teen pregnancy costs the citizens of Roger Mills County $16,000.00 a year.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 16.3% of persons in Roger Mills County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Roger Mills County is 11% above the state (14.7%) and 32% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Roger Mills County, 2000 Census

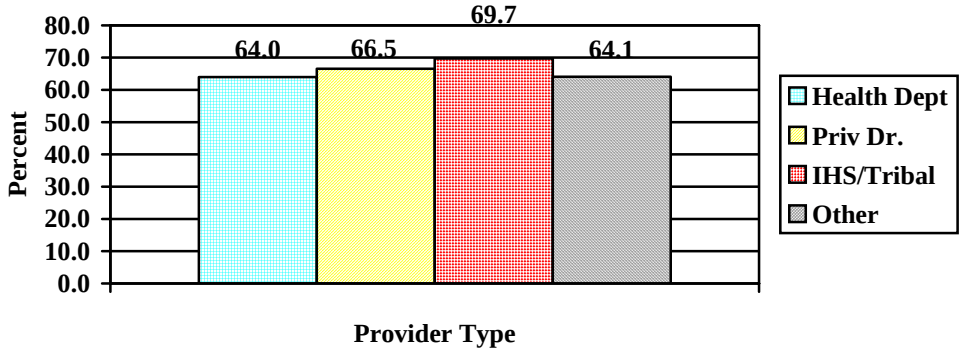
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	3,395	222	332	466	373	2,002
Cumulative Population		222	554	1,020	1,393	3,395
% of Total	100.0%	6.5%	9.8%	13.7%	11.0%	59.0%
Cumulative %		6.5%	16.3%	30.0%	41.0%	100.0%

OK By One - State Immunization Data

** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



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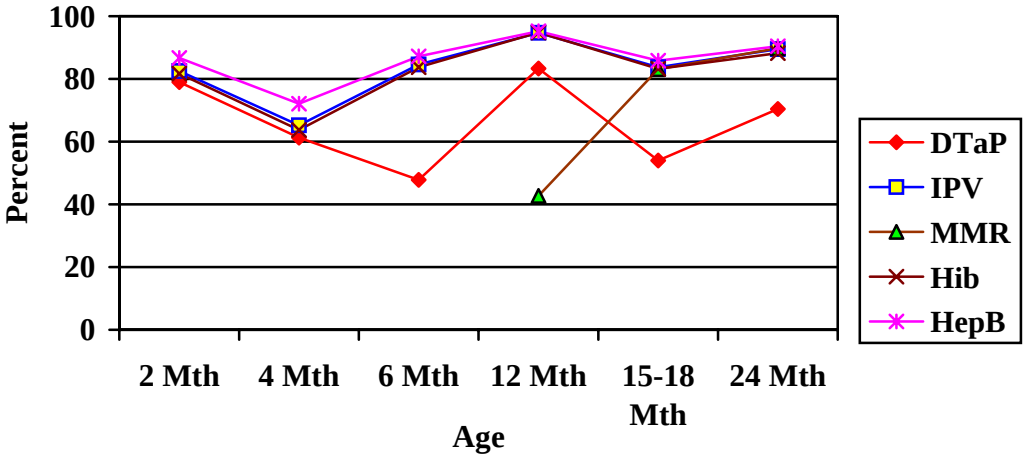

**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Data Not Available At This Time

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 17 deaths a year
- $369,476.69 per death
- Total— $6,281,103.73 a year

Obesity

- Data Not Available

Motor Vehicle-Related Injury Death

- Average 1.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$1,792,000.00 a year

Tobacco Use

- Data Not Available

Diabetes

- Data Not Available

Teen Pregnancy

- Average of 5 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $16,000.00 a year

Grand Total for Roger Mills County:

$8,089,103.73

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Oklahoma City, OK 73117
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A Look Back To Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

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Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

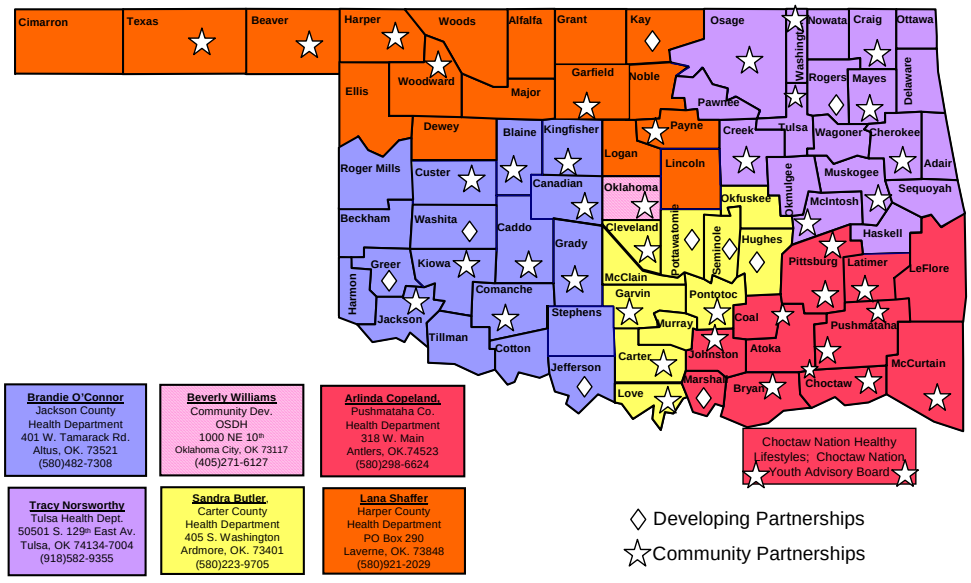
A Look Back To Move Forward

Rogers County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Rogers County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.

TURNING POINT PARTNERSHIPS and
FIELD CONSULTANT DISTRICT



Field Rep Districts 9-13-05

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Teen Pregnancy	5
Poverty	5
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Health Care Costs Summary	7
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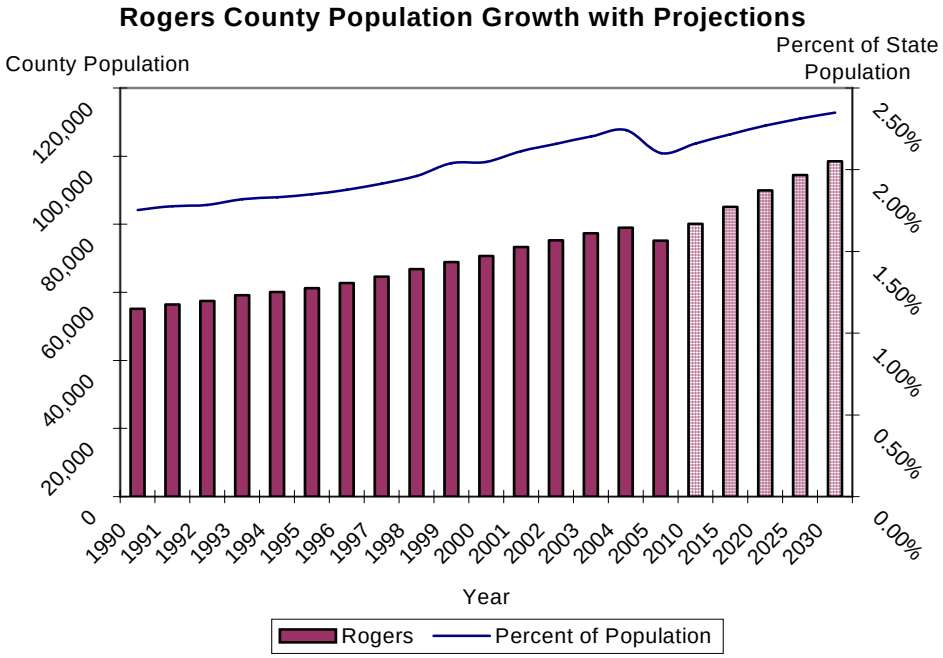
Demographics

- Population estimates
  - 28% increase from 1990 to 2000 (55,170 to 70,641)
  - 12% increase from 2000 to 2004
  - Ranked 1st for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 80%
  - Native Americans =12%
  - Blacks =1%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 11%
  - Median age = 36.2 years
- Housing units
  - Occupied = 25,724 (94%)
  - Vacant = 1,752 (6%)
- Disability (ages 21 to 64) = 18.4% national = 19.2% state = 21.5%
- Individuals below poverty = 8.6% national = 12.4% state = 14.7%



* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Rogers County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,530 people in Rogers County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 171.5 deaths a year, heart disease accounts for over $64 million a year in medical costs in Rogers County.

Heart disease accounts for over $64 million a year in medical costs in RogersCounty.

Alzheimer's disease and the complications associated with it have increased from the 13th ranked cause of death (1983-1993) to the 7th ranked cause of death in persons 65 and older accounting for a 607% increase in deaths.

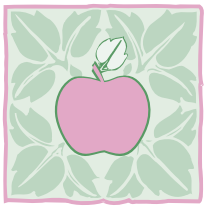
* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 21.4% (16,519) of people in Rogers County were considered obese which accounted for an additional $6,525,005 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Rogers County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 23	UNINTENT. INJURY 6	UNINTENT. INJURY 57	UNINTENT. INJURY 36	UNINTENT. INJURY 45	CANCER 124	CANCER 283	HEART DISEASE 1518	HEART DISEASE 1887
2	PERINATAL PERIOD 15	CONGENITAL ANOMALIES 3	SUICIDE 15	SUICIDE 13	CANCER 44	HEART DISEASE 111	HEART DISEASE 208	CANCER 888	CANCER 1356
3	UNINTENT. INJURY 9	HEART DISEASE 2	HOMICIDE/ LEGAL 6	CANCER 11	HEART DISEASE 36	UNINTENT. INJURY 33	BRONCHITIS/ EMPHYSEMA/ ASTHMA	STROKE 356	STROKE 404
4	HEART DISEASE 3	HOMICIDE/ LEGAL 2	CANCER 6	HEART DISEASE 7	SUICIDE 18	BRONCHITIS/ EMPHYSEMA/ ASTHMA 15	STROKE 29	BRONCHITIS/ EMPHYSEMA/ ASTHMA 255	BRONCHITIS/ EMPHYSEMA/ ASTHMA 313
5	SEPTICEMIA (BLOOD POISONING) 3	STROKE 1	HEART DISEASE 2	HIV 7	LIVER DISEASE 9	SUICIDE 15	UNINTENT. INJURY 29	INFLUENZA/ PNEUMONIA 155	UNINTENT. INJURY 291
6	HOMICIDE/ LEGAL 1	INFLUENZA/ PNEUMONIA 1	NON-CANCEROUS TUMOR 1	HOMICIDE/ LEGAL 5	DIABETES MELLITUS 7	STROKE 13	DIABETES MELLITUS 28	DIABETES MELLITUS 117	INFLUENZA/ PNEUMONIA 175
7	SIDS 1	KIDNEY DISEASE 1	CONGENITAL ANOMALIES 1	CONGENITAL ANOMALIES 2	HIV 7	DIABETES MELLITUS 10	LIVER DISEASE 18	ALZHEIMER'S DISEASE 106	DIABETES MELLITUS 163
8	WHOOPING COUGH 1	OTHER 5	DIABETES MELLITUS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	STROKE 4	INFLUENZA/ PNEUMONIA 7	SUICIDE 12	KIDNEY DISEASE 77	ALZHEIMER'S DISEASE 107
9	OTHER 13		HIV 1	STROKE 1	HOMICIDE/ LEGAL 4	LIVER DISEASE 6	INFLUENZA/ PNEUMONIA 9	UNINTENT. INJURY 76	KIDNEY DISEASE 85
10			KIDNEY DISEASE 1	TWO CAUSES TIED 1	TWO CAUSES TIED 3	HOMICIDE/ LEGAL 3	SEPTICEMIA (BLOOD POISONING) 7	SEPTICEMIA (BLOOD POISONING) 41	SUICIDE 83

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

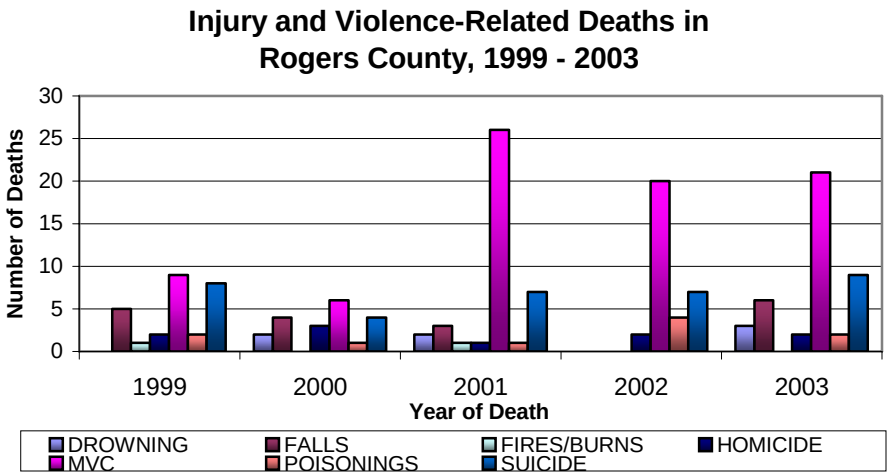
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Rogers County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Rogers County which has an average of 16.4 motor vehicle-related deaths a year, that translates to over $18 million a year.

Violence-related injuries (homicide and suicide) in Rogers County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 26.9% (20,765) of people in Rogers County use tobacco of some sort. Medical costs accumulated by those persons are almost $69 million a year for Rogers County.

> *"Medical costs accumulated by those persons are almost **$69 million a year** for Rogers County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 27.7% (21,382) of people in Rogers County had no leisure activity in the past month at the time they were surveyed.

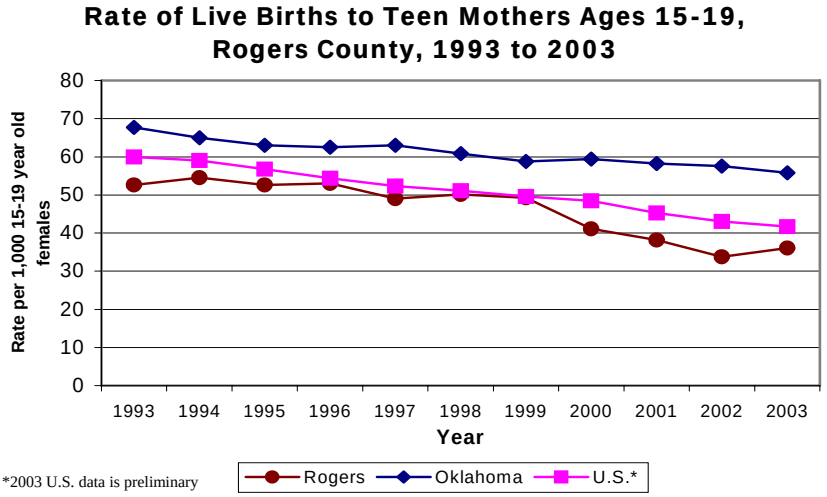
The BRFSS also indicated that 8.3% (6,407) of Rogers County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $84,847,901.00 in one year for Rogers County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 9 births to a mother 10-14 years of age occurred during the 11 year period.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Rogers County had a teen birth rate of 36.1 in 2003 which was a 7% increase from 2002 (33.8) and a 31% decrease since 1993 (52.6).

With an average of 118 births per year, teen pregnancy costs the citizens of Rogers County $377,600.00 a year.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 8.6% of persons in Rogers County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Rogers County is 41% above the state (14.7%) and 31% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Rogers County, 2000 Census

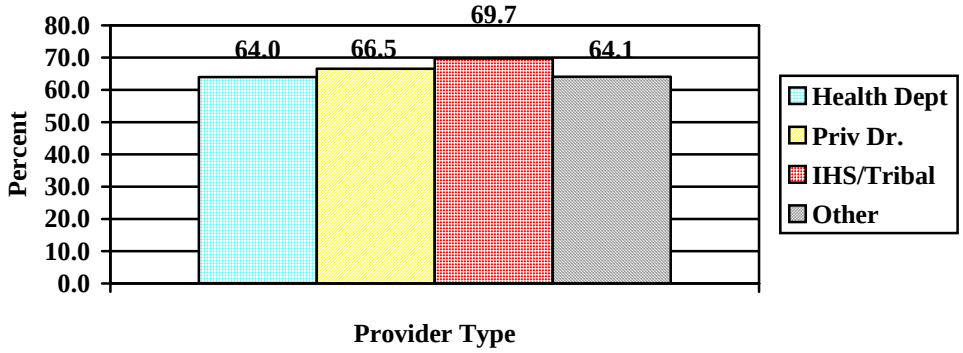
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	69,661	2,458	3,541	5,397	6,129	52,136
Cumulative Population		2,458	5,999	11,396	17,525	69,661
% of Total	100.0%	3.5%	5.1%	7.7%	8.8%	74.8%
Cumulative %		3.5%	8.6%	16.4%	25.2%	100.0%

OK By One - State Immunization Data

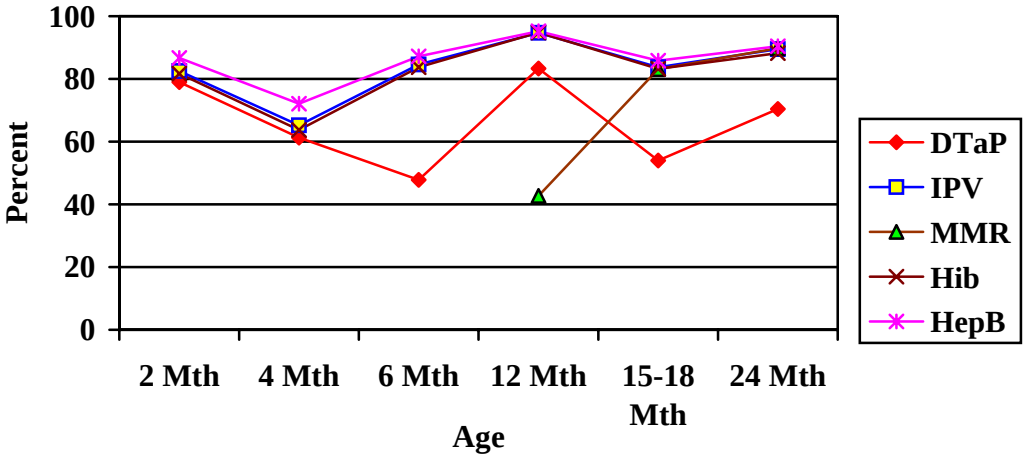
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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County Health Department Usage

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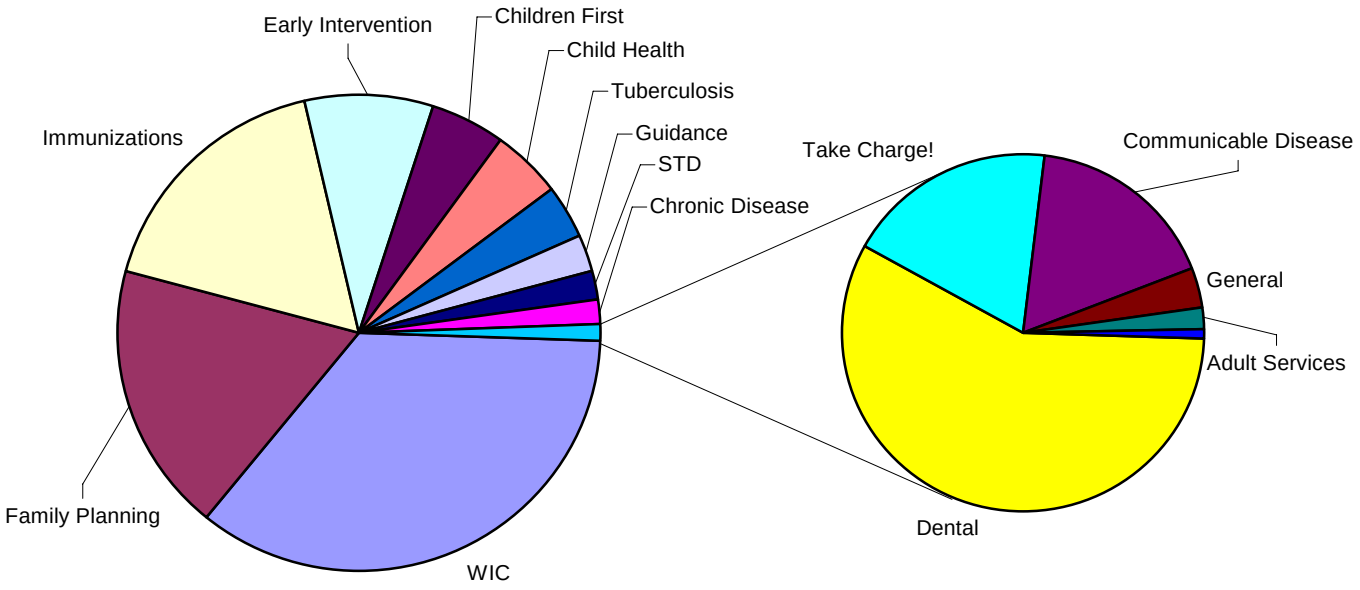
Attended Appointments for Rogers County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 172 deaths a year
- $369,476.69 per death
- Total— $63,549,990.68 a year

Obesity

- 21.4% of population (16,519)
- $395.00 in additional medical costs per person
- Total—$6,525,005.00

Motor Vehicle-Related Injury Death

- Average 16.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$18,368,000.00 a year

Tobacco Use

- 26.9% of population (20,765)
- $3,300.00 in health care costs
- Total—$68,524,500.00 a year

Diabetes

- 8.3% of population (6,407)
- $13,243.00 in healthcare costs a year
- Total—$84,847,901.00 a year

Teen Pregnancy

- Average of 118 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $377,600.00 a year

Grand Total for Rogers County:

$242,192,996.68

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
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Fax: 405-271-1225
Email: miriamm@health.ok.gov

Rogers County Health Department
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918-341-3166

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Report compiled by:
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OKLAHOMA STATE DEPARTMENT OF HEALTH

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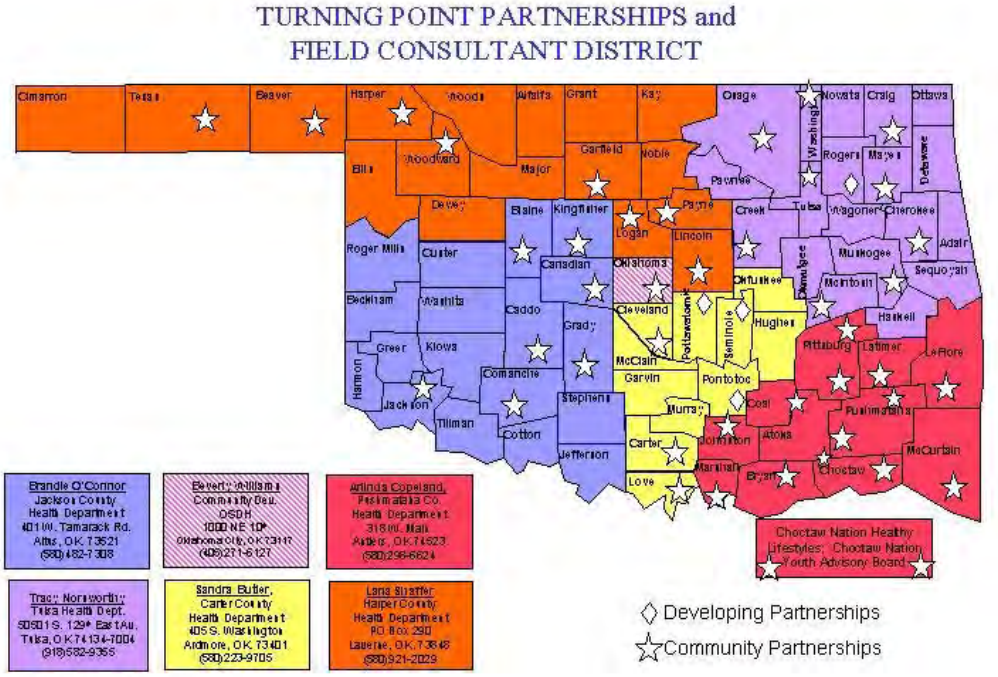

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Health Care Costs Summary	7
Turning Point	8

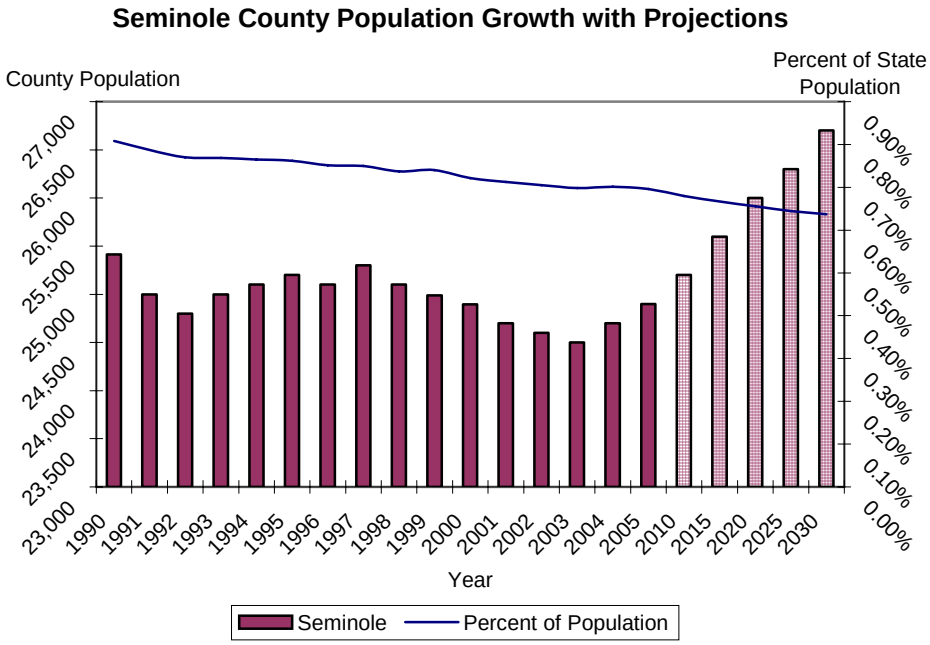
Demographics

** U.S. Census Bureau*

- Population estimates
  - 2% decrease from 1990 to 2000 (25,412 to 24,894)
  - 1% decrease from 2000 to 2004
  - Ranked 48th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 71%
  - Native Americans =«Indian %»
  - Blacks =6%
  - Other/Multiple = 6%
- Age
  - Under 5 = 7%
  - Over 64 = 17%
  - Median age = 38.1 years
- Housing units
  - Occupied = 9,575 (86%)
  - Vacant = 1,571 (14%)
- Disability (ages 21 to 64) = 28.5% national = 19.2% state = 21.5%
- Individuals below poverty = 20.8% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Seminole County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,681 people in Seminole County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 128.2 deaths a year, heart disease accounts for over $47 million a year in medical costs in Seminole County.

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Alzheimer's disease and the complications associated with it have increased from the 13th ranked cause of death (1983-1993) to the 11th ranked cause of death in persons 65 and older accounting for a 267% increase in deaths.

