# 2021 Behavioral Risk Factor Survey, Calhoun County, MI 

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Executive Summary


Background


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Findings \& Implications

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INTRODUCTION

## Background and Objectives

> VIP Research and Evaluation was contracted by the Calhoun County Public Health Department to conduct a Behavioral Risk Factor Survey (BRFS) in 2021, as part of their larger community-wide health needs assessment in Calhoun County, Michigan.
$\Rightarrow$ The overall objective of the BRFS is to obtain information from Calhoun County adult residents about a wide range of behaviors that affect their health. More specific objectives include measuring each of the following:
*Physical health status indicators, such as perception of general health, physical health status, chronic pain, and weight (BMI)
*Mental health status indicators, such as poor mental health, psychological distress, and suicide
*Health risk behaviors, such as smoking and tobacco use, vaping, alcohol consumption, diet, and physical activity
*Clinical preventative measures, such as oral health and cancer screenings
*Chronic conditions, such as arthritis, asthma, cancer, cardiovascular disease, COPD, and diabetes
*Adverse childhood experiences (ACEs)

- Social support and resiliency
*COVID-19 and its impact on area residents
*isparities in health


## Background and Objectives (Continued)

> The information collected will be used to:

* Prioritize health issues and develop strategic plans
* Monitor the effectiveness of intervention measures
*xamine the achievement of prevention program goals
* Support appropriate public health policy
* Educate the public about disease prevention through dissemination of information


## Methodology

$>$ A Behavioral Risk Factor Survey was conducted among 900 Calhoun County adults (age 18+) via telephone. The response rate was $33 \%$.
$>$ Disproportionate stratified random sampling (DSS) was used to ensure results could be generalized to the adult population of Calhoun County. DSS utilizes both listed and unlisted landline sample, allowing everyone with a landline telephone the chance of being selected to participate.
$>$ In addition to landline telephone numbers, the design also targeted cell phone users. Of the 900 completed surveys:
$\$ 592$ are cell phone completes ( $65.8 \%$ ), and 308 are landline phone completes ( $34.2 \%$ )

* 481 are cell-phone-only households (53.4\%)
* 75 are landline-only households (8.3\%), and
* 344 have both cell and landline numbers ( $38.2 \%$ )
$>$ For landline numbers, households were selected to participate subsequent to determining that the number was that of a Calhoun County residence. Vacation homes, group homes, institutions, and businesses were excluded.


## Methodology (Continued)

$>$ Respondents were screened to ensure they were at least 18 years of age and resided in Calhoun County.
$>$ In households with more than one adult, interviewers randomly selected one adult to participate based on which adult had the nearest birthday to the date surveyed. In these cases, every attempt was made to speak with the randomly chosen adult; interviewers were instructed to not simply interview the person who answered the phone or wanted to complete the interview.
> Spanish-speaking interviewers were available where Spanish translation was needed.
$>$ The 900 households represent $1.7 \%$ of the 53,827 households in Calhoun County according to the 2019 U.S. Census 1-year estimate.
$>$ The margin of error for the entire sample of 900 , at a $95 \%$ confidence level, is $+/-$ $3.2 \%$. This calculation is based on a population of roughly 104,005 Calhoun County residents 18 years or older, according to the 2019 U.S. Census 1-year estimate.

## Methodology (Continued)

$>$ Data collection for the Behavioral Risk Factor Survey occurred between December 3, 2021 and January 12, 2022.
$>$ Unless noted, consistent with the Michigan BRFS, respondents who refused to answer a question or did not know the answer to a specific question were excluded from analysis for that question. Thus, the base sizes vary throughout the report.
$>$ Data weighting is an important statistical process that was used to reduce bias from the BRFS sample. The formula consists of both design weighting and iterative proportional fitting, also known as "raking" weighting. The purposes of weighting the data are to:

* Correct for differences in the probability of selection due to non-response and noncoverage errors
*Adjust variables of age, gender, race/ethnicity, marital status, education, and home ownership to ensure the proportions in the sample match the proportions in the population of Calhoun County adults
*Allow the generalization of findings to the entire Calhoun County adult population
$>$ The formula used for the final weight is:
Design Weight X Raking Adjustment


## Methodology (Continued)

> Adverse childhood experiences (ACEs) data were collected using the BRFS 11-item version. The 11 items measure the following adverse groups and subgroups:

* Abuse:
- Emotional Abuse
- Physical Abuse
- Sexual Abuse
* Household challenges:
- Intimate Partner Violence
- Household Substance Abuse
- Household Mental Illness
- Parental Separation or Divorce
- Incarcerated Household Member
$>$ Five of the 11 questions have "yes" or "no" response categories, and the remaining 6 questions have "never," "once," or "more than once" response categories. Respondents scored either " 0 " for each "no" and a " 1 " for each "yes," and they scored either a " 0 " for each "never" and a " 1 " for each "once" or "more than once." Their total ACEs score was computed by adding the sum of the scores across the 11 items. The total ACEs scores were segmented into three groups according to the number of adverse childhood experiences they had: none, 1 to 3 , and 4 or more.


## Methodology (Continued)

$>$ It should be noted that if the respondent said "don't know" or refused to answer any of the ACEs items then they were excluded in the ACEs analyses by groups. This decision was made because the BRFS team and the researchers believe that coding "don't know" or "refused" answers as zero and then including them in one of the three groups could possibly create an inaccurate picture of the extent to which adverse childhood experiences exist in the population of Calhoun County adult residents. As an example, if someone refused to answer all 11 ACE questions, rather than coding them as a none (zero), it was determined best to exclude them from the analyses.

## GIS Section Map



## EXECUTIVE SUMMARY

## Executive Summary

> Much like the year 2020, in 2021, the social, economic, and political impact of the coronavirus (COVID-19) pandemic continued to be systemic worldwide. Individually there was, and continues to be, an impact on physical and mental health, as well as an enormous social impact. Because of this, interpretation of the results should be made with this in mind. Where applicable, we compare local primary data collected in 2021 with the latest state or national data which would have been collected in 2020, also a COVID year. Additionally, a comparison is made with the 2021 primary data collected and data collected in the previous BRFS (2014).
$>$ Although over half (55.6\%) report their lives remained unchanged during the pandemic, $35.9 \%$ say their lives worsened.
*There are myriad reasons provided for why the pandemic made their lives worse, but most often cited are aspects revolving around the financial impact, mental and physical health, social isolation and the inability to see people and do the things they used to do, and the restrictions which some people interpreted as a loss of freedom
$>$ Two-thirds (68.2\%) of Calhoun County adults report they have been vaccinated for the coronavirus (COVID-19).
*The remaining third cite myriad reasons for not getting the vaccine such as lack of trust in the vaccine, government, and/or health care, not needing it due to already having COVID or taking precautions so as not to get it, and personal choice

## Executive Summary (Continued)

$>$ In response to COVID-19, the vast majority of Calhoun County adults wash and sanitize their hands, wear masks, keep six feet away from people outside their household, and/or avoid public or crowded places
$>78.8 \%$ of those who do take precautions believe the measures they take to combat COVID-19 make a difference.

Mental health continues to be an important area to address. More than one-third (35.3\%) of area adults report mild to severe psychological distress (per the Kessler6 instrument), a rate higher than comparable counties in Michigan (e.g., St. Clair, 29.1\%; Ottawa, 19.8\%).

Further, $21.3 \%$ report poor mental health (defined as 14 or more days of poor mental health, which includes stress, depression, and problems with emotions, during the past 30 days), and this rate is much higher than the state ( $15.8 \%$ ) or national rates ( $13.2 \%$ ) *Additionally, $8.4 \%$ of area adults report thoughts of suicide; this rate is higher than comparable counties in Michigan (e.g., St. Clair, 6.2\%; Ottawa, 4.9\%)

- Of these, one in five (20.4\%) have actually attempted suicide


## Executive Summary (Continued)

$>$ An area of opportunity continues to exist for local health professionals to formulate a plan to address the fact that sizeable proportions of people with mental health challenges do not take medication or receive treatment for their condition.

* For example, the proportion of adults who currently take medication or receive treatment for a mental health condition or emotional problem is $39.0 \%$ among those with mild to moderate psychological distress and $57.0 \%$ among those with severe psychological distress
* Further, only half (54.1\%) of adults who report poor mental health currently take medication or receive treatment for their condition
$>$ It is surprising that so few people engage in treatment or medication for mental health conditions considering that nearly all adults (91.0\%) believe treatment can help people with mental illness lead normal lives.
* Reluctance to seek treatment or take medication may be the result of a perceived stigma attached to the label of mental illness
- More than four in ten (43.9\%) Calhoun County adults view people as not "caring and sympathetic toward people with mental illness"


## Executive Summary (Continued)

$>$ Eight in ten (79.5\%) area adults report their health as good or better, while 20.5\% report their health as fair or poor. Roughly one in seven (14.4\%) are considered to have poor physical health (define as 14 or more days of poor physical health, which includes physical illness and injury, during the past 30 days)
*General health status has improved slightly since 2014, but the proportion of adults who report their general health as fair or poor continues to be higher than the state ( $15.5 \%$ ) or national rates (13.3\%)
$>$ Roughly one in nine (11.3\%) adults are limited in their usual activities due to poor physical or mental health.
*This proportion is higher than Michigan's proportion (9.1\%)
$>$ Almost four in ten (38.6\%) adults in Calhoun County are considered to be obese per their BMI, while an additional $32.7 \%$ are overweight (but not obese).

Both of these rates are higher than they were in 2014 (37.4\%, 30.7\%)
Moreover, the proportion of area adults who are obese is greater than the state ( $35.2 \%$ ) or national (31.9\%) rates

## Executive Summary (Continued)

$>$ The prevalence estimates of the chronic conditions measured is mixed. For example, many of the estimates are better than they were in 2014, however, eight of the ten measured are higher than both state and national rates (see table on page 31)

* The prevalence for arthritis, asthma, COPD, and diabetes are all notably higher than the state and national rates
$>$ Almost four in ten (38.2\%) Calhoun County adults have chronic pain, and of these $37.4 \%$ say their pain is not managed well.
*39.5\% say they are less than satisfied with how their health care provider helps them manage their chronic pain
*There are myriad barriers to treating the pain, but having too many chronic conditions to manage and a lack of health insurance to cover the condition are cited most often
$>$ Three in ten (31.9\%) adults with chronic pain say they don't ask for treatment for their condition. This finding needs to be explored further to see if there is a connection, or correlation, between their reluctance to seek treatment and a fear of becoming addicted to pain medication (which has been mentioned as a barrier in other studies).


