

COMMUNITY HEALTH NEEDS ASSESSMENT

**COMMUNITY HEALTH STATUS ASSESSMENT
2015**





ACKNOWLEDGMENTS

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Message from Johnson County Public Health Director

To all of Johnson County,

It is with great pleasure I present to you the Johnson County Community Health Needs Assessment. These documents, a combination of several assessments, are the result of many hours of hard work by our staff, students and community members. I hope you will find them useful and that you will refer to them frequently. They are intended as a community resource to help stimulate discussion, identify needs, develop strategies and plan for and track improvements. Indeed, if this were a hard copy document, our wish would be that your copy ends up wrinkled, marked up, dog-eared and lying open on your desk with sticky notes on it and that your email outbox would have messages of feedback to us in order to improve future editions.

Indicators of health remain much the same. How we look at them and how we approach improving the health of those who live in Johnson County is evolving. As we move in to the Health Improvement Planning process, we need to dig deeper and keep asking “why” and “what if”. Our hope is that we will move upstream as far as possible to address factors influencing health. This will require much thoughtful, open and honest discussion of the forces affecting health and what is needed to change them. On behalf of the Board of Health and all of the staff at Johnson County Public Health, we look forward to strengthening past and current partnerships as well as forming new and innovative ones to effectively and efficiently protect and promote the health of all Johnson County residents.

Thank you,

Douglas E. Beardsley, MPH
Director



JOHNSON COUNTY PUBLIC HEALTH

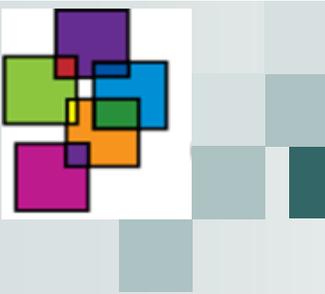


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EXECUTIVE SUMMARY

Introduction

Improving the health of Johnson County residents is a shared responsibility between health care providers, public health officials, public/private organizations, and individual citizens who contribute to the overall well-being of our county. No single person, organization, or government body can make a community healthier. Sharing ideas, building relationships, and focusing on our mission and vision are critical components to improving health outcomes.

One way to understand the health needs of our community is to conduct a comprehensive needs assessment. This health needs assessment provides the foundation for community planning and information to policy-makers and funders to base improvement efforts.

To guide the assessment, the *Mobilizing for Action through Planning and Partnerships* (MAPP) model for community health planning, developed through a cooperative agreement between the National Association of County & City Health Officials (NACCHO) and the Centers for Disease Control & Prevention (CDC), was used.

The purpose of the assessment is to provide an overview of the health of Johnson County residents, provide information to community partners in strategic planning and funding proposals, and to provide the basis for the *2015 Johnson County Health Improvement Plan*.

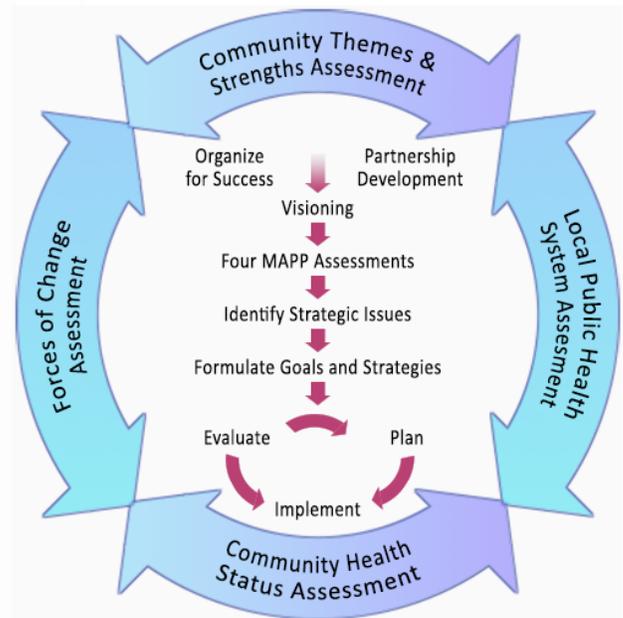
Methodology

Johnson County Public Health conducted the 2015 Community Health Needs Assessment and Health Improvement Plan (CHNA-HIP) using the MAPP model. MAPP is “a community-driven strategic planning process that helps communities apply strategic thinking to prioritize public health issues and identify resources to address them” (NACCHO).

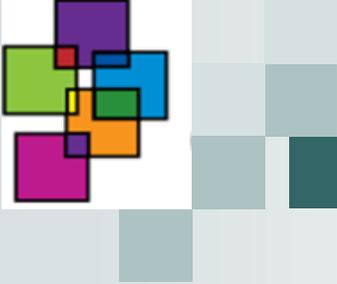
EXECUTIVE SUMMARY

The MAPP process has six phases:

1. Organize for Success/Partnership Development – community members and agencies form a partnership and learn about the MAPP process
2. Visioning – create a common understanding of what a community would like to achieve
3. Four MAPP Assessments – qualitative and quantitative data are gathered to provide a comprehensive picture of health in the community
4. Identify Strategic Issues – the data are analyzed to uncover the underlying themes that need to be addressed in order for a community to achieve its vision
5. Formulate Goals and Strategies – the community identifies goals it wants to achieve and strategies it wants to implement related to strategic issues
6. Action Cycle – the community implements and evaluates action plans to meet goals, address strategic issues and achieve the community's vision



Johnson County Public Health (JCPH) launched the 2015 CHNA-HIP in January 2015 by organizing a steering committee of leaders from a wide array of organizations and community partners. Following the steering committee organization in Phase One of the MAPP process, mission and vision statements were developed through an internal JCPH work group using a consensus workshop during Phase Two. Internal staff along with three MPH students from the University of Iowa completed MAPP Phase Three which includes four assessments. In the first assessment, the CHNA, quantitative data analyzing over 100 indicators was collected from the following categories; demographics, social and economic factors, physical environment, clinical care, health behaviors, health outcomes, and social and mental health. The second assessment, Community Themes and Strengths Assessment, was conducted to identify the community's thoughts, experiences, opinions, and concerns regarding the health needs of Johnson County. Surveys, focus groups, and public feedback boards were used to collect and analyze qualitative data from residents. A survey sub-committee developed a 50 question survey with 793 electronic and hard copy surveys completed. Eight focus groups were conducted with specific under-represented citizen groups.

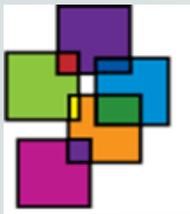


EXECUTIVE SUMMARY

Public feedback boards were displayed at eight different agencies working with underrepresented members of the community to help elicit community opinions and comments about the most important factors for a healthy community. The third assessment, Forces of Change Assessment, was conducted with local leaders and elected officials to identify all the forces and associated opportunities and threats that can affect the community and local public health system. The last assessment, Local Public Health System Assessment, was completed with steering committee members, community partners, and public health staff to measure how well the local public health system delivers the ten essential public health services as determined by CDC. Phases Four, Five, and Six will guide the completion of the Health Improvement Plan.

Summary

Comparison of Johnson County data was made to State and national data when available, along with analysis of each indicator when applicable. Each of the qualitative assessments has a full description of the process and corresponding analysis. The full CHNA report can be accessed through our web site www.johnson-county.com/CH. Johnson County Public Health welcomes your review of the data and your corresponding feedback to make this CHNA as useful as possible. Each year we will review the report and make updates as needed. We will conduct our next full assessment in 2020.



SOCIAL DETERMINANTS OF HEALTH

Social Determinants of Health Overview:

In addition to individual lifestyle behaviors, health is determined by the “circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness” (WHO 2015). While it is important to have proper nutrition and adequate exercise, to avoid smoking, and to stay on top of preventive exams, having access to social and economic opportunities, safe schools and workplaces, clean water, and positive relationships can play a big part in determining the health of a community (Healthy People 2020). These factors are considered social determinants of health.



Using a “place-based” conceptual framework, Healthy People 2020 has organized the social determinants of health into five key areas, including economic stability, education, social and community context, neighborhood and built environment, and health and healthcare. Each key area has a series of underlying critical factors, which are outlined in the table below.

Source: Healthy People 2020

Table 1. Social Determinants of Health Key Areas and Underlying Critical Factors

Economic Stability	Education	Social and Community Context	Neighborhood and Built Environment	Health and Health Care
<ul style="list-style-type: none"> Poverty Employment Housing stability Food security 	<ul style="list-style-type: none"> Early childhood education and development Language and literacy High school graduation Enrollment in higher education 	<ul style="list-style-type: none"> Social cohesion Civic participation Perceptions of equity and discrimination Incarceration and institutionalization 	<ul style="list-style-type: none"> Access to healthy foods Housing quality Crime and violence Environmental conditions 	<ul style="list-style-type: none"> Health literacy Access to health care Access to primary care

Source: Healthy People 2020

Determinants Most Relevant for Johnson County:

Using the top 10 causes of death, it is possible to identify the most relevant social determinants of health to improve health outcomes in Johnson County. The top causes of death include cancer, heart disease, chronic respiratory disease, unintentional injury, stroke, Alzheimer’s disease, flu and pneumonia, suicide, infective and parasitic infection, and diabetes mellitus. While some of these causes of death are related to unpreventable factors such as age, many can be explained by the social determinants of health.



SOCIAL DETERMINANTS OF HEALTH

Table 2: Johnson County Top 10 Causes of Death and Social Determinants of Health

Cause of Death	Risk Factors	Relevant Critical Factors	Key Area(s)
Cancer	Tobacco/alcohol use, inactivity, poor nutrition, obesity, UV exposure, age	Poverty, Employment, Food Security, Access to Healthy Food, Environmental Conditions, Crime and Violence	Economic Stability, Neighborhood and Built Environment
Heart Disease	Tobacco use, high cholesterol, high blood pressure, diabetes, obesity, inactivity	Poverty, Employment, Food Security, Access to Healthy Food, Environmental Conditions, Crime and Violence	Economic Stability, Neighborhood and Built Environment
Chronic Respiratory Disease	Tobacco use, asbestos, dust mites, air pollution, cockroach allergens, mold, pets	Housing Quality, Environmental Conditions	Neighborhood and Built Environment
Unintentional Injury	Individual behaviors, physical environment	High School Graduation, Enrollment in Higher Education, Environmental Conditions	Education, Neighborhood and Built Environment
Stroke	Tobacco use, heavy alcohol use, substance abuse, inactivity, obesity, diabetes, high cholesterol, high blood pressure	Poverty, Employment, Food Security, Access to Healthy Food, Environmental Conditions, Crime and Violence	Economic Stability, Neighborhood and Built Environment
Alzheimer's Disease	Old age, family history, heredity, lifestyle	Access to Health Care and Primary Care	Health and Health Care
Influenza and Pneumonia	Not vaccinating, old and young, immunocompromised	Access to Health Care, Health Literacy	Health and Health Care
Suicide	Mental health conditions including depression, substance abuse, serious or chronic health condition and/or pain	Poverty, Employment, Food Security, Housing Stability, Crime and Violence, Social cohesion, Civic participation, Perceptions of equity and discrimination, Incarceration and institutionalization	Education, Economic Stability, Social and Community Context
Infective and Parasitic Infection	Dirty water, uncooked foods, coming into contact with an infected person, men who have sex with men	Access to Health Care, Health Literacy	Health and Health Care
Diabetes Mellitus	Obesity, increasing age, inactivity, impaired glucose tolerance, African American, American Indian, Asian/Pacific islander	Poverty, Employment, Food Security, Access to Healthy Food, Environmental Conditions, Crime and Violence	Economic Stability, Neighborhood and Built Environment



SOCIAL DETERMINANTS OF HEALTH

Economic stability, specifically employment, is extremely important in Johnson County, as many of the conditions in the top 10 causes of death can be prevented through proper nutrition and access to safe exercise facilities either indoor or outdoor. Education and economic stability often go hand-in-hand as well, since education directly relates to income and employment. Being low-income or unemployed may result in living in more dangerous neighborhoods, with less access to health care or healthy food.

The neighborhood and built environment in which a person lives can determine their access to healthy foods and quality homes in safe neighborhoods. Healthy food access can directly reduce the risk of cancer, heart disease, diabetes, and stroke. All of these conditions are on Johnson County's top 10 causes of death. Having access to safe homes that are free of asbestos and radon can also help to reduce the risk of chronic respiratory diseases such as lung cancer, asthma, and COPD. Additionally, the environmental conditions of the neighborhood including crime and violence can influence the likelihood that community members will exercise or leave their homes to engage in local events. Lack of activity can impact risk of cancer, heart disease, diabetes, stroke, and depression. Ensuring health equity and equal treatment is a priority to eliminate any disparities that may exist in the community, thus improving social cohesion and the sense of community. Improved social cohesion can help to reduce the risk of depression and suicide.

Access to health care and health literacy are of the utmost importance when it comes to understanding the causes of disease, treatments available, and vaccines that can aid in prevention. While some illnesses may improve without treatment, there are types that require attention. Seeking (and receiving) treatment for infection and parasitic disease is important to avoid death from serious complications. Also, appropriate vaccination can significantly reduce the risk of death from influenza or pneumonia.

Access to health care and primary care is also important to remain current on preventive screenings to reduce death from cancer. Primary care is also an important avenue for suicide prevention, as having a trusting relationship with a medical professional may result in treatment prior to the time of crisis and suicide. Primary care is also important for maintenance of any chronic condition such as high blood pressure, high cholesterol, heart disease, or diabetes. It is possible to manage these conditions and still live a long and fulfilling life. Regular checkups are vital, however, to ensure that complications do not arise.



INDICATORS OVERVIEW

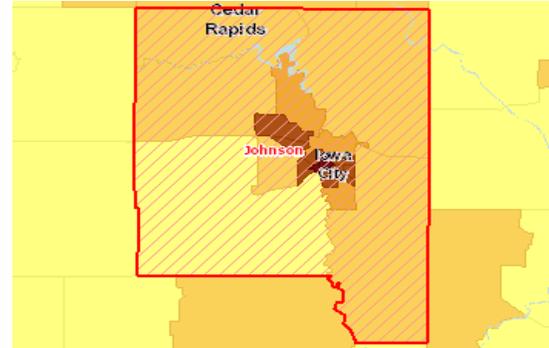
Health Indicators	Analysis	Key Disparities
Access to Health Care	<ul style="list-style-type: none"> ➤ The percentage of uninsured population increased by 1.1% in Johnson County from 2008 to 2012 	<ul style="list-style-type: none"> ➤ Hispanics and American Indians ➤ High requests for dental care at the Free Medical Clinic
Alzheimer's Disease	<ul style="list-style-type: none"> ➤ The 6th leading cause of death ➤ Approximately 8.3% of Medicare beneficiaries have dementia 	<ul style="list-style-type: none"> ➤ Elderly population
Cancer	<ul style="list-style-type: none"> ➤ The number 1 leading cause of death ➤ Decreased lung cancer death rates 	<ul style="list-style-type: none"> ➤ African Americans and Hispanics ➤ Males - higher cancer mortality rate
Cardiovascular Diseases	<ul style="list-style-type: none"> ➤ Second leading cause of death ➤ Decrease in deaths due to coronary heart diseases 	<ul style="list-style-type: none"> ➤ Males – higher mortality rate due to coronary heart disease
Chronic Obstructive Pulmonary Diseases	<ul style="list-style-type: none"> ➤ Third leading cause of death ➤ Increased chronic obstructive pulmonary disease mortality rate 	<ul style="list-style-type: none"> ➤ Higher mortality rates for males ➤ Adults age 45 years and older
Diabetes	<ul style="list-style-type: none"> ➤ Increased diabetes mortality rate 	<ul style="list-style-type: none"> ➤ African American and Hispanics/Latinos
Environmental Quality	<ul style="list-style-type: none"> ➤ Lower average daily ambient ozone concentration ➤ Higher average indoor radon level 	<ul style="list-style-type: none"> ➤ Adult with work related exposure to lead
Infectious Diseases	<ul style="list-style-type: none"> ➤ Increase in new HIV infections ➤ Higher Chlamydia rates 	<ul style="list-style-type: none"> ➤ Men who have sex with men ➤ African Americans
Injury and Violence	<ul style="list-style-type: none"> ➤ Lower motor vehicle crashes ➤ Alcohol use main factor in injury and violence 	<ul style="list-style-type: none"> ➤ Elderly population ➤ Higher unintentional injury rate for males
Maternal, Child and Adolescent Health	<ul style="list-style-type: none"> ➤ Decreasing rates of teen births ➤ Decreased pregnancy termination rates 	<ul style="list-style-type: none"> ➤ African Americans – higher infant mortality rate
Mental Health	<ul style="list-style-type: none"> ➤ Lower suicide rates ➤ Identified as one of the biggest health problems in the county 	<ul style="list-style-type: none"> ➤ High suicide rates for males & those 25-55 ➤ Low income persons
Substance Abuse	<ul style="list-style-type: none"> ➤ High rate of alcohol abuse ➤ Marijuana – most reported illicit drug used by youth 	<ul style="list-style-type: none"> ➤ Low income persons ➤ Youth
Stroke	<ul style="list-style-type: none"> ➤ Decreased stroke mortality rate 	<ul style="list-style-type: none"> ➤ Higher stroke mortality rate for females
Weight	<ul style="list-style-type: none"> ➤ 60% adults are overweight ➤ High rate of fast food restaurants 	<ul style="list-style-type: none"> ➤ Higher rates for males ➤ Non-Hispanic Whites



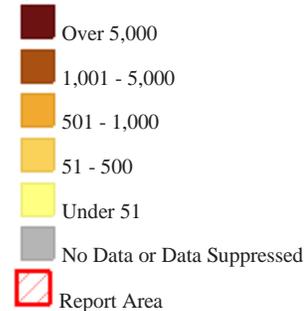
DEMOGRAPHIC CHARACTERISTICS OF JOHNSON COUNTY

Total Population:

- According to the U.S. Census Bureau, an estimated total of 139,155 people lived in the 614.04 square mile area of Johnson County in 2013.
- This represents a 6.3% increase in population from 2010.
- The Population density for Johnson County, estimated at 213.1 persons per square mile, is greater than the national average population density of 87.4 persons per square mile.



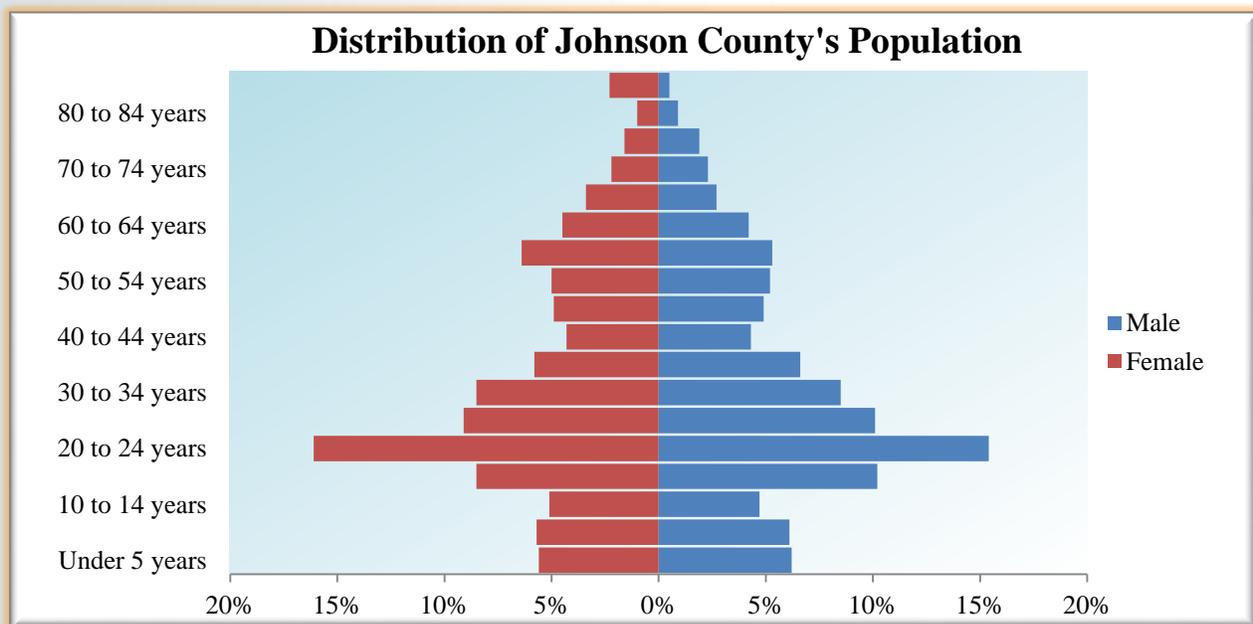
Population, Density (Persons per Sq. Mile) by Tract, ACS 2008-12



Report Area	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
Johnson County	139,155	614.04	213.1
Iowa	3,090,416	55,857.13	54.5
United States	316,128,839	3,531,905.43	87.4

Age and Sex

- Among Johnson County residents, the largest age group is between the age of 20 and 24.
- In 2013, 49.7% of the population was male and 50.3% was female.



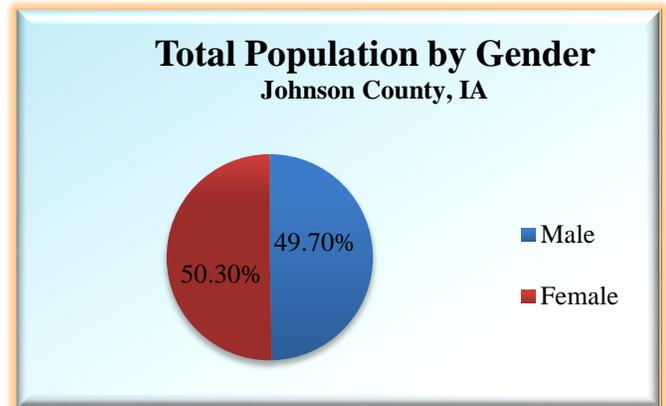
Source: U.S. Census Bureau, 2013, Community Commons –Johnson County



DEMOGRAPHIC CHARACTERISTICS

Total Population by Gender

Report Area	Male	Female	Percent Male	Percent Female
Johnson County	69,119	70,036	49.7%	50.3%
Iowa	1,528,770	1,561,646	49.5%	50.5%
United States	155,627,698	160,501,141	49.2%	50.8%

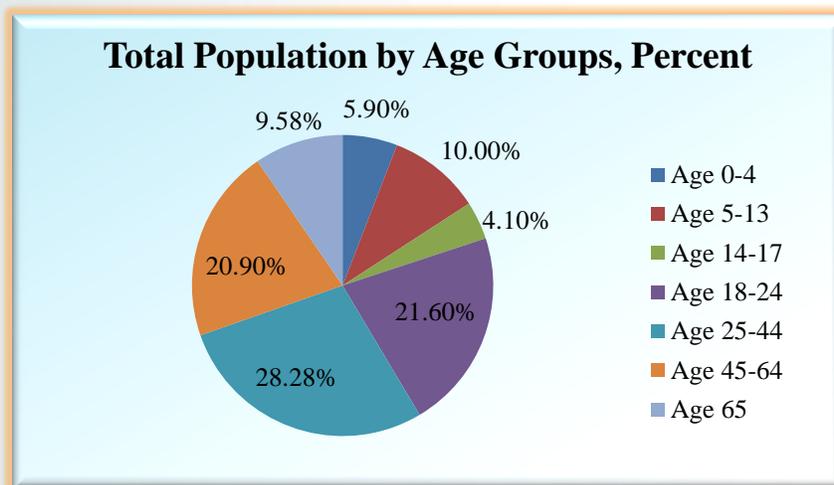


Total Population by Age Groups, Total

Report Area	Age 0-4	Age 5-13	Age 14-17	Age 18-24	Age 25-44	Age 45-64	Age 65 and Over
Johnson County	8,515	13,921	5,638	29,283	39,358	29,113	13,327
Iowa	194,726	366,965	162,341	317,316	752,242	815,947	480,879
United States	19,868,088	37,073,596	16,644,188	31,457,653	83,297,277	83,083,963	44,704,074

Total Population by Age Groups, Percent

Report Area	Age 0-4	Age 5-13	Age 14-17	Age 18-24	Age 25-44	Age 45-64	Age 65
Johnson County	5.9%	10.0%	4.1%	21.6%	28.28%	20.9%	9.58%
Iowa	6.3%	11.87%	5.25%	10.27%	24.34%	26.4%	15.56%
United States	6.28%	11.73%	5.27%	10.0%	26.35%	26.28%	14.14%





DEMOGRAPHIC CHARACTERISTICS

Race/Ethnic Distribution -

- The racial and ethnic background of Johnson County is predominantly white (85.8%).
- The numbers of several minority populations are small (14.2%).
- Asians are the largest minority group in Johnson County (5.9%).

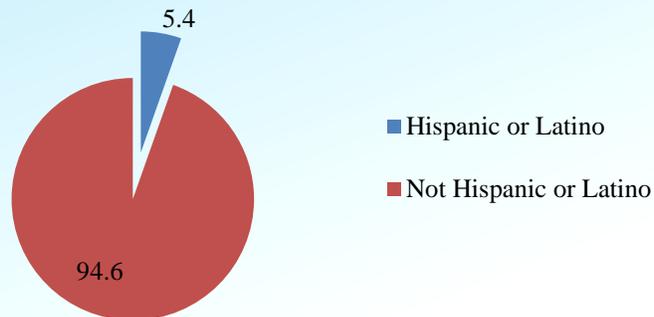
Total Population by Race/Ethnicity, Total

Report Area	White	Black	Asian	Native American / Alaska Native	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Races	Hispanic or Latino	Not Hispanic or Latino
Johnson County	119,485	8,007	8,253	105	243	1,397	1,665	7,510	131,645
Iowa	2,823,908	102,430	63,431	7,630	1,640	38,541	52,836	166,925	2,923,491
United States	232,969,901	39,919,371	16,012,120	2,521,131	525,750	14,811,025	9,369,541	53,986,412	262,142,427

Total Population by Race/Ethnicity, Percent

Report Area	White	Black	Asian	Native American / Alaska Native	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Races	Hispanic or Latino	Not Hispanic or Latino
Johnson County	85.8%	5.8%	5.9%	0.1%	0.2%	1.0%	1.2%	5.4%	94.6%
Iowa	91.4%	3.3%	2.1%	0.2%	0.1%	1.2%	1.7%	5.4%	94.6%
United States	73.7%	12.6%	5.1%	0.8%	0.2%	4.7%	3.0%	17.1%	82.9%

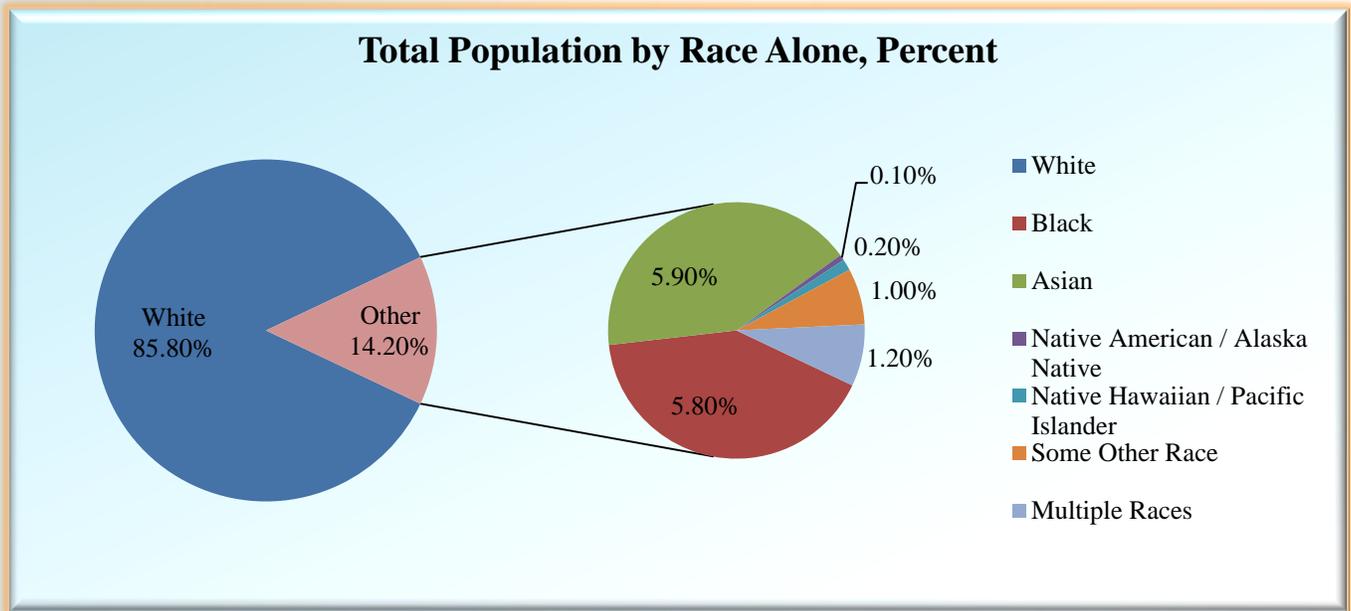
Total Population by Ethnicity Alone, Percent



Source: U.S. Census Bureau, 2000, 2010



DEMOGRAPHIC CHARACTERISTICS



Change in Total Population:

- According to the U.S. Census Bureau, there were 139,155 people living in Johnson County in 2013, which is a 25.4% increase in population from 2000.
- The population growth of Johnson County was nearly five times the growth of Iowa (5.6%) and two times the growth of the United States (12.3%).
- Johnson County experienced a population growth over six percent between 2010 and 2013.

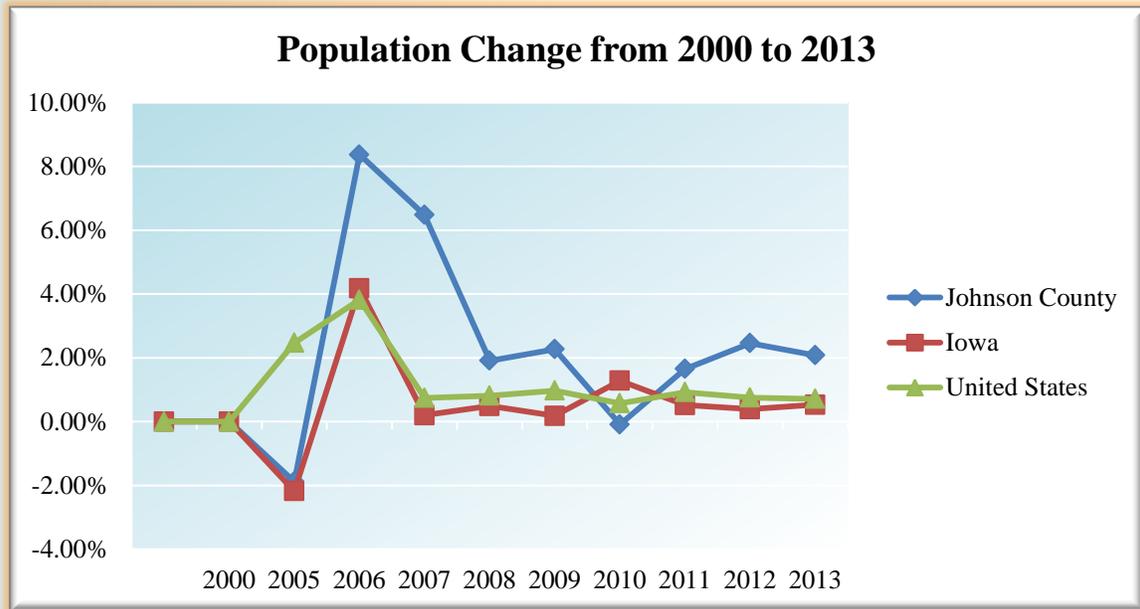
Population Change from 2000 to 2013

Year	Johnson County		Iowa		United States	
	Total Population	Percent Change	Total Population	Percent Change	Total Population	Percent Change
2000	111,006	.	2,926,324	.	281,421,906	.
2005	108,919	-1.88%	2,862,541	-2.18%	288,378,137	2.47%
2006	118,038	8.37%	2,982,085	4.18%	299,398,485	3.82%
2007	125,692	6.48%	2,988,047	0.20%	301,621,159	0.74%
2008	128,094	1.91%	3,002,557	0.49%	304,059,728	0.81%
2009	131,005	2.27%	3,007,857	0.18%	307,006,556	0.97%
2010	130,882	-0.09%	3,046,355	1.28%	308,745,538	0.57%
2011	133,038	1.65%	3,062,309	0.52%	311,591,919	0.92%
2012	136,317	2.46%	3,074,186	0.39%	313,914,040	0.75%
2013	139,155	2.08%	3,090,416	0.53%	316,128,839	0.71%

Source: U.S. Census Bureau, 2000, 2010

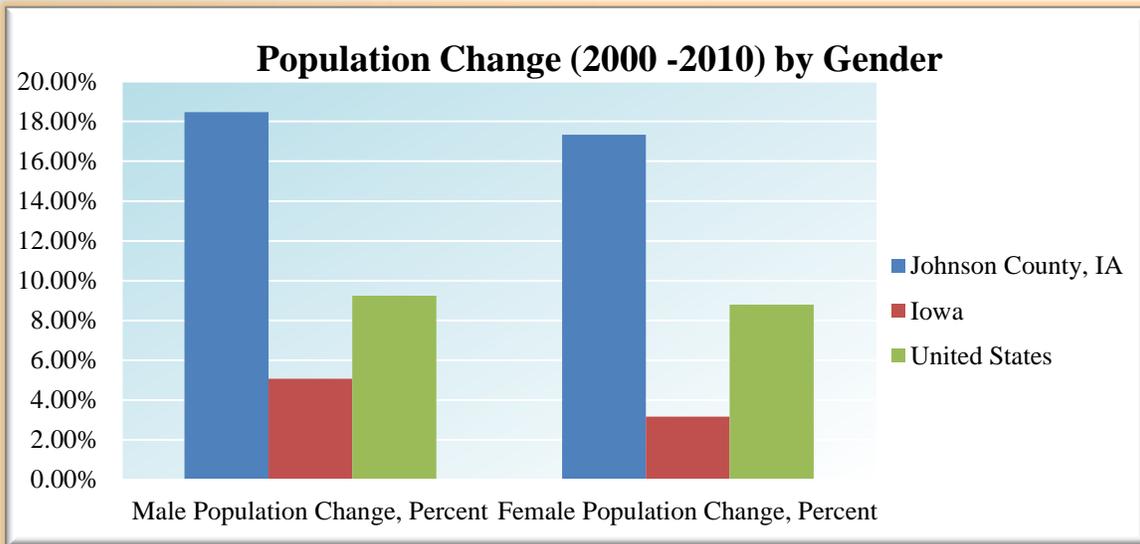


DEMOGRAPHIC CHARACTERISTICS



Population Change (2000-2010) by Gender

Report Area	Male Population Change, Total	Male Population Change, Percent	Female Population Change, Total	Female Population Change, Percent
Johnson County	10,208	18.47%	9,668	17.34%
Iowa	72,804	5.07%	47,227	3.17%
United States	12,757,602	9.24%	12,613,855	8.8%



Source: U.S. Census Bureau, 2000, 2010, Community Commons - Johnson County



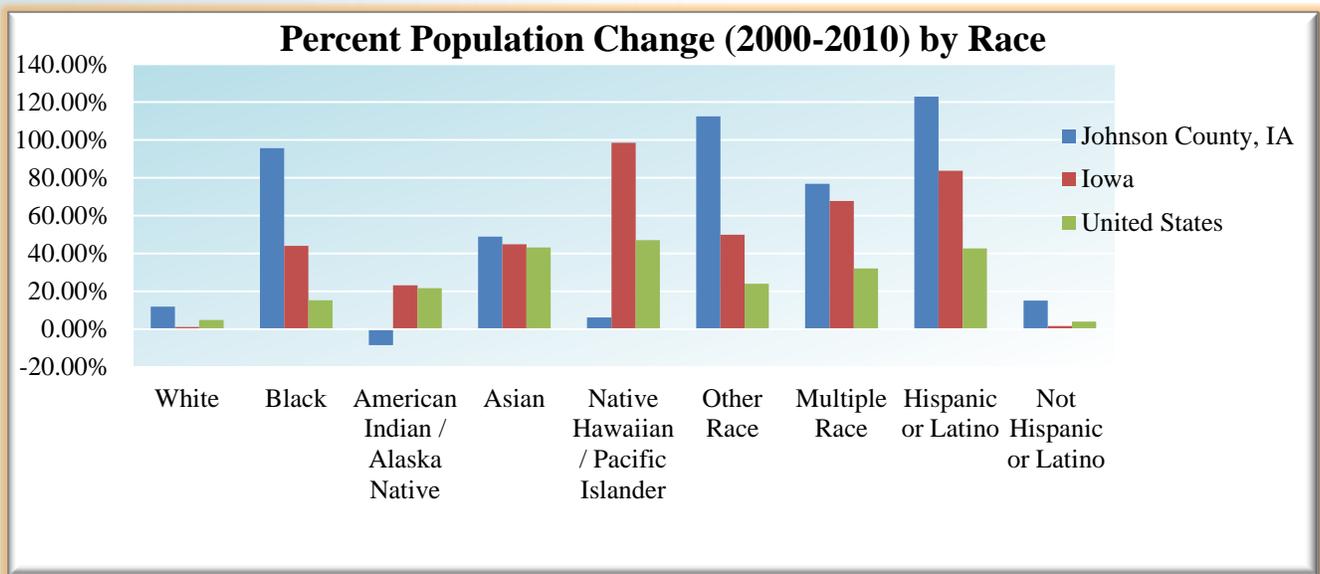
DEMOGRAPHIC CHARACTERISTICS

Total Population Change (2000-2010) by Race/Ethnicity

Report Area	White	Black	American Indian / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Other Race	Multiple Race	Hispanic or Latino	Not Hispanic or Latino
Johnson County	12,032	3,082	-26	2,241	3	1,256	1,288	3,419	16,457
Iowa	32,921	27,295	2,095	16,459	994	18,712	21,555	69,071	50,960
United States	10,372,322	5,142,739	504,122	4,401,714	140,925	3,682,144	2,167,760	15,098,149	10,153,011

Percent Population Change (2000-2010) by Race/Ethnicity

Report Area	White	Black	American Indian / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Other Race	Multiple Race	Hispanic or Latino	Not Hispanic or Latino
Johnson County	12.03%	95.63%	-8.31%	48.95%	6.25%	112.54%	76.8%	122.94%	15.21%
Iowa	1.2%	44.13%	23.31%	44.93%	98.51%	50.01%	67.83%	83.75%	1.79%
United States	4.89%	15.27%	21.65%	43.27%	47.12%	24.03%	32.16%	42.7%	4.09%



Source: U.S. Census Bureau, 2000, 2010, Community Commons - Johnson County



HOUSING AND FAMILY HOUSEHOLD CHARACTERISTICS

Housing

- According to the United States Census Bureau, in 2010 94.2% of housing was occupied, with 59.4% owner occupied and 40.6% renter occupied.
- Johnson County has a lower proportion of owner occupied housing as well as total housing that is vacant compared to Iowa and United States.

Housing Characteristics, 2010

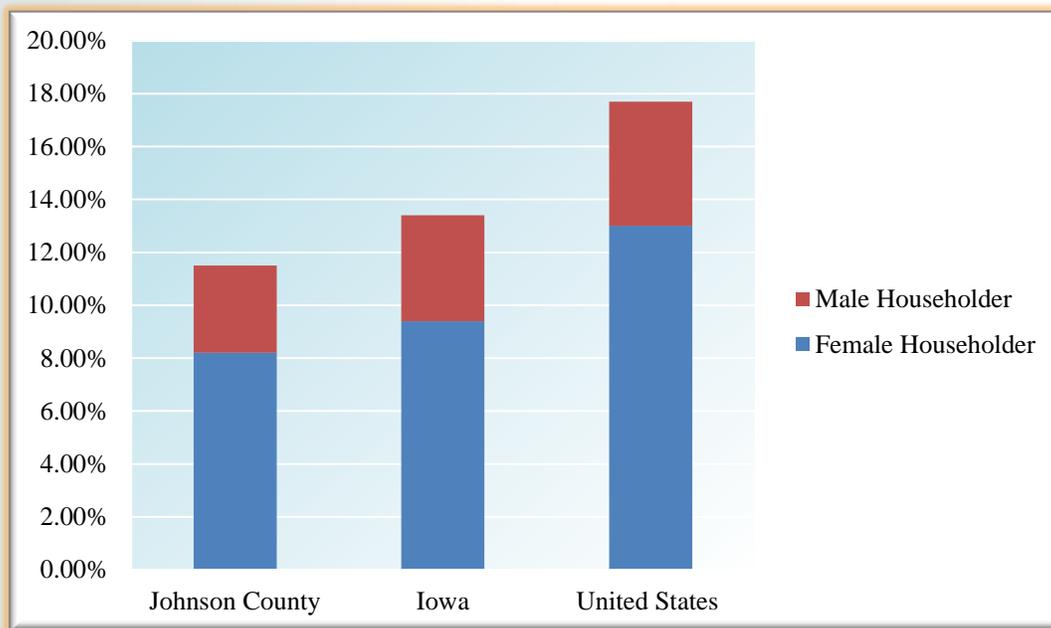
	Johnson County		Iowa		United States	
	Number	Percent	Number	Percent	Number	Percent
Total Housing	55,967		1,336,417		131,704,730	
Occupied Housing	52,715	94.2	1,221,576	91.4	116,716,292	88.6
Owner-Occupied	31,299	59.4	880,635	72.1	75,986,074	65.1
Renter-Occupied	21,416	40.6	340,941	27.9	40,730,218	34.9
Vacant Housing	3,252	5.8	114,841	8.6	14,988,438	11.4
For Rent	1,173	36.1	31,812	27.7	4,137,567	27.6
For Sale	810	24.9	18,405	16.0	1,896,796	12.7

Source: U.S. Census Bureau, 2010

Family Household

- Among family households in Johnson County, 11.5% are single parent households, with 8.2% headed by female only and 3.3% headed by male only.
- Johnson County has a lower proportion of single parent households than Iowa and United States.

Single Parent Households by Sex, 2009-2013



Source: U.S. Census Bureau, 2009-2013



HOUSING AND FAMILY HOUSEHOLD CHARACTERISTICS

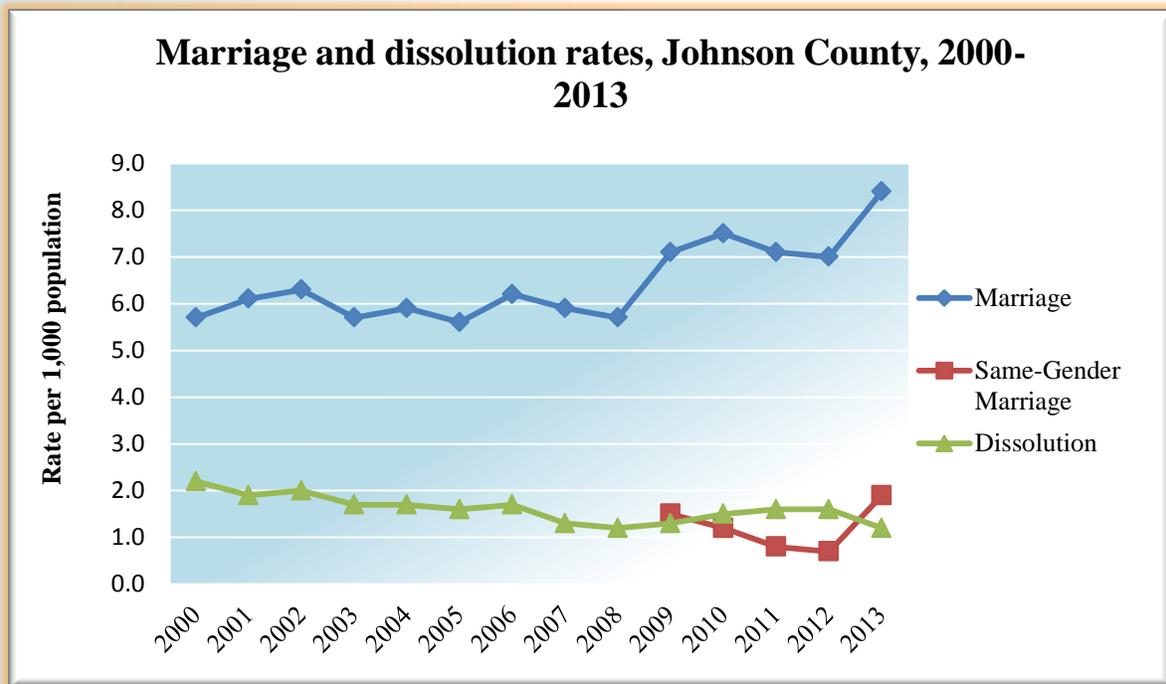
Family Households with Children

Report Area	Total Households	Total Family Households	Family Households with Children (Under Age 18)	Family Households with Children (Under Age 18), Percent of Total Households
Johnson County	55,807	29,429	15,087	28.4%
Iowa	1,236,209	793,749	345,493	30.0%
United States	116,291,033	76,680,463	33,281,870	32.1%

Source: American Community Survey, 2013

Marriages and Dissolutions

- According to the Iowa Department of Public Health Vital Statistics, there were 5.7 marriages and 2.2 dissolutions per 1,000 people in Johnson County in 2013.
- In 2013, the same-gender marriage rate was 1.9 per 1,000 people, which has been the highest rate since same-gender marriages were legalized in Iowa in 2009.
- Compared to Iowa, Johnson County has lower marriage and dissolution rates.



Source: Iowa Department of Public Health Vital Statistics, 2000-2013



DISABILITY

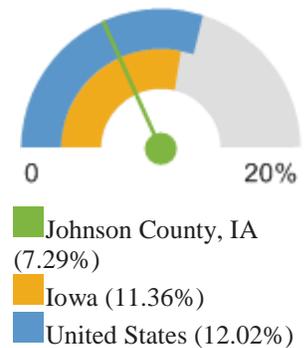
Key Findings:

- Johnson County has a smaller percentage of population with any disability than the state or the nation.
- The percentage of individuals reporting at least one type of disability is lower in Johnson County compared to Iowa and the United States among both males and females.
- The percentage of individuals reporting at least one type of disability is higher in the 18-64 age group at the county, state, and national levels.
- The percentage of persons in a given racial/ethnic group who report at least one disability is highest among Native Americans/Alaska Natives in Johnson County.

Population with Any Disability

Report Area	Total Population (For Whom Disability Status Is Determined)	Total Population with a Disability	Percent Population with a Disability
Johnson County	130,168	9,495	7.29%
Iowa	3,001,335	340,842	11.36%
United States	303,984,256	36,551,036	12.02%

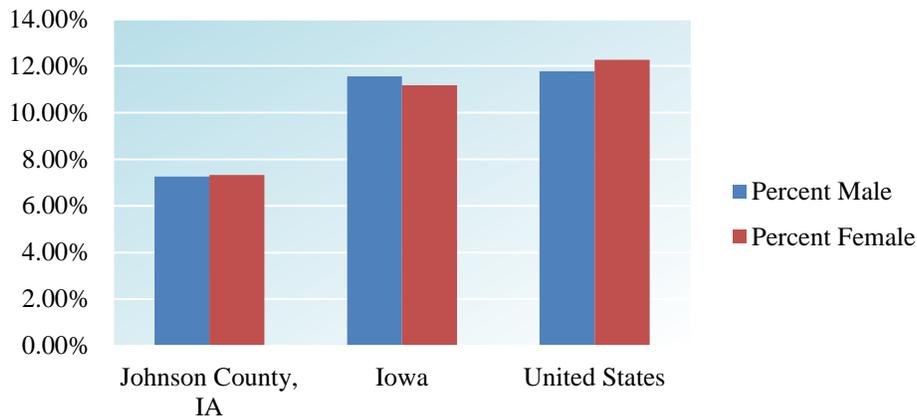
Percent Population with a Disability



Population with Any Disability by Gender

Report Area	Total Male	Total Female	Percent Male	Percent Female
Johnson County	4,694	4,801	7.26%	7.33%
Iowa	171,274	169,568	11.55%	11.17%
United States	17,460,136	19,090,904	11.77%	12.26%

Population with Any Disability by Gender

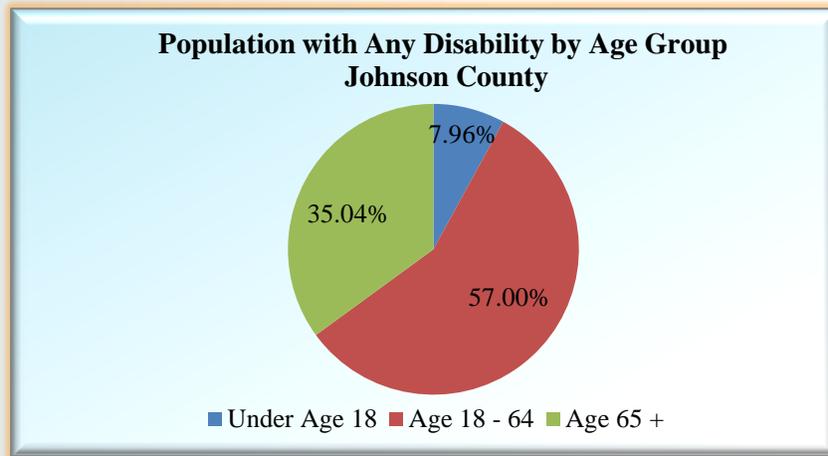




DISABILITY

Population with Any Disability by Age Group, Total

Report Area	Under Age 18	Age 18 - 64	Age 65
Johnson County	756	5,412	3,327
Iowa	28,317	169,556	142,969
United States	2,952,899	19,128,854	14,469,285



Population with Any Disability by Race/Ethnicity Alone, Total

Report Area	White	Black or African American	Native American / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Johnson County	8,518	505	46	204	0	14	208	256
Iowa	317,409	10,694	1,415	2,548	72	2,316	6,388	9,299
United States	28,023,170	5,147,406	394,800	939,425	46,921	1,104,178	895,138	4,141,884

Population with Any Disability by Race/Ethnicity Alone, Percent

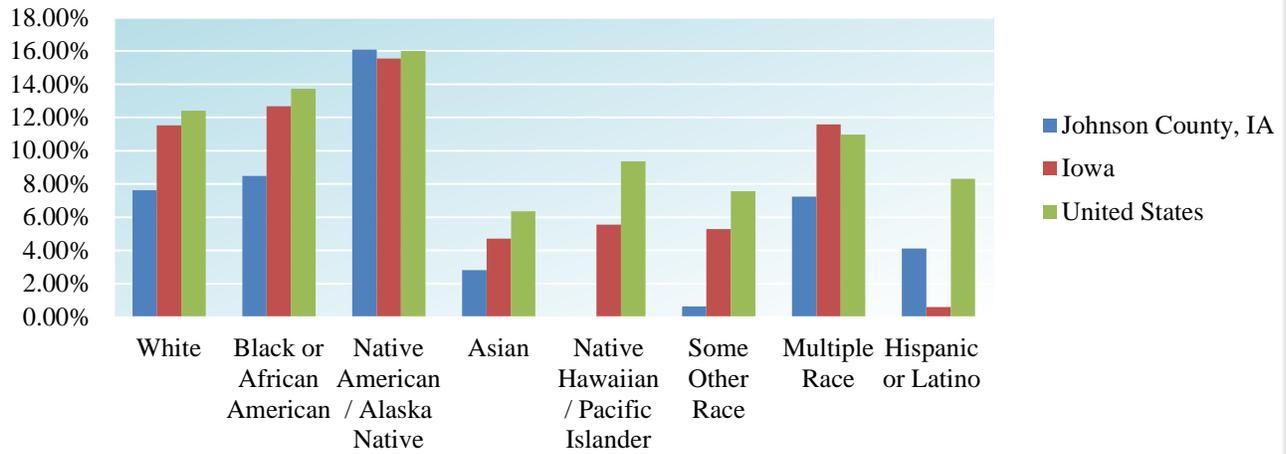
Report Area	White	Black or African American	Native American / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Johnson County	7.63%	8.48%	16.08%	2.82%	0%	0.64%	7.25%	4.13%
Iowa	11.53%	12.68%	15.55%	4.71%	5.56%	5.29%	11.58%	0.61%
United States	12.4%	13.73%	16.01%	6.36%	9.37%	7.56%	10.98%	8.31%

Source: American Community Survey, 2013, Community Commons – Johnson County

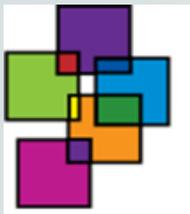


DISABILITY

Population with Any Disability by Race/Ethnicity Alone, Percent



Source: American Community Survey, 2013, Community Commons – Johnson County



FOREIGN BORN POPULATION

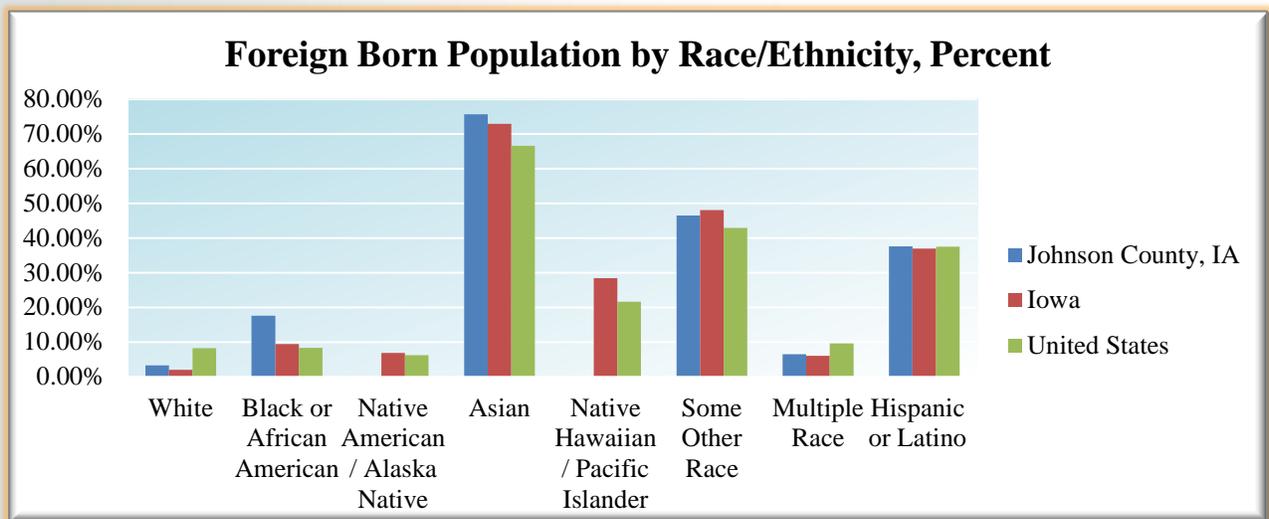
Key Findings:

- The foreign-born population includes anyone who was not a U.S. citizen or a U.S. national at birth. This includes any non-citizens, as well as persons born outside of the U.S. who have become naturalized citizens. The native U.S. population includes any person born in the United States, Puerto Rico, a U.S. Island Area (such as Guam), or abroad of American (U.S. citizen) parent or parents.
- According to the U.S. Census Bureau, over 9% of Johnson County residents were foreign-born in 2013 compared to 4.8% of state residents.

