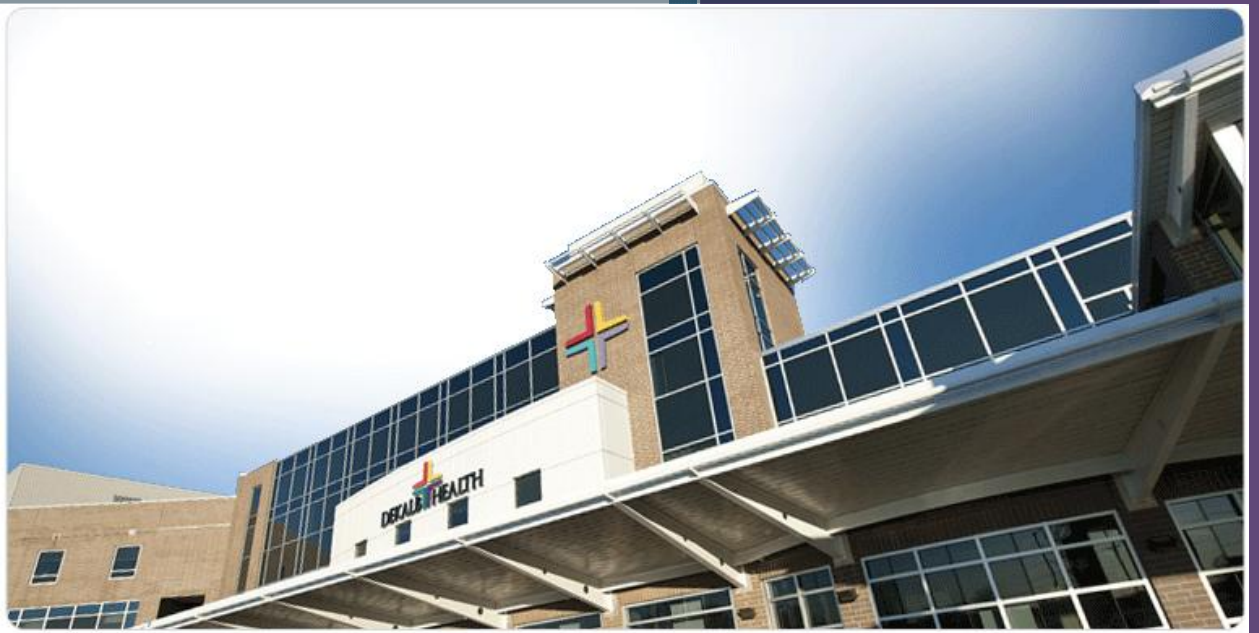


2012

DeKalb County Community Health Assessment



Center for Social Research
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SURVEY INTRODUCTION

In March of 2010 Congress passed the Patient Protection and Affordable Care Act, also known as the 2010 ACA. Section 9007 of the 2010 ACA stipulates that every three years health providers must complete a community health assessment in order to comport with the requirements of the new law. As the 2010 ACA is relatively new, current regulations of this law stipulate that all health agencies must undertake initial steps to conduct a community health assessment by no later than March of 2012.

In the summer of 2011, DeKalb Health, in conjunction with the DeKalb County Health Department, began the planning process for a thorough investigation of the health needs of the entire DeKalb County community. That same fall, DeKalb Health contracted with the Indiana University - Purdue University Fort Wayne Center for Social Research (CSR) for assistance with conducting a countywide survey that would investigate the health needs of DeKalb county residents.

In the fall of 2011, the staff of the CSR met with representatives of DeKalb Health and the DeKalb County Health Department to plan the process of the survey that would be distributed to DeKalb residents in the spring of 2012. The content of the survey was written so that it could be compared (when possible) to questions used in the National and Indiana Behavioral Risk Factor Surveillance System survey used by the Centers for Disease Control. Questions on matters of local interest were also included throughout the survey. The survey was specifically designed so that the resultant dataset could be used to identify and prioritize the community's health needs. This process became known as the 2012 DeKalb County Community Health Needs Survey. This report is the final outcome of the process.

The goal of the current project was to obtain at least 1100 completed and viable surveys through a random sampling survey methodology. A total of 4,500 surveys were sent to a random sample of households in DeKalb County between February 10th, 2012 and March 9th, 2012. In all, DeKalb county residents returned 1,450 surveys. This represents a 32.2 percent response rate, which is roughly double the industry standard for surveys of this type. Ten surveys were discarded because they were improperly filled out, were damaged or were otherwise unusable. In all, DeKalb county respondents completed 1,440 viable surveys. The final overall sample has a margin of error of +/- 2.63 percent at the 95 percent level of confidence. This means that with a sample population of 1,440 valid surveys, it can be said that if the survey was repeated 100 times, in 95 out of the 100 times the research findings would at most vary by +/- 2.63 percent. The +/- 2.63 percent margin of error should be kept in mind when examining all of the survey results.

The data were subjected to additional statistical analyses to detect whether or not responses varied as a function of key demographic variables and/or comparative metrics at the state and national level. Crosstabulation, one-way Analysis of Variance (ANOVA) and independent sample t-test (as appropriate) were used as analysis techniques to uncover any statistically significant differences within the data. Statistically significant relationships that were discovered as a function of the data comparisons are noted throughout this report. All statistical analyses of the data were accomplished via the SPSS software package version 19.

DEMOGRAPHIC PROFILE

In order to obtain a demographic profile of the survey respondents, several questions were designed to capture physical markers such as the biological sex, height, weight, race/ethnicity and age of the respondents, as well as familial and social markers such as the composition and income of the respondents' household, the public school district within which a respondent lives, marital status, employment status and educational attainment. When possible, several of the indicators mentioned above will be compared to the most current Center for Disease Control (CDC) Behavioral Risk Factor Surveillance System (BRFSS) data at the National and Indiana state level. It should be noted here that all national and state BRFSS data are taken from 2010 iteration of the report, which is the most recent data available.

Biological Sex

Q1. You are:

For this question, DeKalb County respondents were asked to self-identify as 'Male' or 'Female.' Within this data, a clear majority exists with females composing 68 percent of the population and males composing just 32 percent. This majority is further presented in Figure 1. These data are in alignment with national BRFSS estimates (63 percent female, 37 percent male) and Indiana BRFSS estimates (62 percent female, 38 percent male).

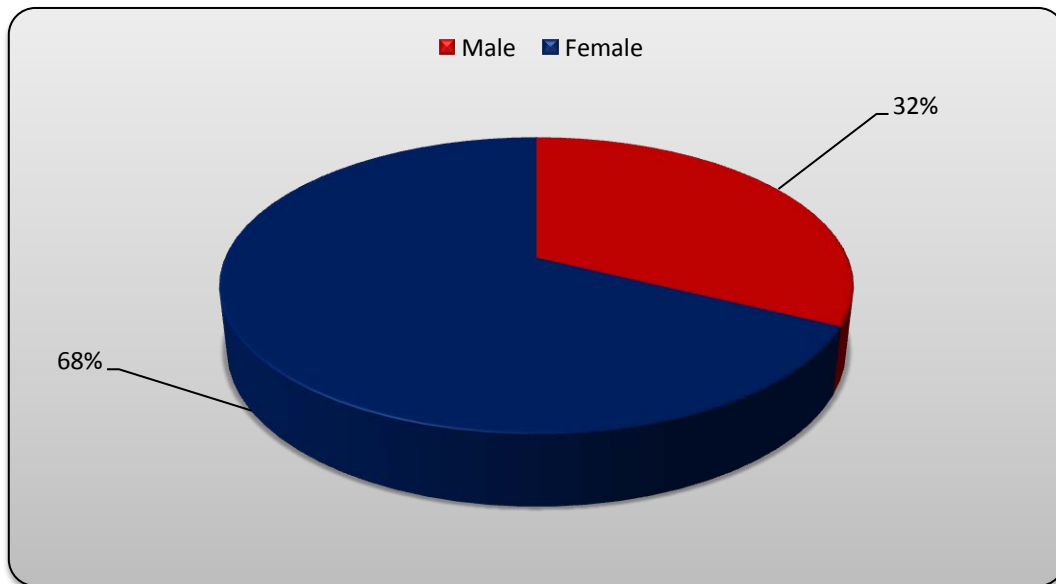


Figure 1: Biological Sex

Age Distribution

Q5: What is your age?

In order to encourage the most valid responses, respondents were asked to report their exact age on the survey questionnaire. This method produced a total of 1430 valid responses, with a range in age from 18 to 94 years. The mean and median ages are nearly identical, with the median at 58 years of age and the mean at 57.98.

Race or Ethnicity

Q117: Which of the following best describes your race or ethnicity? (Please check all that apply)

For this question, participants were given the opportunity to check all provided options that applied. Respondents were also given an 'other' option that allowed them to write in their race or ethnicity if it was not listed. This format, while allowing for the most accurate results, means Figure 2 will not equal 100. Write-in answers for 'other' included the response 'American.' Other responses expressed a general dissatisfaction with the inclusion of the question in the survey. Transcribed responses for the 'other' option can be found in the appendices of this report.

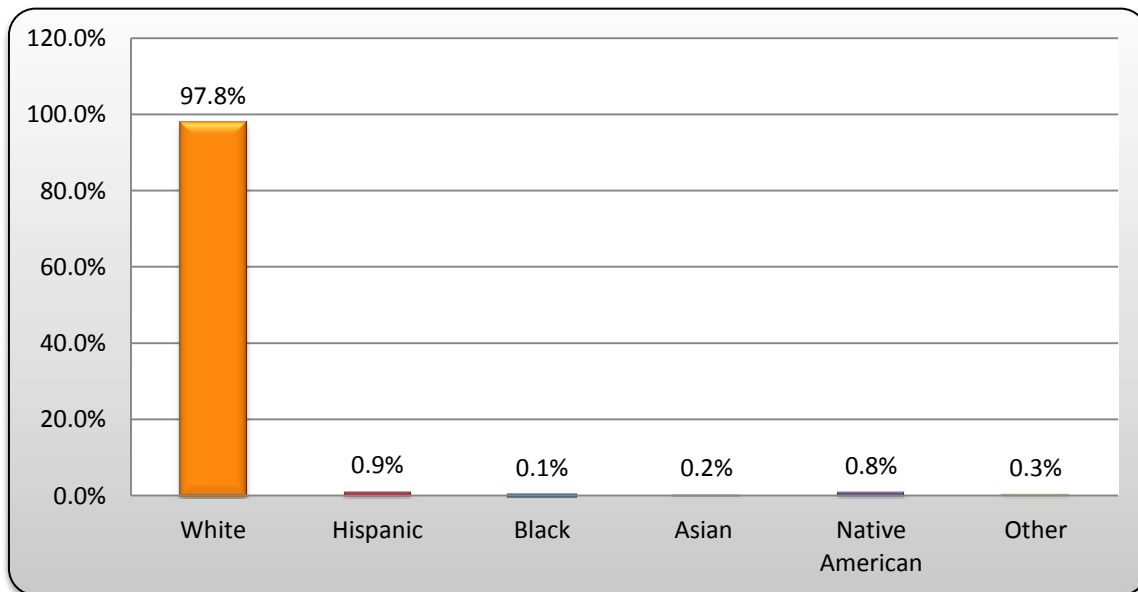


Figure 2: Race or Ethnicity

DEMOGRAPHIC PROFILE

Marital Status

Q118: Are you currently...? (Please check only one)

There were 1422 valid responses for this question in the DeKalb dataset. The majority of the respondents indicated that they were married. Figure 3 reveals how the DeKalb data were about ten percent higher than the state and national data with respect to the number of individuals who are married.

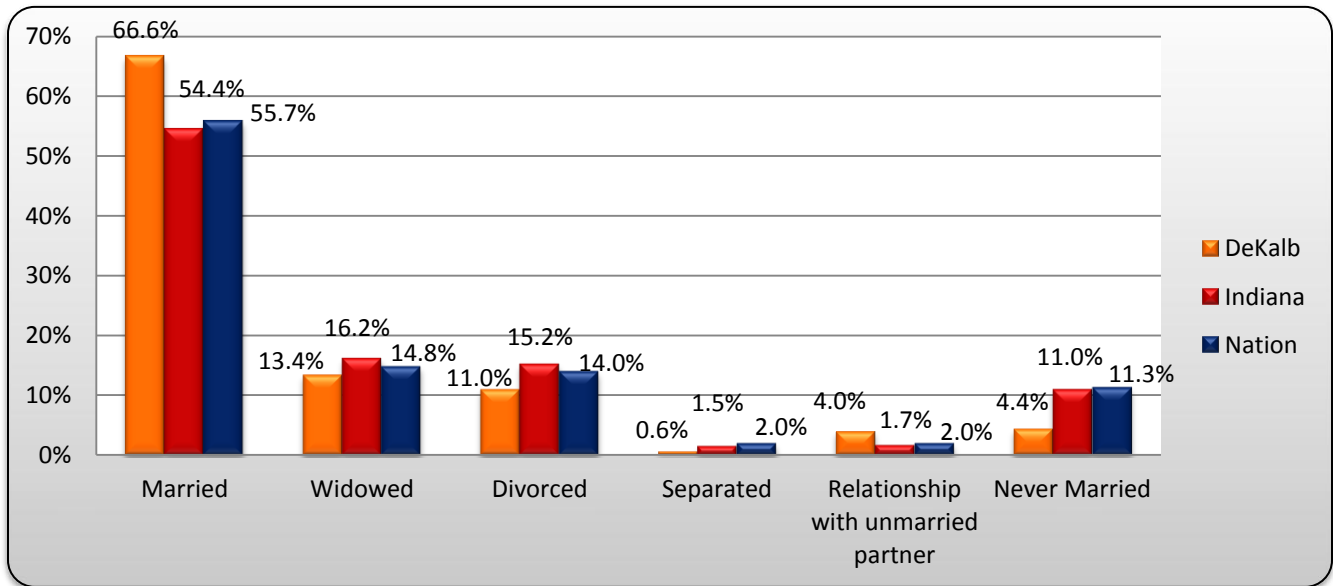


Figure 3: Marital Status

Physical Characteristics

This section of the report provides information on participants' physical characteristics of height and weight. It also provides a chart comparing the mean participant Body Mass Index (BMI) with that of both state and national BMI data obtained from the CDC's BRFSS.

Height

Q3: About how tall are you without shoes?

Participants were given two blank spaces for writing in both feet and inches for their height. Of these responses, 1415 were valid. The data show that 86.4 percent of participants were between five and six feet tall, with 11.3 percent over six feet and 2.0 percent under five feet. Average height for women in DeKalb County is 5 foot 4 inches in height. For men in DeKalb County, average height is 5 foot 10 inches.

Weight

Q4: About how much do you weigh without shoes?

With 1400 valid responses, the mean weight for DeKalb County residents was 181.61 pounds, with the median weight being 175.00 pounds. The national average weight in the BRFSS data in 2010 was 174.71 pounds, with a median of 170.00 pounds. In the state of Indiana, the average weight in 2010 was 178.57 pounds, with a median of 173 pounds. The DeKalb County data are statistically significantly different from both the national and state data, meaning that residents of DeKalb County weigh more on average than people in the state of Indiana and the United State as a whole.

DEMOGRAPHIC PROFILE

Body Mass Index (BMI)

Figure 4 illustrates the Body Mass Index (BMI) for survey participants with respect to four categories: underweight, normal, overweight, and obese. Comparative data provided by the BRSS for BMI for both Indiana and the United States is also provided in Figure 4.

Statistical analyses of the data show that residents of DeKalb County are more likely to be classified as obese as compared to residents in the state of Indiana and the nation as a whole.

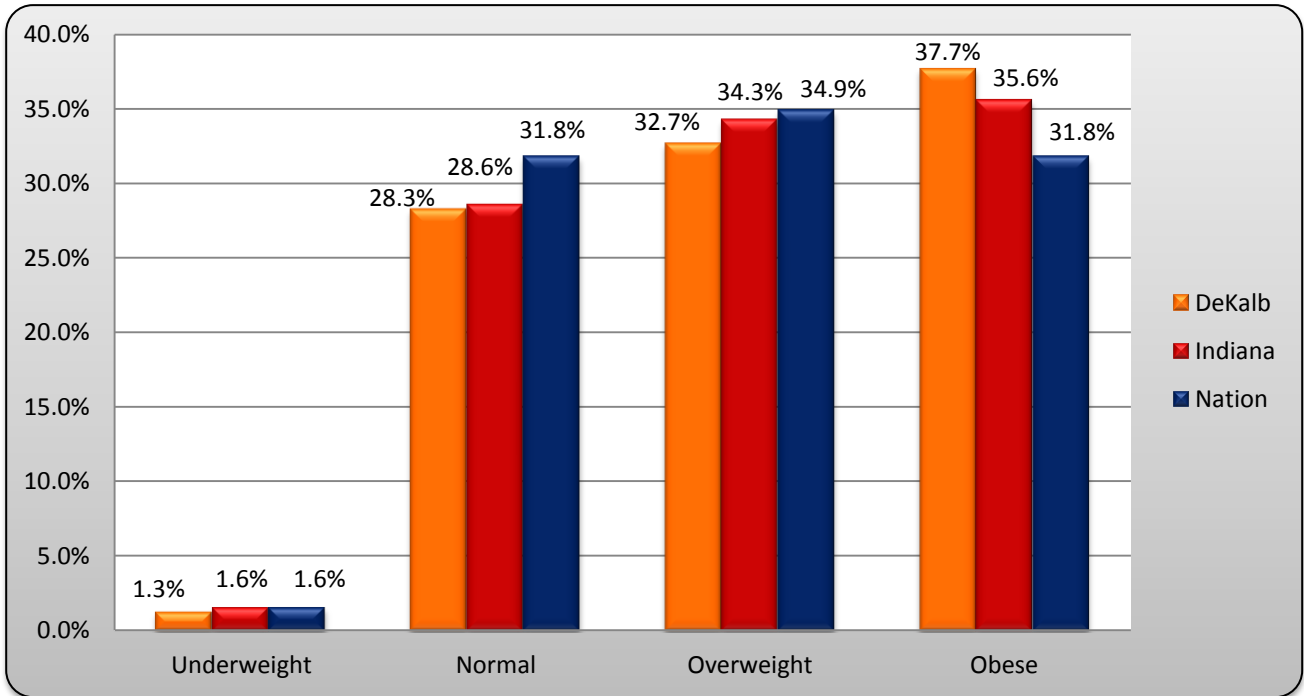


Figure 4: Body Mass Index

Household Composition

The participants of the 2012 DeKalb County Community Health Needs Survey were asked several questions regarding their household composition in order to obtain a more detailed demographic profile of the county. Respondents were asked about the number of both adults and children living in the household, the number of three or more generations living in the household, and whether or not members of their extended families were currently living in the household.

Q47: *What is the total number of people who currently live in your household?*

Respondents were instructed to write the number of people living in their household in the provided blank. Of the 1430 valid responses provided, the mean number of household members was 2.47, which was slightly higher than the median of 2 people.

Q48: *Including yourself, how many people age 65 or older currently live in your household?*

Figure 5 illustrates the results from the 1413 valid responses provided by participants regarding the number of people 65 or older living within their household.

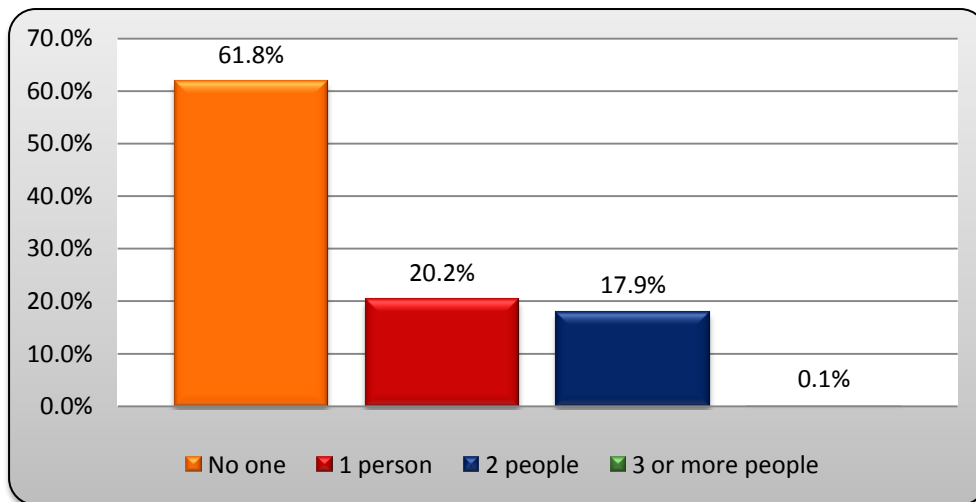


Figure 5: Number of People 65 or older in household

DEMOGRAPHIC PROFILE

Q49: *Do you have three or more generations of people currently living in your household?*

Figure 6 provides the results from the 1430 valid responses regarding whether or not three or more generations of people were residing in a respondent's household. As can be seen in the chart, very few individuals responded yes to this question.