## Executive Summary (Continued)

$>$ Among adults aged 18-64, 89.4\% currently have health care coverage, and this rate is exactly the same as 2014.
*The rate is lower than the rate in Michigan (91.6\%) but higher than U.S. rate ( $86.8 \%$ )
$>$ Among all adults, $9.4 \%$ had to forgo a needed doctor visit in the past year due to cost, and this rate is lower than it was in 2014 (13.3\%).
*The top reason cited for not receiving needed health care is "couldn't get an appointment soon enough," followed by "COVID-related," both of which can be seen linked to the coronavirus pandemic

* One in eleven (8.6\%) report they were not able to take their medication as prescribed due to cost, a rate lower than the rate in 2014 (10.3\%)

While a large majority (87.0\%) of area adults are at least somewhat confident they can navigate the health care system, $13.0 \%$ are not confident. Almost all (90.4\%) adults are at least moderately confident they can complete medical forms without the assistance of others.
*Those who lack confidence in navigating the system or have trouble completing medical forms by themselves tend to be male, have lower levels of education, have lower annual household incomes, and/or live in the northern region of Calhoun County

## Executive Summary (Continued)

$>$ Two-thirds (66.6\%) of area adults participate in some form of leisure time physical activity, such as running, calisthenics, walking, golfing, or gardening.
*This proportion is down notably from 2014 (77.8\%)
Cost is the greatest barrier to engaging in leisure time physical activity, followed by physical limitations and lack of an exercise partner
$>$ The prevalence of cigarette smoking among Calhoun County adults is $25.1 \%$, up from 19.3\% in 2014.
*The prevalence of smokeless tobacco remains low at 5.2\%
$>$ The prevalence of adults who use a vaping device use is $11.5 \%$, a rate much higher than the state (6.4\%) and national rates (4.6\%).
$>$ Almost half (47.0\%) of Calhoun County adults are considered non-drinkers of alcohol, meaning they consumed no alcohol in the past month. Additionally, 46.5\% are light to moderate drinkers and $6.5 \%$ are heavy drinkers.

The prevalence of heavy drinking is slightly lower than the Michigan (6.8\%) and U.S. rates (6.7\%)

* However, $\mathbf{2 0 . 3 \%}$ of adults are binge drinkers, meaning they have consumed at least 4 (if female) or 5 (if male) drinks on at least one occasion in the past month, and this rate is higher than it was in 2014 ( $\mathbf{1 3 . 6 \%}$ ) and higher than the state (17.4\%) and national rates (15.9\%)


## Executive Summary (Continued)

$>$ One in five (20.4\%) area adults report using marijuana or cannabis and although this rate is up substantially since 2014 (12.8\%), within that timeframe its recreational use has become legal.
$>$ More than two-thirds of the adults in Calhoun County believe there is a community problem with the use of methamphetamines (71.3\%) and heroin (67.3\%), and with the abuse of prescription medication (69.7\%).
$>$ Area adults continue to consume inadequate amounts of fruits and vegetables per day.

* $54.0 \%$ and $41.3 \%$ of adults eat fruit and vegetables less than one time per day on average, respectively, and both of these rates are higher than the state (41.1\%, 20.7\% and national (39.3\%, 20.3\%) rates
$>$ Almost all adults report that they always have enough to eat (89.6\%), and the vast majority say they are the foods they want to eat ( $86.0 \%$ ) and that they can easily find fruits and vegetables in their community (90.3\%).
$>$ Eight in ten adults (79.9\%) have a medical home (have a personal care provider) and $10.5 \%$ report having more than one.
$>$ Three-fourths (77.4\%) of Calhoun County adults have had a routine medical examination in the past year and this rate is up from 2014 (72.6\%) and is better than both the state (76.6\%) and national (75.7\%) rates.


## Executive Summary (Continued)

$>$ Four in ten (40.4\%) area adults have not visited a dentist in the past year for any reason.

This rate is higher than it was in 2014 (36.8\%) and higher than the state (30.8\%) and national (33.3\%) rates
*14.6\% of adults report they have had problems getting dental care, and the top reasons cited for this include the dentist being unavailable (which could be COVID-related), as well as cost and lack of insurance
$>$ Almost all (95.1\%) women 40 years or older have had a mammogram, and over half (57.7\%) have had one in the past year.
*The latter rate is up from 2014 ( $52.7 \%$ ) and better than the state's rate (50.3\%)
$>$ Nine in ten (90.3\%) women have had a Pap test at one point and two-thirds (67.0\%) have had one in the past three years.
*The latter rate is down from 2014 ( $76.1 \%$ ) and lower than the state's rate ( $68.7 \%$ )
Three-fourths (75.7\%) of Calhoun County adults have experienced at least one adverse childhood event (ACE), and 26.7\% have experienced four or more.

* Both of these proportions are higher than the rates in comparable counties of Ottawa ( $64.5 \%, 22.9 \%$ ) and St. Clair ( $66.0 \%, 24.0 \%$ ) that were collected in 2020 and 2021, respectively


## Executive Summary (Continued)

Some notable findings include:

* Nearly half (48.3\%) of adults report having experienced emotional abuse as a child
* One in five (22.4\%) experienced physical abuse as a child
* 16.1\% experienced sexual abuse, a rate much higher than the state (10.7\%) and national (11.6\%) rates
* Almost four in ten (37.9\%) lived with divorced or separated parents
* Roughly three in ten lived with parents who were problem drinkers or alcoholics (31.2\%) and/or lived with parents who were depressed, mentally ill, or suicidal (28.0\%)
$>$ This research has shown the adverse effects of negative social conditions. For example, adults who experienced four or more adverse childhood experiences (ACEs) as children have a far greater chance of experiencing negative outcomes in adulthood, such as:
*Poor physical health, including chronic pain, and activity limitation
*Poor mental health, including significantly higher rates of mild to severe mental illness and suicidal thoughts
Engaging in risk behaviors, such as smoking, vaping, marijuana use, and binge drinking
$>$ An opportunity exists to educate the public on the importance of ACEs research by showing the correlation between adverse experiences in childhood with negative outcomes in adulthood.


## Executive Summary (Continued)

$>$ Seven in ten (71.3\%) area adults say they "often" or "always" receive the social and emotional support they need, and the importance of receiving this support cannot be understated.
\& If you compare adults who receive needed social and emotional support often or always, or even sometimes, with adults who receive the same support rarely, or never, the latter group demonstrates worse outcomes in terms of mental illness (including suicide), physical health, chronic pain, and substance use (marijuana and smoking)
$>$ Resiliency, in terms of adaptability and being able to bounce back, was measured using the two-item Conor-Davidson Resiliency Scale (CD-RISC-2). The vast majority of adults perceive themselves to be able to adapt when change occurs, and to be able to bounce back after illness, injury, or hardships.
*A major finding of this study is that if you take adults with four of more ACEs and divide the group into those who had negative outcomes in adulthood and those who did not, results show that those who avoided negative outcomes in adulthood had significantly higher resiliency scores on the measures tested. In other words, people who experience adverse life experiences in childhood, but who are resilient, have a greater chance of avoiding negative outcomes as adults compared to those with lower, or less, resilience

## Executive Summary (Continued)

$>$ In terms of health disparities, there is a direct relationship between health outcomes and both education and income. Positive outcomes are more prevalent among adults with higher levels of education and adults from households with higher income levels, while negative outcomes are more prevalent among those with less education and lower incomes. Examples of this disparity include:

* General health status
*Physical health, activity limitation, and chronic pain
* Mental health and psychological distress
*Chronic diseases such as diabetes, COPD, cardiovascular disease such as heart attack and angina/coronary heart disease
*Health risk behaviors such as inadequate vegetable consumption, smoking, and marijuana use
*Preventive practices such as visiting a dentist and physical activity
* Health care access such as having a primary care provider, having health insurance, lack of access to care and medication due to cost, or being health literate

The link between both education and income and positive health outcomes goes beyond the direct relationship. Adults occupying the very bottom groups, for example having less than a high school diploma and/or having household income less than $\$ 20 \mathrm{~K}$, are most likely to experience the worst health outcomes.

## Executive Summary (Continued)

$>$ There is also a direct relationship between health outcomes and age. In many cases, negative outcomes are more often associated with younger adult age groups, for example:
*Poor mental health or having psychological distress

* Having problems receiving health care or taking medication as prescribed due to costs
* Having no personal care provider or medical home
-Lacking confidence in navigating the health care system
*Risk behaviors such as smoking cigarettes, heavy drinking, binge drinking, and marijuana use
* Report 4 or more ACEs
$>$ In other cases, negative outcomes are more associated with older adult groups, such as:
*Fair or poor general health status, poor physical health, and activity limitation
Having chronic diseases like diabetes, arthritis, COPD, heart attacks, angina/CHD, stroke, and cancer


## Executive Summary (Continued)

$>$ There are links between health outcomes and gender. For example:

* Men are more likely than women to:
- Engage in risk behaviors such as smoking, heavy drinking, binge drinking, marijuana use, and eating fewer fruits and vegetables
- Have chronic conditions such as heart attacks and angina/CHD
- Lack health insurance or a personal health care provider
* Women are more likely than men to:
- Have poor mental health or psychological distress
- Have chronic conditions such as diabetes, asthma, arthritis, and cancer (non-skin)
- Have chronic pain
- Not engage in leisure time physical activity

There are also links between race and outcomes. White adults are more likely than minorities to:

* Have poor or fair physical health and activity limitation
* Have problems affording medication
- Lack confidence in navigating the health care system or having a medical home

Engage in risk behaviors such as heavy drinking, binge drinking, and marijuana use
*Not engage in preventive practices such as having a routine physical exam
Have chronic conditions such as COPD, arthritis, heart attacks, angina, and skin cancer

## Executive Summary (Continued)

$>$ Although the prevalence of many of the health indicators varied by the region within Calhoun County, adults living in the northwest region fared worst or second worst on the following measures:
*Poor physical health and activity limitation
*Poor mental health and psychological distress
*Being obese
*Lacking health care coverage, having a medical home, and having problems receiving health care and medication due to costs
*Lacking confidence in navigating the health care system and completing medical forms

* Being physically active
*Engaging in risk behaviors such as smoking and marijuana use
*Following preventive practices such as visiting a dentist
* Having chronic diseases such as diabetes, asthma, arthritis, heart attacks, and chronic pain
Lacking social and emotional support and being dissatisfied with life
*Reporting 4 or more ACEs

Comparison of Current Calhoun County BRFS Measures to 2014, Michigan, and the U.S.

|  | Health Status Indicators |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | 2014 | 2021 | Michigan* | U.S.* |
| General Health Fair/Poor | 21.5\% | 20.5\% | 15.5\% | 13.3\% |
| Poor Physical Health (14+ days) |  | 14.4\% | 11.3\% | 9.9\% |
| Poor Mental Health (14+ days) |  | 21.3\% | 15.8\% | 13.2\% |
| Activity Limitation (14+ days) | 20.7\% | 11.3\% | 9.1\% | -- |
| Obese | 37.4\% | 38.6\% | 35.2\% | 31.9\% |
| Overweight | 30.7\% | 32.7\% | 34.6\% | 35.2\% |
| Healthy Weight | 29.5\% | 27.0\% | 28.4\% | 31.1\% |


|  | Health Care Access |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | 2014 | 2021 | Michigan* | U.S.* |
| No Health Care Coverage (18-64) | 10.6\% | 10.6\% | 8.4\% | 13.2\% |
| No Personal Health Care Provider | -- | 20.1\% | 14.5\% | 22.4\% |
| No Health Care Access Due to Cost | 13.3\% | 9.4\% | 7.9\% | 9.8\% |
| No medication as prescribed due to cost | 10.3\% | 8.6\% | -- | -- |

- = worse than 2014
$\square$ = worse than MI and/or U.S.