Report Area	Total Population	Naturalized U.S. Citizens	Population Without U.S. Citizenship	Total Foreign-Birth Population	Foreign-Birth Population, Percent of Total Population
Johnson County	139,155	4,023	9,052	13,075	9.4%
Iowa	3,090,416	55,195	93,927	149,122	4.8%
United States	316,128,839	19,294,710	22,053,356	41,348,066	13.1%

Foreign Born Population by Race/Ethnicity, Percent

Report Area	White	Black or African American	Native American / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Johnson County	3.28%	17.63%	0%	75.66%	0%	46.48%	6.46%	37.57%
Iowa	1.97%	9.39%	6.83%	72.93%	28.42%	48.02%	6.02%	36.91%
United States	8.21%	8.34%	6.19%	66.62%	21.65%	42.91%	9.56%	37.48%



Source: American Community Survey, 2013, Community Commons - Johnson County

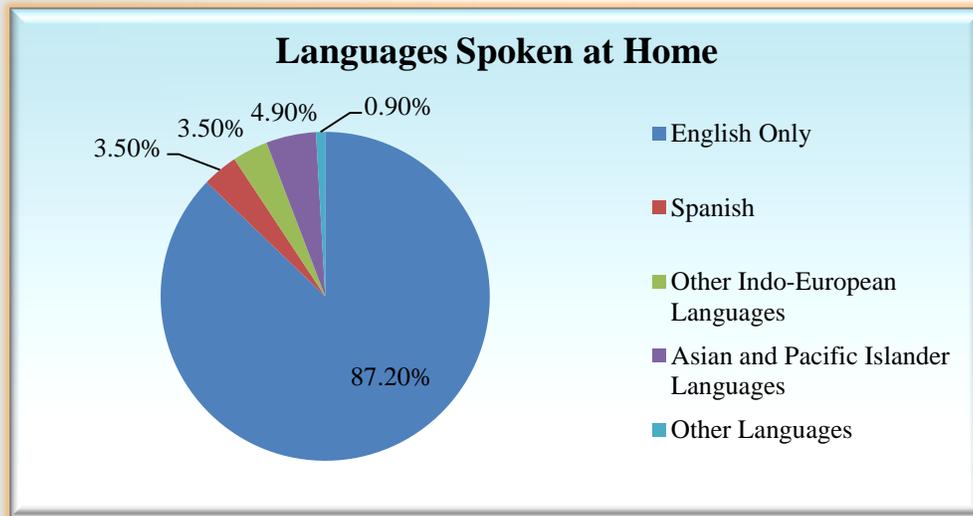


LANGUAGE

Key Findings:

- The Majority of households in Johnson County speak English (87.2%) at home.
- Spanish and other Indo-European languages are each spoken in 3.5% of households.
- 4.9 % of households speak Asian and Pacific Islander languages whereas other languages are reported by 0.9% of homes.

Report Area	English Only	Spanish	Other Indo-European Languages	Asian and Pacific Islander Languages	Other Languages
Johnson County	87.2%	3.5%	3.5%	4.9%	0.9%
Iowa	92.8%	3.7%	1.7%	1.4%	0.4%
United States	79.2%	13.0%	3.6%	3.3%	1.0%



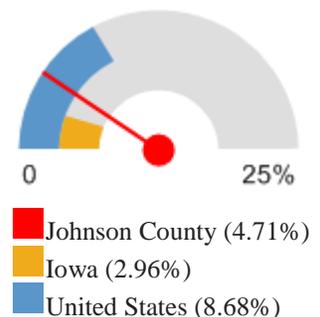
Source: American Community Survey, 2013

English Proficiency:

- 4.7% of the population over age 5 spoke English less than “very well” in Johnson County.

Report Area	Total Population	Population Age 5 and Older	Population Age 5 and Older with Limited English Proficiency	Percent Population Age 5 and Older with Limited English Proficiency
Johnson County	123,607	123,607	5,822	4.71%
Iowa	2,848,771	2,848,771	84,289	2.96%
United States	289,000,832	289,000,824	25,081,124	8.68%

Percent Population with Limited English



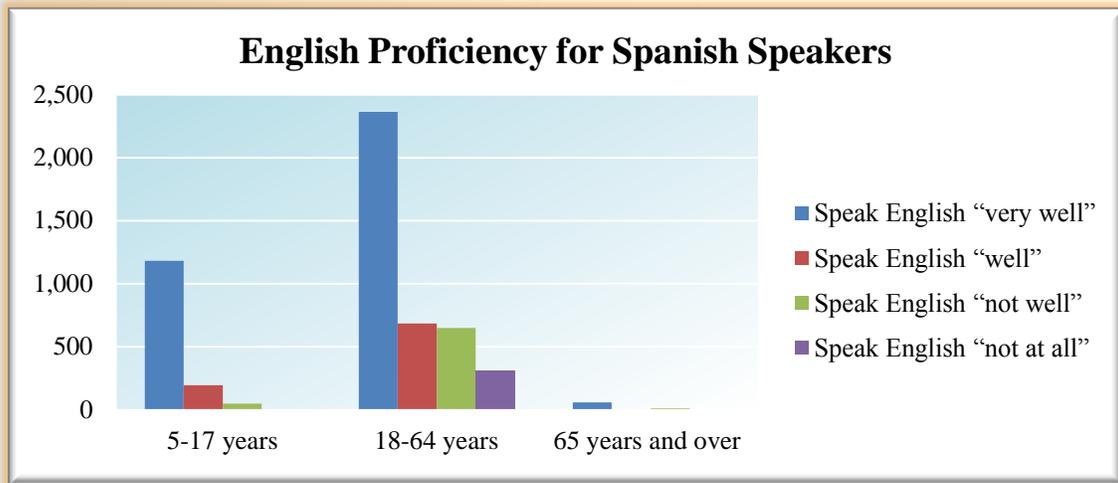
Source: Community Commons – Johnson County



LANGUAGE

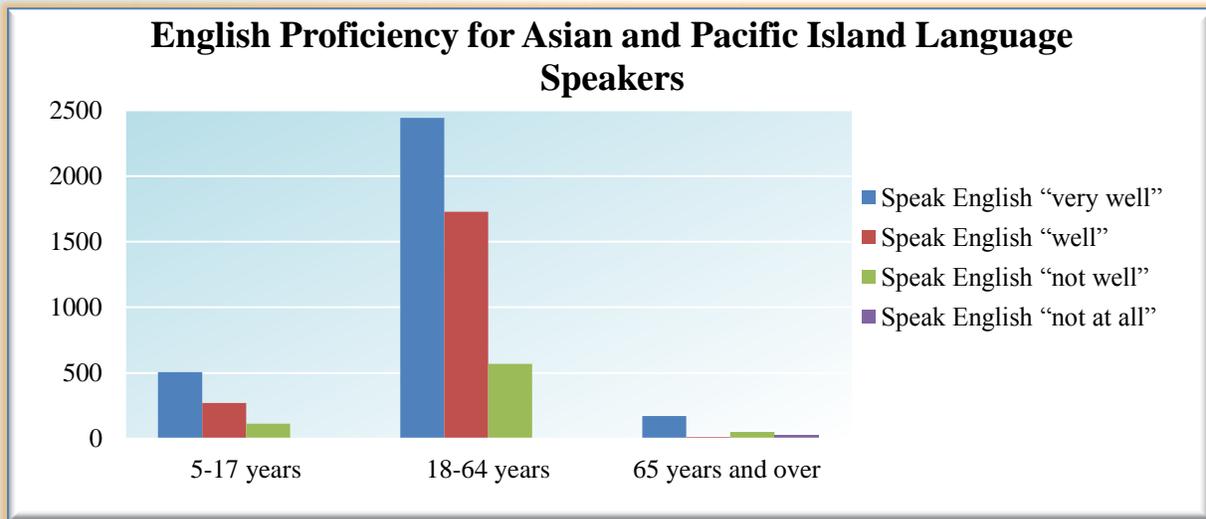
English Proficiency for Spanish Speakers by Age-Group, 2011-2013

Proficiency	5-17 years	18-64 years	65 years and over
Speak English “very well”	1,182	2,364	61
Speak English “well”	197	686	0
Speak English “not well”	49	651	12
Speak English “not at all”	0	314	0



English Proficiency for Asian and Pacific Island Language Speakers by Age-Group, 2011-2013

Proficiency	5-17 years	18-64 years	65 years and over
Speak English “very well”	507	2,443	173
Speak English “well”	271	1,728	13
Speak English “not well”	115	570	50
Speak English “not at all”	0	0	25



Source: American Community Survey, 2011-2013

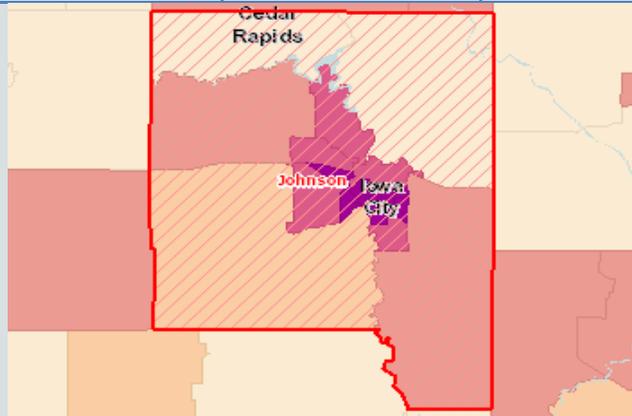


URBAN AND RURAL POPULATION

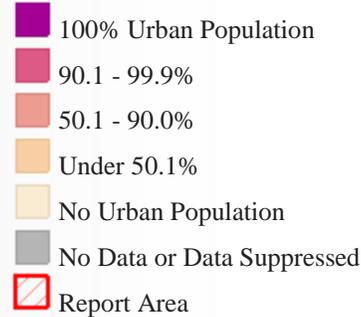
Key Findings:

- Over 81% of Johnson County’s population lives in urban areas.
- Johnson County has a higher proportion of residents living in urban areas compared to Iowa and United States.

Report Area	Total Population	Urban Population	Rural Population	Percent Urban	Percent Rural
Johnson County	130,882	106,621	24,261	81.46%	18.54%
Iowa	3,046,355	1,950,256	1,096,099	64.02%	35.98%
United States	312,471,327	252,746,527	59,724,800	80.89%	19.11%

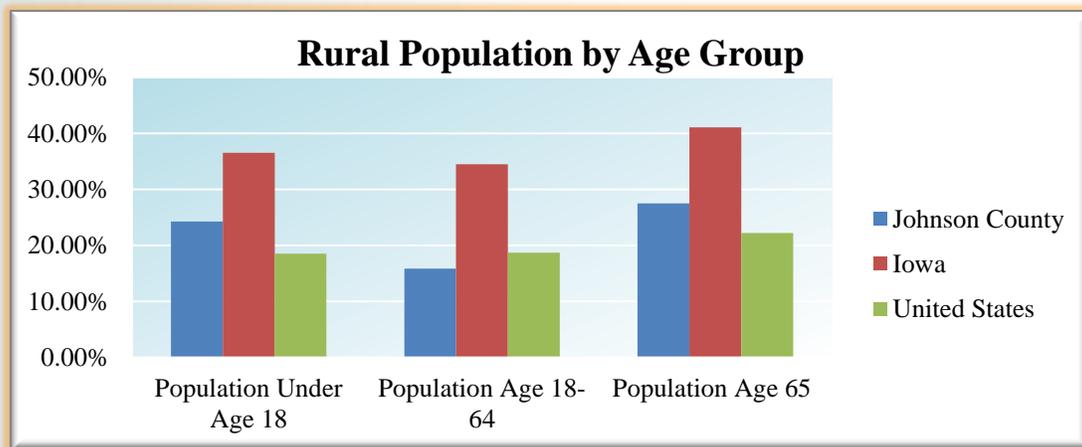


Urban Population, Percent by Tract, US Census 2010



Rural Population by Age Group

Report Area	Population Under Age 18		Population Age 18-64		Population Age 65	
	Total	Percent	Total	Percent	Total	Percent
Johnson County	6,295	24.29%	14,881	15.87%	3,085	27.52%
Iowa	266,008	36.54%	644,110	34.53%	185,981	41.07%
United States	13,907,394	18.52%	36,734,957	18.69%	9,082,449	22.26%



Source: Community Commons – Johnson County



SOCIOECONOMIC CHARACTERISTICS

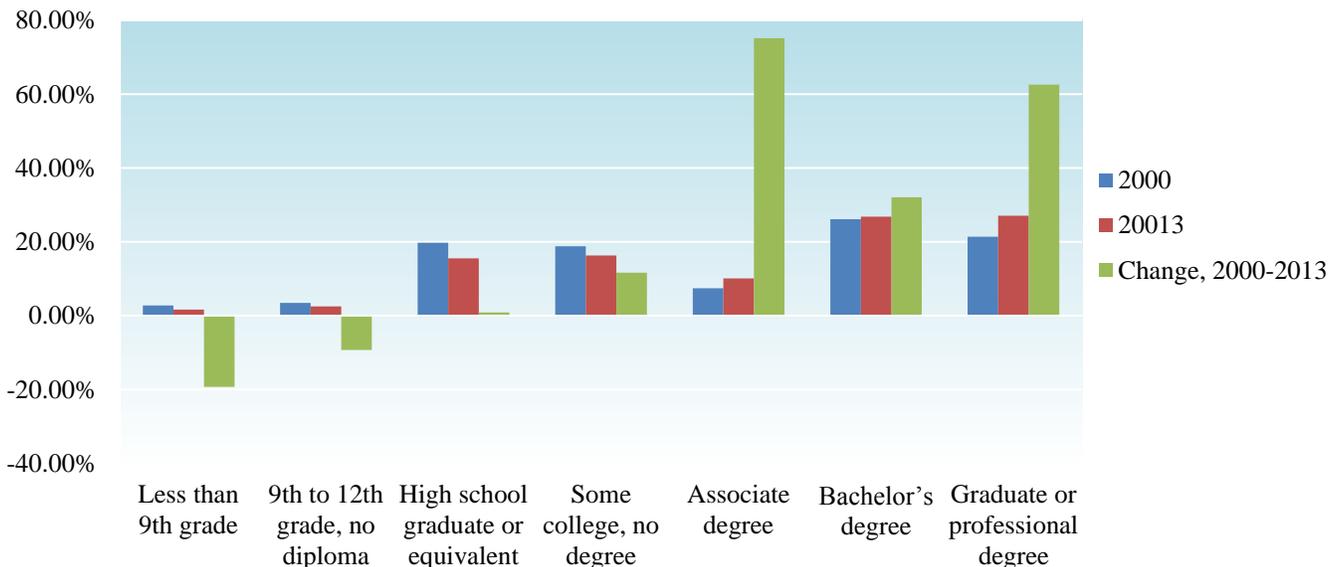
Educational Attainment and School Enrollment:

- The highest level of education attained among Johnson County residents aged 25 years and older, increased from 2000-2013.
- In 2013, 95.8% of the population had attained a high school diploma or a higher degree.
- The percent of individuals with a high school degree or higher increased by 2.1% in 2013 from 2000.
- 53.9% of the population held a bachelor’s degree or higher in 2013, an increase of 6.3% from 2000.
- A negative percent change from 2000-2013 occurred in the “< 9th grade” and “9th-12th grade, no diploma” category.

Educational Attainment for Individuals 25 Years and Over

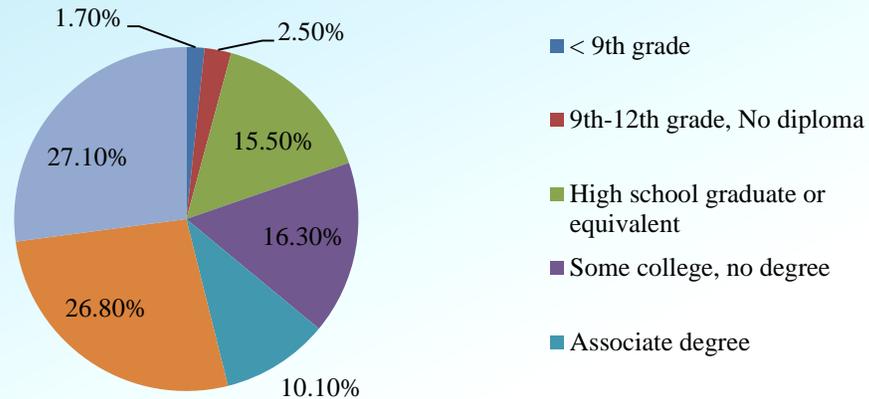
	2000		2010		2013		Change, 2000 to 2013	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
Total population 25 years and over	62,859		77,326		81,039		18,180	28.9%
Highest Level of Education Attained								
Less than 9th grade	1,752	2.8%	2,327	3.0%	1,413	1.7%	-339	-19.3%
9th to 12th grade, no diploma	2,231	3.5%	2,130	2.8%	2,023	2.5%	-208	-9.3%
High school graduate or equivalent	12,449	19.8%	14,182	18.3%	12,557	15.5%	108	0.87%
Some college, no degree	11,835	18.8%	14,265	18.4%	13,219	16.3%	1384	11.7%
Associate degree	4,672	7.4%	6,035	7.8%	8,187	10.1%	3515	75.2%
Bachelor’s degree	16,437	26.1%	21,283	27.5%	21,712	26.8%	5275	32.1%
Graduate or professional degree	13,483	21.4%	17,104	22.1%	21,928	27.1%	8445	62.6%
High school graduate or higher	58,876	93.7%	72,869	94.2%	77,603	95.8%	18727	31.8%
Bachelor’s degree or higher	29,920	47.6%	38,387	49.6%	43,640	53.9%	13720	45.9%

Educational Attainment for 2000 and 2013



EDUCATION

Educational Attainment for Individuals 25+, 2013



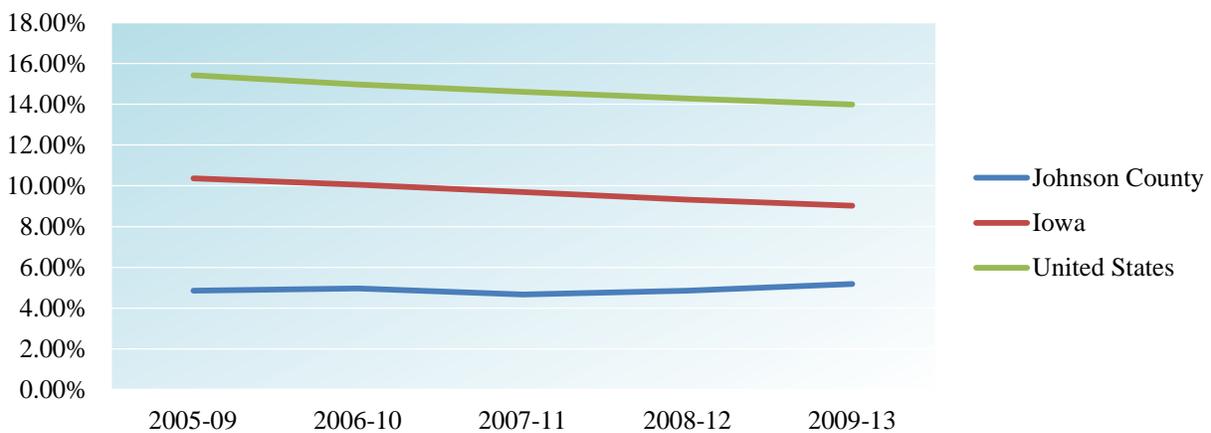
Source: U.S. Census Bureau, American Community Survey, 2000, 2010, 2013

- Since 2005, Johnson County has had a lower proportion of individuals age 25 and older with no high school diploma compared to Iowa and United States.

Population with No High School Diploma, Percent by Time Period, 2005-09 through 2009-13

Report Area	2005-09	2006-10	2007-11	2008-12	2009-13
Johnson County	4.86%	4.96%	4.67%	4.86%	5.18%
Iowa	10.37%	10.05%	9.69%	9.32%	9.03%
United States	15.42%	14.97%	14.61%	14.28%	13.98%

Population with No High School Diploma



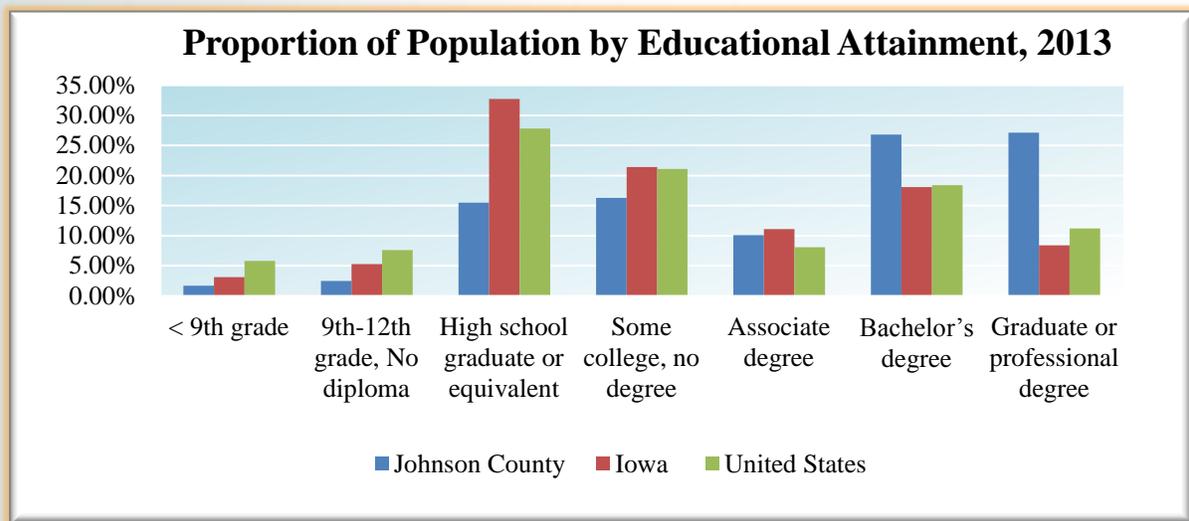
Source: American Community Survey, Community Commons – Johnson County



EDUCATION

Proportion of Population by Educational Attainment:

- In 2013, Johnson County had a greater proportion of the population that attained a bachelor's or graduate/professional degree than Iowa and the United States.
- The county has a smaller proportion of the population that attained a "high school graduate or equivalent" or less when compared to the state or the country.
- Johnson County also has a smaller proportion that attained "some college, no degree".



Source: American Community Survey, Community Commons – Johnson County



EMPLOYMENT

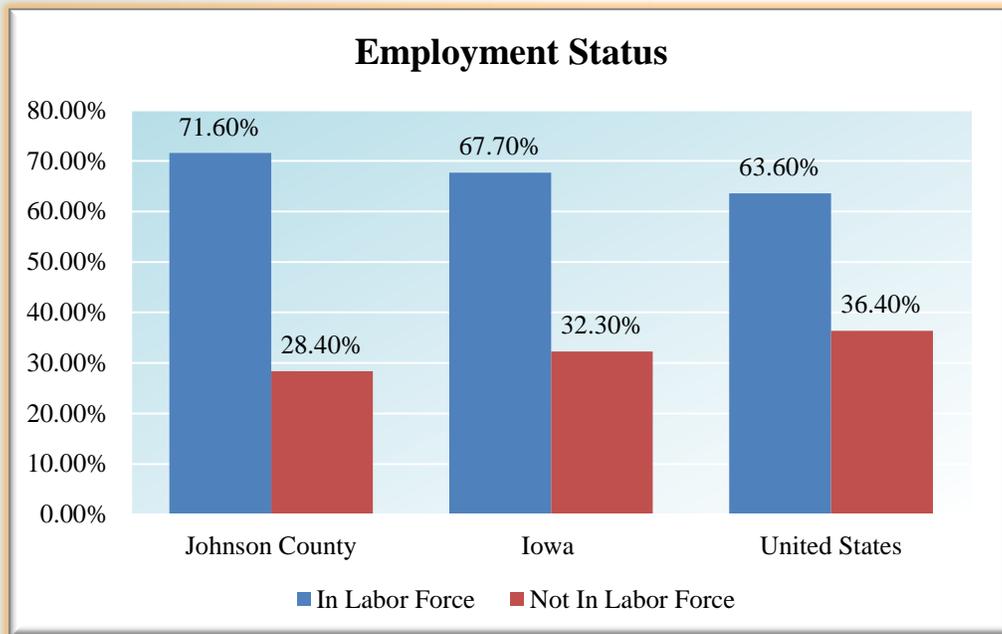
Key Findings:

- In 2013, over 71% of the population age 16 and older was in the labor force in Johnson County.
- The percent of the population in labor force decreased from 73.3% in 2000 to 71.6% in 2013.
- From 2000 to 2013, the percent of the population in civilian labor force that were unemployed decreased from 2.9% to 2.0%.

	2000	2013	Change 2000 to 2012
Total Population 16 Years and Over	91,234	114,062	22,828
Employment Status			
In Labor Force	66,978	81,718	14,740
Civilian Labor Force	66,880	81,694	14,814
Civilian Employed	64,255	79,381	15,126
Civilian Unemployed	2,625	2,313	-312
Armed Forces	98	24	-74
Not in Labor Force	24,256	32,344	8,088

Employment Status of the Population Age 16 and Older, 2013

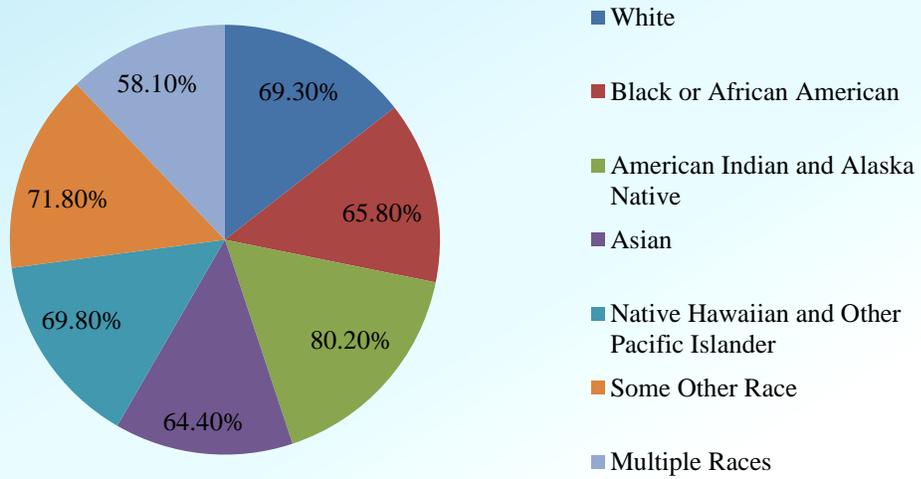
Report Area	In Labor Force	Not In Labor Force
Johnson County	71.6%	28.4%
Iowa	67.7%	32.3%
United States	63.6%	36.4%



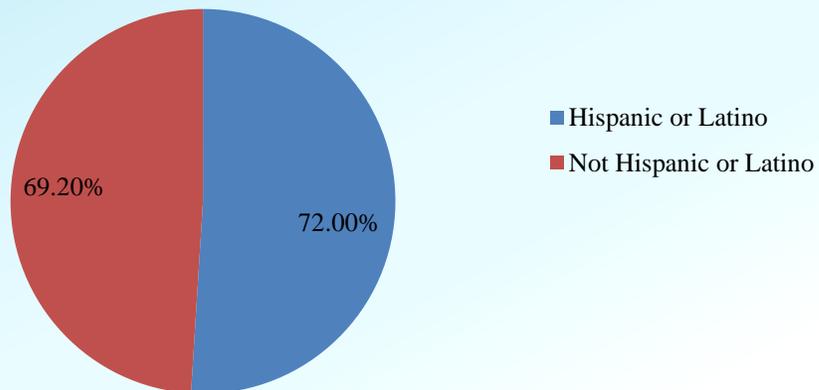
Sources: U.S. Census Bureau, 2000, American Community Survey, 2013

EMPLOYMENT

Employment Rate by Race, 2009-2013



Employment Rate by Ethnicity, 2009-2013



Source: American Community Survey, 2009-2013



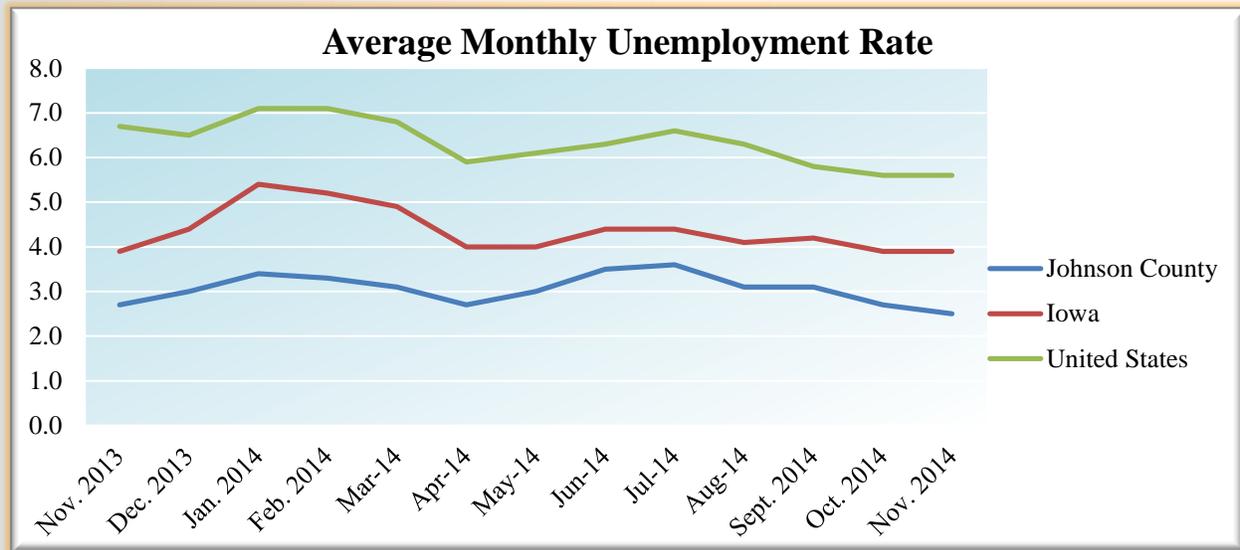
UNEMPLOYMENT

Key Findings:

- Johnson County had lower average monthly and annual unemployment rates than the state and the nation.
- Average monthly unemployment rate increased in July and declined in November 2014.
- The average annual unemployment rate was at its highest in 2010 for Johnson County, Iowa, and United States.

Average Monthly Unemployment Rate, November 2013 - November 2014

Report Area	Nov. 2013	Dec. 2013	Jan. 2014	Feb. 2014	March 2014	April 2014	May 2014	June 2014	July 2014	August 2014	Sept. 2014	Oct. 2014	Nov. 2014
Johnson County	2.7	3	3.4	3.3	3.1	2.7	3	3.5	3.6	3.1	3.1	2.7	2.5
Iowa	3.9	4.4	5.4	5.2	4.9	4	4	4.4	4.4	4.1	4.2	3.9	3.9
United States	6.7	6.5	7.1	7.1	6.8	5.9	6.1	6.3	6.6	6.3	5.8	5.6	5.6



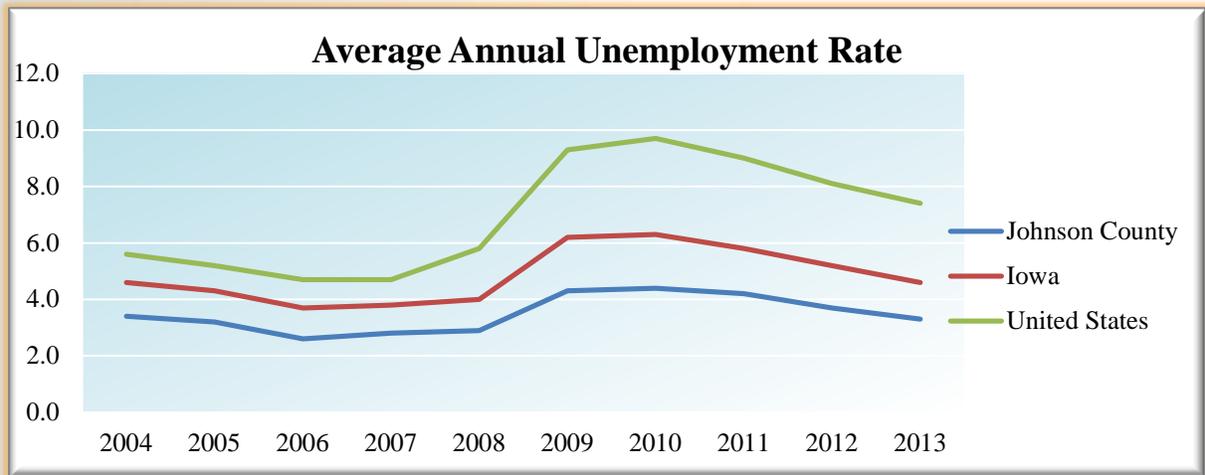
Average Annual Unemployment Rate, 2004-2013

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Johnson County	3.4	3.2	2.6	2.8	2.9	4.3	4.4	4.2	3.7	3.3
Iowa	4.6	4.3	3.7	3.8	4	6.2	6.3	5.8	5.2	4.6
United States	5.6	5.2	4.7	4.7	5.8	9.3	9.7	9	8.1	7.4

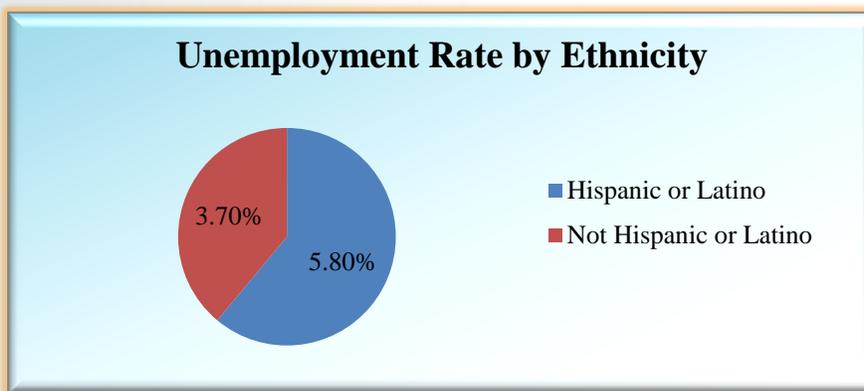
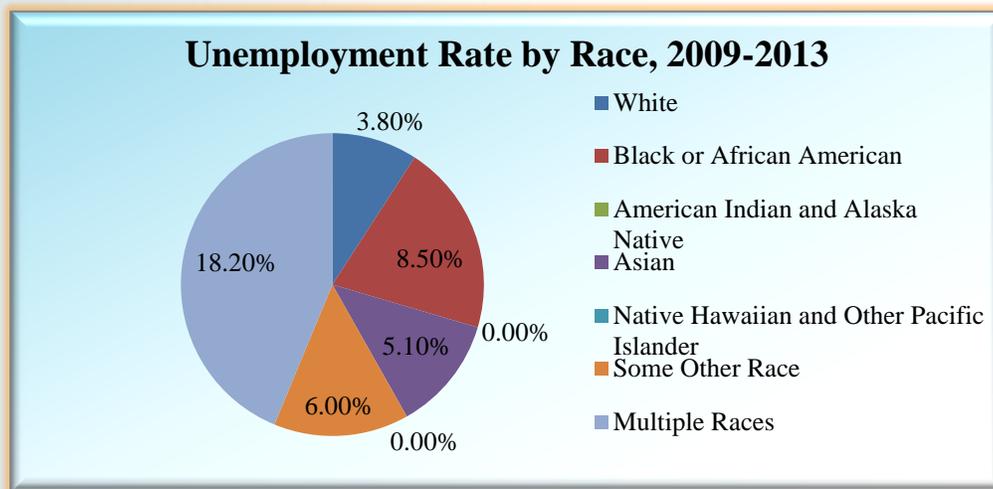
Source: Community Commons – Johnson County



UNEMPLOYMENT



Source: Community Commons – Johnson County



Source: American Community Survey, 2009-2013



INCOME

Key Findings:

- Johnson County has a slightly lower percentage of households with an income less than \$35,000 (32.5%) than Iowa (32.8%) and the United States (34.0%).
- In 2013, the median household income in Johnson County was \$51,606 per household, which is lower than the median income in Iowa (\$52,229) and United States (\$52,250).

	Johnson County		Iowa		United States	
	Estimate	Percent	Estimate	Percent	Estimate	Percent
Total Households	55,807		1,236,209		116,291,033	
Income Level						
Less than \$10,000	4,893	8.8%	79,286	6.4%	8,783,120	7.6%
\$10,000 to \$14,999	2,242	4.0%	63,335	5.1%	6,246,216	5.4%
\$15,000 to \$24,999	5,804	10.4%	129,516	10.5%	12,575,679	10.8%
\$25,000 to \$34,999	5,198	9.3%	132,750	10.7%	11,964,268	10.3%
\$35,000 to \$49,999	8,983	16.1%	183,264	14.8%	15,840,707	13.6%
\$50,000 to \$74,999	7,654	13.7%	247,138	20.0%	20,820,510	17.9%
\$75,000 to \$99,999	6,788	12.2%	164,665	13.3%	13,823,793	11.9%
\$100,000 to \$149,999	8,169	14.6%	153,454	12.4%	14,749,902	12.7%
\$150,000 to \$199,999	2,906	5.2%	43,696	3.5%	5,644,221	4.9%
\$200,000 or more	3,170	5.7%	39,105	3.2%	5,842,617	5.0%
Median household income (\$)	51,606		52,229		52,250	

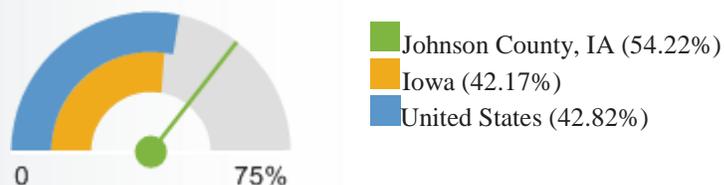
Source: American Community Survey, 2013

Families with Income over \$75,000:

- In Johnson County, the percentage of families with income over \$75,000 was 54.22%, which is 12.05% higher than the income in Iowa and 11.4% higher than the United States.

Report Area	Total Families	Families with Income Over \$75,000	Percent Families with Income Over \$75,000
Johnson County	29,043	15,747	54.22%
Iowa	795,274	335,362	42.17%
United States	76,744,358	32,858,573	42.82%

Percent Families with Income Over \$75,000



Source: American Community Survey, 2013, Community Commons – Johnson County



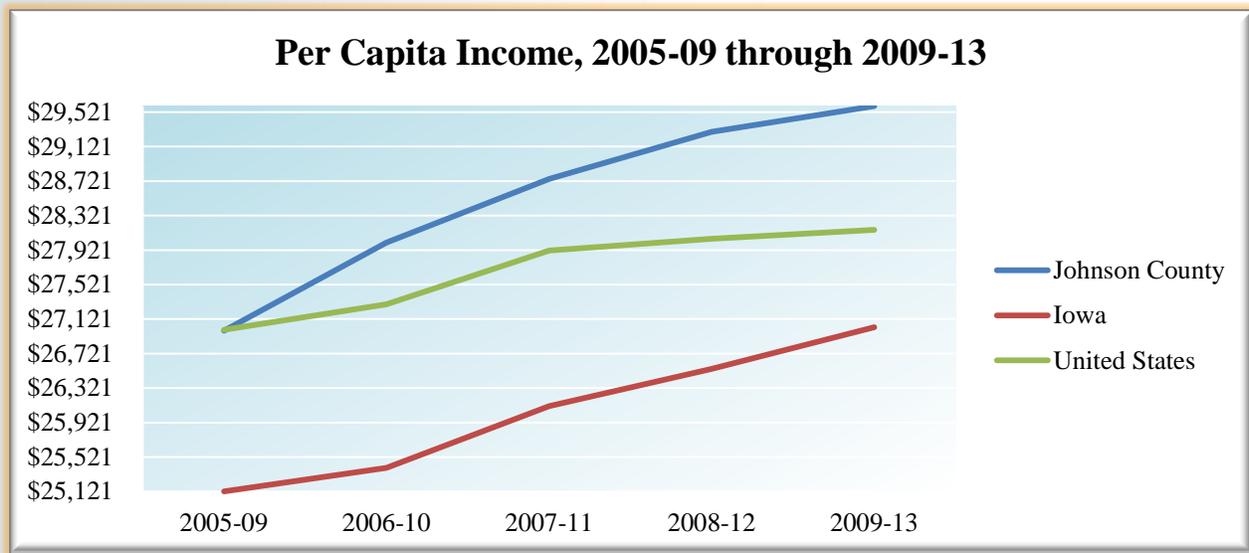
INCOME

Income Per Capita:

- The per capita income for Johnson County was estimated to be \$29,592 between 2009 and 2013, which is greater than the per capita of Iowa and the United States.
- There has been an increasing trend in income per capita for Johnson County, Iowa, and the United States from 2005 to 2013.

Per Capita Income by Time Period, 2005-09 through 2009-13

Report Area	2005-09	2006-10	2007-11	2008-12	2009-13
Johnson County	\$26,987	\$28,008	\$28,746	\$29,294	\$29,592
Iowa	\$25,121	\$25,395	\$26,110	\$26,545	\$27,027
United States	\$26,998	\$27,293	\$27,915	\$28,051	\$28,155



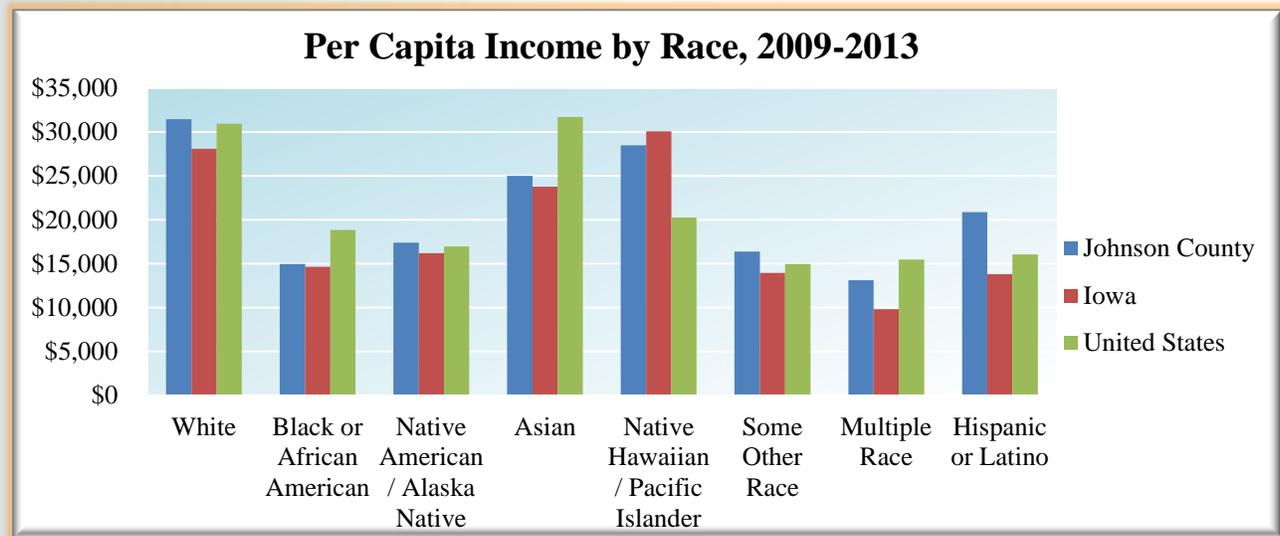
Per Capita Income by Race/Ethnicity, 2009-2013

Report Area	White	Black or African American	Native American / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Johnson County	\$31,449	\$14,961	\$17,404	\$24,993	\$28,498	\$16,372	\$13,114	\$20,894
Iowa	\$28,090	\$14,658	\$16,201	\$23,773	\$30,087	\$13,978	\$9,835	\$13,828
United States	\$30,963	\$18,864	\$16,975	\$31,713	\$20,277	\$14,962	\$15,479	\$16,051

Source: American Community Survey, Community Commons – Johnson County



POVERTY



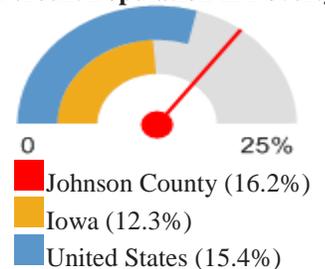
Source: American Community Survey, Community Commons – Johnson County

Poverty:

- In 2013, 17.2% of Johnson County residents lived below the Federal Poverty Level (FPL).
- Poverty rates in Johnson County were higher than the state and national rates in 2013.
- From 2005 to 2013, the percentage of residents whose income was below the poverty level decreased from 19% to 17.2%.
- 41% of Blacks, 21% of Hispanics/Latino, 23% of Asians, and 16% of Whites were living in poverty between 2009 and 2013.
- The percentage of children age 0-17 living in households with income below the poverty line is lower in Johnson County (11.5%) compared to Iowa (16.2%) and the United States (22.2%).
- Between 2008 and 2012, 4,106 public school students or 27.31% were eligible for Free/Reduced Price lunch out of 15,033 total students enrolled in Johnson County.