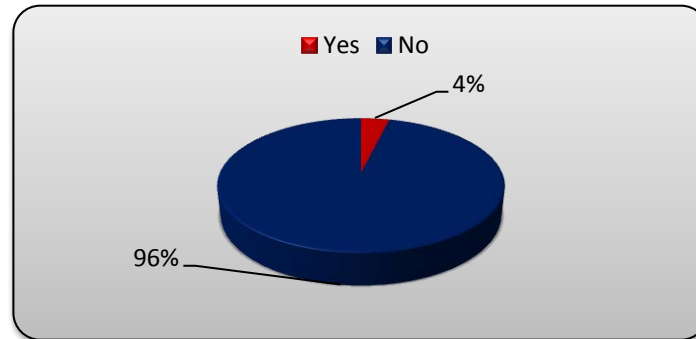


Figure 6: Three or More Generations in Household

Q50: *Do you have members of your extended family currently living in your household (for example, cousins, aunts, uncles, etc.)?*

Participants provided 1424 valid responses regarding whether or not members of their extended family were currently living within the household. The results are shown in Figure 7 below. Results of this question are remarkably similar to those obtained in Question 49.

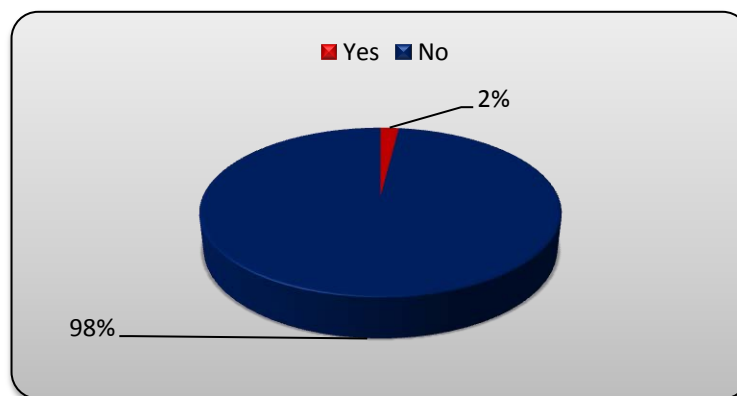


Figure 7: Extended Family in Household

DEMOGRAPHIC PROFILE

Q51: How many children under the age of 18 live in your household?

Figure 8 has data results from the 1385 valid DeKalb County respondents regarding the number of children under the age of 18 living within the household. Comparative results for Indiana and the United States from the BRSS are also presented. The data at the national, state and DeKalb County levels are remarkably similar: 73.2 percent of United States residents, 74.2 percent of Indiana residents and 73.7 percent of DeKalb County residents reported no children under the age of 18 in the household.

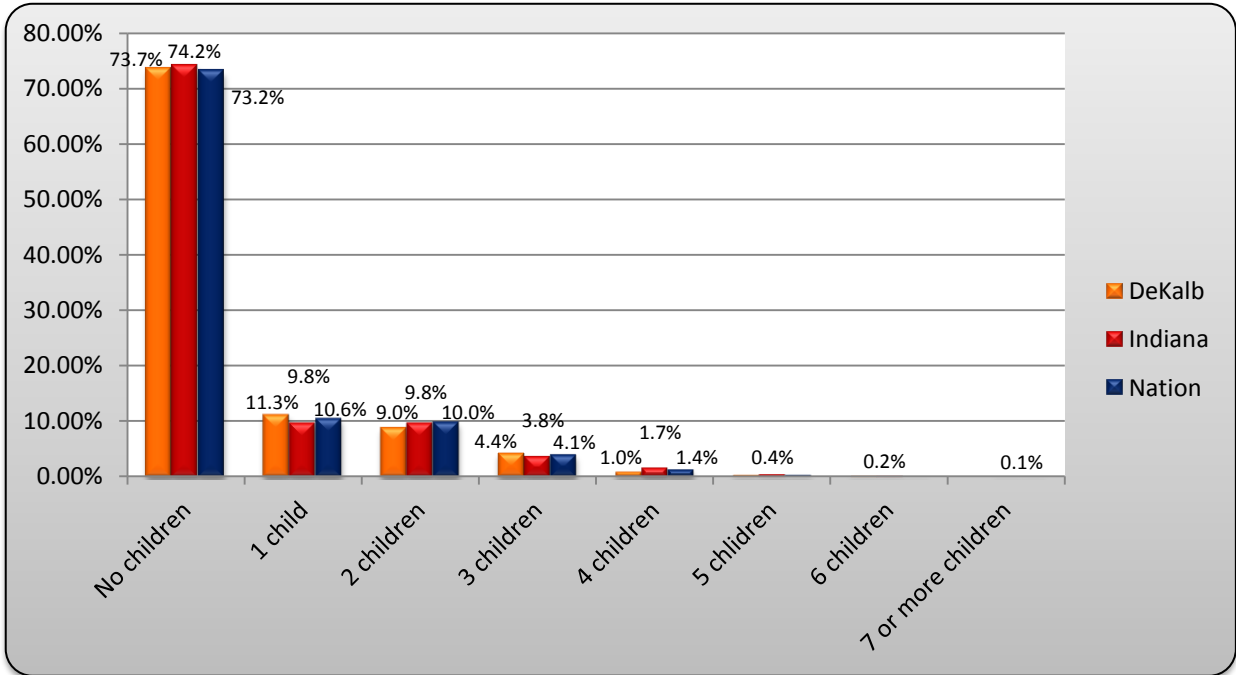


Figure 8: Children under 18 in Household

Employment

Respondents were asked a series of questions to determine their status with respect to whether or not they were employed and whether they consider themselves underemployed. Household income was also investigated in the survey.

Q115: Employment: Are you currently...? (please check only one)

Respondents were asked to describe their employment status; there were 1405 valid responses. Results are represented in Figure 9. The data are remarkably similar at the national, state and DeKalb County levels. DeKalb County posted a slightly higher (but not statistically higher) rate of employment for wages or salary; along these same lines, DeKalb County had a slightly higher (but not statistically higher) rate of retired persons.

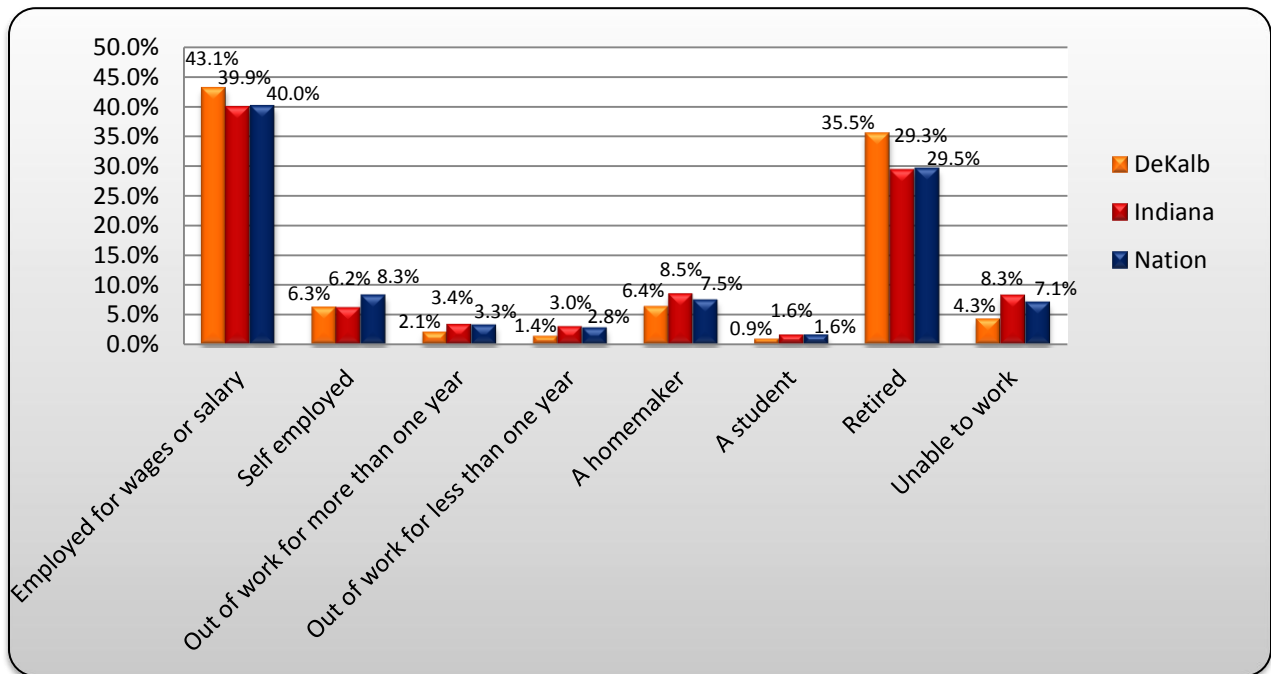


Figure 9: Employment

Q116: Do you consider yourself underemployed?

The survey defined the term “underemployed” for respondents as “You do not have enough paid work or you work at a job that does not make full use of your training.” Nearly nine in ten respondents, or 86.5 percent of those surveyed, reported that they did not consider themselves underemployed. Figure 10 on the next page presents these results.

DEMOGRAPHIC PROFILE

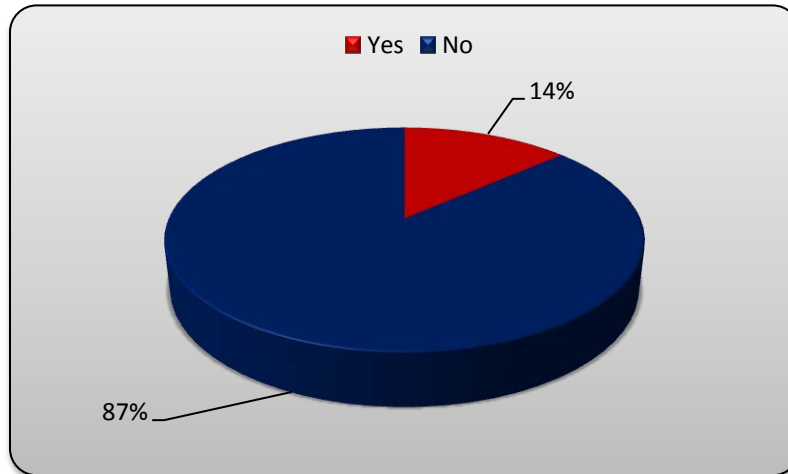


Figure 10: Underemployment

Q120: Your household's income (before taxes) from all sources this year will be:

Figure 11 illustrates the income ranges of respondents. There were 1380 valid answers for this question. Respondents were directed to include income from all sources, such as wages, public assistance, social security, investments, etc. in their answers. Both average income and median household income in the sample was between \$50,001 and \$60,000 dollars per year.

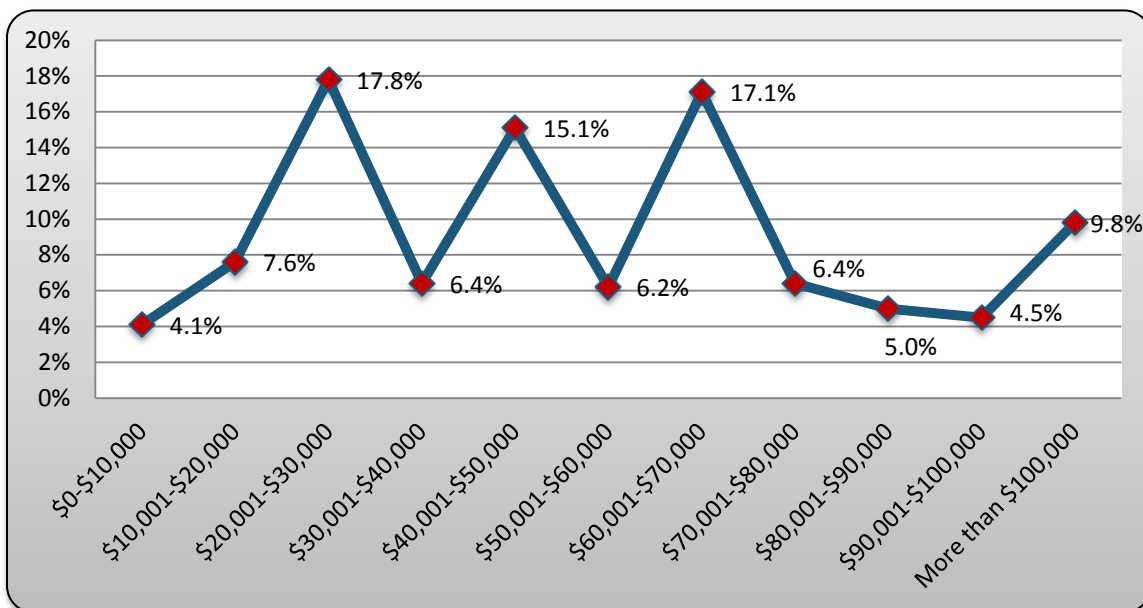


Figure 11: Household Income

Education

This section details the education levels of the participants, as well as the public school district in which a respondent lives.

Q119: What is the highest grade or year of school you completed (including home school)?

There were 1407 valid responses for highest grade level of schooling completed in the dataset. The complete data from this question is represented in Figure 12 below. Results show that DeKalb residents are less likely to hold a college degree than individuals in the state of Indiana or the nation as a whole.

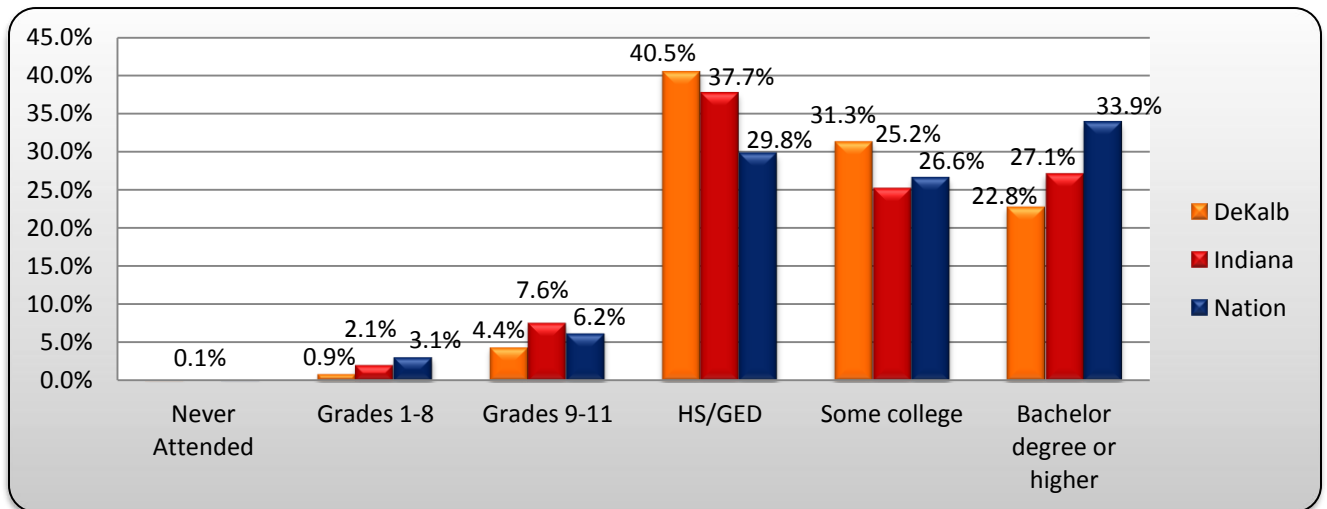


Figure 12: Schooling Completed

Q6: In which public school district do you live?

Participants provided 1421 valid responses regarding the public school district in which they live. Results of this question can be found in the Figure 13 on the next page. Of these responses, 0.8 percent claimed ‘other’ as their district. Those respondents who checked ‘other’ as their school district were then instructed to fill in the provided blank with the school district in which they lived. The majority of the open-ended responses showed three major school districts not listed previously in the question: Fort Wayne Community Schools, MSD of Steuben County, and Prairie Heights. Transcribed responses for the ‘other’ option can be found in the appendices of this report.

DEMOGRAPHIC PROFILE

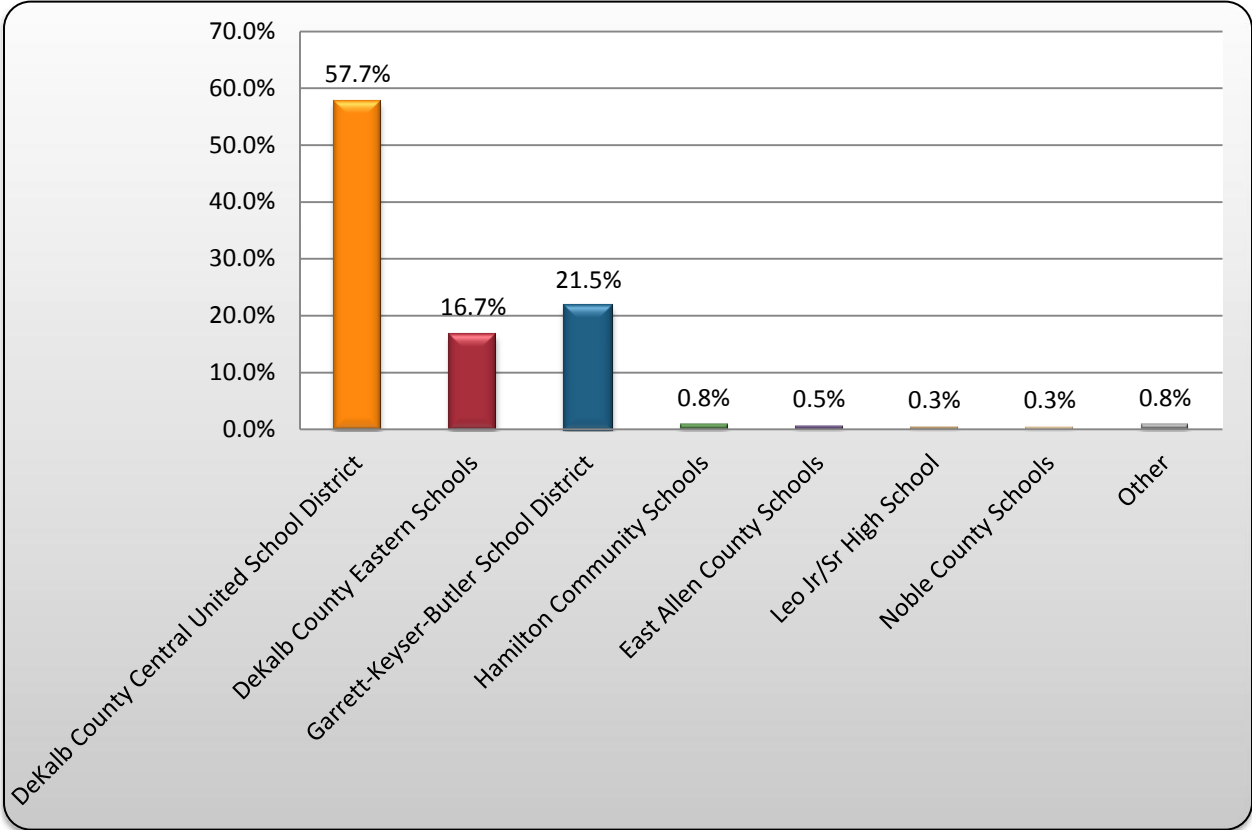


Figure 13: Public School Districts

DEKALB COUNTY COMMUNITY ISSUES

This section of the report deals with the degree to which respondents felt a given community issue was problematic within DeKalb County. Three general categories of issues were made available for respondents to judge: youth-related issues, community issues, and environmental health issues. It should be noted that the data from this section is based on the respondents' perceptions, i.e. these responses reflect what the participants think are problematic within the county. It should also be noted that due to rounding, not all totals in the tables below will equal 100 percent.

Youth-Related Issues

Q111: Please think about the following youth-related issues in DeKalb County.

Respondents were presented with 18 different youth-related issues and were asked to use a scale in order to determine the severity of each of the 18 different problem types. The scale ranged from 'Big Problem' to 'Not a Problem.' The results of this question are presented in the table below.

	Big Problem	Medium Problem	Small Problem	Not a Problem
Teenage pregnancy	25.0%	47.1%	25.0%	2.9%
Juvenile Delinquency	13.7%	38.5%	41.1%	6.8%
Child abuse and neglect	3.3%	26.7%	44.1%	25.9%
Lack of local recreational activities	19.9%	29.9%	29.6%	20.6%
Underage alcohol consumption	34.0%	42.7%	20.6%	2.8%
Tobacco use	38.2%	41.4%	17.2%	3.3%
Marijuana use	38.9%	42.3%	16.2%	2.7%
Ecstasy	17.9%	34.0%	37.4%	10.6%
Psychedelics	15.7%	30.1%	40.8%	13.4%
Methamphetamine use	55.5%	27.4%	13.4%	3.7%
Heroin use	10.6%	25.0%	44.3%	20.1%
Inhalants	18.8%	31.0%	39.1%	11.1%

DEKALB COUNTY COMMUNITY ISSUES

Other illegal drug use	25.5%	37.6%	30.3%	6.6%
Prescription drug abuse	25.6%	37.8%	28.9%	7.7%
Over-the-counter medications	17.5%	34.1%	35.9%	12.6%
Bullying	31.2%	40.3%	24.0%	4.5%
Safety and security in schools	10.2%	29.1%	40.7%	20.0%
Safety and security on the way to and from schools	9.8%	25.1%	44.5%	20.6%

Q112: Please tell us how easy it is for youth in DeKalb County to get...

Respondents were also instructed to describe the ease with which the youth in DeKalb County can obtain various substances. They were provided with a similar scale to that used in Question 111. For each type of substance listed in the question below, respondents were asked to respond whether it was ‘Very Difficult’ to ‘Very easy’ for a youth in DeKalb County to obtain each of the six types of substances below. The table below illustrates the participants’ responses.