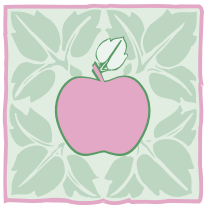
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 27.1% (6,637) of people in Seminole County were considered obese which accounted for an additional $2,621,615 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Seminole County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 15	UNINTENT. INJURY 9	UNINTENT. INJURY 29	UNINTENT. INJURY 25	HEART DISEASE 25	HEART DISEASE 79	HEART DISEASE 139	HEART DISEASE 1158	HEART DISEASE 1410
2	SIDS 6	CANCER 3	HOMICIDE/ LEGAL 7	HOMICIDE/ LEGAL 6	CANCER 23	CANCER 54	CANCER 125	CANCER 534	CANCER 745
3	CONGENITAL ANOMALIES 5	CONGENITAL ANOMALIES 1	SUICIDE 7	HEART DISEASE 5	UNINTENT. INJURY 23	UNINTENT. INJURY 22	UNINTENT. INJURY 22	STROKE 219	STROKE 245
4	UNINTENT. INJURY 5	OTHER 1	HEART DISEASE 2	CANCER 5	LIVER DISEASE 11	STROKE 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 17	BRONCHITIS/ EMPHYSEMA/ ASTHMA 156	UNINTENT. INJURY 202
5	HEART DISEASE 2		COMPLICATED PREGNANCY 1	SUICIDE 5	SUICIDE 11	LIVER DISEASE 9	DIABETES MELLITUS 17	INFLUENZA/ PNEUMONIA 98	BRONCHITIS/ EMPHYSEMA/ ASTHMA 180
6	NON-CANCEROUS TUMOR 1		CONGENITAL ANOMALIES 1	COMPLICATED PREGNANCY 2	HOMICIDE/ LEGAL 8	INFLUENZA/ PNEUMONIA 7	STROKE 13	UNINTENT. INJURY 67	INFLUENZA/ PNEUMONIA 120
7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1		DIABETES MELLITUS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	DIABETES MELLITUS 6	DIABETES MELLITUS 6	KIDNEY DISEASE 13	DIABETES MELLITUS 65	DIABETES MELLITUS 96
8	HOMICIDE/ LEGAL 1		INFLUENZA/ PNEUMONIA 1	STROKE 1	HIV 4	SUICIDE 6	INFLUENZA/ PNEUMONIA 12	KIDNEY DISEASE 56	KIDNEY DISEASE 74
9	KIDNEY DISEASE 1		CANCER 1	CONGENITAL ANOMALIES 1	STROKE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	SEPTICEMIA (BLOOD POISONING) 9	SEPTICEMIA (BLOOD POISONING) 47	SEPTICEMIA (BLOOD POISONING) 59
10	OTHER 12		OTHER 5	FOUR CAUSES TIED 1	SIX CAUSES TIED 1	HIV 4	LIVER DISEASE 8	ATHERO-SCLEROSIS 37	SUICIDE 42

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

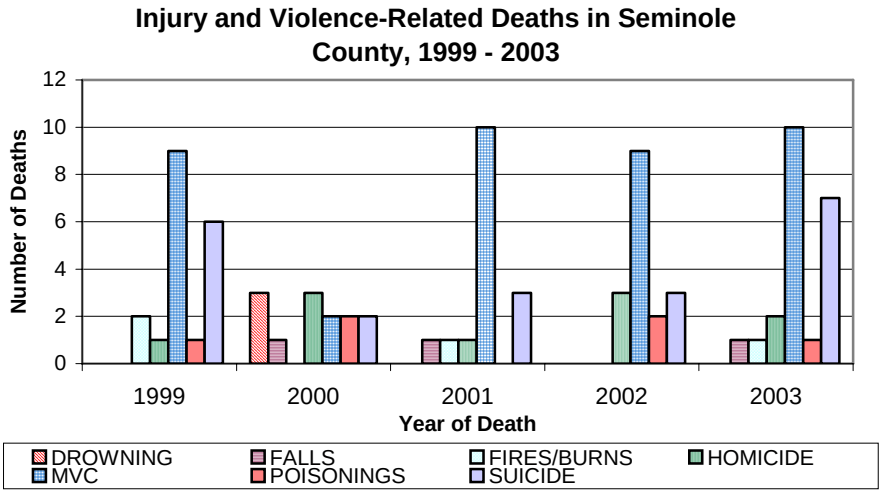
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Seminole County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Seminole County which has an average of 8 motor vehicle-related deaths a year, that translates to almost $9 million a year.

Violence-related injuries (homicide and suicide) in Seminole County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 36.3% (8,890) of people in Seminole County use tobacco of some sort. Medical costs accumulated by those persons are over $29 million a year for Seminole County.

> *"Medical costs accumulated by those persons are over **$29 million a year** for Seminole County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 29.2% (7,151) of people in Seminole County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 9.4% (2,302) of Seminole County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $30,485,386.00 in one year for Seminole County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

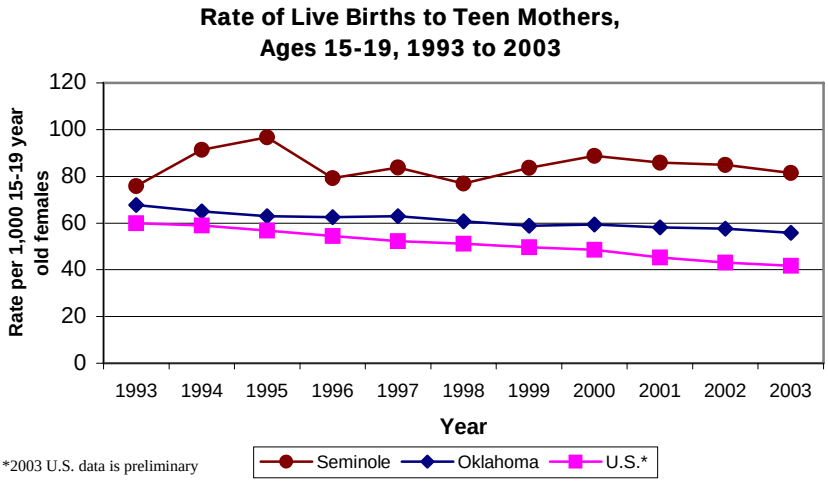
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Seminole County had a teen birth rate of 81.5 in 2003 which was a 4% decrease from 2002 (84.9) and a 8% increase since 1993 (75.8).

With an average of 80 births per year, teen pregnancy costs the citizens of Seminole County $256,000.00 a year.



*2003 U.S. data is preliminary

Note: 20 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 20.8% of persons in Seminole County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Seminole County is 41% above the state (14.7%) and 68% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Seminole County, 2000 Census

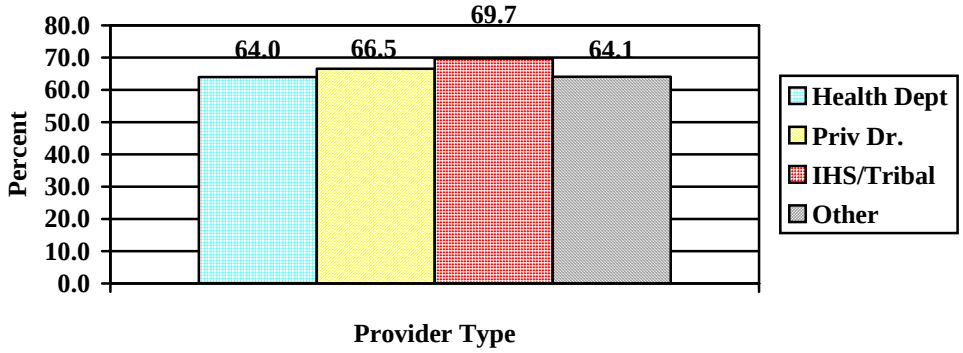
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	24,326	1,921	3,134	3,997	3,357	11,917
Cumulative Population		1,921	5,055	9,052	12,409	24,326
% of Total	100.0%	7.9%	12.9%	16.4%	13.8%	49.0%
Cumulative %		7.9%	20.8%	37.2%	51.0%	100.0%

OK By One - State Immunization Data

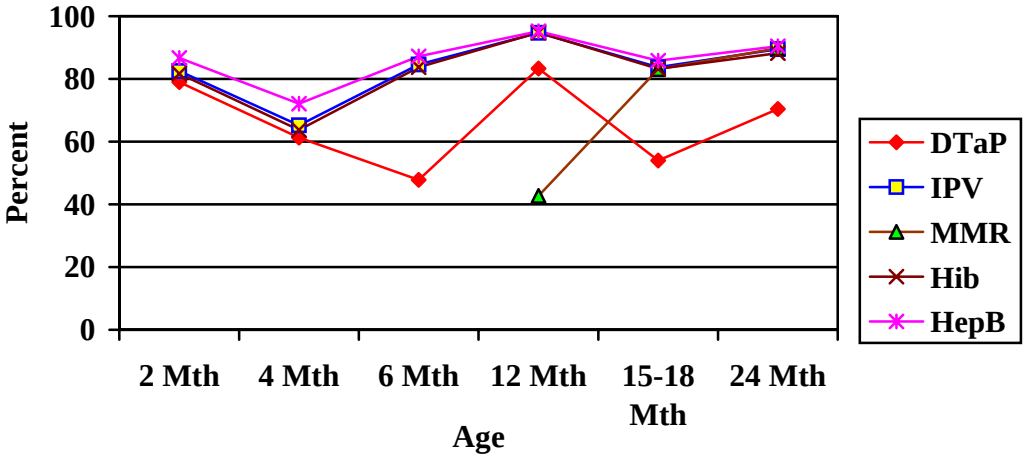
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

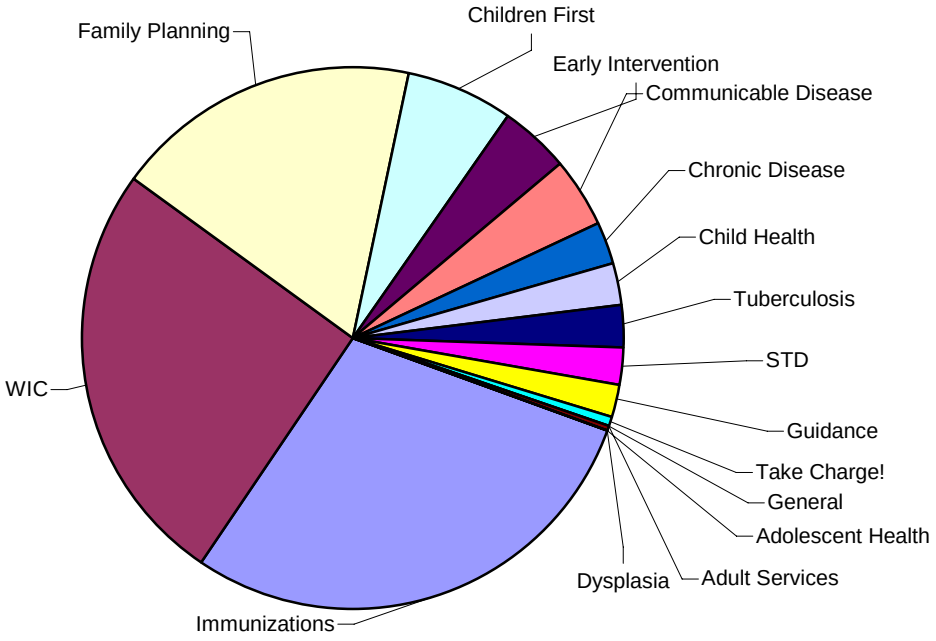


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for Seminole County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 128 deaths a year
- $369,476.69 per death
- Total— $47,293,016.32 a year

Obesity

- 27.1% of population (6,637)
- $395.00 in additional medical costs per person
- Total—$2,621,615.00

Motor Vehicle-Related Injury Death

- Average 8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$8,960,000.00 a year

Tobacco Use

- 36.3% of population (8,890)
- $3,300.00 in health care costs
- Total—$29,337,000.00 a year

Diabetes

- 9.4% of population (2,302)
- $13,243.00 in healthcare costs a year
- Total—$30,485,386.00 a year

Teen Pregnancy

- Average of 80 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $256,000.00 a year

Grand Total for Seminole County:

$118,953,017.32

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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200 S Brown
Wewoka, Oklahoma 74884
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1900 Boren Blvd.
Seminole, OK 74868
405-382-4369

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

State of the County's Health Report

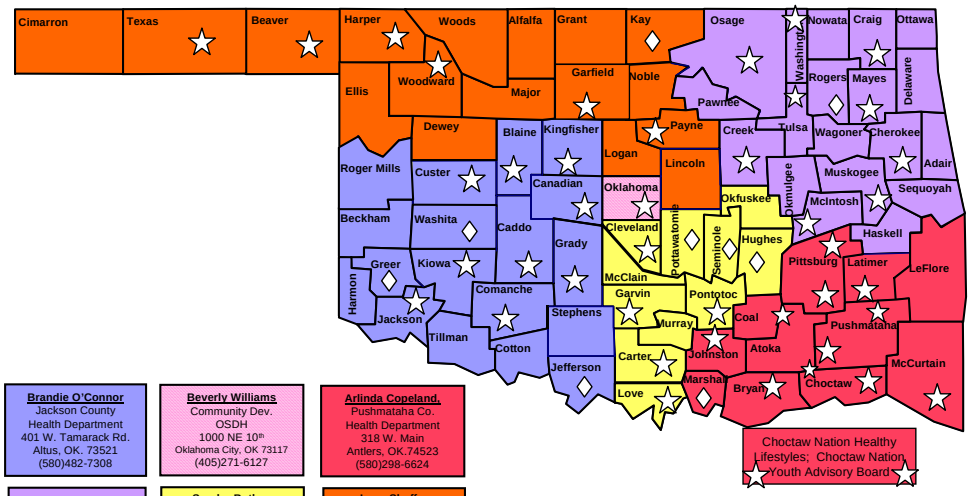
A Look Back To Move Forward

Sequoyah County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Sequoyah County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.

TURNING POINT PARTNERSHIPS and
FIELD CONSULTANT DISTRICT



Field Rep Districts 9-13-05

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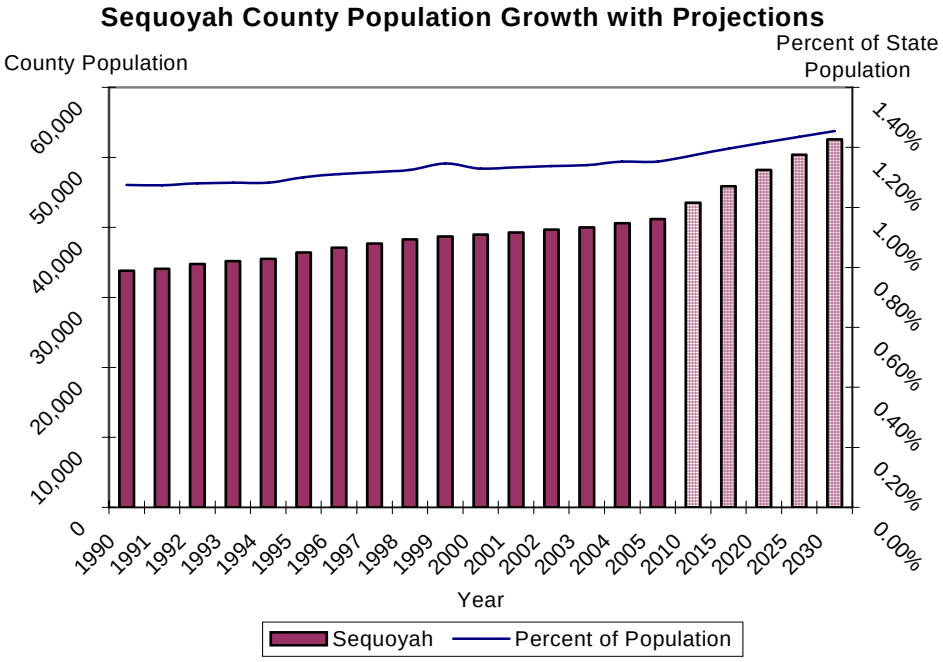
Demographics

*U.S. Census Bureau

- Population estimates
  - 15% increase from 1990 to 2000 (33,828 to 38,972)
  - 4% increase from 2000 to 2004
  - Ranked 10th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 68%
  - Native Americans =20%
  - Blacks =2%
  - Other/Multiple = 10%
- Age
  - Under 5 = 7%
  - Over 64 = 13%
  - Median age = 36.4 years
- Housing units
  - Occupied = 14,761 (87%)
  - Vacant = 2,179 (13%)
- Disability (ages 21 to 64) = 27.8% national = 19.2% state = 21.5%
- Individuals below poverty = 19.8% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Sequoyah County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,412 people in Sequoyah County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 122.2 deaths a year, heart disease accounts for over $45 million a year in medical costs in Sequoyah County.

Heart disease accounts for over $45 million a year in medical costs in Sequoyah County.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 8th ranked cause of death in persons 65 and older accounting for a 200% increase in deaths.

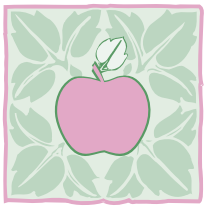
Nutrition and Obesity

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & *Health Affairs Journal*, R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 32.9% (13,153) of people in Sequoyah County were considered obese which accounted for an additional $5,195,435 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Sequoyah County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 15	UNINTENT. INJURY 11	UNINTENT. INJURY 28	UNINTENT. INJURY 32	HEART DISEASE 31	HEART DISEASE 87	CANCER 188	HEART DISEASE 1062	HEART DISEASE 1345
2	PERINATAL PERIOD 14	CONGENITAL ANOMALIES 1	SUICIDE 8	SUICIDE 13	CANCER 31	CANCER 81	HEART DISEASE 158	CANCER 692	CANCER 1010
3	UNINTENT. INJURY 7	HIV 1	CANCER 7	CANCER 9	UNINTENT. INJURY 31	UNINTENT. INJURY 25	BRONCHITIS/ EMPHYSEMA/ ASTHMA 37	STROKE 290	STROKE 320
4	SIDS 5	INFLUENZA/ PNEUMONIA 1	HOMICIDE/ LEGAL 3	HIV 8	SUICIDE 10	DIABETES MELLITUS 13	ATHERO-SCLEROSIS 20	BRONCHITIS/ EMPHYSEMA/ ASTHMA 175	BRONCHITIS/ EMPHYSEMA/ ASTHMA 224
5	HOMICIDE/ LEGAL 2	CANCER 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	HOMICIDE/ LEGAL 8	STROKE 6	ATHERO-SCLEROSIS 12	DIABETES MELLITUS 18	ATHERO-SCLEROSIS 125	UNINTENT. INJURY 205
6	SEPTICEMIA (BLOOD POISONING) 2	OTHER 2	HEART DISEASE 2	HEART DISEASE 4	HOMICIDE/ LEGAL 4	SUICIDE 12	UNINTENT. INJURY 18	INFLUENZA/ PNEUMONIA 114	ATHERO-SCLEROSIS 158
7	HERNIA 1		OTHER 11	INFLUENZA/ PNEUMONIA 2	HIV 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 9	STROKE 15	DIABETES MELLITUS 82	INFLUENZA/ PNEUMONIA 132
8	CANCER 1			NON-CANCEROUS TUMOR 1	LIVER DISEASE 3	STROKE 9	INFLUENZA/ PNEUMONIA 11	ALZHEIMER'S DISEASE 57	DIABETES MELLITUS 115
9	OTHER 7			OTHER 17	ANEMIA 2	LIVER DISEASE 6	LIVER DISEASE 10	KIDNEY DISEASE 53	KIDNEY DISEASE 63
10					TWO CAUSES TIED 2	HOMICIDE/ LEGAL 5	SUICIDE 6	UNINTENT. INJURY 53	ALZHEIMER'S DISEASE 57

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

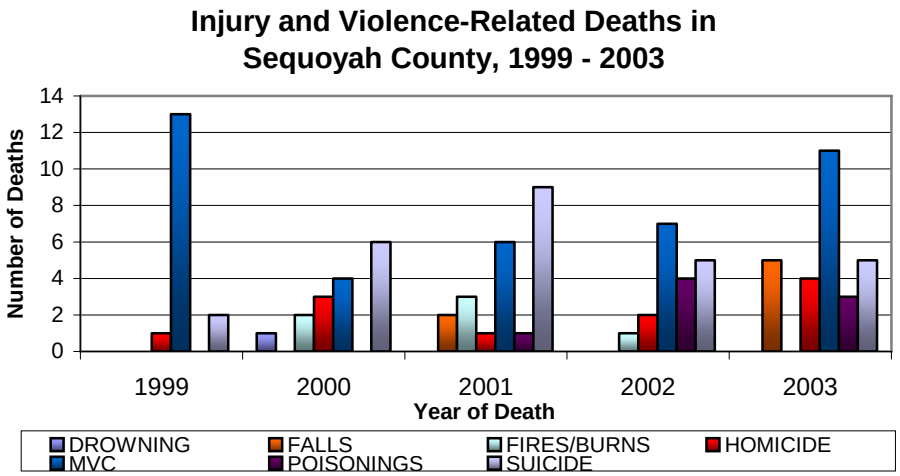
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Sequoyah County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Sequoyah County which has an average of 8.2 motor vehicle-related deaths a year, that translates to over $9 million a year.

Violence-related injuries (homicide and suicide) in Sequoyah County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 30.5% (12,194) of people in Sequoyah County use tobacco of some sort. Medical costs accumulated by those persons are over $40 million a year for Sequoyah County.

> *"Medical costs accumulated by those persons are over **$40 million a year** for Sequoyah County"*

Physical Activity, Wellness and Diabetes

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The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 28.9% (11,554) of people in Sequoyah County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.8% (2,719) of Sequoyah County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $36,007,717.00 in one year for Sequoyah County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

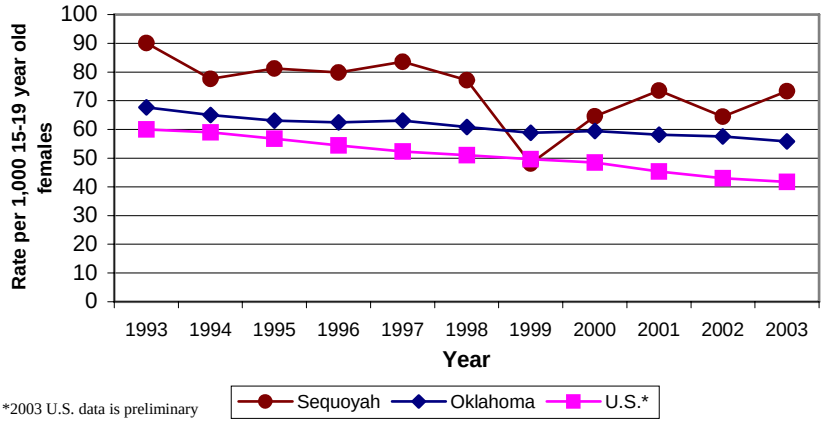
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Sequoyah County had a teen birth rate of 73.3 in 2003 which was a 14% increase from 2002 (64.5) and a 19% decrease since 1993 (90.1).

With an average of 99 births per year, teen pregnancy costs the citizens of Sequoyah County $316,800.00 a year.

Rate of Live Births to Teen Mothers Ages 15-19, Sequoyah County, 1993 to 2003



*2003 U.S. data is preliminary

Note: 18 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 19.8% of persons in Sequoyah County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Sequoyah County is 35% above the state (14.7%) and 60% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Sequoyah County, 2000 Census

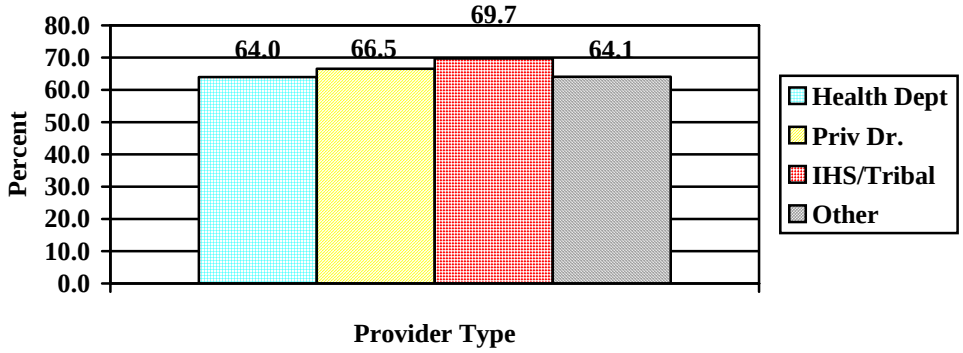
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	38,445	2,673	4,940	5,290	4,816	20,726
Cumulative Population		2,673	7,613	12,903	17,719	38,445
% of Total	100.0%	7.0%	12.8%	13.8%	12.5%	53.9%
Cumulative %		7.0%	19.8%	33.6%	46.1%	100.0%

OK By One - State Immunization Data

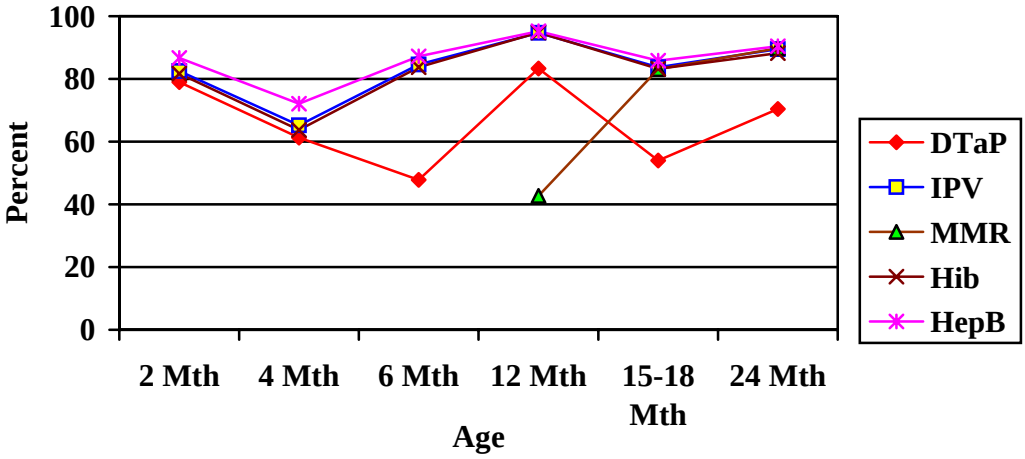
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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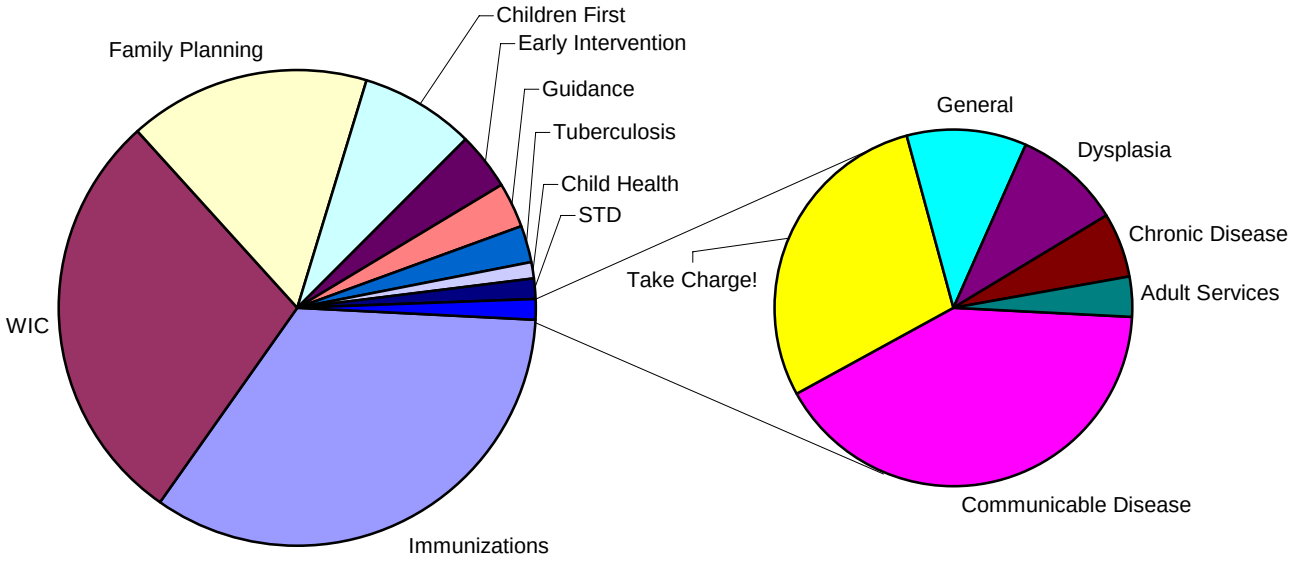