Report Area	Total Population	Population in Poverty	Percent Population in Poverty
Johnson County	139,155	22,590	16.2%
Iowa	3,090,416	379,127	12.3%
United States	316,128,839	48,810,868	15.4%

Percent Population in Poverty

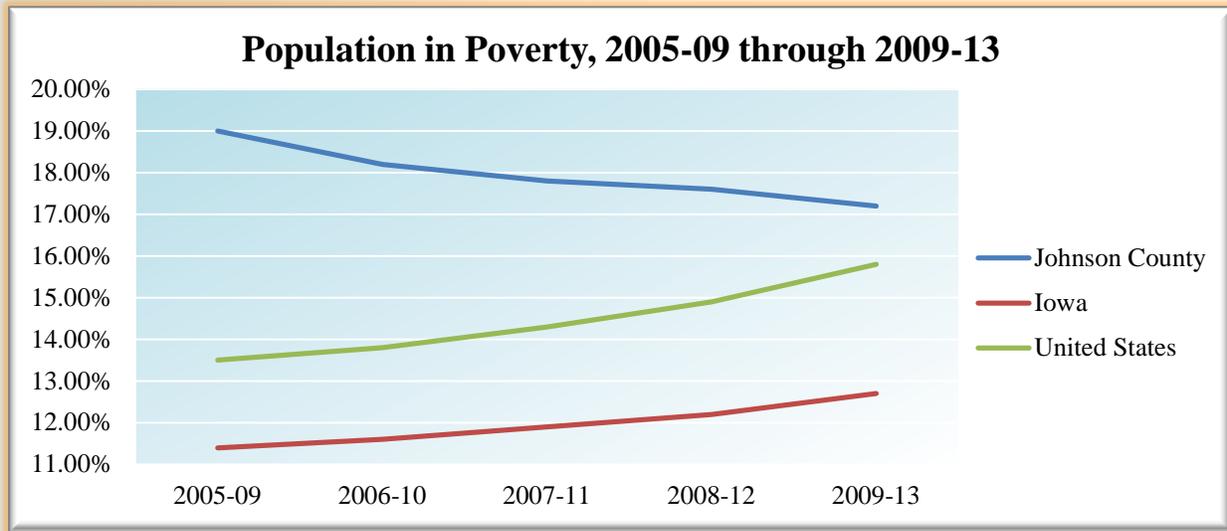


Population in Poverty, Percent by Time Period, 2005-09 through 2009-13

Report Area	2005-09	2006-10	2007-11	2008-12	2009-13
Johnson County	19.0%	18.2%	17.8%	17.6%	17.2%
Iowa	11.4%	11.6%	11.9%	12.2%	12.7%
United States	13.5%	13.8%	14.3%	14.9%	15.8%



POVERTY



Population in Poverty by Race/Ethnicity, 2009-2013

Report Area	White	Black or African American	Native American / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Johnson County	17,026	2,577	40	1,554	14	436	653	1,332
Iowa	299,245	31,339	2,542	8,129	276	10,447	15,436	39,693
United States	28,254,647	10,165,935	701,439	1,872,394	99,943	3,872,191	1,696,884	12,507,866

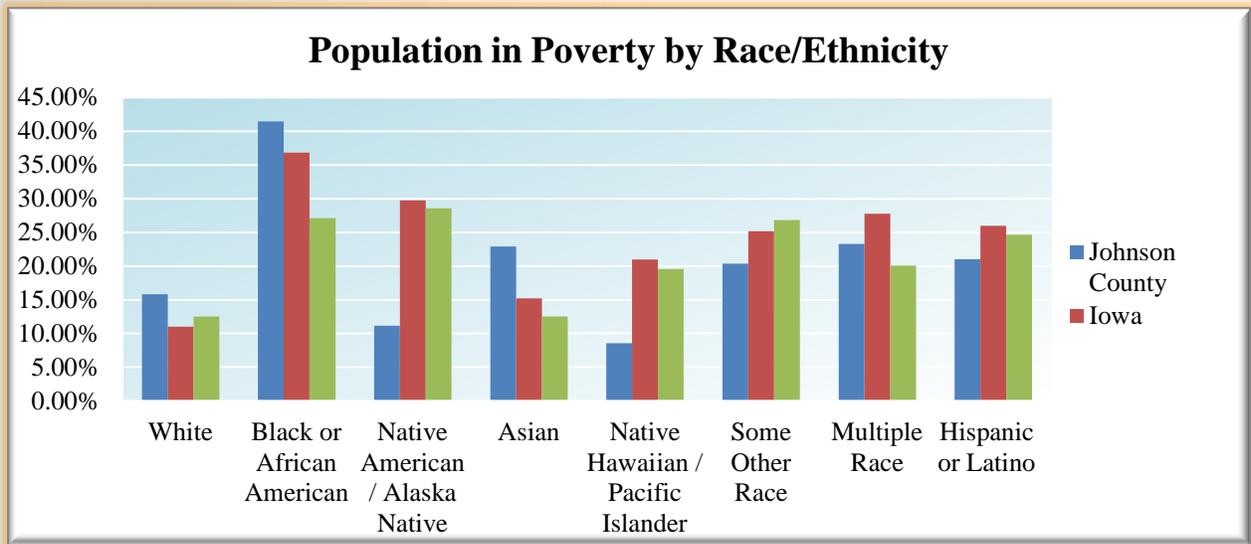
Population in Poverty by Race/Ethnicity, Percent

Report Area	White	Black or African American	Native American / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Johnson County	15.84%	41.48%	11.14%	22.90%	8.54%	20.36%	23.28%	21.00%
Iowa	11.01%	36.85%	29.74%	15.23%	20.97%	25.16%	27.77%	26.00%
United States	12.53%	27.13%	28.56%	12.53%	19.58%	26.82%	20.06%	24.66%

Source: American Community Survey, Community Commons – Johnson County



POVERTY



Source: American Community Survey, Community Commons – Johnson County

Children in Poverty, 2013

Report Area	Total Population	Population Under Age 18	Population Under Age 18 in Poverty	Percent Population Under Age 18 in Poverty
Johnson County	131,101	27,967	3,221	11.5%
Iowa	2,991,670	712,071	115,194	16.2%
United States	308,196,783	72,382,173	16,086,960	22.2%

Percent Population under Age 18 in Poverty

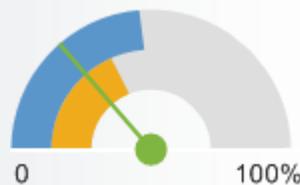


Johnson County (11.5%)
Iowa (16.2%)
United States (22.2%)

Children Eligible for Free/Reduced Price Lunch between 2008 and 2012

Report Area	Total Student Enrollment	Number Free/Reduced Price Lunch Eligible	Percent Free/Reduced Price Lunch Eligible
Johnson County	15,033	4,106	27.31%
Iowa	482,123	179,921	37.32%
United States	48,179,627	22,891,482	47.51%

Percent Students Eligible for Free or Reduced Price Lunch



Johnson County (27.31%)
Iowa (37.32%)
United States (47.51%)

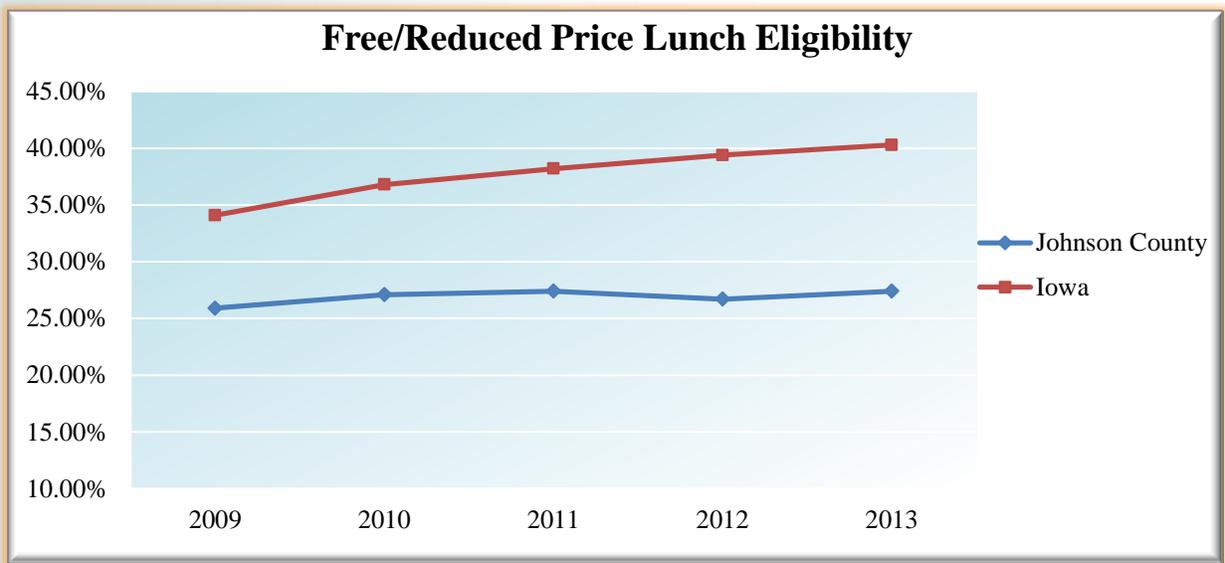
Source: Kids Count Data Center, Community Commons – Johnson County



POVERTY

Free/Reduced Price Lunch Eligibility, 2009-2013

Report Area	2009	2010	2011	2012	2013
Johnson County	25.9%	27.1%	27.4%	26.7%	27.4%
Iowa	34.1%	36.8%	38.2%	39.4%	40.3%



Source: Kids Count Data Center, Community Commons – Johnson County

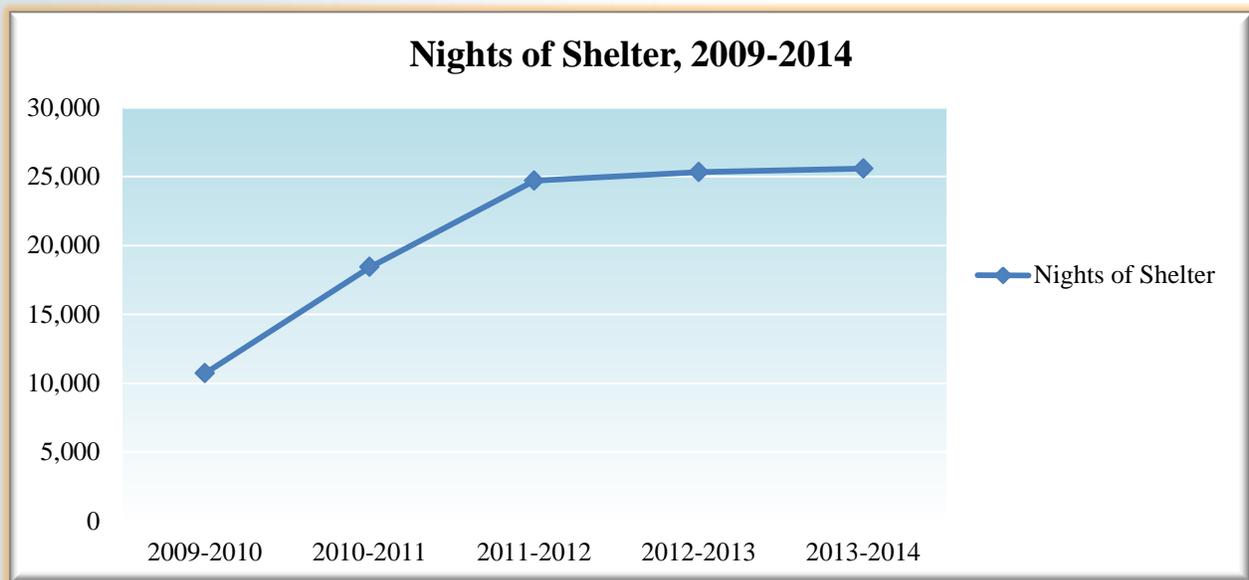
HOMELESSNESS

Key Findings:

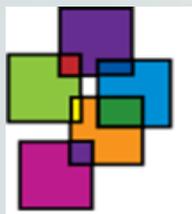
- Shelter House is a non-profit organization that has provided housing and supportive services to the homeless since 1983.
- The Shelter House provided 25,584 nights of shelter between 2013 and 2014.
- The Shelter House served an average of 70 people per night from July 2013 to June 2014.
- There were 653 unduplicated individuals that received service from 2013 to 2014.

Nights of Shelter, 2004-2013

Year	Nights of Shelter	Unduplicated Counts	Nightly Average
2009-2010	10,730	410	29
2010-2011	18,437	618	51
2011-2012	24,703	629	68
2012-2013	25,326	634	69
2013-2014	25,584	653	70



Source: Shelter House – Johnson County, 2009-2014



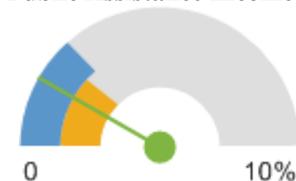
ASSISTANCE PROGRAMS

Households Receiving Public Assistance Income:

- Johnson County had a slightly lower percentage of households receiving public assistance income in 2013 compared to Iowa and the United States.

Report Area	Total Households	Households with Public Assistance Income	Percent Households with Public Assistance Income
Johnson County	55,807	1,154	2.07%
Iowa	1,236,209	31,718	2.57%
United States	116,291,033	3,272,133	2.81%

Percent Households with Public Assistance Income



- Johnson County (2.07%)
- Iowa (2.57%)
- United States (2.81%)

Population Receiving Supplemental Security Income (SSI) Benefits:

- In 2013, Johnson County had a lower percentage of residents receiving SSI Benefits than Iowa and the United States in 2013.

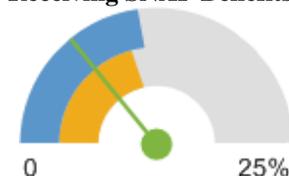
Report Area	Total Households	Households Receiving SSI Benefits	Percent Households Receiving SNAP Benefits
Johnson County	55,807	1,188	2.13%
Iowa	1,236,209	51,857	4.19%
United States	116,291,033	6,238,697	5.36%

Population Receiving Supplemental Nutrition Assistance Program (SNAP) Benefits:

- In 2013, a lower percentage of Johnson County residents received SNAP Benefits compared to the state and the nation.

Report Area	Total Households	Households Receiving SNAP Benefits	Percent Households Receiving SNAP Benefits
Johnson County	55,807	5,094	9.13%
Iowa	1,236,209	158,554	12.83%
United States	116,291,033	16,505,893	14.19%

Percent Households Receiving SNAP Benefits



- Johnson County (9.13%)
- Iowa (12.83%)
- United States (14.19%)

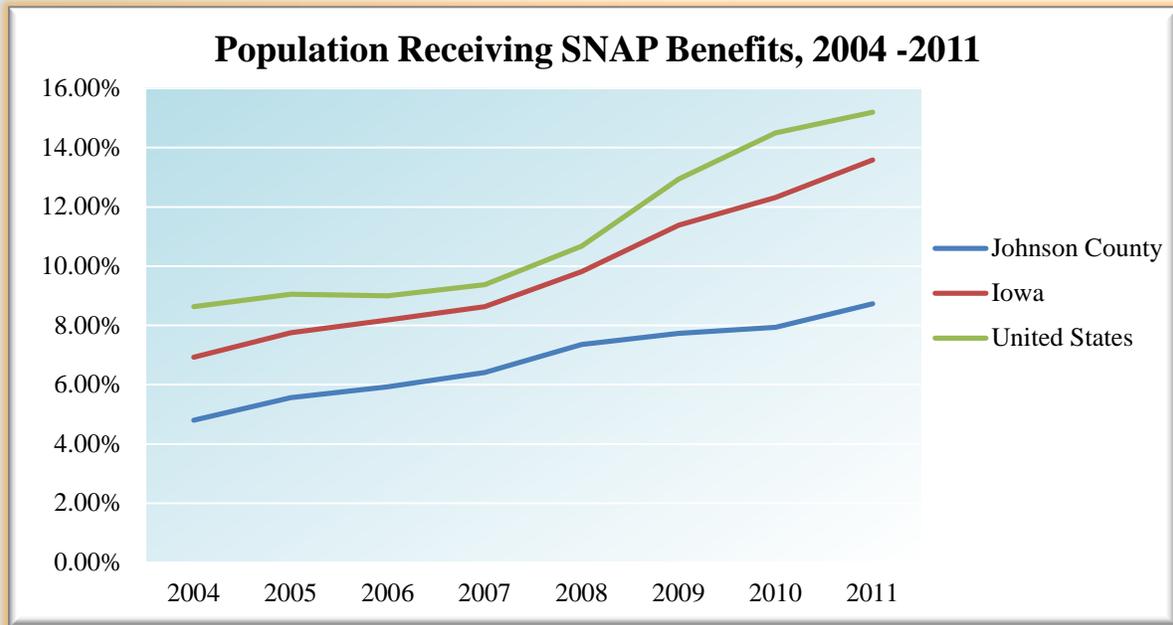
Percent Population Receiving SNAP Benefits, 2004 – 2011

- The percentage of Johnson County residents receiving SNAP Benefits nearly doubled from 2004 to 2011.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011
Johnson County	4.8%	5.56%	5.93%	6.41%	7.36%	7.73%	7.94%	8.73%
Iowa	6.93%	7.76%	8.18%	8.64%	9.82%	11.38%	12.32%	13.58%
United States	8.64%	9.05%	9%	9.38%	10.68%	12.94%	14.5%	15.19%



ASSISTANCE PROGRAMS



Source: American Community Survey, Community Commons – Johnson County

Population Receiving Medicaid:

- From 2008 through 2012, 11.08% of insured residents were Medicaid recipients in Johnson County.

Report Area	Total Population (For Whom Insurance Status is Determined)	Population with Any Health Insurance	Population Receiving Medicaid	Percent of Insured Population Receiving Medicaid
Johnson County	130,168	119,946	13,287	11.08%
Iowa	3,001,335	2,739,108	450,949	16.46%
United States	303,984,256	258,778,080	50,682,900	19.59%

Percent of Insured Population Receiving Medicaid



Source: Community Commons – Johnson County

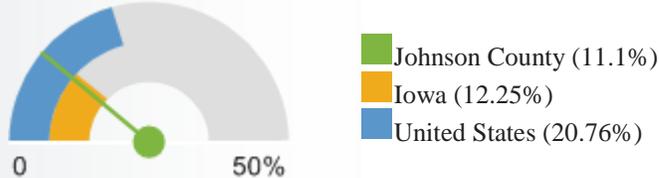
UNINSURED POPULATION

Uninsured Population – Adults:

- According to the U.S. Census Bureau Small Area Health Insurance Estimates (SAHIE), 11.1% of adults age 18 to 64 were uninsured in Johnson County in 2012.
- Johnson County had a lower percentage of adults age 18-64 without medical insurance compared to Iowa (12.25%) and the United States (20.76%).

Report Area	Total Population Age 18-64	Population with Medical Insurance	Percent Population with Medical Insurance	Population without Medical Insurance	Percent Population without Medical Insurance
Johnson County	89,985	50,003	88.9%	9,982	11.1%
Iowa	1,817,055	1,594,525	87.75%	222,530	12.25%
United States	191,640,968	151,849,368	79.24%	39,791,596	20.76%

Percent Population without Medical Insurance

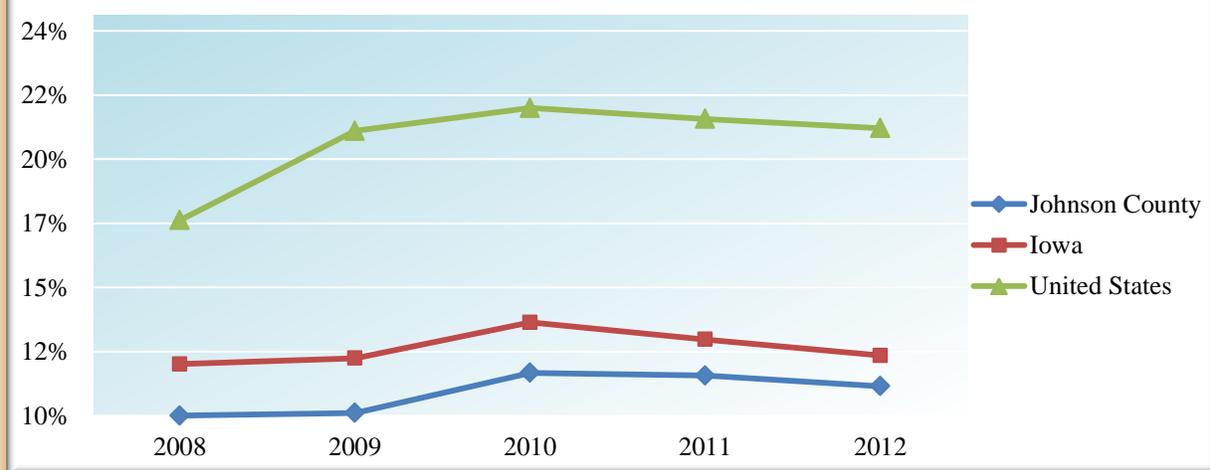


Uninsured Population Age 18-64, 2008-2012:

- The percentage of uninsured population increased by 1.1% in Johnson County from 2008 to 2012.

Report Area	2008	2009	2010	2011	2012
Johnson County	10%	10.1%	11.6%	11.5%	11.1%
Iowa	11.93%	12.15%	13.49%	12.85%	12.25%
United States	17.32%	20.66%	21.52%	21.11%	20.76%

Uninsured Population Age 18-64





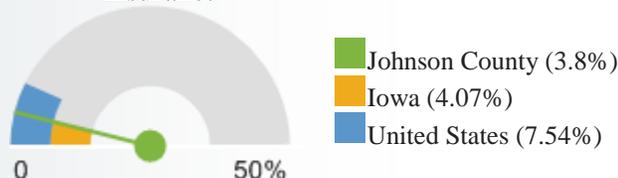
UNINSURED POPULATION

Uninsured Population – Children:

- In 2012, 3.8% of children under the age 19 were uninsured in Johnson County.
- Johnson County had a lower percentage of children under age 19 without medical insurance than Iowa (4.07%) and the United States (7.54%).

Report Area	Total Population Under Age 19	Population with Medical Insurance	Percent Population with Medical Insurance	Population without Medical Insurance	Percent Population without Medical Insurance
Johnson County	27,623	26,564	96.2%	1,059	3.8%
Iowa	745,451	715,131	95.93%	30,320	4.07%
United States	76,468,844	70,705,585	92.46%	5,763,259	7.54%

Percent Population without Medical Insurance

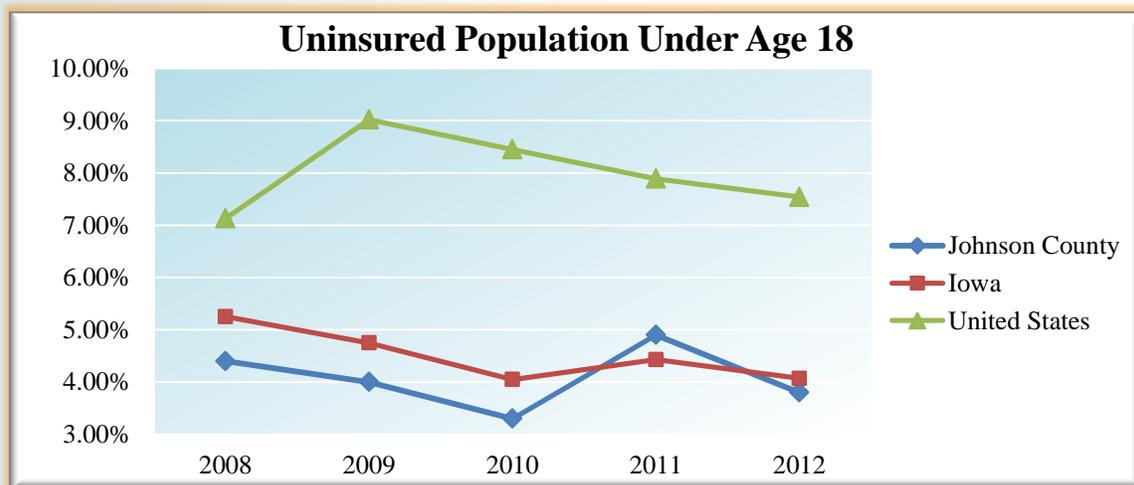


Uninsured Population under Age 18, 2008-2012:

- The percentage of uninsured children under age 18 decreased by 0.6% from 2008 to 2012.

Report Area	2008	2009	2010	2011	2012
Johnson County	4.4%	4%	3.3%	4.9%	3.8%
Iowa	5.25%	4.75%	4.05%	4.43%	4.07%
United States	7.13%	9.02%	8.45%	7.89%	7.54%

Uninsured Population Under Age 18



Source: U.S. Census Bureau - Small Area Health Insurance Estimates 2008-2012, Community Commons – Johnson County

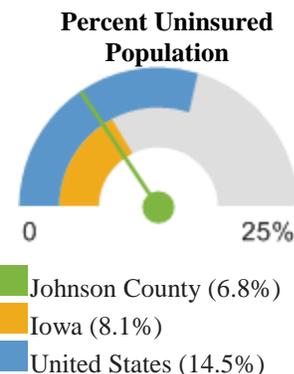


UNINSURED POPULATION

Uninsured Population:

- In 2013, 6.8% of Johnson County residents were uninsured.

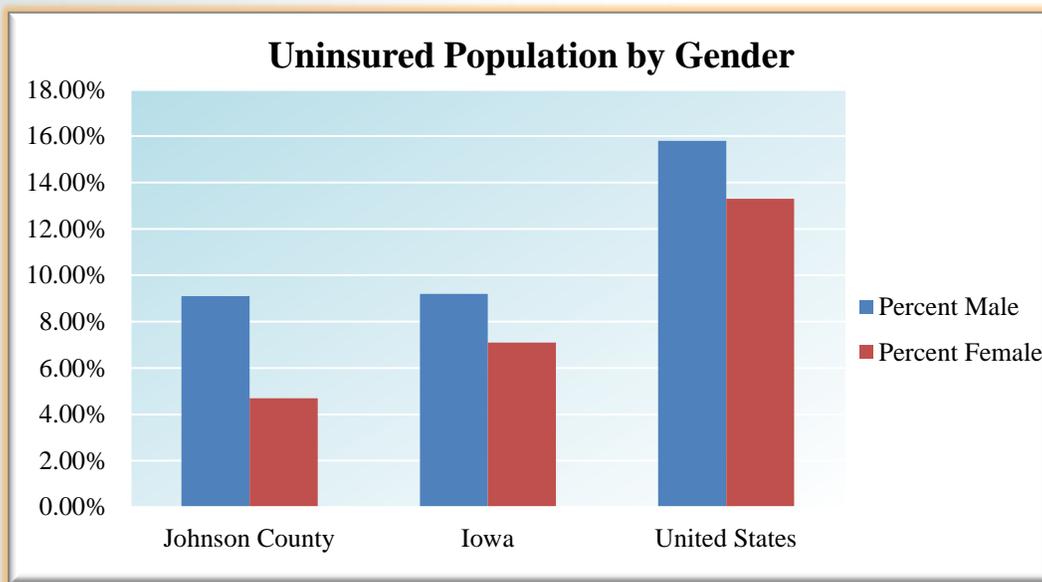
Report Area	Total Population (For whom Insurance Status is Determined)	Total Uninsured Population	Percent Uninsured Population
Johnson County	137,432	9,409	6.8%
Iowa	3,045,284	247,717	8.1%
United States	311,158,104	45,180,675	14.5%



Uninsured Population by Gender:

- In 2013, 4.1% of Johnson County females were uninsured, compared to 9.1% of males.
- The percentage of uninsured males was higher than the percentage of uninsured females in the county, the state, and the country in 2013.

Report Area	Total Male	Total Female	Percent Male	Percent Female
Johnson County, IA	6,139	3,270	9.1%	4.7%
Iowa	137,988	109,729	9.2%	7.1%
United States	24,094,293	21,086,382	15.8%	13.3%



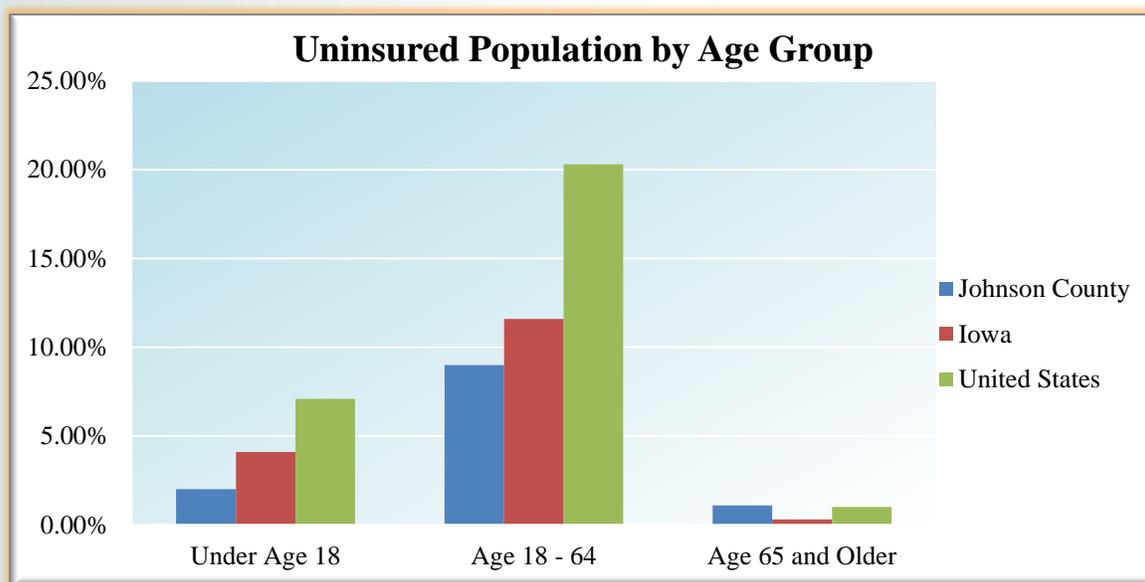


UNINSURED POPULATION

Uninsured Population by Age Group:

- In 2013, 2% of Johnson County residents under age 18 years were uninsured, 9% of residents between the age group of 18-64 were uninsured, and 1.1% of residents age 65 and older were uninsured.

Report Area	Under Age 18		Age 18 - 64		Age 65 and Older	
	Estimate	Percent	Estimate	Percent	Estimate	Percent
Johnson County, IA	564	2.0%	8,701	9.0%	144	1.1%
Iowa	29,755	4.1%	216,471	11.6%	1,491	0.3%
United States	5,234,332	7.1%	39,500,682	20.3%	445,661	1.0%



Uninsured Population by Race/Ethnicity:

- From 2009 – 2013, 6.6% of Whites, 13.1% of Blacks, 27.2% of American Indians, 9.5% of Asians, and 19.7% of Hispanics were uninsured in Johnson County.

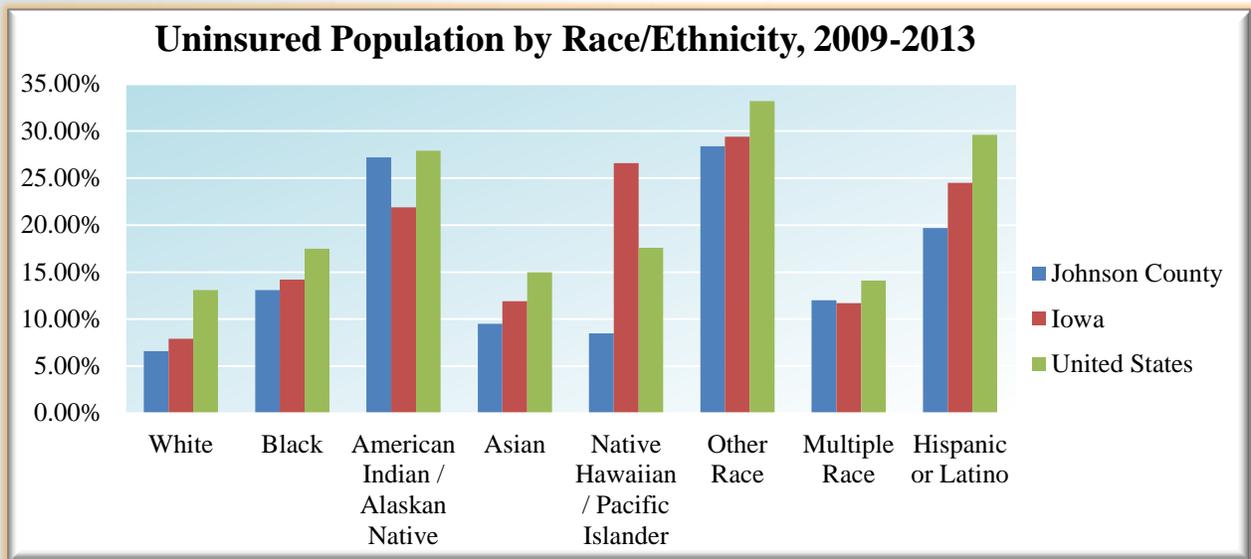
Total Uninsured Population by Race/Ethnicity, 2009-2013

Report Area	White	Black	American Indian / Alaskan Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic Or Latino
Johnson County	7,512	829	98	700	14	612	362	1,308
Iowa	219,042	12,434	1,925	6,648	368	12,515	6,698	38,144
United States	29,854,565	6,629,359	691,616	2,265,542	90,243	4,830,332	1,208,008	15,127,729

UNINSURED POPULATION

Uninsured Population by Race/Ethnicity, Percent

Report Area	White	Black	American Indian / Alaskan Native	Asian	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Race	Hispanic Or Latino
Johnson County	6.6%	13.1%	27.2%	9.5%	8.5%	28.4%	12.0%	19.7%
Iowa	7.9%	14.2%	21.9%	11.9%	26.6%	29.4%	11.7%	24.5%
United States	13.1%	17.5%	27.9%	15.0%	17.6%	33.2%	14.1%	29.6%



Source: American Community Survey, 2013, Community Commons – Johnson County



ACCESS TO PRIMARY CARE

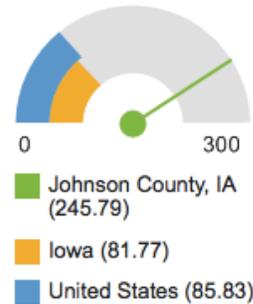
Importance of Indicator: Comprehensive primary care is important for the achievement of overall health. Given the increase in chronic medical conditions in the United States population, access to primary care represents a key area of community health.

Key Findings

- The primary care physician rate in Johnson County has remained relatively stable and higher than state and national rates.
- In Iowa, the percentage of youth with a medical home has remained stable at 67%, while nationally this percentage has declined to 54.4%.
- Iowa currently lags behind Healthy People 2020 goals with only 71% of non-elderly and 86.3% of elderly residents reporting a source of ongoing primary care.

Healthy People 2020: Goals AHS-5.3 and AHS-5.4 are to increase the percent of non-elderly and elderly persons with an ongoing specific source of primary care to at least 89.4 and 100 percent, respectively.

Primary Care Physicians, Rate per 100,000 Pop.

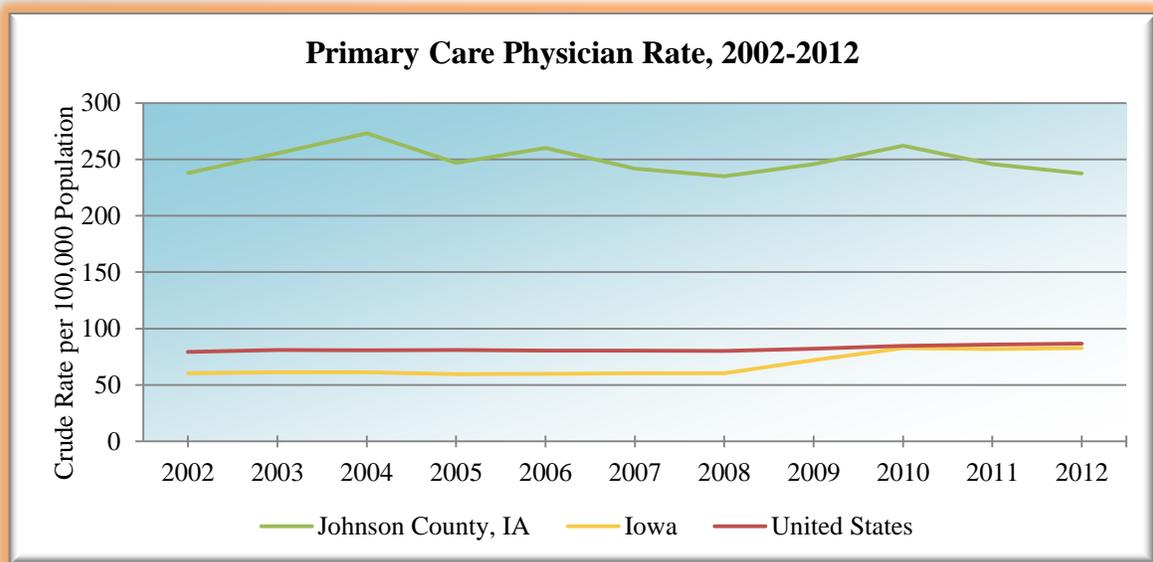


Source: Community Commons - Johnson County 2011

Primary Care Physician Rate per 100,000 Population, 2002-2011

Report Area	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Johnson County	237.9	255.3	273.1	246.9	260.1	241.9	235.0	245.8	262.1	245.8	237.7
Iowa	60.3	61.2	61.1	59.6	59.9	60.3	60.6	72.1	82.7	81.8	82.6
United States	79.4	81.0	80.8	81.0	80.5	80.4	80.2	82.2	84.6	85.8	86.7

Source: Community Commons - Johnson County



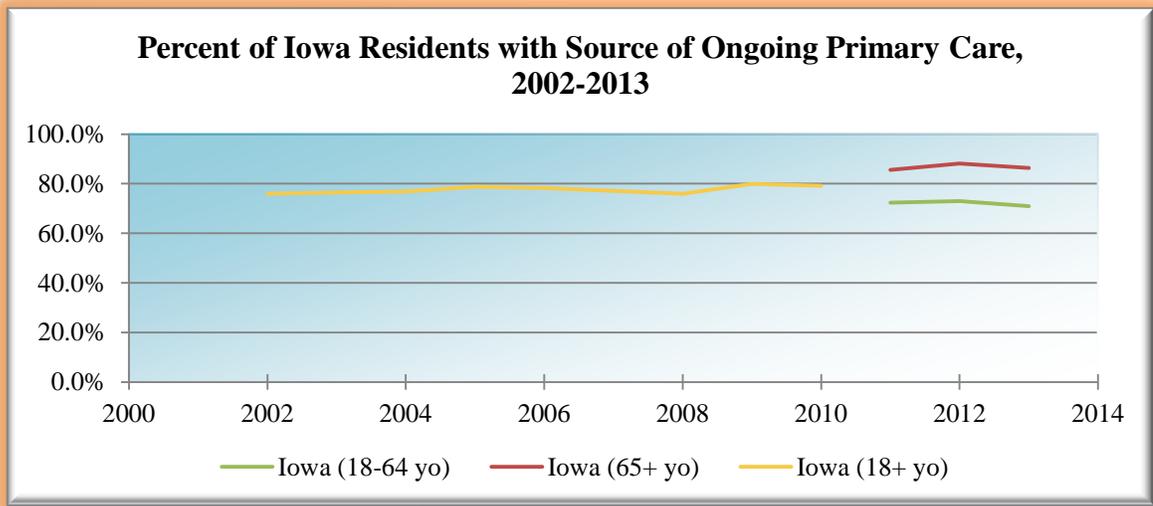


ACCESS TO PRIMARY CARE

Percent of Iowa Residents with a Self-Reported Source of Ongoing Primary Care

Report Area	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Iowa (18-64 yo)	---	---	---	---	---	---	---	---	---	72%	73%	71%
Iowa (65+ yo)	---	---	---	---	---	---	---	---	---	86%	88%	86%
Iowa (18+ yo)	76%	76%	77%	79%	78%	77%	76%	80%	79%	---	---	---

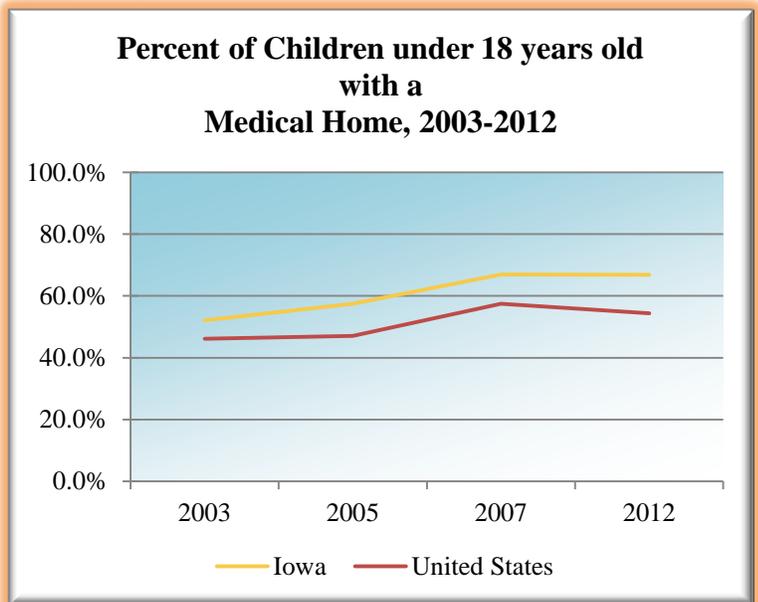
Note: Data prior to 2011 was combined for ages 18+. Source: CDC National Health Interview Survey (NHIS) accessed via Health Indicators Warehouse



Percent of Children under 18 years old with a Medical Home, 2003-2012

Report Area	2003	2005	2007	2012
Iowa	52.1%	57.4%	66.9%	66.8%
United States	46.1%	47.1%	57.5%	54.4%

Source: Community Commons - Johnson County





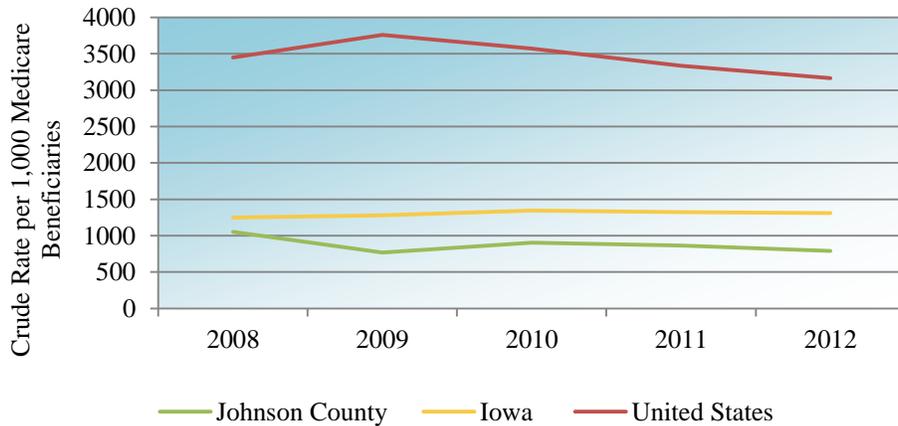
ACCESS TO PRIMARY CARE

Medicare Beneficiaries Home Health Visit Rate per 1,000 Beneficiaries, 2008-2012

Report Area	2008	2009	2010	2011	2012
Johnson County	1,052	769	903	866	791
Iowa	1,249	1,278	1,346	1,323	1,312
United States	3,450	3,760	3,573	3,337	3,166

Note: Rates represent number of visits per 1,000 Beneficiaries. An individual beneficiary can receive more than one home health visit. Source: Chronic Condition Data Warehouse accessed via Health Indicators Warehouse

Medicare Beneficiaries Home Health Visit Rate, 2008-2012



Number of Medicare Beneficiaries utilizing Home Health Services, 2008-2012

Report Area	2008		2009		2010		2011		2012	
	Count	Percent								
Johnson County	367	3.70%	340	3.37%	332	3.20%	365	3.34%	368	3.24%
Iowa	21,388	4.92%	21,818	5.05%	22,824	5.23%	23,165	5.20%	23,967	5.32%
United States	2,953,728	9.05%	3,073,545	9.44%	3,216,206	9.73%	3,236,493	9.59%	3,220,475	9.44%

Source: Chronic Condition Data Warehouse accessed via Health Indicators Warehouse



ACCESS TO PRIMARY CARE IOWA CITY FREE MEDICAL & DENTAL CLINIC

Importance of Indicator: The Iowa City Free Medical and Dental Clinic has served as Johnson County’s community health clinic since 1971 and has provided access to needed care to thousands of uninsured and underinsured individuals who have “fallen through the cracks” of the healthcare system.

While some of the Clinic’s patients have successfully transitioned away from the Clinic and are now covered through Health and Wellness or Marketplace plans, barriers to care remain a challenge for many Clinic users. These barriers include the inability to find an affordable option or not qualifying for an ACA plan. And while the overall annual statistics have decreased (as they should, with the Affordable Care Act), the Free Clinic remains a necessary source of medical and dental care for many people in Johnson County.

Number of Clients Served & Clinic Visits, 2010-2014

	FY10	FY11	FY12	FY13	FY14
Total Clients	2,590	2,491	2,303	2,039	1,908
Total Clinic Visits	6,267	6,210	5,729	5,665	5,493

Age of Clients Served, 2010-2014

Age	FY10	FY11	FY12	FY13	FY14
< 18	109	96	43	40	52
18-24	424	405	360	260	231
25-34	728	674	660	576	519
35-44	468	446	446	398	386
45-64	780	786	703	654	641
65+	81	84	91	111	79

Vouchers Provided to Clients, 2010-2014

Voucher	FY10	FY11	FY12	FY13	FY14
Medication	125	90	80	68	65
Eyeglasses	72	92	87	72	94
Hearing aid	4	2	4	1	2
Joe’s Fund	9	11	10	4	4

Impact of the Affordable Care Act:

The Affordable Care Act has been an important first step in health care reform and has resulted in some changes at the Free Clinic.

- The Clinic has witnessed a slight decline in calls from people in need of appointments for acute health concerns. Yet, calls from people with chronic health conditions in need of our services have remained steady.
- Requests for dental services have increased.
- The Clinic is receiving more calls from Spanish speaking individuals. This has affected the number of patients they are able to serve, as using an interpreter requires more time.
- The percentage of patients in need of services who self-identify as Black or Hispanic is increasing.

The Clinic also serves as a gateway to health insurance coverage. Clinic staff share information with all patients about the ACA. Johnson County’s Federal Navigator is on-site to help patients with enrollment as her schedule allows.

Races of Clients Served, 2010-2014

Race	FY10	FY11	FY12	FY13	FY14
Asian	97	84	84	93	90
Black	427	433	397	379	368
Multi-Racial	56	63	220	100	96
No Answer	59	62	60	73	93
White	1,951	1,849	1,542	1,394	1,261

Ethnicity of Clients Served, 2010-2014

Ethnicity	FY10	FY11	FY12	FY13	FY14
Hispanic	718	717	715	689	642
Non-Hispanic	1,827	1,744	1,576	1,314	1,209
No Answer	45	30	12	36	57

Source: Iowa City Free Medical & Dental Clinic Annual Data



TOP 10 CAUSES OF DEATH

Key Findings

- Similar top ten causes of death were found at the county, state and national levels in 2013 with the exception of the inclusion of kidney disease at the national level.
- Cancer was the leading cause of death in Johnson County, while heart disease led state and national levels.
- The rankings of unintentional injuries and suicide have increased and now rank 4th and 8th respectively at the county level for causes of mortality.
- Overall, Johnson County has lower mortality rates for each of the top ten causes of death compared to the state and nation.

Rankings of Top Ten Leading Causes of Death, 2013

Leading Causes of Death	County Rank	Iowa Rank	U.S. Rank*
Cancer	1	2	2
Heart Disease	2	1	1
Chronic Lower Respiratory Disease	3	3	3
Unintentional Injury	4	5	4
Stroke	5	4	5
Alzheimer's Disease	6	6	6
Flu and Pneumonia	7	7	8
Suicide	8	10	10
Infectious and Parasitic Diseases	9	9	11
Diabetes Mellitus	10	8	7
Kidney Disease	*	11	9

* Data suppressed to maintain confidentiality and therefore rankings are unavailable. Age-Adjusted rates unavailable for 2013 at county and state level. Rankings for county and state levels are based on crude mortality rates. Rankings for national level are based on age-adjusted rates. Source: Vital Statistics of Iowa, 2013, National Vital Statistics Reports, 2013



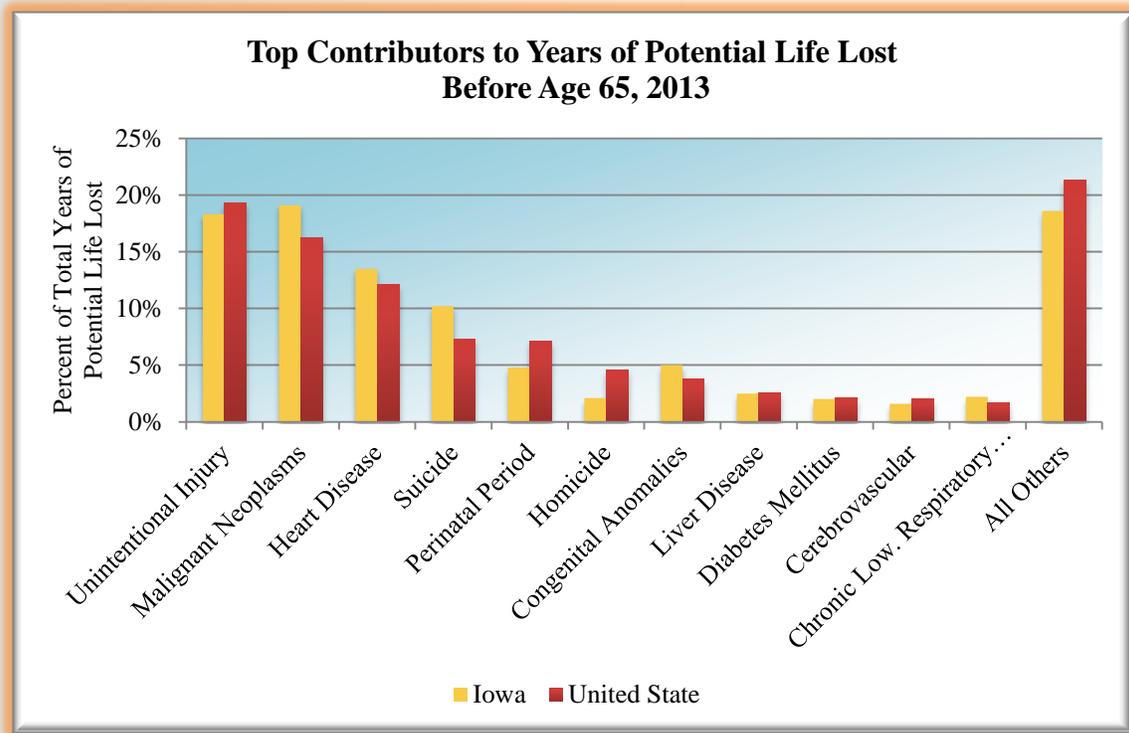
TOP 10 CAUSES OF DEATH

Crude Mortality Rates for Top Ten Causes of Death per 100,000 Population, 2013

Leading Causes of Death	County Rate	Iowa Rate	U.S. Rate
Cancer	118.6	208.6	193.3
Heart Disease	111.4	223.8	185.0
Chronic Lower Respiratory Disease	33.1	60.9	47.2
Unintentional Injury	29.5	44.9	41.3
Stroke	27.3	45.0	40.8
Alzheimer's Disease	23.7	40.4	26.8
Flu and Pneumonia	12.2	24.0	18.0
Suicide	11.5	14.4	13.0
Infective and Parasitic Diseases	8.6	16.5	26.6
Diabetes Mellitus	7.2	24.0	23.9
Kidney Disease	*	11.7	14.9

* Data suppressed to maintain confidentiality and therefore rates are unavailable. Age-Adjusted rates unavailable for 2013 at county and state level. Therefore, all data reflects crude mortality rates. Source: Vital Statistics of Iowa, 2013, National Vital Statistics Reports, 2013, CDC: Years of Potential Life Lost (YPLL) Reports, 1999 – 2013
<http://webappa.cdc.gov/sasweb/ncipc/ypll10.html>

Top Contributors to Years of Potential Life Lost Before Age 65, 2013





CANCER

Importance of Indicator: Cancer is the 2nd leading cause of death in the United States and 1st leading cause of death for residents of Johnson County. Yet, many cancers are preventable by reducing risk factors such as tobacco and alcohol use, physical inactivity and poor nutrition, obesity and ultraviolet light exposure. Vaccinations including the human papillomavirus and hepatitis B vaccines are also available for the prevention of certain types of cancer. In addition, screening tests are an effective method for early detection and sometimes treatment of some types of cancers. Source: HealthyPeople.gov

Healthy People 2020: Goal is to reduce the number of new cancer cases, as well as the illness, disability and death caused by cancer.

Sites of Cancer Associated with Most Cancer Deaths in Iowa

Rank	Males	Females
1	Lung	Lung
2	Prostate	Breast
3	Colon & Rectum	Colon & Rectum
4	Pancreas	Pancreas
5	Leukemia	Ovary

Source: Vital Statistics of Iowa, 2013

Key Findings

- Cancer incidence rates decreased between 2005 and 2011 at all levels.
- Similar to state and national rates, cancer mortality rates in Johnson County have continued to decrease.
- Males have a higher cancer mortality rate compared to females in Johnson County.
- Black individuals have a higher cancer mortality rate compared to whites in Johnson County.
- Lung cancer is the number one cause of cancer death among men and women.
- The 2nd and 3rd leading causes of cancer death among men are prostate and colorectal cancer, respectively.
- The 2nd and 3rd leading causes of cancer death among women are breast and colorectal cancer, respectively.
- Although lung cancer is the leading cause of cancer death, prostate cancer in men and breast cancer in women are the most common cancers to occur in each sex.