	Very Difficult	Somewhat Difficult	Somewhat Easy	Very Easy
Tobacco	3.3%	20.3%	46.4%	30.0%
Alcohol	4.3%	23.4%	46.4%	25.9%
Marijuana	2.3%	17.3%	49.2%	31.2%
Methamphetamines	3.7%	21.6%	47.5%	27.2%
Heroin	20.2%	44.7%	26.6%	8.3%
Other illegal drugs	7.3%	34.5%	40.2%	18.0%

Community Issues

Q113: Please think about the following community issues in DeKalb County.

Respondents were given a list of community issues and were instructed to rate them on a scale ranging from a 'Big Problem' to Not a Problem.' The responses to Q113 are provided in the table below.

	Big Problem	Medium Problem	Small Problem	Not a Problem
Domestic violence	17.4%	49.8%	30.2%	2.6%
Crime	13.7%	53.7%	30.7%	1.9%
Unemployment/underemployment	59.2%	34.3%	5.6%	0.9%
Access to health care	21.4%	39.1%	27.7%	11.7%
Lack of parental involvement	36.1%	42.8%	18.5%	2.6%
Lack of access to recreational programs and resources	16.4%	29.6%	36.2%	17.7%
Elder abuse and exploitation	3.8%	21.5%	54.2%	20.5%
Poverty	24.2%	40.3%	32.1%	3.4%
Adult alcohol consumption	28.0%	46.9%	22.6%	2.4%
Marijuana use	28.4%	43.2%	25.0%	3.4%
Methamphetamine use	51.9%	33.6%	12.6%	1.9%
Heroin use	11.0%	28.5%	44.6%	15.8%
Other illegal drug use	21.9%	39.3%	32.9%	5.9%
Prescription drug abuse	23.7%	40.6%	30.4%	5.4%
Lack of housing alternatives for older residents	15.1%	28.2%	39.3%	17.3%
HIV/STD/Hepatitis C	5.8%	24.2%	52.3%	17.6%

Environmental Health Issues

Q114: Please think about the following environmental health issues in DeKalb County.

Participants were instructed to use a scale in order to rate the environmental health issues listed in this question. The scale of responses for this question ranged from ‘Big Problem’ to ‘Not a Problem.’ The responses for this question are listed in the table below. For the category of “Other,’ participants were instructed to explain the issue they found problematic in the space provided. Transcribed responses for the ‘other’ option can be found in the appendices of this report.

	Big Problem	Medium Problem	Small Problem	Not a Problem
Contamination of drinking water	37.2%	41.3%	16.7%	4.8%
Contamination of surface water	8.7%	24.7%	44.5%	22.1%
Safety of the local food supply	2.8%	11.1%	40.5%	45.5%
Contamination from sewage	3.9%	14.8%	44.2%	37.1%
Runoff from fertilizers/pesticides	12.4%	26.7%	39.0%	21.8%
Other	8.3%	6.7%	15.7%	69.3%

This section gauges access to healthcare among respondents who participated in the DeKalb County Community Health Needs Survey. The data is broken into three sub-sections: Community Health Resources, Coverage and Usage, and Health Fair and Screenings. When possible, the indicators covered in this section of the report will be compared to the most current Center for Disease Control (CDC) Behavioral Risk Factor Surveillance System (BRFSS) data at the National and Indiana state levels. It should again be noted here that all national and state BRFSS data are taken from 2010 iteration of the report, which is the most recent data available.

Community Health Resources

Q8: *Do you have one person you think of as your personal doctor or health care provider?*

DeKalb participants provided 1426 valid responses regarding whether or not they had a personal doctor. This data was then compared with the state and national data from the BRFSS, all of which is represented below in Figures 14, 15 and 16.

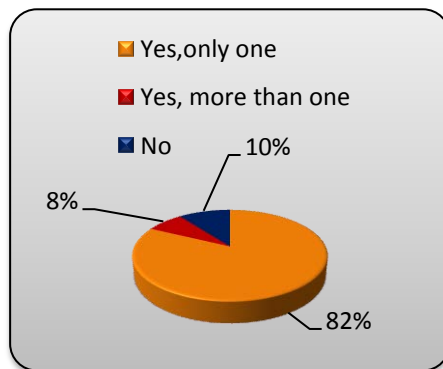


Figure 14: Indiana Personal Doctor

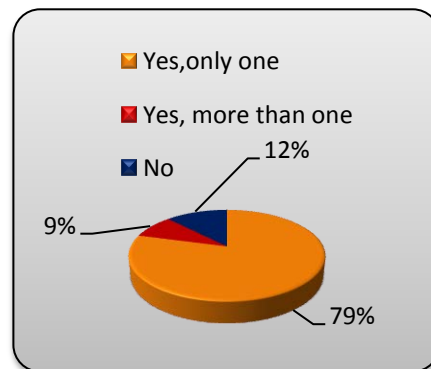


Figure 15: United States Personal Doctor

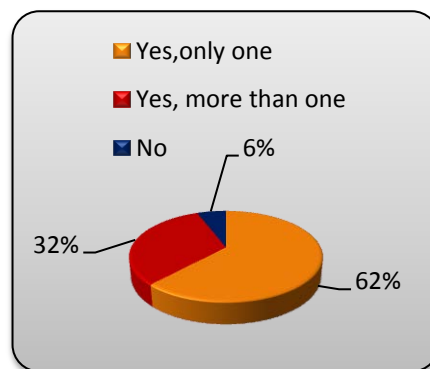


Figure 16: DeKalb County Personal Doctor

In general, women were more likely than men in DeKalb County to report having more than one doctor. Additional statistical analyses revealed that respondents in DeKalb County were more likely to report having more than one doctor when compared to the state and the nation.

Q9: In what community is your primary doctor located?

The results of the 1392 valid responses can be found in Figure 17. The respondents who checked ‘other’ as their answer were provided a blank to write in the community in which their primary care physician was located if it was not listed previously. Transcribed responses for the ‘other’ option can be found in the appendices of this report.

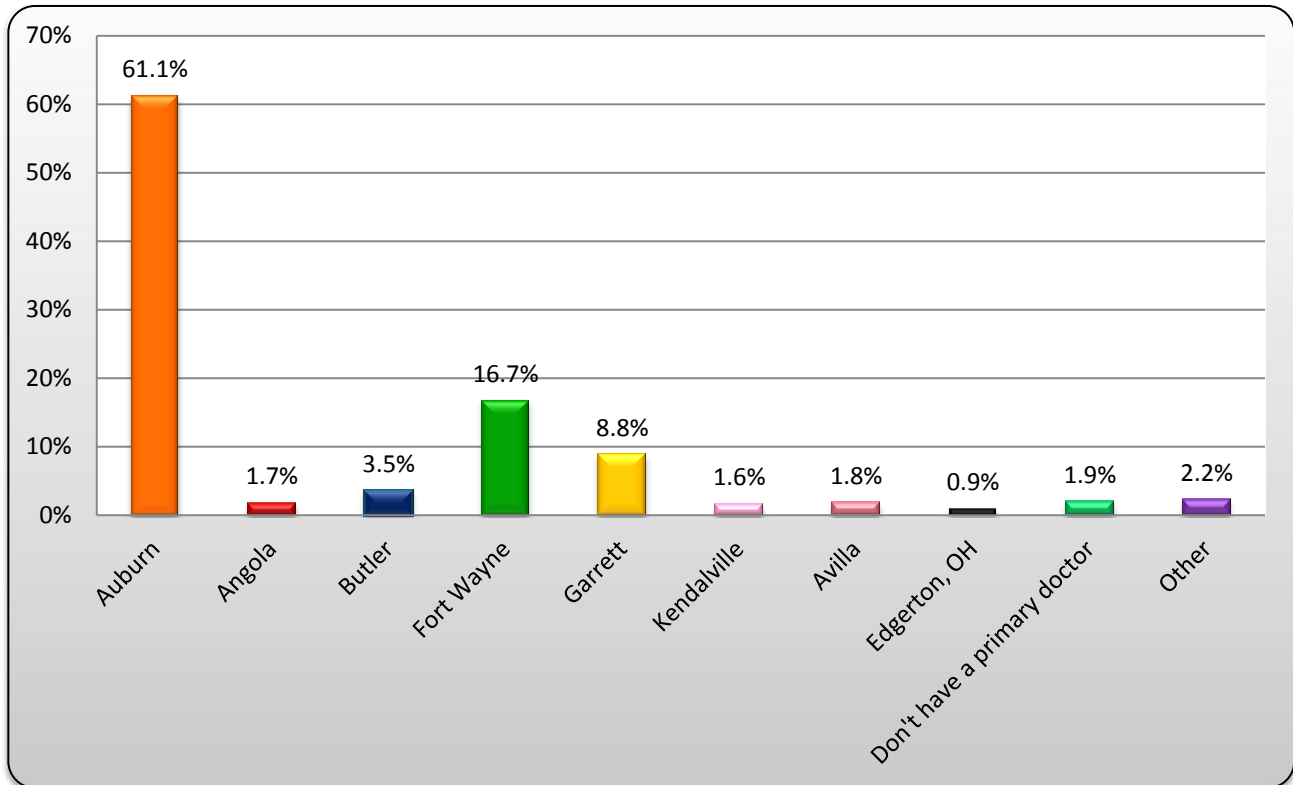


Figure 17: Primary Doctor Location

Q10: For overall care, which hospital do you prefer for your health care needs?

Figure 18 presents the 1392 valid responses the participants in the survey. Once more, participants were given the option of ‘other’ as well as a space to write in the hospital they prefer for health care needs if it was not listed previously in the question. Just more than one in every two respondents (55 percent) were likely to select DeKalb Health as their top choice for hospital-based health care. Statistical analyses of the data revealed that women reported they were more likely to go to DeKalb Health than men, while men were more likely to choose Lutheran Hospital.

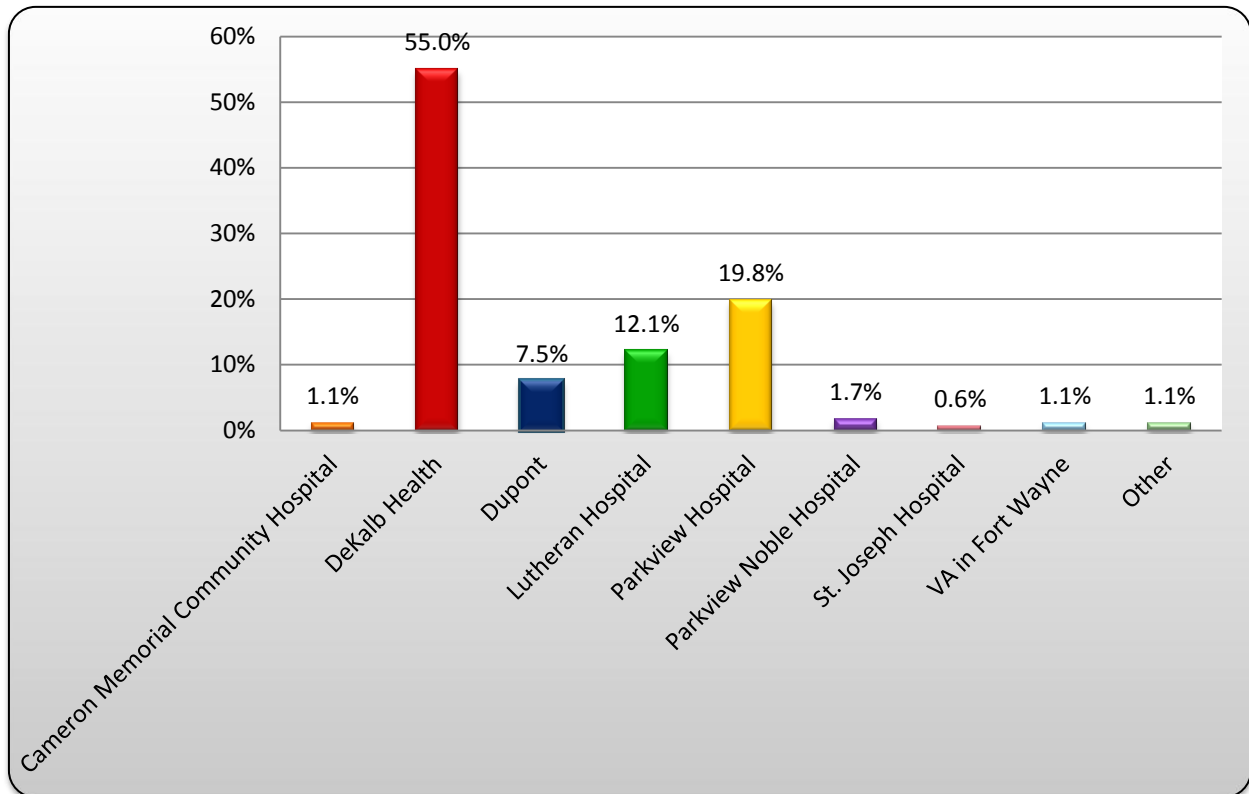


Figure 18: Hospital Care

Q32: Where do you get most of your health care information?

Respondents were instructed to check only one response for the primary source of their health care information. If their primary source of information was not listed in the question, they had the option of checking ‘other’ and filling in the provided space with their answer. Figure 19 on the next page illustrates the 1336 valid responses. On the write-in responses, 16 participants stated that they received their information from their employer, 10 reported receiving information from reading, 2 reported using the computer, 21 reported using healthcare agencies and professionals, and 11 reported using the television. In addition, 7 respondents reported they used family for their source of health care information, 7 reported using nurses, and 5 reported using a school. Transcribed responses for the ‘other’ option can be found in the appendices of this report.

ACCESS TO HEALTHCARE

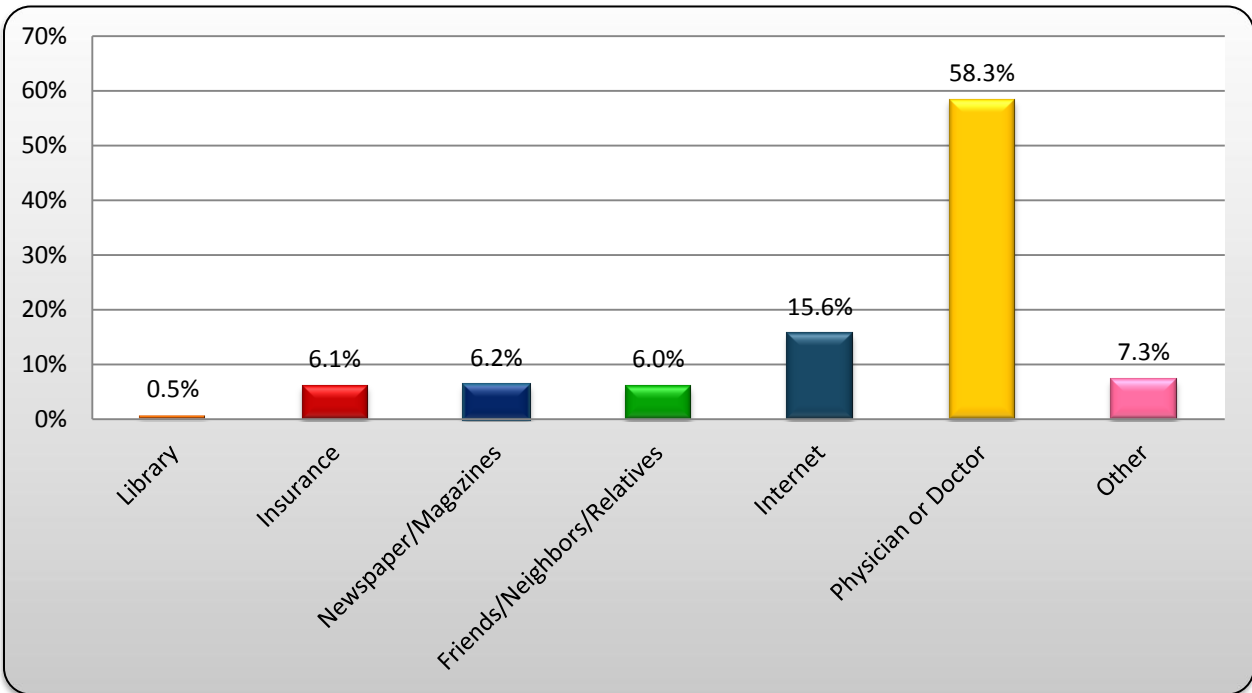


Figure 19: Source of Healthcare Information

Coverage and Usage

Q11: *Do you have any kind of health care coverage, including health insurance, HMO's, or government plans, such as Medicare or Medicaid?*

The results of the 1432 valid responses among DeKalb County residents are given in Figure 20. Results show that 9 in ten respondents have some form of health insurance. This finding is in alignment with data at both the state and national level; no statistically significant differences were found between DeKalb County, the state of Indiana and the United States as a whole. BRFSS data shown in figures 21 and 22 illustrate this point.

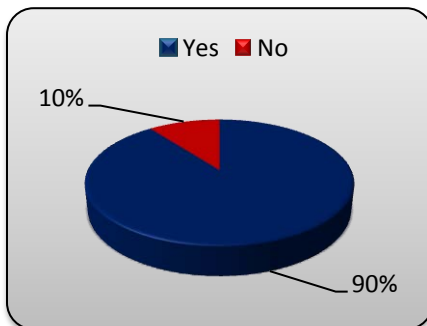


Figure 20: DeKalb Health Care Coverage

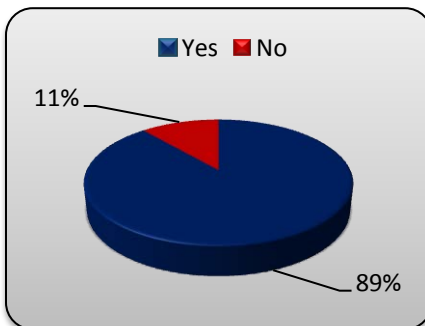


Figure 21: Indiana Health Care Coverage

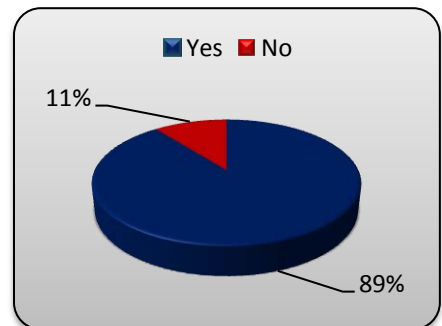


Figure 22: U.S. Health Care Coverage

Q12: *Do you feel you have an adequate amount of health care coverage?*

Figure 18 illustrates the 1427 valid responses provided by participants regarding their feelings of having adequate health care coverage. Even though the previous figure revealed that 9 in 10 respondents have health care coverage, only 8 in ten feel that they have an adequate amount of coverage.

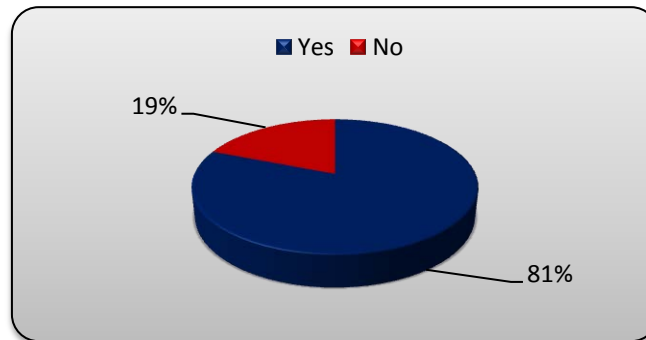


Figure 23: Adequate Health Care Coverage

Q13: *Please explain briefly in the box below why you feel you that you do not have an adequate amount of health care coverage.*

This question was posed as a follow-up to the 19 percent of respondents who stated that they did not have an adequate amount of health care coverage. Respondents were instructed to write their responses in a space provided on the survey. Open-ended content analysis of the data showed that the majority of responses mentioned cost as the main obstruction to not having adequate health care coverage. A number of respondents listed their employment status as the reason preventing adequate coverage, while others listed Medicare/Medicaid as being insufficient. Fifty-two respondents mentioned they had no coverage at all, while 15 reported not having dental or eye care coverage as the main reason they felt their health care coverage in general was deficient. Transcribed responses for Question 13 can be found in the appendices of this report.

Q14: *If you do not have any kind of health care coverage, do you know where to go to get coverage?*

In all there were 134 valid responses for Q14. Percentages for this question are presented in Figure 24 on the next page.

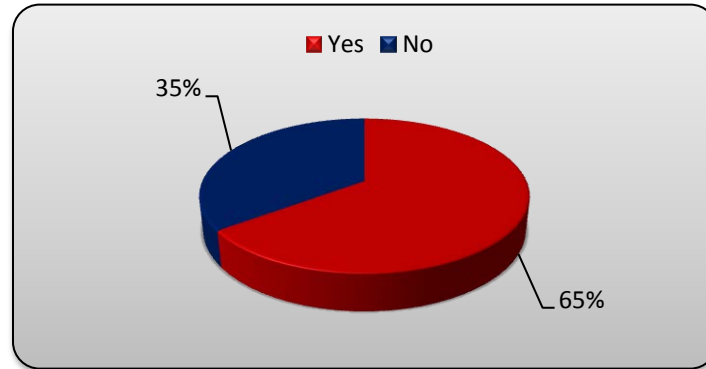


Figure 24: Health Care Coverage Access Knowledge

Q15: *Was there a time in the past 12 months when you needed medical care, but could not get it?*

Figure 25 presents the 1425 valid responses as to whether or not respondents were unable to obtain medical care in the last 12 months when needed. Only 6 percent of respondents stated that this was the case during the past year.