# Comparison of Current Calhoun County BRFS Measures to 2014, Michigan, and the U.S. (Continued) 

|  | Risk Behavior Indicators |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | 2014 | 2021 | Michigan* | U.S.* |
| No Leisure Time Physical Activity | 22.2\% | 33.4\% | 20.8\% | 22.4\% |
| Consumes Fruits <1 time/day |  | 54.0\% | 41.1\% (2019) | 39.3\% (2019) |
| Consumes Vegetables <1 time/day |  | 41.3\% | 20.7\% (2019) | 20.3\% (2019) |
| Current Cigarette Smoking | 19.3\% | 25.1\% | 18.4\% | 15.5\% |
| Former Cigarette Smoking | 27.7\% | 24.3\% | 27.1\% | 25.2\% |
| Binge Drinking | 13.6\% | 20.3\% | 17.4\% | 15.9\% |
| Heavy Drinking |  | 6.5\% | 6.8\% | 6.7\% |
| Current Vaping/E-cigarette Use |  | 11.5\% | 6.4\% | 4.6\% (2017) |
| Current marijuana use | 12.8\% | 20.4\% |  |  |

$\square$ = worse than MI and/or U.S.

# Comparison of Current Calhoun County BRFS Measures to 2014, Michigan, and the U.S. (Continued) 

|  | Clinical Preventive Practices |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | 2014 | 2021 | Michigan* | U.S.* |
| No Dental Visit in Past Year | 36.8\% | 40.4\% | 30.8\% | 33.3\% |
| No Routine Physical Exam in Past Year | 27.4\% | 22.6\% | 23.4\% | 24.3\% |
| Ever Had Mammogram (Female, 40+) |  | 95.1\% | 92.8\% | -- |
| Had Mammogram in Past Year (Female, 40+) | 52.7\% | 57.7\% | 50.3\% | -- |
| Ever Had Pap Test (Female) | 89.5\% | 90.3\% | 89.3\% | -- |
| Had Pap Test in Past Three Years (Female) | 76.1\% | 67.0\% | 68.7\% | -- |
| Ever Had Sigmoidoscopy or Colonoscopy (50+) |  | 82.3\% | 79.4\% | -- |
| Had Sigmoidoscopy or Colonoscopy in Past 5 Years (50+) |  | 64.0\% | 55.6\% | -- |

$\square$ = worse than MI and/or U.S.

# Comparison of Current Calhoun County BRFS Measures to 2014, Michigan, and the U.S. (Continued) 

|  | Chronic Conditions |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | 2014 | 2021 | Michigan* | U.S.* |
| Arthritis |  | 34.6\% | 30.1\% | 24.5\% |
| Lifetime Asthma |  | 18.3\% | 15.4\% | 14.2\% |
| Current Asthma | 15.9\% | 13.8\% | 11.0\% | 9.6\% |
| Diabetes | 15.1\% | 15.6\% ${ }^{\text {- }}$ | 12.3\% | 10.6\% |
| COPD | 9.1\% | 13.9\% | 8.3\% | 6.2\% |
| Heart Attack |  | 5.0\% | 5.1\% | 4.3\% |
| Angina/Coronary Heart Disease | 6.4\% | 6.3\% | 5.0\% | 4.0\% |
| Stroke | 6.2\% | 4.3\% | 3.5\% | 2.8\% |
| Skin Cancer | 6.7\% | 6.5\% | 6.2\% | 6.4\% |
| Other Cancer (Non-Skin) | 7.1\% | 8.0\% | 9.6\% | 6.8\% |

$\square$ = worse than MI and/or U.S.

## Strengths and Limitations

$>$ Since Behavioral Risk Factor Surveys are designed to collect feedback, or data, at the individual level (versus household), conducting the survey via telephone continues to be the most efficient and appropriate way to collect information from a sample of residents that most closely represents the general population from which they are drawn. More specific strengths include:
*Robust methodology and sampling procedure results in greatest coverage - cell phone sample, coupled with listed and unlisted landline sample, means everyone with a telephone has a chance of being selected to participate

- Local surveillance data - provides local data on risk behaviors, clinical preventive practices, and chronic disease not collected elsewhere
*Standardized across states and the nation - this enables comparison between states, comparison of states with the nation, and comparisons of regions (e.g., counties) with states, the nation, or with other regions such as counties that follow the same protocol
*Large sample sizes allow for robust analyses by demographics and prevalence estimates
*Timely - (1) can collect data in short time periods (e.g., weeks), and (2) data is collected in real time, whereas state and national data can be two years old when it is made available to the public


## Strengths and Limitations (Continued)

> Despite the robust methodology and sampling procedures of the BRFS, there are certain limitations to these surveys, such as:
*Self-report data - relies on individuals self-reporting, so there could be underrepresentation of some prevalence estimates (e.g., weight, BMI)
*Telephone under coverage - (1) people who don't have a phone and/or (2) people with only a cell phone with an area code outside of the target region will not be contacted for participation
*Non-institutionalized population - people in institutions (e.g., nursing homes, prisons, military) are not contacted for participation
*Lack of oversampling and setting of quotas - due to resource limitations, oversampling of certain groups, or subpopulations, is often not feasible, and setting of quotas is not consistent with the protocol of probability sampling

## DETAILED FINDINGS

## Coronavirus (COVID-19)

## Coronavirus (COVID-19) Vaccination

Two-thirds (68.2\%) of area adults say they have been vaccinated for the coronavirus (COVID-19).
$>$ The remaining third cite myriad reasons for not getting the vaccine such as lack of trust in the vaccine/government/health care, not needing it due to already having COVID or taking precautions so as not to get it, and personal choice.

Been Vaccinated for the Coronavirus
(COVID-19)

Reasons Not Vaccinated for the Coronavirus (COVID-19)


## Coronavirus (COVID-19) Vaccination (Continued)

$>$ Getting the coronavirus vaccine is inversely related to education, and for the most part it is also inversely related to income.
$>$ The youngest adults (< age 35) are the least likely to have received the vaccination, by far.
$>$ Black adults are more likely to have received the vaccination than adults of other races/ethnicities.


## Life Changes During COVID-19 Pandemic

Roughly half (55.6\%) of area adults say their lives are about the same now as they were pre-COVID pandemic, while over one-third (35.9\%) say their lives are worse.

* There are myriad reasons provided for why the pandemic has made their lives worse, but most often cited are aspects revolving around the financial impact, mental and physical health, social isolation and the inability to see people and do the things they used to do, and the restrictions which some people interpreted as a loss of freedom
Life Change During COVID-19 Pandemic
Top Reasons COVID-19 Made Life Worse



## Measures Taken in Response to COVID-19

In response to COVID-19, the vast majority of Calhoun County adults wash and sanitize their hands, wear masks, keep six feet away from people outside their household, and/or avoid public or crowded places.
$>$ Eight in ten $(78.8 \%)$ believe the measures they take to combat COVID-19 make a difference.

Measures Taken in Response to COVID-19


Did Measures Taken Make a Difference?


## Health Status Indicators

## General Health Status

Although $44.3 \%$ of Calhoun County adults report very good or excellent health, one in five (20.5\%) report their health to be fair or poor.

* The proportion of adults who perceive their health as fair or poor is inversely related to level of education and household income, and non-White adults are more likely to report fair or poor health than White adults

Perception of General Health
(Total Sample)

General Health Fair or Poor by Demographics


## Quality of Life - Physical Health Status

One in seven (14.4\%) Calhoun County adults report poor physical health.

* The prevalence of poor physical health is inversely related to education and income
* Further, White adults report higher rates of poor physical health slightly more than non-White adults, and adults in the western regions of the county report higher prevalence of poor physical health compared to adults in the eastern regions

*14 or more days of poor physical health, which includes physical illness and injury, during the past 30 days.
Q2.1: Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good? (n=857)


## Quality of Life - Mental Health Status

More than one in five (21.3\%) area adults report poor mental health.

* The prevalence of poor mental health is inversely related to age and income
* The highest prevalence of poor mental health is found in adults under the age of 35
* Poor mental health rates are higher among women than men

Number of Days Mental Health


> Mean Days (Including Zero) = 6.5
> Mean Days (Without Zero) = 15.6
*14 or more days of poor mental health, which includes stress, depression, and problems with emotions, during the past 30 days.

## Activity Limitation

In the past 30 days, poor physical or mental health prevented $11.3 \%$ of area adults from doing their usual activities (e.g., self-care, work, recreation).