Cancer Incidence Rates per 100,000 Population, 2003-2011

Report Area	2004	2005	2006	2007	2008	2009	2010	2011
Johnson County Crude Rate	330.6	394.0	367.4	358.9	391.0	404.3	378.5	372.9
Johnson County Age-Adjusted Rate	455.7	538.0	489.4	461.6	496.5	512.2	460.0	450.7
Iowa Age-Adjusted Rate	484.6	486.4	489.3	486.6	483.4	494.7	486.3	474.9
U.S. Age-Adjusted Rate	477.2	476.9	479.3	482.7	477.8	471.5	456.7	450.6

Source: CDC National Program of Cancer Registries (NPCR) <http://apps.nccd.cdc.gov/USCS/statevsnational.aspx>, Iowa Cancer Registry <http://www.cancer-rates.info/ia/index.php>

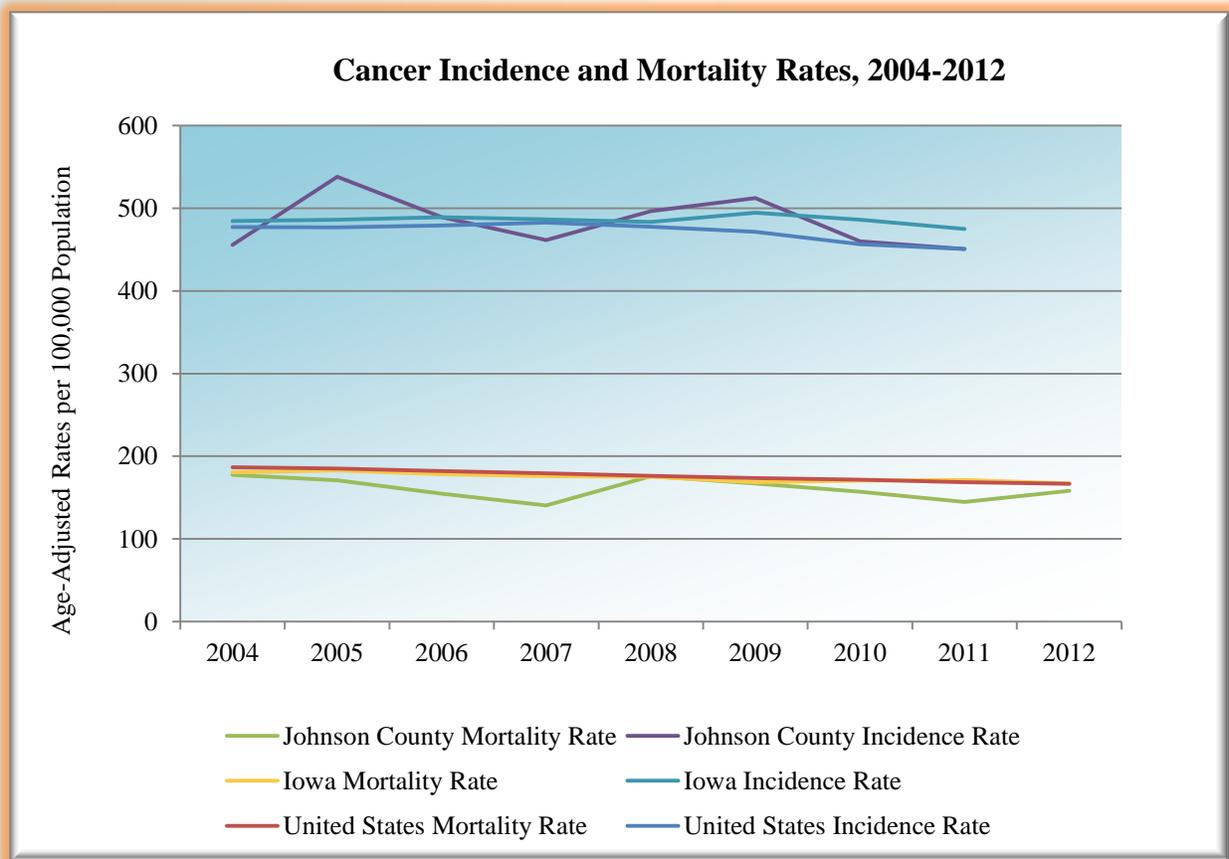


CANCER

Cancer Mortality Rates per 100,000 Population, 2004-2012

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012
Johnson County Crude Rate	119.4	118.0	110.5	105.2	127.5	127.1	119.6	113.1	124.0
Johnson County Age-Adjusted Rate	177.4	171.0	154.7	140.4	176.0	166.9	157.1	144.6	158.1
Iowa Age-Adjusted Rate	180.4	182.8	178.2	176.0	175.3	168.7	170.4	171.2	167.2
U.S. Age-Adjusted Rate	186.8	185.2	182.0	179.3	176.3	173.4	171.8	168.7	166.5

Source: CDC National Program of Cancer Registries (NPCR), Iowa Cancer Registry

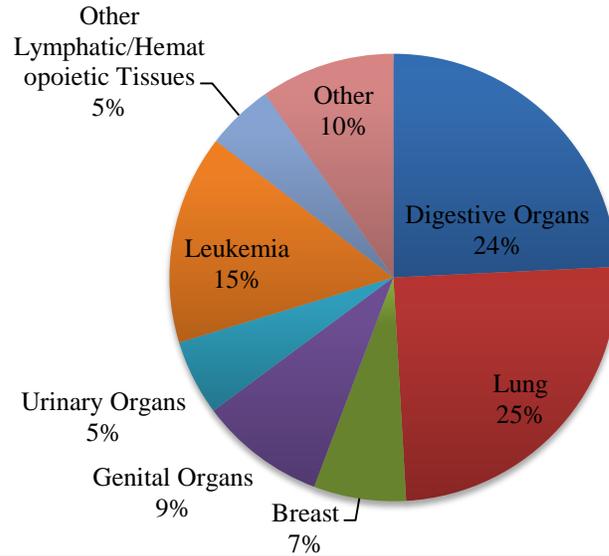




CANCER

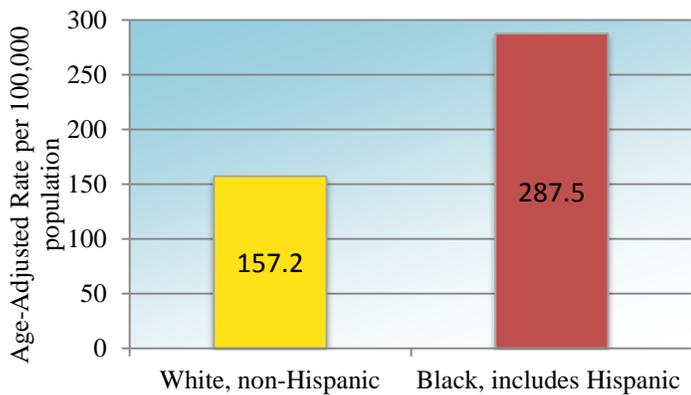
JOHNSON COUNTY DETAILED REPORT

Most Common Types of Cancer in Johnson County, 2013

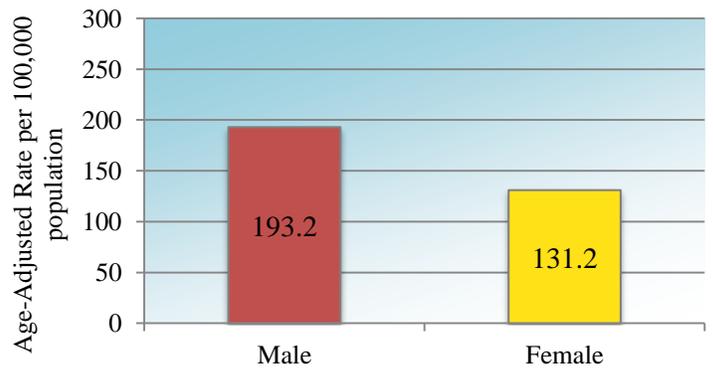


Source: Vital Statistics of Iowa, 2013

Cancer Mortality Rates for Johnson County, 2007-2011*



Cancer Mortality Rates for Johnson County by Sex, 2007-2011



* Data for other races was suppressed to maintain confidentiality. Source: CDC State Cancer Profiles - Iowa



BREAST CANCER

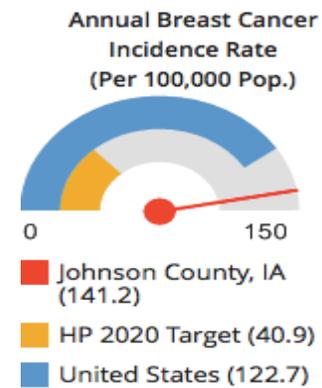
Importance of Indicator: Breast cancer is the most common form of cancer affecting women aside from skin cancer. Risk factors besides being female include increase age, weight gain after age 18, obesity, menopausal hormone therapy, physical inactivity and alcohol use.

Source: American Cancer Society Cancer Facts & Figures 2013
<http://www.cancer.org/acs/groups/content/@epidemiologysurveillance/documents/document/acspc-036845.pdf>

Key Findings

- The average incidence of breast cancer in Johnson County between 2007-2011 was higher than the nation and Healthy People 2020 goal. In part this may reflect greater detection due to the higher number of healthcare resources in the county.
- Johnson County breast cancer mortality rates have varied, but generally declined between 2003-2010. County mortality rates increased slightly in 2011 and 2012. Most recent local breast cancer mortality rates are similar to the state and nation. Iowa met the Healthy People 2020 goal to reduce breast cancer mortality in 2013, while national rates are near meeting the goal.

Healthy People 2020: Goal C-3 is to reduce the rate of death from breast cancer in females to less than 20.7 deaths per 100,000 females.



Source: Community Commons – Johnson County Data, 2007-2011

Breast Cancer Mortality Rates per 100,000 Females, 2000-2013

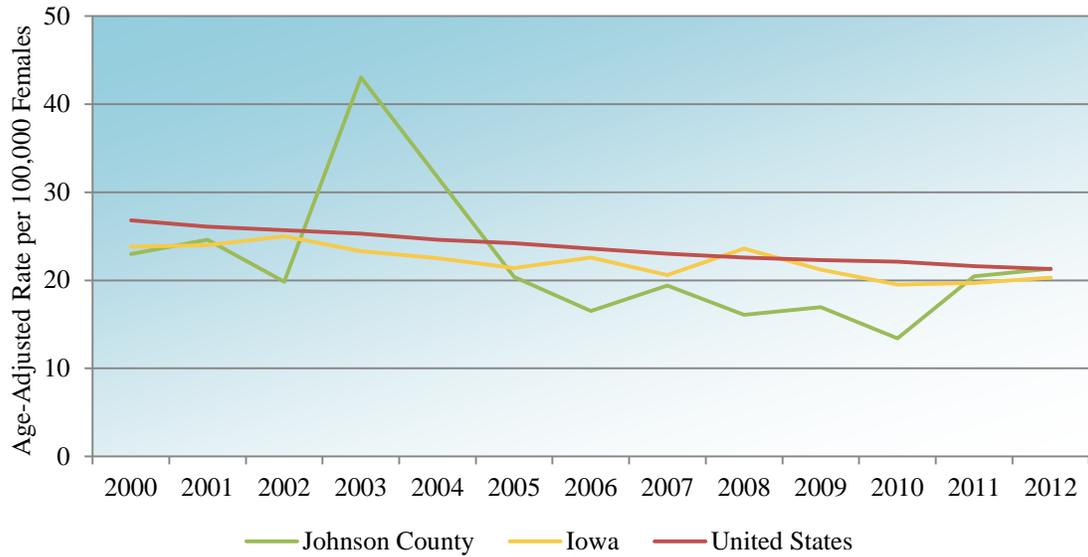
Report Area	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Johnson County Crude Rate	34.0	*	16.5	12.0	16.0	0.0	16.9	12.2	19.5	19.1	15.8
Johnson County Age-Adjusted Rate	43.0	*	20.4	16.5	19.4	16.1	17.0	13.4	20.5	21.3	#
Iowa Age-Adjusted Rate	23.3	22.5	21.4	22.6	20.6	23.6	21.2	19.5	19.7	20.3	18.7
U.S. Age-Adjusted Rate	25.3	24.6	24.2	23.6	23.0	22.6	22.3	22.1	21.6	21.3	20.8

*Counts/rates are suppressed to maintain confidentiality. #Age-Adjusted rate unavailable. Source: Iowa Cancer Registry, CDC Wonder

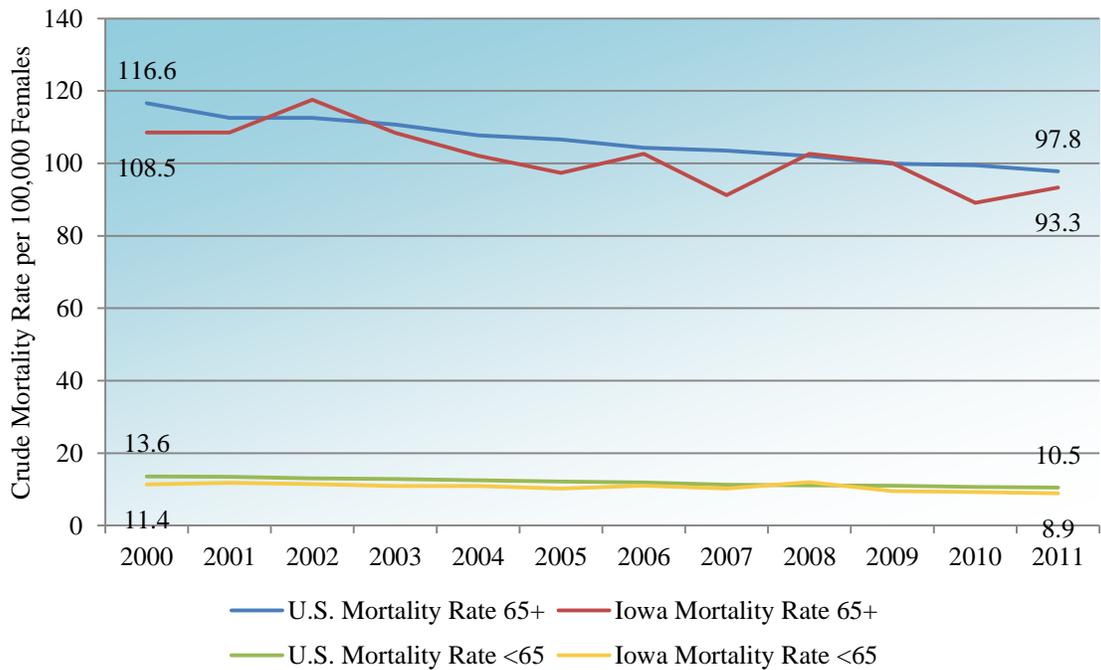


BREAST CANCER

Breast Cancer Mortality in Females, 2000-2012



Breast Cancer Mortality Rate per 100,000 Females by Age, 2000 - 2011



Source: State Cancer Profiles - Iowa

BREAST CANCER SCREENING - MAMMOGRAM

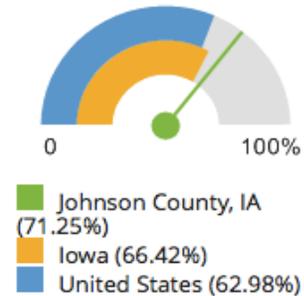
Importance of Indicator: Age appropriate mammogram allows for early detection and treatment of breast cancer. Current recommendations from the American Cancer Society include annual mammograms for women at average risk without breast symptoms starting at age 40. Source: American Cancer Society Facts & Figures 2013

Healthy People 2020: Goal C-17 is to increase the rate of mammography screening for women ages 50-74 to 81.1%. Note: Percentages shown below only reflect female Medicare enrollees.

Key Findings

- Approximately 71% of female Medicare enrollees received a mammogram screening test in the last 2 years.
- Johnson County mammogram screening rates are higher than that of Iowa and national rates.
- Unfortunately, trends have shown a decrease in mammogram screening rates among Medicare enrollees in Johnson County since 2003.

Percent Female Medicare Enrollees with Mammogram in Past 2 Year



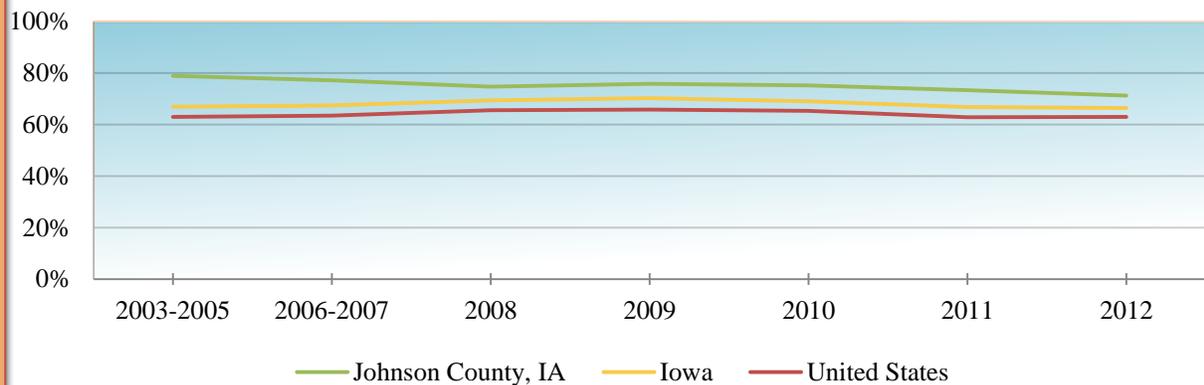
Source: Community Commons - Johnson County, 2012

Percent of Female Medicare Beneficiaries Age 65+ with Mammogram in Past 2 Years, 2003-2012

Report Area	2003-2005	2006-2007	2008	2009	2010	2011	2012
Johnson County	79.0%	77.2%	74.76%	75.81%	75.27%	73.4%	71.25%
Iowa	67.0%	67.4%	69.39%	70.28%	69.09%	66.78%	66.42%
United States	63.0%	63.5%	65.64%	65.87%	65.37%	62.9%	62.98%

Source: BRFFS accessed via Health Indicators Warehouse

Percent of Female Medicare Beneficiaries with Mammogram in Past 2 Years, 2003-2012





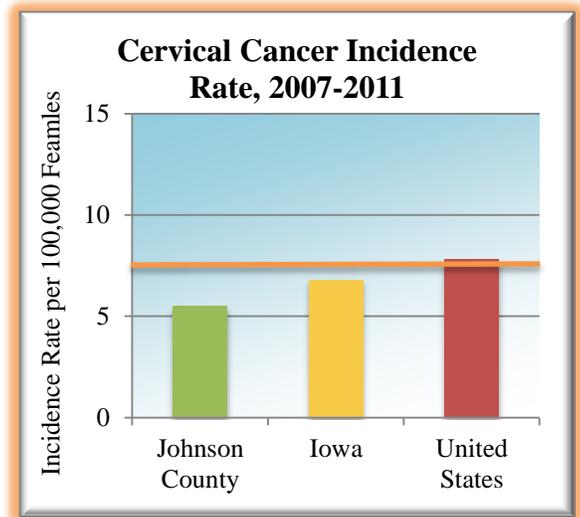
CERVICAL CANCER

Importance of Indicator: Cervical cancer is a preventable cause of significant morbidity and mortality in females. Most cervical cancers are caused by persistent infection with certain types of human papillomavirus (HPV). Two vaccines for the most common types of HPV infection that cause cervical cancer are approved for females 9 to 26 years of age and males 9 to 21 years of age. Risk factors for cervical cancer other than persistent HPV infection include immunosuppression, high parity and tobacco use. Source: American Cancer Society Cancer Facts & Figures 2013

Healthy People 2020: Goal C-4 is to reduce the death rate from cancer of the uterine cervix to less than 2.2 deaths per 100,000 females. Goal C-10 is to reduce the invasive uterine cervical cancer rate to less than 7.5 new cases per 100,000 females.

Key Findings

- Cervical cancer incidence rates in Johnson County are lower than state and national rates and have met Healthy People 2020 goals.
- Mortality data due to cervical cancer at the county level are unreliable because very few deaths attributable to cervical cancer occurred in Johnson County.
- Although county level data is unavailable, Iowa and national data show a racial disparity in mortality due to cervical cancer with Blacks and Hispanics having higher mortality rates compared to whites.



Source: Community Commons - Johnson County, 2007-2011

Annual Cervical Cancer Incidence Rate per 100,000 Females, 2007-2011

Report Area	Female Population	Average New Cases per Year	Annual Incidence Rate (Per 100,000 Pop.)
Johnson County	64,727	3	5.5
Iowa	1,533,866	103	6.8
United States	155,863,552	12,530	7.8
HP 2020 Target			≤ 7.5

Source: Community Commons: Johnson County

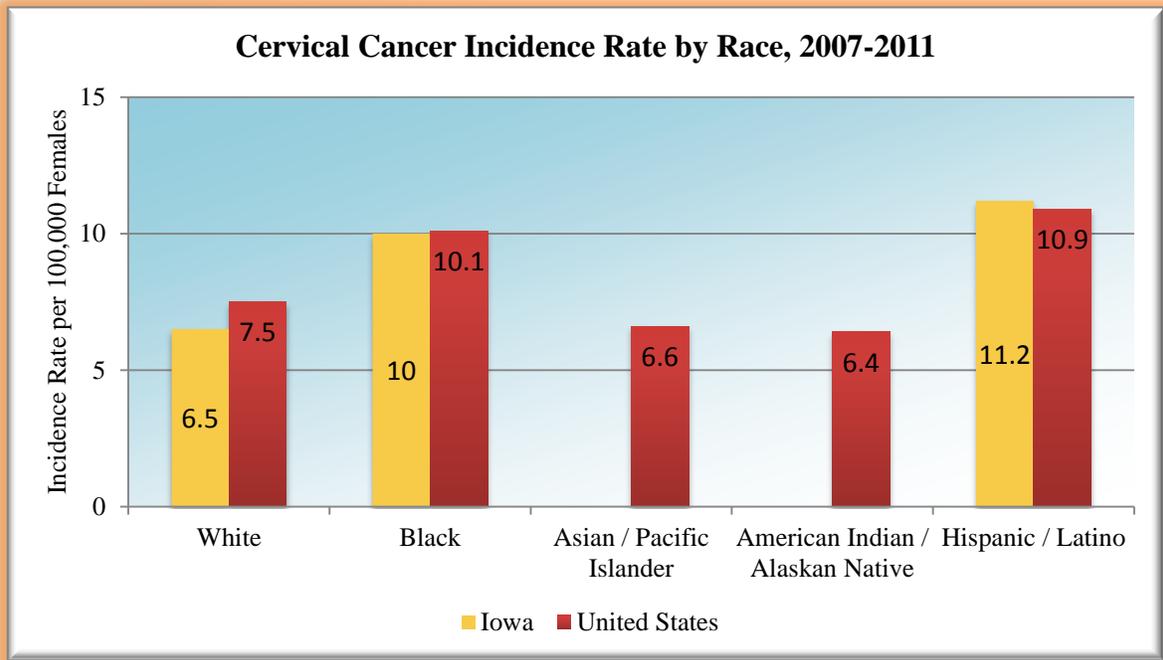
Annual Cervical Cancer Incidence Rate by Race per 100,000 Females, 2007-2011

Report Area	White	Black	Asian / Pacific Islander	American Indian / Alaskan Native	Hispanic / Latino
Iowa	6.5	10	*	*	11.2
United States	7.5	10.1	6.6	6.4	10.9

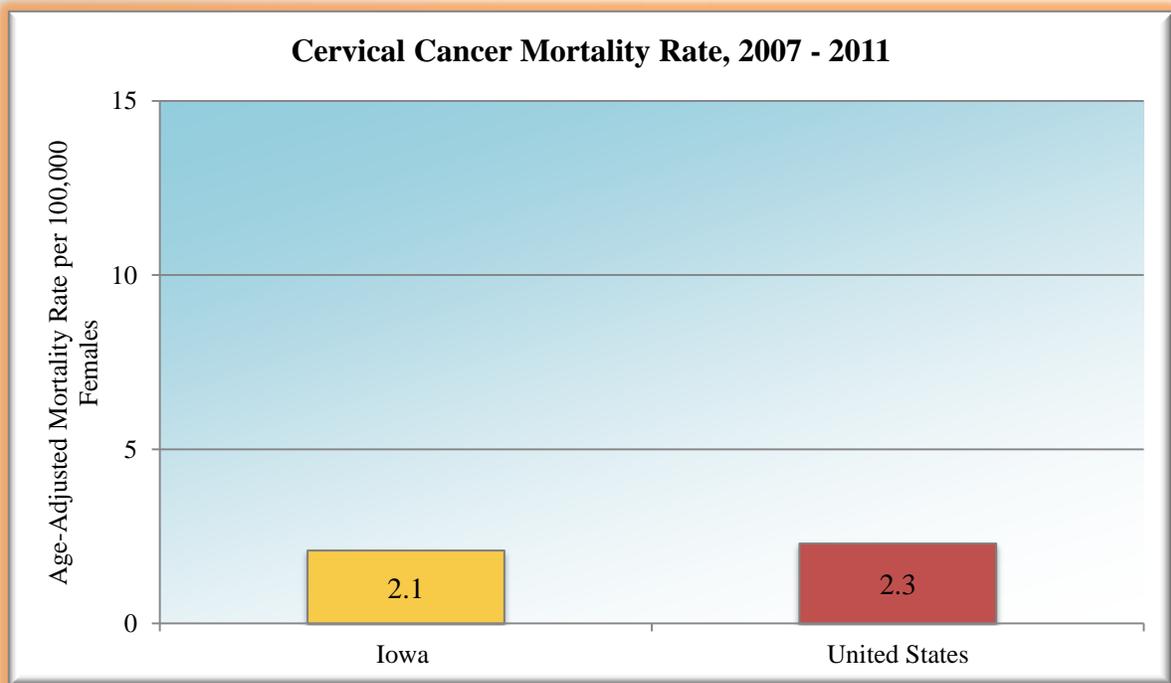
*Data suppressed to maintain confidentiality. Source: Adapted from Community Commons - Johnson County



CERVICAL CANCER



Source: Adapted from Community Commons - Johnson County



Source: Adapted from Community Commons - Johnson County



CERVICAL CANCER SCREENING – PAP TEST

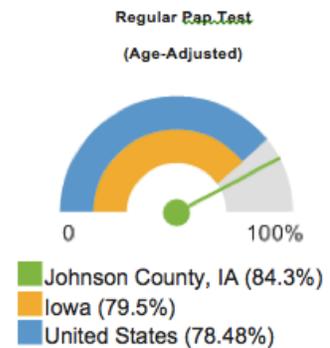
Importance of Indicator: Cervical cancer is one of the most successfully treated cancers if caught early. Age appropriate Pap tests allows for early detection of cervical cancer. Source: American Cancer Society Cancer Facts & Figures 2013

Healthy People 2020: Goal C-15 is to increase the proportion of women age 21-65 who receive a cervical cancer screen to 93%. Note: Percentages below reflect all females with an intact cervix age 18+ years.

Key Findings

- Pap testing rates among female 18 years and older have declined since 2002. However, Johnson County continues to perform higher than Iowa and the nation with 84% of females 18 years and older reporting receiving a Pap test in the previous 3 years.
- It should be noted that only women age 21-65 years of age are recommended to receive Pap tests every 3 years. This may account in part for the decreases noted in testing rates.
- Unfortunately, local data regarding testing among only 21-65 year olds is not available for comparison to Healthy People 2020 Goals.

Percent Adults Females Age 18 with



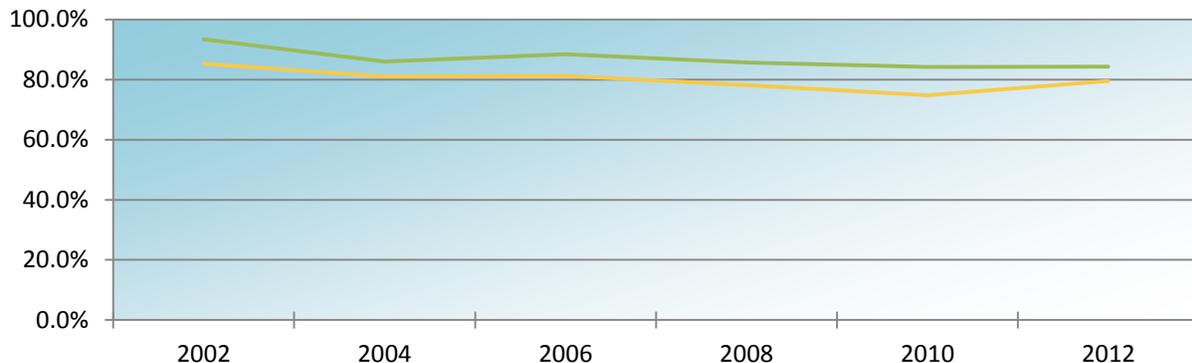
Source: Community Commons - Johnson County, 2006-2012

Percent of Females age 18+ with Pap test in the last 3 years, 2002 – 2010

Report Area	2002	2004	2006	2008	2010	2012
Johnson County	93.4%	86.0%	88.4%	85.7%	84.2%	84.3%
Iowa	85.2%	81.0%	81.2%	78.1%	74.8%	79.5%

Source: BRFSS accessed via Health Indicators Warehouse

Percent of Females age 18+ with Pap Test in the last 3 years, 2002-2012



Source: BRFSS accessed via Health Indicators Warehouse



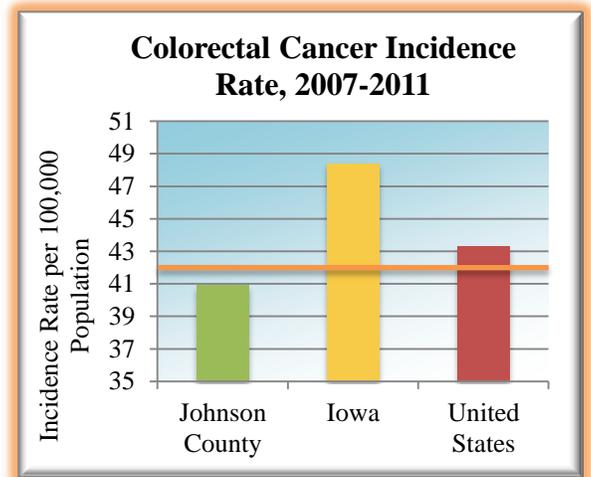
COLORECTAL CANCER

Importance of Indicator: Colorectal cancer is the third most common cause of cancer death in both men and women. Non-modifiable risk factors for colorectal cancer include increasing age, family history of colorectal cancer or polyps, inflammatory bowel disease and certain genetic conditions. Modifiable risk factors include obesity, physical inactivity, diet high in red or processed meat, alcohol use, cigarette smoking, and low fiber intake. Source: American Cancer Society Cancer Facts & Figures 2013

Key Findings

- Johnson County colorectal cancer incidence rates are slightly lower than the national average, but are still higher than Healthy People 2020 goals.
- Johnson County colorectal cancer mortality rates are similar to national rates and remain higher than the Healthy People 2020 goal.

Healthy People 2020: Goal C-5 is to reduce the colorectal cancer death rate to less than 14.5 deaths per 100,000 population. Goal C-9 is to reduce the invasive colorectal cancer rate to less than 41.6 new cases per 100,000 population.



Source: Community Commons - Johnson County, 2007-2011

Age-Adjusted Annual Colorectal Cancer Incidence Rates per 100,000 Population, 2007-2011

Report Area	Total Population	Average New Cases per Year	Annual Incidence Rate (Per 100,000 Pop.)
Johnson County	129,159	40	40.9
Iowa	3,032,266	1,753	48.4
United States	306,603,776	142,173	43.3
HP 2020 Target			<= 41.6

Source: Community Commons - Johnson County

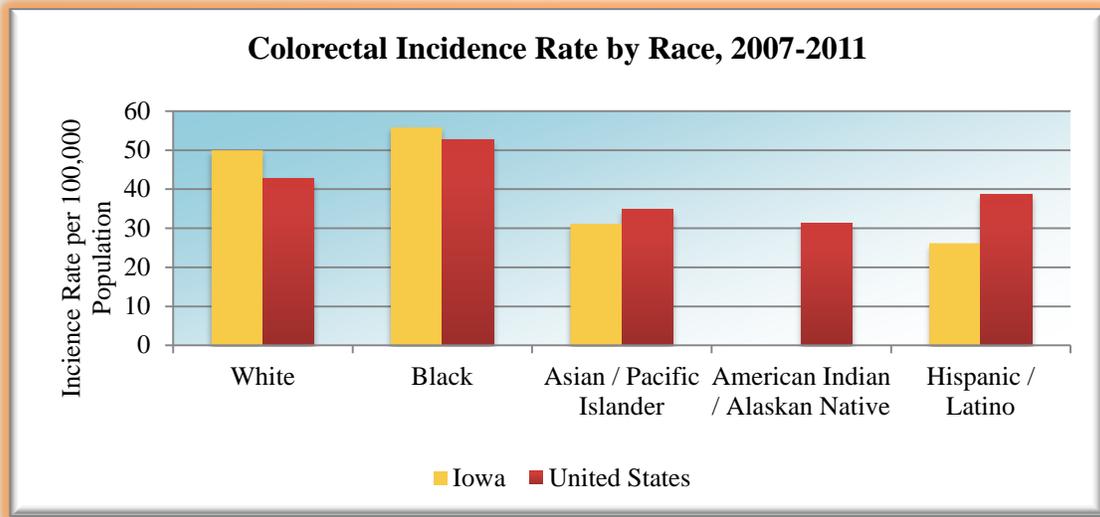
Age-Adjusted Annual Colorectal Cancer Incidence Rates by Race per 100,000 Population, 2007-2011

Report Area	White	Black	Asian / Pacific Islander	American Indian/ Alaskan Native	Hispanic/ Latino
Iowa	49.9	55.8	31.1	*	26.1
United States	42.7	52.5	34.7	31.3	38.7

* Data suppressed to maintain confidentiality. Source: Adapted from Community Commons - Johnson County



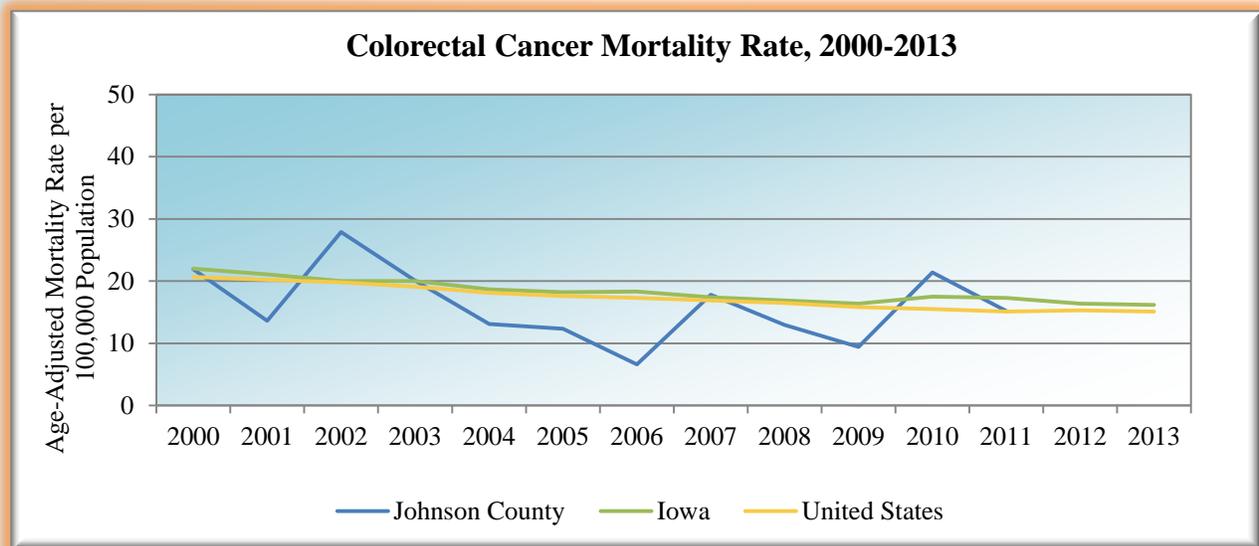
COLORECTAL CANCER



Colorectal Cancer Mortality Rate per 100,000 Population, 2000-2013

Report Area	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Johnson County Crude Rate	12.86	8.41	8.31	4.91	14.45	9.44	7.7	15.99	11.23	8.80	10.06
Johnson County Age-Adjusted Rate	20.08	13.08	12.33	6.60*	17.81	12.97	9.44	21.37	15.18	#	#
Iowa Age-Adjusted Rate	20	18.7	18.2	18.3	17.4	16.9	16.4	17.5	17.3	16.40	16.20
U.S. Age-Adjusted Rate	19.1	18.1	17.6	17.3	16.9	16.5	15.8	15.5	15.1	15.30	15.10

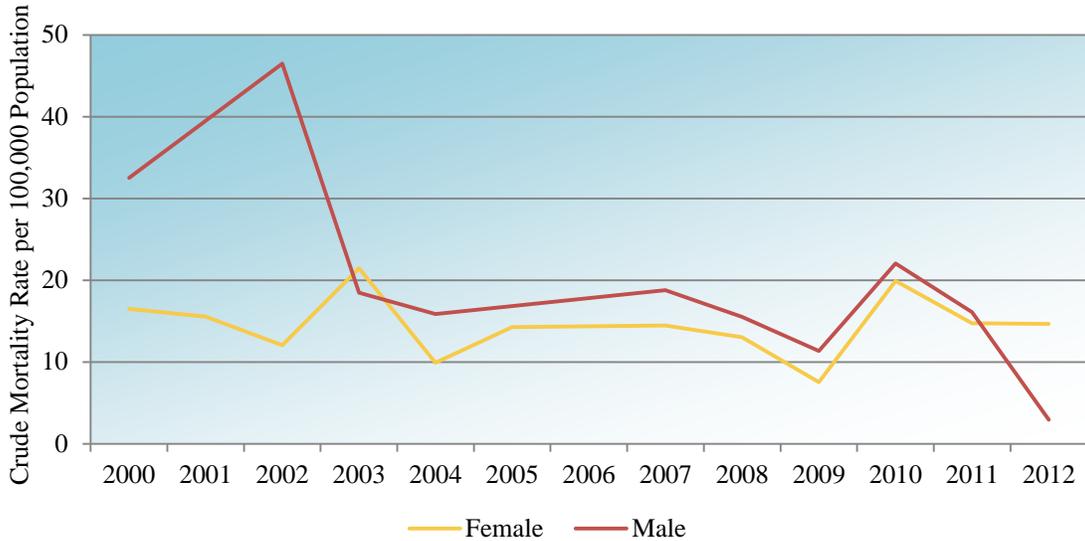
*Rate unreliable. #Age-Adjusted rate not available. Source: Iowa Cancer Registry, State Cancer Profiles - Iowa, CDC Wonder





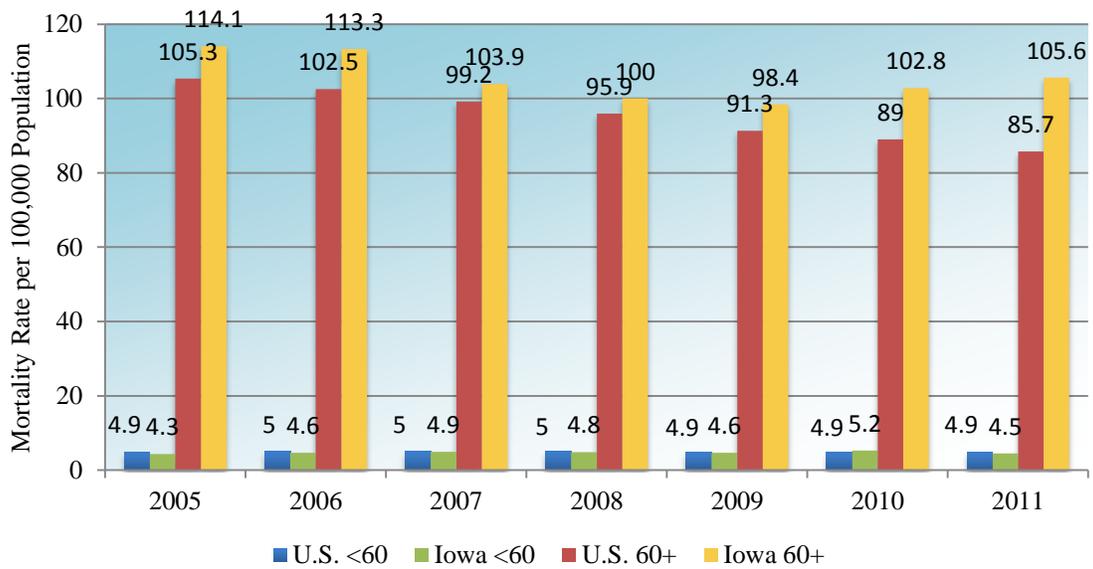
COLORECTAL CANCER

Johnson County Colorectal Cancer Mortality Rate by Gender, 2000-2012



Source: Iowa Cancer Registry, State Cancer Profiles – Iowa, CDC Wonder

Johnson County Colorectal Cancer Mortality Rate by Age, 2005-2011



Source: CDC Wonder



COLORECTAL CANCER SCREENING – COLONOSCOPY/SIGMOIDOSCOPY

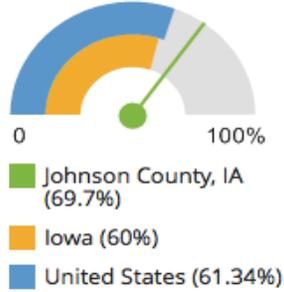
Importance of Indicator: Age appropriate colonoscopy/sigmoidoscopy screening allows for the removal of polyps that could potentially become cancerous, as well as the detection of colorectal cancer at early stages. The American Cancer Society currently recommends people with average risk to begin colorectal cancer screening at age 50. Source: American Cancer Society Facts & Figures 2013

Key Findings

- Johnson County colonoscopy/sigmoidoscopy colon cancer screening rates are higher than those in the state and national.
- Among Johnson County residents age 50 and older, approximately 75% report ever having a colonoscopy/sigmoidoscopy.

Healthy People 2020: Goal C-16 is to increase the proportion of adults age 50-75 years who receive a colorectal cancer screening to 70.5%.

Percent Adults Screened for Colon Cancer (Age-Adjusted)



Source: Community Commons – Johnson County, 2006-2012

Percent Adults age 50+ who report ever having a Colonoscopy/Sigmoidoscopy, 2002-2012

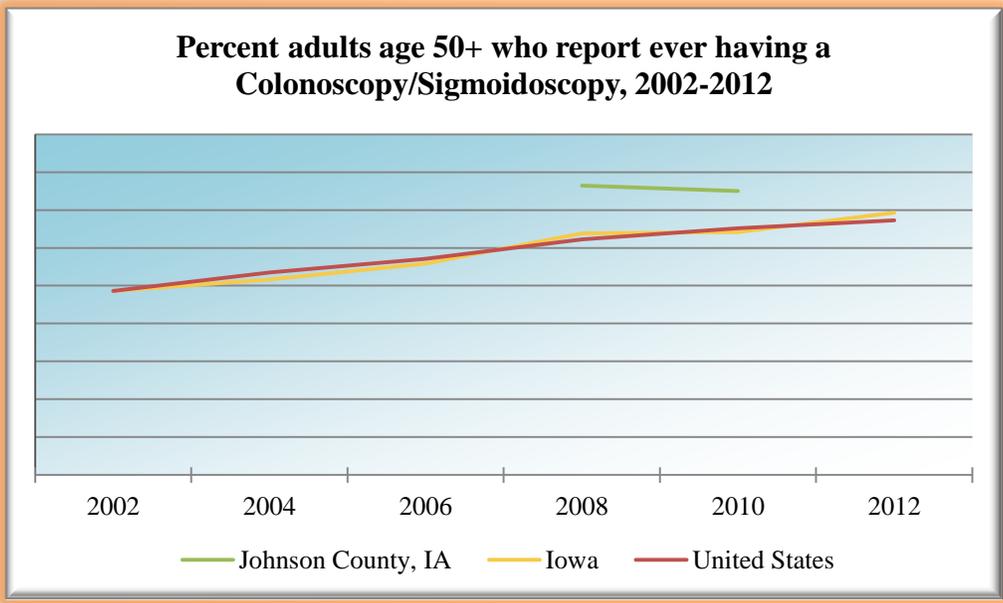
Report Area	2002	2004	2006	2008	2010	2012
Johnson County	*	*	*	76.4%	75.0%	*
Iowa	48.6%	51.6%	55.8%	63.8%	64.2%	69.3%
United States	48.6%	53.5%	57.1%	62.2%	65.2%	67.3%

*Percentage unreliable. Source: BRFSS accessed via Health Indicators Warehouse

Age-Adjusted Percent of Adults Screened for Colon Cancer, 2006-2012

Report Area	Percent
Johnson County	69.70%
Iowa	60%
United States	61.34%

Source: Community Commons – Johnson County





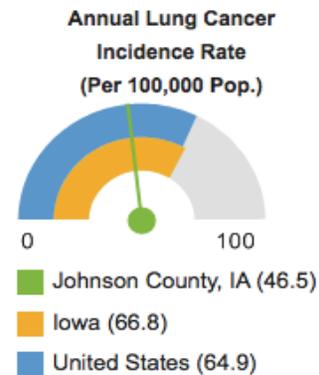
LUNG CANCER

Importance of Indicator: Lung cancer is the leading cause of cancer mortality in both men and women. The most important risk factor for lung cancer is tobacco smoking and secondhand smoke. Radon gas released from the soil is the second leading cause of lung cancer in the U.S. Additional risk factors include asbestos exposure, air pollution and exposure to certain metals. Source: American Cancer Society Facts & Figures 2013

Healthy People 2020: Goal C-2 is to reduce the lung cancer death rate to less than 45.5 deaths per 100,000 population.

Key Findings

- Lung cancer incidence rates in Johnson County are lower than state and national levels.
- Lung cancer mortality rates have steadily declined at state and national levels. Johnson County rates have been more variable, but generally declined.

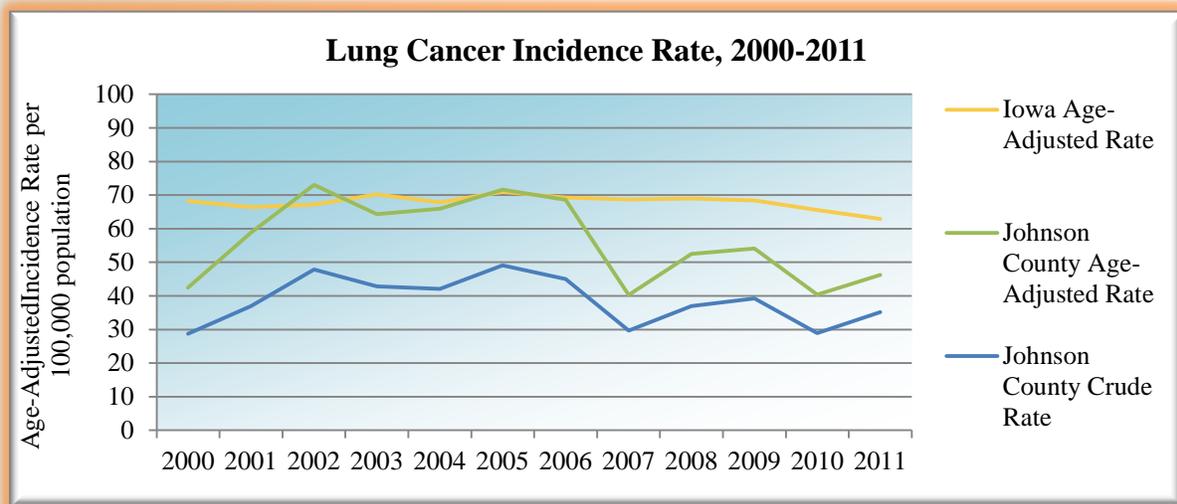


Source: Community Commons: Johnson County, 2007-2011

Lung Cancer Incidence Rate per 100,000 Population, 2000-2011

Report Area	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Johnson County Crude Rate	28.71	36.99	47.85	42.85	42.06	49.04	45	29.71	36.97	39.27	28.94	35.19
Johnson County Age-Adjusted Rate	42.49	58.82	73	64.35	65.9	71.58	68.62	40.27	52.46	54.15	40.33	46.28
Iowa Age-Adjusted Rate	68.24	66.45	67.17	70.2	67.79	70.99	69.23	68.72	68.94	68.43	65.6	62.87

Source: Iowa Cancer Registry





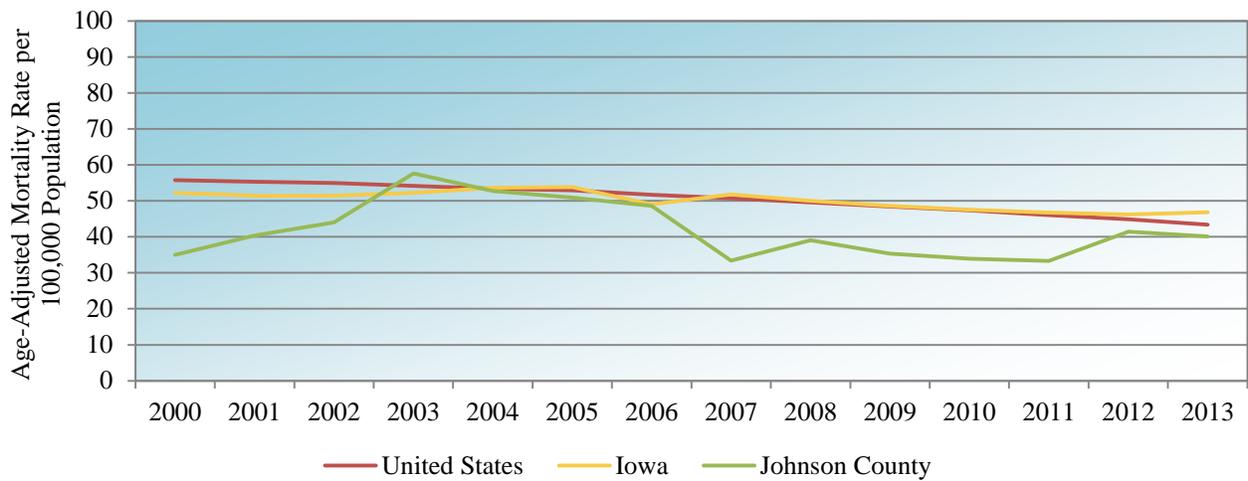
LUNG CANCER

Lung Cancer Mortality Rate per 100,000 Population, 2000-2013

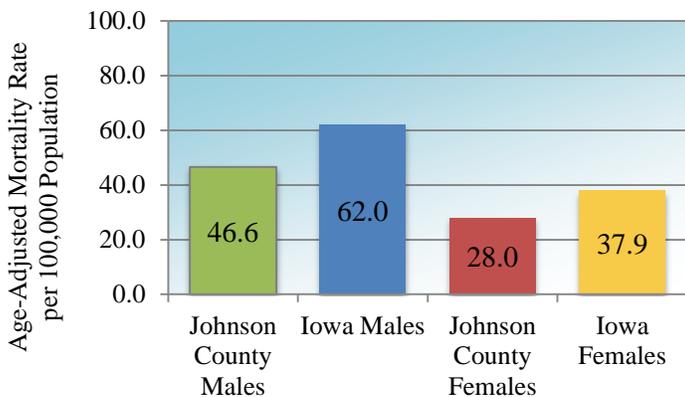
Report Area	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Johnson County	44.0	57.7	52.7	50.9	48.6	33.4	39.1	35.3	33.9	33.3	41.4	40.1
Iowa	51.4	52.2	53.6	53.8	49	51.8	50	48.6	47.5	46.7	46.2	46.8
United States	55	54.2	53.4	52.9	51.7	50.7	49.6	48.4	47.4	46	44.9	43.4

Source: Iowa Cancer Registry, State Cancer Profiles - Iowa, CDC Wonder

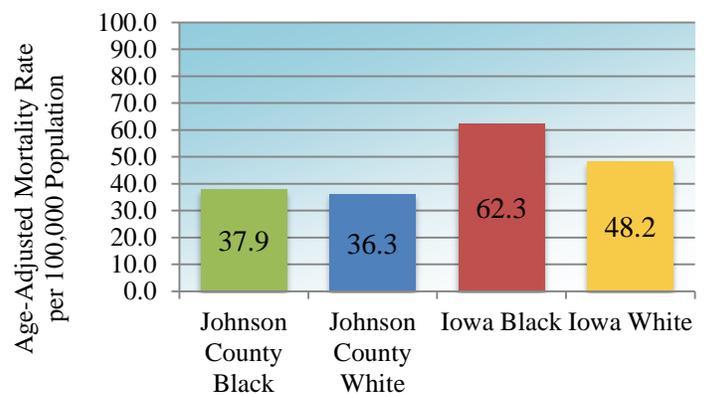
Lung Cancer Mortality Rate, 2000-2013



Lung Cancer Mortality Rate by Gender, 2007-2012



Lung Cancer Mortality Rate by Race, 2007-2012



Note: Lung cancer mortality rates for Hispanic/Latino, American Indian/Alaskan Native, and Asian/Pacific Islanders have been suppressed to maintain confidentiality. Source: Iowa Cancer Registry.



PROSTATE CANCER

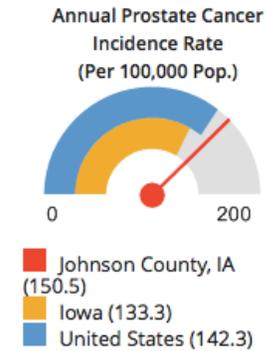
Importance of Indicator: Prostate cancer is the most common form of cancer aside from skin cancer to be diagnosed in males and the second most common cause of cancer death among males. Risk factors associated with prostate cancer include increasing age, African ancestry and family history of prostate cancer.

Source: American Cancer Society Facts & Figures 2013

Key Findings

- The incidence rate of prostate cancer is higher in Johnson County than both the state and national levels.
- The mortality rate of prostate cancer in Johnson County has risen since 2010 and age-adjusted mortality rates are similar to state levels.

Healthy People 2020: Goal C-7 is to reduce the prostate cancer death rate to less than 21.8 deaths per 100,000 males.