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 122 deaths a year
- $369,476.69 per death
- Total— $45,076,156.18 a year

Obesity

- 32.9% of population (13,153)
- $395.00 in additional medical costs per person
- Total—$5,195,435.00

Motor Vehicle-Related Injury Death

- Average 8.2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$9,184,000.00 a year

Tobacco Use

- 30.5% of population (12,194)
- $3,300.00 in health care costs
- Total—$40,240,200.00 a year

Diabetes

- 6.8% of population (2,719)
- $13,243.00 in healthcare costs a year
- Total—$36,007,717.00 a year

Teen Pregnancy

- Average of 99 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $316,800.00 a year

Grand Total for Sequoyah County:

$136,020,308.18

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
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Fax: 405-271-1225
Email: miriamm@health.ok.gov

Sequoyah County Health Department
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Sallisaw, OK 74955
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Report compiled by:
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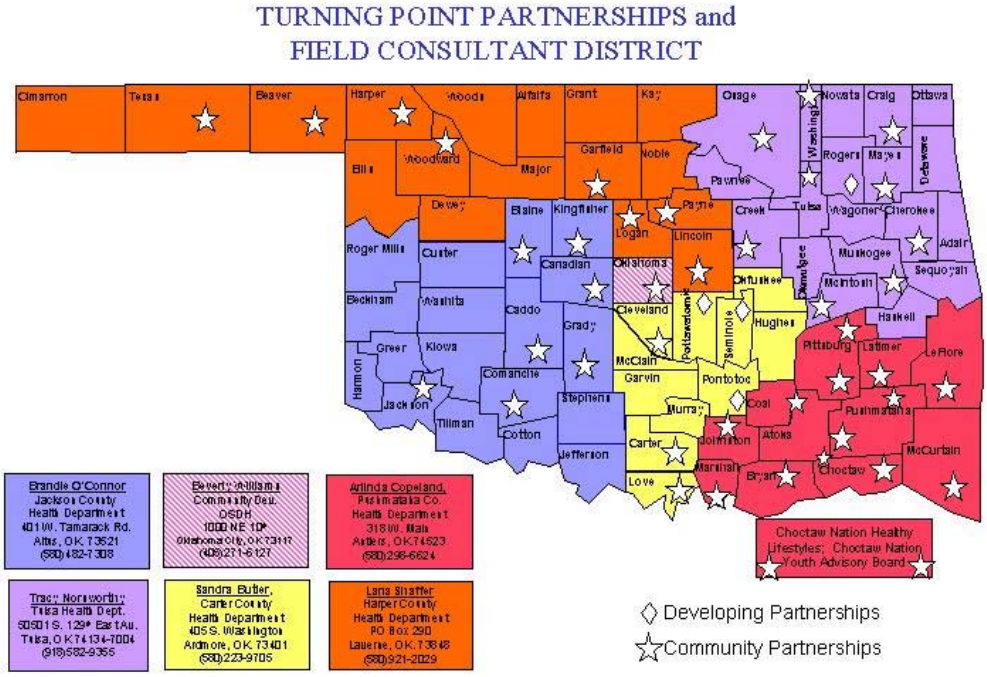

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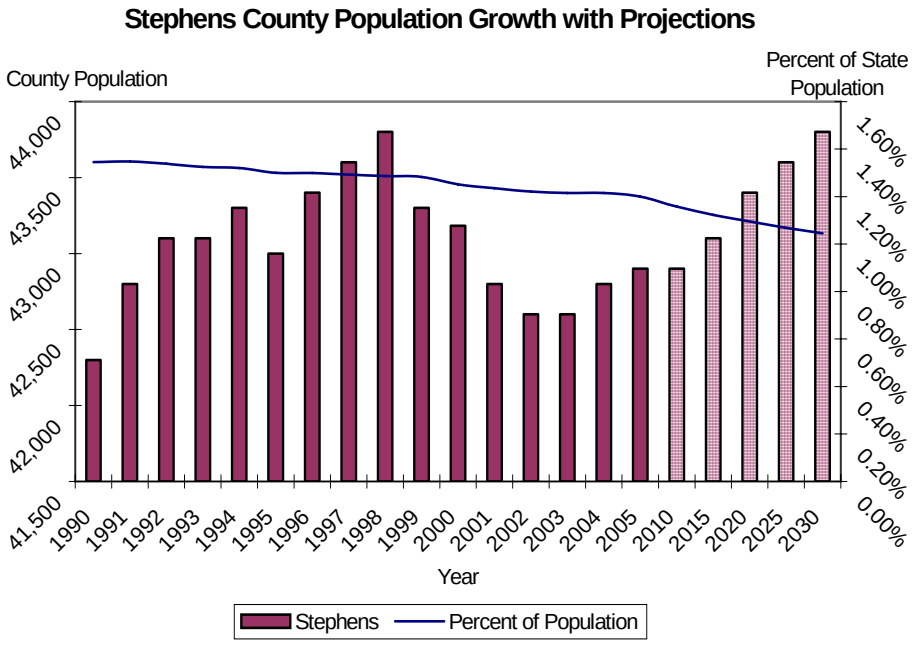
Demographics

** U.S. Census Bureau*

- Population estimates
  - 2% increase from 1990 to 2000 (42,299 to 43,182)
  - 1% decrease from 2000 to 2004
  - Ranked 47th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 88%
  - Native Americans =5%
  - Blacks =2%
  - Other/Multiple = 5%
- Age
  - Under 5 = 6%
  - Over 64 = 18%
  - Median age = 40.1 years
- Housing units
  - Occupied = 17,463 (88%)
  - Vacant = 2,391 (12%)
- Disability (ages 21 to 64) = 23.3% national = 19.2% state = 21.5%
- Individuals below poverty = 14.6% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Stephens County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,941 people in Stephens County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 187.5 deaths a year, heart disease accounts for over $69 million a year in medical costs in Stephens County.

Heart disease accounts for over $69 million a year in medical costs in Stephens County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 10th ranked cause of death in persons 65 and older accounting for a 242% increase in deaths.

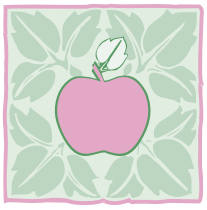
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 27.6% (11,723) of people in Stephens County were considered obese which accounted for an additional $4,630,585 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Stephens County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 19	UNINTENT. INJURY 5	UNINTENT. INJURY 38	UNINTENT. INJURY 26	UNINTENT. INJURY 28	CANCER 86	CANCER 200	HEART DISEASE 1779	HEART DISEASE 2063
2	CONGENITAL ANOMALIES 10	CANCER 3	SUICIDE 8	SUICIDE 15	CANCER 27	HEART DISEASE 80	HEART DISEASE 179	CANCER 970	CANCER 1297
3	UNINTENT. INJURY 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	CANCER 4	HOMICIDE/ LEGAL 7	HEART DISEASE 20	UNINTENT. INJURY 18	STROKE 26	STROKE 375	STROKE 415
4	SIDS 3	HOMICIDE/ LEGAL 1	STROKE 2	CANCER 5	SUICIDE 16	DIABETES MELLITUS 13	DIABETES MELLITUS 20	BRONCHITIS/ EMPHYSEMA/ ASTHMA 313	BRONCHITIS/ EMPHYSEMA/ ASTHMA 342
5	ACUTE BRONCHITIS 1	KIDNEY DISEASE 1	HOMICIDE/ LEGAL 2	HEART DISEASE 4	HIV 6	LIVER DISEASE 12	BRONCHITIS/ EMPHYSEMA/ ASTHMA 19	INFLUENZA/ PNEUMONIA 186	UNINTENT. INJURY 240
6	NON-CANCEROUS TUMOR 1	OTHER 2	CONGENITAL ANOMALIES 1	HIV 3	HOMICIDE/ LEGAL 3	STROKE 9	UNINTENT. INJURY 16	DIABETES MELLITUS 135	INFLUENZA/ PNEUMONIA 196
7	STROKE 1		HEART DISEASE 1	DIABETES MELLITUS 2	LIVER DISEASE 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 8	SUICIDE 8	UNINTENT. INJURY 101	DIABETES MELLITUS 172
8	HOMICIDE/ LEGAL 1		INFLUENZA/ PNEUMONIA 1	ANEMIA 1	KIDNEY DISEASE 3	SUICIDE 7	LIVER DISEASE 7	KIDNEY DISEASE 91	KIDNEY DISEASE 102
9	INFLUENZA/ PNEUMONIA 1		OTHER 3	CONGENITAL ANOMALIES 1	VIRAL HEPATITIS 3	KIDNEY DISEASE 4	SEPTICEMIA (BLOOD POISONING) 6	SEPTICEMIA (BLOOD POISONING) 87	SEPTICEMIA (BLOOD POISONING) 100
10	TWO CAUSES TIED 1			FOUR CAUSES TIED 1	THREE CAUSES TIED 2	SEPTICEMIA (BLOOD POISONING) 4	INFLUENZA/ PNEUMONIA 5	ALZHEIMER'S DISEASE 65	SUICIDE 72

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

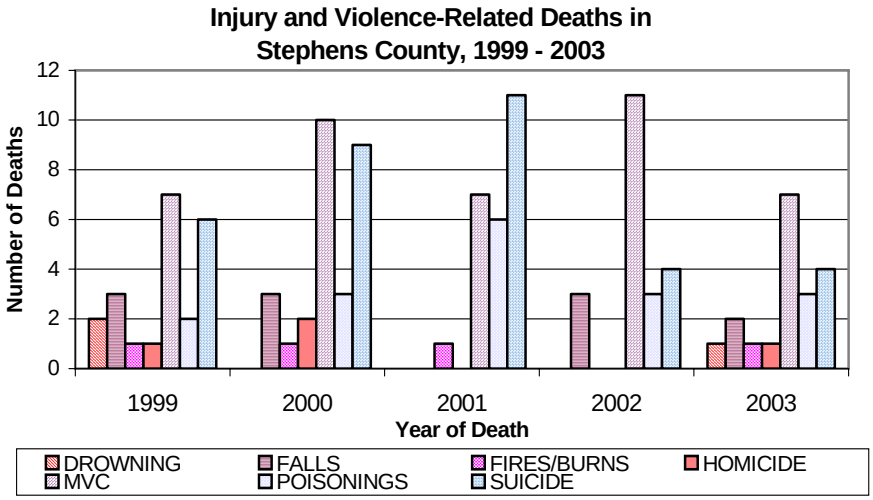
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Stephens County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Stephens County which has an average of 8.4 motor vehicle-related deaths a year, that translates to over $9 million a year.

Violence-related injuries (homicide and suicide) in Stephens County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 26.3% (11,171) of people in Stephens County use tobacco of some sort. Medical costs accumulated by those persons are almost $37 million a year for Stephens County.

> *"Medical costs accumulated by those persons are almost **$37 million a year** for Stephens County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 29.9% (12,700) of people in Stephens County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 9.1% (3,865) of Stephens County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $51,184,195.00 in one year for Stephens County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

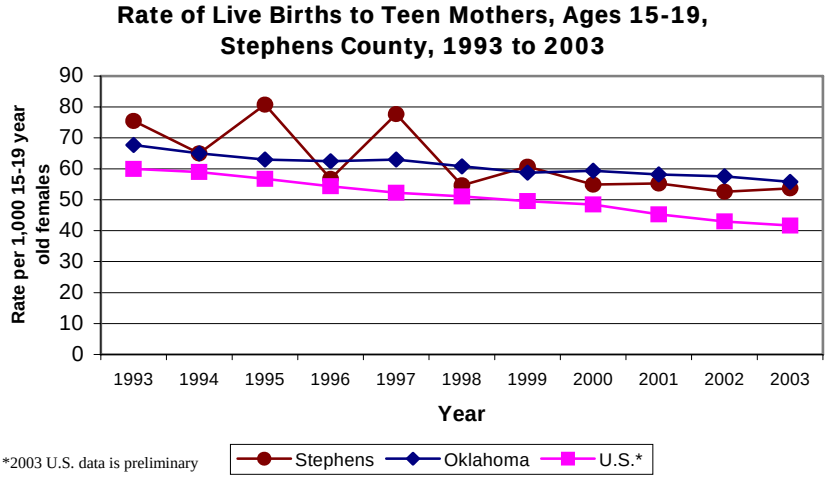
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Stephens County had a teen birth rate of 53.7 in 2003 which was a 2% increase from 2002 (52.6) but a 29% decrease since 1993 (75.5).

With an average of 90 births per year, teen pregnancy costs the citizens of Stephens County $288,000.00 a year.



*2003 U.S. data is preliminary

Note: 13 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 14.6% of persons in Stephens County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Stephens County is the same as the state (14.7%) and 18% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Stephens County, 2000 Census

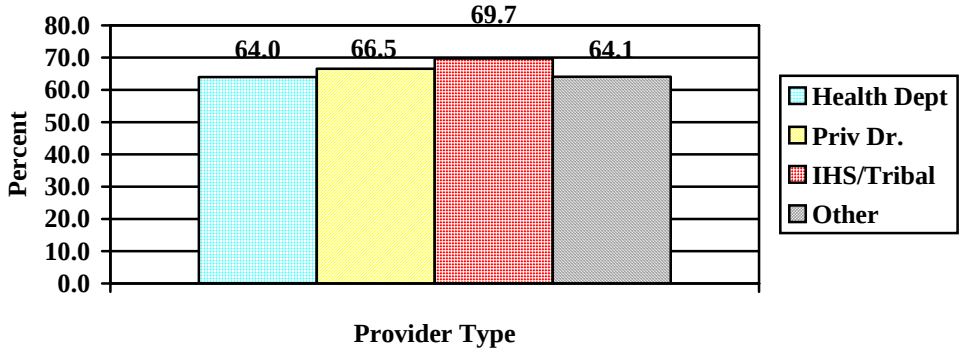
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	42,484	2,564	3,630	4,724	5,069	26,497
Cumulative Population		2,564	6,194	10,918	15,987	42,484
% of Total	100.0%	6.0%	8.5%	11.1%	11.9%	62.4%
Cumulative %		6.0%	14.6%	25.7%	37.6%	100.0%

OK By One - State Immunization Data

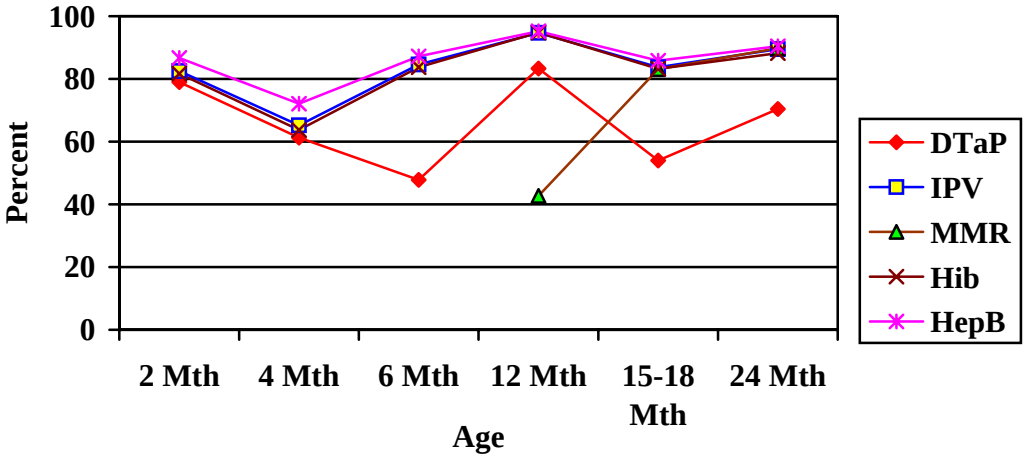
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

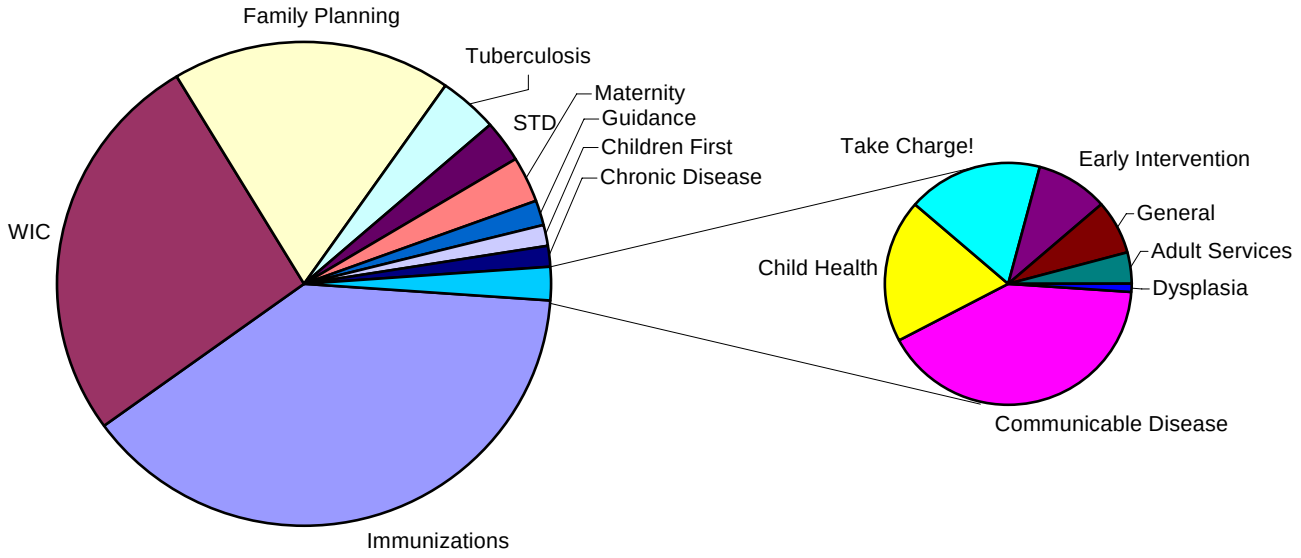


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

Attended Appointments for Stephens County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 188 deaths a year
- $369,476.69 per death
- Total— $69,461,617.72 a year

Obesity

- 27.6% of population (11,723)
- $395.00 in additional medical costs per person
- Total—$4,630,585.00

Motor Vehicle-Related Injury Death

- Average 8.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$9,408,000.00 a year

Tobacco Use

- 26.3% of population (11,171)
- $3,300.00 in health care costs
- Total—$36,864,300.00 a year

Diabetes

- 9.1% of population (3,865)
- $13,243.00 in healthcare costs a year
- Total—$51,184,195.00 a year

Teen Pregnancy

- Average of 90 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $288,000.00 a year

Grand Total for Stephens County:

$171,836,697.72

Oklahoma Turning POINT

Oklahoma Community Partners in Public Health Innovation

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
Email: neil@health.ok.gov

Stephens County Health Department
1401 Bois D'Arc
Duncan, OK 73533
580-252-0270

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Stephens County Turning Point

We want to say thank you to all the members of the Stephens County Turning Point.

- Stephens County United Way
- Duncan Public Schools
- Marlow Public Schools
- Central High Public School
- Comanche Public Schools
- Duncan Regional Hospital
- Simmons Center
- Department of Human Services
- Red River Area Vo Tech School
- Marlow Physicians
- Stephens County Health Department
- Girl Scouts
- Prevention Network
- Simmons Center
- Area Prevention Resource Center

OKLAHOMA STATE DEPARTMENT OF HEALTH

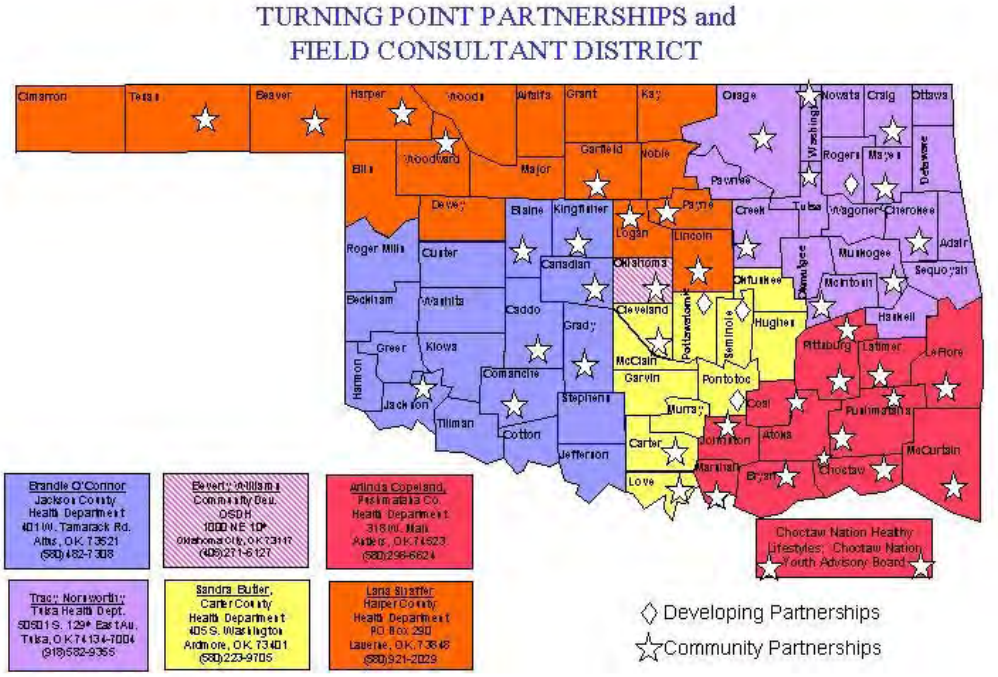
State of the County's Health Report

A Look Back To Move Forward

Texas County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Texas County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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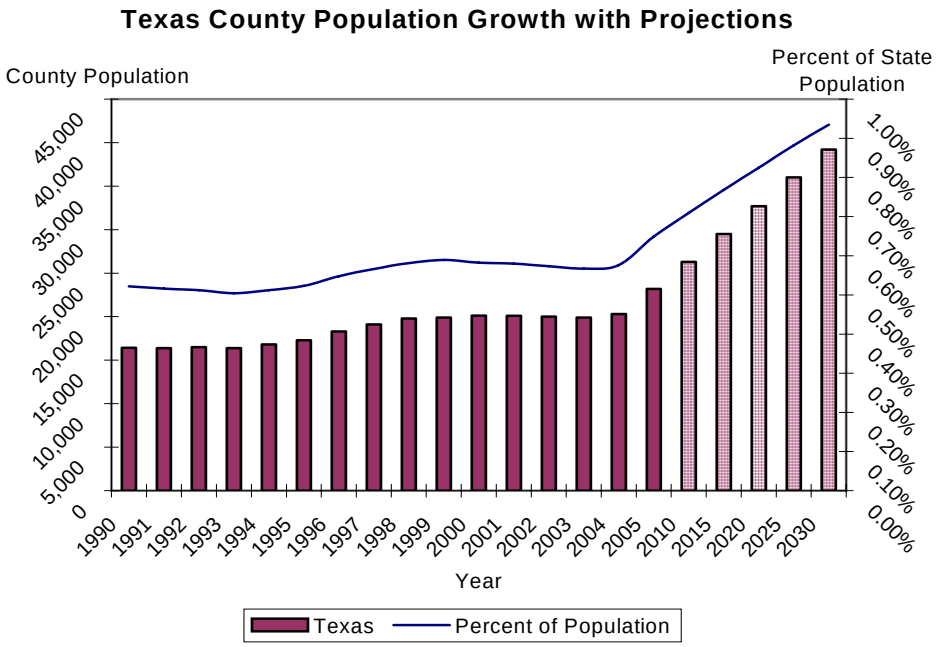
Demographics

** U.S. Census Bureau*

- Population estimates
  - 22% increase from 1990 to 2000 (16,419 to 20,107)
  - 1% increase from 2000 to 2004
  - Ranked 33rd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 30%
- Race
  - Whites = 77%
  - Native Americans =1%
  - Blacks =1%
  - Other/Multiple = 21%
- Age
  - Under 5 = 8%
  - Over 64 = 10%
  - Median age = 30.4 years
- Housing units
  - Occupied = 7,153 (89%)
  - Vacant = 861 (11%)
- Disability (ages 21 to 64) = 16.7% national = 19.2% state = 21.5%
- Individuals below poverty = 14.1% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Texas County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 545 people in Texas County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 45.5 deaths a year, heart disease accounts for almost $17 million a year in medical costs in Texas County.

Heart disease accounts for almost $17 million a year in medical costs in Texas County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 9th ranked cause of death in persons 65 and older accounting for a 140% increase in deaths.

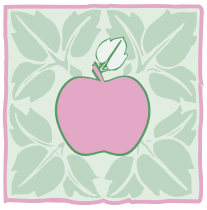
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 19.4% (3,867) of people in Texas County were considered obese which accounted for an additional $1,527,465 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Texas County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 9	UNINTENT. INJURY 4	UNINTENT. INJURY 18	UNINTENT. INJURY 14	UNINTENT. INJURY 13	HEART DISEASE 23	HEART DISEASE 50	HEART DISEASE 420	HEART DISEASE 501
2	UNINTENT. INJURY 8	SEPTICEMIA (BLOOD POISONING) 2	SUICIDE 7	HOMICIDE/ LEGAL 3	HEART DISEASE 7	CANCER 21	CANCER 45	CANCER 254	CANCER 329
3	CONGENITAL ANOMALIES 6	CANCER 1	STROKE 1	CANCER 2	SUICIDE 5	UNINTENT. INJURY 9	UNINTENT. INJURY 10	BRONCHITIS/ EMPHYSEMA/ ASTHMA 86	BRONCHITIS/ EMPHYSEMA/ ASTHMA 97
4	SIDS 3	OTHER 3	HEART DISEASE 1	SUICIDE 1	CANCER 4	STROKE 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 9	STROKE 70	UNINTENT. INJURY 94
5	CANCER 1		HOMICIDE/ LEGAL 1	OTHER 7	DIABETES MELLITUS 2	DIABETES MELLITUS 5	DIABETES MELLITUS 5	INFLUENZA/ PNEUMONIA 51	STROKE 81
6	OTHER 2		CANCER 1		HOMICIDE/ LEGAL 2	SUICIDE 4	STROKE 4	KIDNEY DISEASE 25	INFLUENZA/ PNEUMONIA 55
7			SEPTICEMIA (BLOOD POISONING) 1		INFLUENZA/ PNEUMONIA 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	SUICIDE 3	DIABETES MELLITUS 23	DIABETES MELLITUS 35
8			OTHER 1		LIVER DISEASE 2	VIRAL HEPATITS 2	ATHERO-SCLEROSIS 2	UNINTENT. INJURY 19	KIDNEY DISEASE 27
9					STROKE 1	HERNIA 1	INFLUENZA/ PNEUMONIA 2	ALZHEIMER'S DISEASE 12	SUICIDE 24
10					SEPTICEMIA (BLOOD POISONING) 1	TWO CAUSES TIED 1	TWO CAUSES TIED 2	HYPERTENSION 6	ALZHEIMER'S DISEASE 12

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

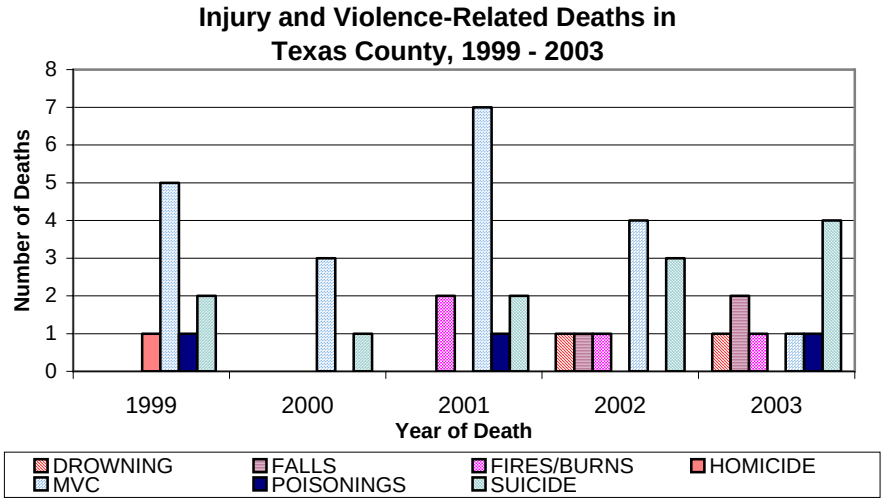
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Texas County. Unintentional injuries are the leading cause of death from ages 5 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Texas County which has an average of 4 motor vehicle-related deaths a year, that translates to over $4 million a year.