* The largest proportions of adults who report activity limitation are found among adults with the lowest incomes and among those living in the western regions of the county



## Psychological Distress

Two-thirds (64.7\%) of Calhoun County adults are considered to be mentally healthy according to their feedback on the Kessler 6 Psychological Distress Questionnaire.*

* Conversely, $27.2 \%$ experience mild to moderate psychological distress and $8.1 \%$ are severely distressed

|  | During the Past 30 Days, About How Often Did You.... |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: |
| Frequency of <br> Feeling | Feel <br> Nervous <br> $(\mathrm{n}=893)$ | Feel <br> Hopeless <br> $(\mathrm{n}=892)$ | Feel Restless <br> or Fidgety <br> $(\mathrm{n}=893)$ | Depressed That <br> Nothing Could <br> Cheer You Up <br> $(\mathrm{n}=892)$ | Feel That <br> Everything <br> Is An Effort <br> $(\mathrm{n}=880)$ | Feel <br> Worthless <br> $(\mathrm{n}=893)$ |
| None of the time | $35.9 \%$ | $69.8 \%$ | $41.0 \%$ | $70.8 \%$ | $42.3 \%$ | $75.4 \%$ |
| A Little | $27.1 \%$ | $15.3 \%$ | $21.9 \%$ | $14.2 \%$ | $20.5 \%$ | $9.1 \%$ |
| Some of the time | $22.5 \%$ | $9.3 \%$ | $20.9 \%$ | $10.6 \%$ | $22.9 \%$ | $9.1 \%$ |
| Most of the time | $6.8 \%$ | $3.9 \%$ | $7.9 \%$ | $2.9 \%$ | $6.8 \%$ | $3.7 \%$ |
| All of the time | $7.6 \%$ | $1.7 \%$ | $8.3 \%$ | $1.4 \%$ | $7.5 \%$ | $2.7 \%$ |

Mentally Healthy (Well) = 64.7\%
Mild to Moderate Psychological Distress $=\mathbf{2 7 . 2 \%}$
Severe Psychological Distress = 8.1\%

## Psychological Distress (Continued)

The highest prevalence of mild to severe psychological distress is found among the youngest (< age 25) Calhoun County adults and the lowest prevalence is found among the oldest adults (aged 65 or older).
> Having mild to severe psychological distress is indirectly related to income.

Mild to Severe Psychological Distress*
(Total Sample)
35.3\%
*Calculated from responses to Q. 18.1-18.6 where respondents scored 12 or more across the six items on the Kessler 6 scale. $\quad(n=204)$
Q22.1-Q22.6 During the past 30 days, about how often did you feel....

Mild to Severe Psychological Distress by Demographics


## Medication and Treatment for Psychological Distress

$>$ One fourth (24.4\%) of all Calhoun County adults currently take medication or receive treatment for a mental health condition or emotional problem.

* However, many of those who could benefit most from medication or treatment are not receiving either: only four in ten (39.0\%) adults classified as having "mild to moderate psychological distress" and 57.0\% of those classified as having "severe psychological distress" currently take medication or receive treatment for their mental health issues
* Further, only 54.1\% of adults who report "poor mental health" currently take medication or receive treatment

Taking Medication or Receiving Treatment for Mental Health Condition or Emotional Problem


Percent Taking Medication/Receiving Treatment by Psychological Distress Category

No, 75.6\%
Percent Taking Medication/Receiving Treatment by
"Poor Mental Health" Classification
54.1\%

## Perceptions of Mental Health Treatment and Mental

## Illness

Even though nine in ten (91.0\%) Calhoun County adults believe treatment can help people with mental illness lead normal lives, only half ( $52.2 \%$ ) view others as generally caring and sympathetic to people with mental illness, and this drops to $27.6 \%$ among those with severe psychological distress.

* This continued stigma could be the reason more people don't seek treatment even though they could benefit from it
"Treatment Can Help People With Mental Illness Lead Normal Lives"
"People Are Generally Caring and Sympathetic to People With Mental IIIness"



## Neither Agree Nor Disagree <br> 1.9\%



Agree by Psychological Distress Category Well (94.8\%)
Mild to Moderate (87.2\%)
Severe (70.9\%)

| Neither Agree Nor |
| ---: |
| Disagree |$\quad 3.8 \%$



## Suicide

One in twelve (8.4\%) area adults has thought about committing suicide in the past year.

* Of these, one in five ( $20.4 \%$ ) actually attempted suicide in the past year


## Thought of Taking Own Life in Past 12 Months

## Attempted Suicide in Past 12 Months <br> (Among Those Who Thought About Taking Their Own Life)



## Weight Status

$>$ Seven in ten (71.3\%) Calhoun County adults are considered to be either overweight or obese per their BMI; this is up slightly (68.1\%) from 2014.
$>$ The proportion of obese adults increased 1.2\% from 2014 (37.4\%).
$>$ More than one in four (27.0\%) are at a healthy weight and this is down slightly from 2014 (29.5\%).


Obese = among all adults, the proportion of respondents whose BMI was greater than or equal to 30.0.
Overweight = among all adults, the proportion of respondents whose BMI was greater than or equal to 25.0 , but less than 30.0.
Healthy weight = among all adults, the proportion of respondents whose BMI was greater than or equal to 18.5 but less than 25.0.

## Obesity

The prevalence of obesity is fairly universal across demographics.
*That said, obesity rates are lower in Black adults compared to adults of other races/ethnicities

* Obesity is less prevalent in the youngest (18-24) and oldest (75+) age groups


Obese by Demographics


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## Healthy Weight

More than one-fourth (27.0\%) of Calhoun County adults are at a healthy weight per their BMI.

* The youngest adults (18-34) tend to be at healthy weights more than older adults
* Additionally, the prevalence of healthy weight is more far more common in adults with less than a high school diploma compared to adults with more education



## Health Care Access

## Health Care Coverage

$>$ Nine in ten (89.4\%) adults under age 65 have health care coverage.
$>$ For all area adults, the most common source of health coverage is a plan purchased through an employer or union.
$>$ Approximately one in fifteen (6.7\%) purchase health care coverage on their own.

## Currently Have Health Care Coverage (Among Adults 18-64)



Primary Source of Health Coverage (All Adults)

| A plan purchased through an employer or union |  |
| :---: | :---: |
| Medicare | 25.9\% |
| Medicaid or other state program | 15.8\% |
| A plan that you or another family member buys on your own | 6.7\% |
| TRICARE, VA, or military | 1.2\% |
| Other | 0.9\% |
| None | 9.0\% |

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## Lack of Health Care Coverage

> Among adults aged 18-64, men are more likely to lack health care coverage compared to women, and Black adults are more likely to lack coverage than adults of other races/ethnicities.
$>$ Lacking health care coverage is indirectly related to education and three in ten (31.9\%) adults with less than a high school education lack coverage.

No Health Care Coverage*
(Among Adults 18-64)

No Health Care Coverage by Demographics


## Problems Receiving Health Care

Among all Calhoun County adults, $9.4 \%$ have forgone needed health care in the past year due to cost.
$>$ One-third (34.4\%) report delaying medical for myriad reasons during the past year.

* One in nine (11.3\%) confirmed they could not receive needed care due to the COVID-19 pandemic
* However, the top reason cited - couldn't get an appointment soon enough - could also be COVID-19 related

Could Not Receive Needed Medical Care in Past 12 Months Due to Cost


Reasons for Delays in Getting Needed Medical Care

| Couldn't get an appointment soon enough | 13.3\% |
| :---: | :---: |
| COVID-19 related | 11.3\% |
| Once you got there, had to wait too long to see doctor | 6.3\% |
| Couldn't get through on the phone | 4.1\% |
| Cost of prescription drugs | 4.0\% |
| Clinic/office wouldn't accept insurance | 3.7\% |
| Cost of health care services in general | 3.5\% |
| Cost of co-pays and/or deductibles | 3.4\% |
| Didn't have transportation | 2.4\% |
| Clinic wasn't open | 2.0\% |
| Other | 3.4\% |
| No delays in getting medical care/ didn't need care |  |

## Problems Receiving Health Care (Continued)

The cost barrier to health care prevents certain subpopulations from seeking needed care more than others. For example, costs are more likely to be a barrier for younger adults (18-34), men, Black adults, those with less than a high school degree, and those living in the northern regions of the county.

No Health Care Access During Past 12 Months Due to Cost* (Total Sample)

## 9.4\%

No Health Care Access Due to Cost by Demographics


## Problems Affording Medication

Among all Calhoun County adults who take some form of medication, $8.6 \%$ did not take their medication as prescribed due to costs.

* Prescription costs tend to impact adults under age 55 more than those who are older (those with Medicare insurance)



## Confidence in Navigating the Healthcare System

A large majority ( $87.0 \%$ ) of adults are at least somewhat confident they can successfully navigate the health care system; however, $13.0 \%$ are not very or not at all confident.

* Those who are least confident are the youngest (age 18-34), men, have the lowest incomes (under \$20K), lack a college degree, and/or live in the northern regions of the county



## Confidence in Completing Medical Forms

A large majority ( $90.6 \%$ ) of adults are at least somewhat confident they can complete medical forms unassisted, however, one in ten (9.4\%) are not very or not at all confident.

* Confidence in completing the forms is inversely related to education and income
* Men are less confident than women, and adults living in northern Calhoun County are less confident than adults in the south

Level of Confidence in Filling Out
Medical Forms by Yourself
$\square$ Extremely
Confident
$\square$ Very
Confident


Low Confidence in Filling Out Forms by Demographics


## Risk Behavior Indicators

## Physical Activity

Two-thirds (66.6\%) of area adults participate in leisure physical activity outside of their job, while $33.4 \%$ do not participate in any leisure time physical activity.
$>$ Cost is the greatest barrier to engaging in leisure time physical activity, followed by physical limitations and lack of an exercise partner.
$\frac{\text { No Leisure Time Physical Activity* }}{\text { (Total Sample) }}$
(Total Sample)

*Among all adults, the proportion who reported not participating in any leisure-time physical activities or exercises, such as running, calisthenics, golf, gardening, or walking, during the past month.

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## Physical Activity (Continued)

> For the most part, engaging in leisure time physical activity outside of work is directly related to income.
$>$ Outside of work, women are less active than men, and Black adults are less active than adults of other races/ethnicities.

## No Leisure Time Physical Activity* (Total Sample)

*Among all adults, the proportion who reported not participating in any leisure-time physical activities or exercises, such as running, calisthenics, golf, gardening, or walking, during the past month.

No Leisure Time Physical Activity by Demographics


## Fruit Consumption

Half (54.0\%) of area adults consume fruit less than one time per day.

* Adults likely to eat fruit less than once a day are from groups that are under age 45
* Women and Black adults consume fruit more often than men and non-Black adults, respectively



## Vegetable Consumption

## Four in ten (41.3\%) adults consume vegetables less than one time per day.

* Adults most likely to consume vegetables less than once a day are the youngest (age 18-34), male, have less than a college education, and/or have incomes under \$50,000

Number of Times Consumed Vegetables Per Day

## Consumed Vegetables <1 Time Per Day by Demographics



## Food Sufficiency

One in ten (10.4\%) area adults report they sometimes or often don't have enough food to eat.