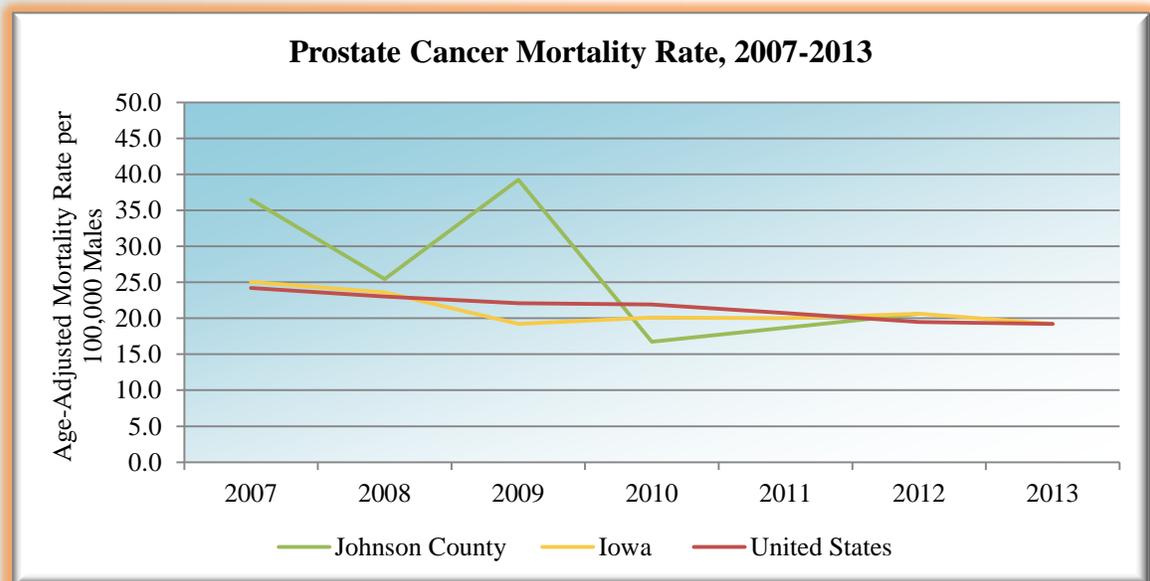


Source: Community Commons – Johnson County, 2007-2011

Annual Prostate Mortality Rate per 100,000 Males, 2007-2013

Report Area	2007	2008	2009	2010	2011	2012	2013
Johnson County Crude Rate	19.4	12.6	21.6	10.7	*	13.2	11.6
Johnson County Age-Adjusted Rate	36.5	25.5	39.2	16.8	*	20.6	#
Iowa Age-Adjusted Rate	25.1	23.6	19.2	20.1	20.0	20.6	19.2
United States Age-Adjusted	24.2	23.0	22.1	21.9	20.7	19.5	19.2

* Rates suppressed to maintain confidentiality. #Age-Adjusted rate unavailable. Source: Iowa Cancer Registry, CDC Wonder





SKIN CANCER - MELANOMA

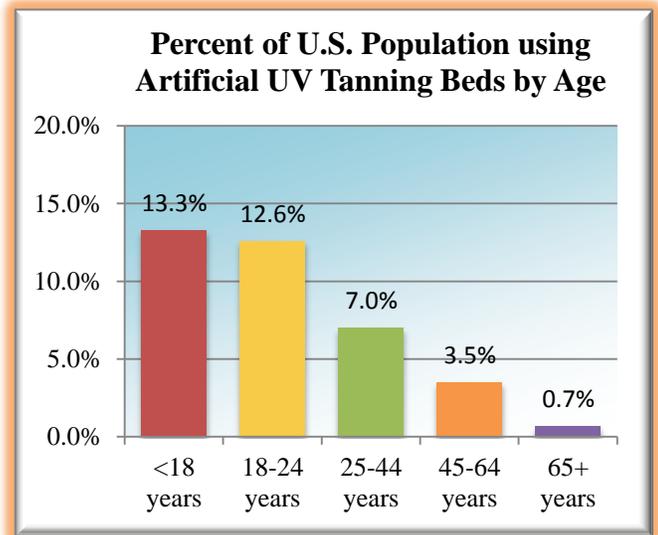
Important of Indicator: Non-melanoma skin cancers represent the most common forms of cancer in both men and women, but estimates are difficult to obtain because cases are not required to be reported to cancer registries. Melanoma is the 5th most common form of cancer in the United States and the 2nd most common form of cancer in women under the age of 40. Skin cancer is preventable. The primary risk factor for skin cancer is ultraviolet (UV) irradiation from sun exposure and tanning bed use.

Source: American Cancer Society Facts & Figures 2013

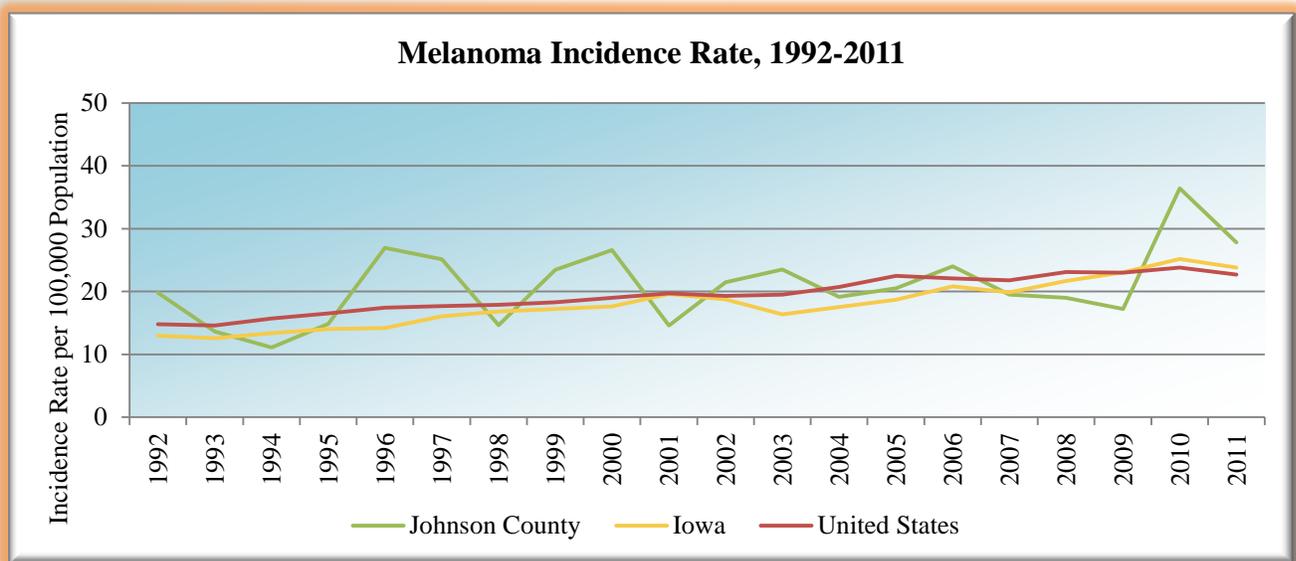
Key Findings:

- Melanoma incidence rates in Johnson County have varied over the last two decades, but more recently spiked. Most recent Johnson County rates are higher than state and national rates.
- Iowa melanoma mortality rates are higher than national rates and Healthy People 2020 goals.
- Although county level data is unavailable, national data show those under 18 years of age are most likely to use tanning beds. In addition, 89% of teenagers report not using sun protective behaviors.

Healthy People 2020: Goal C-8 is to reduce the melanoma death rate to less than 2.4 deaths per 100,000 population. Goal C-20 is made up of six objectives with the overall goal to increase the proportion of persons who participate in behaviors that reduce their exposure to harmful UV irradiation and avoid sunburns.



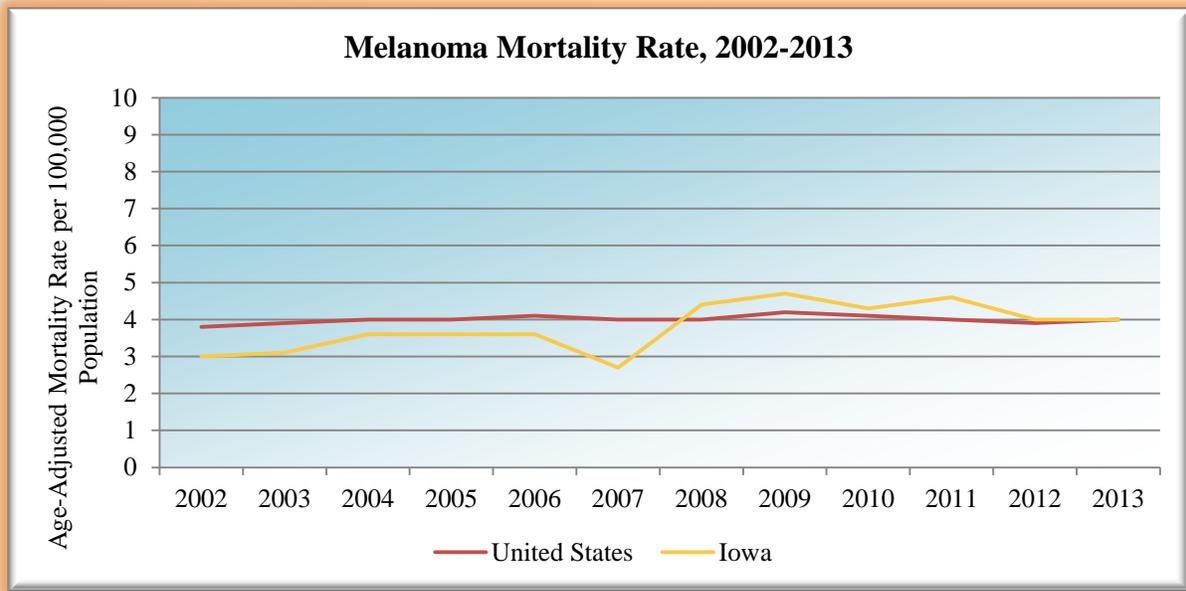
Note: 2011 data used for <18 years and 2010 data used for all other age groups. Source: CDC National Health Interview Survey (NHIS) via Health Indicators Warehouse



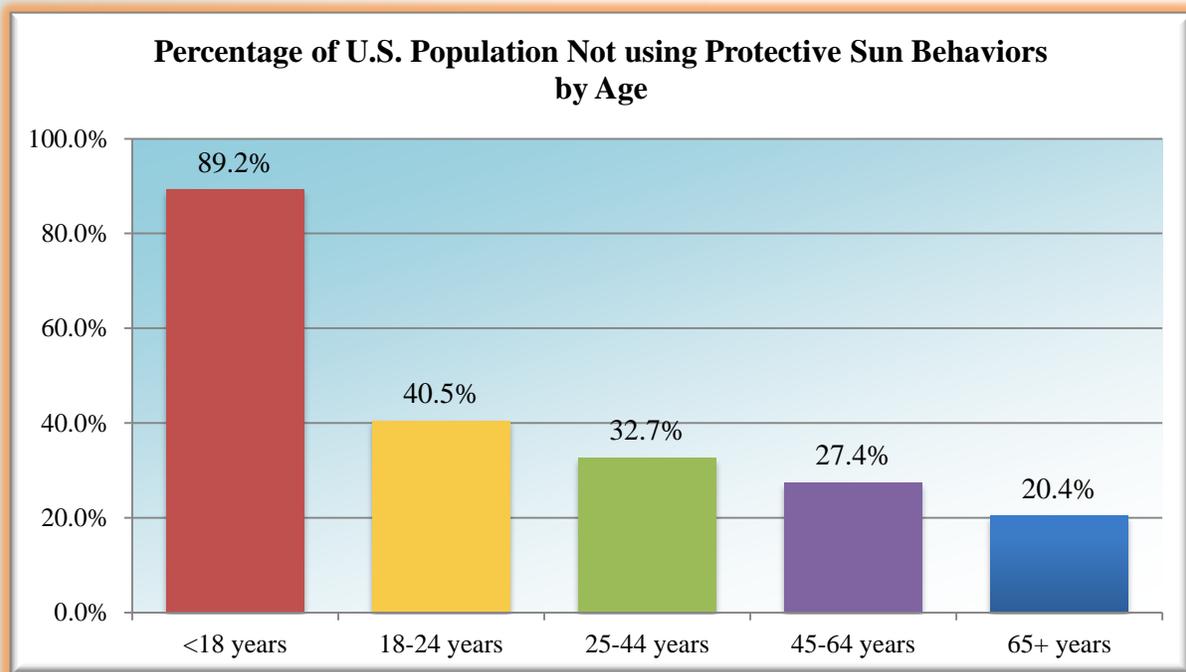
Source: Iowa Cancer Registry



SKIN CANCER - MELANOMA



Source: CDC Wonder



Note: 2011 data used for <18 years and 2010 data used for all other age groups. Source: CDC National Health Interview Survey (NHIS) via Health Indicators Warehouse



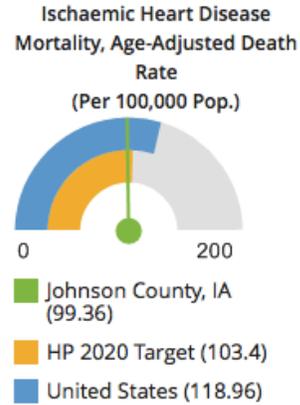
HEART DISEASE

Importance of Indicator: Heart disease is the 2nd leading cause of death in the Johnson County and the 1st in Iowa and the nation. Major modifiable risk factors include tobacco use, high cholesterol, high blood pressure, diabetes, obesity and physical inactivity.

Key Findings:

- Approximately 2% of adults in Johnson County report ever being told they have heart disease. This is lower than state and national levels.
- Among Medicare beneficiaries in Johnson County, 18% report having been diagnosed with heart disease.
- Johnson County coronary heart disease mortality rates have met the Health People 2020 goal, yet significant room for improvement remains.
- Males have a higher mortality rate due to coronary heart disease compared to females at the county, state and national levels.

Healthy People 2020: Goal HDS-2 is to reduce the coronary heart disease deaths rate to less than 103.4 deaths per 100,000 population.



Source: Community Commons – Johnson County, 2007-2011

Prevalence of Coronary Heart Disease in Adults age 18+ years, 2012

Report Area	Adults with Heart Disease	Percent Adults with Heart Disease
Johnson County	1,769	2.02%
Iowa	96,325	4.17%
United States	10,407,185	4.40%

Source: Community Commons – Johnson County

Prevalence of Coronary Heart Disease in Medicare Beneficiaries, 2012

Report Area	Beneficiaries with Heart Disease	Percent with Heart Disease
Johnson County	2,049	18.05%
Iowa	113,834	25.25%
United States	9,744,058	28.55%

Source: Community Commons – Johnson County

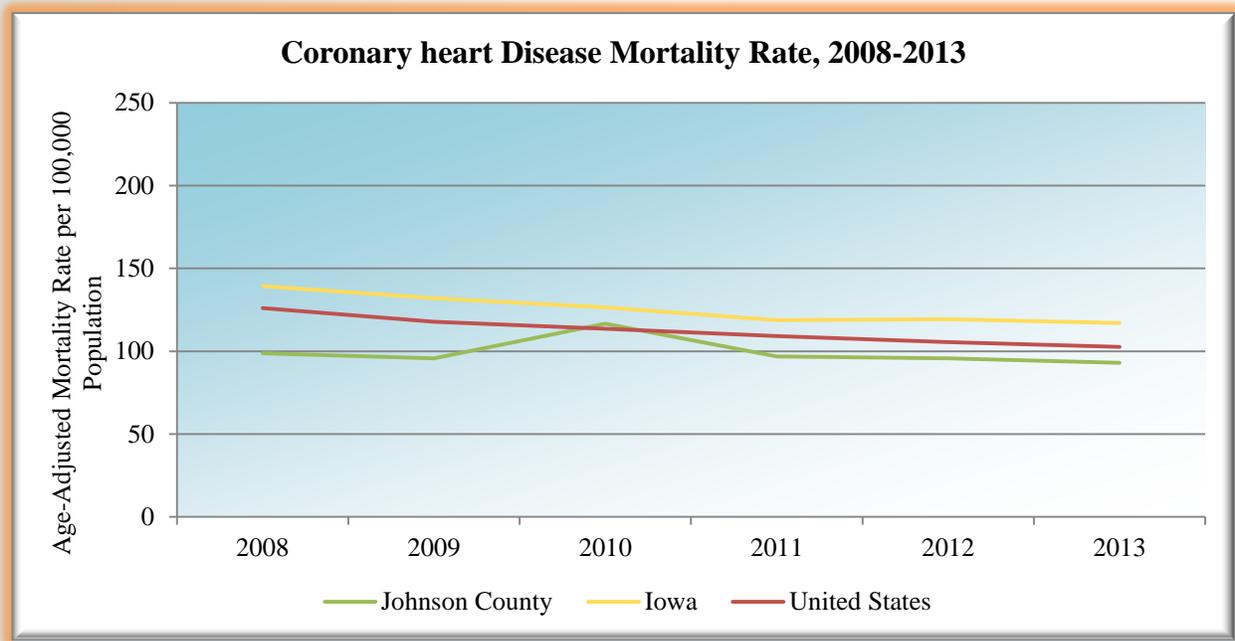


HEART DISEASE

Coronary Heart Disease Mortality Rate per 100,000 Population, 2008-2013

Rate Type	Report Area	2008	2009	2010	2011	2012	2013
Crude Rate	Johnson County	73.2	70.1	86.3	76.7	78.5	74.7
	Iowa	181	170.7	164.6	156.4	158.4	156.1
	United States	133.3	125.9	122.9	120.4	118.3	117.1
Age-Adjusted Rate	Johnson County	98.7	95.6	116.7	96.9	95.6	93
	Iowa	139.3	132	126.5	118.7	119.3	117
	United States	126.1	117.7	113.6	109.2	105.4	102.6

Source: CDC Wonder





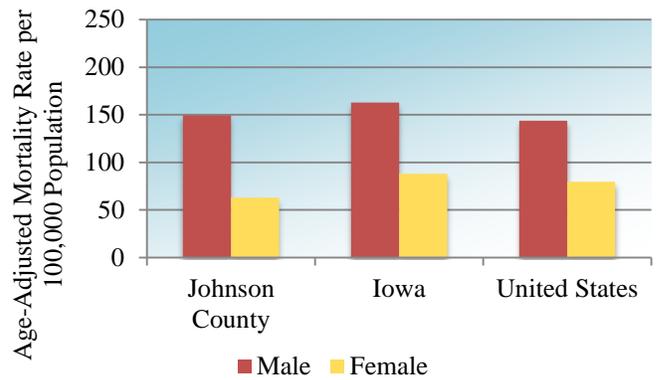
HEART DISEASE

Age-Adjusted Coronary Heart Disease Mortality Rate per 100,000 population by Gender, 2010-2013

Report Area	Male	Female
Johnson County	149.6	62.7
Iowa	162.9	87.8
United States	143.8	79.6

Source: CDC Wonder

Coronary Heart Disease Mortality Rate by Gender, 2010-2013

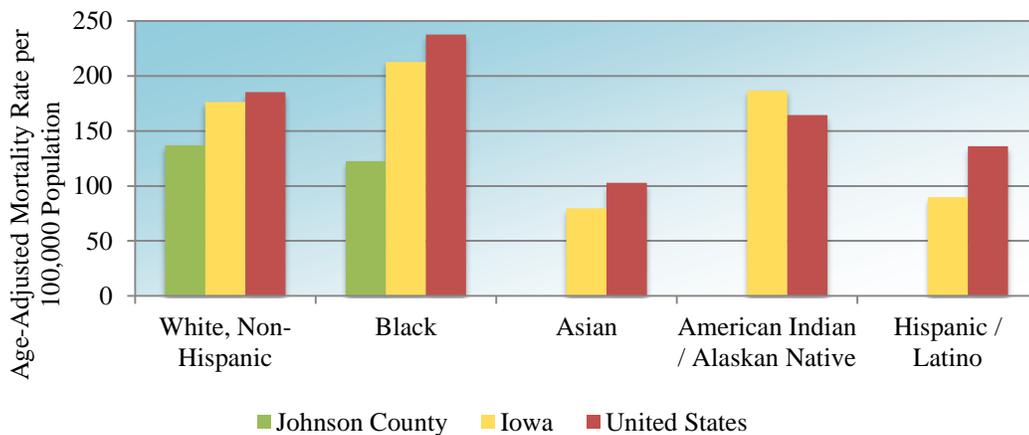


Age-Adjusted Coronary Heart Disease Mortality Rate per 100,000 Population by Race, 2006-2010

Report Area	White, Non-Hispanic	Black	Asian	American Indian / Alaskan Native	Hispanic / Latino
Johnson County	136.95	122.46	*	*	*
Iowa	176.23	212.74	79.59	186.59	89.81
United States	185.11	237.6	102.64	164.23	135.98

*Data suppressed to maintain confidentiality. Source: Community Commons – Johnson County

Coronary Heart Disease Mortality Rate by Race, 2006-2010





STROKE

Importance of Indicator: Stroke is the 5th leading cause of death in Johnson County and the nation. Stroke is also associated with significant morbidity and is the 4th leading cause of potential years of life lost. Risk factors for stroke include obesity, diabetes, physical inactivity, tobacco use, heavy alcohol use, substance abuse, high cholesterol and high blood pressure.

Key Findings:

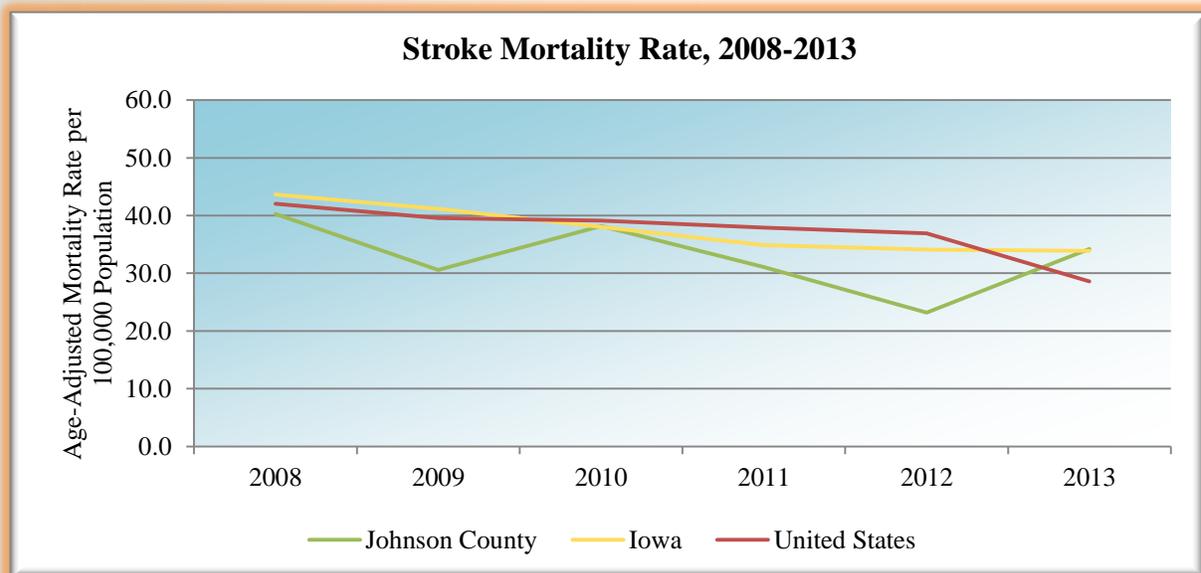
- Johnson County stroke mortality rates have generally declined since 2008. However, Johnson County rates increased in 2013 above state and national rates. Despite this increase in 2013, mortality rates continue to meet Healthy People 2020 goals.
- Females have a higher stroke mortality rate than males in Johnson County. However, males have a slightly higher mortality rate compared to females at state and national levels.

Healthy People 2020: Goal HDS-3 is to reduce deaths due to stroke to less than 34.8 deaths per 100,000 population.

Stroke Age-Adjusted Mortality Rate per 100,000 Population, 2008-2013

Rate Type	Report Area	2008	2009	2010	2011	2012	2013
Crude Rate	Johnson County	29.9	21.6	27.5	24.1	19.1	27.3
	Iowa	57.4	53.9	50.5	46.8	46.3	45.6
	United States	44.1	42	41.9	41.4	40.9	40.8
Age-Adjusted Rate	Johnson County	40.3	30.6	38.2	31.1	23.2	34.2
	Iowa	43.6	41.2	38.0	34.9	34.1	33.9
	United States	42.1	39.6	39.1	37.9	36.9	28.6

Source: CDC Wonder





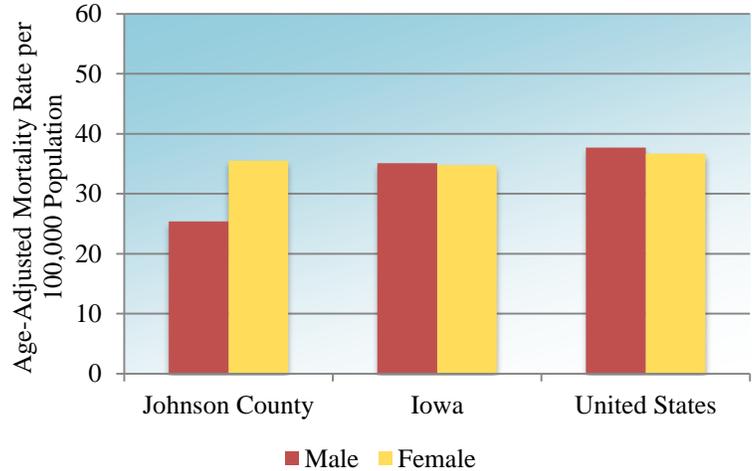
STROKE

Stroke Age-Adjusted Mortality Rate per 100,000 Population by Gender, 2010-2013

Report Area	Male	Female
Johnson County	25.4	35.5
Iowa	35.1	34.8
United States	37.7	36.7

Source: CDC Wonder

Stroke Mortality Rate by Gender, 2010-2013

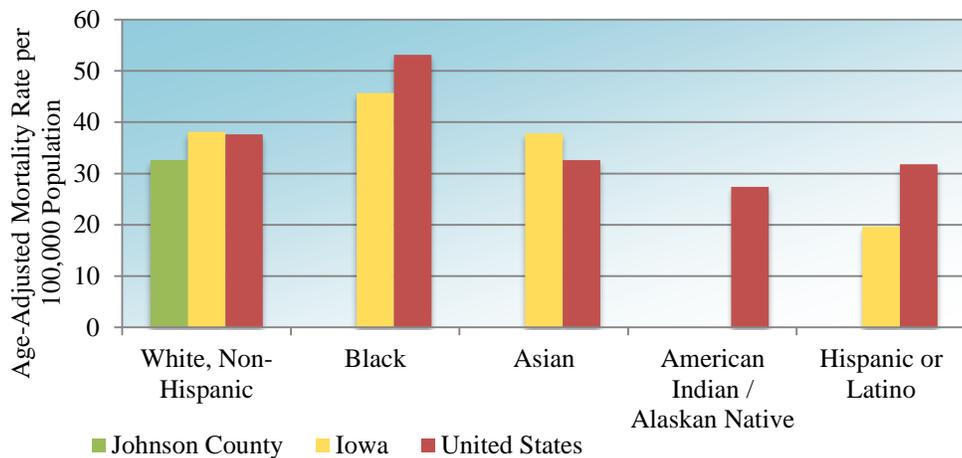


Age-Adjusted Stroke Mortality Rate per 100,000 Population by Race, 2008-2012

Report Area	White, Non-Hispanic	Black	Asian	American Indian / Alaskan Native	Hispanic or Latino
Johnson County	32.5	*	*	*	*
Iowa	38.1	45.7	37.8	*	19.6
United States	37.6	53.1	32.6	27.4	31.8

*Data suppressed to maintain confidentiality. Source: CDC National Vital Statistics System - Mortality (NVSS-M) accessed via Health Indicators Warehouse

Stroke Mortality Rate by Race, 2008-2012





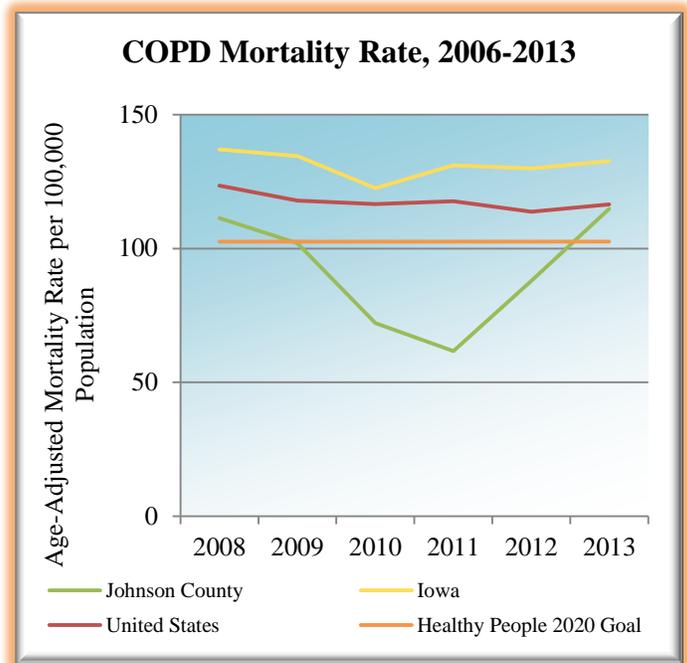
CHRONIC OBSTRUCTIVE PULMONARY DISEASE

Importance of Indicator: Chronic lower respiratory diseases are the 3rd leading cause of death in Johnson County, Iowa and the nation. Chronic lower respiratory diseases are primarily comprised by Chronic Obstructive Pulmonary Disease (COPD). The key risk factor for COPD development is tobacco smoke. Source: CDC What is COPD? <http://www.cdc.gov/copd/>

Key Findings:

- Johnson County mortality rates among adults age 45 years and older due to COPD have been variable and generally better than state and national rates. However, since 2011, mortality rates have climbed in Johnson County to near national rates at 91.1 deaths per 100,000 residents.
- Johnson County mortality rates due to COPD had previously met Health People 2020 goals; however, in 2013, county rates worsened to above national goals to 114.8 deaths per 100,000 adults.
- COPD mortality rates for males are higher than for females in Johnson County.

Healthy People 2020: Goal RD-10 is to reduce deaths from chronic obstructive pulmonary disease (COPD) among adults age 45 and older to less than 102.6 deaths per 100,000 population.



Chronic Obstructive Pulmonary Disease Mortality Rates per 100,000 Adults age 45 years and older, 2006-2013

Rate Type	Report Area	2006	2007	2008	2009	2010	2011	2012	2013
Crude Rate	Johnson County	73.8	82.6	93.5	80.5	60.9	49.9	72.3	103.7
	Iowa	132.8	131.1	145.1	141.1	128.8	137.9	137.3	141.8
	United States	106.2	107	115.9	110.4	109.3	111.1	109.9	112.8
Age Adjusted Rate	Johnson County	91.1	104.7	111.4	102	72.2	61.7	88	114.8
	Iowa	124.5	122.6	137	134.5	122.5	131.1	129.9	132.6
	United Stated	112.7	113.9	123.5	117.9	116.6	117.7	113.8	116.5

Source: CDC Wonder



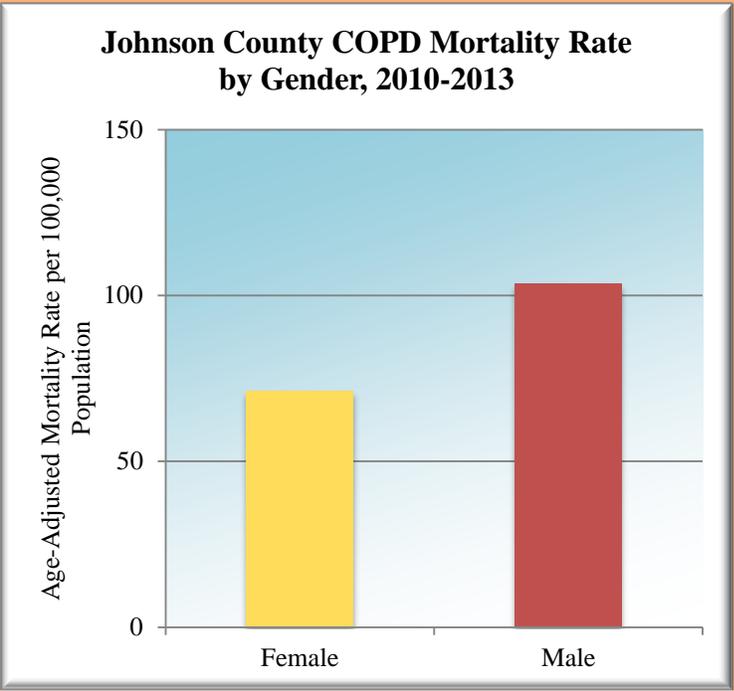
COPD

JOHNSON COUNTY DETAILED REPORT

Johnson County COPD Mortality Rates per 100,000 Population by Gender, 2010-2013

Gender	Total Deaths	Population at Risk	Crude Rate	Age-Adjusted Rate
Female	59	85,848	68.7	71.2
Male	59	77,524	76.1	103.4

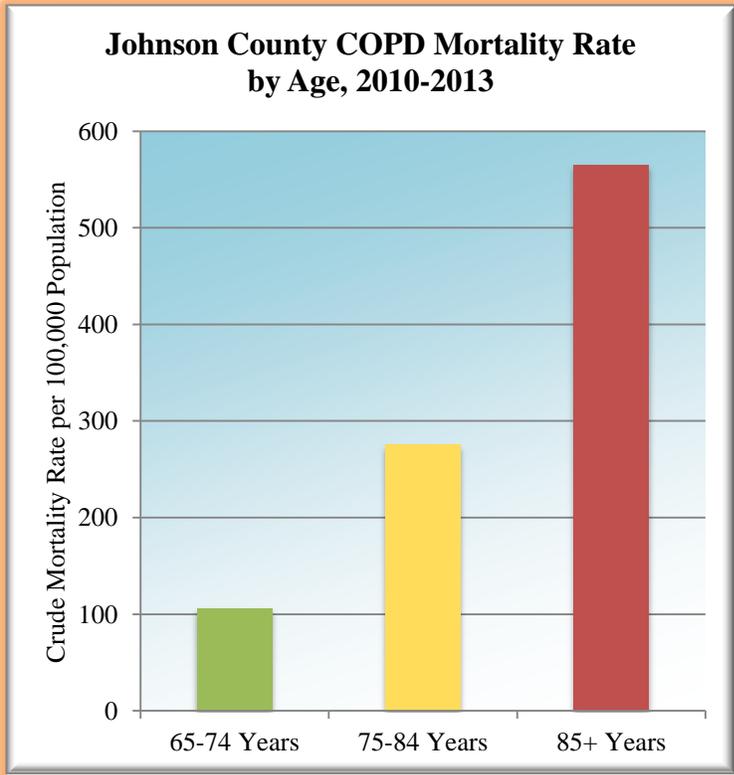
Source: CDC Wonder



Johnson County COPD Mortality Rates per 100,000 Population by Age, 2010-2013

Age	Deaths	Population at Risk	Crude Rates
65-74 Years	29	27,310	106.2
75-84 Years	40	14,491	276
85+ Years	40	7,074	565.5

Source: CDC Wonder





ASTHMA

Importance of Indicator: Chronic lower respiratory diseases are the 3rd leading cause of death in Johnson County, Iowa and the nation. In addition to COPD, chronic lower respiratory diseases are comprised by asthma. Common triggers for asthma exacerbations include tobacco smoke, dust mites, air pollution, cockroach allergens, mold and pets.

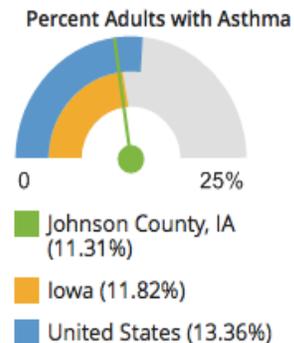
Source: CDC Common Asthma Triggers
<http://www.cdc.gov/asthma/triggers.html>

Key Findings:

- Approximately 11% of adults age 18+ in Johnson County report having asthma. This is lower than state and national prevalence rates.
- County level asthma mortality rates were unable to be compared to Healthy People 2020 goals due to too few deaths due to asthma occurring in Johnson County. Therefore, only state and national level data is presented.
- State and national asthma mortality rates remain well above Healthy People 2020 goals in all age groups.

Healthy People 2020: Goal RD-1 is to reduce deaths due to asthma. This goal is sub-classified into mortality rate goals based on age.

- Goal RD-1.1: Children and adults under age 35 years. Measure is being tracked for informational purposes during the decade and no goal has been set.
- Goal RD-1.2: Adults aged 35 to 64 years. Reduce asthma deaths to less than 4.9 per million.
- Goal RD-1.3: Adults aged 65 years and older. Reduce asthma deaths to less than 21.5 per million.



Source: Community Commons – Johnson County, 2011-2012

Prevalence of Asthma in Adults age 18+ years, 2011-2012

Report Area	Population at Risk	Total with Asthma	Percent with Asthma
Johnson County	87,430	9,884	11.31%
Iowa	2,314,076	273,507	11.82%
United States	237,197,465	31,697,608	13.36%

Source: Community Commons – Johnson County



ASTHMA

Percent of Adults age 18+ years with Asthma by Race, 2011-2012

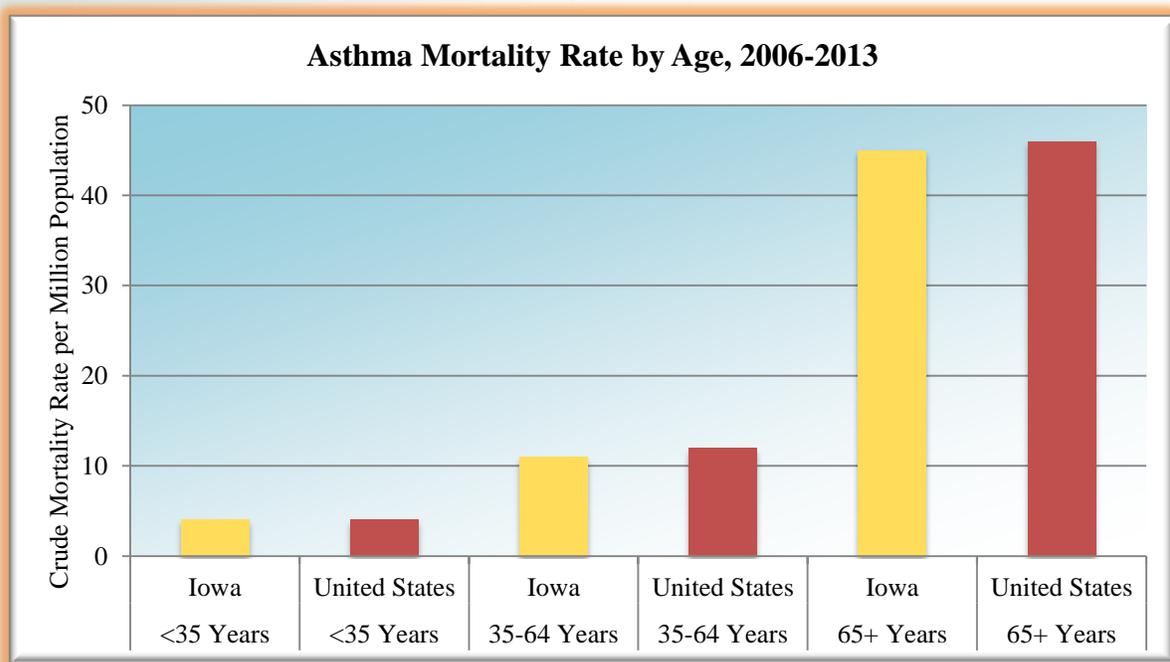
Report Area	White Non-Hispanic	Black	Hispanic / Latino	Other Race
Iowa	11.6%	20.57%	7.45%	8%
United States	13.19%	15.75%	12.02%	11.9%

Source: Community Commons – Johnson County

Asthma Crude Mortality Rates per 1,000,000 Population by Age, 2006-2013

Age Group	Report Area	Deaths	Population at Risk	Rate per 1,000,000
<35 Years	Iowa	23	5,699,085	4
	United States	2,093	587,992,418	4
35-64 Years	Iowa	54	4,712,371	11
	United States	5,670	492,876,361	12
65+ Years	Iowa	83	1,861,810	45
	United States	148	3,244,401	46

Source: CDC Wonder





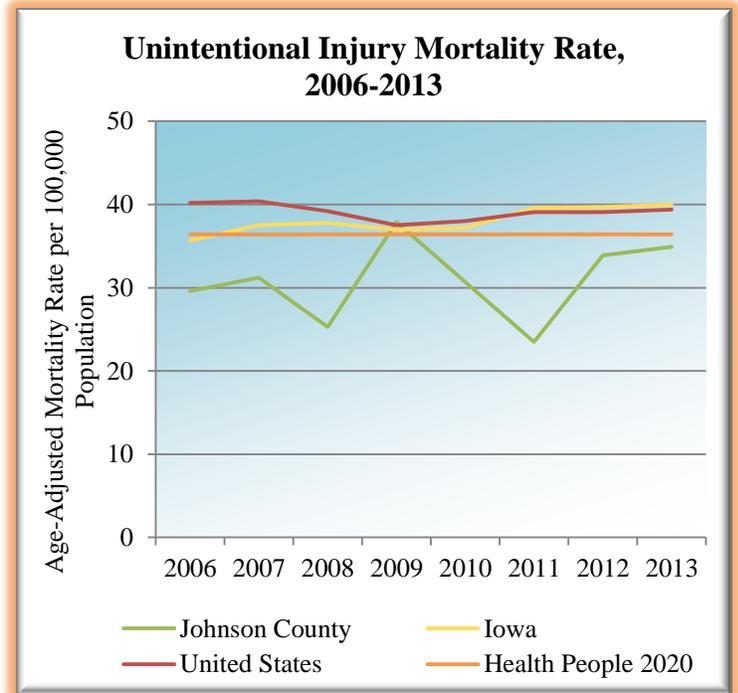
UNINTENTIONAL INJURIES

Importance of Indicator: Unintentional injuries are the 4th leading cause of death in Johnson County and the 5th leading cause of death in the state and nation. Furthermore, unintentional injuries are the leading cause of years of potential life lost.

Healthy People 2020: Goal IVP-11 is to reduce unintentional injury deaths to less than 36.4 deaths per 100,000 population.

Key Findings:

- Johnson County unintentional injury death rates have varied since 2006, but generally been lower than state and national rates.
- Johnson County has met Health People 2020 goal with an unintentional injury mortality rate of 34.9 per 100,000 in 2013. However, since 2011, mortality rates have climbed.
- From 2010-2013, falls represented the largest proportion of unintentional injuries in Johnson County (39%), followed by motor vehicle accidents (27%) and accidental poisonings (17%).
- The unintentional injury rate was slightly higher amongst males in Johnson County compared to females.



Unintentional Injury Mortality Rates per 100,000 population by Age, 2006-2013

Report Area	Report Area	2006	2007	2008	2009	2010	2011	2012	2013
Crude Rate	Johnson County	23.7	24.9	24.4	31.6	*	20.3	29.3	29.5
	Iowa	39.8	41.7	42	41.4	41.8	44.7	44.5	46
	United States	40.8	41.1	40.1	38.5	39.1	40.6	40.7	41.3
Age-Adjusted Rate	Johnson County	29.6	31.2	25.3	37.9	*	23.5	33.9	34.9
	Iowa	35.7	37.5	37.8	37	37.2	39.6	39.7	40
	United States	40.2	40.4	39.2	37.5	38	39.1	39.1	39.4

* Data suppressed to maintain confidentiality. Source: CDC Wonder



UNINTENTIONAL INJURIES

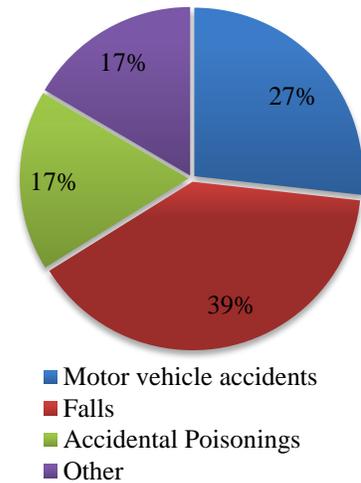
JOHNSON COUNTY DETAILED PREORT

Unintentional Injury Mortality Rates per 100,000 Population by Accident Type, 2010-2013

Accident Type	Deaths	Population at Risk	Crude Rate	Age-Adjusted Rate
Motor vehicle accidents	34	539,392	6.3	6.7
Falls	50	539,392	9.3	12.1
Accidental Poisonings	22	539,392	4.1	4.1
Other	21	539,392	3.9	*

*Age-Adjusted rate not available. Source: CDC Wonder

Unintentional Injury Mortality by Accident Type, 2010-2013



Unintentional Injury Crude Mortality Rate per 100,000 Population by Age, 2010-2013

Age Group	Deaths	Population at Risk	Crude Rate
25-34 years	12	91,241	13.2*
45-54 years	21	59,602	35.2
55-64 years	17	54,895	31.0*
75-84 years	17	14,491	117.3*
85+ years	34	7,074	480.6

* Rate unreliable. Note: Rates for children and adults 24 years and younger not available due to data suppression to maintain confidentiality. Source: CDC Wonder

Unintentional Injury Mortality Rates per 100,000 Population by Gender, 2010-2013

Gender	Death	Population at Risk	Crude Rate	Age-Adjusted Rate
Female	67	269,762	24.8	25.6
Male	60	269,630	22.3	27.9

Source: CDC Wonder



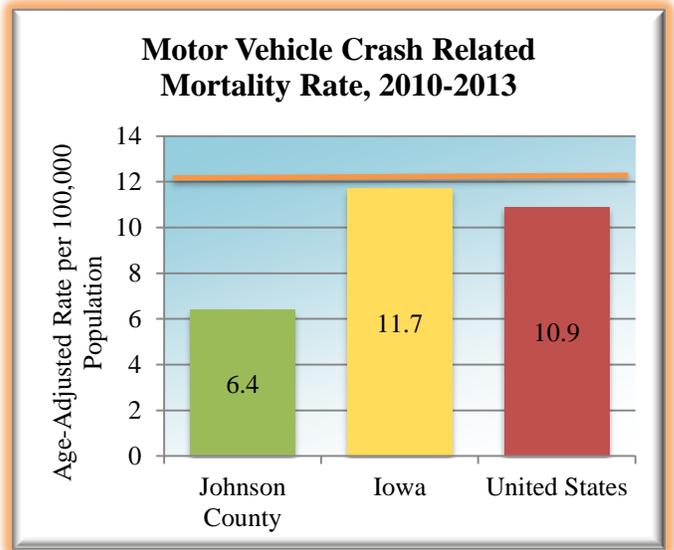
MOTOR VEHICLE ACCIDENT

Importance of Indicator: Motor vehicle accidents represent 27% of all unintentional injuries mortality in Johnson County.

Healthy People 2020: Goal IVP-13.1 is to reduce motor vehicle crash-related deaths to less than 12.4 deaths per 100,000 population.

Key Findings:

- Johnson County motor vehicle crash related mortality is lower than both the state and nation.
- The Healthy People 2020 goal to reduce mortality due to motor vehicle related crashes has been achieved at the county, state and national levels.
- Mortality rates due to motor vehicle related accidents are higher among males in Johnson County.
- 25% of MVC in Iowa involved drivers with blood alcohol content greater than 0.08.



Motor Vehicle Crash Related Crude Mortality Rates per 100,000 Population, 2008-2013

Report Area	2008	2009	2010	2011	2012	2013
Johnson County	10.2	8.5	*	*	8.1	*
Iowa	12.8	11.5	11.2	11.1	11.4	10.9
United States	14.3	12.2	13.1	12.8	11.4	10.9

* Data suppressed to maintain confidentiality. Source: CDC Wonder

Johnson County Motor Vehicle Crash Related Crude Mortality Rates per 100,000 Population by Gender, 2006-2013

Gender	Number Deaths	Population at Risk	Crude Rate
Female	12	269,762	4.4*
Male	21	269,630	7.8

* Rate unreliable. Source: CDC Wonder

Alcohol-related Motor Vehicle Crash Fatalities, 2012

Report Area	Total Deaths	BAC = 0.00		BAC = 0.01-0.07		BAC = 0.08+		BAC = 0.01+	
		Count	%	Count	%	Count	%	Count	%
Iowa	365	260	71%	14	4%	92	25%	106	29%
United States	33561	21411	64%	1719	5%	10322	31%	12041	36%

BAC: Blood alcohol content. Source: U.S. Department of Transportation, Traffic Safety Facts 2012 Data.



ALZHEIMER'S DISEASE

Importance of Indicator: Alzheimer's disease is the 6th leading cause of death in the county, state and nation. In addition, Alzheimer's disease contributes to significant morbidity among older adults.

Key Findings:

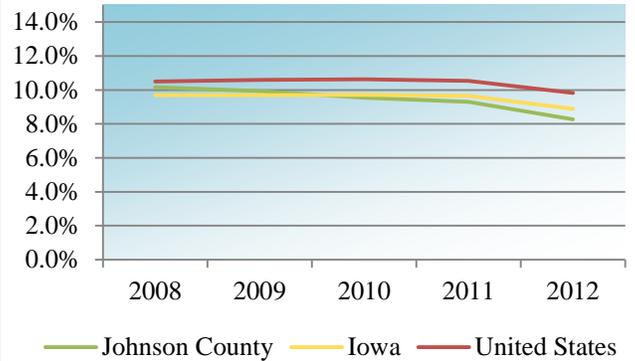
- Approximately 8.3% of Medicare beneficiaries in Johnson County have dementia.
- The mortality rate due to dementia has remained relatively stable, and while lower than national levels, the county mortality rate is higher than the state.

Dementia (including Alzheimer's Disease) Mortality Rate per 100,000 Population, 2010-2013

Rate Type	Report Area	2010	2011	2012	2013
Crude Rate	Johnson County	16	21	29.3	26.6
	Iowa	37	38	43.5	45.7
	United States	35.2	39.5	42.9	45.1
Age-Adjusted Rate	Johnson County	21.6	27.5	36.6	33
	Iowa	26.2	26.3	30.1	31.2
	United States	32.5	35.6	38.1	39.3

Source: CDC Wonder

Percent of Medicare Beneficiaries with Dementia including Alzheimer's Disease, 2008-2012

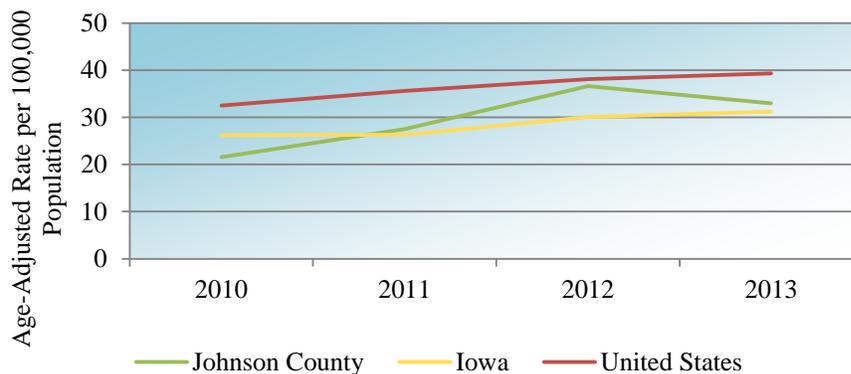


Percent of Medicare Beneficiaries with Dementia including Alzheimer's Disease, 2008-2012

Report Area	2008	2009	2010	2011	2012
Johnson County	10.2%	9.9%	9.5%	9.3%	8.3%
Iowa	9.7%	9.7%	9.7%	9.7%	8.9%
United States	10.5%	10.6%	10.6%	10.5%	9.8%

Source: Chronic Condition Warehouse accessed via Health Indicators Warehouse

Dementia including Alzheimer's Disease Mortality Rate, 2010-2013





FLU & PNEUMONIA

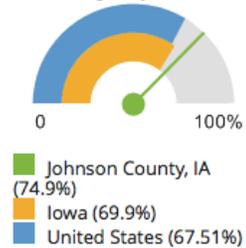
Importance of Indicator: Influenza and pneumonia are common diseases and potentially dangerous, especially among high-risk populations including children, elderly and the immunocompromised. Both diseases are largely preventable through vaccination.