Violence-related injuries (homicide and suicide) in Texas County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 20% (3,987) of people in Texas County use tobacco of some sort. Medical costs accumulated by those persons are over $13 million a year for Texas County.

> *"Medical costs accumulated by those persons are over **$13 million a year** for Texas County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 25.8% (5,143) of people in Texas County had no leisure activity in the past month at the time they were surveyed.

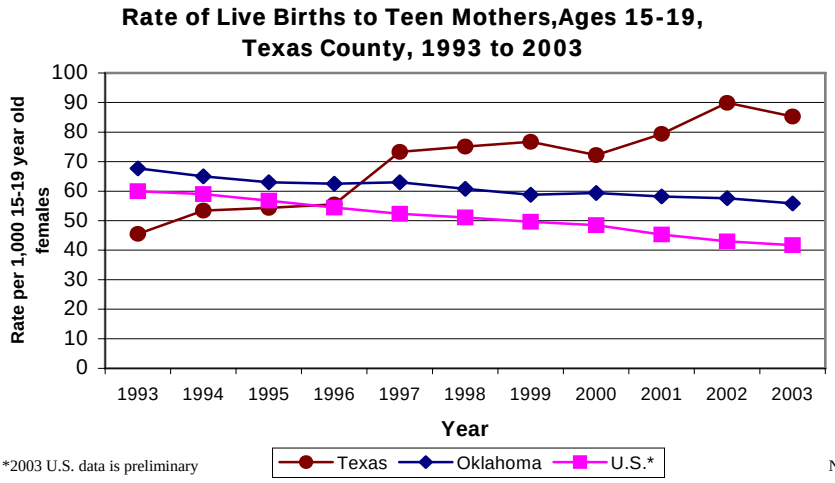
The BRFSS also indicated that 5.8% (1,156) of Texas County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $15,308,908.00 in one year for Texas County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 4 births to a mother 10-14 years of age occurred during the 11 year period.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Texas County had a teen birth rate of 85.3 in 2003 which was a 5% decrease from 2002 (89.9) but an 87% increase since 1993 (45.5).

With an average of 54 births per year, teen pregnancy costs the citizens of Texas County $172,800.00 a year.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 14.1% of persons in Texas County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Texas County is 4% below the state (14.7%) and 14% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Texas County, 2000 Census

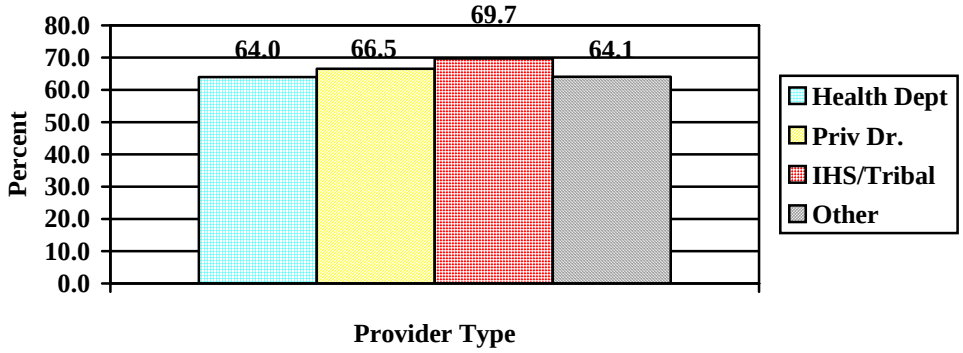
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	19,647	1,273	1,495	2,294	2,558	12,027
Cumulative Population		1,273	2,768	5,062	7,620	19,647
% of Total	100.0%	6.5%	7.6%	11.7%	13.0%	61.2%
Cumulative %		6.5%	14.1%	25.8%	38.8%	100.0%

OK By One - State Immunization Data

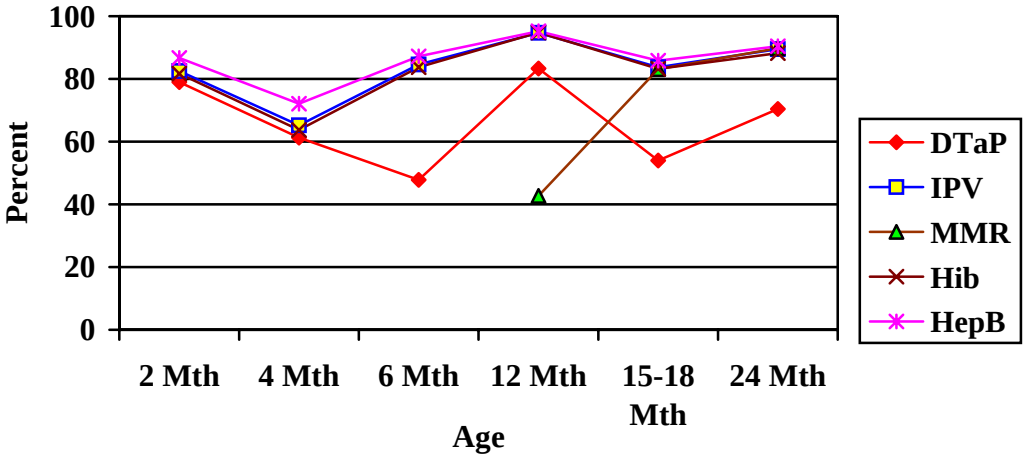
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

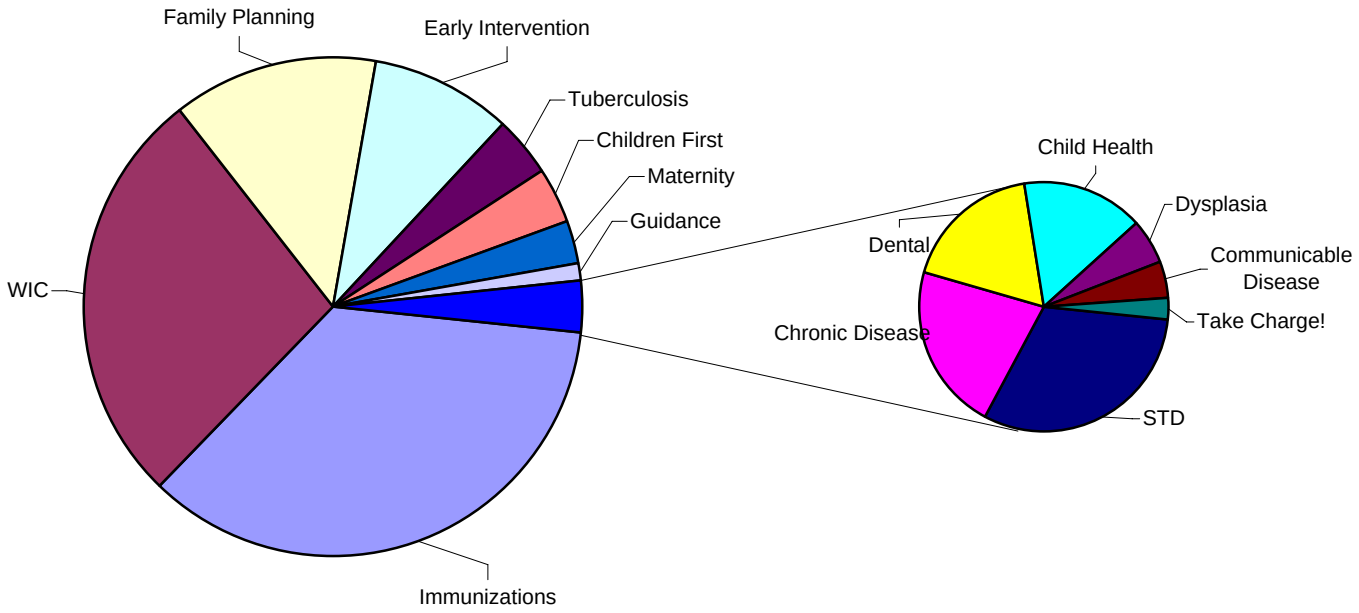


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

Attended Appointments for Texas County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 46 deaths a year
- $369,476.69 per death
- Total— $16,995,927.74 a year

Obesity

- 19.4% of population (3,867)
- $395.00 in additional medical costs per person
- Total—$1,527,465.00

Motor Vehicle-Related Injury Death

- Average 4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,480,000.00 a year

Tobacco Use

- 20% of population (3,987)
- $3,300.00 in health care costs
- Total—$13,157,100.00 a year

Diabetes

- 5.8% of population (1,156)
- $13,243.00 in healthcare costs a year
- Total—$15,308,908.00 a year

Teen Pregnancy

- Average of 54 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $172,800.00 a year

Grand Total for Texas County:

$51,642,200.74

Oklahoma Turning POINT

Oklahoma Community Partners in Public Health Innovation

OKLAHOMA STATE DEPARTMENT OF HEALTH

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Guymon, OK 73942
580-338-8544

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

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Texas County Tuning Point Partnership

We would like to say thank you to all the people and organizations that make the Texas County Turning Point Partnership a huge success. With accomplishments such as developing a diabetes education class and programs like Write Stuff and Whole Hawg Walk, you are paving the way for a healthier future for all Texas county residents.

- City of Guymon, Goodwell, Hardesty, Hooker, and Texhoma
- Department of Human Services
- Faith Community
- Guymon Daily Herald
- Guymon School System
- Local Citizens
- Memorial Hospital of Texas County
- Next Step Network
- Oklahoma Commission on Children and Youth
- Oklahoma Department of Mental Health and Substance Abuse
- Oklahoma Panhandle State University
- OSDH Turning Point staff
- OSU Extension
- Texas County Fire Department
- Texas County Health Department
- Texas County Residents
- Texas County School Systems
- Texas County Turning Point Partnership
- KGYN radio station
- Texas County EMS
- American Red Cross

OKLAHOMA STATE DEPARTMENT OF HEALTH

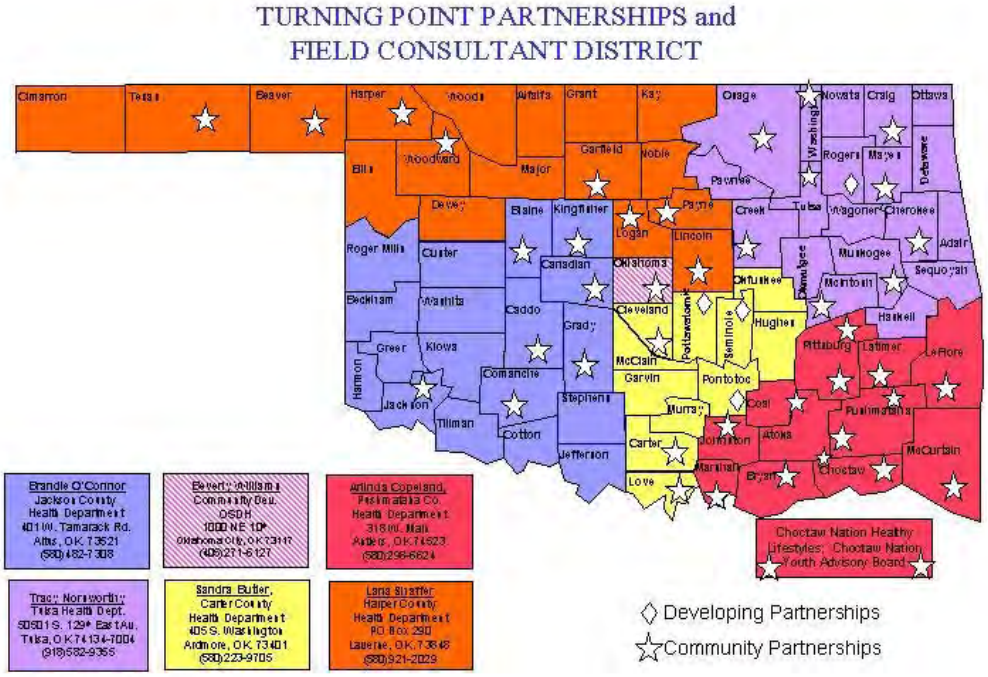
State of the County's Health Report

A Look Back To Move Forward

Tillman County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Tillman County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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Demographics

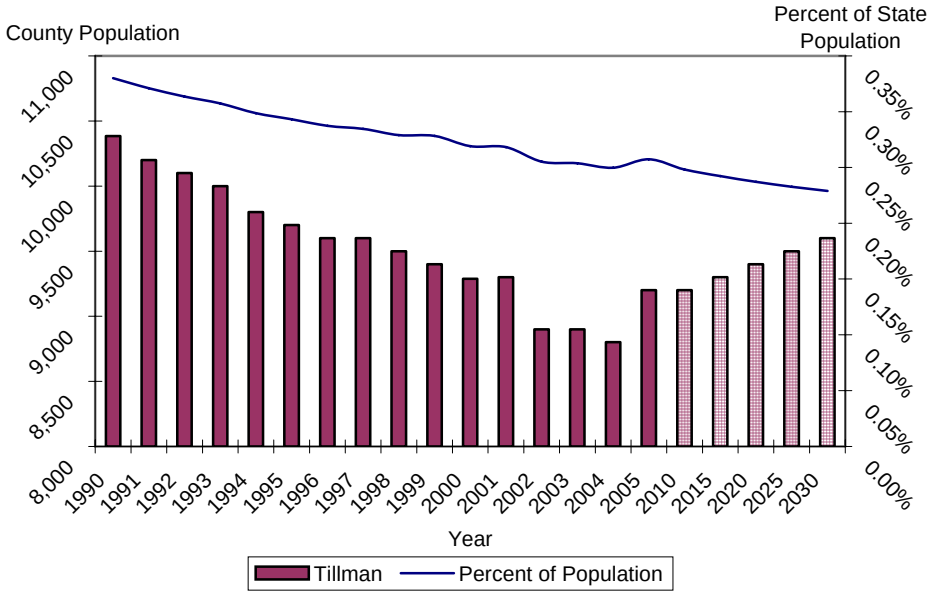
** U.S. Census Bureau*

- Population estimates
  - 11% decrease from 1990 to 2000 (10,384 to 9,287)
  - 5% decrease from 2000 to 2004
  - Ranked 71st for growth in state

2000 Census

- Hispanic/Latino ethnicity = 18%
- Race
  - Whites = 74%
  - Native Americans =3%
  - Blacks =9%
  - Other/Multiple = 14%
- Age
  - Under 5 = 6%
  - Over 64 = 19%
  - Median age = 38.9 years
- Housing units
  - Occupied = 3,594 (83%)
  - Vacant = 748 (17%)
- Disability (ages 21 to 64) = 26.0% national = 19.2% state = 21.5%
- Individuals below poverty = 21.9% national = 12.4% state = 14.7%

Tillman County Population Growth with Projections



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Tillman County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 614 people in Tillman County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 34.8 deaths a year, heart disease accounts for almost $13 million a year in medical costs in Tillman County.

Heart disease accounts for almost $13 million a year in medical costs in Tillman County.

Alzheimer's disease and the complications associated with it changed from 16th ranked cause of death (1983-1993) to the 12th ranked cause of death in people 65 and older accounting for a 50% increase in deaths.

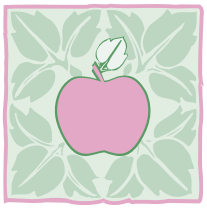
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 31.8% (2,810) of people in Tillman County were considered obese which accounted for an additional $1,109,950 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Tillman County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 5	CANCER 3	UNINTENT. INJURY 7	UNINTENT. INJURY 3	UNINTENT. INJURY 11	CANCER 25	CANCER 59	HEART DISEASE 323	HEART DISEASE 384
2	UNINTENT. INJURY 5	UNINTENT. INJURY 3	HOMICIDE/ LEGAL 2	HEART DISEASE 2	CANCER 10	HEART DISEASE 12	HEART DISEASE 39	CANCER 245	CANCER 343
3	CONGENITAL ANOMALIES 2	SUICIDE 1	SUICIDE 2	STROKE 1	HEART DISEASE 6	DIABETES MELLITUS 6	BRONCHITIS/ EMPHYSEMA/ ASTHMA 12	STROKE 89	BRONCHITIS/ EMPHYSEMA/ ASTHMA 97
4	INFLUENZA/ PNEUMONIA 2	OTHER 2	CONGENITAL ANOMALIES 1	COMPLICATED PREGNANCY 1	INFLUENZA/ PNEUMONIA 2	UNINTENT. INJURY 6	DIABETES MELLITUS 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 81	STROKE 97
5	HEART DISEASE 1		CANCER 1	CONGENITAL ANOMALIES 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	STROKE 5	LIVER DISEASE 4	DIABETES MELLITUS 51	UNINTENT. INJURY 67
6	MENINGITIS 1		OTHER 1	DIABETES MELLITUS 1	LIVER DISEASE 1	SUICIDE 5	UNINTENT. INJURY 4	INFLUENZA/ PNEUMONIA 48	DIABETES MELLITUS 66
7	OTHER 1			HOMICIDE/ LEGAL 1	SUICIDE 1	HOMICIDE/ LEGAL 4	STROKE 2	KIDNEY DISEASE 31	INFLUENZA/ PNEUMONIA 56
8				SUICIDE 1	VIRAL HEPATITIS 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	GALLBLADDER DISORDER 2	UNINTENT. INJURY 28	KIDNEY DISEASE 34
9				OTHER 4	OTHER 6	INFLUENZA/ PNEUMONIA 2	HOMICIDE/ LEGAL 2	PNEUMONITIS 14	SPETICEMIA (BLOOD POISONING) 17
10						SPETICEMIA (BLOOD POISONING) 2	INFLUENZA/ PNEUMONIA 2	SPETICEMIA (BLOOD POISONING) 13	PNEUMONITIS 16

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

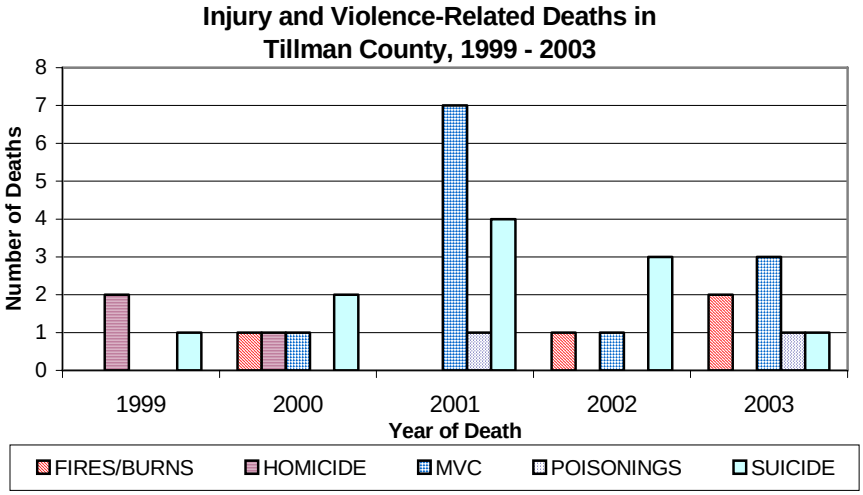
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Tillman County. Unintentional injuries are the leading cause of death from ages 15 to 44.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Tillman County which has an average of 2.4 motor vehicle-related deaths a year, that translates to almost $3 million a year.

Violence-related injuries (homicide and suicide) in Tillman County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 23.3% (2,059) of people in Tillman County use tobacco of some sort. Medical costs accumulated by those persons are almost $7 million a year for Tillman County.

> *"Medical costs accumulated by those persons are almost **$7 million a year** for Tillman County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 39.2% (3,463) of people in Tillman County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 19.1% (1,687) of Tillman County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $22,340,941.00 in one year for Tillman County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

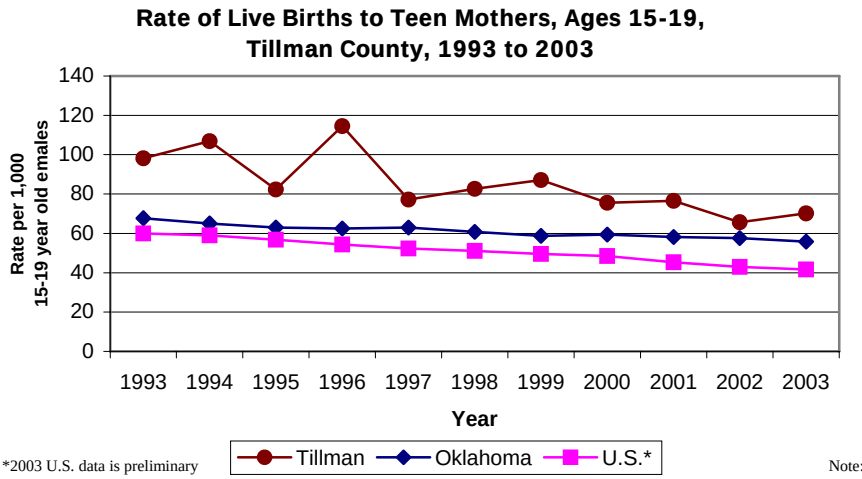
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Tillman County had a teen birth rate of 70.2 in 2003 which was a 7% increase from 2002 (65.7) but a 29% decrease since 1993 (98.2).

With an average of 28 births per year, teen pregnancy costs the citizens of Tillman County $89,600.00 a year.



*2003 U.S. data is preliminary

Note: 8 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 21.9% of persons in Tillman County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Tillman County is 49% below the state (14.7%) and 76% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Pawnee County, 2000 Census

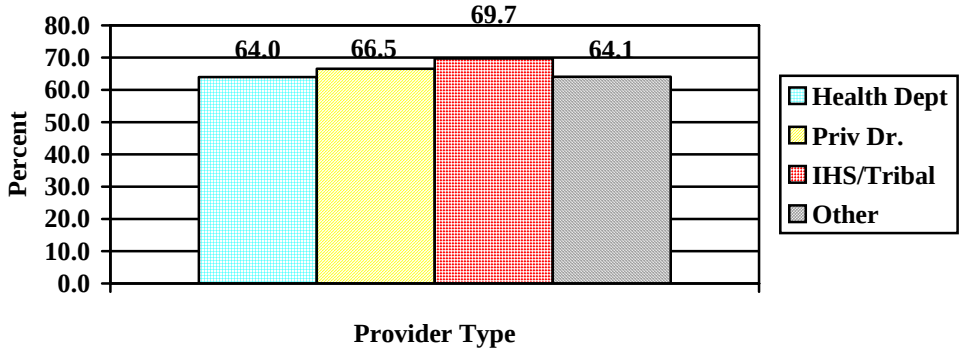
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	16,389	739	1,397	2,014	2,159	10,080
Cumulative Population		739	2,136	4,150	6,309	16,389
% of Total	100.0%	4.5%	8.5%	12.3%	13.2%	61.5%
Cumulative %		4.5%	13.0%	25.3%	38.5%	100.0%

OK By One - State Immunization Data

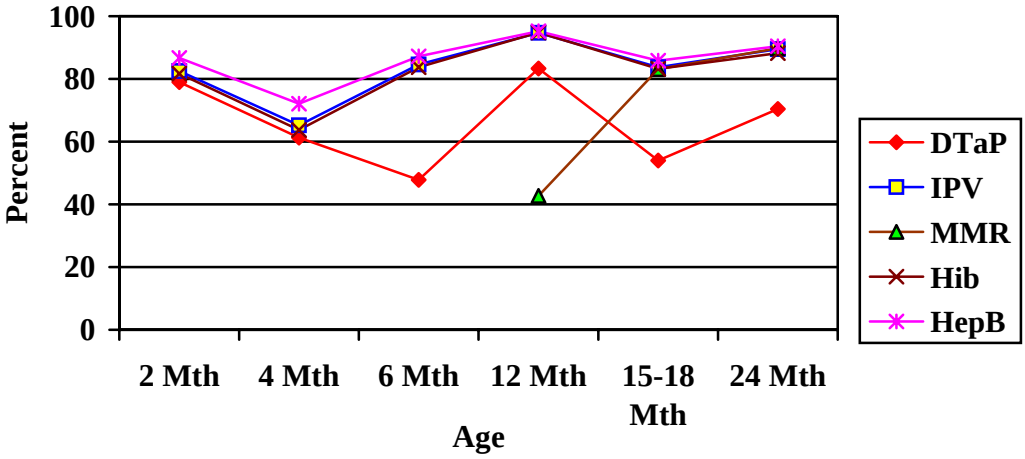
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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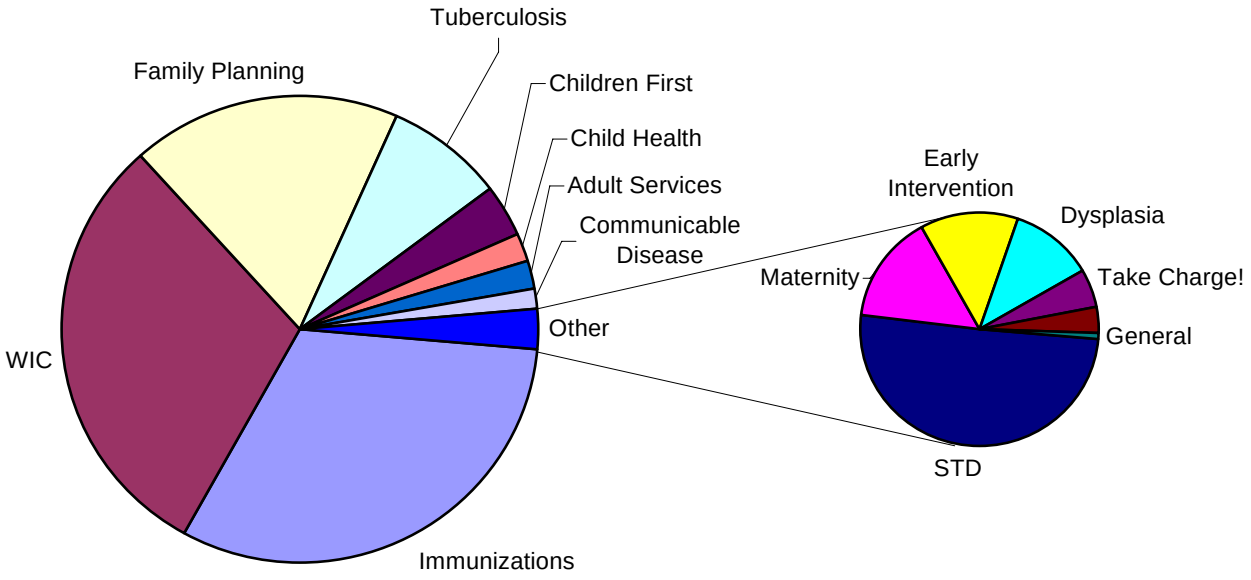

Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 35 deaths a year
- $369,476.69 per death
- Total— $12,931,684.15 a year

Obesity

- 31.8% of population (2,810)
- $395.00 in additional medical costs per person
- Total—$1,109,950.00

Motor Vehicle-Related Injury Death

- Average 2.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,688,000.00 a year

Tobacco Use

- 23.3% of population (2,059)
- $3,300.00 in health care costs
- Total—$6,794,700.00 a year

Diabetes

- 19.1% of population (1,687)
- $13,243.00 in healthcare costs a year
- Total—$22,340,941.00 a year

Teen Pregnancy

- Average of 28 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $89,600.00 a year

Grand Total for Tillman County:

$45,954,875.15

OKLAHOMA STATE DEPARTMENT OF HEALTH

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Community Development Service

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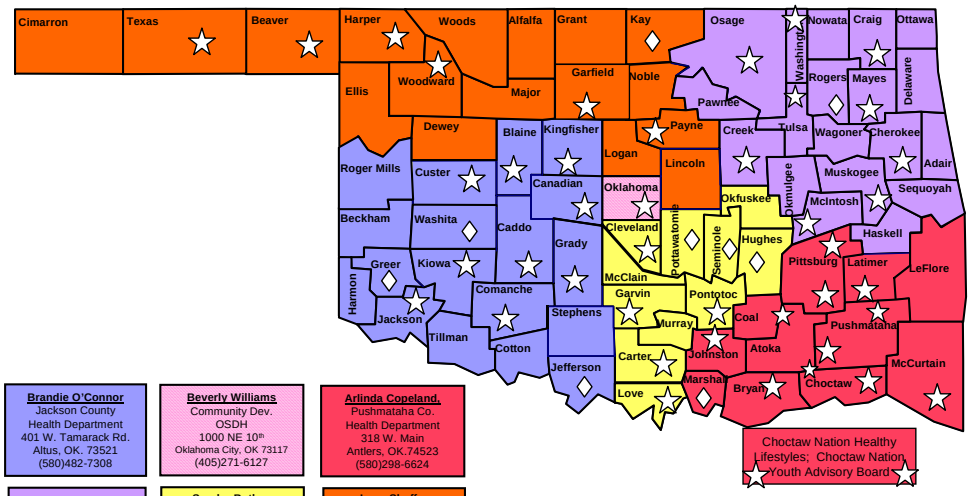
TURNING POINT PARTNERSHIPS and
FIELD CONSULTANT DISTRICT



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Field Rep Districts 9-13-05

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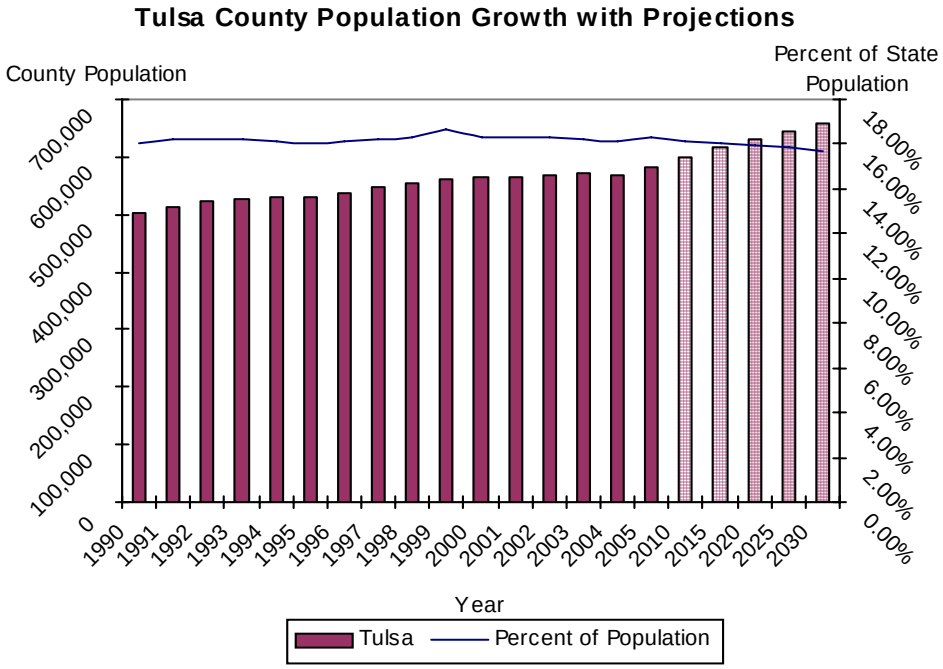
Demographics

** U.S. Census Bureau*

- Population estimates
  - 12% increase from 1990 to 2000 (503,341 to 563,299)
  - 1% increase from 2000 to 2004
  - Ranked 31st for growth in state

2000 Census

- Hispanic/Latino ethnicity = 6%
- Race
  - Whites = 75%
  - Native Americans =5%
  - Blacks =11%
  - Other/Multiple = 9%
- Age
  - Under 5 = 7%
  - Over 64 = 12%
  - Median age = 34.4 years
- Housing units
  - Occupied = 226,892 (93%)
  - Vacant = 17,061 (7%)
- Disability (ages 21 to 64) = 19.1% national = 19.2% state = 21.5%
- Individuals below poverty = 11.6% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Tulsa County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 16,113 people in Tulsa County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 1567.2 deaths a year, heart disease accounts for over $579 million a year in medical costs in Tulsa County.

Heart disease accounts for over $579 million a year in medical costs in Tulsa County.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 229% increase in deaths.

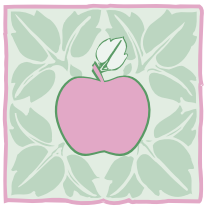
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 21.2% (120,906) of people in Tulsa County were considered obese which accounted for an additional $47,757,870 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Tulsa County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 342	UNINTENT. INJURY 55	UNINTENT. INJURY 324	UNINTENT. INJURY 275	CANCER 412	CANCER 1080	CANCER 2065	HEART DISEASE 14137	HEART DISEASE 17240
2	CONGENITAL ANOMALIES 182	CANCER 22	HOMICIDE/ LEGAL 164	SUICIDE 158	HEART DISEASE 360	HEART DISEASE 919	HEART DISEASE 1691	CANCER 8267	CANCER 12016
3	SIDS 73	HOMICIDE/ LEGAL 19	SUICIDE 140	CANCER 125	UNINTENT. INJURY 354	UNINTENT. INJURY 279	BRONCHITIS/ EMPHYSEMA/ ASTHMA 304	STROKE 3046	STROKE 3536
4	UNINTENT. INJURY 65	CONGENITAL ANOMALIES 16	CANCER 34	HIV 122	SUICIDE 213	SUICIDE 153	STROKE 232	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2406	BRONCHITIS/ EMPHYSEMA/ ASTHMA 2837
5	HEART DISEASE 27	SUICIDE 16	HEART DISEASE 18	HOMICIDE/ LEGAL 117	HIV 163	LIVER DISEASE 137	DIABETES MELLITUS 197	INFLUENZA/ PNEUMONIA 1290	UNINTENT. INJURY 2215
6	HOMICIDE/ LEGAL 21	HEART DISEASE 9	HIV 8	HEART DISEASE 78	HOMICIDE/ LEGAL 99	STROKE 136	UNINTENT. INJURY 159	ALZHEIMER'S DISEASE 987	INFLUENZA/ PNEUMONIA 1505
7	SPETICEMIA (BLOOD POISONING) 18	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	CONGENITAL ANOMALIES 7	STROKE 26	STROKE 82	DIABETES MELLITUS 127	LIVER DISEASE 130	DIABETES MELLITUS 918	DIABETES MELLITUS 1323
8	INFLUENZA/ PNEUMONIA 17	INFLUENZA/ PNEUMONIA 4	BRONCHITIS/ EMPHYSEMA/ ASTHMA 6	DIABETES MELLITUS 21	LIVER DISEASE 78	BRONCHITIS/ EMPHYSEMA/ ASTHMA 86	INFLUENZA/ PNEUMONIA 81	UNINTENT. INJURY 703	ALZHEIMER'S DISEASE 1005
9	CANCER 8	ANEMIA 3	DIABETES MELLITUS 6	CONGENITAL ANOMALIES 14	DIABETES MELLITUS 53	HIV 69	SUICIDE 80	ATHERO-SCLEROSIS 633	SUICIDE 892
10	TWO CAUSES TIED 7	THREE CAUSES TIED 2	STROKE 5	INFLUENZA/ PNEUMONIA 14	INFLUENZA/ PNEUMONIA 41	INFLUENZA/ PNEUMONIA 55	KIDNEY DISEASE 45	KIDNEY DISEASE 497	ATHERO-SCLEROSIS 664

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

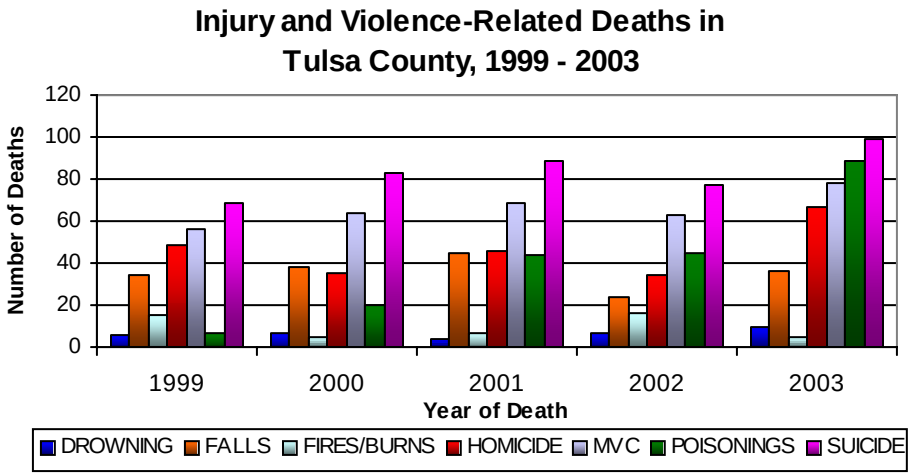
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Tulsa County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Tulsa County which has an average of 65.8 motor vehicle-related deaths a year, that translates to almost $74 million a year.

Violence-related injuries (homicide and suicide) in Tulsa County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 22.9% (130,602) of people in Tulsa County use tobacco of some sort. Medical costs accumulated by those persons are almost $431 million a year for Tulsa County.

> *"Medical costs accumulated by those persons are almost **$431 million a year** for Tulsa County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 25.3% (144,289) of people in Tulsa County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.5% (37,070) of Tulsa County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $490,918,010.00 in one year for Tulsa County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

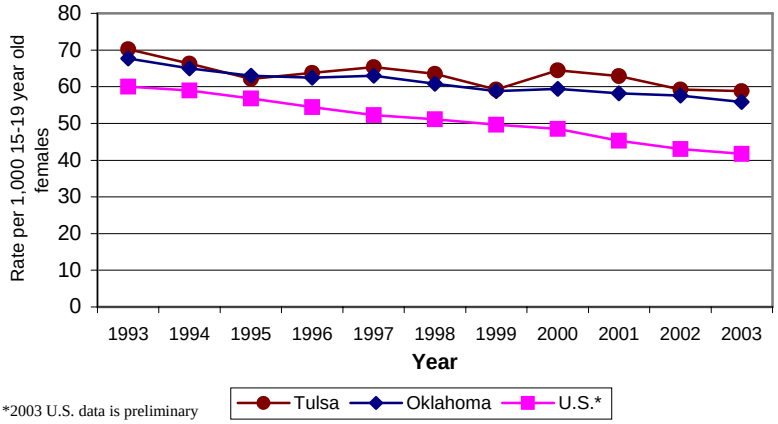
While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Tulsa County had a teen birth rate of 58.8 in 2003 which was a 1% decrease from 2002 (59.2) and a 16% decrease since 1993 (70.2).

With an average of 1185 births per year, teen pregnancy costs the citizens of Tulsa County $3,792,000.00 a year.

Rate of Live Births to Teen Mothers Ages 15-19, Tulsa County, 1993 to 2003



*2003 U.S. data is preliminary

Note: 260 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 11.6% of persons in Tulsa County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Tulsa County is 21% below the state (14.7%) and 6% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Tulsa County, 2000 Census

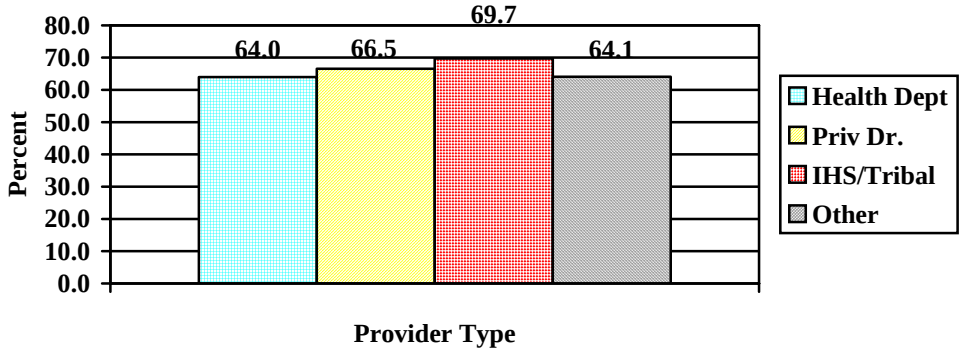
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	551,650	27,542	36,520	50,570	53,133	383,885
Cumulative Population		27,542	64,062	114,632	167,765	551,650
% of Total	100.0%	5.0%	6.6%	9.2%	9.6%	69.6%
Cumulative %		5.0%	11.6%	20.8%	30.4%	100.0%

OK By One - State Immunization Data

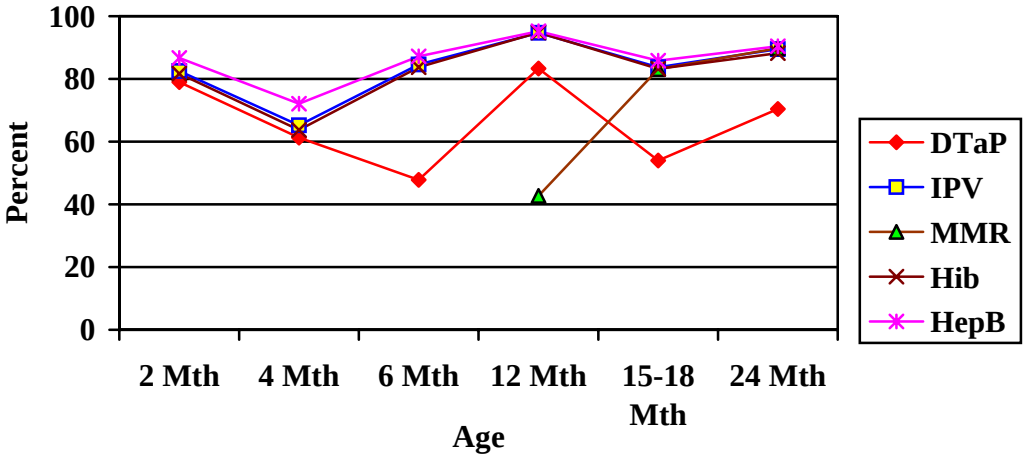
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

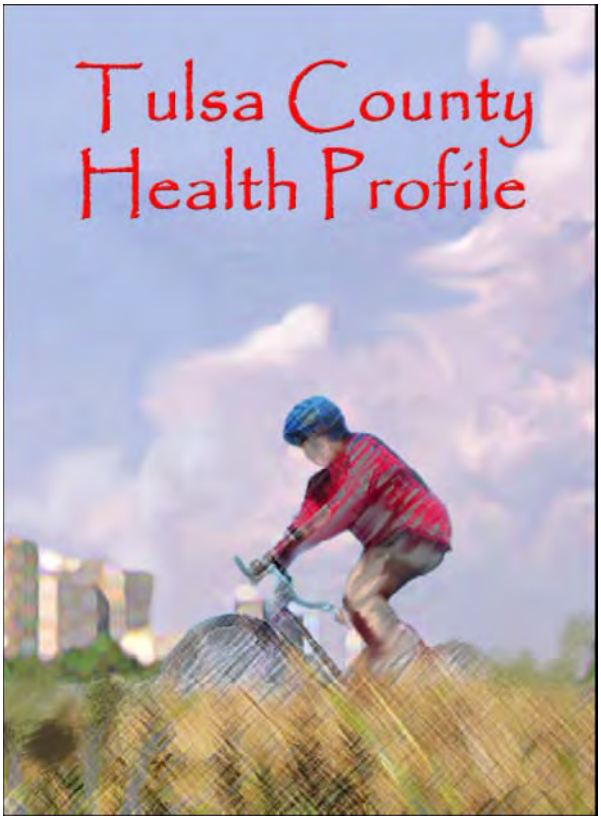


**Note: County level data will be available soon.

County Health Department

For a more comprehensive look at the health of Tulsa County residents the Tulsa City-County Health Department Planning & Epidemiology Division has developed this 228 page document. The Tulsa County Health Profile examines information found in this document, as well as topics such as environmental health, programs and services and links to resources.

http://www.tulsa-health.org



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 1567 deaths a year
- $369,476.69 per death
- Total— $578,969,973.23 a year

Obesity

- 21.2% of population (120,906)
- $395.00 in additional medical costs per person
- Total—$47,757,870.00

Motor Vehicle-Related Injury Death

- Average 65.8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$73,696,000.00 a year

Tobacco Use

- 22.9% of population (130,602)
- $3,300.00 in health care costs
- Total—$430,986,600.00 a year

Diabetes

- 6.5% of population (37,070)
- $13,243.00 in healthcare costs a year
- Total—$490,918,010.00 a year

Teen Pregnancy

- Average of 1185 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $3,792,000.00 a year

Grand Total for Tulsa County:

$1,626,120,453.23

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
Fax: 405-271-1225
Email: miriamm@health.ok.gov

Tulsa City-County Health Department
5051 S 129th East Avenue
Tulsa, OK 74134
918-582-9355
Website: http://www.tulsa-health.org

A Look Back To Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

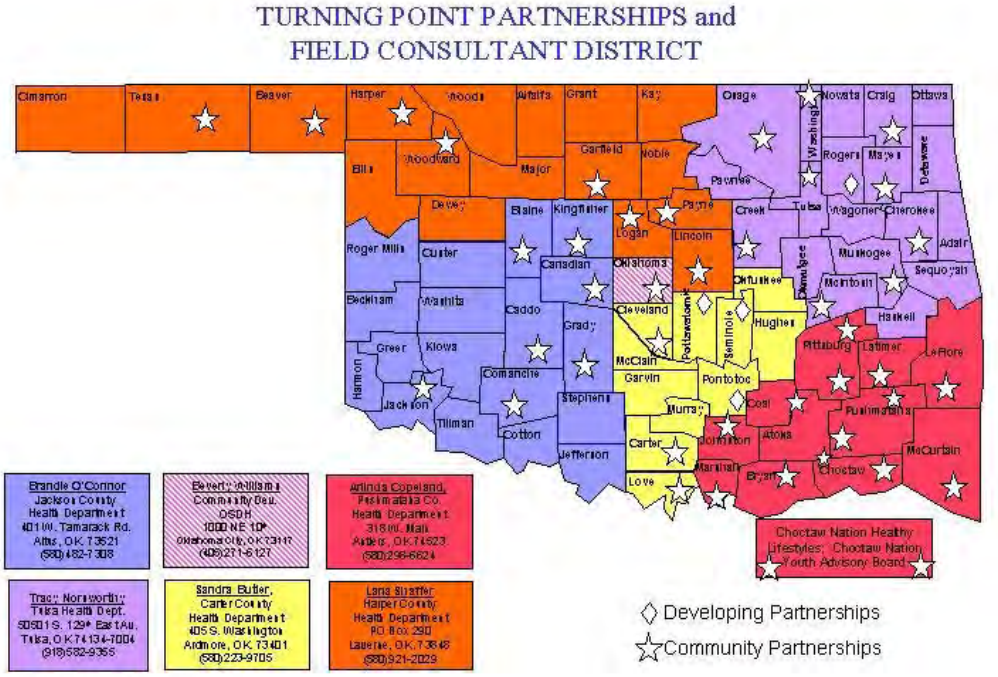
State of the County's Health Report

A Look Back To Move Forward

Wagoner County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Wagoner County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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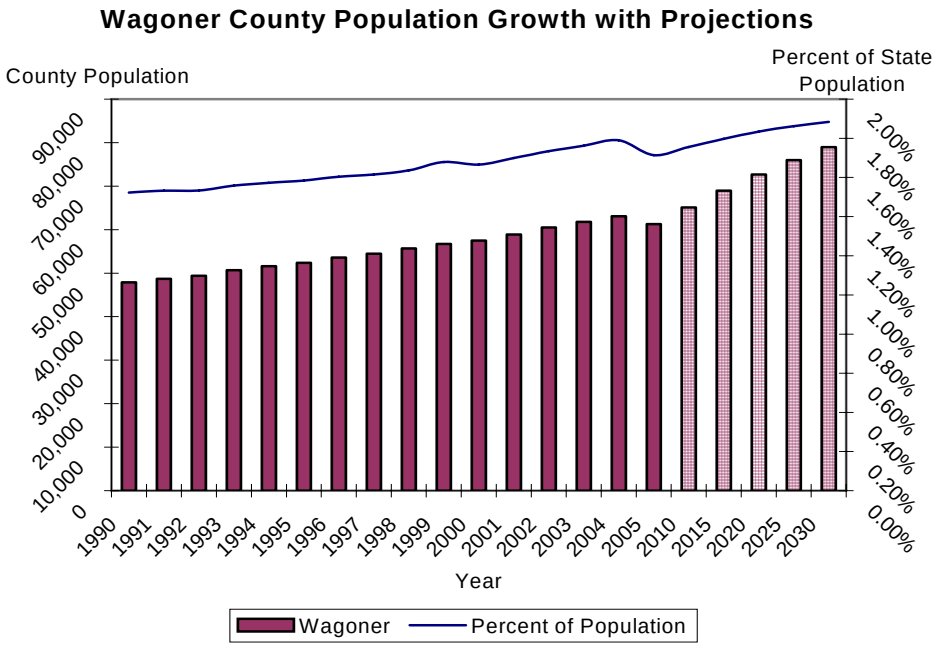
Demographics

** U.S. Census Bureau*

- Population estimates
  - 20% increase from 1990 to 2000 (47,883 to 57,491)
  - 10% increase from 2000 to 2004
  - Ranked 2nd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 80%
  - Native Americans =9%
  - Blacks =4%
  - Other/Multiple = 7%
- Age
  - Under 5 = 7%
  - Over 64 = 10%
  - Median age = 36.2 years
- Housing units
  - Occupied = 21,010 (91%)
  - Vacant = 2,164 (9%)
- Disability (ages 21 to 64) = 21.2% national = 19.2% state = 21.5%
- Individuals below poverty = 8.9% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Wagoner County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,169 people in Wagoner County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 116.3 deaths a year, heart disease accounts for almost $43 million a year in medical costs in Wagoner County.

Heart disease accounts for almost $43 million a year in medical costs in Wagoner County.

Alzheimer's disease and the complications associated with it have increased from the 11th ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 508% increase in deaths.

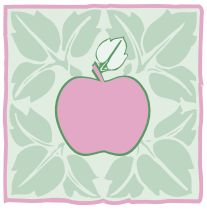
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 28.2% (17,435) of people in Wagoner County were considered obese which accounted for an additional $6,886,825 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
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Top 10 Causes of Death by Age Group

Wagoner County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 23	UNINTENT. INJURY 10	UNINTENT. INJURY 42	UNINTENT. INJURY 27	HEART DISEASE 34	CANCER 113	CANCER 180	HEART DISEASE 1002	HEART DISEASE 1279
2	CONGENITAL ANOMALIES 16	NON-CANCEROUS TUMOR 1	SUICIDE 14	SUICIDE 19	CANCER 32	HEART DISEASE 82	HEART DISEASE 150	CANCER 655	CANCER 989
3	SIDS 6	CANCER 1	HOMICIDE/ LEGAL 7	HEART DISEASE 8	UNINTENT. INJURY 26	UNINTENT. INJURY 27	BRONCHITIS/ EMPHYSEMA/ ASTHMA 32	STROKE 195	STROKE 229
4	UNINTENT. INJURY 6	SUICIDE 1	CONGENITAL ANOMALIES 2	CANCER 6	SUICIDE 18	LIVER DISEASE 14	STROKE 17	BRONCHITIS/ EMPHYSEMA/ ASTHMA 146	UNINTENT. INJURY 211
5	HEART DISEASE 1		HEART DISEASE 2	HOMICIDE/ LEGAL 5	HIV 8	STROKE 10	UNINTENT. INJURY 17	INFLUENZA/ PNEUMONIA 105	BRONCHITIS/ EMPHYSEMA/ ASTHMA 188
6	SEPTICEMIA (BLOOD POISONING) 1		CANCER 2	STROKE 1	DIABETES MELLITUS 7	SUICIDE 10	DIABETES MELLITUS 16	ALZHEIMER'S DISEASE 79	INFLUENZA 122
7			KIDNEY DISEASE 2	COMPLICATED PREGNANCY 1	HOMICIDE/ LEGAL 7	DIABETES MELLITUS 9	INFLUENZA/ PNEUMONIA 10	DIABETES MELLITUS 75	DIABETES MELLITUS 107
8			BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	CONGENITAL ANOMALIES 1	LIVER DISEASE 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	LIVER DISEASE 10	UNINTENT. INJURY 56	ALZHEIMER'S DISEASE 79
9			SEPTICEMIA (BLOOD POISONING) 1	HIV 1	STROKE 6	INFLUENZA 5	KIDNEY DISEASE 6	SEPTICEMIA (BLOOD POISONING) 43	SUICIDE 72
10				THREE CAUSES TIED 1	THREE CAUSES TIED 2	VIRAL HEPATITIS 4	HOMICIDE/ LEGAL 5	KIDNEY DISEASE 30	SEPTICEMIA (BLOOD POISONING) 49

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

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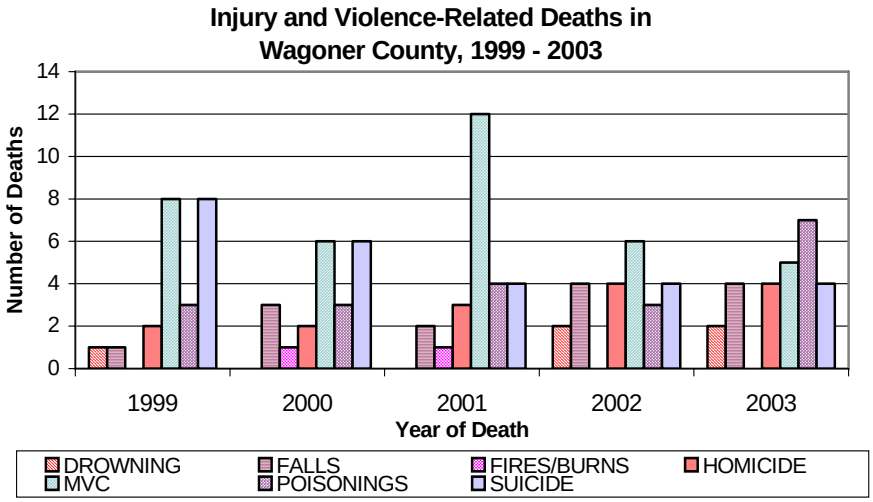
Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Wagoner County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Wagoner County which has an average of 7.4 motor vehicle-related deaths a year, that translates to over $8 million a year.