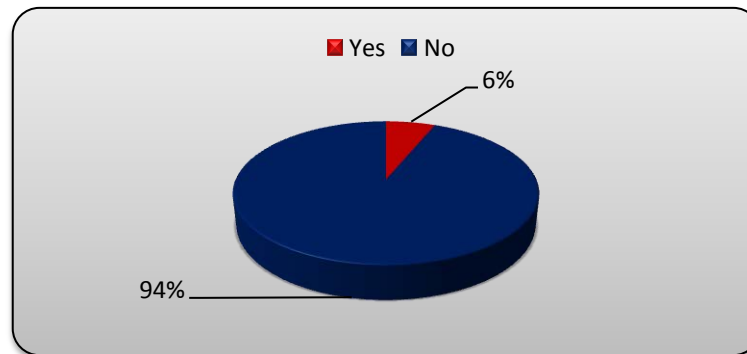


Figure 25: Inability to Access Medical Care

Q16: *Was there a time in the past 12 months when you needed to see a doctor but could not because of the cost?*

The results from the 1420 valid responses as to whether or not cost was the determining factor in a respondent's inability to access health care in the last 12 months are illustrated in Figure 26 on the next page. Statistical analyses of the DeKalb County data revealed that non-whites were more likely to report they had not seen a doctor, but needed to, in the last 12 months.

ACCESS TO HEALTHCARE

Figures 27 and 28 show 2010 BRFSS data for the state and national level regarding the inability to access medical care due to cost. No statistically significant differences were found between DeKalb County, the state of Indiana, or the nation with respect to this question.

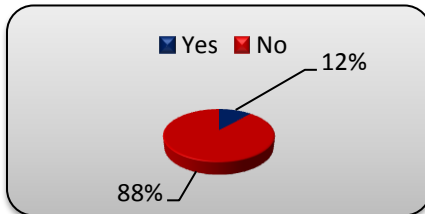


Figure 26:
Inability to Access Medical Care due to Cost
(DeKalb County)

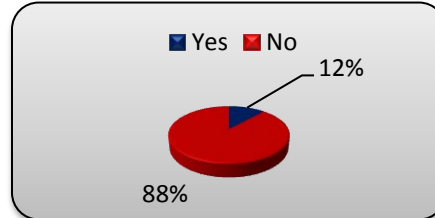


Figure 27:
Inability to Access Medical Care due to Cost
(Indiana)

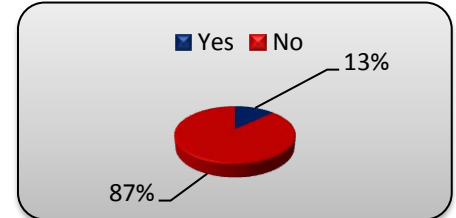


Figure 28:
Inability to Access Medical Care due to Cost
(U.S.)

Q17: *Was there a time in the past 12 months that you needed medical testing supplies (For example, diabetic testing supplies, pregnancy test, etc.) but could not get them?*

Figure 24 represents the data from the 1419 valid responses provided by participants as to whether or not they were able to obtain medical testing supplies when needed. Less than 5 percent of respondents stated that this was the case.

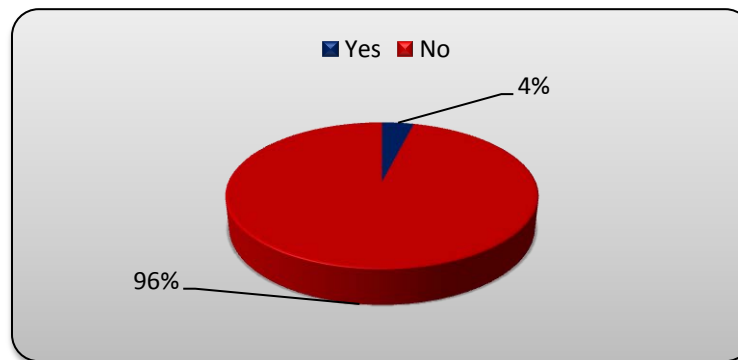


Figure 29: Access to Medical Testing Supplies

Q18: *In the past 12 months, have you ever had to choose between paying for prescription drugs or medical care instead of another essential life need, such as food or clothing?*

There were 1422 valid responses from participants answering whether or not they were forced to choose between health care or an essential life need. The data for all valid responses are shown in Figure 30 below. Statistical analyses of the data showed that women in DeKalb County reported having to make this choice more often than men.

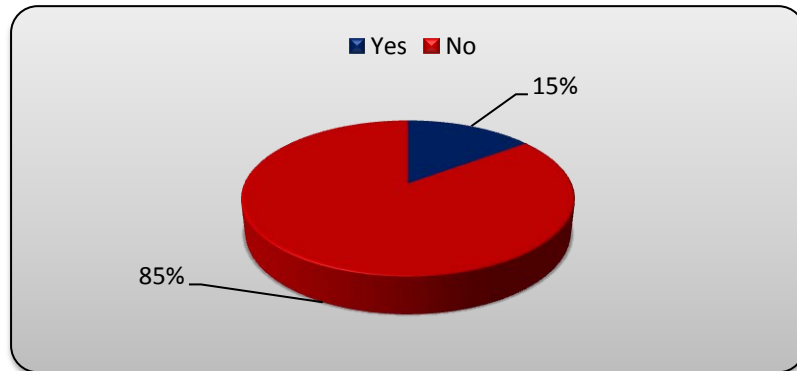


Figure 30: Choice between Health Care or Life Need

Health Fair and Screenings

Q63: *Have you ever attended a health fair?*

Figure 31 provides the results from the 1389 valid responses as to whether or not participants had ever attended a health fair. One in three DeKalb County residents indicated that they had attended a health fair at some point in the past. Further analysis of the data found that women were more likely than men to report attending a health fair.

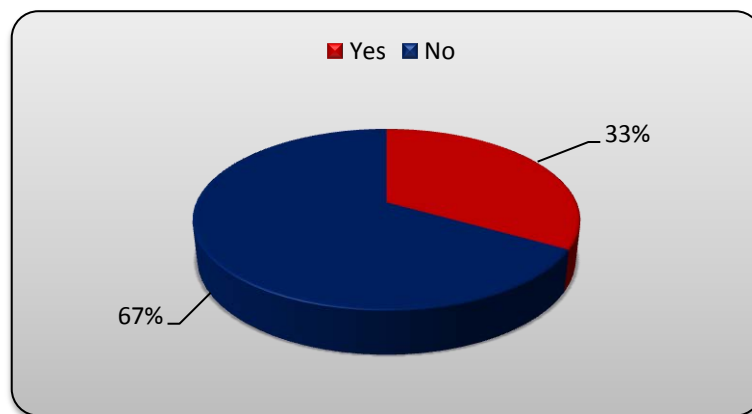


Figure 31: Health Fair Attendance

Q64: *If you answered yes to Q63, did you receive any health screenings for the following?*

Participants who answered ‘yes’ to Q63 were instructed to answer ‘yes’ or ‘no’ as to whether or not they had received health screenings for any of the seven choices present in Q64. The results of the 461 valid responses are provided in Figure 32. Additional statistical analyses found that women were more likely to be screened for osteoporosis than men, while those were between the ages of 18 and 59 reported they were more likely to be screened for diabetes than those who were over the age of 59. People over the age of 59 reported they were more likely to be screened for osteoporosis; along these same lines, married respondents were more likely to be screened for osteoporosis as well.

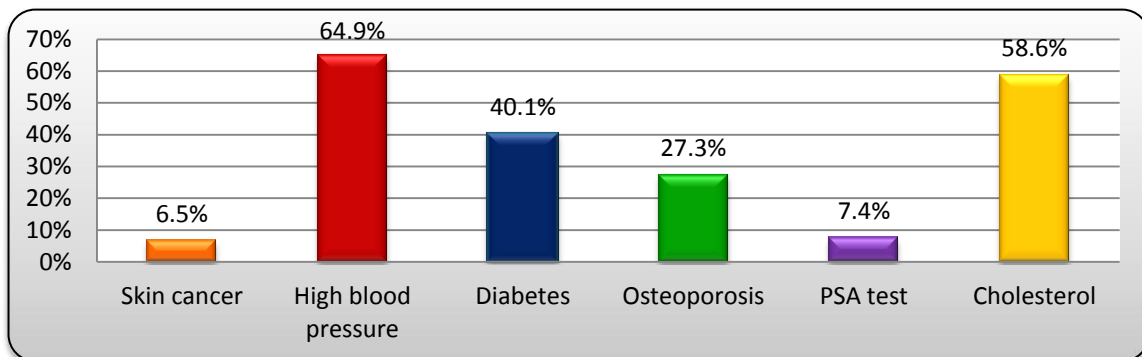


Figure 32: Health Screenings

BLOOD CHOLESTEROL/BLOOD PRESSURE

Two questions in the DeKalb County Community Health Needs Survey addresses issues of blood pressure and blood cholesterol.

Q19: How long has it been since you had your blood cholesterol checked?

Before asking participants to respond, a definition of cholesterol was provided for clarity purposes. Respondents were then instructed to provide the time period in which they had last had their blood cholesterol checked. The results of the 1434 valid responses are represented in Figure 28. As can be seen in the figure below, around 85 percent of respondents have had their cholesterol checked in the past two years.

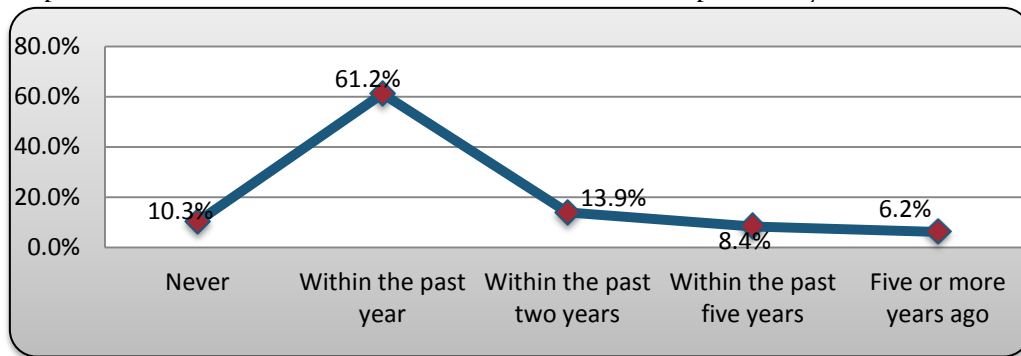


Figure 33: Blood Cholesterol Check Frequency

Q20: Are you currently taking medicine for high blood pressure?

Figure 34 presents data on the 1434 valid responses as to whether or not participants were taking medication for high blood pressure. Among DeKalb County respondents, men were found to be more likely to take blood pressure medication than women. Whites also reported taking blood pressure medication more frequently than non-whites in DeKalb County.

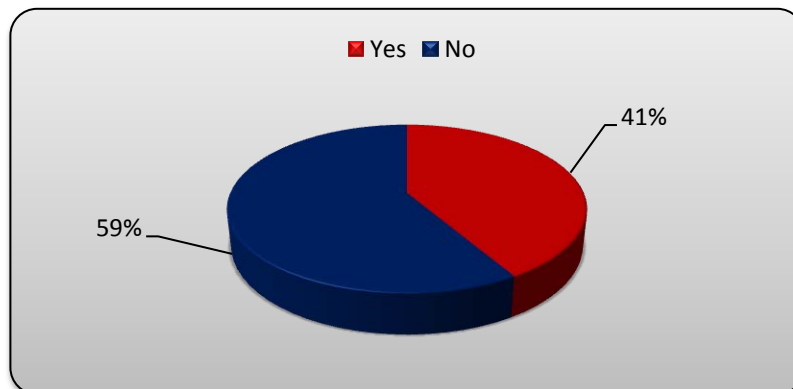


Figure 34: High Blood Pressure Medication

DENTAL CARE

This section of the report focuses on issues of dentistry and dental care. Several of the indicators in this report have comparative data to national and state BRFSS data. As with previous sections of the report, any statistically significant differences which are found will be noted.

Q21: *How long has it been since you last visited a dentist or a dental care clinic for any reason?*

The results from the 1427 valid responses in DeKalb County are represented in Figure 35. Within the DeKalb County data, it was found that whites were more likely to visit the dentist than respondents from other racial or ethnic backgrounds. Non-married participants also reported a longer period of time since previous dental appointment than married participants.

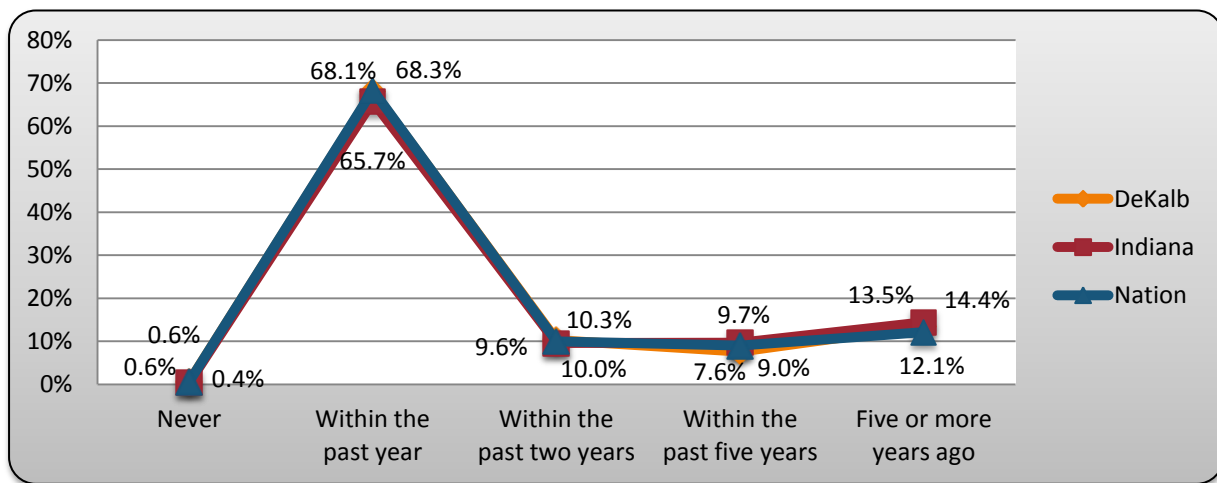


Figure 35: Last Dental Visit

This figure also compares the data from DeKalb County with that of the BRSS at the state and national levels. It was found that residents in the state of Indiana were more likely to wait to visit a dentist than residents in DeKalb County. There was no statistically significant difference between residents in DeKalb County and the United States population as a whole.

DENTAL CARE

Q22: *How long has it been since you had your teeth cleaned by a dentist or dental hygienist?*

Figure 36 illustrates the results from the 1401 valid responses in the DeKalb County dataset regarding a respondent's last teeth cleaning. In DeKalb County, non-married individuals were more likely to go longer without a teeth cleaning than married individuals. The trend in the data DeKalb County follows the state of Indiana and the nation very closely. Indeed, no statistically significant differences were found between DeKalb County and the state of Indiana. However, residents of DeKalb County were more likely to go longer without a teeth cleaning than all residents in the United States.

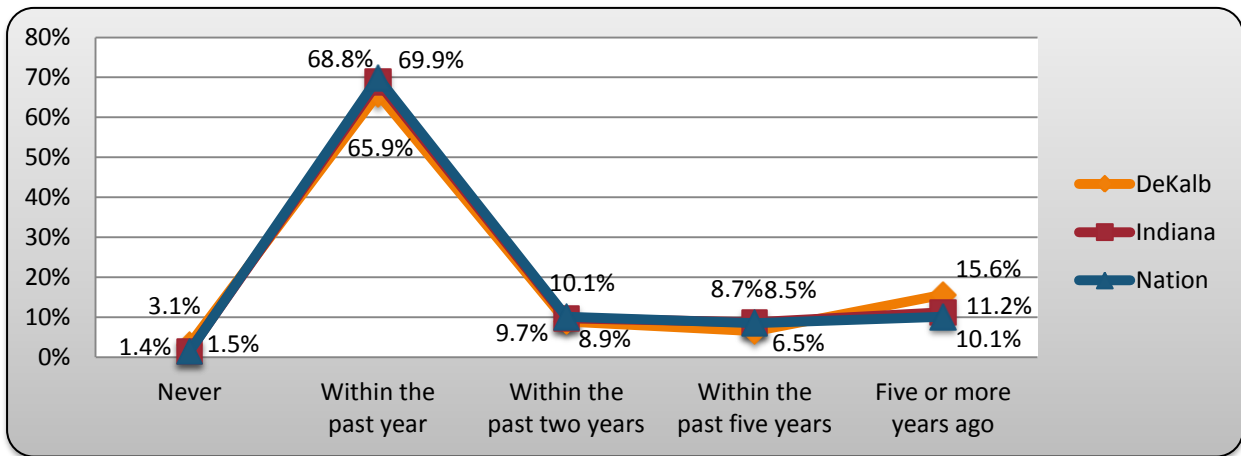


Figure 36: Last Teeth Cleaning

Q23: *Do you have dentures?*

Results from the 1411 valid responses as to whether or not participants wore dentures in DeKalb County are illustrated in Figure 37.

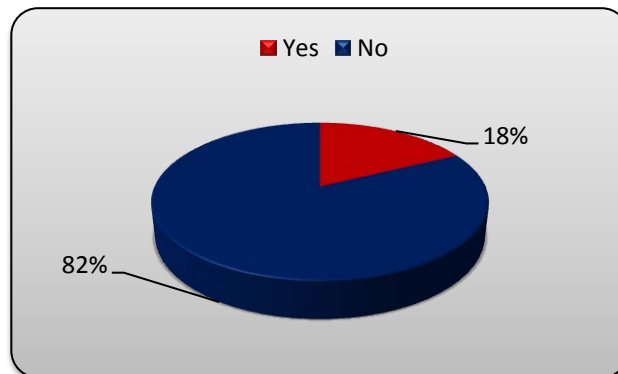


Figure 37: Participants with Dentures

Q24: Was there a time in the past 12 months when you needed to see a dentist but could not because of the cost?

Figure 33 represents the 1426 valid responses provided by participants as to whether or not their inability to see a dentist was due primarily to cost. From these responses, women reported putting dentist off more due to cost than did men.

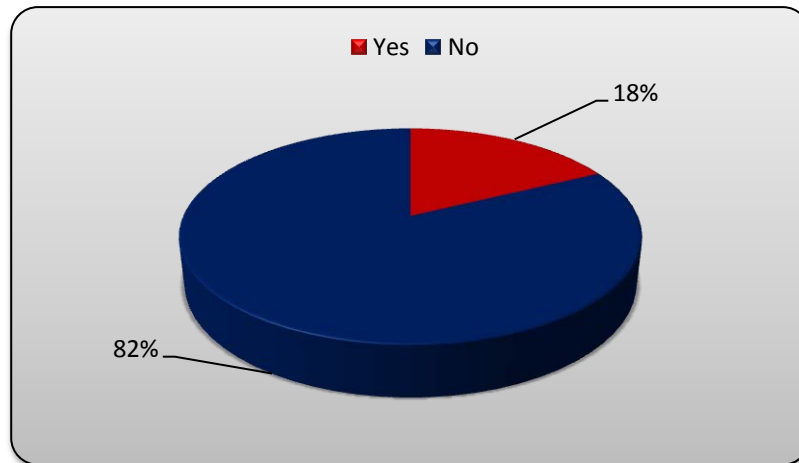


Figure 38: Inability to Visit Dentist due to Cost

Q25: Do you have dental health insurance?

Figure 39 shows the results from 1420 valid responses given by participants regarding whether or not they had dental insurance. Only slightly less than half of those polled (45 percent) stated that they in fact had dental insurance.

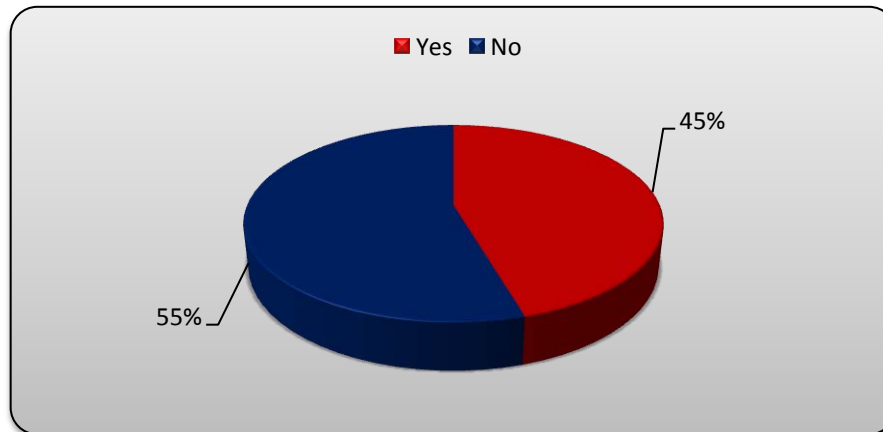


Figure 39: Dental Health Insurance

EYE CARE

Three questions included in the DeKalb Community Health Needs Survey addressed the issue of eye care. Only one of the questions in this section of the report has data that was comparative to national BRFSS data (residents of the state of Indiana were not asked the same question in 2010 as were residents of other states). As with previous sections of the report, any statistically significant differences that are found within the data analyses will be noted.