* Adults most likely to report they sometimes or often don't have enough to eat tend to come from groups that are the youngest (18-24) and/or have the lowest incomes
The vast majority of people say they eat the foods they want to and nine in ten (90.3\%) say it's easy to find fresh fruits and vegetables in their neighborhood or community.

Food Sufficiency


It's Easy to Find Fresh Fruits and Vegetables in My Community


## Foods I Wanted to Eat




| Most Likely |
| :--- |
| Age 18-24-20.3\% |
| Below poverty level $-\mathbf{2 1 . 6 \%}$ |
| Less than \$20K income $-\mathbf{2 7 . 8 \%}$ |



## Cigarette Smoking

> Half (49.7\%) of Calhoun County adults have smoked at least 100 cigarettes in their lifetime. Of these, $37.9 \%$ currently smoke every day and $13.0 \%$ smoke some days.

* Using 100 cigarettes as the minimum to be classified as a current or former smoker, $25.1 \%$ of Calhoun County adults are considered to be current smokers, $24.3 \%$ are former smokers, and $50.6 \%$ of adults are non-smokers or never smoked


## Smoked 100 Cigarettes in Lifetime

## Frequency of Current Use (Among Those Who Smoked at Least 100 Cigarettes in Their Lifetime)

Smoking Status


*Among all adults, the proportion who reported that they had ever smoked at least 100 cigarettes ( 5 packs) in their life and that they smoke cigarettes now, either every day or on some days.
${ }^{* *}$ Among all adults, the proportion who reported that they had ever smoked at least 100 cigarettes (5 packs) in their life but they do not smoke now.

## Cigarette Smoking (Continued)

> Cigarette smoking is inversely related to education and income, and it is also most common among adults aged 25-44.
$>$ The prevalence of smoking is higher in men than women, and higher in adults from the northwest region of Calhoun County compared to adults who live in other regions.

Current Cigarette Smoking*
(Total Sample)


## Current Cigarette Smoking by Demographics



## Cigarette Smoking (Continued)

$>$ On the other hand, adults most likely to be non-smokers or to have never smoked are the youngest (18-24), women, Black, college graduates, and/or have annual incomes of $\$ 75,000$ or more.


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## Smokeless Tobacco and E-cigarette/Vaping Device Use

A small proportion of area adults currently use smokeless tobacco products.
$>$ On the other hand, one in nine (11.5\%) currently use vaping devices and an additional $17.1 \%$ have used these devices in the past.

## Current Use of Smokeless Tobacco Products



## Current Use of Vaping Devices



## Alcohol Consumption

$>$ Almost half (45.9\%) of Calhoun County adults did not drink any alcohol in the past month, but for those who did drink they averaged 8 days when they consumed alcohol.
> Those who drink alcohol average 2.5 drinks per sitting.
$>$ A similar proportion of adults are non-drinkers and light/moderate drinkers; $6.5 \%$ are heavy drinkers.


[^0]
## Alcohol Consumption (Continued)

> In Calhoun County, heavy drinking occurs far more in adults who live in the northeast region compared to adults who live in other regions.
$>$ The likelihood of heavy drinking increases with level of education and household income.


## Binge Drinking

Among all adults, 20.3\% have engaged in binge drinking in the past 30 days; among those who drink, this proportion rises to $38.4 \%$.

## Number of Times Consumed 5 or More (Men)/4 or More (Women) Drinks on an Occasion in Past 30 Days (All Adults)



Mean = 1.0

Number of Times Consumed 5 or More (Men)/4 or More (Women) Drinks on an Occasion in Past 30 Days (Drinkers)


## Binge Drinking (Continued)

The prevalence of binge drinking is highest among adults age 18-34. It is also higher among men than women and much higher among White adults compared to non-White adults.
$>$ As with heavy drinking, the largest proportions of binge drinkers reside in the northeast region of the county.


## Marijuana Use

> One in five (20.4\%) Calhoun County adults have used marijuana or cannabis at least once in the past 30 days. * One in ten (10.5\%) use marijuana every day
$>$ Four in ten (41.0\%) of those who use, do so both medicinally and recreationally, while $34.0 \%$ use it solely for recreational purposes.

## Number of Days Used Marijuana or Cannabis in Past 30 Days

$$
\begin{gathered}
\text { Mean (All) }=4.3 \\
\text { Mean (Users) }=21.0
\end{gathered}
$$

## Mode of Use (Among Those Who Use)



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## Marijuana Use (Continued)

Marijuana use is more prevalent among adults aged 18-24 than adults who are older, and it's also more prevalent among adults living in northern Calhoun County (especially the northeast) compared to adults living in southern Calhoun County.
> Marijuana use is also inversely related to education and income; in fact, it is least prevalent among adults with a college degree and/or annual household incomes of $\$ 75,000$ or more.

Used Marijuana or Cannabis
In Past 30 Days*
(Total Sample)

Marijuana/Cannabis Use in Past 30 Days by Demographics


## Perception of Substance Use Problems in the Community

More than two-thirds of the adults in Calhoun County believe there is a community problem with the use of methamphetamines and heroin, as well as an abuse of prescription medication.
$>$ Additionally, half (56.4\%) believe cocaine use is also problematic.

## Substances Perceived to be Problems



Clinical Preventive Practices

## Personal Health Care Provider

Eight in ten adults (79.9\%) have a personal health care provider.

* Those who don't, tend to be represented by groups that are younger (< age 45), male, White, and live in the western region of the county
* Having a personal health care provider is directly related to level of education



## Routine Medical Exam/Checkup

$>$ More than one in five (22.6\%) adults have not had a routine medical exam in the past year.
> Adults between the ages of 25-54 are less likely to have a routine exam compared to adults younger or older.
$>$ Men are less likely than women to have had a routine medical exam in the past year.


## Oral Health

## Four in ten (40.4\%) adults have not visited a dentist in the past year for any reason.

$>$ Visiting the dentist in a timely manner is directly related to education and income.
$>$ Women are more likely than men to have visited a dentist in the past year.

## When Last Visited Dentist for Teeth Cleaning

Within the
past year

Within the past two years

Within the past
5 years


No Teeth Cleaning in Past Year by Demographics


## Barriers to Dental Care

Approximately one in seven (14.6\%) area adults had problems getting needed dental care in the past year.

* The biggest barrier to getting dental care over the past year was dentists or dental hygienists being unavailable and this could have been largely due to the COVID-19 pandemic
* Additional barriers revolve around costs or insurance issues


## Problems Getting Needed Dental Care

Reasons for Difficulty in Getting Dental Care (Among Those Who Reported Problems Getting Care)


## Cancer Screening - Mammogram

Almost all ( $95.1 \%$ ) area women age 40 or older have had a mammogram at one time.

* Women aged 40-44 and/or with less than a high school degree are least likely to have had a mammogram

Ever Had Mammogram

## (Among Women Age 40+)



Within past 2 years
( 1 to $<2$ )

Within past 3 years
$(2$ to $<3)$$\quad 8.5 \%$
Within past 5 years
( 3 to $<5$ ) $4.5 \%$ 5 or more
years ago $\square 5.8 \%$

Ever Had Mammogram by Demographics


## Cancer Screening - Mammogram (Continued)

Over half (57.7\%) of area women age 40 or older have had a mammogram in the past year.

* Women who are less likely to have a timely mammogram come from the youngest (40-44) and oldest age groups (75+) and/or have annual incomes below \$20,000



## Cancer Screening - Pap Test

Nine in ten (90.3\%) Calhoun County women have had a Pap test at one time.

* The only notable differences demographically are that women in the youngest age range (< age 25) and/or with less than a high school degree are far less likely to have had a Pap test compared to older or more educated women

Ever Had Pap Test




Ever Had Pap Test by Demographics


## Cancer Screening - Pap Test (Continued)

Two-thirds (67.0\%) of Calhoun County women have had an appropriately timed Pap test (within the past three years).

* Women with the highest rates of appropriately timed Pap tests come from groups that are aged 25-44, college graduates, and have annual incomes of $\$ 75 \mathrm{~K}+$

Appropriately Timed Pap Test


Within past 5 years
 $\begin{aligned} & \begin{array}{l}5 \text { or more } \\ \text { years ago }\end{array} \square 17.0 \% \\ & \text { Never } \square 9.7 \%\end{aligned}$

Appropriately Timed Pap Test by Demographics


## Cancer Screening - Sigmoidoscopy and Colonoscopy

Among Calhoun County adults age 50 or older, $82.3 \%$ have had a sigmoidoscopy or colonoscopy at one point to screen for colon cancer.

* Rates are lowest among adults age 50-54 and/or those with annual incomes below \$20,000

Ever Had Sigmoidoscopy or Colonoscopy


Never


Had Sigmoidoscopy/Colonoscopy by Demographics


## Cancer Screening - Sigmoidoscopy and Colonoscopy <br> (Continued)

Almost two-thirds (64.0\%) of Calhoun County adults age 50 or older have had a sigmoidoscopy or colonoscopy within the past 5 years.

* Rates are highest among Black adults



## Chronic Conditions

## Prevalence of Diabetes

Roughly one in six (15.6\%) area adults has been told by a health care professional that they have diabetes.

* The prevalence of diabetes is greatest for older adults ( $45+$ ) and/or those with incomes less than $\$ 35 \mathrm{~K}$
* Prevalence is also greater for women compared to men, and for Black adults compared to adults of other races/ethnicities



## Ulin. <br> Management of Diabetes

Almost all adults with diabetes have been checked by a health care professional for A1C at least once in the past year; $72.9 \%$ have been checked at least twice.

## Number of Times Been Checked for A1C by a Health Care Professionals in Past Month



## Management of Diabetes (Continued)

Almost all (97.8\%) Calhoun County adults with diabetes received some source of information over the past year regarding managing their condition.

* The most common source used, by far, is physicians or other health professionals
$>$ Six in ten (59.5\%) area adults with diabetes believe the existing community programs and services help them manage their condition well, however, one in five (22.0\%) report that existing services are not very or not at all helpful.