Violence-related injuries (homicide and suicide) in Wagoner County are ranked in the top 10 in six of the eight age groups (see Top 10 list on page 3).



Tobacco Use

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Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 24.5% (15,148) of people in Wagoner County use tobacco of some sort. Medical costs accumulated by those persons are almost $50 million a year for Wagoner County.

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Physical Activity, Wellness and Diabetes

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The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 27.3% (16,879) of people in Wagoner County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 6.7% (4,142) of Wagoner County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $54,852,506.00 in one year for Wagoner County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

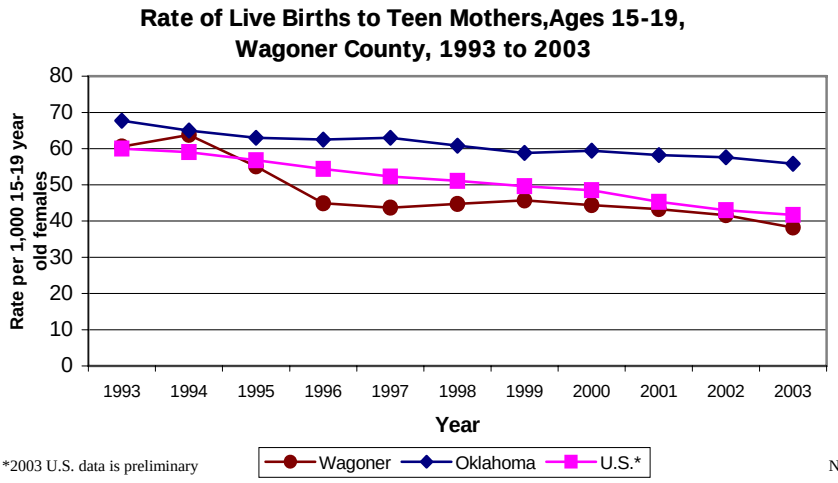
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Wagoner County had a teen birth rate of 38.2 in 2003 which was a 8% decrease from 2002 (41.6) but a 37% decrease since 1993 (60.6).

With an average of 101 births per year, teen pregnancy costs the citizens of Wagoner County $323,200.00 a year.



*2003 U.S. data is preliminary

Note: 12 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 8.9% of persons in Wagoner County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Wagoner County is 39% below the state (14.7%) and 28% below the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Wagoner County, 2000 Census

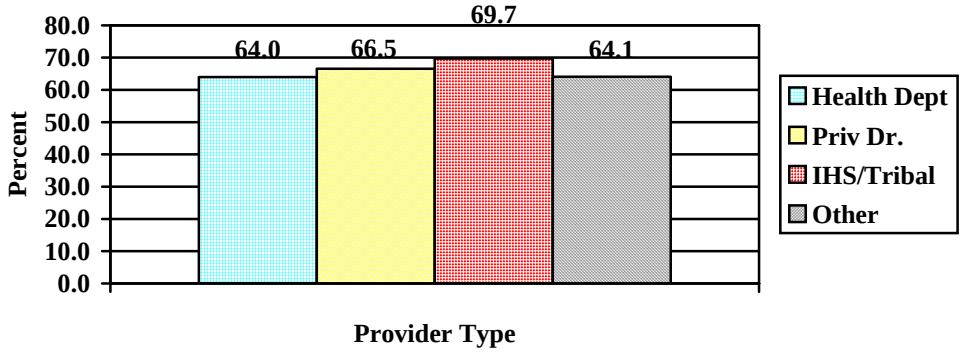
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	57,087	2,272	2,814	5,469	6,233	40,299
Cumulative Population		2,272	5,086	10,555	16,788	57,087
% of Total	100.0%	4.0%	4.9%	9.6%	10.9%	70.6%
Cumulative %		4.0%	8.9%	18.5%	29.4%	100.0%

OK By One - State Immunization Data

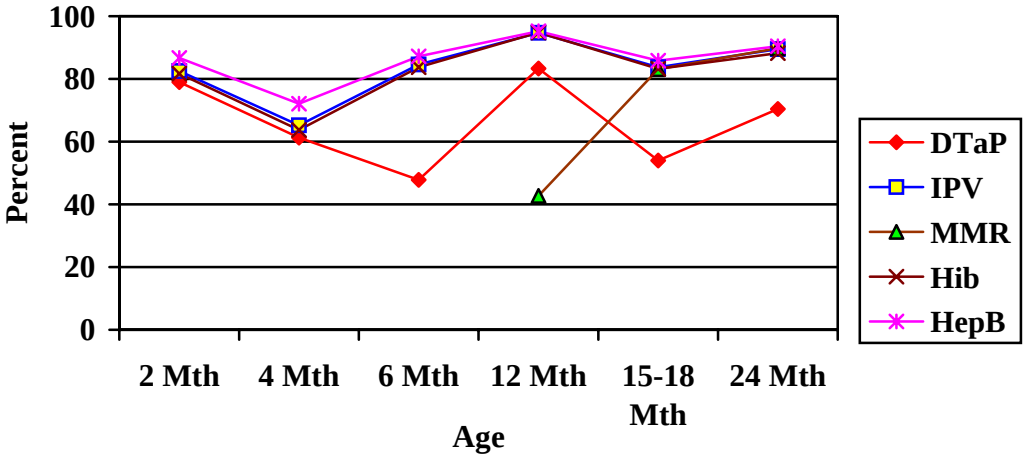
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

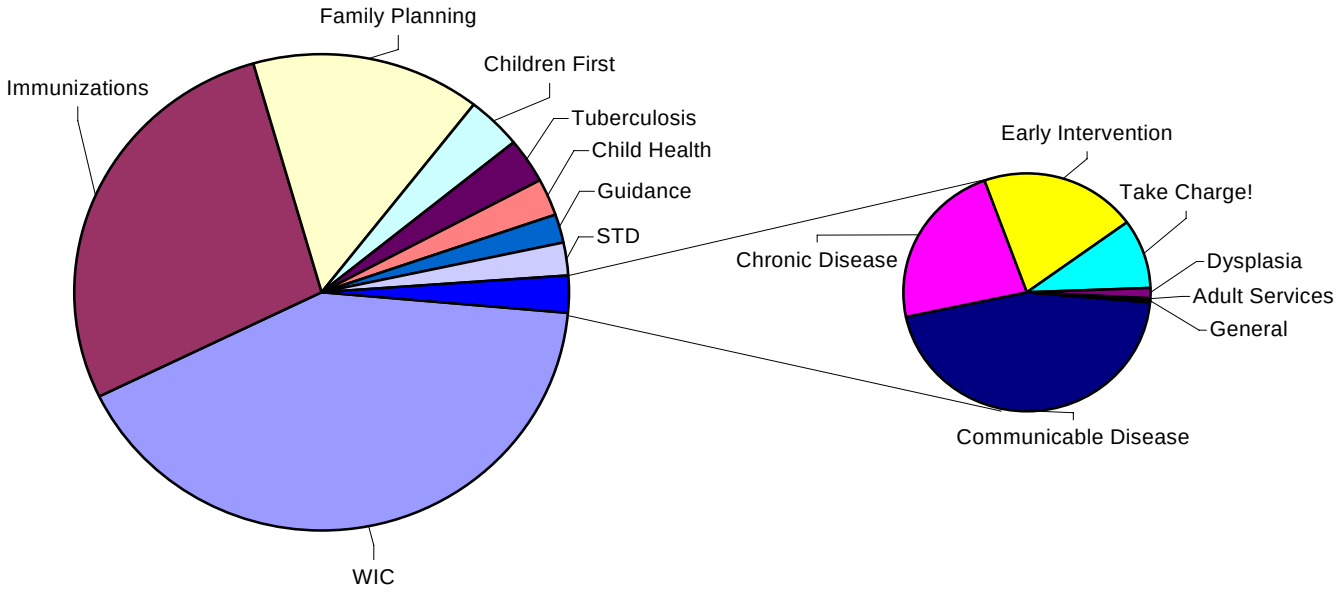


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services,* OSDH

Attended Appointments for Wagoner County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 116 deaths a year
- $369,476.69 per death
- Total— $42,859,296.04 a year

Obesity

- 28.2% of population (17,435)
- $395.00 in additional medical costs per person
- Total—$6,886,825.00

Motor Vehicle-Related Injury Death

- Average 7.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$8,288,000.00 a year

Tobacco Use

- 24.5% of population (15,148)
- $3,300.00 in health care costs
- Total—$49,988,400.00 a year

Diabetes

- 6.7% of population (4,142)
- $13,243.00 in healthcare costs a year
- Total—$54,852,506.00 a year

Teen Pregnancy

- Average of 101 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $323,200.00 a year

Grand Total for Wagoner County:

$163,198,227.04

Oklahoma Turning POINT

Oklahoma Community Partners in Public Health Innovation

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
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Email: neil@health.ok.gov

Wagoner County Health Department
212 North Pierce
Wagoner, OK 74467
918-485-3022

PO Box 962
28596 E 141st St. South
Coweta, OK 74429
918-486-2845

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Coweta/East Broken Arrow Turning Point & Wagoner Resource Council

We would like to say thank you to all the people and organizations that make the both coalitions a success.

Coweta/East Broken Arrow Turning Point

- Broken Arrow Police Chief
- Coweta City Manager
- Broken Arrow City Manager
- Wagoner County Commissioner
- Wagoner County Health Department

Wagoner Resource Council

- Wagoner County Health Department
- Chamber of Commerce
- Department Human Services
- Red Cross
- Ministerial Alliance
- Wagoner Community Hospital
- Wagoner Public Schools
- Bill Willis CMHC
- Oklahoma State University Cooperative Extension Service

OKLAHOMA STATE DEPARTMENT OF HEALTH

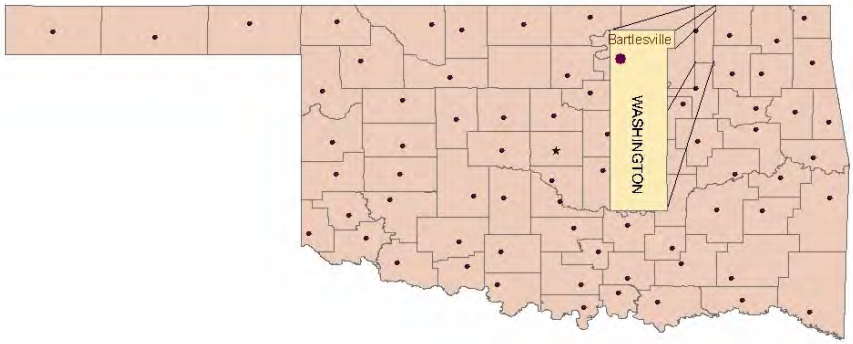
State of the County's Health Report

A Look Back To Move Forward

Washington County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Washington County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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Poverty	5
County Health Department Usage	6
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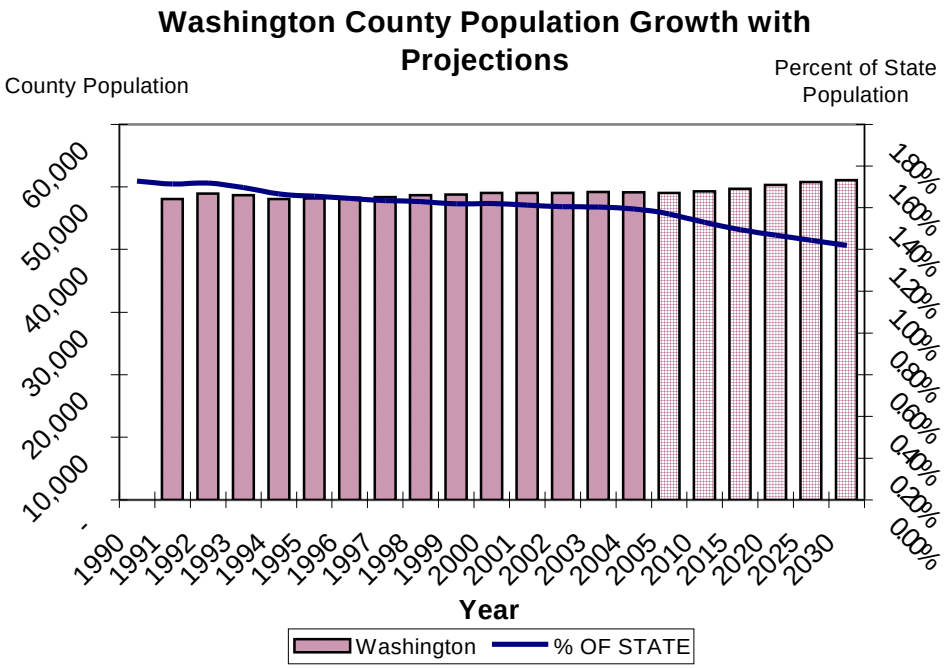
Demographics

** U.S. Census Bureau*

- Population estimates
  - 2% increase from 1990 to 2000 (48,066 to 48,996)
  - No change from 2000 to 2004
  - Ranked 39th for growth in state

2000 Census
- Hispanic/Latino ethnicity = 3%
- Race
  - Whites = 81%
  - Native Americans = 9%
  - Blacks = 2%
  - Other/Multiple = 8%
- Age
  - Under 5 = 6%
  - Over 64 = 18%
  - Median age = 40.1 years
- Housing units
  - Occupied = 20,179 (91%)
  - Vacant = 2,071 (9%)
- Disability (ages 21 to 64) = 21.7% national = 19.2% state = 21.5%
- Individuals below poverty = 11.9% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH &

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Washington County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 1,912 people in Washington County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 170 deaths a year, heart disease accounts for almost $63 million a year in medical costs in Washington County.

Heart disease accounts for almost $63 million a year in medical costs in Washington

Alzheimer's disease and the complications associated has decreased from the 7th ranked cause of death (1983-1993) to the 8th leading cause of death in persons 65 and older but accounted for a 59% increase in deaths.

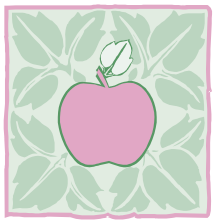
** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 20.7% (10,168) of people in Washington County were considered obese which accounted for an additional $4,016,360 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods — Sensible Portions
5 to 9 Fruits & Vegeta-

Top 10 Causes of Death by Age Group

Washington County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 14	UNINTENT. INJURY 7	UNINTENT. INJURY 29	UNINTENT. INJURY 15	CANCER 31	CANCER 106	CANCER 213	HEART DISEASE 1618	HEART DISEASE 1872
2	UNINTENT. INJURY 12	CONGENITAL ANOMALIES 2	SUICIDE 10	CANCER 10	UNINTENT. INJURY 30	HEART DISEASE 68	HEART DISEASE 158	CANCER 1010	CANCER 137
3	PERINATAL PERIOD 10	ANEMIA 1	HOMICIDE/ LEGAL 5	SUICIDE 7	HEART DISEASE 21	UNINTENT. INJURY 21	BRONCHITIS/ EMPHYSEMA/ ASTHMA 29	STROKE 373	STROKE 418
4	SIDS 3	BRONCHITIS 1	CANCER 5	HOMICIDE/ LEGAL 2	SUICIDE 15	LIVER DISEASE 14	STROKE 24	BRONCHITIS/ EMPHYSEMA/ ASTHMA 283	BRONCHITIS/ EMPHYSEMA/ ASTHMA 320
5	HEART DISEASE 1	HEART DISEASE 1	CONGENITAL ANOMALIES 2	BRONCHITIS 1	LIVER DISEASE 8	STROKE 13	DIABETES MELLITUS 19	INFLUENZA/ PNEUMONIA 203	INFLUENZA/ PNEUMONIA 223
6	ACUTE BRONCHITIS 1	HIV 1	HEART DISEASE 2	HEART DISEASE 1	STROKE 6	DIABETES MELLITUS 8	UNINTENT. INJURY 15	ALZHEIMER'S DISEASE 143	UNINTENT. INJURY 210
7	STROKE 1	INFLUENZA 1	STROKE 1	HIV 1	HOMICIDE/ LEGAL 4	INFLUENZA 8	SUICIDE 11	DIABETES MELLITUS 120	DIABETES MELLITUS 148
8	INFLUENZA 1	PERINATAL PERIOD 1	PNEUMONITIS 1	LIVER DISEASE 1	HIV 3	SUICIDE 7	INFLUENZA/ PNEUMONIA 9	UNINTENT. INJURY 81	ALZHEIMER'S DISEASE 145
9	KIDNEY DISEASE 1	SEPTICEMIA 1	OTHER 5	SEPTICEMIA 1	VIRAL HEPATITIS 2	BRONCHITIS 5	KIDNEY DISEASE 7	KIDNEY DISEASE 78	KIDNEY DISEASE 90
10	OTHER 12			VIRAL HEPATITIS 1	FOUR CAUSES TIED 1	KIDNEY DISEASE 4	SEPTICEMIA 6	ATHERO-SCLEROSIS 60	SUICIDE 69

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

* *Vital Statistics,* Health Care Information Systems, OSDH & National Safety Council

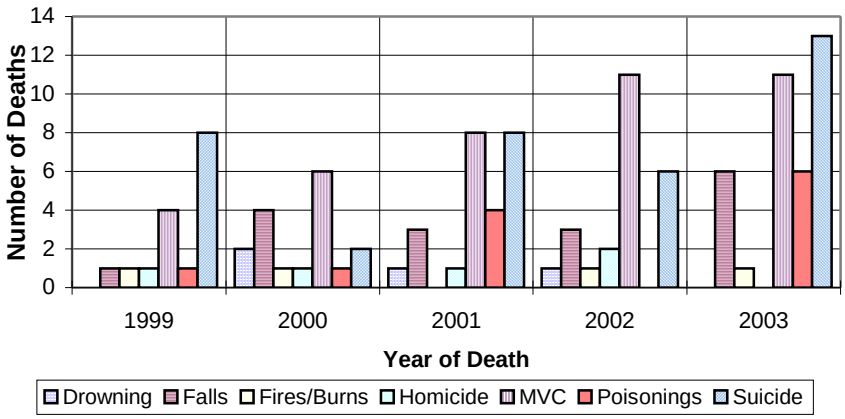
Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Washington County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Washington County which has an average of 8 motor vehicle-related deaths a year, that translates to almost $9 million a year.

Violence-related injuries (homicide and suicide) in Washington County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).

Injury and Violence-Related Deaths in Washington County, 1999-2003



Tobacco Use

* *Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 30.1% (14,785) of people in Washington County use tobacco of some sort. Medical costs accumulated by those persons are almost $49 million a year for Washington County.

*"Medical costs accumulated by those persons are almost **$49 million a year** for Washington County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & American Diabetes Association,

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 32.8% (16,112) of people in Washington County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 12.8% (6,287) of Washington County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual health-care costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $83,258,741 in one year for Washington County.

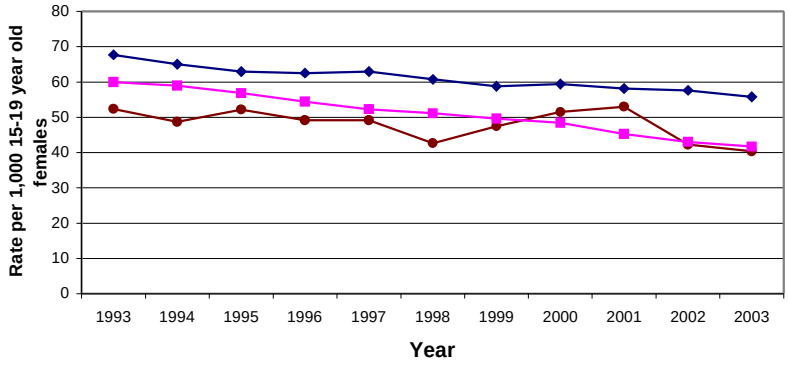
Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics,* Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2002, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Rate of Live Births to Teen Mothers, Ages 15-19, 1993 to 2003



*2003 U.S. data is preliminary

Washington — Oklahoma — U.S.*

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Washington County had a teen birth rate of 40.4 in 2003 which was a 5% decrease from 2002 (42.2) and a 23% decrease since 1993 (52.4).

With an average of 82 births per year, teen pregnancy costs the citizens of Washington County $262,400.00 a year.

Note: Only 9 birth to a mother 10-14 years of age occurred during the 11 year period.

Poverty

** U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 11.9% of persons in Washington County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Washington County is 19% below the state and 5% below the nation for persons with incomes below the federal poverty level.

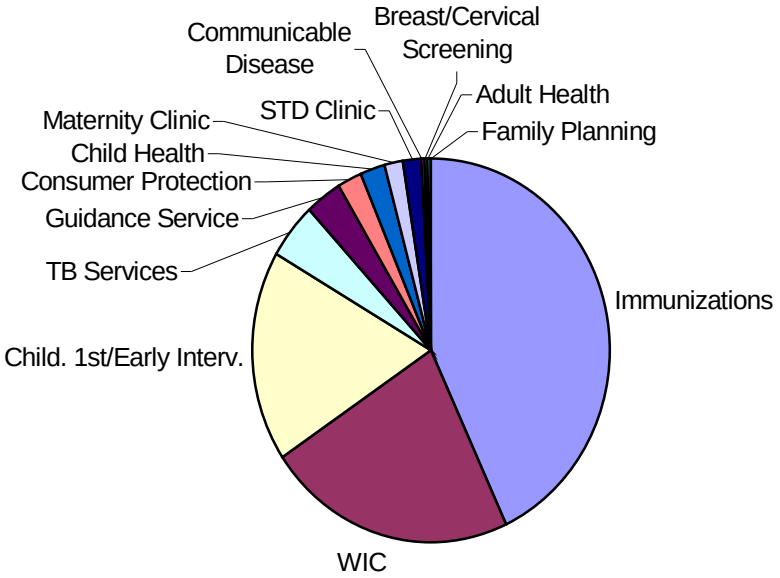
Income to Poverty Ratio Comparison, Washington County, 2000 Census

Poverty Level	Total	50% below	51% to 99% below	100% to 149% above	150% to 199% above	200% and above
Population	48,225	2,137	3,602	4,967	4,634	32,885
Cumulative Population		2,137	5,739	10,706	15,340	48,225
% of Total	100.0%	4.4%	7.5%	10.3%	9.6%	68.2%
Cumulative %		4.4%	11.9%	22.2%	31.8%	100.0%

County Health Department Usage

** PHOCIS, Community Health Services,*

Attended Appointments for Washington County Health Department, State Fiscal Year 04



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 170 deaths a year
- $369,476.69 per death
- Total—$62,811,037.30 a year

Obesity

- 20.7% of population (10,168)
- $395.00 in additional medical costs per person
- Total—$4,016,360.00

Motor Vehicle-Related Injury Death

- Average 8 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$8,960,000.00 a year

Tobacco Use

- 30.1% of population (14,785)
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- 12.8% of population (6,287)
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- Total—$83,258,741.00 a year

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- Average of 82 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total—$262,400.00 a year

Grand Total for Washington County:

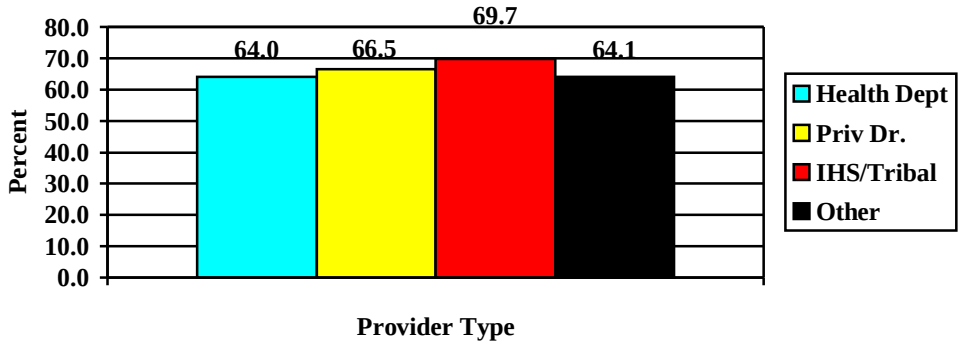
$208,099,038.30

OK By One - Immunizations

** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



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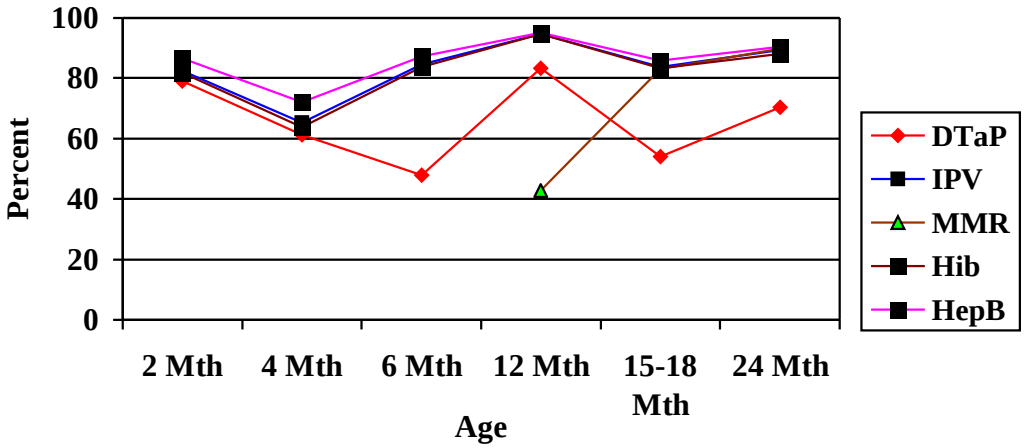

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Washington County Health Department
3838 State St
Bartlesville, OK 74006

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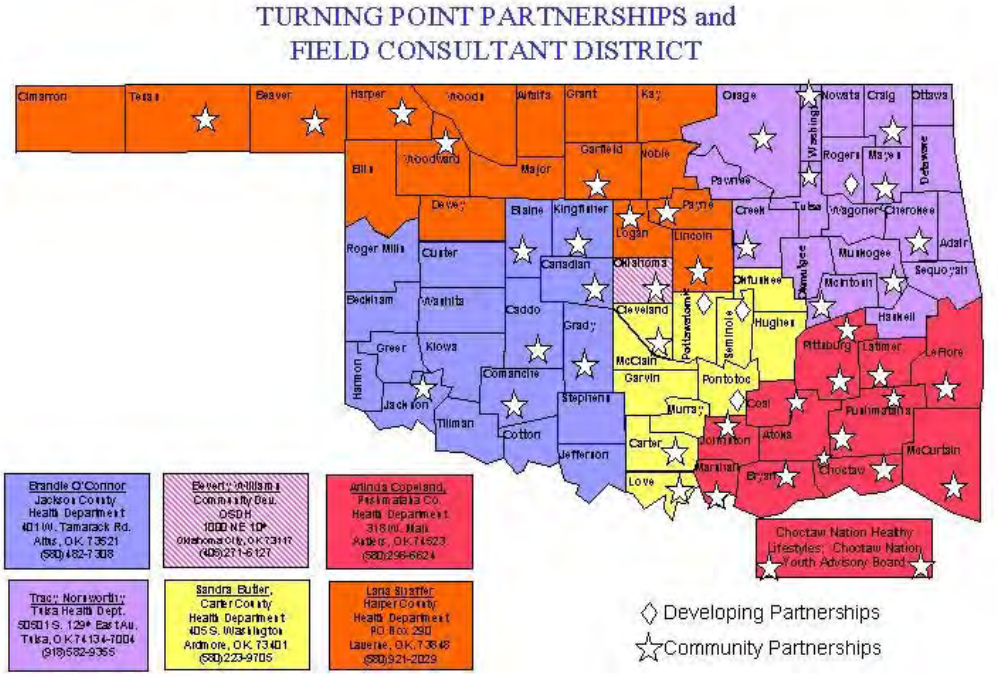