Q26: *When was the last time you had your eyes examined by a doctor or eye care provider?*

Participants provided 1436 valid responses regarding the time period in which they had last had their eyes examined by a medical professional. Figure 40 provides detail on the results of those responses.

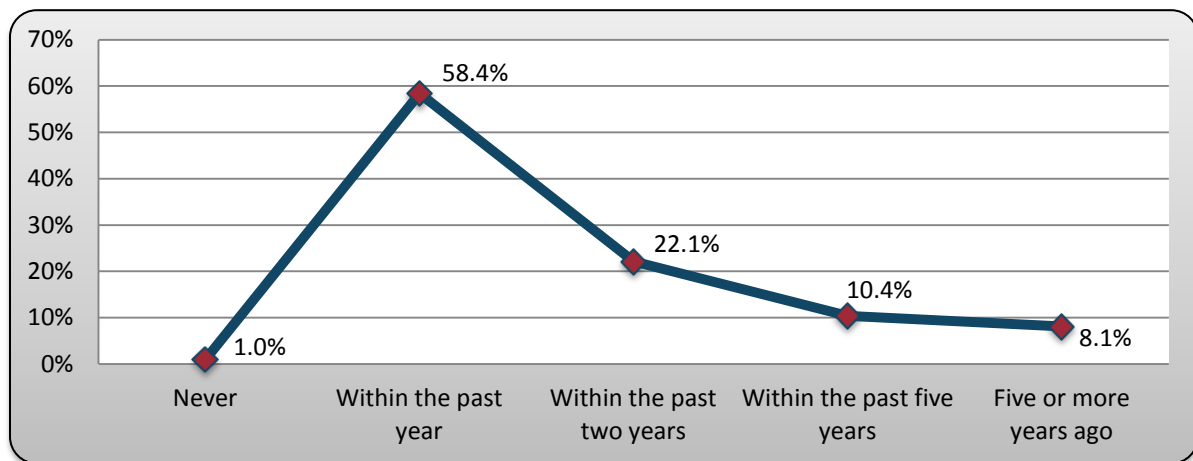


Figure 40: Last Eye Care Visit

Q27: *Do you have any kind of health insurance coverage for eye care?*

Figure 41 on the next page has the numbers for the 1428 valid responses from the 2012 DeKalb survey regarding insurance coverage for eye care. Figure 42 has comparable data for the nation with respect to eye care insurance coverage. As Figure 41 and 42 shows, there is about a 10 percent difference between the nation and DeKalb County. This difference is statistically significant.

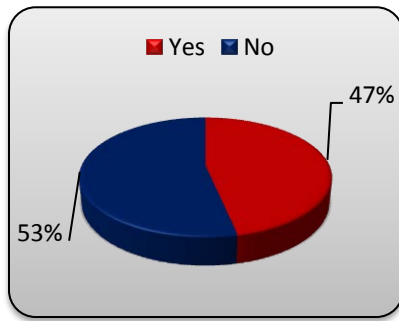


Figure 41: Eye Care Coverage (DeKalb County)

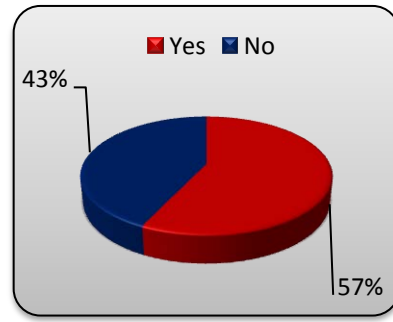


Figure 42: Eye Care Coverage (U.S.)

Q28: *Has cost kept you from getting new glasses, prescription lenses or contacts in the past year?*

The results of the 1420 valid responses given by participants regarding their inability to obtain glasses, prescription lenses, or contacts due to cost are presented in Figure 43. In DeKalb County, women reported being more likely to put off obtaining new glasses, prescription lenses or contacts than did men.

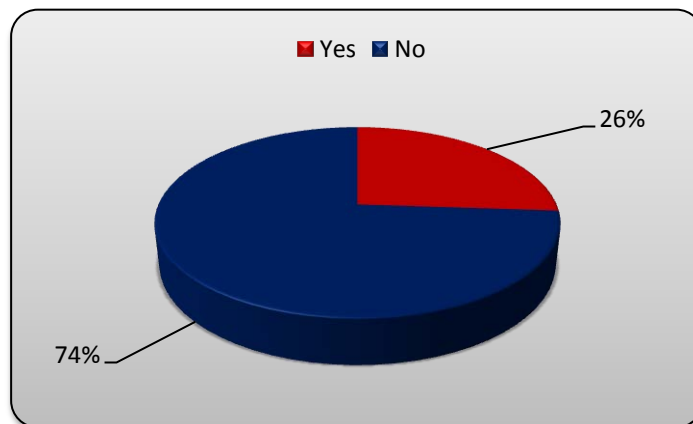


Figure 43: Inability to Obtain Glasses, Lenses or Contacts due to Cost

VACCINES

As with the section on eye care, there were only three questions included in the DeKalb Community Health Needs Survey that addressed the issue of vaccines. Unlike the questions on eye care, two of the questions in this section of the report have data that was comparative to national and Indiana state BRFSS data. As with previous sections of the report, any statistically significant differences that are found within the data analyses will be noted.

Q29: *During the past 12 months, have you received a seasonal flu vaccine?*

Figure 44 shows the results from the 1430 valid responses provided by participants. As can be seen in the data, half of respondents obtained a flu vaccine during the past year. Figures 45 and 46 compare the trends with respect to this question at the state and national levels. Statistical analyses show that residents in DeKalb County were more likely to get a flu shot as compared to residents of Indiana and the nation as a whole.

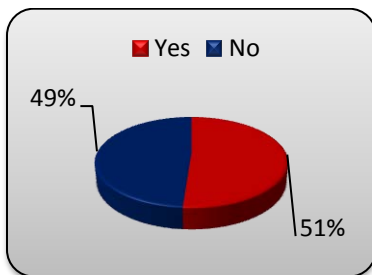


Figure 44: Flu Vaccine (DeKalb County)

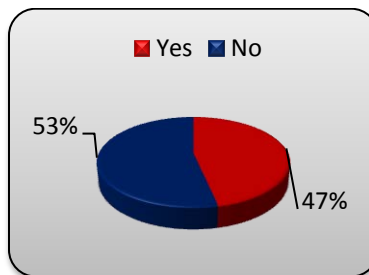


Figure 45: Flu Vaccine (Indiana)

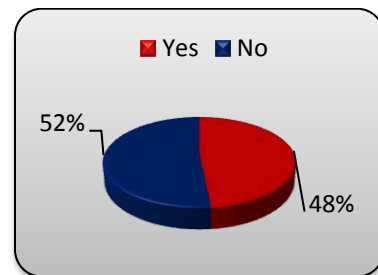


Figure 46: Flu Vaccine (U.S.)

Q30: *What prevented you from getting an influenza vaccine?*

Figures 47 through 50 represent the 698 valid responses provided by participants who had stated in Q29 that they had not received a seasonal flu vaccine. For Q30, respondents were given the opportunity to mark more than one answer within the survey. They were also given the opportunity to offer write-in responses in an open-ended format if one of the other three choices did not answer the question satisfactorily. Analysis of the open-ended responses revealed that the majority of participants felt there was no need for the flu vaccine, they did not believe in it, or they were allergic to it. Transcribed responses for the ‘other’ option can be found in the appendices of this report.

VACCINES

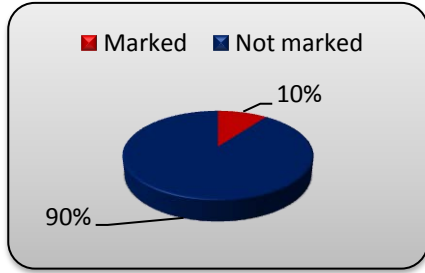


Figure 47: Cost

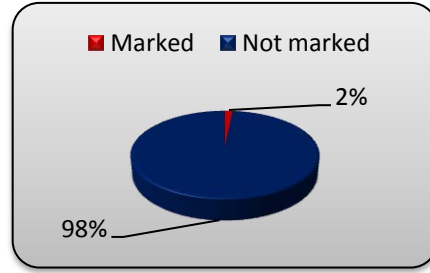


Figure 48: Concern the vaccine would make me sick

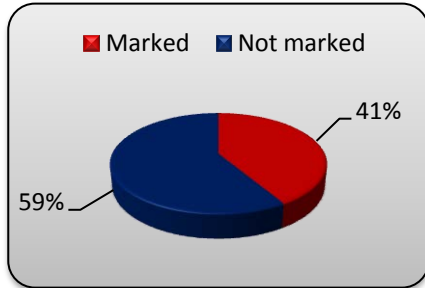


Figure 49: Availability

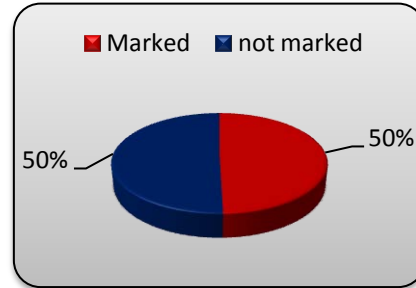


Figure 50: Other (write in blank)

Q31: Have you ever had a pneumonia shot?

DeKalb County participants provided 1195 valid responses for Q31, the results of which are presented in Figure 51. Figures 52 and 53 compare the DeKalb data with that of the BRFSS data for both state and national levels, respectively. Statistical analyses revealed that DeKalb County residents were more likely to receive a pneumonia shot than were residents of the state of Indiana or the United States.

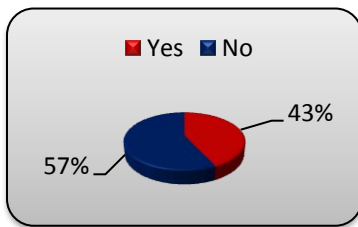


Figure 51: Pneumonia Shot (DeKalb County)

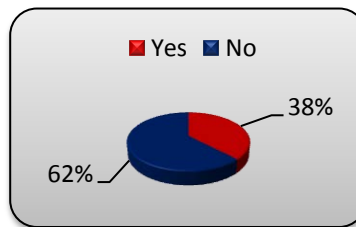


Figure 52: Pneumonia Shot (Indiana)

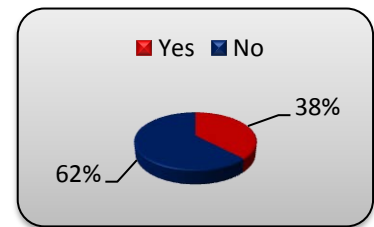


Figure 53: Pneumonia Shot (U.S.)

This section provides information regarding the safety of the survey participants. Four categories were developed based on the pattern of the questions in the survey: Safety Information; Driving Safety; Home Safety, and; Personal Safety.

Safety Information

Q33: *What would be your main method or way of getting information from authorities in a large-scale disaster or emergency?*

Figure 54 illustrates the results from the 1326 valid responses provided by participants regarding the main method of obtaining information from authorities in a large-scale disaster situation. Television is the overwhelming favorite, followed by radio and the internet, respectively.

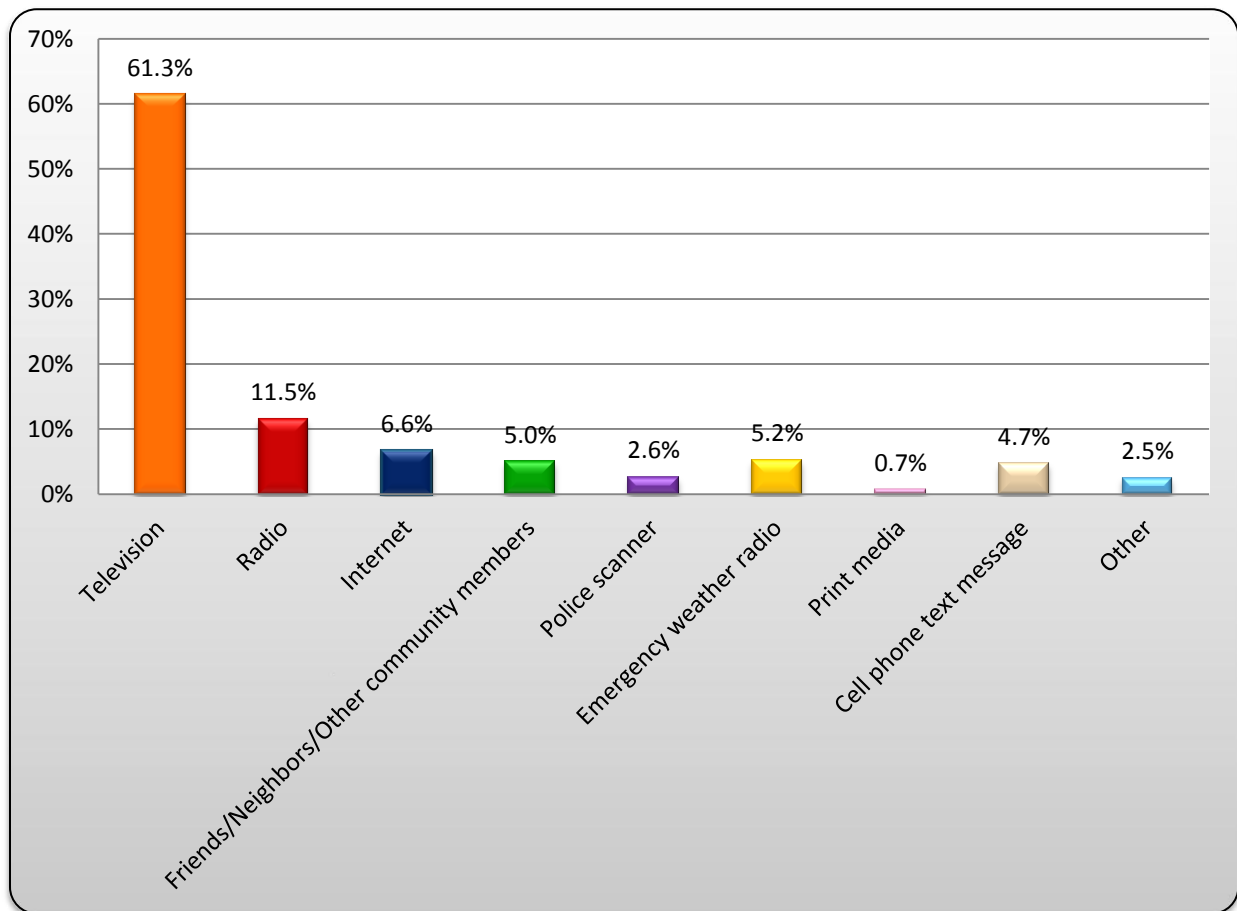


Figure 54: Information from Authorities

Driving Safety

Q92: *How often do you use seat belts when you drive or ride in a car?*

The results from the 1420 valid responses provided by participants are illustrated in Figure 55, which further presents the state and national data from the BRSS in comparison to that of DeKalb County. In general, women are more likely to wear seatbelts than men in DeKalb County.

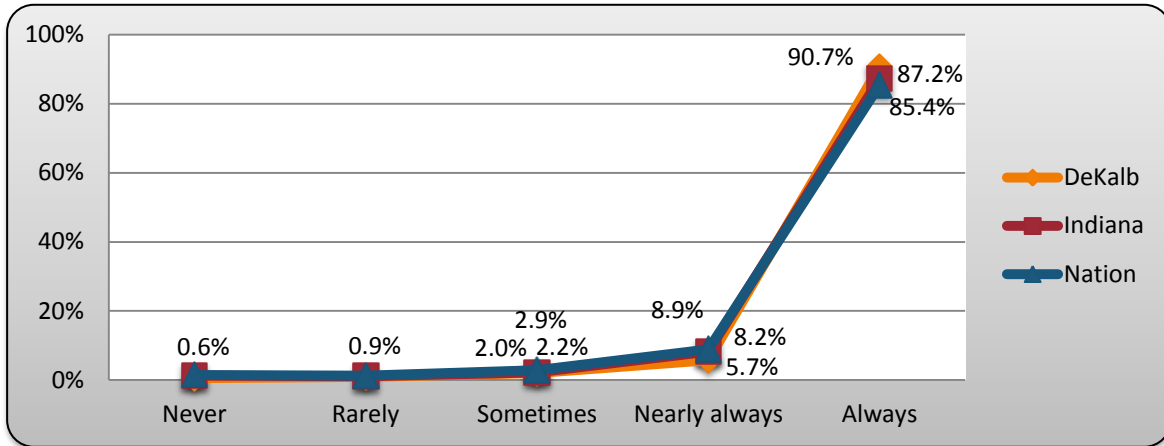


Figure 55: Seat Belt Frequency

Q108: *How often would you say you talk on your cell phone while driving?*

Figure 56 presents data from the 1296 valid DeKalb County responses regarding the frequency with which respondents reported talking on the cell phone while driving. In DeKalb County, whites and married respondents were more likely to talk on the cell phone while driving than minorities and non-married survey participants.

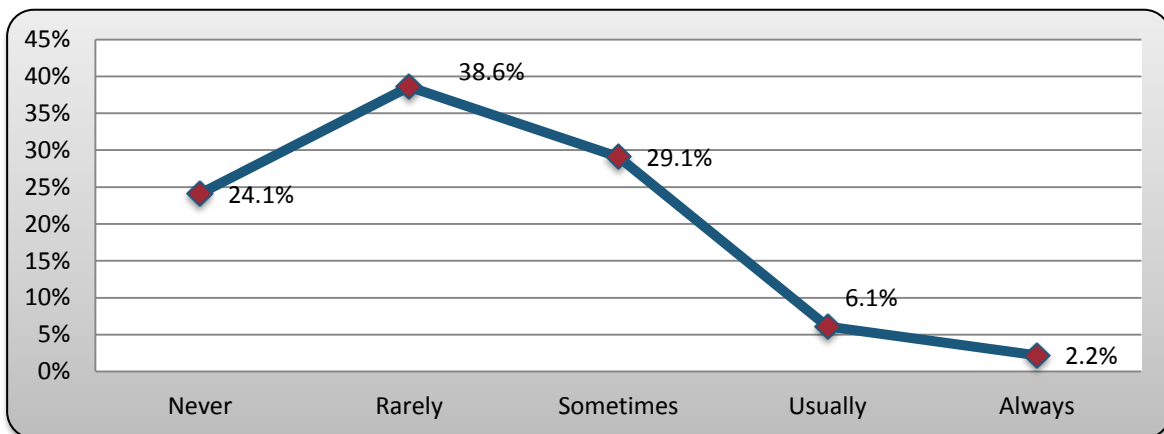


Figure 56: Cell Phone Usage

Q109: How often do you text message while driving?

The results of the 1287 valid responses provided by participants in the survey for this question are presented in Figure 57. Only one in every five respondents stated that they text while driving, although the majority state they do it rarely.

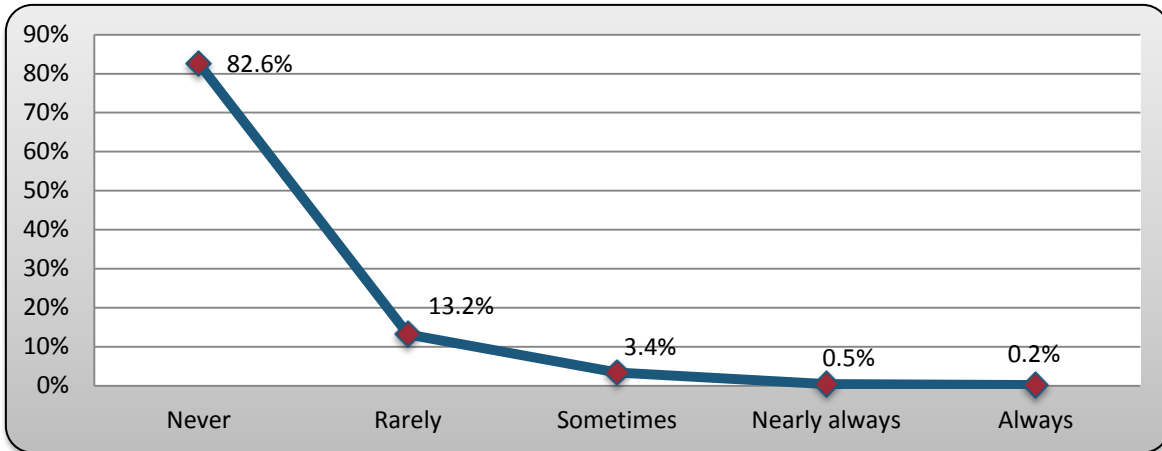


Figure 57: Texting Frequency

Q110: Do you have any sort of hands-free device that you use to talk on your cell phone while driving, such as Bluetooth or Jabra Cruiser?

Participants provided 1257 valid responses regarding their use of a hands-free device while in the car. Figure 58 shows that only one in five respondents use such a device while driving. Respondents under age 59 and married respondents were more likely to have a hands-free device than either non-married respondents or people age 59 and older.