Information Sources for
Managing Diabetes
Extent to Which Existing Community Programs and Services Help Manage Diabetes


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## Lifetime Asthma

Roughly one in six (18.3\%) area adults have been told by a health care professional at some point in their life that they had asthma.
*The prevalence of lifetime asthma is greater for women than men, and greatest for those with the lowest annual incomes and/or for those who live in the northwest region of the county

Lifetime Asthma Prevalence* (Total Sample)

*Among all adults, the proportion who reported that they were ever told by a doctor, nurse, or other health care professional that they had asthma

Lifetime Asthma by Demographics


## Current Asthma

Roughly one in seven (13.8\%) area adults currently has asthma.

* Women are more likely to have asthma than men, and it is more prevalent in adults with the lowest annual incomes compared to those with higher incomes
* It is also more prevalent in adults living in the northwest section of the county than adults living in other regions


## Current Asthma Prevalence* (Total Sample)



## Current Asthma by Demographics



Management of Asthma
Almost nine in ten ( $86.5 \%$ ) area adults with asthma received some source of information over the past year regarding managing their condition.

* The most common source used, by far, is physicians or other health professionals

The vast majority ( $72.8 \%$ ) of area adults with asthma believe the existing community programs and services help them manage their condition well.

Extent to Which Existing Community Programs and
Services Help Manage Asthma


## Prevalence of COPD

Approximately one in seven (13.9\%) Calhoun County adults have chronic obstructive pulmonary disease (COPD).

* The disease is more common in adults who are older (45+), have the lowest incomes, and/or have less than a high school degree


Management of COPD
Nine in ten (90.0\%) Calhoun County adults with COPD received some source of information over the past year regarding managing their condition.

* The most common source used, by far, is physicians or other health professionals
$>$ Almost six in ten (58.5\%) area adults with COPD believe the existing community programs and services help them manage their condition well; however, $\mathbf{2 2 . 0 \%}$ say existing services are not very or not at all helpful.



## Prevalence of Arthritis

## One-third (34.6\%) of area adults have arthritis, and this is largely a condition that comes with age.

* The disease is also more common in women than men and more common in White adults compared to non-White adults It is most common in adults with the lowest annual incomes


## Ever Told Have Arthritis*

 (Total Sample)
*Among all adults, the proportion who reported ever being told by a health care professional that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia

Told Have Arthritis by Demographics


## Management of Arthritis

More than eight in ten (82.9\%) area adults with arthritis received some source of information over the past year regarding managing their condition.

* The most common source used, by far, is physicians or other health professionals
$>$ Almost half (48.3\%) of area adults with arthritis believe the existing community programs and services help them manage their condition well; however, $\underline{\mathbf{2 3 . 1} \%}$ report existing services do not help at all.


## Information Sources for <br> Managing Arthritis

## Extent to Which Existing Community Programs and Services Help Manage Arthritis



## Prevalence of Heart Attack

> One in twenty (5.0\%) Calhoun County adults have been told by a health care professional that they had a heart attack.

* The disease is more common in adults who are older (65+) and more common in men than women
* The prevalence of having a heart attack is indirectly related to education and income


## Ever Told Had Heart Attack* <br> (Total Sample)



## Management of Heart Attack

$>$ Eight in ten (80.1\%) Calhoun County adults who have had a heart attack received some source of information over the past year regarding managing their condition; however, $19.9 \%$ did not receive any information.

* The most common source used, by far, is physicians or other health professionals
> Two-thirds (65.0\%) of area adults who had a heart attack believe the existing community programs and services help them manage their condition well; however, $30.5 \%$ believe existing resources are not very or not all helpful.

Information Sources for Managing Heart Attack

Extent to Which Existing Community Programs and Services Help Manage Heart Attack



## Prevalence of Angina or Coronary Heart Disease

## One in sixteen (6.3\%) area adults report angina or coronary heart disease.

* The disease is more common in adults who are older (55+), have the lowest incomes, and/or live in the southwest region of the county
* It is also more common in White adults than non-White adults, and more common in men than women

*Among all adults, the proportion who reported that they were ever told by a doctor that they have angina or coronary heart disease.

Told Have Angina/CHD by Demographics


## Management of Angina or Coronary Heart Disease

> Almost nine in ten (87.9\%) area adults with angina or coronary heart disease received some source of information over the past year regarding managing their condition.

* The most common source used, by far, is physicians or other health professionals; one in ten also use family/friends
$>$ Six in ten (59.5\%) area adults with angina or CHD believe the existing community programs and services help them manage their condition well; however, $35.1 \%$ say area services are not very or not at all helpful.

Information Sources for
Managing Angina/CHD

Extent to Which Existing Community Programs and
Services Help Manage Angina/CHD


## Prevalence of Stroke

## A small proportion (4.3\%) of Calhoun County adults report having had a stroke.

* The disease is more common in adults who are older (55+) and/or live in the northeast region of the county


## Ever Told Had Stroke* <br> (Total Sample)

*Among all adults, the proportion who reported that they were ever told by a doctor that they had a stroke.

Told Had Stroke by Demographics


## Management of Stroke

$>$ Eight in ten (80.1\%) area adults who have had a stroke received some source of information over the past year regarding managing their condition; however, $19.9 \%$ did not receive any information.

* The most common source used, by far, is physicians or other health professionals
$>$ Two-thirds (65.2\%) of area adults who had a stroke believe the existing community programs and services help them manage their condition well; however, $\mathbf{2 3 . 8 \%}$ report existing programs are not very or not at all helpful.


## Information Sources for <br> Managing Stroke

## Extent to Which Existing Community Programs and Services Help Manage Stroke



## Prevalence of Skin Cancer

## One in sixteen (6.5\%) Calhoun County adults has been diagnosed with skin cancer.

* The disease is more common in adults who are older (65+), especially those 75 years or older
* It is also directly related to education and income
* Adults in the southwest region of county report having skin cancer far more than adults in other regions

Ever Told Have Skin Cancer*

*Among all adults, the proportion who reported that they were ever told by a doctor that they have skin cancer.

Told Have Skin Cancer by Demographics

| Age |  | Education |  |
| :---: | :---: | :---: | :---: |
| 18-24 | 0.0\% | < High School | 1.4\% |
| 25-34 | 1.1\% | High School Grad | 4.2\% |
| 35-44 | 0.6\% | Some College | 8.3\% |
| 45-54 | 6.5\% |  |  |
| 55-64 | 5.6\% | College Grad | 9.6\% |
| 65-74 | 14.3\% | HH Income |  |
| 75+ | 29.1\% | <\$20,000 | 5.6\% |
| Gender |  | \$20,000-\$34,999 | 3.6\% |
| Male | 6.6\% | \$35,000-\$49,999 | 5.4\% |
| Female | $\square 6.4 \%$ | \$50,000-\$74,999 | 7.5\% |
| Race/Ethnicity |  | \$75,000+ | 9.8\% |
| White, non-Hispanic | 8.1\% |  |  |
| Black, non-Hispanic | 1.0\% | Region |  |
| Other | 2.3\% | Northwest | 5.8\% |
| Poverty Level |  | Northeast | 8.1\% |
| Below Poverty Line | 4.3\% | Southeast | 3.7\% |
| Above Poverty Line | $\square 7.1 \%$ | Southwest | 13.5\% |

## Management of Skin Cancer

Almost nine in ten (87.6\%) Calhoun County adults with skin cancer received some source of information over the past year regarding managing their condition.

* The most common source used, by far, is physicians or other health professionals
$>$ Seven in ten $(70.4 \%)$ area adults with skin cancer believe the existing community programs and services help them manage their condition well; $55.1 \%$ say "very well."

Information Sources for
Managing Skin Cancer


## Prevalence of Other Cancer (Non-Skin)

One in twelve (8.0\%) area adults have been told by a health care professional that they have cancer (non-skin). * The disease is more common in adults who are older (55+), and most common in those with the lowest incomes * It is more prevalent in women than men

## Ever Told Have Other Cancer* <br> (Total Sample)


*Among all adults, the proportion who reported that they were ever told by a doctor that they have another form of cancer (non-skin).

Told Have Other Cancer by Demographics

| Age |  | Education |  |
| :---: | :---: | :---: | :---: |
| 18-24 | 1.6\% | < High School | 5.0\% |
| 25-34 | 2.6\% | High School Grad | 8.4\% |
| 35-44 | 1.9\% | Some College | 7.2\% |
| 45-54 | 7.3\% |  |  |
| 55-64 | 13.6\% | College Grad | 9.3\% |
| 65-74 | 14.6\% | HH Income |  |
| 75+ | 20.6\% | <\$20,000 | 13.8\% |
| Gender |  | \$20,000-\$34,999 | 7.8\% |
| Male | $\square 5.5 \%$ | \$35,000-\$49,999 | 6.4\% |
| Female | 10.4\% | \$50,000-\$74,999 | 9.3\% |
| Race/Ethnicity |  | \$75,000+ | 6.4\% |
| White, non-Hispanic | 8.9\% |  |  |
| Black, non-Hispanic | 8.8\% | Region |  |
| Other | 2.1\% | Northwest | 7.5\% |
| Poverty Level |  | Northeast | 7.1\% |
| Below Poverty Line | 11.6\% | Southeast | 13.9\% |
| Above Poverty Line | $\square 7.7 \%$ | Southwest | 3.6\% |

## Management of Other Cancer

More than eight in ten (84.9\%) area adults with cancer (non-skin) received some source of information over the past year regarding managing their condition.

* The most common source used, by far, is physicians or other health professionals

Eight in ten ( $80.6 \%$ ) area adults with cancer believe the existing community programs and services help them manage their condition well.

Information Sources for
Managing Other Cancer

Extent to Which Existing Community Programs and
Services Help Manage Other Cancer


## Chronic Pain

Almost four in ten (38.2\%) Calhoun County adults suffer from chronic pain.

* Chronic pain is more prevalent among women then men, and more prevalent among adults living in the northwest region of the county compared to adults living elsewhere
* Having chronic pain is indirectly related to annual income


## Suffer from Chronic Pain



Suffer from Chronic Pain by Demographics


## Chronic Pain Management

> Almost half (46.7\%) of Calhoun County adults who suffer from chronic pain say the pain does not prevent them from doing their usual activities.

* However, chronic pain sufferers average 8.1 days per month where their pain prevents them from doing their usual activities; $15.3 \%$ say this occurs every day
> More than one-third (37.4\%) of adults who suffer from chronic pain say their pain is not well managed.