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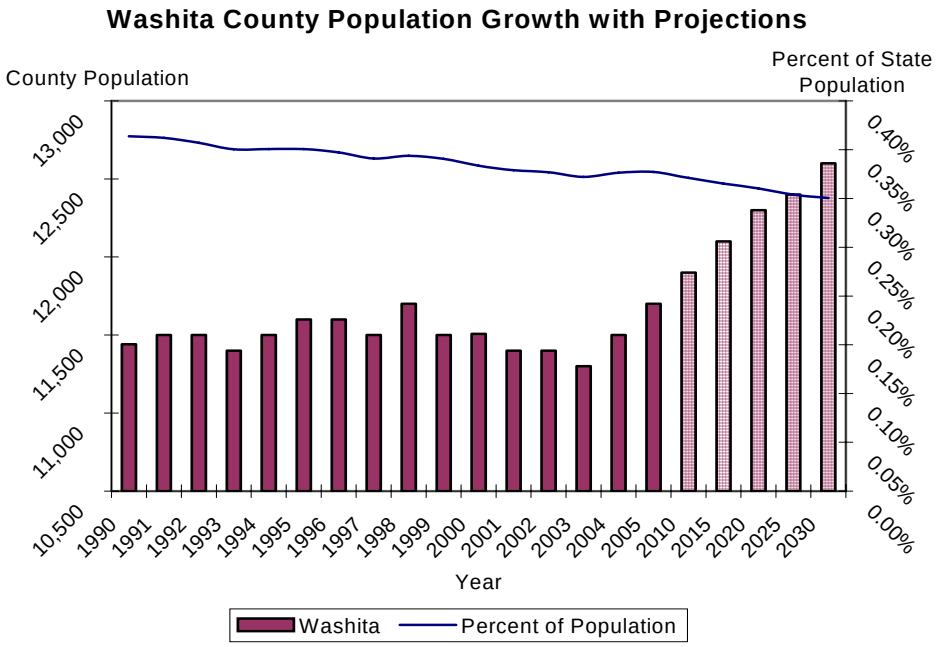
Demographics

** U.S. Census Bureau*

- Population estimates
  - 1% increase from 1990 to 2000 (11,441 to 11,508)
  - No change from 2000 to 2004
  - Ranked 41st for growth in state

2000 Census

- Hispanic/Latino ethnicity = 4%
- Race
  - Whites = 92%
  - Native Americans =3%
  - Blacks =0%
  - Other/Multiple = 4%
- Age
  - Under 5 = 6%
  - Over 64 = 19%
  - Median age = 39.2 years
- Housing units
  - Occupied = 4,506 (83%)
  - Vacant = 946 (17%)
- Disability (ages 21 to 64) = 18.6% national = 19.2% state = 21.5%
- Individuals below poverty = 15.5% national = 12.4% state = 14.7%



** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

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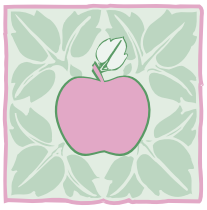
** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 21.8% (2,452) of people in Washita County were considered obese which accounted for an additional $968,540 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Washita County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	UNINTENT. INJURY 4	KIDNEY DISEASE 1	UNINTENT. INJURY 11	UNINTENT. INJURY 5	HEART DISEASE 9	CANCER 20	HEART DISEASE 51	HEART DISEASE 601	HEART DISEASE 676
2	PERINATAL PERIOD 3	SUICIDE 1	CONGENITAL ANOMALIES 2	SUICIDE 3	CANCER 6	HEART DISEASE 15	CANCER 39	CANCER 259	CANCER 327
3	CONGENITAL ANOMALIES 1	UNINTENT. INJURY 1	SUICIDE 2	CANCER 2	UNINTENT. INJURY 5	UNINTENT. INJURY 9	UNINTENT. INJURY 8	STROKE 93	STROKE 101
4	INFLUENZA/ PNEUMONIA 1		HEART DISEASE 1	HEART DISEASE 1	NON-CANCEROUS TUMOR 1	STROKE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	BRONCHITIS/ EMPHYSEMA/ ASTHMA 61	BRONCHITIS/ EMPHYSEMA/ ASTHMA 69
5	SEPTICEMIA (BLOOD POISONING) 1		HOMICIDE/ LEGAL 1	INFLUENZA/ PNEUMONIA 1	STROKE 1	CONGENITAL ANOMALIES 2	STROKE 4	ALZHEIMER'S DISEASE 51	UNINTENT. INJURY 62
6			KIDNEY DISEASE 1	OTHER 1	CONGENITAL ANOMALIES 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	DIABETES MELLITUS 3	INFLUENZA/ PNEUMONIA 42	ALZHEIMER'S DISEASE 52
7					HIV 1	DIABETES MELLITUS 1	NON-CANCEROUS TUMOR 2	DIABETES MELLITUS 40	INFLUENZA/ PNEUMONIA 45
8					LIVER DISEASE 1	INFLUENZA/ PNEUMONIA 1	LIVER DISEASE 2	ATHERO-SCLEROSIS 37	DIABETES MELLITUS 44
9					SUICIDE 1	SUICIDE 1	FIVE CAUSES TIED 1	KIDNEY DISEASE 24	ATHERO-SCLEROSIS 37
10						VIRAL HEPATITIS 1		UNINTENT. INJURY 19	KIDNEY DISEASE 26

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

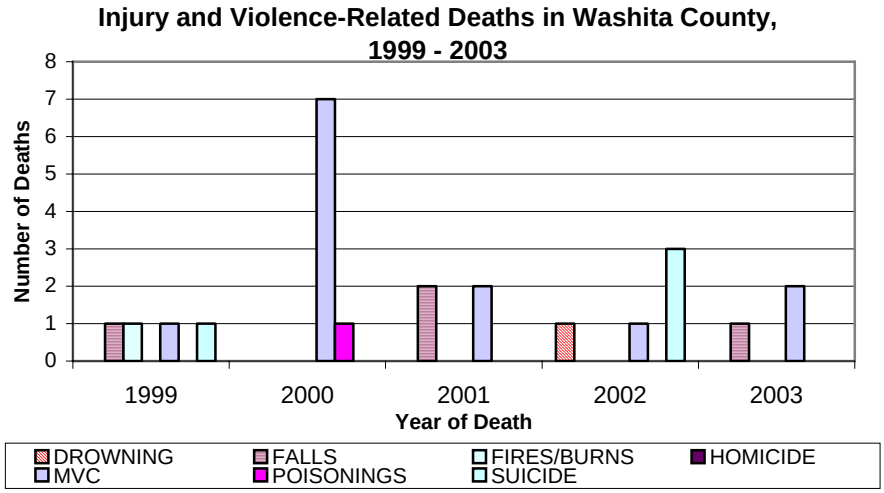
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Washita County. Unintentional injuries are the leading cause of death from ages 15 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Washita County which has an average of 2.6 motor vehicle-related deaths a year, that translates to almost $3 million a year.

Violence-related injuries (homicide and suicide) in Washita County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 23.1% (2,598) of people in Washita County use tobacco of some sort. Medical costs accumulated by those persons are almost $9 million a year for Washita County.

> *"Medical costs accumulated by those persons are almost **$9 million a year** for Washita County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 24.2% (2,722) of people in Washita County had no leisure activity in the past month at the time they were surveyed.

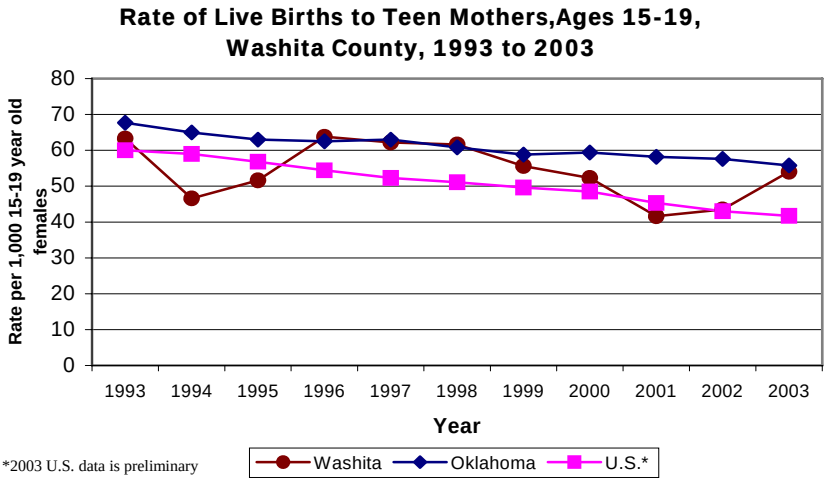
The BRFSS also indicated that 4.6% (517) of Washita County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $6,846,631.00 in one year for Washita County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 5 births to a mother 10-14 years of age occurred during the 11 year period.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Washita County had a teen birth rate of 54 in 2003 which was a 24% increase from 2002 (43.5) and a 15% decrease since 1993 (63.3).

With an average of 24 births per year, teen pregnancy costs the citizens of Washita County $76,800.00 a year.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 15.5% of persons in Washita County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Washita County is 5% above the state (14.7%) and 25% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Washita County, 2000 Census

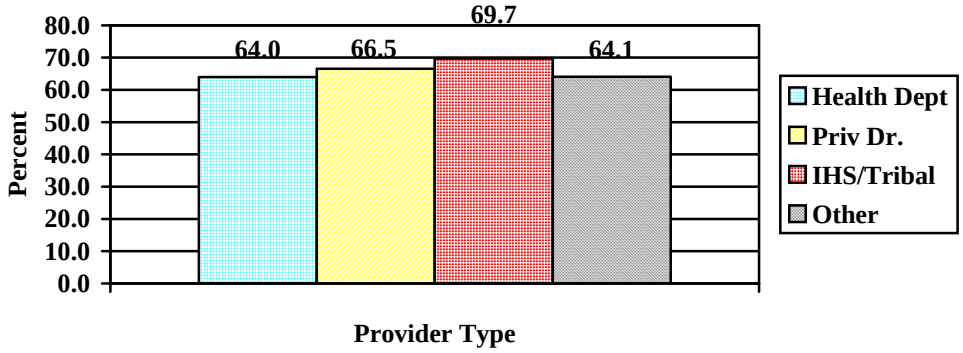
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	11,245	772	971	1,548	1,436	6,518
Cumulative Population		772	1,743	3,291	4,727	11,245
% of Total	100.0%	6.9%	8.6%	13.8%	12.8%	58.0%
Cumulative %		6.9%	15.5%	29.3%	42.0%	100.0%

OK By One - State Immunization Data

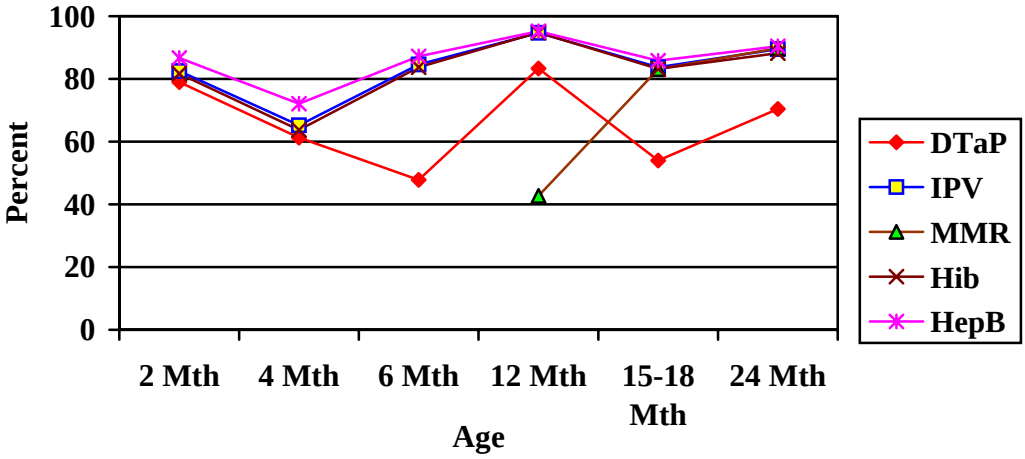
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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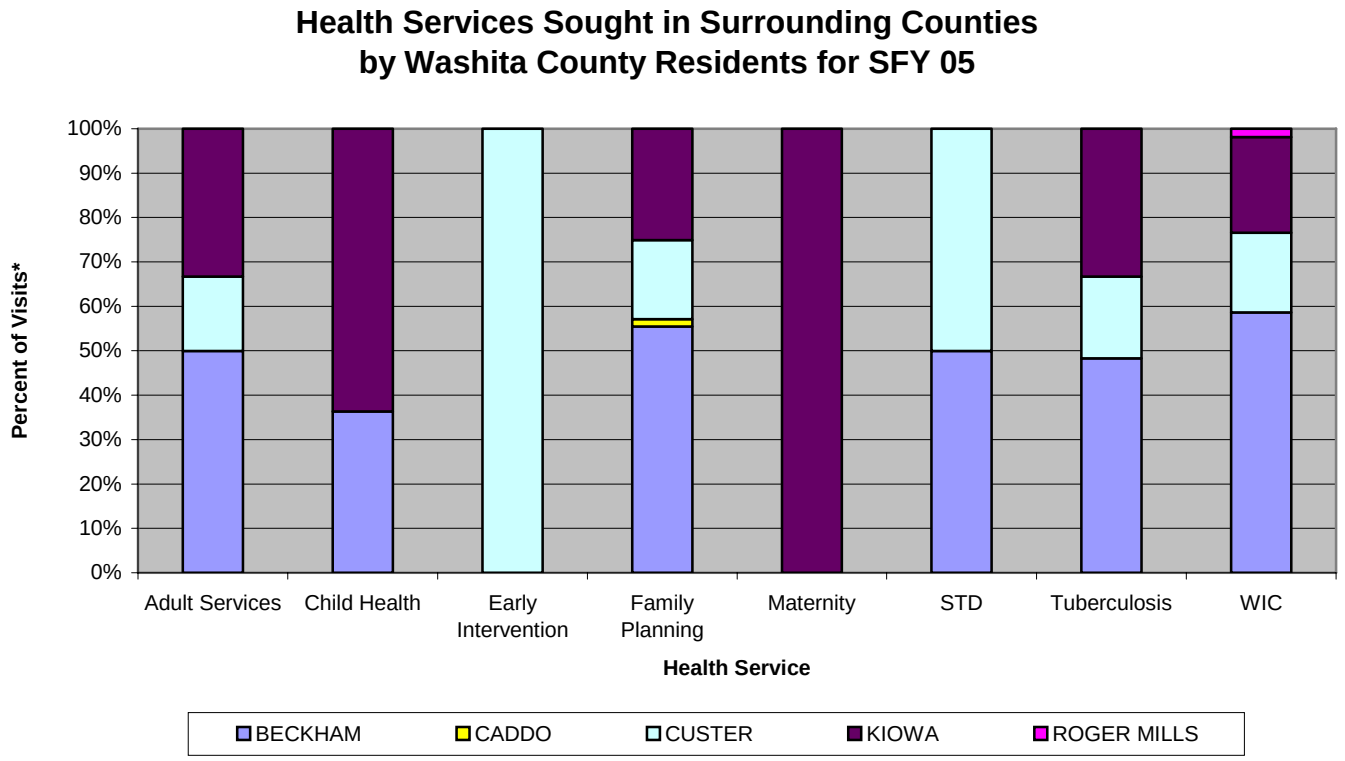
County Health Department Usage

** PHOCIS, Community Health Services,* OSDH



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 62 deaths a year
- $369,476.69 per death
- Total— $22,907,554.78 a year

Obesity

- 21.8% of population (2,452)
- $395.00 in additional medical costs per person
- Total—$968,540.00

Motor Vehicle-Related Injury Death

- Average 2.6 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,912,000.00 a year

Tobacco Use

- 23.1% of population (2,598)
- $3,300.00 in health care costs
- Total—$8,573,400.00 a year

Diabetes

- 4.6% of population (517)
- $13,243.00 in healthcare costs a year
- Total—$6,846,631.00 a year

Teen Pregnancy

- Average of 24 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $76,800.00 a year

Grand Total for Washita County:

$42,284,925.78

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

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Email: neil@health.ok.gov

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***

OKLAHOMA STATE DEPARTMENT OF HEALTH

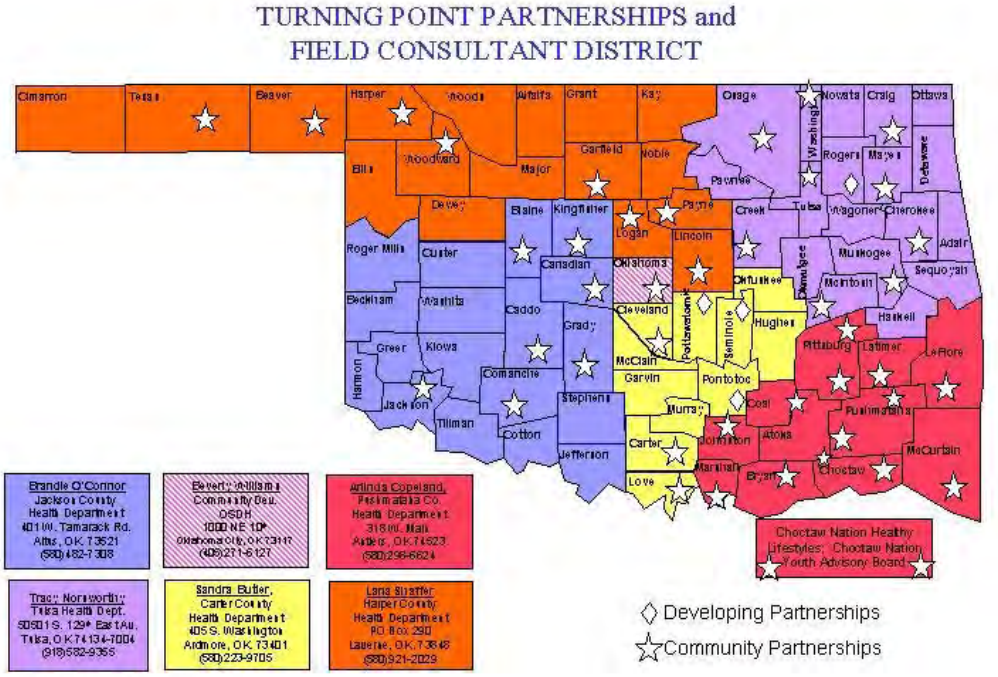
State of the County's Health Report

A Look Back To Move Forward

Woods County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Woods County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



Inside this issue:

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Demographics

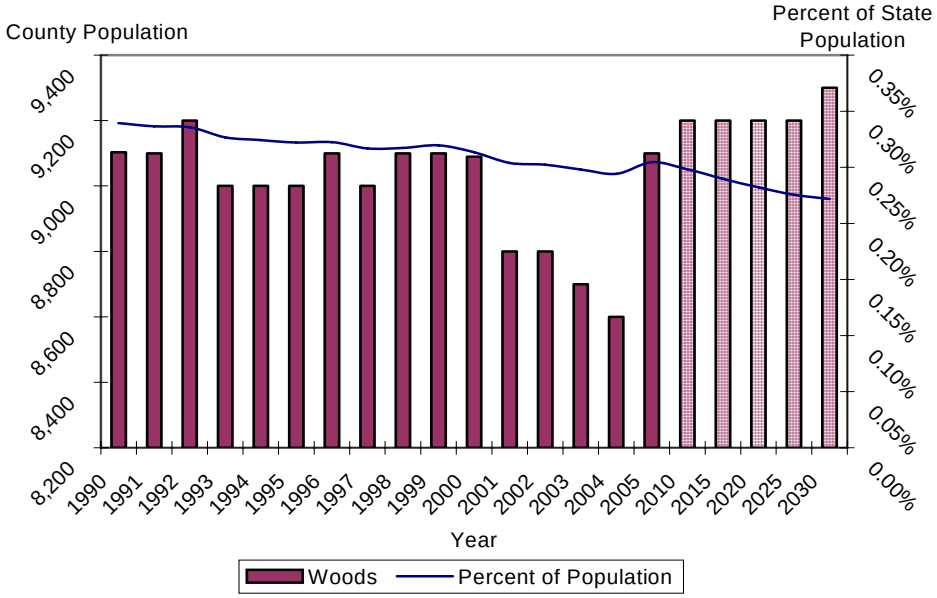
** U.S. Census Bureau*

- Population estimates
  - 0% decrease from 1990 to 2000 (9,103 to 9,089)
  - 5% decrease from 2000 to 2004
  - Ranked 72nd for growth in state

2000 Census

- Hispanic/Latino ethnicity = 2%
- Race
  - Whites = 93%
  - Native Americans =2%
  - Blacks =2%
  - Other/Multiple = 3%
- Age
  - Under 5 = 4%
  - Over 64 = 20%
  - Median age = 37.8 years
- Housing units
  - Occupied = 3,684 (82%)
  - Vacant = 808 (18%)
- Disability (ages 21 to 64) = 15.6% national = 19.2% state = 21.5%
- Individuals below poverty = 15.0% national = 12.4% state = 14.7%

Woods County Population Growth with Projections



** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Woods County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 565 people in Woods County and is still the leading cause of death among all age groups. According to the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 53.2 deaths a year, heart disease accounts for almost $20 million a year in medical costs in Woods County.

Heart disease accounts for almost $20 million a year in medical costs in Woods County.

Alzheimer's disease and the complications associated with it changed from 7th ranked cause of death (1983-1993) to the 12th ranked cause of death in people 65 and older accounting for a 53% decrease in deaths.

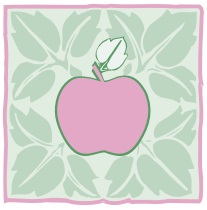
** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 14.1% (1,222) of people in Woods County were considered obese which accounted for an additional $482,690 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Woods County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 3	UNINTENT. INJURY 1	UNINTENT. INJURY 6	UNINTENT. INJURY 7	HEART DISEASE 5	CANCER 14	HEART DISEASE 34	HEART DISEASE 533	HEART DISEASE 587
2	PERINATAL PERIOD 2		SUICIDE 2	SUICIDE 3	SUICIDE 3	HEART DISEASE 11	CANCER 26	CANCER 193	CANCER 237
3	UNINTENT. INJURY 2		BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	CANCER 2	DIABETES MELLITUS 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 4	INFLUENZA/ PNEUMONIA 4	INFLUENZA/ PNEUMONIA 162	INFLUENZA/ PNEUMONIA 168
4	HEART DISEASE 1		STROKE 1	CONGENITAL ANOMALIES 1	HIV 2	INFLUENZA/ PNEUMONIA 2	UNINTENT. INJURY 4	STROKE 103	STROKE 106
5	SEPTICEMIA (BLOOD POISONING) 1		HERNIA 1	HEART DISEASE 1	UNINTENT. INJURY 2	SUICIDE 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 3	BRONCHITIS/ EMPHYSEMA/ ASTHMA 64	BRONCHITIS/ EMPHYSEMA/ ASTHMA 73
6	OTHER 1		HOMICIDE/ LEGAL 1	HIV 1	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	UNINTENT. INJURY 2	LIVER DISEASE 2	UNINTENT. INJURY 31	UNINTENT. INJURY 56
7				OTHER 1	STROKE 1	DIABETES MELLITUS 1	SEPTICEMIA (BLOOD POISONING) 2	KIDNEY DISEASE 29	KIDNEY DISEASE 31
8					CANCER 1	LIVER DISEASE 1	STROKE 1	DIABETES MELLITUS 18	DIABETES MELLITUS 21
9					KIDNEY DISEASE 1	SUDDEN DEATH 1	KIDNEY DISEASE 1	ALZHEIMER'S DISEASE 15	ALZHEIMER'S DISEASE 15
10						OTHER 7	TWO CAUSES TIED 1	LIVER DISEASE 7	SUICIDE 13

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

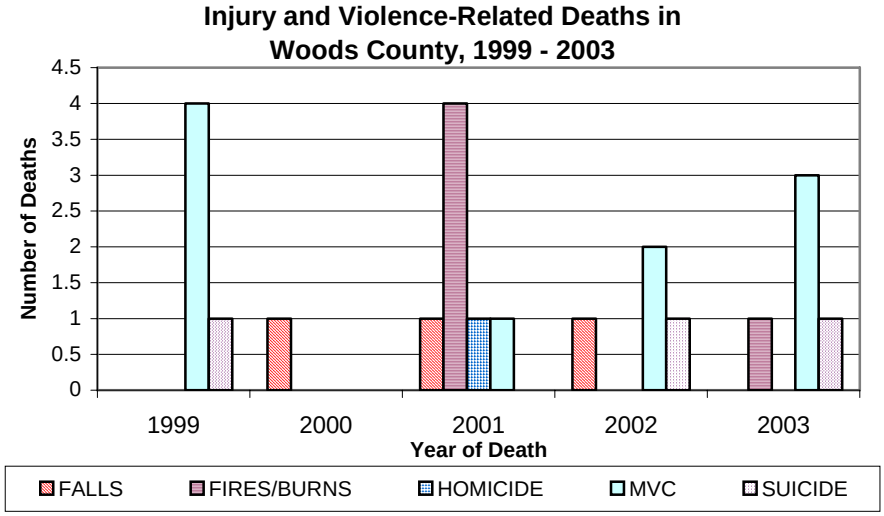
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Woods County. Unintentional injuries are the leading cause of death from ages 5 to 34.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Woods County which has an average of 2 motor vehicle-related deaths a year, that translates to over $2 million a year.

Violence-related injuries (homicide and suicide) in Woods County are ranked in the top 10 in four of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 32.1% (2,783) of people in Woods County use tobacco of some sort. Medical costs accumulated by those persons are over $9 million a year for Woods County.

*"Medical costs accumulated by those persons are over **$9 million a year** for Woods County"*

Physical Activity, Wellness and Diabetes

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The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 22.4% (1,942) of people in Woods County had no leisure activity in the past month at the time they were surveyed.

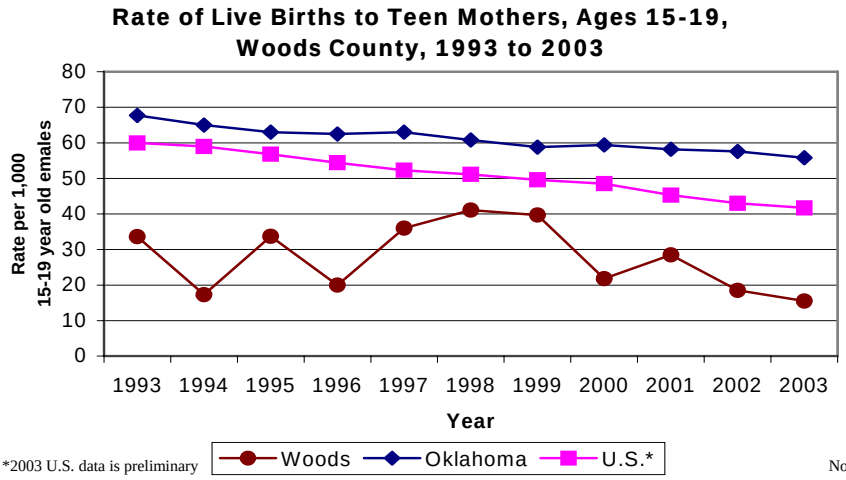
The BRFSS also indicated that 3.6% (312) of Woods County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $4,131,816.00 in one year for Woods County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.



*2003 U.S. data is preliminary

Note: 1 births to a mother 10-14 years of age occurred during the 11 year period.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Woods County had a teen birth rate of 15.5 in 2003 which was a 16% decrease from 2002 (18.5) but a 54% decrease since 1993 (33.6).