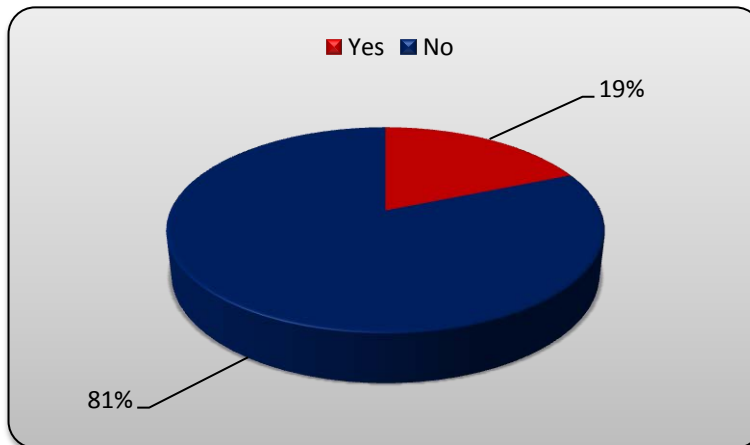


Figure 58: Hands-free Device

Home Safety

Q93: Are there any firearms in your residence?

Figure 59 provides data for 1390 valid responses regarding the presence of firearms within the home. Fully half of the sample indicated that there was a weapon in their home. Men, married respondents and participants between the ages of 18 and 58 in the sample reported having firearms in the home more than women, non-married respondents and those polled age 59 and older.

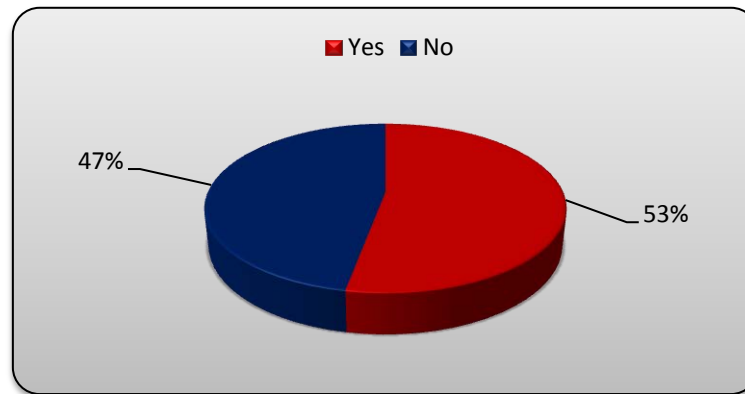


Figure 59: Firearms

Q94: Does your residence have a working smoke detector?

The results from the 1408 valid responses provided by participants are listed in Figure 60 regarding the presence of a working smoke detector within the home. The overwhelming majority of respondents had a smoke detector in their home. Additional statistical analyses showed that whites were more likely to have a working smoke detector than non-whites in the sample, and married participants were more likely than non-married participants to have smoke detectors.

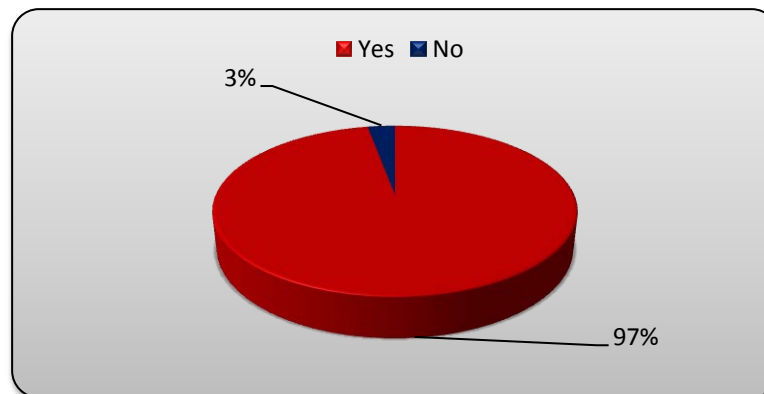


Figure 60: Working Smoke Detector

Q95: *Have you checked to see if the batteries in your smoke detector are working in the past six months?*

Figure 61 holds results from the 1301 valid responses regarding whether or not participants had checked the batteries of the smoke detector. Even though 97 percent of respondents stated that they had a working smoke detector, only 85 percent had checked the batteries in the last six months. In DeKalb County, men were more likely to report checking the batteries when compared to women.

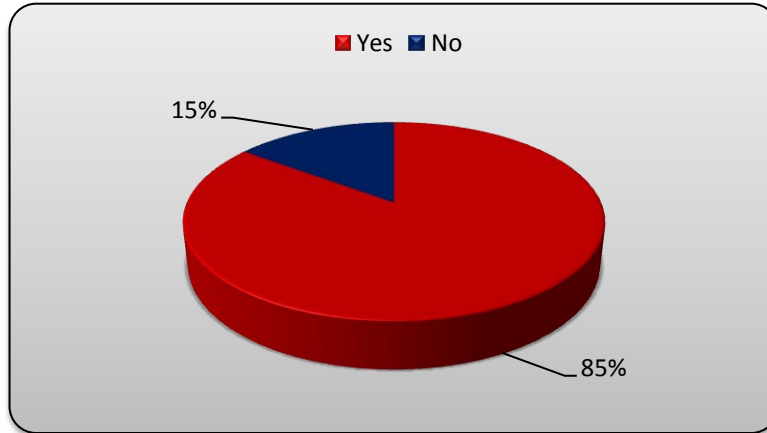


Figure 61: Smoke Detector Battery Check

Q96: *Does your residence have a working carbon monoxide detector?*

Figure 62 presents the results from the 1361 valid responses provided by participants as to whether or not a working carbon monoxide detector was present in the home. Unlike a smoke detector, only around half (47 percent) of those polled stated they had a carbon monoxide detector. Married participants reported having a carbon monoxide detector more often than non-married participants.

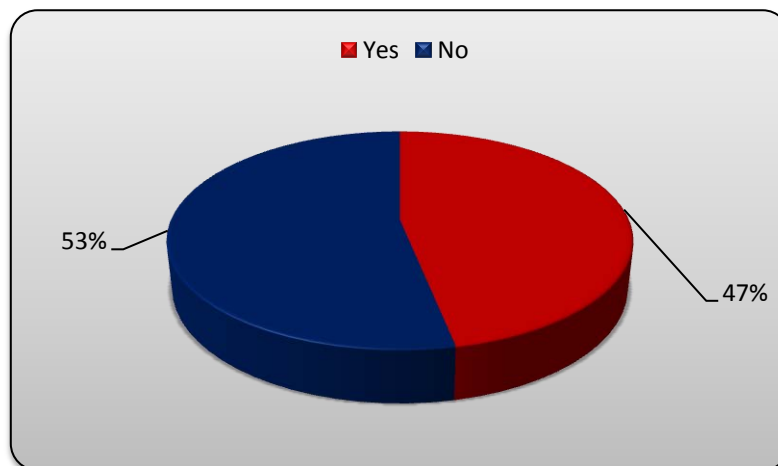


Figure 62: Carbon Monoxide Detector

Q97: *Have you checked to see if the batteries in your carbon monoxide detector are working in the past 6 months?*

The results from the 603 valid responses provided by participants regarding whether or not they had checked the batteries of their carbon monoxide detector are presented in Figure 63 below. Results for this question are remarkably similar to those for Q95, which asked respondents how often they checked the batteries in their smoke detector.

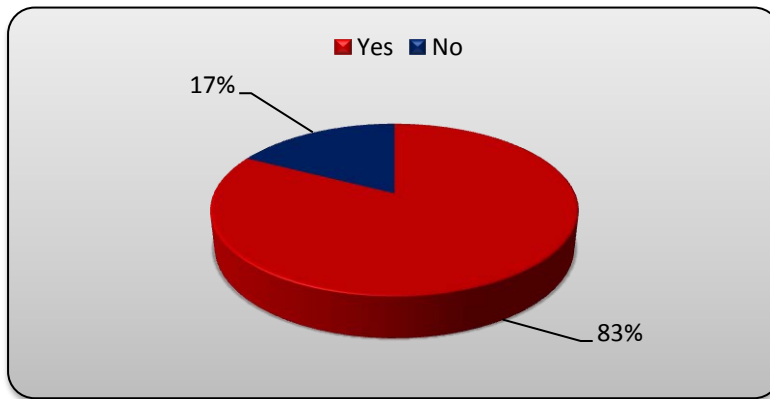


Figure 63: Carbon Monoxide Battery Check

Q98: *Does your residence have a fire extinguisher?*

The results from the 1381 valid responses provided by participants regarding the presence of a fire extinguisher in the home are presented in Figure 64. About one in three respondents reported that they did not have a fire extinguisher in their home. In DeKalb County, men were more likely to respond that their residence had a fire extinguisher than women. Married individuals were also more likely to report having one than non-married participants in the survey.

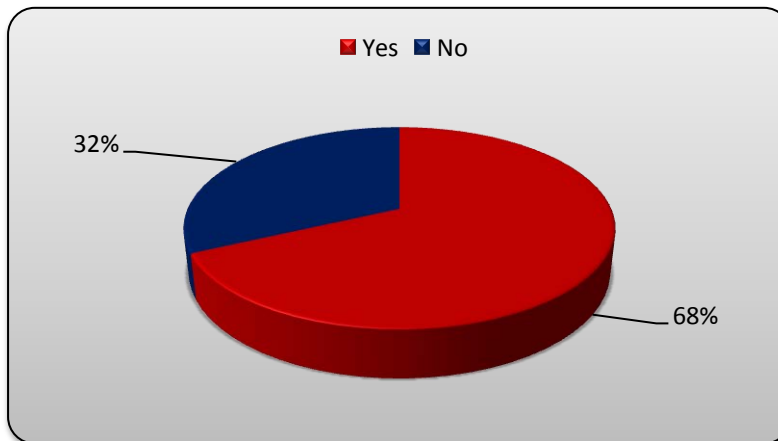


Figure 64: Fire Extinguisher

Personal Safety

Q74: *In the past 12 months, have you experienced any physical violence? By violence, we mean being pushed, slapped, hit, punched, shaken, kicked, choked, etc.*

Of the 1422 valid responses provided by participants, 98.9 percent reported they had not experienced personal violence in the past year. Only 1.1 percent acknowledging they had, in fact, been the victim of physical violence during the past year.

Q75: *In the past 12 months, have you been forced to take part in any sexual activity you did not want to?*

Of the 1421 valid responses provided by participants, 99.6 percent reported they had not experienced unwanted sexual activity in the past year. Only 0.4 percent of the sample reported that they had, in fact, been the victim of unwanted sexual activity during the past year.

MEN'S HEALTH

This section of the report focuses on issues of men's health. Results for both questions below have comparative data to national and state BRFSS data. It should be noted here that with respect to Q34 and Q35, no statistically significant differences were found in the data between DeKalb County, the state of Indiana and the nation as a whole.

Q34: *A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. It is normally recommended for men over the age of the 40. How long has it been since your last PSA test?*

Figure 65 provides data for the 407 men in the sample who were age 40 and older and who chose to answer this question. Results for DeKalb County are presented in relation to data in the BRSS for Indiana and the United States. It should be stated here that after the survey was fielded, the United States Preventive Services Task Force changed its recommendations concerning the use of the PSA test for men age 40 and above. The CDC has adopted the recommendations of the United States Preventive Services Task Force and now does not recommend a PSA test unless men are evidencing symptomology of prostate cancer.

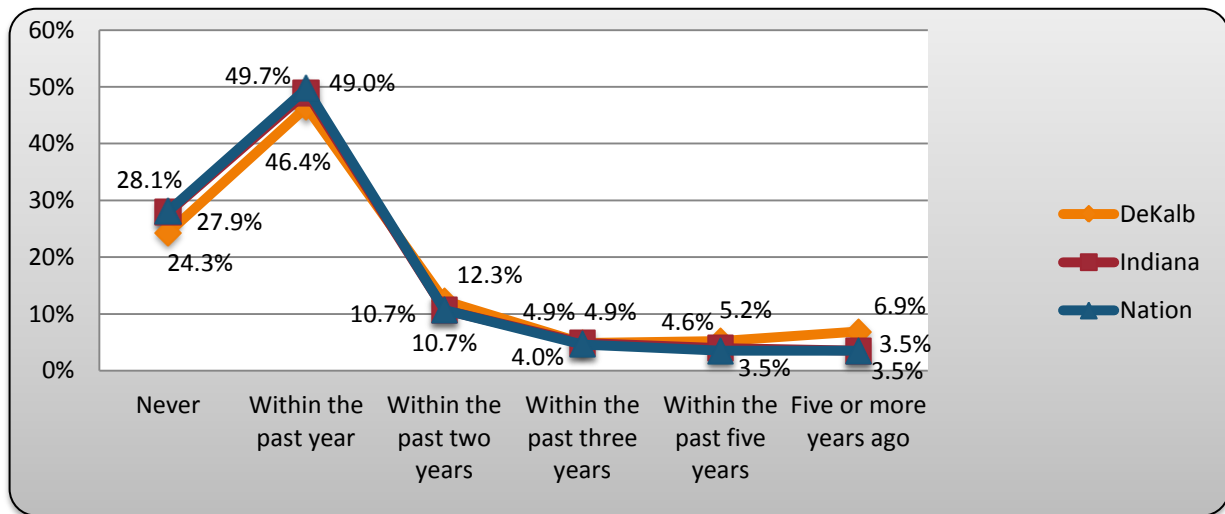


Figure 65: PSA Test

Q35: *A digital rectal exam is an exam in which a doctor, nurse, or other health care professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland. It is normally recommended for men over the age of 40. How long has it been since your last digital rectal exam?*

Figure 66 on the next page provides data for the 408 men in the sample who were age 40 and older and who chose to answer this question. Results for DeKalb County are presented in relation to data in the BRSS for Indiana and the United States.

MEN'S HEALTH

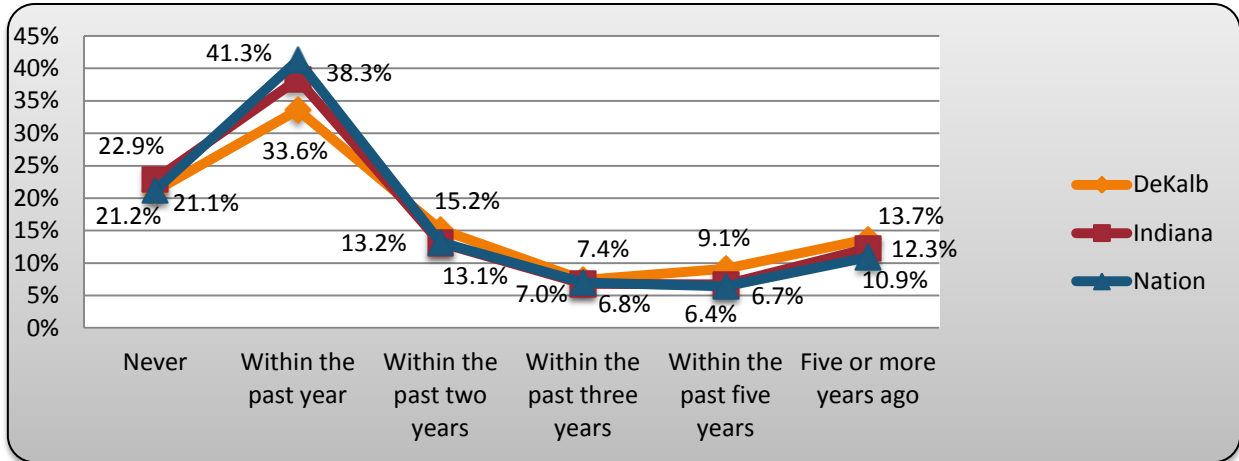


Figure 66: Digital Rectal Exam

WOMEN'S HEALTH

This section of the report focuses on issues of women's health. Several questions on a variety of topics germane to women's health are presented below. Results for five of the questions below have comparative data to national and state BRFSS data. As with previous sections of the report, any statistically significant differences that are found in the data will be noted.

Q2: To your knowledge are you now pregnant?

Of the 966 women in the DeKalb data sample, only 9 respondents, or 0.9 percent of the sample, stated that they were pregnant at the time they filled out the survey. Data contained in the BRFSS with respect to this question shows a higher trend in the state of Indiana (3.3 percent of respondents) and the nation as a whole (3.6 percent of respondents) for pregnant respondents.

Q36: A clinical breast exam is when a doctor, nurse, or health care professional feels the breast for lumps. How long has it been since your last clinical breast exam?

The results from the 949 valid responses from female participants are provided in Figure 67 below. Statistical comparisons to the BRSS data reveals that women in DeKalb County wait longer on average than women in both Indiana and the United States to undergo a clinical breast exam.

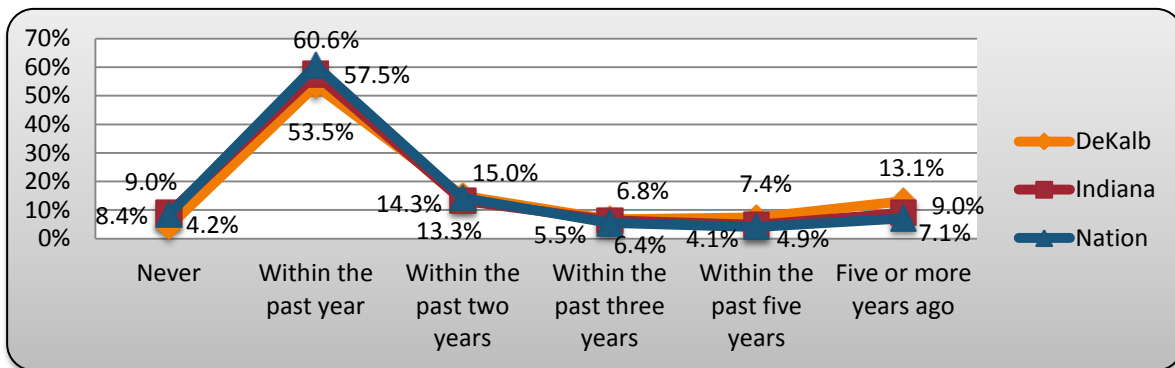


Figure 67: Clinical Breast Exam

Q37: A mammogram is an x-ray of each breast to look for breast cancer. How long has it been since your last mammogram?

Figure 68 on the next page presents the 953 valid responses from female participants, as well as the BRSS data of the same nature for both the state and national levels. Statistical analyses revealed that the women of DeKalb County wait longer on average to have a mammogram than women in the United States as a whole. No difference was found between the women of DeKalb County and women in the state of Indiana.

WOMEN'S HEALTH

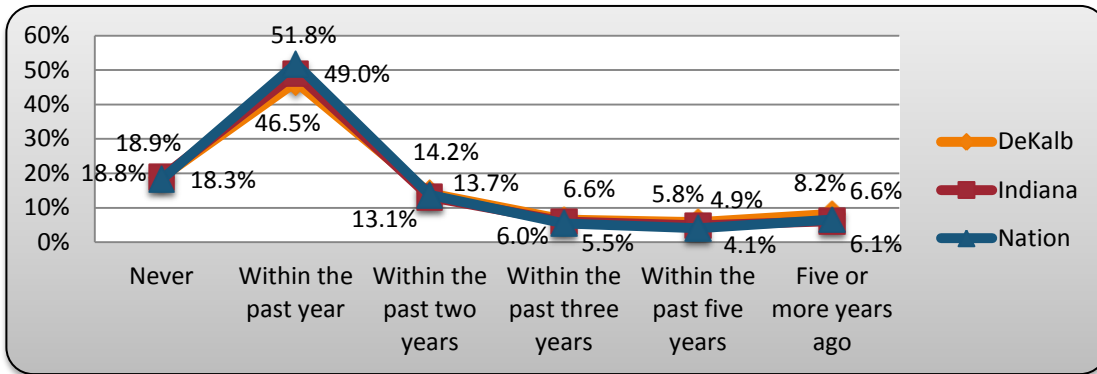


Figure 68: Mammogram

Q38: *How often do you perform a breast self-examination?*

Figure 69 provides data for the 966 valid responses provided by female participants in DeKalb County. As can be seen from the chart, over half of women in DeKalb County do not perform regular breast self-examinations.

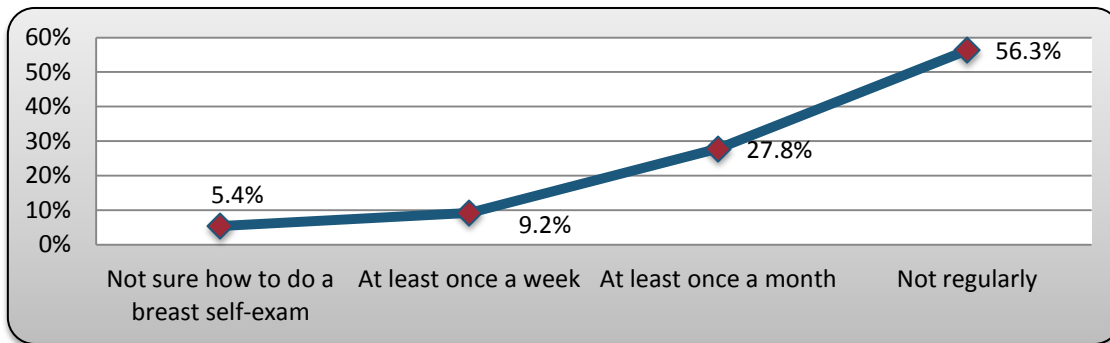


Figure 69: Brest Self-Examination

Q39: *A hysterectomy is an operation to remove the uterus (womb). Have you had a hysterectomy?*

Figure 70 on the next page provides the data results of the 957 valid responses given by female participants in DeKalb County. Around one in every three women in DeKalb County stated they had a hysterectomy. Figures 71 and 72 on the next page present the BRFSS data of the same nature for both Indiana and the United States, respectively. Women in DeKalb County were less likely than all women in the state of Indiana to have had a hysterectomy. The rate of hysterectomies for the nation was not statistically different from that of DeKalb County.