Key Findings:

- Johnson County mortality rates due to flu & pneumonia are lower than state and national levels.
- However, county mortality rates increased slightly in 2013.
- Pneumonia vaccination rates among adults age 65 and older are higher in Johnson County than the state and nation; however, vaccination rates remain far below Healthy People 2020 goals.

Healthy People 2020: Goal IID-13.1 is to increase the percentage of non-institutionalized adults aged 65 years and older who are vaccinated against pneumococcal disease to greater than 90%.

Percent Population Age 65+ with Pneumonia Vaccination (Age-Adjusted)



Source: Community Commons – Johnson County, 2006-2012

Flu & Pneumonia Crude Mortality Rate per 100,000 Population, 2006-2013

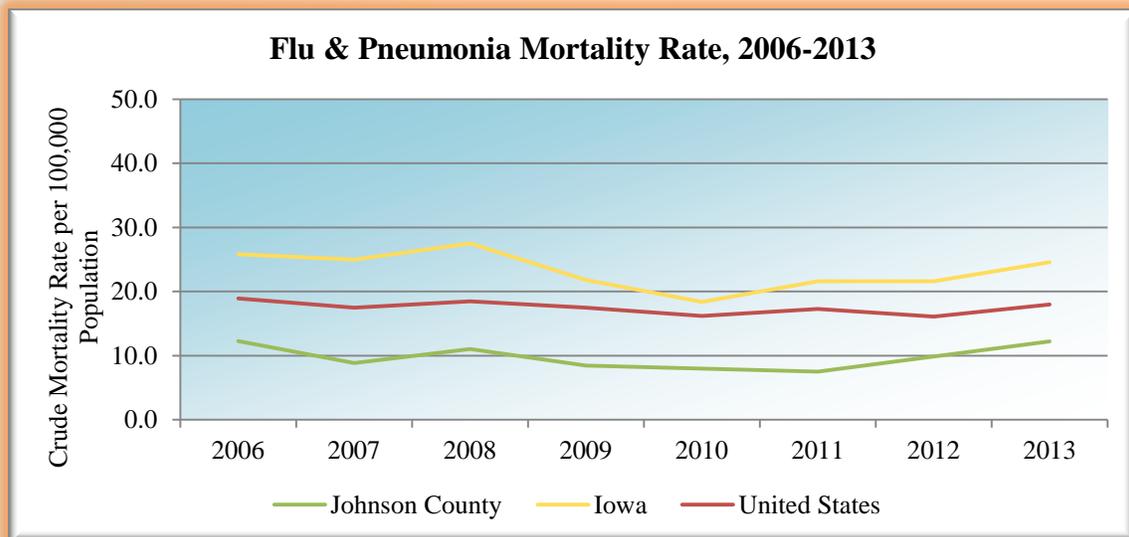
Report Area	2006	2007	2008	2009	2010	2011	2012	2013
Johnson County	12.3	8.8	11.0	8.5	*	7.5	*	12.2
Iowa	25.8	25	27.5	21.8	18.4	21.6	21.6	24.6
United States	18.9	17.5	18.5	17.5	16.2	17.3	16.1	18

*Data suppressed to maintain confidentiality. Source: CDC Wonder

Pneumonia Vaccination Rate among adults age 65+, 2006-2012

Report Area	Crude Percent	Age-Adjusted Percent
Johnson County	74.9%	74.95
Iowa	70.3%	69.9%
United States	67.36%	67.5%

Source: Community Commons – Johnson County





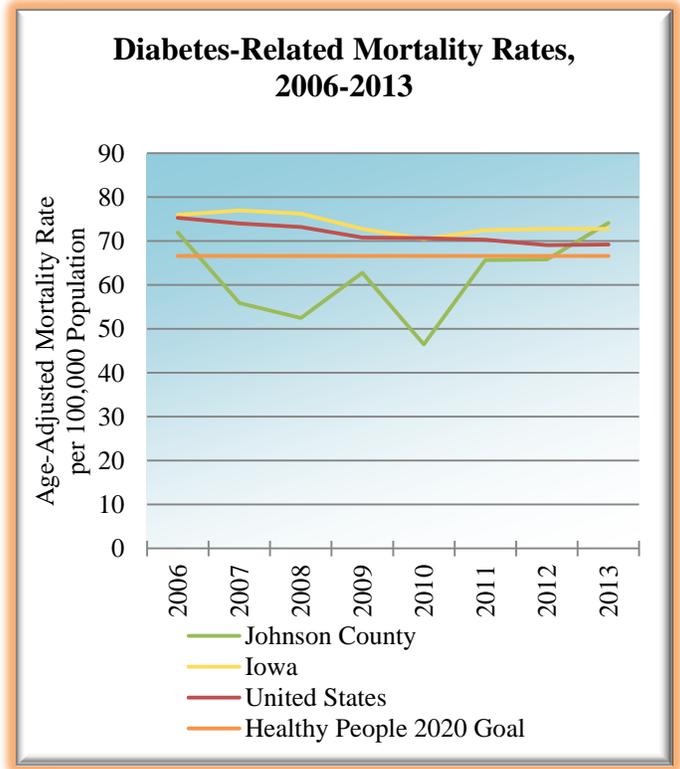
DIABETES

Importance of Indicator: Diabetes is the 10th leading cause of death in Johnson County and the 7th leading cause of death in the nation overall. Diabetes can have serious health impacts including heart disease, blindness, kidney failure and lower-extremity amputations. Type II diabetes accounts for 90-95% of all diabetes cases. Risk factors for type II diabetes include obesity, increasing age, physical inactivity, impaired glucose tolerance and being African American, American Indian or Asian American/Pacific Islander decent. Source: CDC Basics About Diabetes <http://www.cdc.gov/diabetes/basics/diabetes.html>

Key Findings:

- Prevalence estimates indicate that Johnson County has a lower diabetes rate than the state and national levels with 6.4% of adults having a diagnosis of diabetes.
- Diabetes mortality rates in Johnson County have risen since 2010 and in 2013 exceeded both state and national levels.
- Johnson County mortality trends have moved further away from Healthy People 2020 goals.

Healthy People 2020: Goal D-3 is to reduce the diabetes-related death rate to less than 66.6 deaths per 100,000 population.



Diabetes-Related Mortality Rates per 100,000 Population, 2006-2013

Rate Type	Report Area	2006	2007	2008	2009	2010	2011	2012	2013
Crude Rate	Johnson County	49.1	41	37.8	45.4	32.9	49.6	52.8	58.2
	Iowa	94.2	96.1	95.7	90.9	88.6	91.7	93.5	92.3
	United States	77.4	76.8	76.9	75.2	75.8	76.8	76.8	78.1
Age-Adjusted Rate	Johnson County	72	55.9	52.5	62.8	46.5	65.7	65.8	74.2
	Iowa	76	77	76.3	72.8	70.5	72.5	72.8	72.8
	United States	75.3	74.0	73.2	70.8	70.7	70.3	69.1	69.2

Note: Rates reflect number of deaths due to diabetes reported as the underlying or multiple cause of death. Source: CDC Wonder



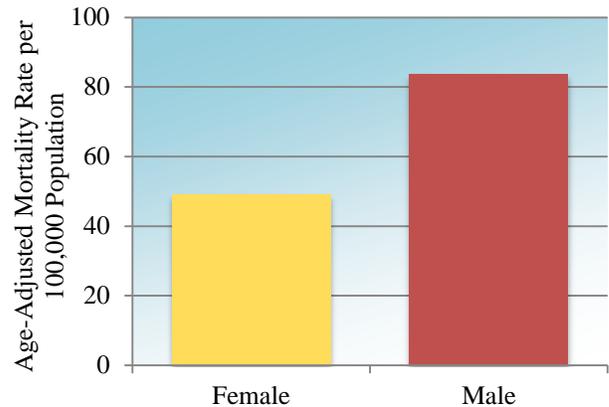
DIABETES

Johnson County Diabetes-Related Mortality Rate per 100,000 Population by Gender, 2010-2013

Gender	Deaths	Population at Risk	Crude Rate	Age-Adjusted Rate
Female	119	269,762	44.1	48.9
Male	143	269,630	53	83.5

Note: Rates reflect number of deaths due to diabetes reported as the underlying or multiple cause of death. Source: CDC Wonder

Johnson County Diabetes-Related Mortality Rate by Gender, 2010-2013

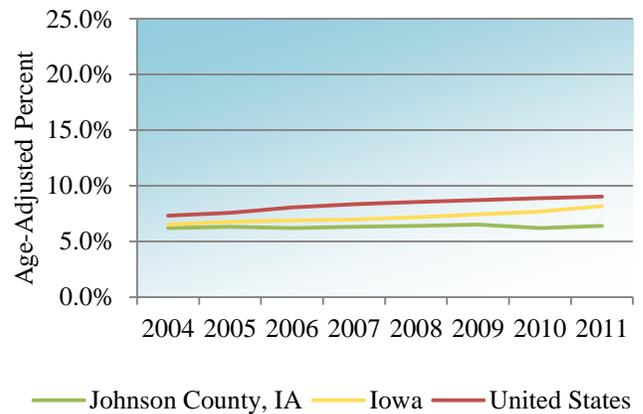


Percent of Medicare Beneficiaries with Diabetes, 2012

Report Area	Beneficiaries with Diabetes	Percent with Diabetes
Johnson County	2,327	20.50%
Iowa	107,238	23.78%
United States	9,224,278	27.03%

Source: Community Commons – Johnson County

Percent of Adults Diagnosed with Diabetes, 2004-2011



Age-Adjusted Percent of Adults Diagnosed with Diabetes, 2004-2011

Report Area	2004	2005	2006	2007	2008	2009	2010	2011
Johnson County	6.2%	6.3%	6.2%	6.3%	6.4%	6.5%	6.2%	6.4%
Iowa	6.51%	6.78%	6.89%	6.96%	7.17%	7.42%	7.68%	8.18%
United States	7.31%	7.58%	8.04%	8.33%	8.55%	8.72%	8.89%	9.03%

Source: Community Commons – Johnson County

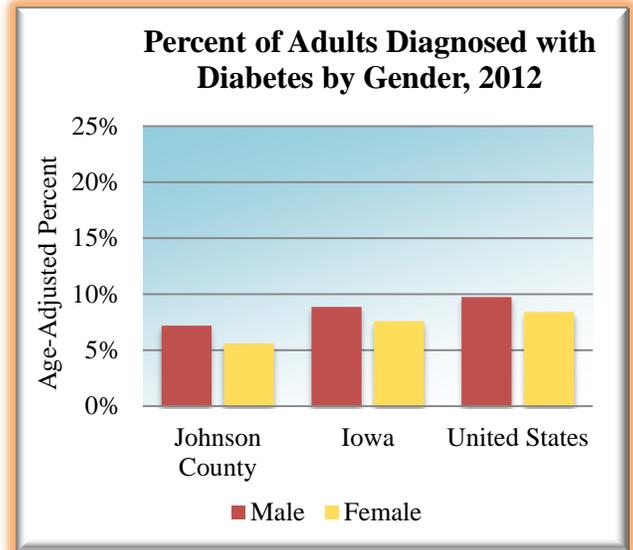


DIABETES

Total Number of Adults Diagnosed with Diabetes and Age-Adjusted Percent of Adults Diagnosed with Diabetes by Gender, 2012

Report Area	Total Males	Percent Males	Total Females	Percent Females
Johnson County	2,989	7.20%	2,566	5.60%
Iowa	105,083	8.87%	100,321	7.59%
United States	11,236,989	9.75%	10,910,588	8.42%

Source: Community Commons – Johnson County



Percent of Diabetic Medicare Beneficiaries who had a Hemoglobin A1C Test in the Last Year, 2012

Report Area	Total Medicare Enrollees	Diabetic Medicare Enrollees	Diabetic Medicare Enrollees with Annual Exam	Percent Diabetic Medicare Enrollees with Annual Exam
Johnson County	8,926	868	787	90.78%
Iowa	366,817	39,069	34,940	89.43%
United States	53,131,712	6,517,150	5,511,632	84.57%

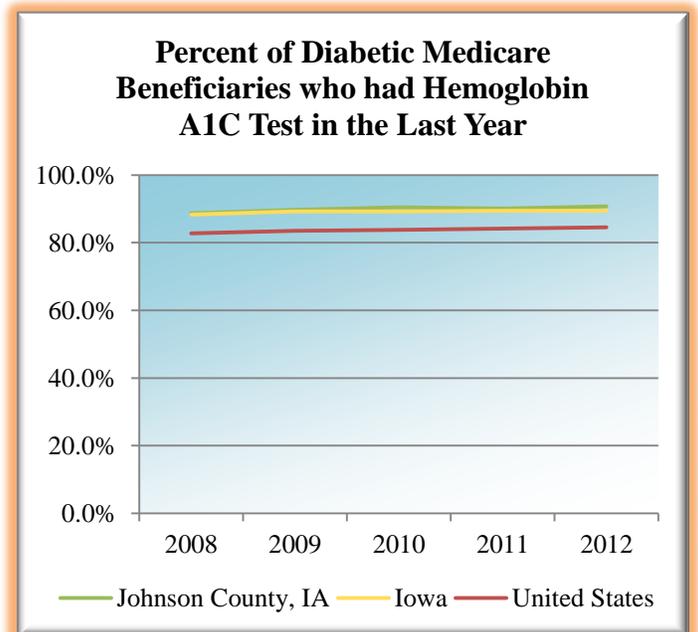
The hemoglobin A1C test is used to monitor average blood glucose levels over the previous 3 months.

Source: Community Commons – Johnson County

Percent of Diabetic Medicare Beneficiaries who had a Hemoglobin A1C Test in the Last Year, 2008-2012

Report Area	2008	2009	2010	2011	2012
Johnson County	88.6%	89.7%	90.5%	90.1%	90.8%
Iowa	88.3%	89.3%	89.2%	89.5%	89.4%
United States	82.7%	83.5%	83.8%	84.2%	84.6%

Source: Community Commons – Johnson County





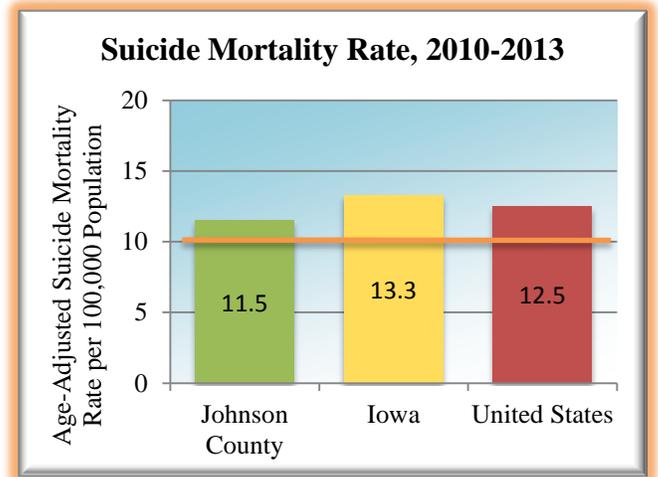
SUICIDE

Importance of Indicator: Suicide is the 8th leading cause of death in Johnson County and the 10th leading cause of death in Iowa and the nation. Suicide is a particularly significant cause of death among youth with suicide being the 3rd leading cause of death nationally for those between 10-24 years of age.

Key Findings:

- Suicide rates for Johnson County have decreased from 2009-2012. However, county rates increased slightly in 2013. Johnson County suicide rates are lower than state and national levels.
- Unfortunately, Johnson County suicide mortality rates remain higher than Healthy People 2020 Goals.
- Suicide rates are highest among males and those 25-55 years of age.

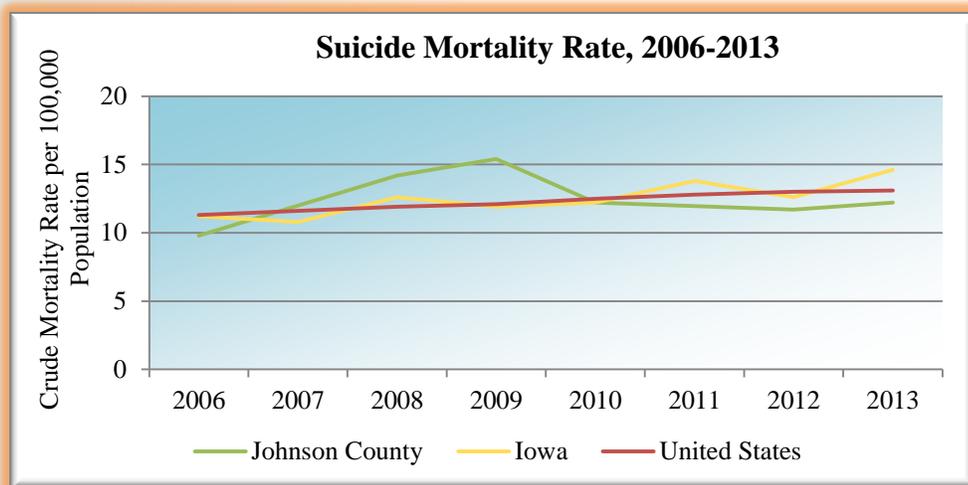
Healthy People 2020: Goal MHMD-1 is to reduce the suicide rate to less than 10.2 suicides per 100,000 population.



Suicide Crude Mortality Rate per 100,000 Population, 2006-2012

Report Area	2006	2007	2008	2009	2010	2011	2012	2013
Johnson County	9.8*	#	14.2*	15.4	12.2*	#	11.7*	12.2*
Iowa	11.2	10.8	12.6	11.9	12.2	13.8	12.6	14.6
United States	11.3	11.6	11.9	12.1	12.5	12.8	13	13.1

* Rate unreliable. # Data suppressed to maintain confidentiality. Source: CDC Wonder





SUICIDE

Iowa Suicide Mortality Rate per 100,000 Population by Age, 2010-2013

Age	Number Suicide Deaths	Population at Risk	Crude Rate
5-14 years	18	1,616,415	1.1*
15-24 years	223	1,738,488	12.8
25-34 years	257	1,551,614	16.6
35-44 years	303	1,445,681	21
45-54 years	358	1,709,714	20.9
55-64 years	226	1,556,976	14.5
65-74 years	125	943,825	13.2
75-84 years	73	610,802	12
85+ years	50	307,183	16.3

*Rate unreliable. Source: CDC Wonder

Johnson County Suicide Mortality Rate per 100,000 Population by Gender, 2010-2013

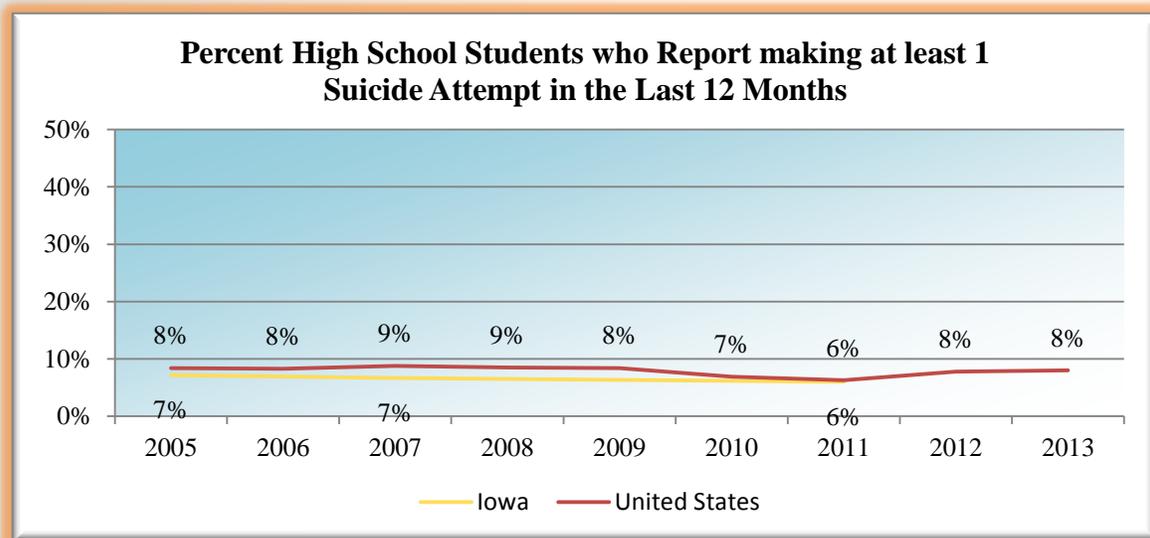
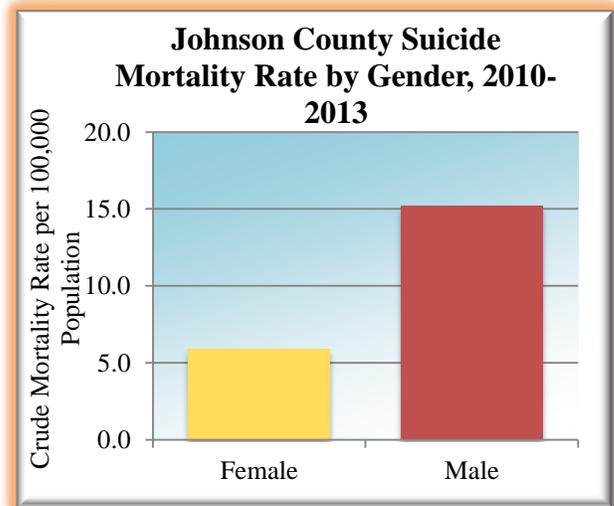
Gender	Number Suicide Deaths	Population at Risk	Crude Rate
Female	16	269,762	5.9*
Male	41	269,630	15.2

*Rate unreliable. Source: CDC Wonder

Johnson County Suicide Mortality Rate per 100,000 Population by Age, 2010-2013

Age	Number Suicide Deaths	Population at Risk	Crude Rate
25-34 years	10	91,241	11.0*
35-44 years	14	61,393	22.8*
45-54 years	16	59,602	26.8*

Note: All other age group counts/rates were suppressed to maintain confidentiality. Total suicide deaths including all age groups for 2010-2013 was 57. *Rate unreliable. Source: CDC Wonder



Note: Iowa data only available for 2005, 2007 & 2011. Source: Youth Risk Behavior Surveillance System



IMMUNIZATIONS

Importance of Indicator: Maintaining high immunization levels provide the foundation for controlling vaccine preventable diseases in children, adolescents and adults.

Healthy People 2020: Goal IID-7 is to achieve and maintain effective vaccination coverage levels for universally recommended vaccines among young children. Vaccine specific Healthy People 2020 goals are described in detail below.

Vaccination Rates for Children 19-35 Months of Age, 2009-2013

4+DTaP	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	88.9% (83.1% - 92.8%)	84.6% (78.5% - 89.2%)	85.7% (79.3% - 90.4%)	82.5% (81.3% - 83.7%)	84.0% (76.7% - 91.3%)	90%
United States	84.4% (83.3% - 85.4%)	83.9% (82.9% - 84.9%)	84.6% (83.6% - 85.6%)	88.2% (83.8% - 92.6%)	89.6% (85.2% - 94%)	
3+ Polio	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	96% (91.9% - 98.1%)	95.3% (90.3% - 97.8%)	93.8% (88.5% - 96.7%)	96.3% (94.0% - 98.5%)	97.5% (95.5% - 99.5%)	90% Achieved Iowa & U.S.
United States	92.8% (92.0% - 93.5%)	93.3% (92.6% - 94.0%)	93.9% (93.3% - 94.5%)	92.2% (88.0% - 96.6%)	92.7% (91.7% - 93.7%)	
3+Hib	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	50.8% (43.6% - 58.0%)	63.9% (56.6% - 70.6%)	82% (75.0% - 87.3%)	83.8% (78.6% - 89.0%)	89.1% (84.5% - 93.7%)	90%
United States	54.8% (53.5% - 56.2%)	66.8% (65.4% - 68.1%)	80.4% (79.3% - 81.4%)	80.9% (79.7% - 82.1%)	82.0% (83.3% - 80.7%)	
3+ PCV	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	83.8% (77.7% - 88.5%)	87.6% (81.1% - 92.1%)	87.6% (81.5% - 91.9%)	86.4% (81.4% - 91.4%)	90.7% (86.0% - 95.4%)	90% Achieved Iowa
United States	80.4% (79.3% - 81.5%)	83.3% (82.3% - 84.3%)	84.4% (83.4% - 85.4%)	81.9% (80.8% - 83%)	82.0% (80.7% - 83.3%)	
1+ MMR	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	86.7% (80.0% - 91.4%)	93.8% (88.8% - 96.6%)	93.2% (88.2% - 96.1%)	93.3% (89.9% - 96.7%)	94.5% (90.6% - 98.4%)	90% Achieved Iowa & U.S.
United States	91.6% (90.8% - 92.3%)	91.5% (90.7% - 92.2%)	90% (89.2% - 90.8%)	90.8% (90.0% - 91.6%)	91.9% (91.0% - 92.8%)	

Note: 4+DTaP: 4+ doses of any diphtheria and tetanus toxoids and pertussis vaccines including diphtheria and tetanus toxoids, & any acellular pertussis vaccine (DTaP/DTP/DT). 3+Polio: 3+ doses of any poliovirus vaccine. 3+Hib: 3+ doses of Haemophilus influenzae type b (Hib) vaccine. 3+PCV: 3+ doses of pneumococcal conjugate vaccine (PCV7). 1+MMR: 1+ doses of measles-mumps-rubella vaccine. Estimates presented as point estimate (%) +/- 95% Confidence Interval. Source: National Immunization Survey accessed via Health Indicators Warehouse.



IMMUNIZATIONS

Vaccination Rates for Children 19-35 Months of Age, 2009-2013

2+ HepA	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	47.8% (40.9% - 54.8%)	55.8% (48.6% - 62.8%)	48.8% (41.5% - 56.1%)	59.3% (52.1% - 66.5%)	57.5% (48.9% - 66.1%)	85%
United States	46.6% (45.2% - 48.0%)	49.7% (48.4% - 51.1%)	52.2% (50.8% - 53.5%)	53.0% (51.5% - 54.5%)	54.7% (53.1% - 56.3%)	
3+ HepB	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	95.1% (90.9% - 97.4%)	93.7% (88.6% - 96.6%)	89.4% (83.7% - 93.2%)	96.5% (94.0% - 99%)	93.7% (90.3% - 97.1%)	90% Achieved Iowa
United States	92.4% (91.6% - 93.1%)	91.8% (91.0% - 92.5%)	91.1% (90.4% - 91.8%)	90.8% (89.8% - 91.8%)	89.7% (88.8% - 90.6%)	
2+ Rotavirus	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	51.1% (44.0% - 58.1%)	66.1% (58.9% - 72.7%)	69.9% (62.5% - 76.4%)	70.2% (62.7% - 77.7%)	74.7% (66.5% - 82.9%)	80%
United States	43.9% (42.6% - 45.3%)	59.2% (57.8% - 60.5%)	67.3% (66.0% - 68.5%)	68.6% (67.2% - 70%)	72.6% (71.1% - 74.1%)	
1+ Varicella	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	93.6% (89.1% - 96.3%)	92.7% (87.7% - 95.7%)	88.2% (82.1% - 92.5%)	94.4% (91.4% - 97.4%)	93.0% (89.4% - 96.6%)	90% Achieved Iowa & U.S.
United States	89.6% (88.8% - 90.4%)	90.4% (89.5% - 91.2%)	90.8% (90.0% - 91.5%)	90.2% (89.4% - 91.0%)	91.2% (90.3% - 92.1%)	
Complete	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	42.5% (35.6% - 49.7%)	57.7% (50.4% - 64.7%)	71.6% (64.2% - 78.0%)	74.8% (68.5% - 81.1%)	78.3% (71.6% - 85.0%)	80%
United States	44.3% (42.9% - 45.7%)	56.6% (55.2% - 57.9%)	68.5% (67.3% - 69.8%)	68.4% (67.0% - 69.8%)	70.4% (68.9% - 71.9%)	

Note: 2+ HepA: 2+ doses of hepatitis A vaccine. 3+HepB: 3+ doses of hepatitis B vaccine. 2+Rotavirus: 2+ doses of rotavirus vaccine. Varicella: 1+Varicella: 1+ doses of varicella virus vaccine. Complete: Includes at least four doses of diphtheria-tetanus-acellular pertussis (DTaP), at least three doses of polio, at least one dose of measles-containing vaccine, at least three or four doses of Haemophilus influenza B (Hib) depending on the brand used, at least three doses of hepatitis B antigens, at least one dose of varicella, and at least four doses of PCV.

Estimates presented as point estimate (%) +/- 95% Confidence Interval. Source: National Immunization Survey accessed via Health Indicators Warehouse.



IMMUNIZATIONS

Vaccination Rates for Adolescents 13-15 Years of Age, 2009-2013

1+Td / Tdap	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	67.00%	63.00%	77.60%	*	*	80% Achieved U.S.
United States	62.20%	74.20%	80.50%	88.30%	89.80%	

MCV4	2009	2010	2011	2012	2013	Healthy People 2020 Goal
Iowa	48.20%	52.90%	64.10%	*	*	80%
United States	54.80%	64.80%	71.50%	73.70%	78.10%	

HPV4 Females	2009	2010	2011	Healthy People 2020 Goal
Iowa	32.70%	33.00%	30.10%	80%
United States	22.90%	28.60%	30.00%	

2013 HPV4	13 Years	14 Years	15 Years	Healthy People 2020 Goal
Females	56.10%	64.70%	72.10%	80%
Males	41.60%	47.10%	51.00%	

Vaccination Rates for Adults 65+ Years of Age, 2006-2012

Vaccination	Seasonal Influenza		Pneumococcal	
	Crude Rate	Age-Adjusted Rate	Crude Rate	Age-Adjusted Rate
Iowa	73.4%	73.1%	74.9%	75.0
Johnson County	79.0%	79.0%	70.3%	69.9%
Healthy People 2020 Goal	90%		90%	

Note: 1+Td/Tdap: 1+ doses Tetanus & diphtheria or Tetanus, diphtheria & acellular pertussis vaccine. 1+MCV4: 1+ doses meningococcal conjugate vaccine. HPV4 Females: complete vaccination with human papillomavirus, females only. 2013 HPV4: complete vaccination with human papillomavirus in 2013. Pneumococcal: 1+ doses of pneumococcal vaccination. Source: National Immunization Survey accessed via Health Indicators Warehouse.



SELECTED REPORTABLE INFECTIOUS DISEASES

Importance of Indicator: Certain disease conditions are reportable to the Iowa Department of Public Health per The Iowa Administrative Code 641, Chapter 1. The reasons these diseases are reportable are to monitor disease incidence and prevalence, detect and manage outbreaks and develop prevention methods to reduce illness at the county and state level.

Healthy People 2020: Goals for selected reportable infectious diseases are listed in tables below when goals have been established.

Number of New Cases and Crude Incidence Rates per 100,000 Population for Selected Reportable Infectious Diseases, 2010-2013

Hepatitis A	2010		2011		2012		2013		Healthy People 2020 Goal
	Report Area	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	
Johnson County	1	0.8	0	0.0	0	0.0	1	0.7	0.3 cases per 100,000 population
Iowa	11	0.4	8	0.3	7	0.2	17	0.6	
United States	1670	0.5	1398	0.5	1562	0.5	*	*	

Hepatitis B, Acute	2010		2011		2012		2013		Healthy People 2020 Goal
	Report Area	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	
Johnson County	25	19.0	0	0.0	2	1.5	0	0.0	0.5 cases per 100,000 population
Iowa	15	0.5	15	0.5	12	0.4	11	0.4	
United States	3374	1.1	2903	0.9	2895	0.9	*	*	

Meningococcal Invasive	2010		2011		2012		2013		Healthy People 2020 Goal
	Report Area	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	
Johnson County	2	1.5	0	0.0	0	0.0	0	0.0	12 cases per 100,000 children 31 cases per 100,000 adults
Iowa	10	0.3	14	0.5	2	0.1	1	0.0	
United States	833	0.3	759	0.3	551	0.2	*	*	

*2013 data for the United States not available. Source: *MMWR*: 2012 Summary of Notifiable Diseases, Iowa Surveillance of Notifiable and Other Diseases Annual Report



SELECTED REPORTABLE INFECTIOUS DISEASES

Number of New Cases and Crude Incidence Rates per 100,000 Population for Selected Reportable Infectious Diseases (continued), 2010-2013

Mumps	2010		2011		2012		2013		Healthy People 2020 Goal
	Report Area	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	
Johnson County	0	0.0	0	0.0	1	0.7	1	0.7	500 Cases
Iowa	38	1.3	8	0.3	6	0.2	3	0.1	
United States	2612	0.9	404	0.1	229	0.1	*	*	

Pertussis	2010		2011		2012		2013		Healthy People 2020 Goal
	Report Area	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	
Johnson County	12	9.1	8	6.0	136	99.7	16	5.0	2,500 cases among children 2,000 cases among adolescents
Iowa	705	23.4	232	7.6	1736	57.0	308	10.5	
United States	27550.0	9.0	18719	6.1	48277	15.5	*	*	

Tuberculosis	2010		2011		2012		2013		Healthy People 2020 Goal
	Report Area	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	
Johnson County	6	4.6	4	3.0	1	0.7	7	5.0	1.0 case per 100,000 population
Iowa	48	1.6	40	1.3	46	1.5	47	1.5	
United States	11182	3.6	10528	3.4	9945	3.2	*	*	

Cryptosporidiosis	2010		2011		2012		2013	
	Report Area	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases	Crude Rate	Number Cases
Johnson County	5	3.8	9	6.7	5	3.7	37	26.6
Iowa	397	13.2	364	11.9	328	10.8	1505	49.4
United States	8944	2.9	9250	3.0	7956	2.6	*	*

*2013 data for the United States not available. Source: *MMWR*: 2012 Summary of Notifiable Diseases, Iowa Surveillance of Notifiable and Other Diseases Annual Report



SELECTED REPORTABLE INFECTIOUS DISEASES

Number of New Cases and Crude Incidence Rates per 100,000 Population for Selected Reportable Infectious Diseases (continued), 2010-2013

E.coli and other Shiga producing bacteria	2010		2011		2012		2013	
	Number Cases	Crude Rate						
Johnson County	9	6.9	7	5.2	1	0.7	37	26.6
Iowa	173	5.8	189	6.2	180	5.9	171	5.6
United States	5476	1.8	6047	2.0	6463	2.1	*	*

Legionellosis	2010		2011		2012		2013	
	Number Cases	Crude Rate						
Johnson County	1	0.8	0	0.0	1	0.7	17	12.2
Iowa	16	0.5	11	0.4	13	0.4	11	0.4
United States	3346	1.1	4202	1.4	3688	1.2	*	*

Lyme Disease	2010		2011		2012		2013	
	Number Cases	Crude Rate						
Johnson County	24	18.3	13	9.7	26	19.1	40	28.7
Iowa	87	2.9	100	3.3	165	5.4	247	8.1
United States	30150	9.9	33097	10.8	30831	10.0	*	*

Salmonellosis	2010		2011		2012		2013	
	Number Cases	Crude Rate						
Johnson County	33	25.1	18	13.5	23	16.9	10	7.2
Iowa	530	17.6	448	14.7	622	20.4	575	18.9
United States	54424	17.7	51887	16.8	5380	17.3	*	*

Shigellosis	2010		2011		2012		2013	
	Number Cases	Crude Rate						
Johnson County	0	0.0	1	0.7	0	0.0	7	5.0
Iowa	57	1.9	18	0.6	91	3.0	342	11.2
United States	14786	4.8	13352	4.3	15283	4.9	*	*

*2013 data for the United States not available. Source: *MMWR*: 2012 Summary of Notifiable Diseases, Iowa Surveillance of Notifiable and Other Diseases Annual Report



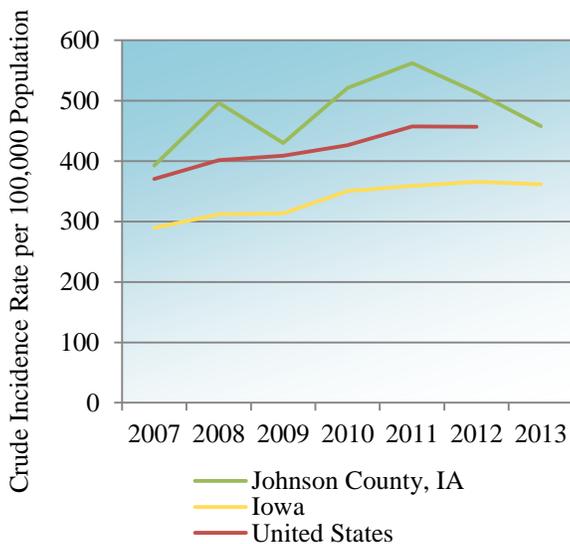
SEXUALLY TRANSMITTED DISEASES & HUMAN IMMUNODEFICIENCY VIRUS

Importance of Indicator: Sexually transmitted diseases (STDs) are infections that can be transferred from one person to another through sexual contact. STDs can lead to significant morbidity and some STDs can result in infertility. Reportable STDs in the state of Iowa include Chlamydia, Gonorrhea, Syphilis and HIV. HIV specifically is a virus that attacks an infected person's immune cells and makes them vulnerable to other infections. In addition to sexual contact, HIV is also transmitted through infected blood and breast milk.

Key Findings:

- Chlamydia rates continue to rise and are higher than the state and nation.
- Gonorrhea rates have varied since 2006, but generally risen. Although below national levels, Johnson County gonorrhea infection rates are higher than state levels.
- Syphilis infection rates have varied since 2007, but have generally remained above state and national levels.
- HIV screening rates are better than state levels, but lag behind national levels.
- While the rate of new HIV cases decline in the state and nation, Johnson County rates have steadily risen since 2009.
- Although county level data regarding contraceptive/barrier protection use are not available, 2014 University of Iowa data show rates of consistent condom/barrier protection use during vaginal, oral and anal intercourse to be low at approximately 56%, 7% and 37%, respectively.

Chlamydia Incidence Rate, 2007-2013



Chlamydia Crude Incidence Rate per 100,000 Population, 2007-2013

Report Area	2007	2008	2009	2010	2011	2012	2013
Johnson County	392.7	496.3	429.8	521.2	561.9	513.8	457.8
Iowa	289.2	312.1	313.3	350.5	358.7	365.7	361.3
United States	370.2	401.3	409.1	426.0	457.1	456.7	*

*2013 data for the United States not available. Source: Iowa Surveillance of Notifiable and Other Diseases Annual Report, Community Commons – Johnson County, CDC STD Surveillance System (STDSS) accessed via Health Indicators Warehouse



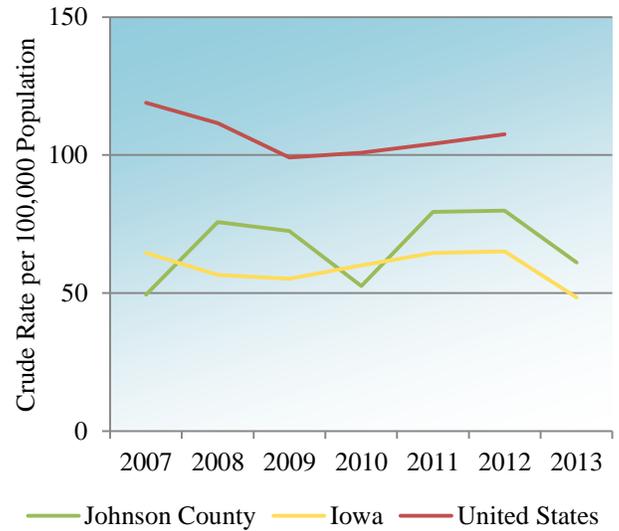
SEXUALLY TRANSMITTED DISEASES & HUMAN IMMUNODEFICIENCY VIRUS

Gonorrhea Crude Incidence Rate per 100,000 Population, 2008-2013

Report Area	2008	2009	2010	2011	2012	2013
Johnson County	75.7	72.5	52.6	79.4	79.9	61.1
Iowa	56.6	55.2	60.0	64.5	65.1	48.4
United States	111.6	99.1	100.8	104.1	107.5	*

*2013 data for the United States not available. Source: Iowa Surveillance of Notifiable and Other Diseases Annual Report, Community Commons – Johnson County, CDC STD Surveillance System (STDSS) accessed via Health Indicators Warehouse

Gonorrhea Incidence Rate, 2007-2013

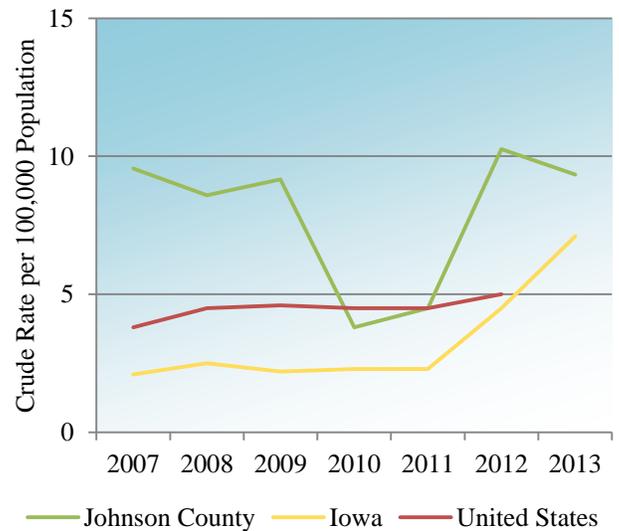


Syphilis Crude Incidence Rate per 100,000 Population, 2006-2013

Report Area	2008	2009	2010	2011	2012	2013
Johnson County	8.6	9.2	3.8	4.5	10.3	9.3
Iowa	2.5	2.2	2.3	2.3	4.5	7.1
United States	4.5	4.6	4.5	4.5	5.0	*

*2013 data for the United States not available. Source: *MMWR*: 2012 Summary of Notifiable Diseases, Iowa Surveillance of Notifiable and Other Diseases Annual Report

Syphilis Incidence Rate, 2007-2013



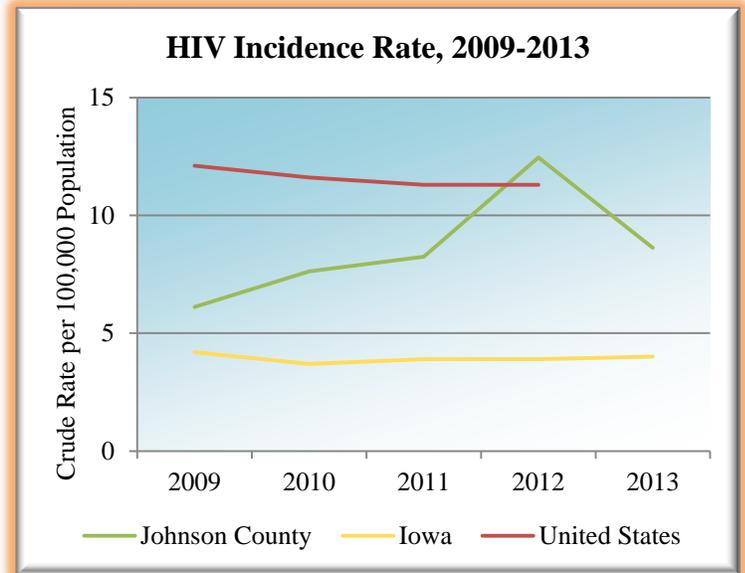


SEXUALLY TRANSMITTED DISEASES & HUMAN IMMUNODEFICIENCY VIRUS

HIV Crude Incidence Rate per 100,000 Population, 2009-2013

Report Area	2009	2010	2011	2012	2013
Johnson County	6.1	7.6	8.2	12.5	8.6
Iowa	4.2	3.7	3.9	3.9	4.0
United States	12.1	11.6	11.3	11.3	*

*2013 data for the United States not available. Source: CDC Morbidity & Mortality Weekly Report, Iowa Surveillance of Notifiable and Other Diseases Annual Report



Percent of Population Never Screened for HIV, 2011-2012

Report Area	Survey Population	Total Never Screened for HIV / AIDS	Percent Never Screened for HIV / AIDS
Johnson County	82,261	56,270	68.40%
Iowa	2,165,379	1,598,389	73.82%
United States	214,984,421	134,999,025	62.79%

Source: Community Commons – Johnson County

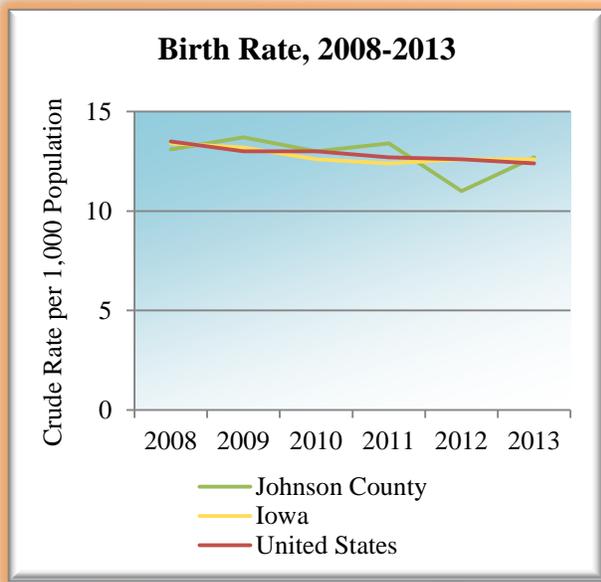
Contraceptive Use/Barrier Protection Use Reported by University of Iowa Undergraduate Students, 2009-2014

Contraceptive Use/Barrier Protection	2009	2011	2012	2013	2014
Condom/barrier mostly/always during oral sex in past 30 days	4.2%	3.0%	4.7%	4.8%	6.9%
Condom/barrier mostly/always during vaginal sex in past 30 days	52.7%	52.1%	57.0%	53.9%	55.9%
Condom/barrier mostly/always during anal sex in past 30 days	28.0%	21.2%	17.9%	33.6%	36.6%
Contraceptive use last time had vaginal intercourse	71.6%	69.5%	69.3%	63.2%	61.4%
Contraceptive use last time had vaginal intercourse (If had sex)	82.8%	83.3%	83.2%	77.0%	79.3%

Note: Data includes only students reporting having sex in specified time period. Source: The National College Health Assessment accessed via the University of Iowa Student Health and Wellness <http://studenthealth.uiowa.edu/wellness/ui-health-data>

FAMILY PLANNING MATERNAL & INFANT HEALTH

Importance of Indicator: Family planning services help individuals determine the number and spacing of their children. Family planning promotes positive birth outcomes and the health of the family.



Key Findings:

- Birth rates in Johnson County are similar to state and national levels. Generally, birth rates have declined since 2008.
- Birth rates to teenage mothers have declined in Johnson County are lower than state levels and similar to national levels.
- Although county level data is unavailable, Iowa youth sexual behavior risk levels are lower than national levels.
- Pregnancy termination rates in Johnson County have decreased since 2010 and are similar to state levels.
- Generally, mothers are more likely to receive prenatal care in Johnson County compared to the state. However, rates of no or late prenatal care are higher in Johnson County than national levels.

Crude Birth Rates per 1,000 Population, 2008-2013

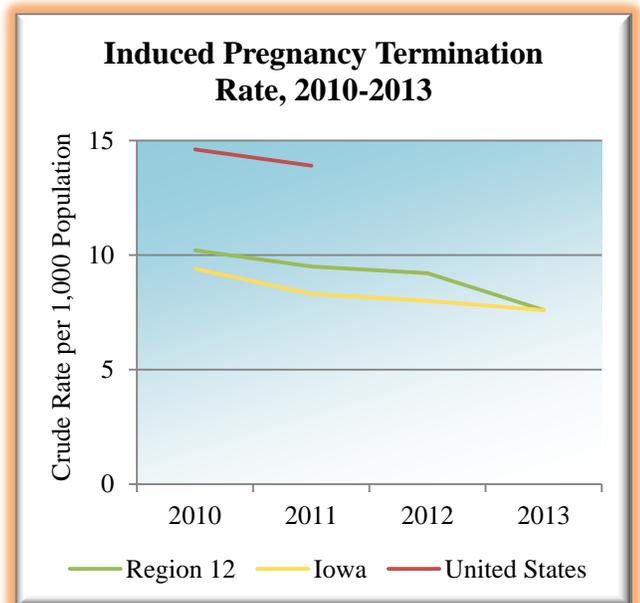
Report Area	2008	2009	2010	2011	2012	2013
Johnson County	13.1	13.7	13	13.4	11	12.7
Iowa	13.4	13.2	12.6	12.4	12.6	12.6
United States	13.5	13	13	12.7	12.6	12.4

Source: Iowa Vital Statistics 2009-2013, United States Vial Statistics 2009-2013

Induced Pregnancy Termination Rate per 1,000 Population, 2010-2013

Report Area	2010	2011	2012	2013
Region 12	10.2	9.5	9.2	7.6
Iowa	9.4	8.3	8	7.6
United States	14.6	13.9	*	*

Region 12: Represents the combined rate for Iowa County and Johnson County.
Source: Iowa Vital Statistics 2009-2013, United States Vial Statistics 2009-2013



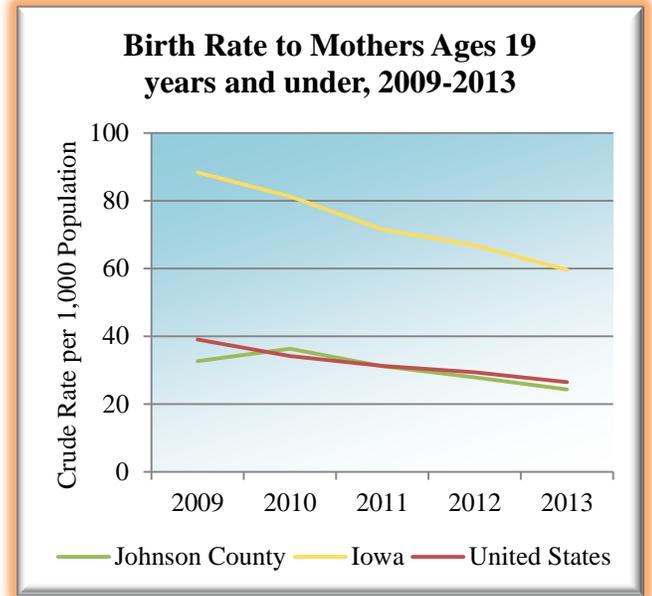


FAMILY PLANNING MATERNAL & INFANT HEALTH

Crude Birth Rates to Mothers Ages 19 years and under per 1,000 Population, 2008-2013

Report Area	2009	2010	2011	2012	2013
Johnson County	32.7	36.3	31.2	27.9	24.3
Iowa	88.3	81.3	71.5	66.8	59.6
United States	39.1	34.2	31.3	29.4	26.5

Source: Iowa Vital Statistics 2009-2013, United States Vital Statistics 2009-2013



Youth Sexual Risk Behaviors, 2011

Survey Question	U.S.	Iowa
Ever had Sexual Intercourse	47.4%	43.9%
Currently Sexually Active	33.7%	33.0%
4+ Lifetime Sexual Partners	15.3%	13.1%
Did Not use Contraception during Last Intercourse	12.9%	6.7%

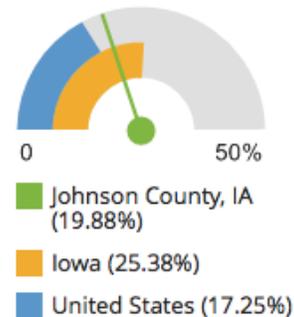
Source: National & Iowa Youth Risk Behavior Survey, 2011

Prenatal Care Practices, 2007-2010

Report Area	Prenatal Care in First Semester	Late or No Prenatal Care	Percentage with Late or No Prenatal Care
Johnson County	5,481	1,368	19.88%
Iowa	116,207	40,489	25.38%
United States	7,349,554	2,880,098	17.25%

Source: Community Commons – Johnson County

Percentage Mothers with Late or No Prenatal Care



Source: Community Commons – Johnson County, 2007-2010

Breast Feeding Practices, 2011 – WIC Population

Report Area	Ever Breastfed	Breastfed 6+ Months	Breastfed 12+ months
Johnson County	72.5%	35.3%	21.7%
Iowa	61.9%	17.3%	10.6%
United States	63.2%	25.1%	16.9%

United States reflects 2010 data. Source: Iowa WIC PNSS Report, 2011

Infant Birth Weight, 2011 – WIC Population

Report Area	Low <2500g	High >4000g
Johnson County	11.70%	7.20%
Iowa	8.10%	8.00%
United States	9.00%	6.30%

United States reflects 2010 data. Source: Iowa WIC PNSS Report, 2011



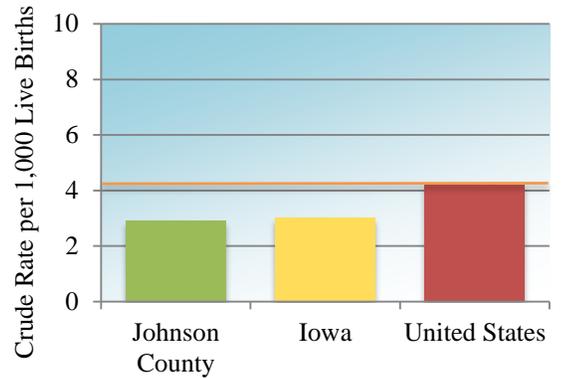
FAMILY PLANNING MATERNAL & INFANT HEALTH

Infant Crude Mortality Rate per 1,000 Live Births within the First 28 Days of Life,

Report Area	Crude Rate
Johnson County	2.9
Iowa	3
United States	4.2
Healthy People 2020 Goal	<4.1

Source: CDC Linked Birth/Infant Death Data Set accessed via Health Indicators Warehouse

Infant Mortality Rate within First 28 Days of Life, 2007-2011

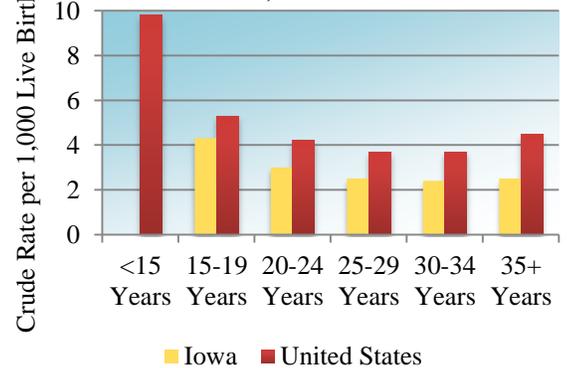


Infant Crude Mortality Rate per 1,000 Live Births within the First 28 Days of Life by Age of the Mother, 2009-2011

Report Area	<15 Years	15-19 Years	20-24 Years	25-29 Years	30-34 Years	35+ Years
Iowa	*	4.3	3	2.5	2.4	2.5
United States	9.8	5.3	4.2	3.7	3.7	4.5

*Data suppressed to maintain confidentiality. Source: CDC Linked Birth/Infant Death Data Set accessed via Health Indicators Warehouse

Infant Mortality Rate within First 28 Days of Life by Age of the Mother, 2009-2011

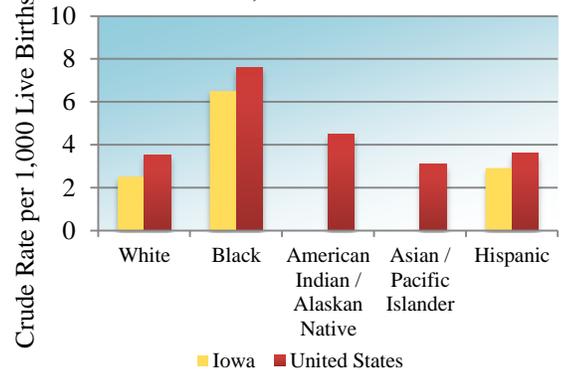


Infant Crude Mortality Rate per 1,000 Live Births within the First 28 Days of Life by Race of the Mother, 2009-2011

Report Area	White	Black	American Indian / Alaskan Native	Asian / Pacific Islander	Hispanic
Iowa	2.5	6.5	*	*	2.9
United States	3.5	7.6	4.5	3.1	3.6

* Data suppressed to maintain confidentiality. Source: CDC Linked Birth/Infant Death Data Set accessed via Health Indicators Warehouse

Infant Mortality Rate within First 28 Days of Life by the Mother's Race, 2009-2011





CHILD HEALTH INDICATORS

Importance of Indicator: Children represent a particularly vulnerable population in the community. Preventing childhood mortality and abuse is a key indicator of the health of our community and essential for the wellbeing of some of the most vulnerable in Johnson County.