With an average of 10 births per year, teen pregnancy costs the citizens of Woods County $32,000.00 a year.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 15.0% of persons in Woods County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Woods County is 2% above the state (14.7%) and 21% above the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Woods County, 2000 Census

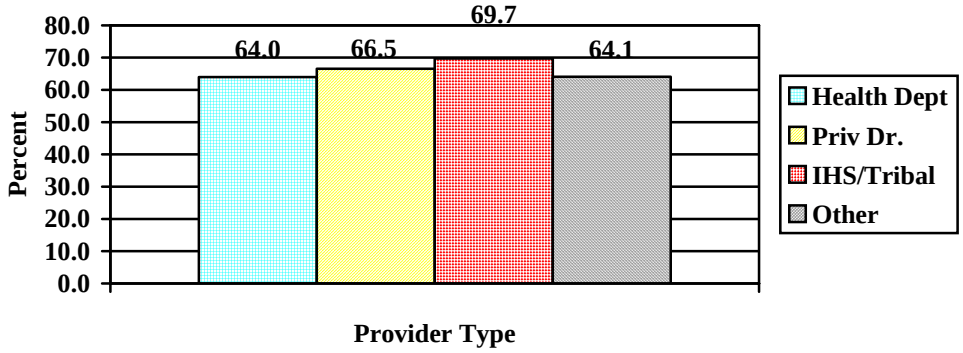
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	8,077	442	767	910	953	5,005
Cumulative Population		442	1,209	2,119	3,072	8,077
% of Total	100.0%	5.5%	9.5%	11.3%	11.8%	62.0%
Cumulative %		5.5%	15.0%	26.2%	38.0%	100.0%

OK By One - State Immunization Data

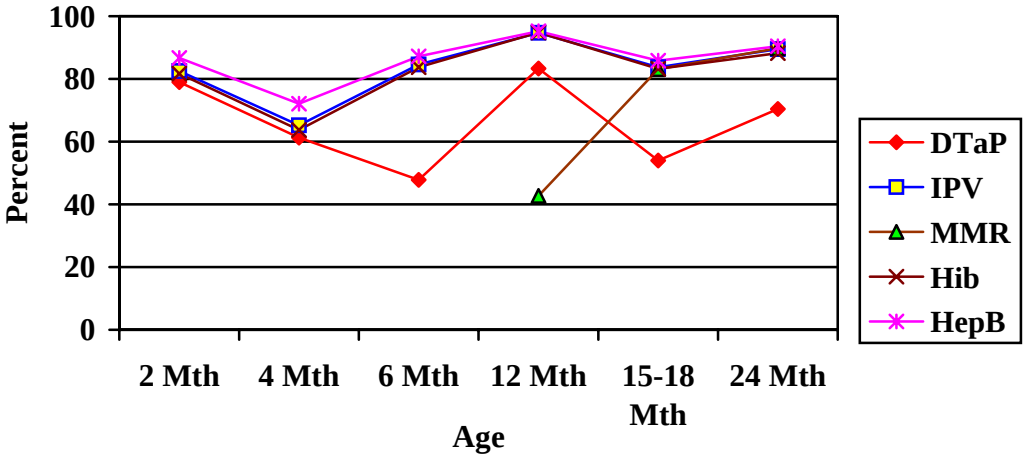
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004



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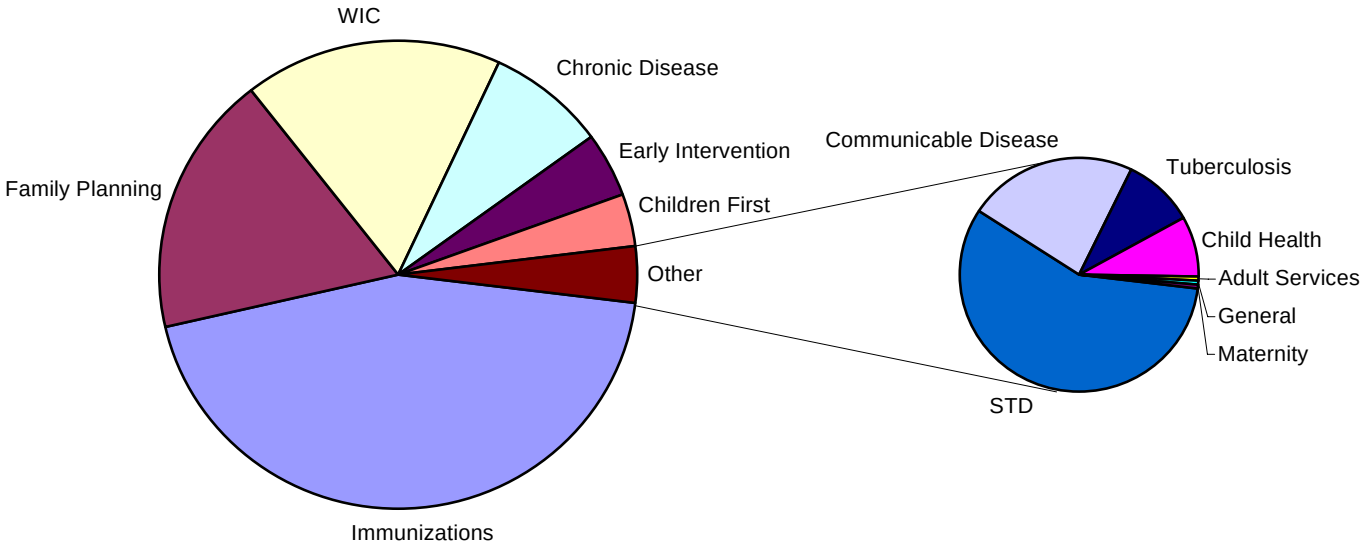
Attended Appointments for Woods County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 53 deaths a year
- $369,476.69 per death
- Total— $19,582,264.57 a year

Obesity

- 14.1% of population (1,222)
- $395.00 in additional medical costs per person
- Total—$482,690.00

Motor Vehicle-Related Injury Death

- Average 2 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$2,240,000.00 a year

Tobacco Use

- 32.1% of population (2,783)
- $3,300.00 in health care costs
- Total—$9,183,900.00 a year

Diabetes

- 3.6% of population (312)
- $13,243.00 in healthcare costs a year
- Total—$4,131,816.00 a year

Teen Pregnancy

- Average of 10 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $32,000.00 a year

Grand Total for Woods County:

$35,652,670.57

OKLAHOMA STATE DEPARTMENT OF HEALTH

Community Health Services
Community Development Service

1000 NE 10th St, Rm 508
Oklahoma City, OK 73117
Phone: 405-271-6127
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Email: neil@health.ok.gov

Woods County Health Department
901 14th St
Alva, Oklahoma 73717
580-327-3192

Looking Back to Move Forward

Report compiled by:
Miriam McGaugh, M.S.
Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

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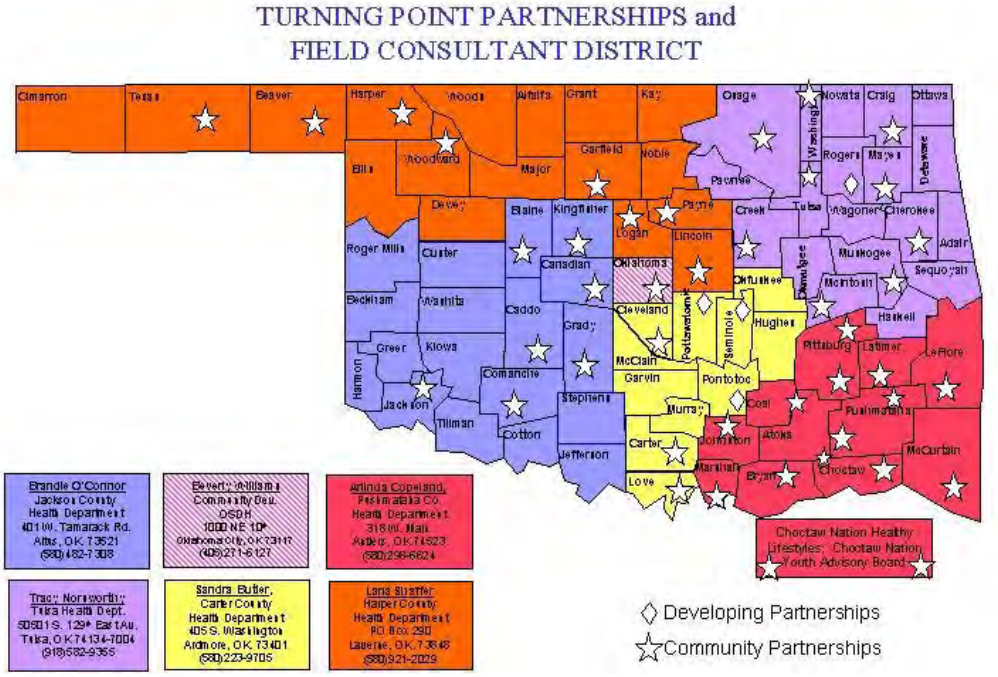

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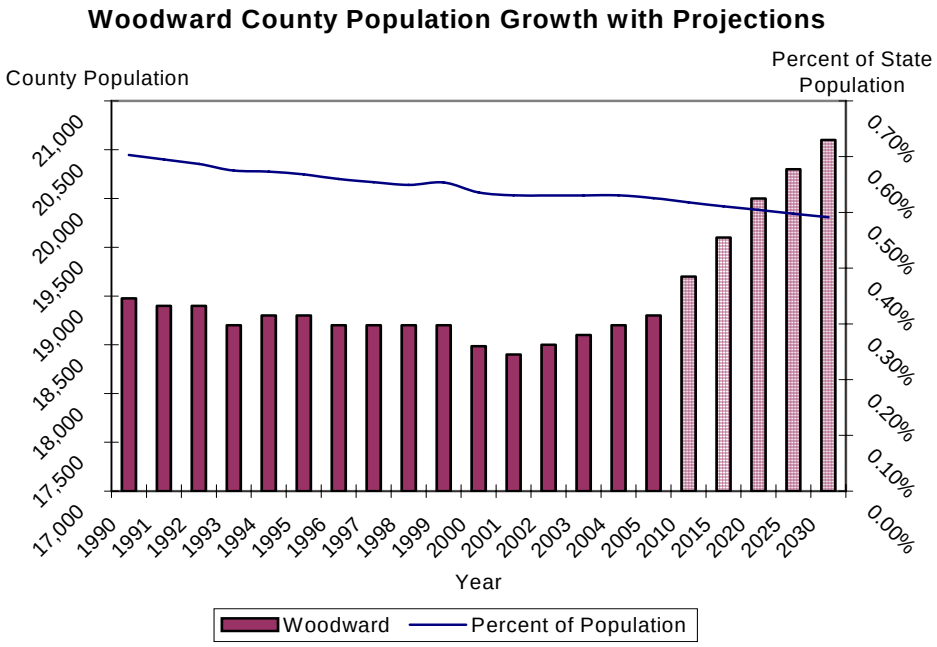
Demographics

** U.S. Census Bureau*

- Population estimates
  - 3% decrease from 1990 to 2000 (18,976 to 18,486)
  - 1% increase from 2000 to 2004
  - Ranked 29th for growth in state

2000 Census

- Hispanic/Latino ethnicity = 5%
- Race
  - Whites = 92%
  - Native Americans =2%
  - Blacks =1%
  - Other/Multiple = 5%
- Age
  - Under 5 = 7%
  - Over 64 = 14%
  - Median age = 37.4 years
- Housing units
  - Occupied = 7,141 (86%)
  - Vacant = 1,200 (14%)
- Disability (ages 21 to 64) = 19.5% national = 19.2% state = 21.5%
- Individuals below poverty = 12.5% national = 12.4% state = 14.7%



Top 10 Leading Causes of Death

** Vital Statistics,* Health Care Information Systems, OSDH & Centers for Disease Control

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Woodward County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 735 people in Woodward County and is still the leading cause of death among all age groups. According the Centers for Disease Control, almost $400,000 is spent on each heart disease-related death. With an average of 67.4 deaths a year, heart disease accounts for almost $25 million a year in medical costs in Woodward County.

Heart disease accounts for almost $25 million a year in medical costs in Woodward County.

Alzheimer's disease and the complications associated with it have increased from the 10th ranked cause of death (1983-1993) to the 6th ranked cause of death in persons 65 and older accounting for a 94% increase in deaths.

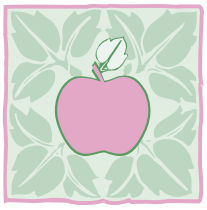
Nutrition and Obesity

** Behavioral Risk Factor Surveillance System,* Health Care Information System, OSDH & *Health Affairs Journal,* R. Strum, 2002

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are $395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 26.4% (4,874) of people in Woodward County were considered obese which accounted for an additional $1,925,230 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.



Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day

Top 10 Causes of Death by Age Group

Woodward County 1993-2003

Rank	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	PERINATAL PERIOD 10	CONGENITAL ANOMALITIES 1	UNINTENT. INJURY 17	CANCER 9	UNINTENT. INJURY 20	CANCER 36	CANCER 67	HEART DISEASE 634	HEART DISEASE 741
2	CONGENITAL ANOMALIES 5	UNINTENT. INJURY 1	SUICIDE 4	UNINTENT. INJURY 8	CANCER 17	HEART DISEASE 31	HEART DISEASE 62	CANCER 282	CANCER 451
3	SIDS 2	OTHER 1	MALIGNANT NEOPLASM 3	SUICIDE 5	HEART DISEASE 11	LIVER DISEASE 9	BRONCHITIS/ EMPHYSEMA/ ASTHMA 9	STROKE 127	STROKE 143
4	UNINTENT. INJURY 2		HEART DISEASE 1	STROKE 2	INFLUENZA/ PNEUMONIA 3	UNINTENT. INJURY 9	UNINTENT. INJURY 8	BRONCHITIS/ EMPHYSEMA/ ASTHMA 76	UNINTENT. INJURY 91
5	HEART DISEASE 1		HOMICIDE/ LEGAL 1	DIABETES MELLITUS 2	LIVER DISEASE 3	STROKE 5	STROKE 7	INFLUENZA/ PNEUMONIA 58	BRONCHITIS/ EMPHYSEMA/ ASTHMA 86
6	HOMICIDE/ LEGAL 1		INFLUENZA/ PNEUMONIA 1	CONGENITAL ANOMALIES 1	SUICIDE 3	DIABETES MELLITUS 5	DIABETES MELLITUS 6	ALZHEIMER'S DISEASE 35	INFLUENZA/ PNEUMONIA 69
7	CANCER 1		OTHER 3	GALLBLADDER DISORDER 1	DIABETES MELLITUS 2	SUICIDE 5	LIVER DISEASE 2	KIDNEY DISEASE 28	DIABETES MELLITUS 42
8	OTHER 9			HEART DISEASE 1	HOMICIDE/ LEGAL 2	BRONCHITIS/ EMPHYSEMA/ ASTHMA 1	PNEUMONITIS 2	DIABETES MELLITUS 27	ALZHEIMER'S DISEASE 36
9				HYPERTENSION 1	NON-CANCEROUS TUMOR 1	GALLBLADDER DISORDER 1	ACUTE BRONCHITIS 1	UNINTENT. INJURY 26	KIDNEY DISEASE 30
10				TWO CAUSES TIED 1	FIVE CAUSES TIED 1	THREE CAUSE TIED 1	FIVE CAUSES TIED 1	TWO CAUSES TIED 14	LIVER DISEASE 21

Data source: *Vital Statistics* , Health Care Information Division, Oklahoma State Department of Health

Produced by: Community Development Service, Community Health Service, Oklahoma State Department of Health July 2005

Injury and Violence

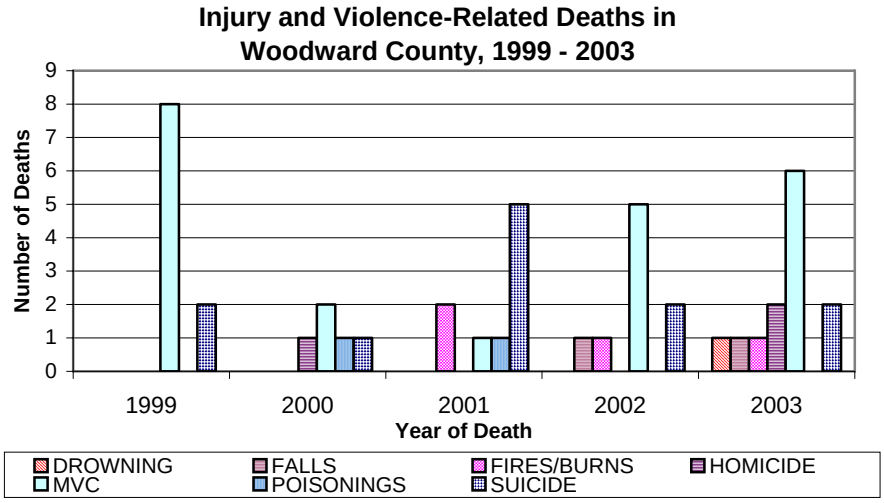
* *Vital Statistics*, Health Care Information Systems, OSDH & National Safety Council

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

This trend does not change much in Woodward County. Unintentional injuries are the leading cause of death from ages 15 to 24.

It is estimated that for every motor vehicle-related death $1.1 million in economic costs are incurred. For Woodward County which has an average of 4.4 motor vehicle-related deaths a year, that translates to almost $5 million a year.

Violence-related injuries (homicide and suicide) in Woodward County are ranked in the top 10 in five of the eight age groups (see Top 10 list on page 3).



Tobacco Use

* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over $3,300 in health care costs per year. According to the Behavioral Risk Factor Surveillance System, it is estimated that 23.2% (4,283) of people in Woodward County use tobacco of some sort. Medical costs accumulated by those persons are over $14 million a year for Woodward County.

> *"Medical costs accumulated by those persons are over **$14 million a year** for Woodward County"*

Physical Activity, Wellness and Diabetes

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 26.1% (4,818) of people in Woodward County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.6% (1,957) of Woodward County citizens have been diagnosed by a health professional as having diabetes. In 2002, the per capita annual healthcare costs for people with diabetes was $13,243 compared to $2,560 for people without diabetes. Persons with diabetes accumulated health care costs of $25,916,551.00 in one year for Woodward County.

Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

Teen Pregnancy

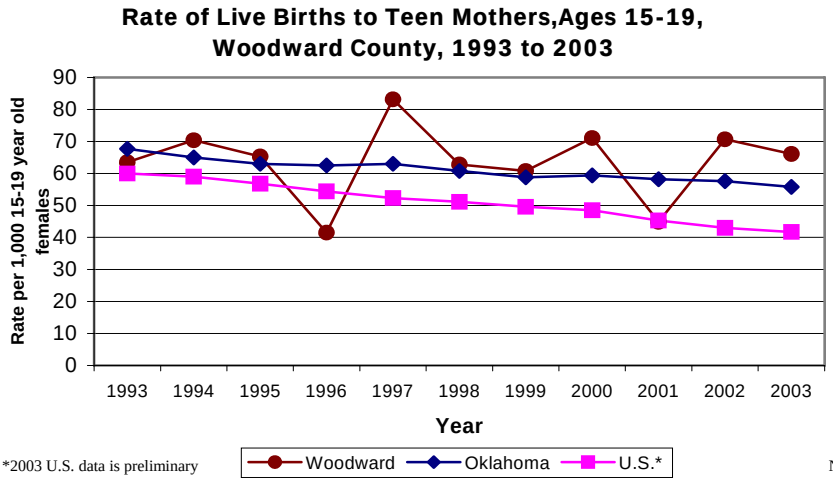
* Sawhill V., *Policy Brief #8*, The Brookings Institute; *Vital Statistics*, Health Care Information Systems, OSDH & National Vital Statistics, Centers for Disease Control

While births to teen mothers (age 15 to 19) are on the decline in both the U.S. and Oklahoma, Oklahoma has moved up in rank from 13th to 8th in the country. In 1993 the rate of teen births was 60.0 (per 1,000 15-19 year old females) in the U.S. and 66.6 in Oklahoma. In 2003, the rate decreased to 41.7 in the U.S. and 55.8 in Oklahoma, a decrease of 31% and 7%, respectively.

Children of teen mothers are more likely to display poor health and social outcomes than those of older mothers, such as premature birth, low birth weight, higher rates of abuse and neglect, and more likely to go to foster care or do poorly in school. Additionally, births to teen mothers accumulate $3,200 a year for each teenage birth, which is passed on to citizens.

According to Oklahoma Vital Statistics, Woodward County had a teen birth rate of 66.1 in 2003 which was a 7% decrease from 2002 (70.7) and a 4% increase since 1993 (63.5).

With an average of 43 births per year, teen pregnancy costs the citizens of Woodward County $137,600.00 a year.



*2003 U.S. data is preliminary

Note: 2 births to a mother 10-14 years of age occurred during the 11 year period.

Poverty

* *U.S. Census Bureau*

As the nation advances in technology and the ability to detect and prevent disease at an earlier stage, persons that are impoverished carry a large burden of poor health outcomes. Higher incidences of unplanned or unwanted pregnancies, teen pregnancy, inadequate prenatal care, higher rates of low-birth-weight babies, infant deaths and low immunization rates are all associated with poverty along with a myriad of other adverse health outcomes.

According to the 2000 census, 12.5% of persons in Woodward County for whom poverty status was known had an income below what was needed to live at the federal poverty level. Woodward County is 15% below the state (14.7%) and similar to the nation (12.4%) for persons with incomes below the federal poverty level.

Income to Poverty Ratio, Woodward County, 2000 Census

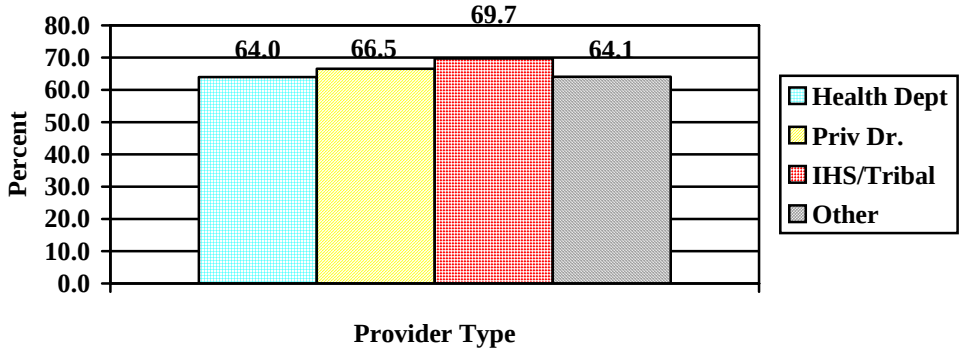
Poverty level	Total	50% below	51% to 99% below	poverty level to 149% above	150% to 199% above	200% and above
Population	17,676	1,152	1,055	1,843	2,051	11,575
Cumulative Population		1,152	2,207	4,050	6,101	17,676
% of Total	100.0%	6.5%	6.0%	10.4%	11.6%	65.5%
Cumulative %		6.5%	12.5%	22.9%	34.5%	100.0%

OK By One - State Immunization Data

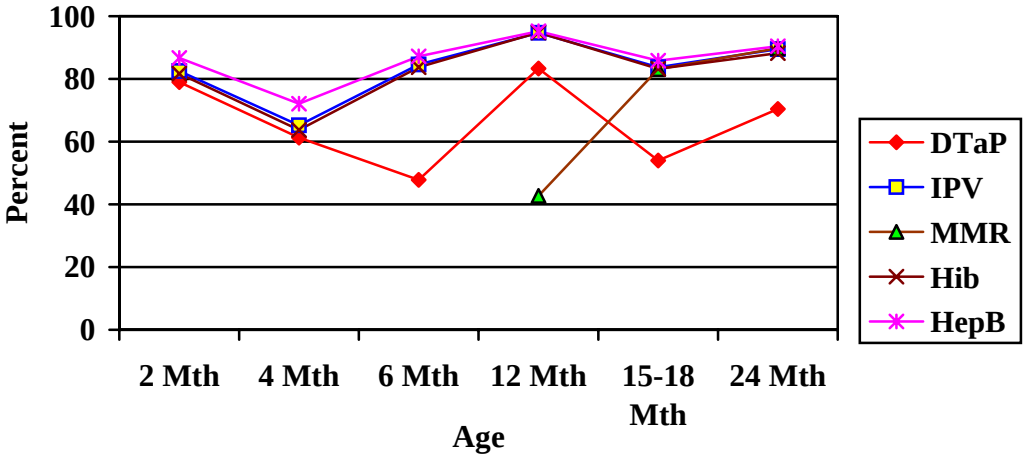
** 2 Year-old Immunization Survey, Immunization Service,* OSDH

2003-04 Immunization Coverage Rates

4:3:1:3:3 Coverage by Location of Shots, Oklahoma, 2004



Oklahoma Children On Schedule by Antigen, 2004

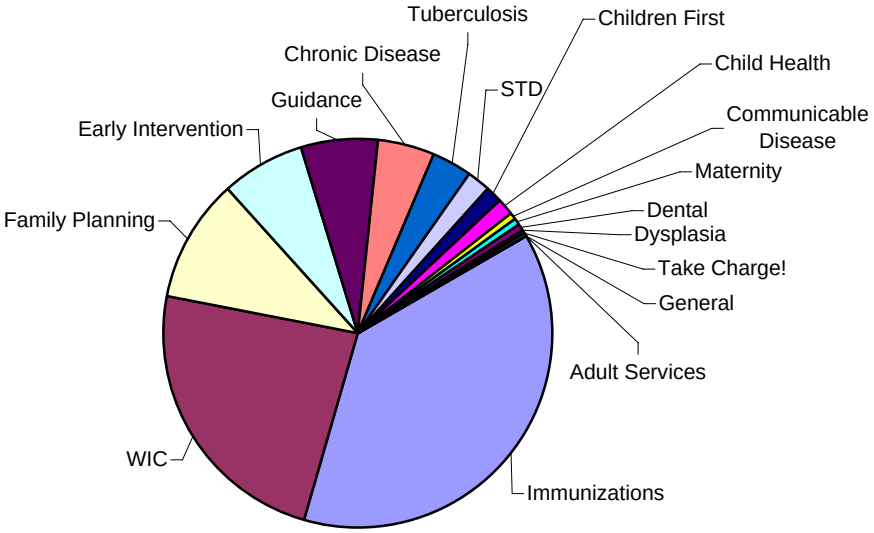


**Note: County level data will be available soon.

County Health Department Usage

** PHOCIS, Community Health Services*, OSDH

Attended Appointments for Woodward County Health Department, State Fiscal Year 05



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 67 deaths a year
- $369,476.69 per death
- Total— $24,754,938.23 a year

Obesity

- 26.4% of population (4,874)
- $395.00 in additional medical costs per person
- Total—$1,925,230.00

Motor Vehicle-Related Injury Death

- Average 4.4 deaths per year
- $1,120,000.00 in economic costs per death
- Total—$4,928,000.00 a year

Tobacco Use

- 23.2% of population (4,283)
- $3,300.00 in health care costs
- Total—$14,133,900.00 a year

Diabetes

- 10.6% of population (1,957)
- $13,243.00 in healthcare costs a year
- Total—$25,916,551.00 a year

Teen Pregnancy

- Average of 43 births to teen mothers per year
- $3,200.00 in costs for each birth a year
- Total— $137,600.00 a year

Grand Total for Woodward County:

$71,796,219.23

OKLAHOMA STATE DEPARTMENT OF HEALTH

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Community Development Service

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Phone: 405-271-6127
Fax: 405-271-1225
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Woodward County Health Department
1631 Texas Ave
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580-256-6416

Looking Back to Move Forward

Report compiled by:
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Community Development Service, OSDH
Kelly Baker, MPH
Health Care Information Systems, OSDH

The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the state and county departments of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT

Oklahoma Community Partners in ***Public Health Innovation***