WOMEN'S HEALTH

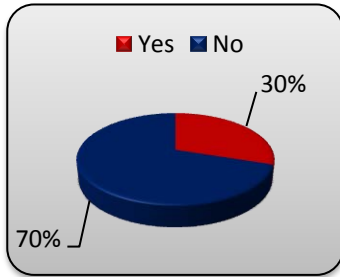


Figure 70: Hysterectomy (DeKalb County)

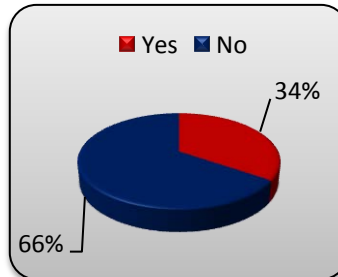


Figure 71: Hysterectomy (Indiana)

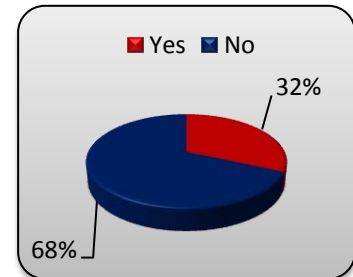


Figure 72: Hysterectomy (U.S.)

Q40: *A pap smear is a test for cancer of the cervix. How long has it been since you had your last pap smear?*

Data for the 667 valid responses provided by DeKalb County female participants are presented in Figure 73. Comparative data for the state of Indiana and the United States is also presented below. Statistical analyses revealed that women in DeKalb County wait less time than women in Indiana to obtain a pap smear.

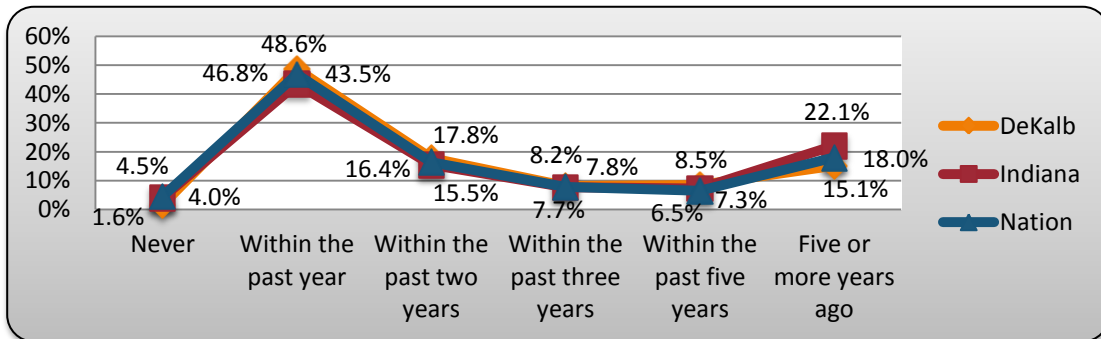


Figure 73: Pap Smear

Q41: *Do you have a family history of breast cancer?*

Figure 74 presents data for the 905 valid responses provided by female participants in DeKalb County. Nearly one in every four respondents (23 percent) indicated there was a family history of breast cancer.

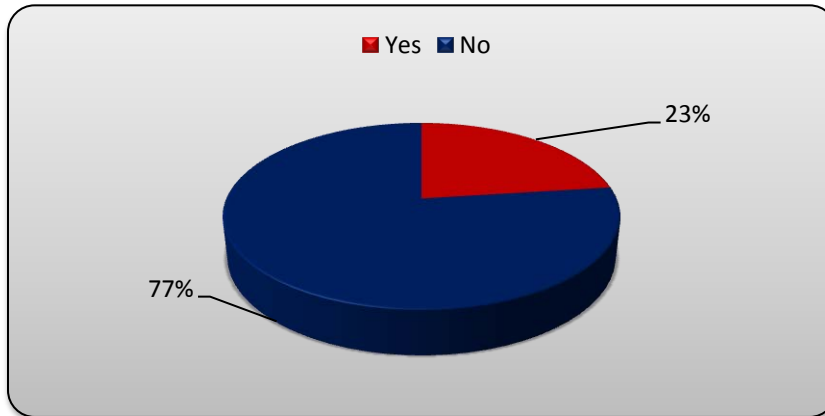


Figure 74: Family History of Breast Cancer

Q42: *Do you have a family history of ovarian cancer?*

Figure 75 provides data for the results from the 892 valid responses rendered by female participants. Only one in ten DeKalb County female respondents indicated there was a history of ovarian cancer in their family.

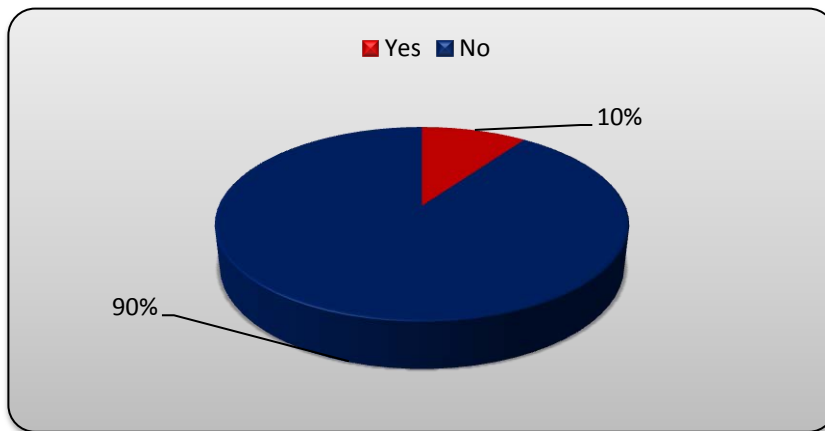


Figure 75: Family History of Ovarian Cancer

Four questions on the DeKalb County Community Health Needs Survey were designed to explore matters of human sexuality. Results for these questions are presented below.

Q43: *Thinking about your last sexual intercourse, how long ago was that?*

Figure 76 presents the results from the 1380 valid responses provided by participants. Roughly six in ten respondents stated that it was less than a year ago, whereas about four in ten stated it was more than a year ago.

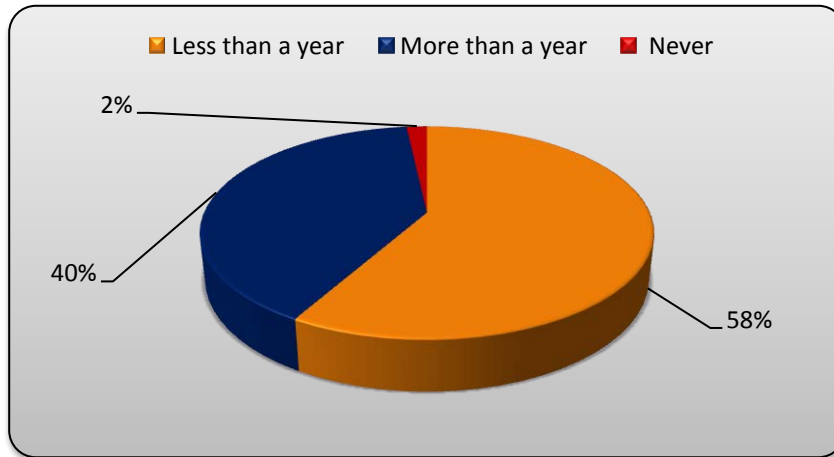


Figure 76: Last Sexual Intercourse

Q44: *Are you currently using any form of birth control or contraceptives, such as condoms, birth control pills, a Depo-Provera shot, the Nuva Ring, an implant such as a IUD, etc.?*

Figure 77 presents the results from the 1353 valid responses provided by DeKalb County participants. Nearly one in ten respondents are using some form of birth control. Yet the BRFSS data in Figure 78 shows that only 2 percent of people nationally are using some form of birth control. This is a statistically significant difference.

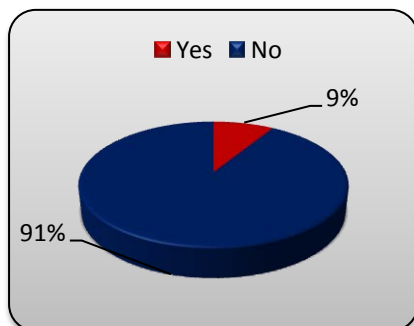


Figure 77: Birth Control (DeKalb County)

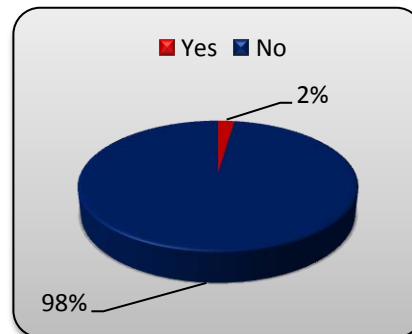


Figure 78: Birth Control (U.S.)

Q45: Are you using contraceptives to...?

Figure 79 holds the results from the 119 valid respondents who indicated they were using some form of contraceptive in Q44. The overwhelming majority indicated they were using contraception to prevent pregnancy; however, one in every four respondents did note that they were using contraception to regulate their menstrual cycle. Please note that since respondents were allowed to check all answers that applied, totals for this question will not add to 100 percent.

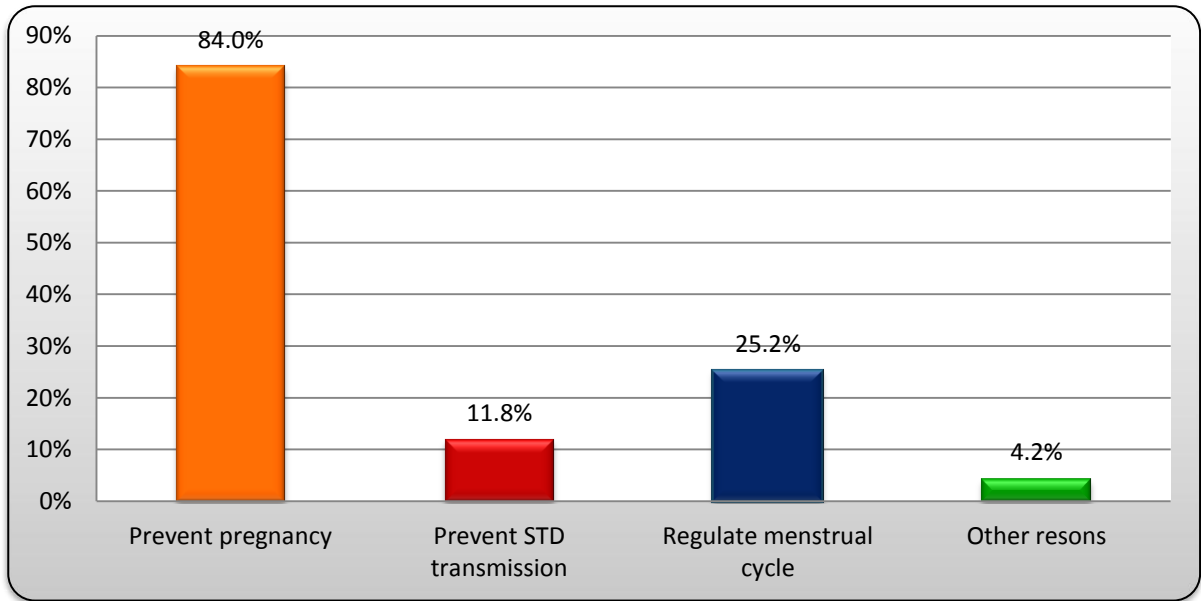


Figure 79: Reasons for Contraceptive Use

Q46: If you are not currently using contraceptives, what is the main reason?

The table on the next page holds the results from the 1126 valid responses provided by respondents as to why they were not using contraceptives. Even though 11 different choices were offered to respondents, a sizable number chose ‘other’ during the initial fielding of the survey. Based on a content analysis of the open-ended ‘other’ data, five additional categories were created as responses for Q46: Age; Hysterectomy; Menopause; No partner, and; Abstain/Celibate/Not having sex. As can be seen in the table on the next page, sterilization was the first reason cited for not using contraceptives, with age being second.

	Reason for not using contraceptives
Trying to get pregnant	1.3%
You or your partner dislike using birth control	1.2%
You or your partner fear side effects of birth control	0.7%
You cannot pay for birth control	0.3%
No insurance coverage for birth control	0.1%
Religious reasons	2.0%
Do not have access to birth control	0.1%
Do not think you or your partner can get pregnant	9.0%
You or your partner is currently pregnant	0.6%
You or your partner is currently breastfeeding	0.3%
You or your partner had tubes tied/vasectomy	44.1%
Age	13.4%
Hysterectomy	7.5%
Menopause	4.3%
No partner	7.3%
Abstain/Celibate/Not having sex	3.6%
Other	4.2%

CHILDREN

The DeKalb County Community Health Needs Survey fielded nine different questions designed to gather information regarding children under the age of 18. This section will review data concerning both the health and the safety of children in the household of the respondent. A total of 364 respondents, or roughly 25 percent of the sample, indicated that they had at least one child under the age of 18 in the household.

Health

Q52: *How many hours of sleep do the school-age children in your household get on an average school night?*

The results from the 326 valid responses provided by participants are presented in Figure 80 below. Both average and median sleep for children was 8 hours.

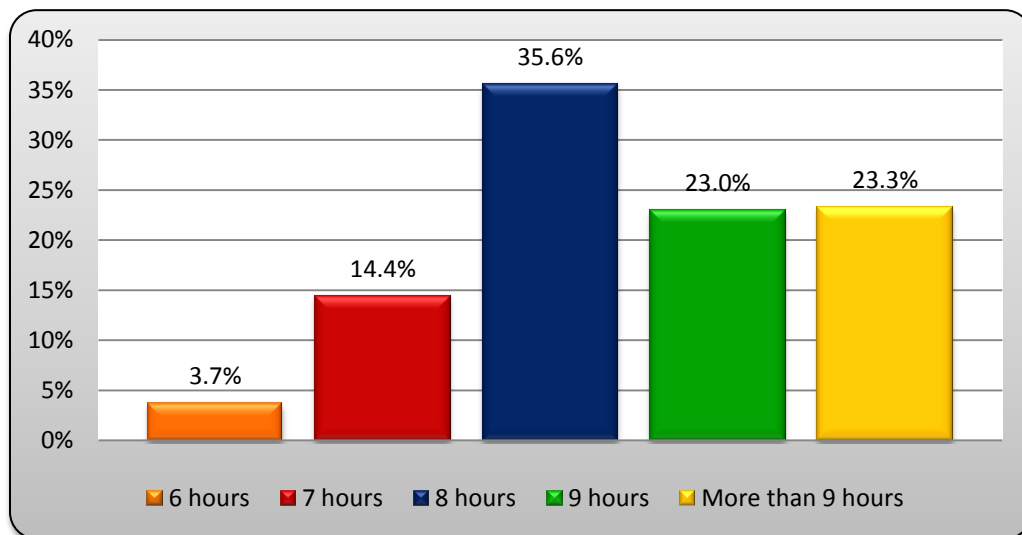


Figure 80: Children's Amount of Sleep

Q55: *Have any of the child(ren) in your household, age 3 or older, been to the dentist in the past year?*

Survey respondents provided a total of 328 valid responses for this question. As can be seen in Figure 76 on the next page, nearly nine in ten respondents stated that their child and/or children had been to the dentist at some point in the previous 12 months.

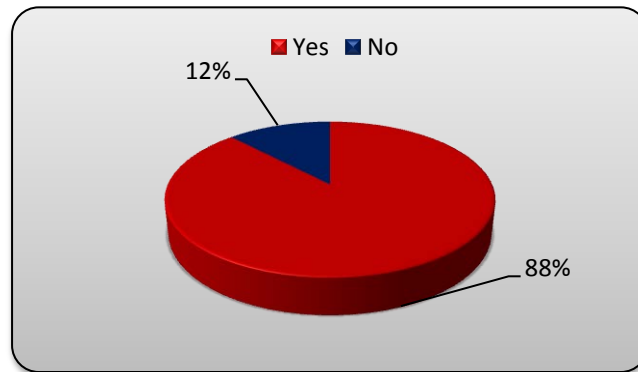


Figure 81: Children's Dentist Visit

Q56: *In the past year, have any of the following kept you from taking the child(ren) in your household to a doctor or health care facility?*

Figure 82 presents the results from the 364 valid responses provided by participants. As can be seen in Figure 82, the cost of health care was the number one reason why a respondent might have elected to not take their child(ren) to the doctor in the past year. A lack of health insurance was a close second. It should be noted here that since respondents were asked to check all that apply, totals will not equal 100 percent.

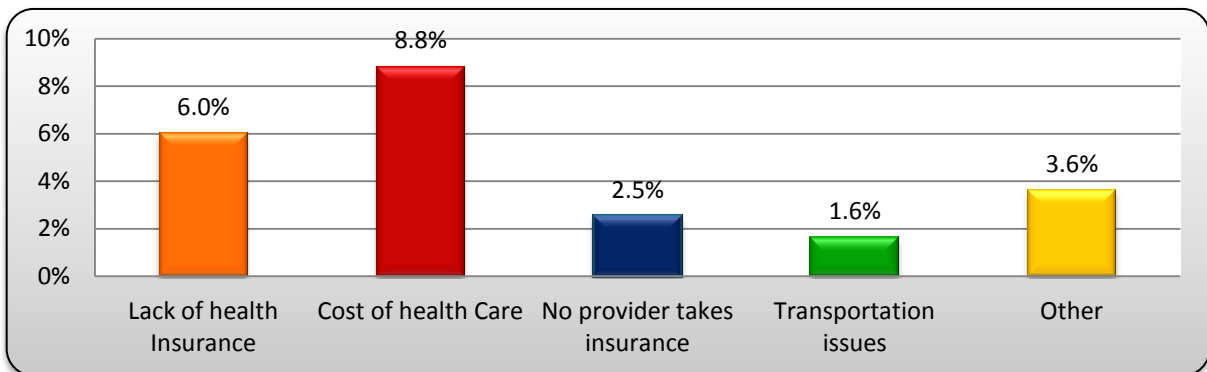


Figure 82: Reasons Preventing Child Doctor Visits

Q57: *Have you ever been told by a health professional that any of the children in your household are overweight?*

The results from the 350 valid responses provided by participants are represented below in Figure 83. Only one in 10 respondents has been told by a professional that any of the children in their household is overweight.

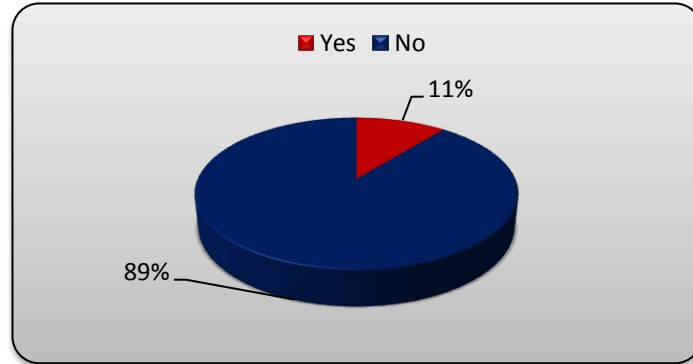


Figure 83: Diagnosed Overweight Child

Q58: *Do you believe that any of the children in your household are overweight?*

Q58 provides a counterpoint to Q57. Respondents were asked a perceptual question about whether they thought any of the children in their household were overweight, regardless of whether a health care professional informed them of this. Figure 84 presents the results from the 344 valid responses provided by participants. Interestingly, more respondents believe at least one of the children in their household is overweight than were told by a professional that this was the case.

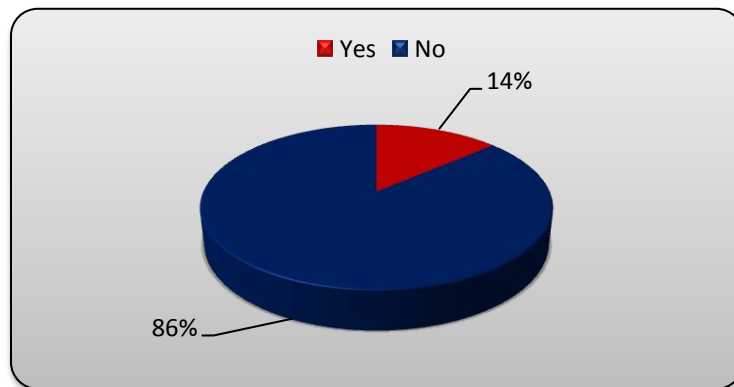


Figure 84: Believe Child is Overweight

Safety

Q53: *Are there any children in your household that are under the age of 8 years of age?*

Among the 364 respondents who stated that there was at least one child under the age of 18 in their household, 155 respondents, or 44 percent of the total, had at least one child under the age of 8. This question was used as a screener for Q54.

Q54: *Current Indiana law states that all children who are younger than 8 years of age must use a child restraint system, which is also known as a child car seat. How often do the children in your residence use a child restraint system when riding in a motor vehicle?*

Figure 85 presents data from the 153 valid responses provided by respondents as to whether or not they used a child restraint system when children rode in a motor vehicle. As can be seen, only 6 percent of respondents indicated that they did not use a child restraint system all of the time.