Q9.2: 2 During the past 30 days, for about how many days did your pain keep you from doing your usual activities, such as self-care, work, or recreation? ( $n=363$ );
Q9.3: Do you feel your pain is well managed? $(n=353)$

## Chronic Pain Management (Continued)

> Six in ten (60.5\%) area adults with chronic pain say they are satisfied with how their health care provider is helping them manage their pain; however, $39.5 \%$ are less than satisfied.
$>$ More than half ( $57.4 \%$ ) of those with chronic pain report myriad barriers to treating their pain, including having too many chronic conditions to manage, lack of health insurance, and lack of trust in providers.
$>$ Three in ten (31.9\%) say they do not seek treatment for their pain.


## Resiliency and Social Support

## Social and Emotional Support

> Seven in ten (71.3\%) Calhoun County adults receive the social and emotional support they need often or all the time, while $12.0 \%$ rarely or never receive it.

* Adults most likely to lack social and emotional support are aged 45 or older and/or live in the northwest region of the county
* Lacking social support is inversely related to education

Frequency of Needed Social and Emotional Support (Total Sample)

| $\square$ | Always |
| :--- | :--- |
| $\square$ | Often |
| $\square$ | Sometimes |
| $\square$ | Rarely |
| $\square$ | Never |



## Rarely/Never Get Needed Support by Demographics



Social and Emotional Support (Continued)
$>$ Receiving needed social and emotional support clearly has an impact on outcomes; adults who report receiving social and emotional support "often," "always," or even "sometimes" are far less likely to experience negative outcomes compared to adults who "rarely" or "never" receive social and emotional support.

|  | Frequency of Needed Social and Emotional Support |  |
| :---: | :---: | :---: |
|  | Always/Often/ Sometimes | Rarely/Never |
| Health status fair/poor | 18.0\% | 37.9\% |
| Poor physical health | 13.2\% | 24.3\% |
| Poor mental health | 18.8\% | 39.3\% |
| Activity limitation | 9.4\% | 26.8\% |
| Suffer from chronic pain | 36.2\% | 51.2\% |
| Marijuana use (past 30 days) | 18.3\% | 36.5\% |
| Current smoker | 22.4\% | 43.7\% |
| Mild to severe mental illness (Kessler 6) | 33.0\% | 52.8\% |
| Suicidal thoughts | 7.7\% | 15.1\% |

## Resiliency

> The two item Connor-Davidson Resiliency Scale (CD-RISC-2) was used to measure "adaptability" and ability to "bounce-back."
> The vast majority of area adults see themselves as being able to adapt when change occurs and being able to bounce back after illness, injury, or other hardships.


## Resiliency (Continued)

- Resiliency is a useful tool for studying people who have endured adverse experiences in life.
> When focusing on Calhoun County adults who report 4+ ACEs, it is clear that being resilient allows some people to avoid negative outcomes in adult life.
> The table to the right shows several negative outcomes and compares the resiliency scores of people who experienced the negative outcome with people who did not experience the negative outcome.
> Those who did not experience the negative outcome in adulthood had significantly higher resiliency scores - meaning they were more resilient and were better able to adapt and bounce back - than those who did experience the negative outcome in adulthood.
> In sum, adults who possess the resilient qualities of being able to adapt and bounce back are less likely to experience negative outcomes later in life despite enduring adverse experiences in childhood.

|  | Mean Resiliency Scores of Respondents with 4+ ACEs |  |  |
| :---: | :---: | :---: | :---: |
|  | No | Yes | $p$-value* |
| Health status fair/poor | 6.25 | 4.96 | . 000 |
| Poor physical health | 6.13 | 4.93 | . 000 |
| Poor mental health | 6.41 | 5.15 | . 000 |
| Activity limitation | 6.15 | 4.97 | . 000 |
| Mild to severe mental illness (Kessler 6) | 6.69 | 5.27 | . 000 |
| Suicidal thoughts | 6.19 | 4.98 | . 000 |
| Suicide attempts (among those who thought about suicide) | 5.18 | 3.77 | . 000 |

*Among respondents who reported 4+ ACEs, independent sample t-tests were used to compare the resiliency between those who experienced a negative outcome in adulthood with those who did not. $P$ values lower than .05 are considered to be statistically significant.

## Satisfaction with Life

Almost all (90.2\%) Calhoun County adults report being generally satisfied with their life.

* Adults least satisfied with their lives come from groups who are younger than 35 and/or live in the northern part of the county
- Satisfaction with life is also directly related to age and income



## Adverse Childhood Experiences

## Adverse Childhood Experiences (All 11 Items)

Almost half (48.3\%) of Calhoun County adults report living with parents who insulted them or put them down and more than one in five (22.4\%) say they were physically hurt by a parent.
$>$ Roughly three in ten area adults report living with household challenges such as mental illness or alcoholism.

| ACE Questions | Percent of Adults With Each ACE in Calhoun County |
| :---: | :---: |
| How often did a parent or adult in your home ever swear at you, insult you, or put you down? ( $\mathrm{n}=868$ ) | 48.3\% |
| Before age 18, how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Do not include spanking. Would you say... ( $n=875$ ) | 22.4\% |
| How often did anyone at least five years older than you or an adult, ever touch you sexually? ( $n=867$ ) | 15.2\% |
| How often did anyone at least five years older than you or an adult, try to make you touch them sexually? ( $\mathrm{n}=869$ ) | 10.7\% |
| How often did anyone at least five years older than you or an adult, force you to have sex? ( $n=876$ ) | 8.2\% |
| Were your parents separated or divorced? ( $n=878$ ) | 37.9\% |
| Did you live with anyone who was a problem drinker or alcoholic? ( $n=878$ ) | 31.2\% |
| Did you live with anyone who was depressed, mentally ill, or suicidal? ( $n=869$ ) | 28.0\% |
| How often did your parents or adults in your home ever slap, hit, kick, punch, or beat each other up? ( $\mathrm{n}=862$ ) | 20.3\% |
| Did you live with anyone who used illegal street drugs or abused prescription medication? ( $\mathrm{n}=872$ ) | 17.1\% |
| Did you live with anyone who served time, or was sentenced to serve time, in prison, jail, or other correctional facility? ( $\mathrm{n}=881$ ) | 13.7\% |

## Adverse Childhood Experiences (Continued)

Calhoun County adults experienced more adverse childhood events compared to adults across Michigan or the U.S.
$>$ Growing up, Calhoun County adults were far more likely to have lived with someone who had mental illness or substance use disorder compared to adults across Michigan or the U.S.
$\rightarrow$ Area adults were also more likely to have experienced sexual, physical, and emotional abuse growing up than adults across the state or the nation.

| ACE Questions | Percent of People With Each ACE |  |  |
| :---: | :---: | :---: | :---: |
|  | Calhoun County | Michigan | United States |
| How often did a parent or adult in your home ever swear at you, insult you, or put you down? | 48.3\% | 35.3\% | 34.4\% |
| Before age 18, how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Do not include spanking. Would you say...? | 22.4\% | 17.2\% | 17.9\% |
| How often did anyone at least five years older than you or an adult, ever touch you sexually, try to make you touch them sexually, or force you to have sex? | 16.1\% | 10.7\% | 11.6\% |
| Were your parents separated or divorced? | 37.9\% | 26.6\% | 27.6\% |
| Did you live with anyone who was a problem drinker or alcoholic, or who used illegal street drugs or abused prescription medication? | 36.0\% | 27.2\% | 27.6\% |
| Did you live with anyone who was depressed, mentally ill, or suicidal? | 28.0\% | 15.9.\% | 16.5\% |
| How often did your parents or adults in your home ever slap, hit, kick, punch, or beat each other up? | 20.3\% | 16.3\% | 17.5\% |
| Did you live with anyone who served time, or was sentenced to serve time, in prison, jail, or other correctional facility? | 13.7\% | 7.8\% | 7.9\% |

## Adverse Childhood Experiences (Continued)

> Three-fourths (75.7\%) of Calhoun County adults have experienced at least one adverse childhood event, and 26.7\% have experienced four or more.
$>$ There is a direct and linear relationship between the number of ACEs one experiences and negative outcomes later in life.
$>$ Particularly noticeable is the impact ACEs have on adult mental health.

## Number of Adverse Childhood Events



|  | Number of ACEs |  |  |
| :---: | :---: | :---: | :---: |
|  | None | 1-3 | 4 or More |
| Health status fair/poor | 14.8\% | 17.8\% | 27.1\% |
| Poor physical health | 11.7\% | 13.3\% | 17.5\% |
| Poor mental health | 8.6\% | 16.8\% | 35.9\% |
| Activity limitation | 5.1\% | 8.6\% | 20.1\% |
| Have asthma | 7.3\% | 12.1\% | 22.1\% |
| Suffer from chronic pain | 27.5\% | 35.0\% | 48.0\% |
| Marijuana use (past 30 days) | 9.2\% | 18.6\% | 36.3\% |
| Current smoker | 12.8\% | 23.9\% | 35.1\% |
| Current vaping | 2.0\% | 9.0\% | 23.6\% |
| Binge drinker | 9.5\% | 22.3\% | 31.2\% |
| Rarely/never receive social support | 8.7\% | 10.9\% | 16.4\% |
| Mild to severe mental illness (Kessler 6) | 14.3\% | 32.7\% | 55.7\% |
| Suicidal thoughts | 2.9\% | 8.2\% | 15.1\% |

## Prevalence of 4+ ACEs

Adults reporting four or more adverse childhood experiences tend to be under age 55 (especially under age 35), have less than a high school degree, and/or have incomes below \$50,000.


## Gambling

## 山lı

## Prevalence of Gambling

> Approximately one in five (22.3\%) Calhoun County adults have gambled in the past month.
$>$ Over half (55.2\%) of area adults say they never gamble, while $7.7 \%$ gamble once a week or more.

## Gambled in the Past 30 Days



Frequency of Gambling


## 山l.

## Prevalence of Gambling (Continued)

The prevalence of gambling within the past month is directly related to income.
$>$ Men are more likely to gamble than women.
$>$ Adults living in the northeast region of the county are more likely to gamble than adults living elsewhere.