Key Findings:

- The most common type of child abuse reported in Johnson County and the state is denial of critical care, also referred to as neglect.
- Over half of child abuse cases in Johnson County involve victims less than 5 years of age.
- Child and adolescent mortality rates are lower in Johnson County compared to the state and nation. Detailed information regarding child/adolescent deaths in Johnson County is limited due to data suppression to protect confidentiality.

Number of Children with Confirmed/Founded Child Abuse Cases, 2009-2013

Report Area	2009	2010	2011	2012	2013
Johnson County	222	357	281	341	325
Iowa	8867	12595	9712	11637	12276

Note: "This data counts each child who was a victim of child abuse once, no matter how many times they may have been reported or victimized." Source: Iowa Department of Human Services Child Abuse Statistics

Number of Confirmed/Founded Child Abuse Case Reports by Type of Abuse, 2013

Report Area	Denial of Critical Care (Neglect)	Exposure to Making of Meth	Mental Injury	Physical Abuse	Presence of Illegal Drugs in Child's System	Sexual Abuse	Allows Access to Registered Sex Offender
Johnson County	307	5	5	45	24	21	1
Iowa	14,279	162	43	1646	1172	716	186

Note: "This data does not count children - it counts all confirmed or founded allegations of neglect and abuse for each child. Each child may be confirmed of multiple types of abuse on a single report, and may have multiple reports." Source: Iowa Department of Human Services Child Abuse Statistics

Number of Confirmed/Founded Child Abuse Cases by Age of the Victim, 2013

Report Area	<5 Years	6-10 Years	11+ Years	Total	Percent <5 Years
Johnson County	178	91	56	325	54.8%
Iowa	6015	3503	2758	12276	49.0%

Source: Iowa Department of Human Services Child Abuse Statistics



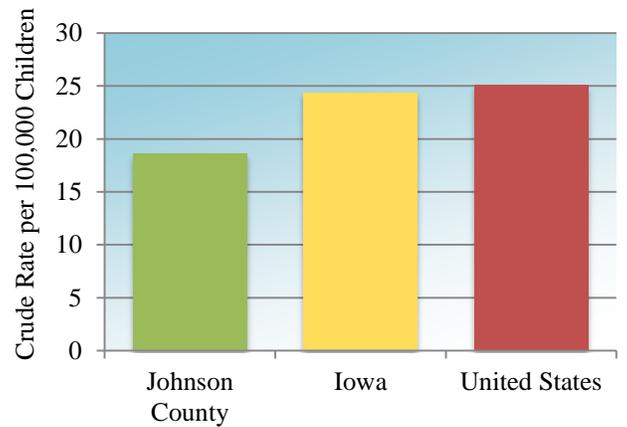
CHILD HEALTH INDICATORS

Children & Adolescents <20 Years Mortality Rate per 100,000 Population, 2010-2013

Report Area	Crude Rate
Johnson County	18.6
Iowa	24.4
United States	25.1

Source: CDC Wonder

Children & Adolescents under 20 Years of Age Mortality Rate, 2010-2013

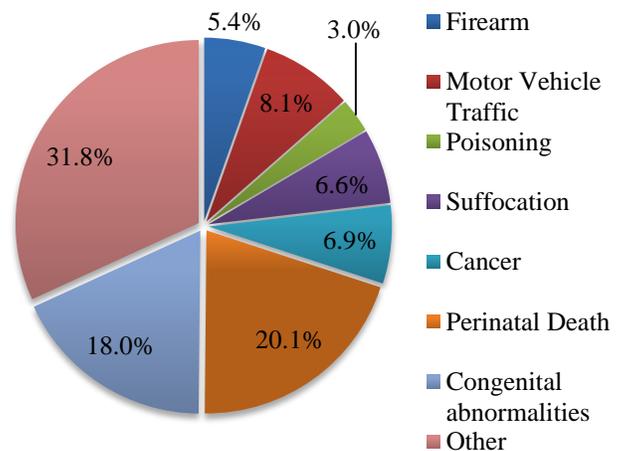


Causes of Death for Children & Adolescents under 20 Years of Age in Iowa, 2013

Cause of Death	Number Deaths	Population at Risk	Crude Rate
Firearm	18	814,609	2.2
Motor Vehicle Traffic	27	814,609	3.3
Poisoning	10	814,609	1.2
Suffocation	22	814,609	2.7
Cancer	23	814,609	2.8
Perinatal Death	67	814,609	8.2
Congenital Abnormalities	60	814,609	7.4
Other	106	814,609	NA

Note: Rates per 100,000 Population
Source: CDC Wonder

Causes of Death in Children/Adolescents under 20 Years of Age, 2013





DOMESTIC VIOLENCE

Importance of Indicator: Domestic Violence is preventable and those who are victims of domestic violence represent a vulnerable population in our community. In Johnson County, the Domestic Violence Intervention Program provides to comprehensive support and advocacy for victims of domestic violence.

Key Findings:

- The Domestic Violence Intervention Program (DVIP) provided services to over 1,400 victims of domestic violence in 2013.
- DVIP provided 295 women and children emergency shelter in 2013.
- 67% of DVIP services were provided in Johnson County.

24-Hour Census of Domestic Violence Shelters and Services, September 17, 2013

Report Area	Response Rate	Adults Served	Children Served	Total People Served	Unmet Requests for Services
Iowa	92%	437	257	694	87
United States	87%	41,277	25,304	66,581	9,641

Report Area	Hotline Calls Answered	Total People Trained	Served in Shelter	Served in Transitional Housing	Non-Residential Served
Iowa	228	150	300	171	223
United States	20,267	23,389	23,517	12,831	30,233

Counts represent services provide during a 24 hr. period on September 17, 2013. Source: National Network to End Domestic Violence, 2013 National Census of Domestic Violence Services

Domestic Violence Intervention Program Services Statistics, 2013

Snapshot Statistics	
Total Adults/Children Served	1481
Total Women/Children provided Emergency Shelter	295
Total Victims Assisted in Navigating Community Systems (Criminal Justice, Human Services, Health Care Systems)	619
Percent of Services Provided in Johnson County	67%
Funding from Johnson County Resources	56%

Source: Domestic Violence Intervention Program FY 2014 Report



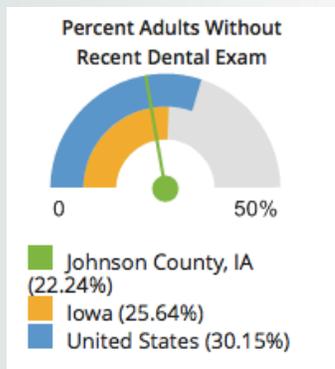
ORAL HEALTH

Importance of Indicator: Oral health can have significant impacts on overall health with problems affecting the mouth impacting the rest of the body. In addition, Early Childhood Caries (ECC) is one of the costliest diseases in children in the United States and is also almost 100% preventable. Fluoridated water is a key method of preventing ECC.

Percent of Population Receiving Fluoridated Water, 2012

Report Area	2012
Iowa	92.0%
United States	74.6%

Source: CDC 2012 Water Fluoridation Statistics
<http://www.cdc.gov/fluoridation/statistics/2012stats.htm>



Source: Community Commons – Johnson County, 2006-2010

Crude Rates of Dentists per 10,000 Population, 2013

Report Area	2013
Johnson County	12.1
Iowa	5.0

Source: The Iowa Health Fact Book 2013
<https://www.public-health.uiowa.edu/FACTBOOK/>

Key Findings:

- Families in Johnson County benefit from receiving care from the College of Dentistry and University of Iowa Hospitals and Clinics. Consequently, the rate of active dentists in Johnson County exceeds that of the state.
- Over 22% of Johnson County residents over the age of 18 report not having a recent dental exam with is slightly better than the state and national averages.
- Children on Medicaid are at greater risk for dental caries than the same population. Unfortunately, less than half of all children enrolled in Medicaid receive preventative dental services.
- The percentage of Iowans over the age of 65 with complete tooth loss increased slightly between 2010 and 2012, while national rates continued to decline.

Percent of Adults 18+ years who report not having a Dental Exam in the Last Year, 2006-2010

Report Area	Percent Adults with No Dental Exam
Johnson County, IA	22.24%
Iowa	25.64%
United States	30.15%

Source: Community Commons – Johnson County

Percent of Children Requiring Dental Care, 2013-2014 Academic Year

Report Area	Kindergarten	9th Grade
Johnson County	12.8%	5.9%
Iowa	17.2%	13.3%

Source: Iowa Department of Public Health School Dental Screening Requirement 2013-2014 School Year
<http://www.idph.state.ia.us/IDPHChannelsService/file.aspx?file=7F265156-18E6-4B55-92FF-910166A95C64>

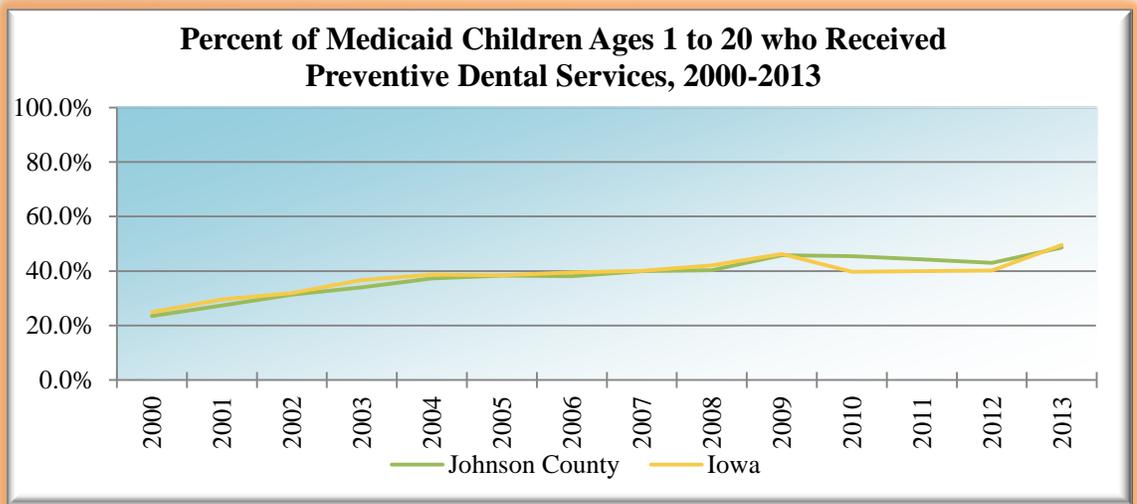


ORAL HEALTH

Percent of Children enrolled in Medicaid Ages 1 to 20 who received Preventive Dental Services

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Johnson County	37.2%	38.4%	38.1%	40.0%	40.3%	45.8%	45.4%	44.3%	43.0%	48.6%
Iowa	38.7%	38.4%	39.5%	40.0%	42.1%	46.3%	39.7%	40.0%	40.2%	49.5%

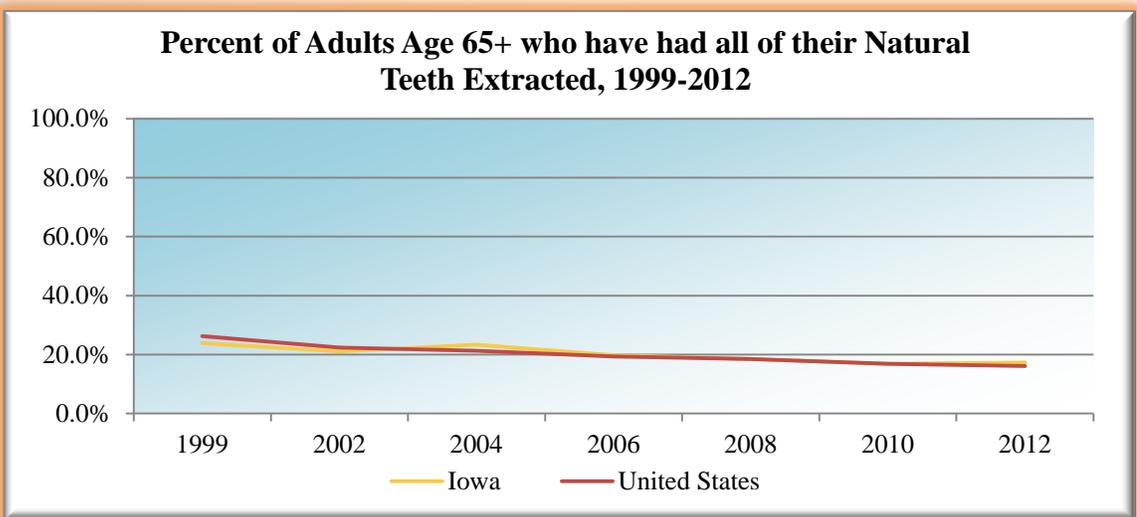
Source: Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Dental Services Reports
<http://www.idph.state.ia.us/OHDS/OralHealth.aspx?prog=OHC&pg=Reports>



Percent of Adults Age 65+ who have had all of their Natural Teeth Extracted

Report Area	1999	2002	2004	2006	2008	2010	2012
Iowa	23.9%	21.1%	23.3%	19.8%	18.5%	16.9%	17.3%
United States	26.2%	22.4%	21.3%	19.3%	18.5%	16.9%	16.1%

Source: National Health and Nutrition Examination Survey (NHANES) accessed via Health Indicators Warehouse





HEALTH RISK FACTORS HIGH BLOOD PRESSURE

Importance of Indicator: High blood pressure or hypertension is a common disease that can have dangerous consequences. High blood pressure is a risk factor for heart disease and stroke, two of the leading causes of mortality in Johnson County, Iowa and the nation.

Key Findings:

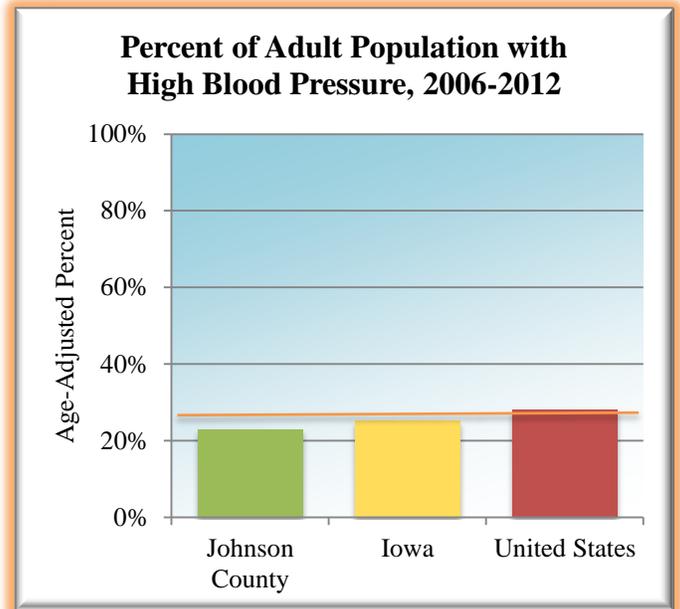
- Approximately 23% of adults in Johnson County have been told they have high blood pressure. This percentage is lower than state and national percentages and meets the Healthy People 2020 goal of less than 26.9%.
- The proportion of Medicare beneficiaries with high blood pressure in Johnson County is lower than state and national levels.

Healthy People 2020: Goal HDS-5.1 is to reduce the proportion of adults with high blood pressure to less than 26.9%.

Age-Adjusted Percent of Adults Diagnosed with High Blood Pressure, 2006-2012

Report Area	Percent
Johnson County	23%
Iowa	25%
United States	28%
Healthy People 2020 Goal	<26.9%

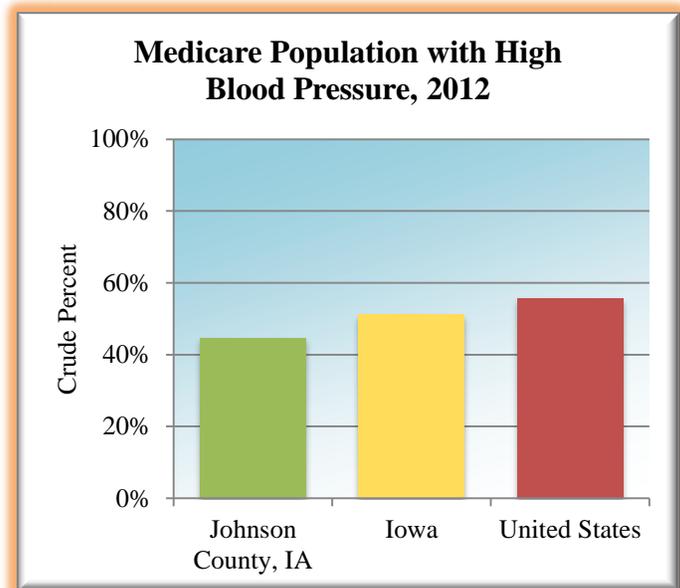
Source: Community Commons – Johnson County



Percent of Medicare Population Diagnosed with High Blood Pressure, 2012

Report Area	Percent
Johnson County	45%
Iowa	51%
United States	55%

Source: Community Commons – Johnson County





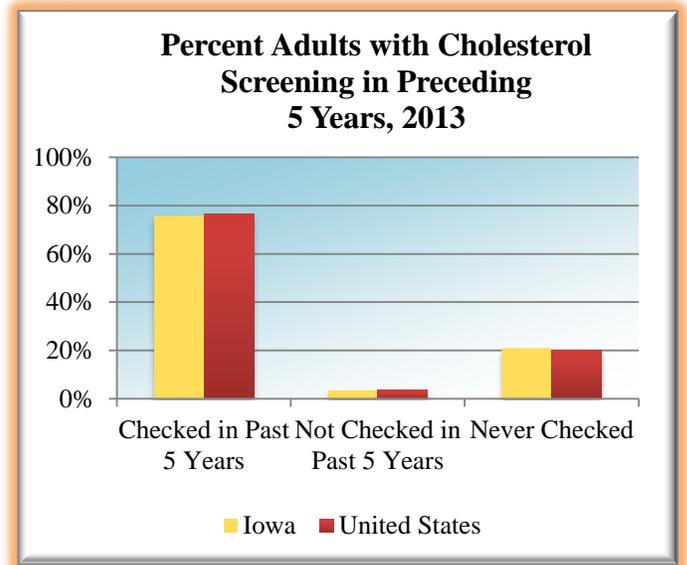
HEALTH RISK FACTORS HIGH CHOLESTEROL

Importance of Indicator: High cholesterol or hypercholesterolemia is a common and dangerous disease. High cholesterol is a risk factor for heart disease and stroke, two of the leading causes of mortality in Johnson County, Iowa and the nation.

Key Findings:

- Approximately 31% of adults in Johnson County have been told they have high cholesterol. This percentage is lower than state and national percentages.
- The proportion of Medicare beneficiaries with high cholesterol in Johnson County is lower than state and national levels.
- Approximately 75% of adults in Iowa have had cholesterol screening in the last 5 years. This remains below the Healthy People 2020 goal of 82.1%.

Healthy People 2020: Goal HDS-6 is to increase the proportion of adults who have had their blood cholesterol checked in the preceding 5 years to greater than 82.1%.



Percentage of Adults with Cholesterol Screening in the Preceding 5 Years, 2013

Report Area	Checked in Past 5 Years	Not Checked in Past 5 Years	Never Checked	Healthy People 2020 Goal
Iowa	75.7%	3.4%	21.0%	<82.1%
United States	76.4%	3.5%	20.1%	

Source: BRFSS

Age-Adjusted Percent of Adults Diagnosed with High Cholesterol, 2012

Report Area	Percent
Johnson County	32.5%
Iowa	37.9%
United States	38.5%

Source: Community Commons – Johnson County

Age-Adjusted Percent of Medicare Beneficiaries Diagnosed with High Cholesterol, 2012

Report Area	Percent
Johnson County	32.3%
Iowa	40.3%
United States	44.8%

Source: Community Commons – Johnson County

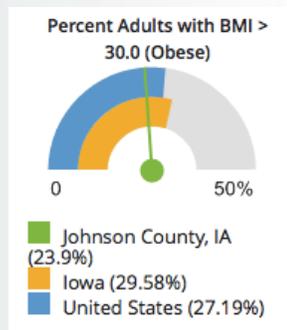
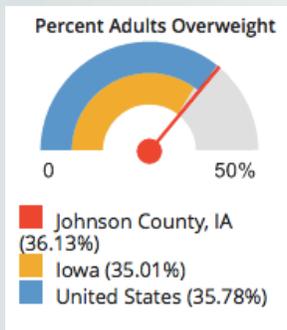


HEALTH RISK FACTORS OVERWEIGHT/OBESITY

Importance of Indicator: Overweight and obesity is a growing epidemic in the United States. Obesity is a significant risk factor for type II diabetes, heart disease and certain types of cancer. The 2008 estimated annual medical cost due to obesity was \$147 billion in the United States. Source: CDC Adult Obesity Facts

Key Findings:

- Approximately 60% of adults in Johnson County are overweight or obese. This is only slightly below state (64.6%) and national (63%) levels.
- Obesity rates in Johnson County climbed from 2004 - 2010, but less rapidly than state or national rates. In 2011, Johnson County obesity rates decreased slightly, while Iowa rates continued to increase.
- Males have higher rates of obesity than females in the state and nation.



Source: Community Commons – Johnson County

Percent of Adults who are Overweight or Obese, 2011-2012

Report Area	Percent Overweight	Percent Obese
Johnson County	36.1%	23.9%
Iowa	35.0%	29.6%
United States	35.8%	27.2%

Source: Community Commons – Johnson County

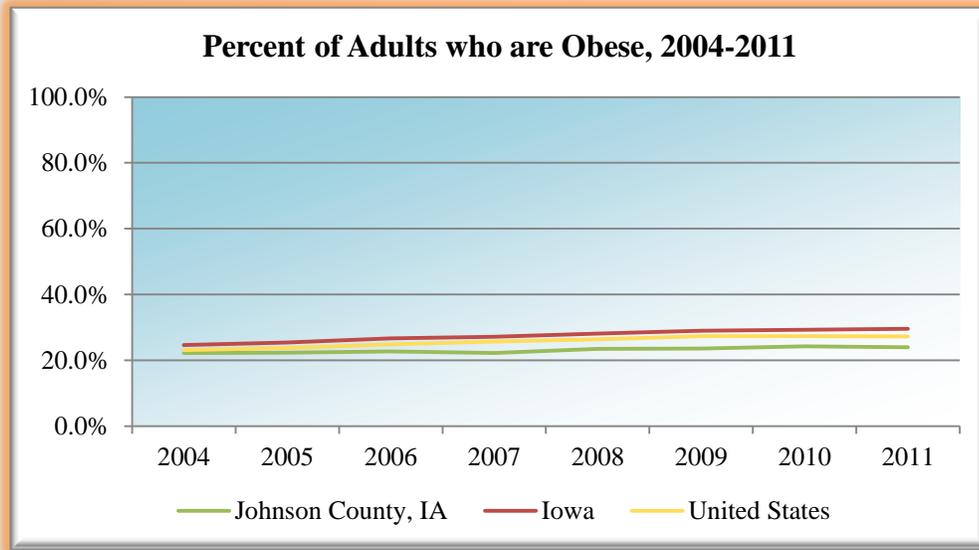
Percent of Adults who are Obese, 2004 - 2011

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012
Johnson County	22.2%	22.3%	22.7%	22.2%	23.5%	23.6%	24.2%	23.9%	23.1%
Iowa	24.6%	25.4%	26.7%	27.1%	28.1%	29.0%	29.3%	29.6%	30.4%
United States	23.1%	23.8%	24.8%	25.6%	26.4%	27.4%	27.3%	27.2%	27.1%

Source: Community Commons – Johnson County



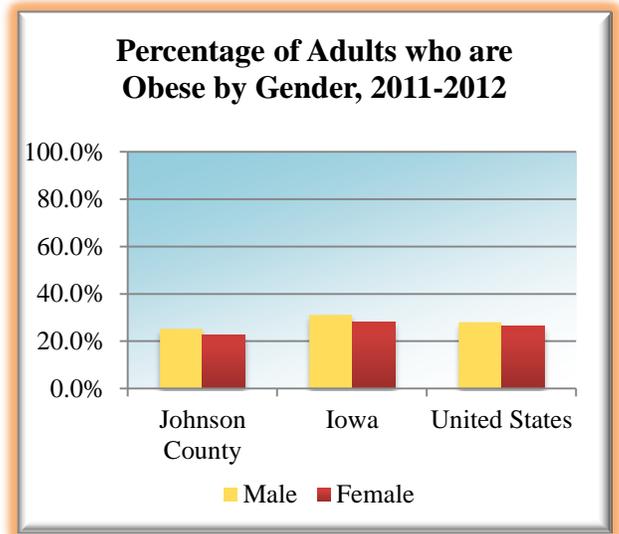
HEALTH RISK FACTORS OVERWEIGHT/OBESITY



Percent of Adults who are Obese by Gender, 2011-2012

Report Area	Male	Female
Johnson County	25.2%	22.6%
Iowa	31.1%	28.1%
United States	28.0%	26.4%

Source: Community Commons – Johnson County



Percent of Adults who are Overweight by Race, 2011-2012

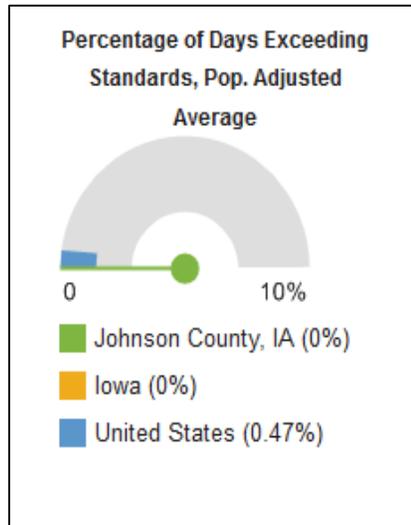
Report Area	White (Non-Hispanic)	Black	Hispanic	Other Race
Iowa	35.42%	33.06%	32.38%	27.42%
United States	35.85%	34.31%	38.43%	31.61%

Source: Community Commons – Johnson County



AIR QUALITY - OZONE

Importance of Indicator: Ozone in the air we breathe can be harmful to our health. This is especially true among children, elderly, those with lung disease, and people who spend lots of time outdoors. Health problems that result from exposure to ozone include chest pain, coughing, throat irritation, and congestion. This can lead to bronchitis, emphysema, and asthma. Additionally, repeated exposure can cause scarring of the lung. Ozone is regulated by the EPA under the Clean Air Act. National Ambient Air Quality Standard – 75 parts per billion (ppb) 8-hour average.



Source: Community Commons: Johnson County

Key Findings

- Average daily ambient air ozone concentration is lower in Johnson County compared to Iowa and the national averages.

Report Area	Total Population	Average Daily Ambient Ozone Concentration	Number of Days Exceeding Emissions Standards
Johnson County	130,882	36.77	0
Iowa	3,046,355	36.82	0
United States	312,471,327	38.98	1.59

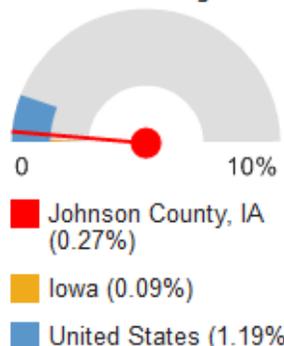
Source: Centers for Disease Control and Prevention, National Environmental Public Health Tracking Network. Access via Community



AIR QUALITY – PARTICULATE MATTER 2.5

Importance of Indicator: Particulate Matter 2.5 is an environmental pollutant which is 2.5 micrometers or smaller in diameter. It can lead to increased respiratory symptoms, such as coughing or difficulty breathing, as well as decreased lung function, aggravated asthma, development of chronic bronchitis, and an irregular heartbeat. PM 2.5 is regulated by the EPA under the Clean Air Act. National Ambient Air Quality Standard is 35 micrograms per cubic meter (24 hour standard) and 12 micrograms per cubic meter (Annual 3 year average).

Percentage of Days Exceeding Standards, Pop. Adjusted Average

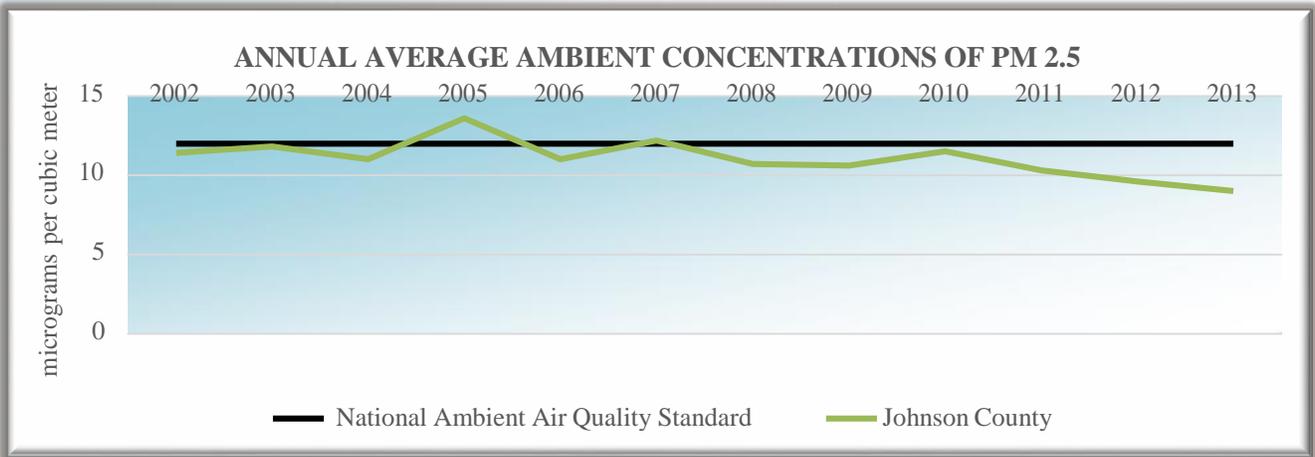


Source: Community Commons: Johnson County

Key Findings

- Average daily ambient air PM 2.5 concentration is higher in Johnson County compared to Iowa but lower than the national average.
- Trend has shown a slight decrease in PM 2.5 concentration within Johnson County over time.

Report Area	Total Population	Average Daily Ambient Particulate Matter 2.5	Number of Days Exceeding Emissions Standards
Johnson County	130,882	9.83	1
Iowa	3,046,355	8.9	0.3
United States	312,471,327	10.65	4.17



Source: Centers for Disease Control and Prevention, National Environmental Public Health Tracking Network

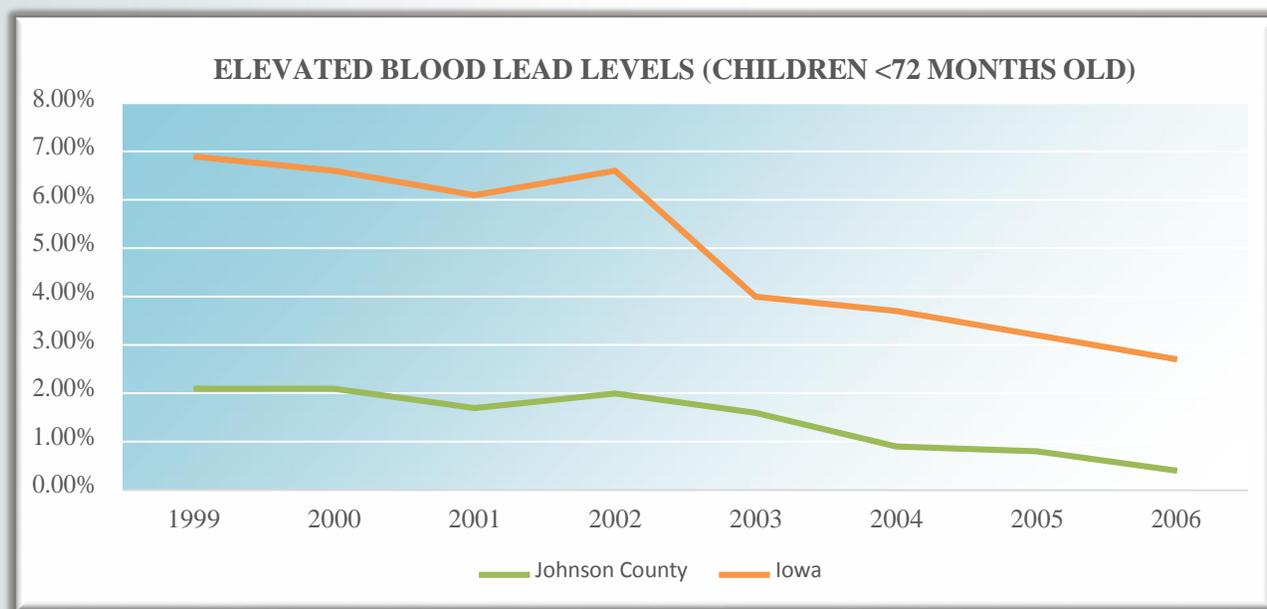


CHILD BLOOD LEAD LEVELS

Importance of Indicator: Lead poisoning is a significant health problem that is very preventable. Lead can affect nearly every organ in the body, but is particularly harmful to the developing brains and nervous systems of children under the age of six years. Lead levels have been on the decline, but Iowa still has some of the highest levels in the nation. A blood lead level greater than or equal to 10 micrograms of lead per deciliter of blood ($\mu\text{g/dL}$) requires public health interventions. The main source of lead exposure among children is lead-based paint and lead-contaminated dust found in older buildings. Lead-based paints were banned for use in housing in 1978. Houses and other buildings built before 1978, especially those built before 1950, may be a source of lead exposure.

Key Findings

- Lead levels in Johnson County are much lower than levels in the rest of the state.
- Lead levels have been declining in Iowa and Johnson County over the past decade.



Source: The Iowa Health Fact Book



ADULT BLOOD LEAD LEVELS

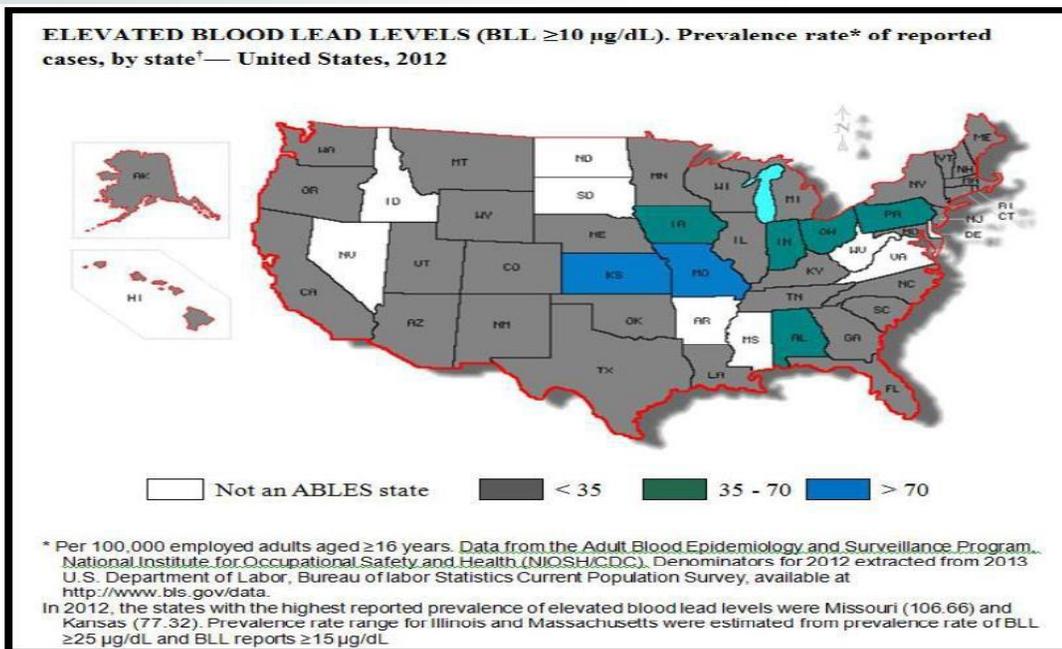
Importance of Indicator: The Adult Blood Lead Epidemiology and Surveillance (ABLES) program through the Iowa Department of Public Health collects all blood lead test results for Iowa adults 16 years of age or older. The majority of adult lead exposures comes from work-related exposures in manufacturing, recycling, residential and commercial renovation work, radiator repair work, and work with lead solder. An additional number of adults are exposed through hobby activities involving firearms and casting or reloading shot.

Key Findings

- Iowa has some of the highest adult blood lead levels in the nation.
- In 2011, Iowa had 15.3 EBL/100,000 (employed persons with an elevated blood level (EBL) of 25 mcg/dL or higher) compared with 6.4 EBL/100,000 at the national average.
- Of those adults tested in 2013, Johnson County only had 3.6% test high compared with 27% in the state of Iowa.

2013 Iowa Adult Blood Lead Testing

Report Area	Adults Tested	Blood Lead Level >10ug/dL	Percent High
Johnson County	83	3	3.6
Iowa	3173	856	27



Source: Iowa Department of Public Health, Adult Blood Lead Epidemiology and Surveillance (ABLES)



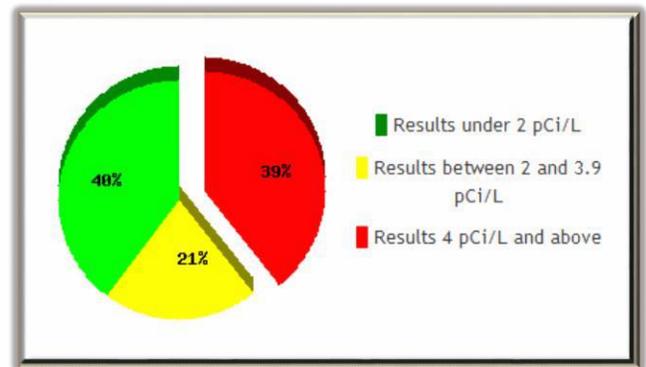
RADON

Importance of Indicator: Radon is the second leading cause of lung cancer behind smoking. It is a tasteless, odorless, invisible gas that naturally occurs in the ground. Because of this, radon is always present in the air we breathe, and concentrations are highest indoors. The EPA recommends a radon mitigation system be installed in homes with radon levels exceeding 4 pCi/L (picocuries per liter). Residents of Johnson County are encouraged to use radon test kits which are available at Johnson County Public Health to see if their home has a higher than acceptable amount of radon.

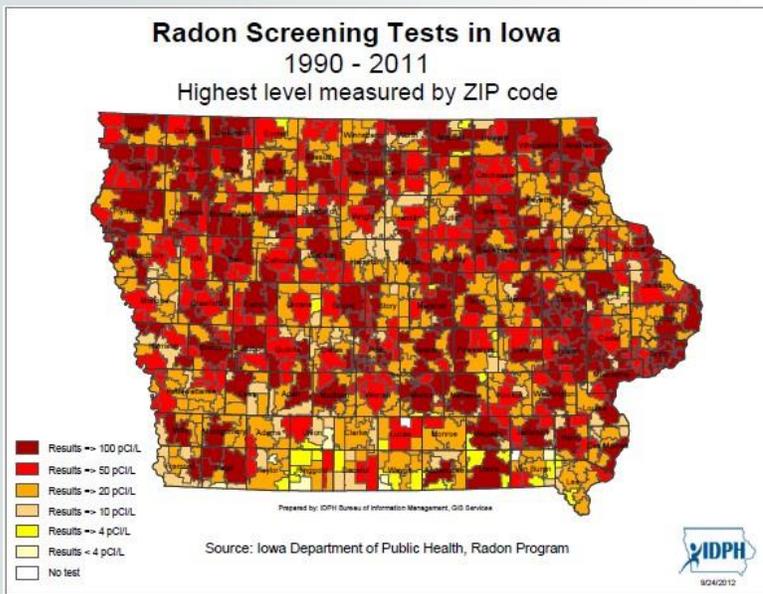
Key Findings

- The average national indoor radon level is 1.3 pCi/L.
- The average indoor radon levels of Johnson County is 4.3 pCi/L.

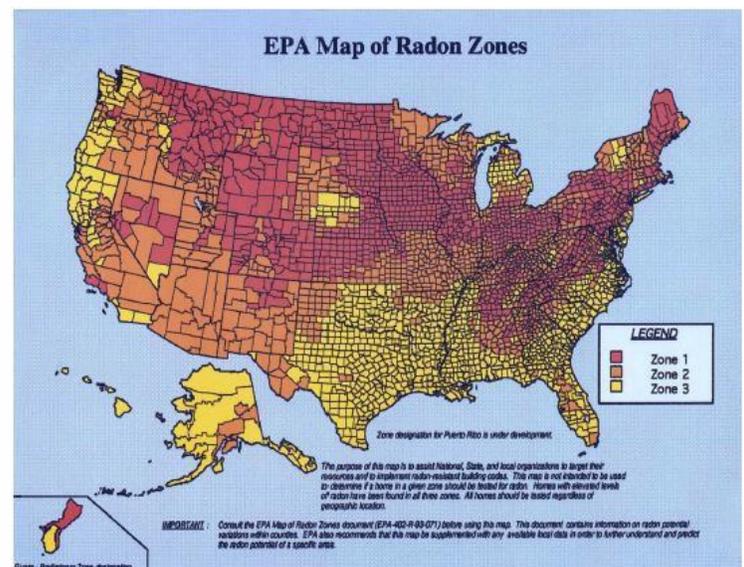
Radon Levels in Johnson County



Source: <http://county-radon.info/IA/Johnson.html>



Source: EPA.gov





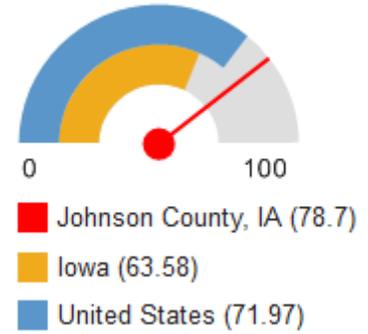
FAST FOOD RESTAURANT ACCESS

Importance of Indicator: Fast food restaurant access provides a measure of healthy food access and environmental influences on dietary behaviors.

Key Findings

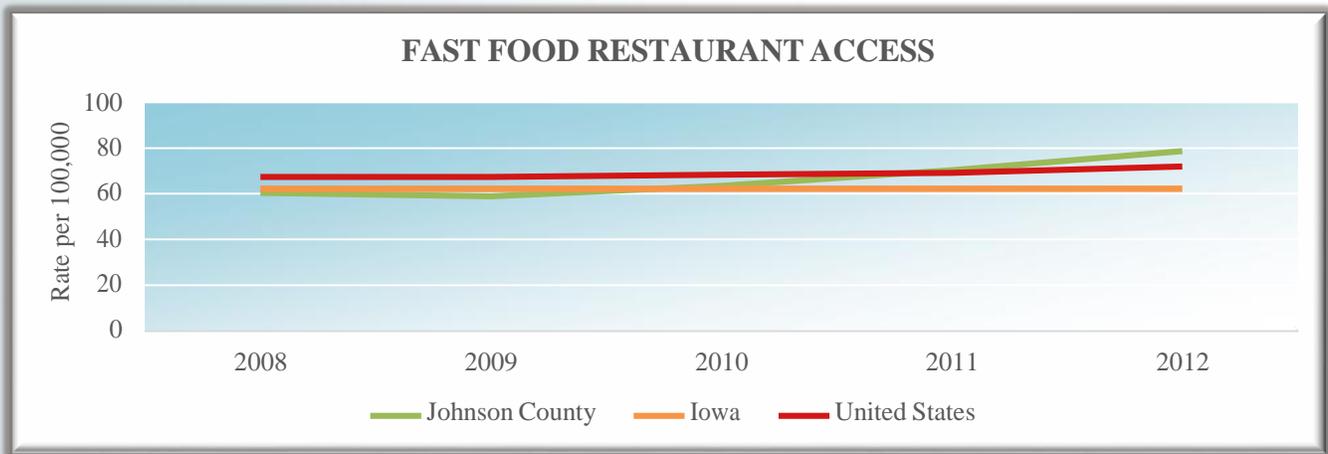
- Johnson County has a higher rate of fast food restaurants per 100,000 people than that of Iowa and the national rate.
- Johnson County has shown a sharp increase in the rate of fast food restaurants per 100,000 people since 2009.

Fast Food Restaurants, Rate (Per 100,000 Population)



Source: Community Commons: Johnson County

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Johnson County	130,882	103	78.7
Iowa	3,046,355	1,937	63.58
United States	312,471,327	224,877	71.97



Source: U.S. Census Bureau: County Business Patterns (2012). Accessed via Community Commons

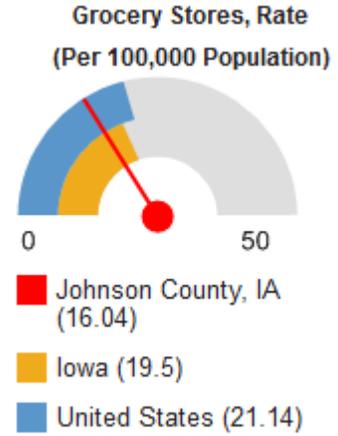


GROCERY STORE ACCESS

Importance of Indicator: Grocery store access provides a measure of healthy food access and environmental influences on dietary behaviors.

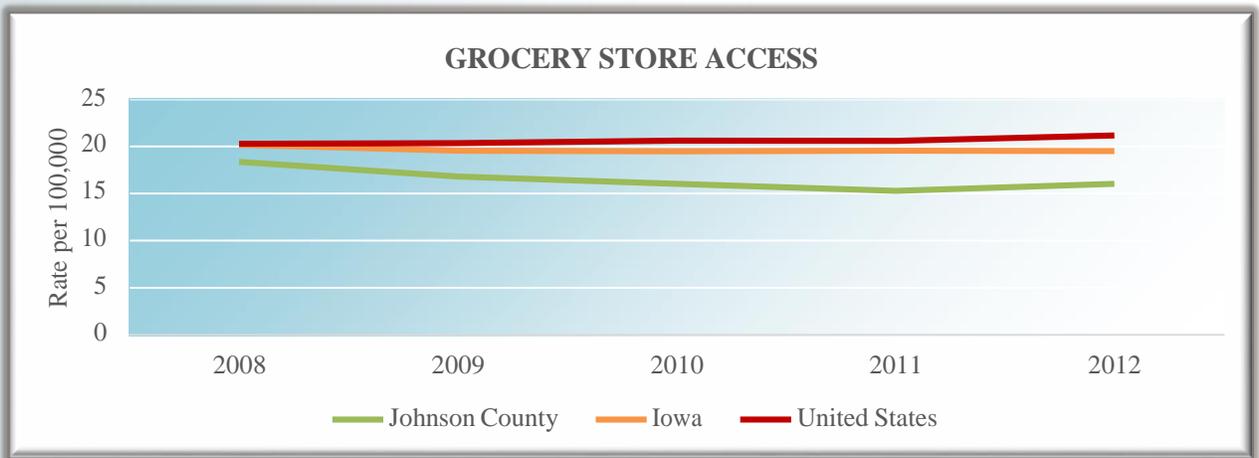
Key Findings

- Johnson County has a lower rate of grocery stores per 100,000 people than that of Iowa and the national average.
- Trend has shown a decrease in the rate of grocery stores in Johnson County while the rate has held steady in Iowa and nationally.



Source: Community Commons: Johnson County

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Johnson County	130,882	21	16.04
Iowa	3,046,355	594	19.5
United States	312,471,327	66,047	21.14



Source: U.S. Census Bureau: County Business Patterns (2012). Accessed via Community Commons



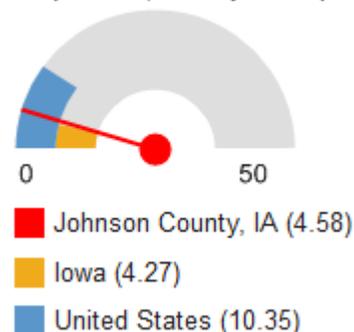
LIQUOR STORE ACCESS

Importance of Indicator: Liquor store access provides a measure of healthy food access and environmental influences on dietary behaviors.

Key Findings

- Johnson County has a very similar rate compared to that of Iowa. This rate is dramatically less than that of the national average.
- Trend has shown a steady rate since 2008, dropping slightly from 2011-2012.