APPENDIX

## Respondent Profile

## (山l.) Gender, Age, Race/Ethnicity and Section of Residence

|  | TOTAL | A. Northwest | B. <br> Northeast | C. <br> Southeast | D. <br> Southwest |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Gender | ( $\mathrm{n}=900$ ) | ( $\mathrm{n}=638$ ) | ( $\mathrm{n}=101$ ) | ( $\mathrm{n}=89$ ) | ( $\mathrm{n}=68$ ) |
| Male | 49.1\% | 47.5\% | 59.4\% | 45.0\% | 43.6\% |
| Female | 50.9\% | 52.5\% | 40.6\% | 55.0\% | 56.4\% |
| Age | ( $\mathrm{n}=900$ ) | ( $\mathrm{n}=638$ ) | ( $\mathrm{n}=101$ ) | ( $\mathrm{n}=89$ ) | ( $\mathrm{n}=68$ ) |
| 18 to 24 | 13.1\% | 10.4\% | 19.2\% | 16.8\% | 13.7\% |
| 25 to 34 | 16.9\% | 21.2\% | 8.5\% | 13.1\% | 10.7\% |
| 35 to 44 | 15.7\% | 18.2\% | 13.6\% | 10.4\% | 12.0\% |
| 45 to 54 | 16.3\% | 16.5\% | 18.8\% | 10.3\% | 20.7\% |
| 55 to 64 | 17.1\% | 15.6\% | 18.8\% | 21.8\% | 15.1\% |
| 65 to 74 | 12.8\% | 11.2\% | 12.6\% | 17.6\% | 15.2\% |
| 75 or Older | 8.1\% | 6.7\% | 8.5\% | 10.0\% | 12.7\% |
| Race/Ethnicity | ( $\mathrm{n}=875$ ) | ( $\mathrm{n}=619$ ) | ( $\mathrm{n}=98$ ) | ( $\mathrm{n}=88$ ) | ( $\mathrm{n}=67$ ) |
| White, non-Hispanic | 76.7\% | 73.0\% | 86.8\% | 66.1\% | 100.0\% |
| Black, non-Hispanic | 10.5\% | 13.0\% | 0.0\% | 19.9\% | 0.0\% |
| Other | 12.7\% | 14.1\% | 13.2\% | 14.0\% | 0.0\% |
| Region of Calhoun County | ( $\mathrm{n}=896$ ) | ( $\mathrm{n}=638$ ) | ( $\mathrm{n}=101$ ) | ( $\mathrm{n}=89$ ) | ( $\mathrm{n}=68$ ) |
| Northwest | 59.6\% | 100\% |  |  |  |
| Northeast | 18.0\% |  | 100\% |  |  |
| Southeast | 14.4\% |  |  | 100\% |  |
| Southwest | 8.0\% |  |  |  | 100\% |

## Marital Status and Number of Household Members

|  | TOTAL | A. <br> Northwest | B. <br> Northeast | C. <br> Southeast | D. <br> Southwest |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Marital Status | $(\mathrm{n}=890)$ | $(\mathrm{n}=631)$ | $(\mathrm{n}=100)$ | $(\mathrm{n}=89)$ | $(\mathrm{n}=67)$ |
| Married | $43.0 \%$ | $38.5 \%$ | $44.9 \%$ | $47.0 \%$ | $63.5 \%$ |
| Divorced | $14.3 \%$ | $15.3 \%$ | $17.2 \%$ | $9.5 \%$ | $8.1 \%$ |
| Widowed | $6.5 \%$ | $6.9 \%$ | $4.2 \%$ | $8.3 \%$ | $5.8 \%$ |
| Separated | $4.7 \%$ | $4.8 \%$ | $7.7 \%$ | $3.1 \%$ | $0.0 \%$ |
| Never married | $27.8 \%$ | $29.2 \%$ | $25.9 \%$ | $27.8 \%$ | $22.6 \%$ |
| A member of an unmarried couple | $3.7 \%$ | $5.3 \%$ | $0.0 \%$ | $4.3 \%$ | $0.0 \%$ |
| Number of Children Less Than Age 18 At | $(\mathrm{n}=898)$ | $(\mathrm{n}=636)$ | $(\mathrm{n}=101)$ | $(\mathrm{n}=89)$ | $(\mathrm{n}=68)$ |
| Home | $66.0 \%$ | $59.6 \%$ | $78.6 \%$ | $82.4 \%$ | $53.1 \%$ |
| None | $14.5 \%$ | $17.1 \%$ | $10.5 \%$ | $9.7 \%$ | $13.2 \%$ |
| One | $10.6 \%$ | $13.2 \%$ | $5.8 \%$ | $3.6 \%$ | $15.4 \%$ |
| Two | $8.9 \%$ | $10.1 \%$ | $5.1 \%$ | $4.3 \%$ | $18.3 \%$ |
| Three or more | $(\mathrm{n}=889)$ | $(\mathrm{n}=631)$ | $(\mathrm{n}=99)$ | $(\mathrm{n}=87)$ | $(\mathrm{n}=68)$ |
| Number of Adults and Children in Household | $18.4 \%$ | $18.9 \%$ | $18.8 \%$ | $19.1 \%$ | $11.1 \%$ |
| One | $33.0 \%$ | $27.2 \%$ | $39.9 \%$ | $47.2 \%$ | $34.2 \%$ |
| Two | $19.3 \%$ | $22.7 \%$ | $8.4 \%$ | $24.4 \%$ | $10.2 \%$ |
| Three | $14.1 \%$ | $15.8 \%$ | $14.8 \%$ | $4.9 \%$ | $16.5 \%$ |
| Four | $9.1 \%$ | $8.4 \%$ | $14.1 \%$ | $1.7 \%$ | $16.4 \%$ |
| Five | $6.2 \%$ | $7.0 \%$ | $4.0 \%$ | $2.7 \%$ | $11.6 \%$ |
| More thanfive  |  |  |  |  |  |

## Education and Employment Status

|  | TOTAL | A. Northwest | B. <br> Northeast | C. Southeast | D. Southwest |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Education | ( $\mathrm{n}=893$ ) | ( $\mathrm{n}=634$ ) | ( $\mathrm{n}=100$ ) | ( $\mathrm{n}=87$ ) | ( $\mathrm{n}=68$ ) |
| Never attended school, or only Kindergarten | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% |
| Grades 1-8 (Elementary) | 0.3\% | 0.3\% | 0.0\% | 1.2\% | 0.0\% |
| Grades 9-11 (Some high school) | 8.9\% | 8.8\% | 8.5\% | 13.0\% | 3.1\% |
| Grade 12 or GED (High school graduate) | 37.6\% | 39.2\% | 28.5\% | 46.4\% | 29.0\% |
| College 1 year to 3 years (Some college) | 32.9\% | 31.9\% | 35.2\% | 28.3\% | 45.3\% |
| College 4 years or more (College graduate) | 20.2\% | 19.8\% | 27.8\% | 11.0\% | 22.6\% |
| Employment Status | ( $\mathrm{n}=894$ ) | ( $\mathrm{n}=632$ ) | ( $\mathrm{n}=101$ ) | ( $\mathrm{n}=89$ ) | ( $\mathrm{n}=68$ ) |
| Employed for wages | 46.7\% | 49.5\% | 43.8\% | 45.0\% | 37.7\% |
| Self-employed | 6.9\% | 5.6\% | 14.1\% | 2.7\% | 8.5\% |
| Out of work for a year or more | 3.6\% | 3.8\% | 3.6\% | 1.4\% | 6.3\% |
| Out of work for less than a year | 5.0\% | 4.9\% | 2.5\% | 7.1\% | 8.6\% |
| A homemaker | 2.4\% | 3.3\% | 0.9\% | 2.2\% | 0.0\% |
| A student | 2.1\% | 2.2\% | 3.0\% | 0.8\% | 1.5\% |
| Retired | 20.9\% | 17.8\% | 21.7\% | 25.8\% | 31.3\% |
| Unable to work | 12.3\% | 13.0\% | 10.6\% | 14.9\% | 6.0\% |

## Household Income, Poverty Status, Home Ownership,

 and Gender Identifier|  | TOTAL | A. Northwest | B. <br> Northeast | C. Southeast | D. Southwest |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Household Income | ( $\mathrm{n}=763$ ) | ( $\mathrm{n}=540$ ) | ( $\mathrm{n}=85$ ) | ( $\mathrm{n}=77$ ) | ( $\mathrm{n}=59$ ) |
| Less than \$10,0000 | 4.1\% | 4.5\% | 3.1\% | 6.6\% | 0.0\% |
| \$10,000 to less than \$15,000 | 3.9\% | 3.9\% | 0.9\% | 7.1\% | 5.6\% |
| \$15,000 to less than \$20,000 | 7.1\% | 7.2\% | 11.9\% | 4.4\% | 1.0\% |
| \$20,000 to less than \$25,000 | 13.4\% | 14.7\% | 7.7\% | 15.6\% | 13.4\% |
| \$25,000 to less than \$35,000 | 9.7\% | 11.1\% | 6.6\% | 8.0\% | 9.3\% |
| \$35,000 to less than \$50,000 | 16.5\% | 18.3\% | 8.0\% | 24.4\% | 9.8\% |
| \$50,000 to less than \$75,000 | 15.9\% | 15.4\% | 17.5\% | 16.1\% | 16.2\% |
| \$75,000 or more | 29.3\% | 25.0\% | 44.4\% | 17.8\% | 44.6\% |
| Poverty Status | ( $\mathrm{n}=757$ ) | ( $\mathrm{n}=536$ ) | ( $\mathrm{n}=84$ ) | ( $\mathrm{n}=76$ ) | ( $\mathrm{n}=59$ ) |
| Income under poverty line | 16.1\% | 17.5\% | 13.0\% | 14.4\% | 14.8\% |
| Income over poverty line | 83.9\% | 82.5\% | 87.0\% | 85.6\% | 85.2\% |
| Home Ownership | ( $\mathrm{n}=885$ ) | ( $\mathrm{n}=628$ ) | ( $\mathrm{n}=100$ ) | ( $\mathrm{n}=86$ ) | ( $\mathrm{n}=67$ ) |
| Own | 70.3\% | 66.3\% | 76.0\% | 73.7\% | 79.9\% |
| Rent | 26.9\% | 30.1\% | 22.4\% | 23.9\% | 20.1\% |
| Other Arrangement | 2.8\% | 3.6\% | 1.6\% | 2.4\% | 0.8\% |
| Transgender | ( $\mathrm{n}=887$ ) | ( $\mathrm{n}=630$ ) | ( $\mathrm{n}=100$ ) | ( $\mathrm{n}=85$ ) | ( $\mathrm{n}=68$ ) |
| Transgender, male to female | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% |
| Transgender, female to male | 0.4\% | 0.0\% | 2.3\% | 0.0\% | 0.0\% |
| Transgender, gender nonconforming | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% |
| Not transgender | 99.6\% | 100.0\% | 97.7\% | 100.0\% | 100.0\% |


[^0]:    *Heavy drinking is defined as adult consuming an average of more than seven (if female) or fourteen drinks (if male) per week.