Liquor Stores, Rate (Per 100,000 Population)



Source: Community Commons: Johnson County

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Johnson County	130,882	6	4.58
Iowa	3,046,355	130	4.27
United States	312,471,327	32,327	10.35

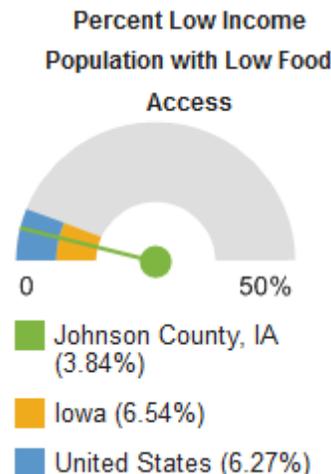


Source: U.S. Census Bureau: County Business Patterns (2012). Accessed via Community Commons



LOW INCOME POPULATION WITH LOW FOOD ACCESS

Importance of Indicator: Limited access to nutritious food and easier access to less nutritious food can affect the health of the community by making it more difficult to eat a healthy diet. Low-income is defined as annual family income of less than or equal to 200 percent of the Federal poverty threshold given family size, and Low Access is defined as greater than 33% of the census tract's population living greater than 1 mile (urban) or 10 miles (rural) from a grocery store.

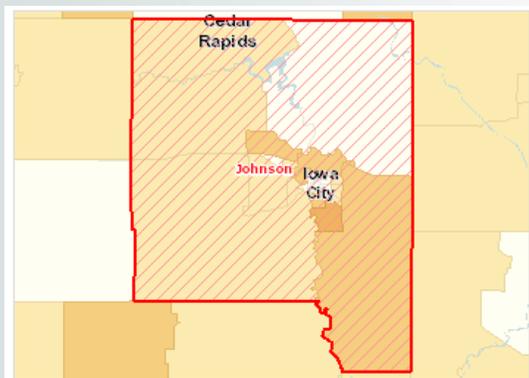


Key Findings

- Johnson County has a substantially lower percentage of lower income population with low food access compared to Iowa and the national average.

Source: Community Commons: Johnson County

Report Area	Total Population	Low Income Population with Low Food Access	Percent Low Income Population with Low Food Access
Johnson County	130,882	5,028	3.84%
Iowa	3,046,355	199,383	6.54%
United States	308,745,538	19,347,047	6.27%



Population with Limited Food Access, Low Income, Percent by Tract, FARA 2010

- Over 50.0%
- 20.1 - 50.0%
- 5.1 - 20.0%
- Under 5.1%
- No Low Food Access
- Report Area

Source: Community Commons: Johnson County

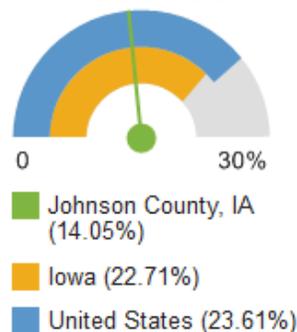
Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. Accessed via Community Commons



POPULATION WITH LOW FOOD ACCESS

Importance of Indicator: Limited access to nutritious food and easier access to less nutritious food can affect the health of the community by making it more difficult to eat a healthy diet. Low Access is defined as greater than 33% of the census tract's population living greater than 1 mile (urban) or 10 miles (rural) from a grocery store.

Percent Population with Low Food Access

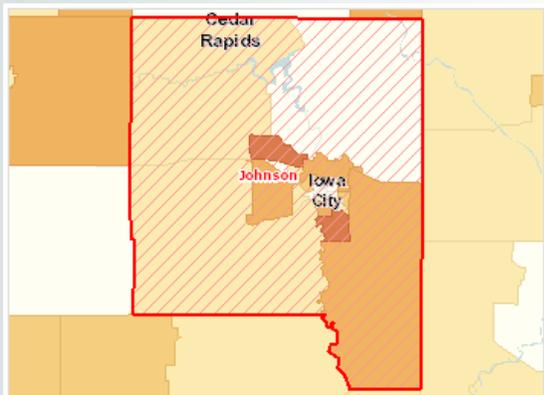


Source: Community Commons: Johnson County

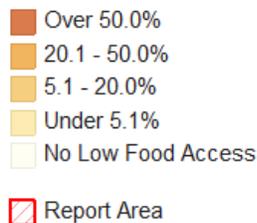
Key Findings

- Johnson County has a lower percentage of the population with low food access compared to Iowa and the national average.

Report Area	Total Population	Population with Low Food Access	Percent Population with Low Food Access
Johnson County	130,882	18,386	14.05%
Iowa	3,046,355	691,782	22.71%
United States	308,745,538	72,905,540	23.61%



Population with Limited Food Access, Percent by Tract, FARA 2010



Source: Community Commons: Johnson County

Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. Accessed via Community Commons.

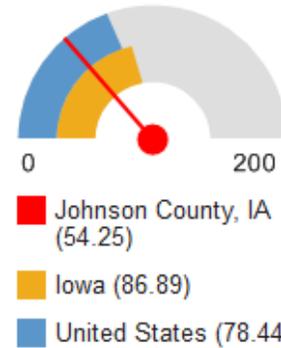
SNAP-AUTHORIZED FOOD STORE ACCESS

Importance of Indicator: The number of food stores that accept Supplemental Nutrition Assistance Program (SNAP) plays an important role in supporting families with limited incomes obtain food and protect against food insecurity.

Key Findings

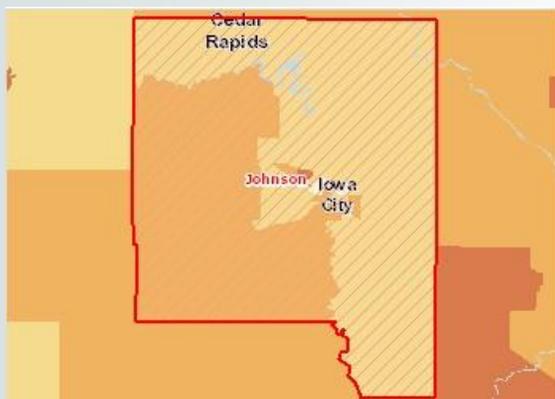
- Johnson County has far less SNAP-authorized retailers per 100,000 population than both Iowa and the national average.

SNAP-Authorized Retailers, Rate (Per 100,000 Population)

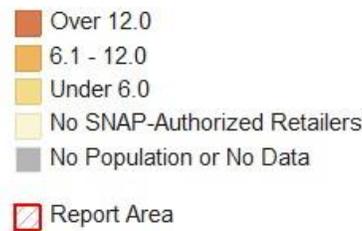


Source: Community Commons: Johnson County

Report Area	Total Population	Total SNAP-Authorized Retailers	SNAP-Authorized Retailers, Rate per 100,000 Population
Johnson County	130,882	71	54.25
Iowa	3,046,355	2,647	86.89
United States	312,471,327	245,113	78.44



SNAP-Authorized Retailers, Rate per 10,000 Population by Tract, USDA SNAP Locator 2014



Source: Community Commons: Johnson County

Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Access via Community Commons



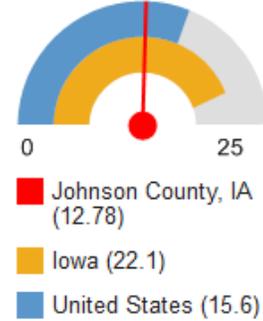
WIC-AUTHORIZED FOOD STORE ACCESS

Importance of Indicator: This number of food stores that are authorized to accept WIC (Special Supplemental Nutrition Program for Women, Infants, and Children) benefits provides a measure of food security and healthy food access for women and children in poverty as well as environmental influences on dietary behaviors.

Key Findings

- Johnson County has less WIC-authorized food stores per 100,000 population than both Iowa and the national average.

WIC-Authorized Food Stores, Rate
(Per 100,000 Population)



Source: Community Commons: Johnson County

Report Area	Total Population (2011 Estimate)	Number WIC-Authorized Food Stores	WIC-Authorized Food Store Rate (Per 100,000 Pop.)
Johnson County	133,038	17	12.78
Iowa	3,069,845	681	22.1
United States	318,921,538	50,042	15.6

Source: US Department of Agriculture, Economic Research Service, USDA - Food Environment Atlas. Accessed via Community Commons



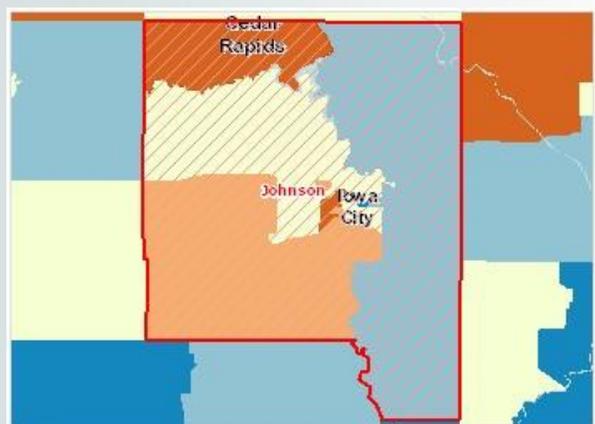
MODIFIED RETAIL FOOD ENVIRONMENT INDEX

Importance of Indicator: The Modified Retail Food Environment Index (mRFEI) is a measure of the proportion of food retailers/outlets that typically sell healthy foods. Scores can range from 0 (no food retailers that typically sell healthy food) to 100 (only food retailers that typically sell healthy food).

Key Findings

- Johnson County has a higher percent of the population with no food retailers compared to Iowa and the national average.
- Johnson County has a lower percent of the population with no healthy food access compared Iowa and the national average, but also has a lower percent of the population with high healthy food access compared to Iowa and the national average.

Report Area	Total Population	Percent Population in Tracts with No Food Retailers	Percent Population in Tracts with No Healthy Food Retailers	Percent Population in Tracts with Low Healthy Food Access	Percent Population in Tracts with Moderate Healthy Food Access	Percent Population in Tracts with High Healthy Food Access
Johnson County	130,882	3.62%	8.96%	38.98%	46.96%	1.47%
Iowa	3,046,355	1.41%	26.36%	20.04%	44.39%	7.80%
United States	312,474,470	0.99%	18.63%	30.89%	43.28%	5.02%



Modified Retail Food Environmental Index Score by Tract, DNPAO

- Index Score Over 30 (High Access)
- Index Score 15 - 30 (Moderate Access)
- Index Score 5 - 15 (Low Access)
- Index Score Under 5 (Poor Access)
- No Healthy Retail Food Outlet (No Access)
- No Retail Food Outlets Present (Food Desert)
- Report Area

Source: Community Commons: Johnson County

Source: Centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity. Accessed via Community Commons

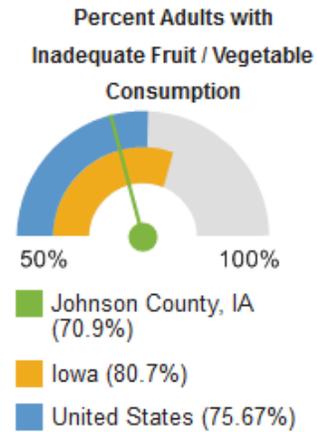
FRUIT AND VEGETABLE CONSUMPTION

Importance of Indicator: This indicator captures the percentage of adults (over 18) who are consuming less than 5 servings of fruits and vegetables each day.

Healthy People 2020: Goal NWS-14 is to increase the contribution of fruits to the diets of the population aged 2 years and older to 0.90 cup equivalent per 1,000 calories. Goal NWS-15.1 is to increase the contribution of total vegetables to the diets of the population aged 2 years and older to 1.4 cup equivalent per 1,000 calories.

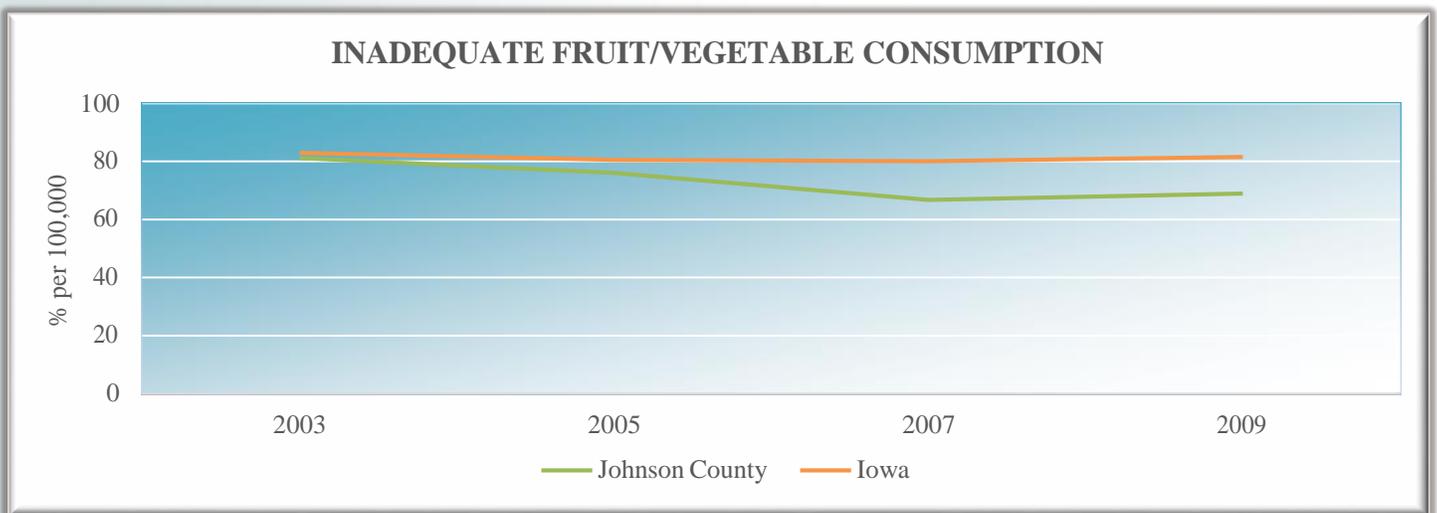
Key Findings

- Johnson County has a lower percentage of adults with inadequate fruit and vegetable consumption compared to Iowa and the national average.
- Iowa as a whole has a higher percentage of adults with inadequate fruit and vegetable consumption than the national average.



Source: Community Commons: Johnson County

Report Area (2005-2009)	Total Population(Age 18+)	Total Adults with Inadequate Fruit / Vegetable Consumption	Percent Adults with Inadequate Fruit / Vegetable Consumption
Johnson County	101,590	72,027	70.90%
Iowa	2,268,969	1,831,058	80.70%
United States	227,279,010	171,972,118	75.67%



Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse



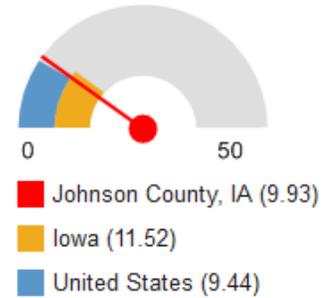
RECREATION AND FITNESS FACILITY ACCESS

Importance of Indicator: Access to recreation and fitness facilities promotes physical activity and other healthy behaviors.

Key Findings

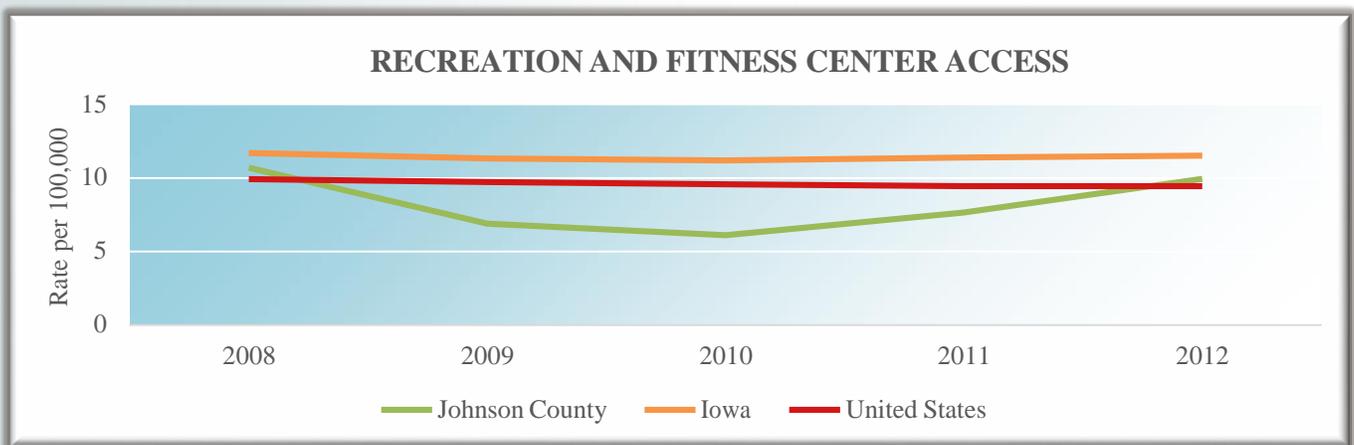
- Johnson County has less recreation and fitness facilities per 100,000 population compared to Iowa but slightly more than the national average.
- From 2008-2010, Johnson County saw a sharp decline in the rate of recreation and fitness facilities per 100,000 population, but from 2010-2012 saw a distinct increase in the rate.

Recreation and Fitness Facilities, Rate (Per 100,000 Population)



Source: Community Commons: Johnson County

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Johnson County	130,882	13	9.93
Iowa	3,046,355	351	11.52
United States	312,471,327	29,511	9.44



Source: U.S. Census Bureau: County Business Patterns (2012). Access via Community Commons



PHYSICAL INACTIVITY

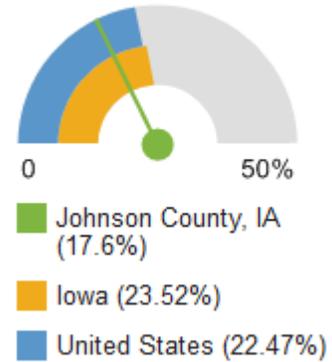
Importance of Indicator: This indicator captures the percentage of adults aged 20 and older who self-reported no leisure time for activity. The question asked was: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" Physical activity is a determinant of health and may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

Healthy People 2020: Goal PA-1 is to reduce the proportion of adults who engage in no leisure-time physical activity to 32.6%.

Key Findings

- Johnson County has a lower percentage of the adult population who reported no leisure time physical activity compared to Iowa and the national average.
- At 17.6% of adults reporting no leisure time physical activity, Johnson County is well below the Healthy People 2020 goal of 32.6%.

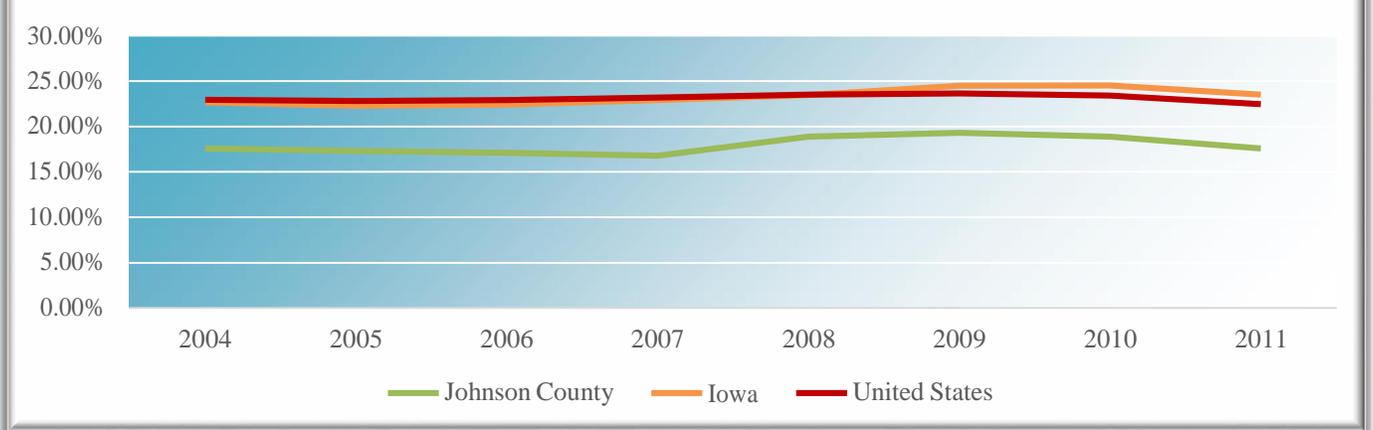
Percent Population with no Leisure Time Physical Activity



Source: Community Commons: Johnson County

Report Area (2011)	Total Population Age 20+	Population with no Leisure Time Physical Activity	Percent Population with no Leisure Time Physical Activity
Johnson County	100,166	16,928	17.60%
Iowa	2,245,446	545,349	23.52%
United States	228,772,311	52,318,681	22.47%

ADULTS PHYSICALLY INACTIVE



Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion



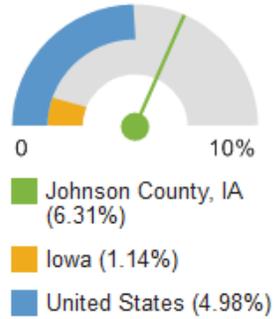
USE OF PUBLIC TRANSPORTATION

Importance of Indicator: This indicator reports the percentage of population using public transportation as their primary means of commuting to work

Key Findings

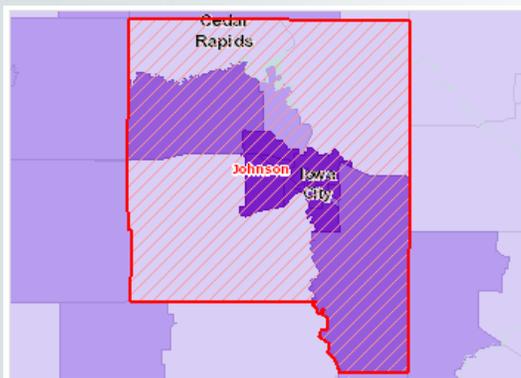
- Johnson County has a higher percent of the population who uses public transportation for commuting to work compared to Iowa and the national average.

Percent Population Using Public Transit for Commute to Work



Source: Community Commons: Johnson County

Report Area (2008-2012)	Total Population Employed Age 16+	Population Using Public Transit for Commute to Work	Percent Population Using Public Transit for Commute to Work
Johnson County	72,989	4,602	6.31%
Iowa	1,529,744	17,387	1.14%
United States	139,893,632	6,967,689	4.98%



Workers Traveling to Work Using Public Transit, Percent by Tract, ACS 2008-12



Source: Community Commons: Johnson County

Source: US Census Bureau, American Community Survey - Accessed via Community Commons

ALCOHOL CONSUMPTION (BINGE DRINKING)

Importance of Indicator: This indicator captures the number of adults who have binge drank in the last month. This is defined as 5 or more drinks for men and 4 or more drinks for women on one occasion. This indicator is relevant because current behaviors are determinants of health. Alcohol consumption may illustrate a cause of significant health issues, such as cirrhosis, cancers, and untreated mental and behavioral health needs.

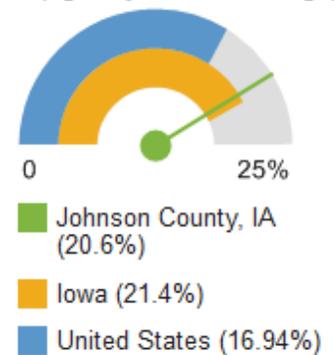
Key Findings

- Both Johnson County and the state of Iowa have higher rates of binge drinking than the national average.
- While the 6 year average from 2006-2012 is under the Healthy People 2020 goal, the 2012 data shows binge drinking in Johnson County is above the goal.

Healthy People 2020: Goal SA-14.3 is to reduce the proportion of persons engaging in binge drinking during the past 30 days – adults age 18 years and older to 24.4%.

Healthy Iowans 2016: Goal is to reduce adult binge drinking to 16%.

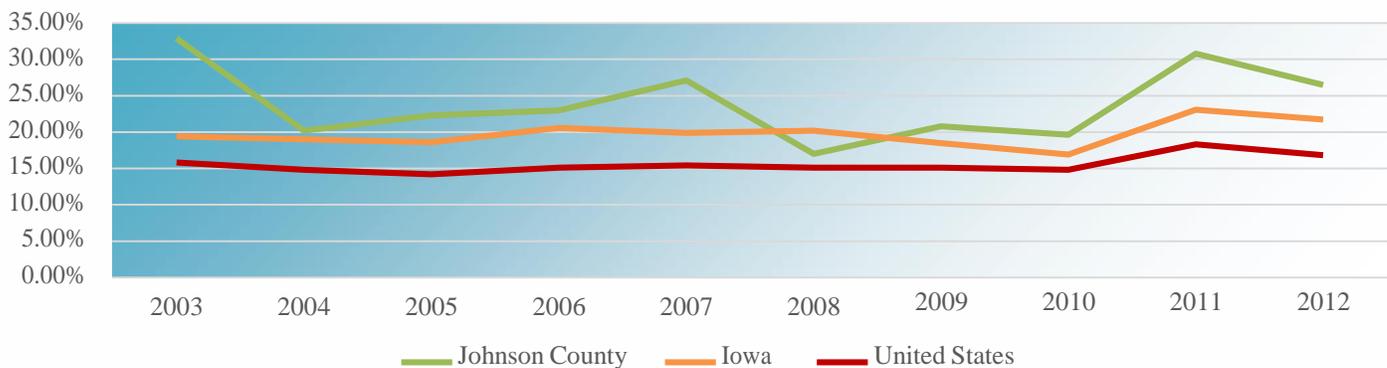
Estimated Adults Drinking Excessively (Age-Adjusted Percentage)



Source: Community Commons: Johnson County

Report Area (2006-2012)	Total Population Age 18+	Estimated Adults Drinking Excessively	Estimated Adults Drinking Excessively(Crude Percentage)	Estimated Adults Drinking Excessively(Age-Adjusted Percentage)
Johnson County	103,867	22,020	21.20%	20.60%
Iowa	2,307,562	463,820	20.10%	21.40%
United States	232,556,016	38,248,349	16.45%	16.94%

ADULTS BINGE DRINKING IN LAST MONTH



Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Iowa Epidemiological Website and the Health Indicators Warehouse



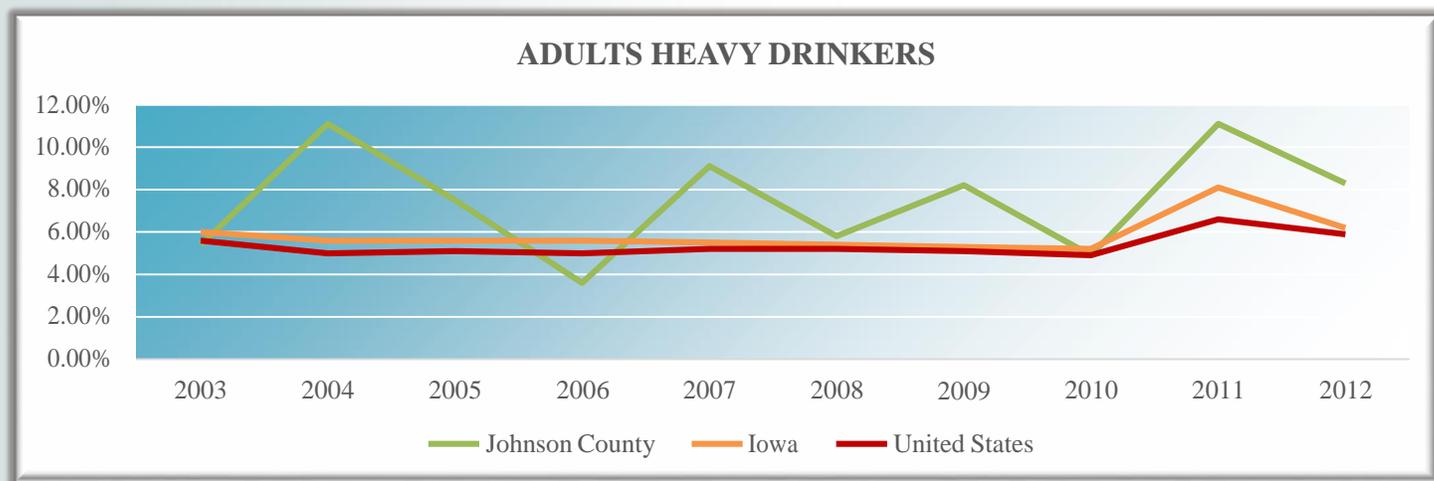
ALCOHOL CONSUMPTION (HEAVY DRINKING)

Importance of Indicator: This indicator captures the percentage of adults (over 18) who consume more than 2 drinks per day for adult men and more than one drink per day for adult women

Key Findings

- Johnson County has a higher percentage of adults who report being heavy drinkers compared to Iowa and the national average
- Johnson County has seen an increasing trend of heavy drinkers since 2006.

Report Area	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Johnson County	5.40	11.10	7.50	3.60	9.10	5.80	8.20	4.90	11.10	8.30
Iowa	6.00	5.60	5.60	5.60	5.50	5.40	5.30	5.20	8.10	6.20
United States	5.60	5.00	5.10	5.00	5.20	5.20	5.10	4.90	6.60	5.90



Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System - Accessed via the Iowa Epidemiological Website



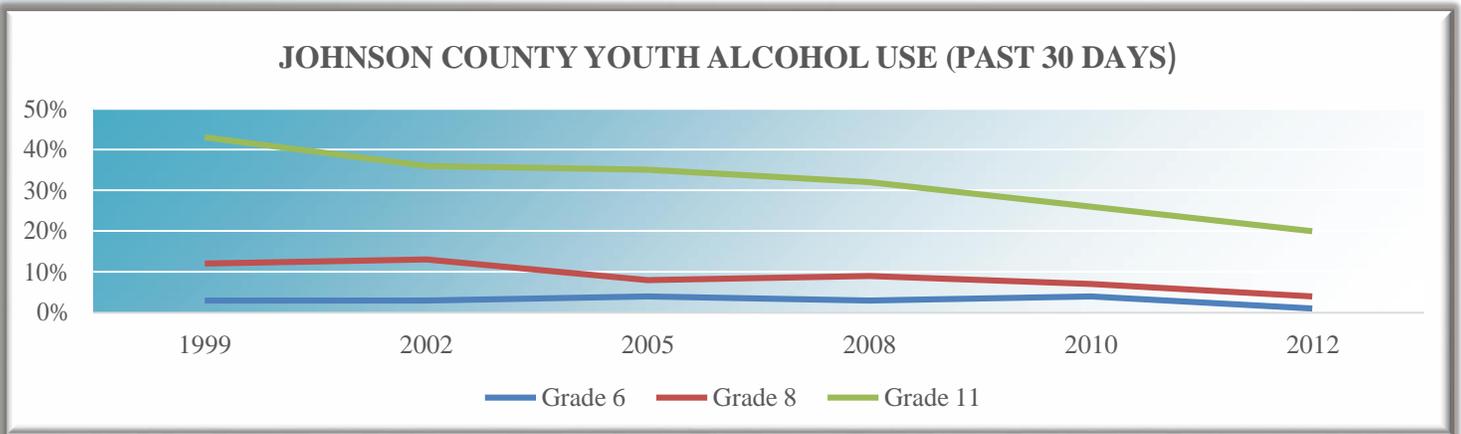
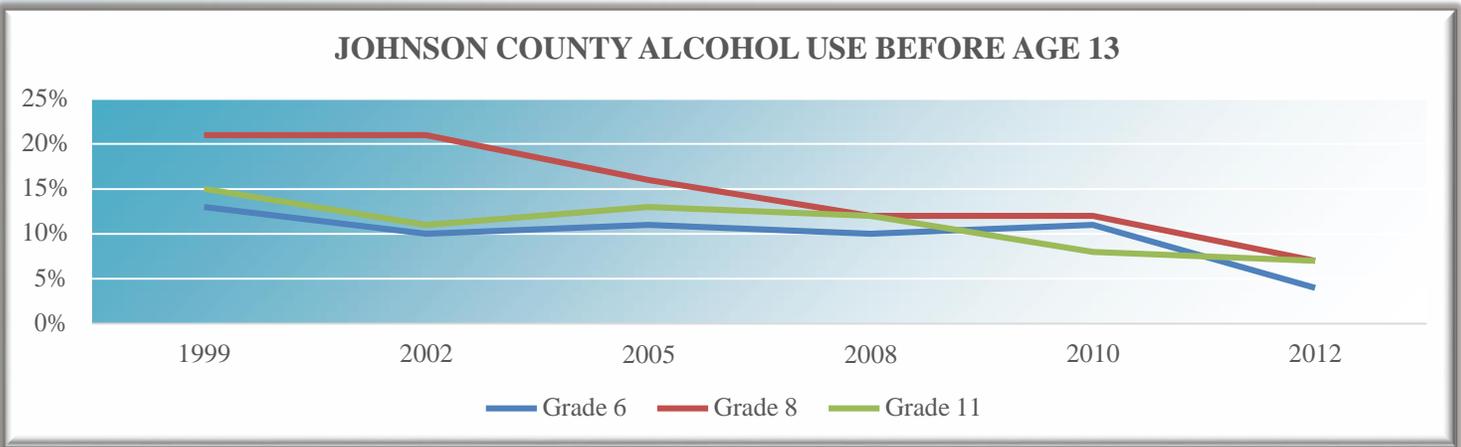
YOUTH ALCOHOL USE

Importance of Indicator: Youth alcohol use poses many serious consequences and is associated with an increased likelihood of developing alcohol abuse or dependence later in life. Among the costly social, physical, mental, and public health problems caused by alcohol use are teenage pregnancy, sexually transmitted diseases (STDs), physical fights, crime, motor vehicle crashes, and suicide.

Healthy People 2020: Goal SA-14.4 is to reduce the proportion of persons engaging in binge drinking during the past month – adolescents aged 12-17 years – to 8.6%.

Key Findings

- Johnson County has seen a steady decrease in alcohol use before age 13 among teenagers.
- Johnson County has also seen a steady decrease in alcohol use in the past 30 days in 6th graders, 8th graders and 11th graders.
- From 1999 to 2012, the percent of 11th graders using alcohol has declined over 50%.



Source: Iowa Youth Survey. Accessed via the Iowa Epidemiological Website

CURRENT SMOKERS TOBACCO USAGE

Importance of Indicator: This indicator captures the percentage of adults aged 18 or over who self-reported currently smoking cigarettes some days or every day. This is important because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.

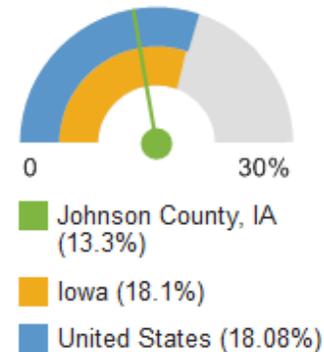
Healthy People 2020: Goal TU-1.1 is to reduce cigarette smoking by adults to 12%.

Healthy Iowans 2016: Goal is to reduce adult tobacco use to 15%.

Key Findings

- Johnson County has a lower age-adjusted percentage of the adult population who reported smoking cigarettes compared to both Iowa and the national average.
- Johnson County is below the Healthy Iowans goal of 17%, but still above the Healthy People 2020 goal of 12%.

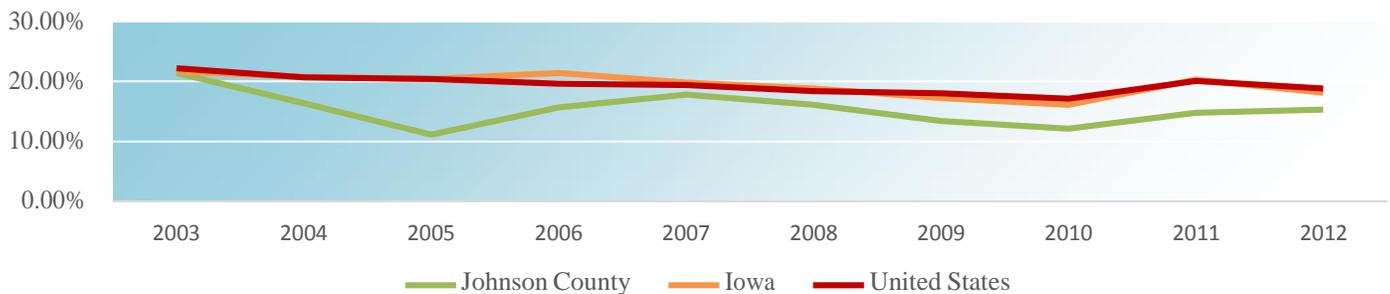
Percent Population Smoking Cigarettes (Age-Adjusted)



Source: Community Commons: Johnson County

Report Area (2006-2012)	Total Population Age 18+	Total Adults Regularly Smoking Cigarettes	Percent Population Smoking Cigarettes (Crude)	Percent Population Smoking Cigarettes (Age-Adjusted)
Johnson County	103,867	14,022	13.50%	13.30%
Iowa	2,307,562	403,823	17.50%	18.10%
United States	232,556,016	41,491,223	17.84%	18.08%

CURRENT CIGARETTE SMOKERS



Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Iowa Epidemiological Website and the Health Indicators Warehouse

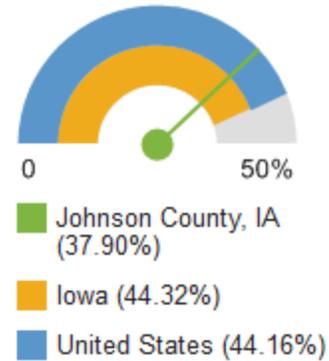
FORMER OR CURRENT SMOKER TOBACCO USAGE

Importance of Indicator: This indicator captures the percentage of adults aged 18 or over who self-reported smoking 100 or more cigarettes in their lifetime. This is important because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.

Key Findings

- Johnson County has a lower percentage of the adult population who reported smoking more than 100 cigarettes in their lifetime compared to both Iowa and the national average.

Percent Adults Ever Smoking
100 or More Cigarettes



Source: Community Commons: Johnson County

Report Area (2011-2012)	Survey Population(Adults Age 18+)	Total Adults Ever Smoking 100 or More Cigarettes	Percent Adults Ever Smoking 100 or More Cigarettes
Johnson County	86,796	32,898	37.90%
Iowa	2,296,543	1,017,920	44.32%
United States	235,151,778	103,842,020	44.16%

Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System - Accessed via Community Commons



TOBACCO USAGE – QUIT ATTEMPT

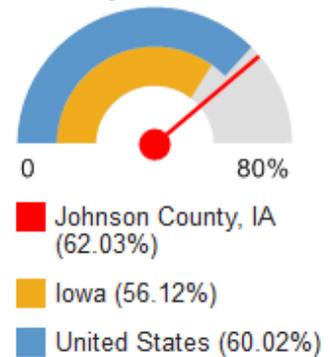
Importance of Indicator: This indicator captures the percentage of adult smokers who self-reported attempting to quit smoking for at least a day during the past year. This is important because supporting efforts to quit smoking may have a positive effect on health outcomes.

Healthy People 2020: Goal TU-4.1 is to increase smoking cessation attempts by adult smoker to 80%.

Key Findings

- Johnson County has a higher percentage of adult smokers who attempted to quit during the past 12 months than both Iowa and the national average.
- However, Johnson County is still below the Healthy People 2020 goal of 80% of adult smokers attempting to quit during the past year.

Percent Smokers with Quit Attempt in Past 12 Months



Source: Community Commons: Johnson County

Report Area (2011-2012)	Survey Population(Smokers Age 18+)	Total Smokers with Quit Attempt in Past 12 Months	Percent Smokers with Quit Attempt in Past 12 Months
Johnson County	13,032	8,084	62.03%
Iowa	441,750	247,931	56.12%
United States	45,526,654	27,323,073	60.02%

Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System - Accessed via Community Commons



YOUTH TOBACCO USE

Importance of Indicator: Tobacco use is the single most preventable cause of death and disease in the United States. Tobacco causes cancer, heart disease, and multiple lung diseases. Preventing young people from smoking can greatly reduce the illness, disability, and death related to tobacco use.

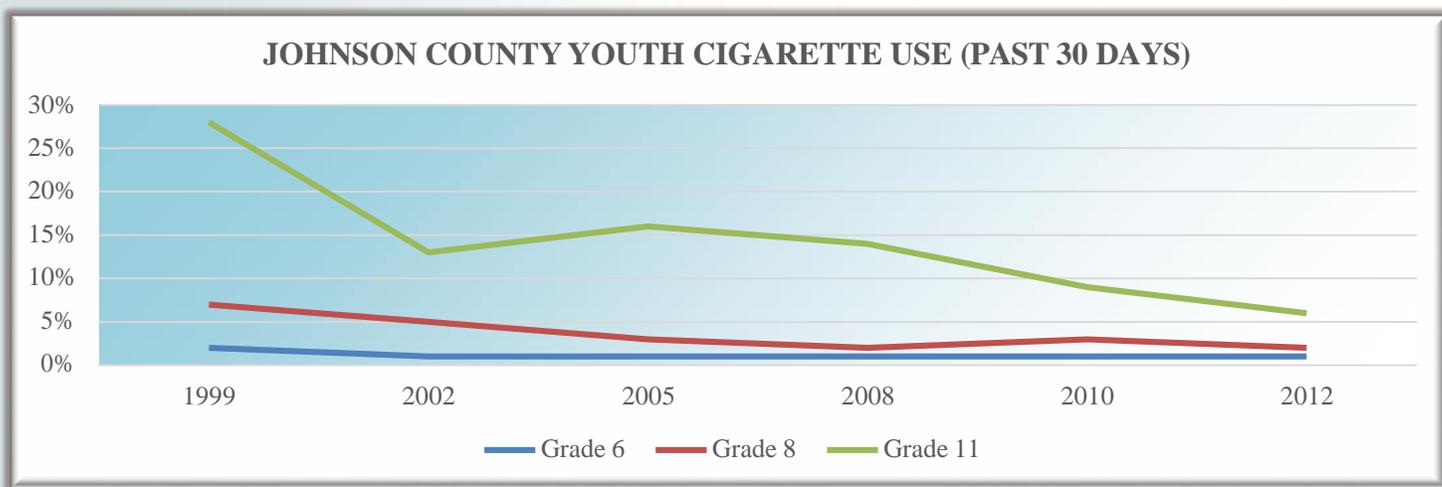
Healthy People 2020: Goal TU-2.1 is to reduce use of tobacco products by adolescents (past month) to 21.0%. Goal TU-2.2 is to reduce use of cigarettes by adolescents (past month) to 16%.

Key Findings

- Johnson County has also seen a steady decrease in tobacco use in the past 30 days in 6th graders, 8th graders and 11th graders.
- The percent of 11th graders using tobacco has declined from 28% in 1999 to only 6% in 2012.
- Johnson County is well below the Healthy People 2020 goal of 16% of adolescents in grades 9 through 12 smoked cigarettes in the past 30 days

Johnson County Youth Cigarette Use (past 30 days)

Grade	1999	2002	2005	2008	2010	2012
Grade 6	2%	1%	1%	1%	1%	1%
Grade 8	7%	5%	3%	2%	3%	2%
Grade 11	28%	13%	16%	14%	9%	6%



Source: Iowa Youth Survey - Accessed via the Iowa Epidemiological Website



SUBSTANCE ABUSE TREATMENT

Importance of Indicator: Substance abuse has a major impact on individuals, families, and communities. A large majority of those individuals with a drug or alcohol problem are unaware that they have a problem. Substance abuse contributes many social, physical, mental, and public health problems to the community.

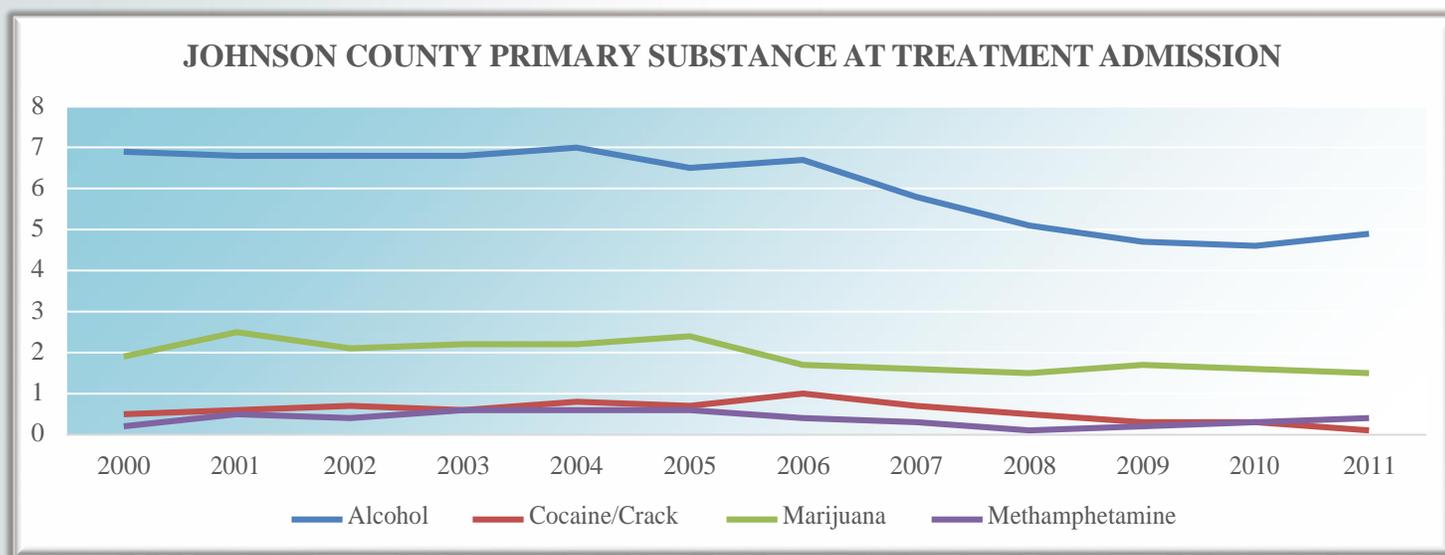
Healthy People 2020: Goal SA-7 is to increase the number of admissions to substance abuse treatment for injecting drugs to 280,911 admissions to Level I and Level II trauma centers.

Key Findings

- Alcohol is the most reported substance of use by individuals on admission to Iowa substance abuse treatment services.
- The rate of alcohol treatment admissions has declined slightly over the past 10 years.
- Marijuana, methamphetamine, and cocaine rank behind alcohol as the next highest substances of abuse.

Johnson County Primary Substance at Treatment Admission (Admissions per 1000 population)

Substance	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Alcohol	6.9	6.8	6.8	6.8	7	6.5	6.7	5.8	5.1	4.7	4.6	4.9
Cocaine/Crack	0.5	0.6	0.7	0.6	0.8	0.7	1	0.7	0.5	0.3	0.3	0.1
Marijuana	1.9	2.5	2.1	2.2	2.2	2.4	1.7	1.6	1.5	1.7	1.6	1.5
Methamphetamine	0.2	0.5	0.4	0.6	0.6	0.6	0.4	0.3	0.1	0.2	0.3	0.4



Source: Iowa Department of Public Health - SARS/ISmart - Accessed via the Iowa Epidemiological Website



YOUTH ILLICIT DRUG USE

Importance of Indicator: Substance abuse has a major impact on individuals, families, and communities. A large majority of those individuals with a drug or alcohol problem are unaware that they have a problem. Substance abuse contributes many social, physical, mental, and public health problems to the community.

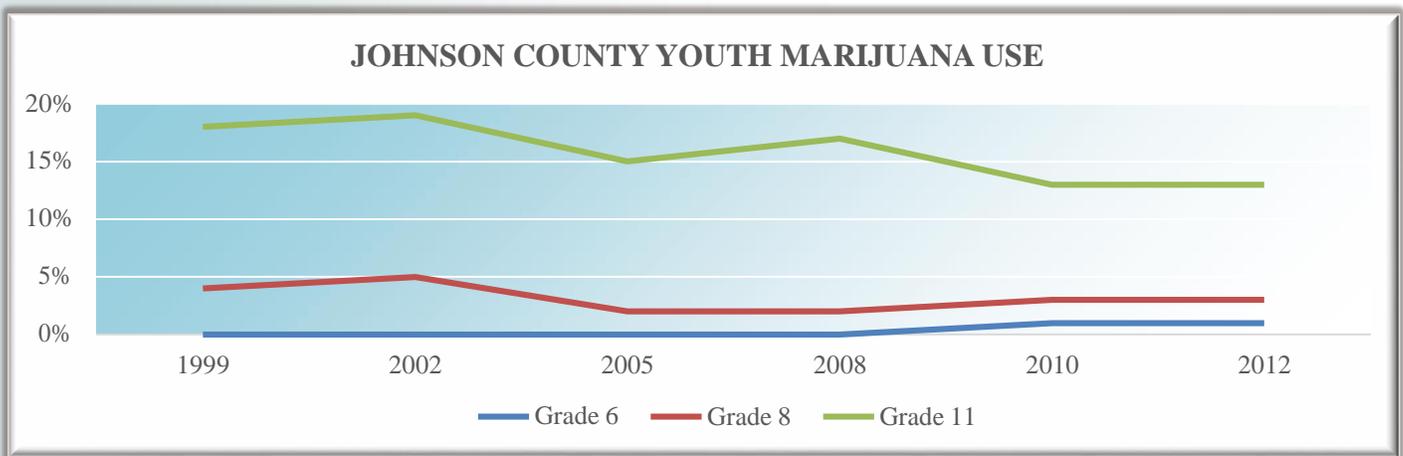
Healthy People 2020: Goal SA-2.4 is to increase the proportion of high school seniors never using substances- Illicit drugs to 58.6%.

Key Findings

- Marijuana is the most reported illicit drug used by youth in Johnson County.
- Since 1999 the trend has shown a slight decrease in marijuana use among 11th graders but almost no change among 6th and 8th graders.

Johnson County Youth Illicit Drug Use (Past 30 days)

Substance	Grade 6	Grade 8	Grade 11
Amphetamines (2010)	2%	2%	3%
Cocaine (2010)	1%	1%	2%
Inhalants	3%	3%	2%
Marijuana (2012)	1%	3%	13%
Meth (2010)	1%	1%	2%
Steroids (2010)	1%	1%	2%



Source: Iowa Youth Survey - Accessed via the Iowa Epidemiological Website



SEATBELT USE

Importance of Indicator: Motor vehicle crashes are a leading cause of death of individuals up to 54 years old. In addition, they are the number 1 cause of death among teens. Seatbelt use is the most effective way to save lives and reduce the number of injuries from motor vehicle crashes.

Healthy People 2020: Goal IVP-15 is to increase use of safety belts to 92%.

Key Findings

- A 2014 study by Iowa State University's Survey & Behavioral Research Services (SBRS) done for the National Highway Traffic Safety Administration (NHTSA) found over 99% of drivers in Johnson County and over 96% of passengers were wearing seatbelts.
- This was higher than the overall state of Iowa numbers of 94.7% of drivers and 93.2% of passengers respectively.

2014 Driver and Passenger Seat Belt Use by County

County	Drivers		Right Front Passengers		TOTAL	
	% of Total Belted	% of Known Belted	% of Total Belted	% of Known Belted	% of Total Belted	% of Known Belted
Black Hawk	87.1%	93.8%	86.6%	93.6%	86.9%	93.7%
Grundy	85.9%	90.1%	87.6%	96.1%	86.3%	91.5%
Hardin	89.4%	92.6%	84.7%	92.4%	88.3%	92.5%
Howard	87.1%	91.9%	87.1%	94.6%	87.1%	92.6%
Iowa	97.6%	98.4%	94.3%	94.9%	96.6%	97.3%
Johnson	99.0%	99.4%	96.4%	96.9%	98.1%	98.6%
Linn	97.5%	97.7%	93.2%	93.6%	96.5%	96.8%
Marion	88.4%	93.2%	85.2%	93.8%	87.4%	93.4%
Polk	92.5%	94.9%	91.4%	94.2%	92.3%	94.8%
Pottawattamie	90.7%	91.6%	88.8%	90.8%	90.2%	91.4%
Scott	96.4%	97.3%	93.7%	95.7%	95.8%	96.9%
Shelby	82.8%	86.1%	82.0%	84.7%	82.7%	85.8%
Story	89.7%	92.3%	81.5%	88.7%	87.7%	91.4%
Warren	94.5%	96.0%	88.5%	90.5%	92.3%	94.0%
Webster	86.5%	89.6%	88.0%	89.0%	86.8%	89.5%
Total	92.4%	94.7%	89.8%	93.2%	91.7%	94.3%

Source: Iowa Seat Belt Use Survey. <http://www.dps.state.ia.us/commis/gtsb/pdfs/2014%20Seat%20Belt%20Use%20Report.pdf>