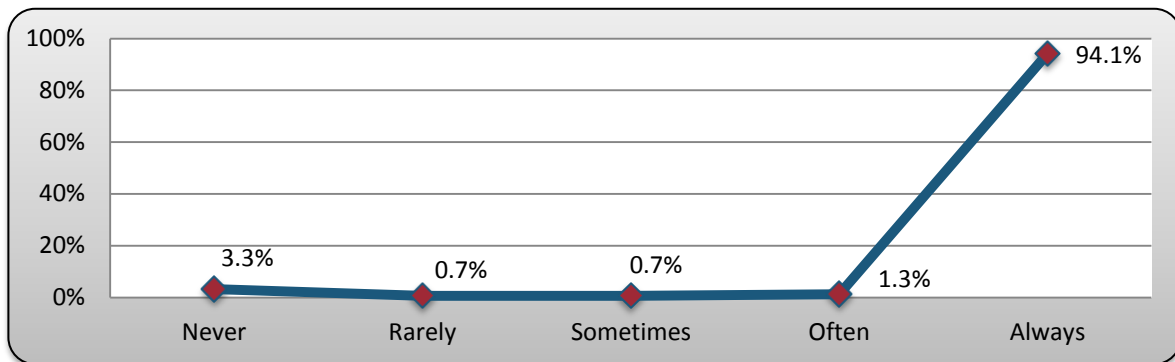


Figure 85: Child Restraint System

Q59: *Have any of your children ever been seriously bullied by another child?*

Figure 86 on the next page illustrates the results of the 332 valid responses provided by participants regarding whether or not another child had seriously bullied one or more of their children. In all, only about one in every five individuals with children reported that their child had been bullied.

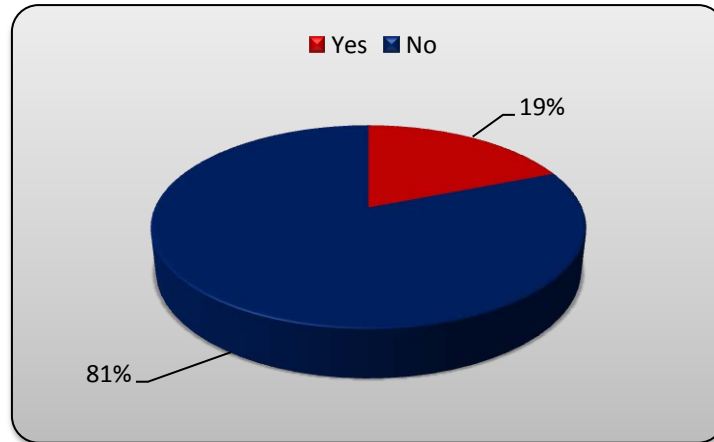


Figure 86: Bullying

Q60: *If you answered yes to Q59, which of the following ways of bullying were used?*

Q60 was posed as a follow-up to Q59 to investigate the various methods of bullying used against children in the sample who had been bullied. Figure 87 presents the results from the 63 valid responses provided by participants regarding the ways in which their child had been seriously bullied. As can be seen in the chart, the most common form of bullying is most prevalent in the data: bullying in person. However, one in five stated that their child had been bullied through some form of technology (such as a computer or texting). It should be noted here that since respondents were asked to check all that apply, totals will not equal 100 percent.

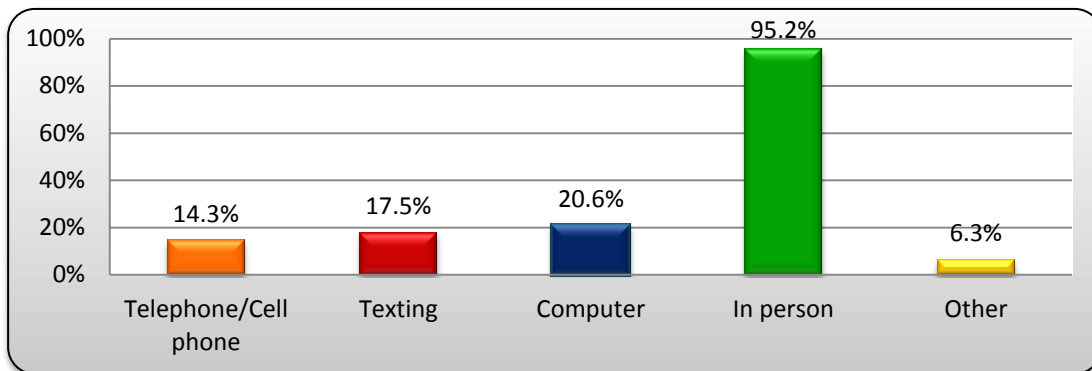


Figure 87: Ways of Bullying

HEALTH PROBLEMS

Participants' perceptions of their health, as well as the specifics of their health problems, are examined in this section of the report. This section includes a table illustrating illnesses with which participants have been diagnosed in comparison to the illnesses with which they are being treated. As noted in previous sections of this report, when possible, several of the indicators mentioned in this section will be compared to the most current Center for Disease Control (CDC) Behavioral Risk Factor Surveillance System (BRFSS) data at both the national and Indiana state level. It should again be noted as a reminder that all national and state BRFSS data are taken from 2010 iteration of the report, which is the most recent data available.

Q7: *Would you say your general health is:*

Figure 88 shows the results of the 1429 valid responses provided by participants for this question. Also imbedded in Figure 88 are BRFSS data for Indiana and the United States regarding participants' perception of health. Statistical analyses of the data found that in DeKalb County, married participants were more likely to report having better general health than non-married participants. Residents of DeKalb County were also more likely to report higher levels of general health than residents of the state of Indiana.

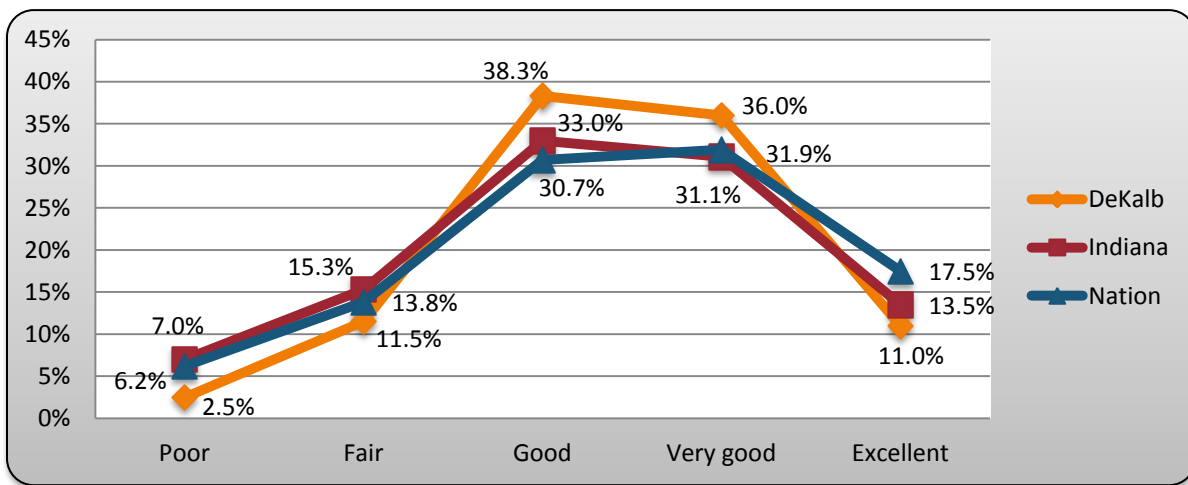


Figure 88: Perception of Health

Q61: *Have you ever been told by a doctor nurse or other health professional that you have...*

Q62: *Are you now being treated by a doctor, nurse or other health professional for...*

The table on the next page presents the percentage of respondents who have been diagnosed with a given condition (Q61), as well as whether they are now receiving treatment for that condition (Q62).

HEALTH PROBLEMS

	Diagnosed	In Treatment
High cholesterol	42.1%	32.3%
High blood pressure	46.5%	40.1%
Heart disease	10.3%	9.0%
Had a heart attack	5.8%	3.9%
Chronic lung disease	9.4%	5.6%
Cancer (other than skin)	9.9%	2.8%
Skin cancer	7.7%	1.5%
Precancerous skin lesion or mole	10.0%	2.0%
Asthma	13.4%	7.4%
Arthritis or rheumatism	36.7%	16.1%
Suffered from a stroke	3.1%	1.4%
Depression/anxiety	27.5%	17.8%
A serious mental illness	1.0%	1.0%
A sexually transmitted disease	3.8%	0.5%
HIV/AIDS	0.1%	0.0%
Hepatitis C	0.7%	0.2%
Osteoporosis	9.9%	6.9%
Alcohol dependency issue	1.2%	0.3%
Drug dependency issue	0.6%	0.3%
Diabetes	14.2%	12.8%
An eating disorder	1.6%	0.8%
Parkinson's disease	0.5%	0.6%
Alzheimer's Disease	0.3%	0.5%
Hearing loss	19.6%	6.7%

Comparative BRFSS data for several of the diagnosed conditions are presented in the table below. An asterisk beside a particular condition denotes a statistically significant difference in the data between DeKalb County and Indiana. A cross denotes the same between DeKalb County and the nation.

	DeKalb	Indiana	Nation
Heart disease*†	10.3%	7.3%	6.6%
Had a heart attack*	5.8%	7.5%	6.5%
Asthma	13.4%	14.0%	13.5%
Arthritis or rheumatism*†	36.7%	41.8%	25.9%
Suffered from a stroke*†	3.1%	4.8%	4.4%

HEALTH PROBLEMS

Q65: *Do you now have any health problem that requires you to use special equipment, such as a cane, a wheel chair, a special bed, or a special telephone?*

Figure 89 on the next page gives data on the results from the 1418 valid responses provided by participants for this question. As can be seen in the data, only about one in ten DeKalb County Residents require the use of special equipment. Non-married respondents in DeKalb County were more likely to report they had health issues requiring special equipment as compared to married respondents. Figures 90 and 91 illustrate the comparative results provided by the BRFSS for Indiana and the United States. Statistical comparisons revealed that residents in DeKalb County were less likely to use special equipment than residents of Indiana or the United States as a whole.

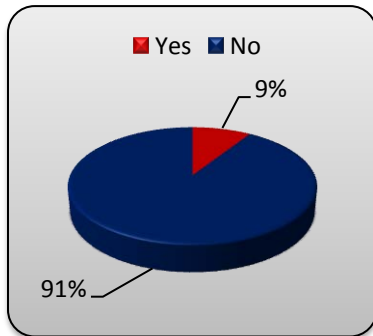


Figure 89: Health Equipment (DeKalb County)

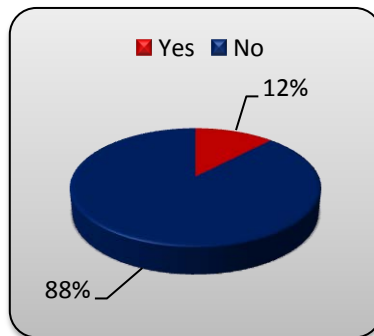


Figure 90: Health Equipment (Indiana)

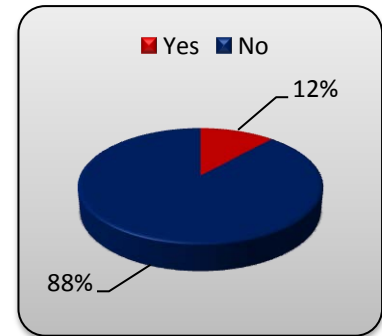


Figure 91: Health Equipment (U.S)

Q66: *Do you have any difficulty in taking the right medication at the right time of each day?*

Figure 92 illustrates the results from the 1237 valid responses provided by participants as to their ability to take the right medication at the right time of each day. The overwhelming majority indicated they have no difficulty with this task.

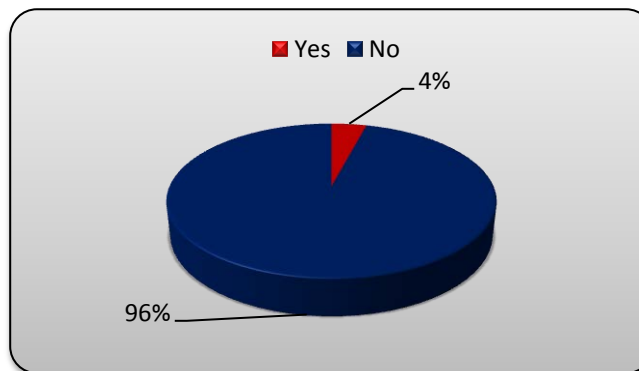


Figure 92: Correct Medication

HEALTH PROBLEMS

Q67: *Are you limited in any way in any activities because of physical, mental, or emotional problems?*

The results from the 1403 valid responses provided by participants regarding limitations due to physical, mental or emotional problems are presented in Figure 93 on the next page. In DeKalb County, respondents age 59 and older reported they were more likely to be limited from activities due to health problems, as did participants who were not married. Figures 90 and 91 illustrate the comparative results provided by BRFSS data for both Indiana and the United States. Statistical comparisons between all three charts reveal that residents of DeKalb County were less likely to report limitations than residents of Indiana or the nation.

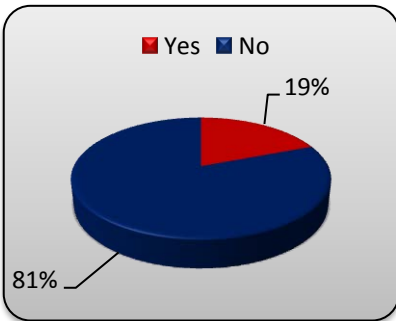


Figure 93: Health Limitations (DeKalb County)

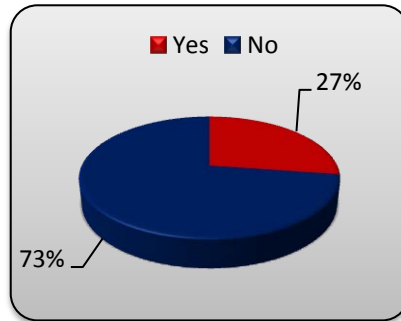


Figure 94: Health Limitations (Indiana)

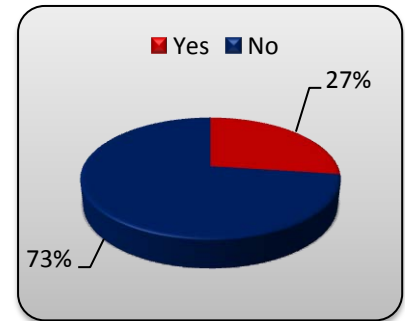


Figure 95: Health Limitations (U.S.)

CAREGIVERS

Two questions in Community Health Needs Survey fielded to DeKalb County residents dealt with the topic of caregiving.

Q68: *Do you have a caregiver, family member(s), or support system that helps you with your healthcare needs in your home?*

Figure 96 shows the results from the 212 valid responses provided by participants regarding whether or not they had a caregiver in the home. Women in DeKalb County were more likely to report that they had a caregiver in their home than men.

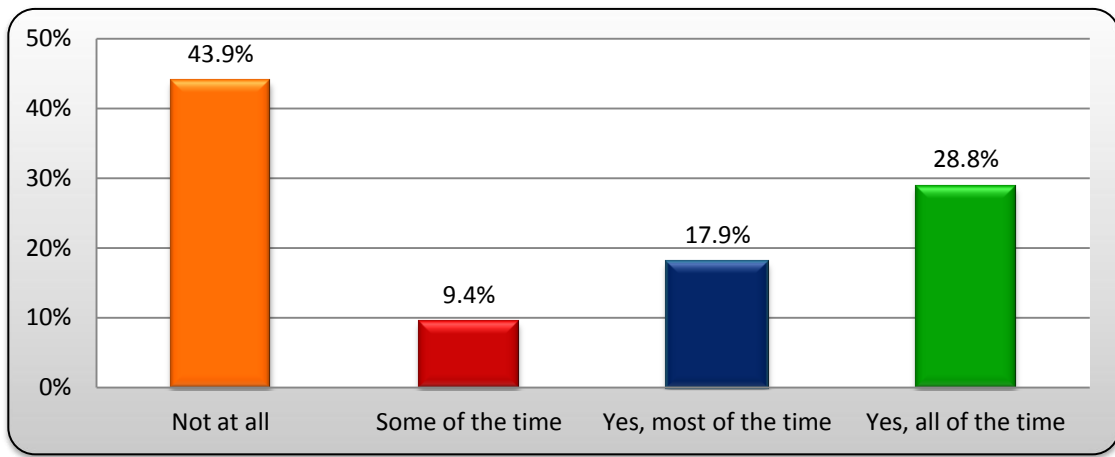


Figure 96: Caregiver in Home

Q69: *A caregiver is someone who cares for an aging, ill or disabled friend or family member. Do you consider yourself a caregiver?*

Figure 97 represents the results from the 1374 valid responses provided by participants as to whether or not they considered themselves a caregiver. Approximately 2 in every five respondents stated that this was the case.

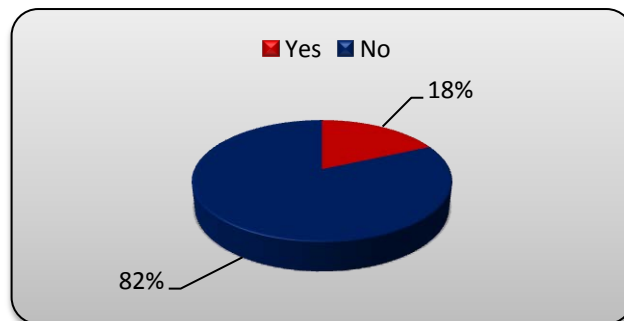


Figure 97: Self as Caregiver

This section details the mental health of the survey population. Several questions on the survey examined issues such as depression, anxiety, suicidal feelings, and attempted suicide.

Q70: During the past 30 days, for about how many days have you felt sad, blue, or depressed?

The average number of days in which participants felt sad, blue, or depressed was 3.98, with 1.00 days being the median among the 1379 valid responses. In DeKalb County, those who reported being married were less likely to evidence depressive symptoms or feelings over the past month. Higher amounts of income is also correlated with lower amounts of overall depression in DeKalb County; along these same lines, growing older is correlated with lower amounts of depression. It was also found that DeKalb County residents had a statistically higher number of average days feeling sad, blue or depressed as compared to residents in the United States (3.12 days).

Q71: During the past 30 days, for about how many days have you felt worried, tense, or anxious?

The average number of days in which participants felt worried, tense, or anxious was 5.96, with a median of 3.00 for the 1381 valid responses. As with depression, a higher amount of income is correlated with lower amounts of anxiety in DeKalb County. Furthermore, growing older is correlated with lower amounts of anxiety. Finally, DeKalb County residents had a statistically higher number of average days feeling anxious when compared to residents in the United States (5.31 days).

Q72: Has there been a time in the past 12 months when you thought of taking your own life?

The average number of time in which participants thought of taking their own life was .04 days for the 1414 valid responses. Indeed, only 53 respondents indicated that they had thought of suicide in the past 12 months. Of these responses, men reported having more suicidal thoughts than women, while those between the ages of 18 and 59 reported having more suicidal thoughts than those of the 59 and over age group. Those who were not married were also more likely to have suicidal thoughts than those who were married.

Q73: During the past 12 months did you attempt to take your own life?

The average number of reported suicide attempts was .01 days for the 1422 valid responses. Only 4 respondents indicated they had attempted suicide in the past year.

EXERCISE AND DIET

This section examines the diet and exercise habits of residents in DeKalb County who participated in the survey. Below is information regarding the weight loss desires of participants, their ability to eat a healthy diet, and the frequency and amount of exercise performed.

Diet

Q76: Are you now trying to...?

Figure 98 contains the results from the 1405 valid responses provided by participants regarding whether or not they were trying to gain, lose or maintain weight. Fully one third of those polled reported that they are currently trying to lose weight. Among respondents, women reported trying to lose weight than men. Survey respondents between the ages of 18 and 59 also reported trying to lose weight than those 59 and older. Married participants were more likely to be trying to lose weight; interestingly, those who were unmarried reported they were more likely to try to gain weight.

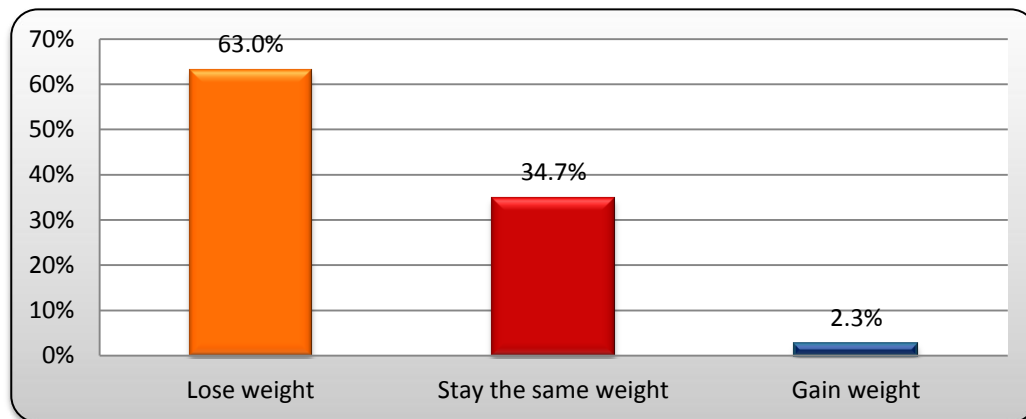


Figure 98: Weight Maintenance

Q77: Overall, would you say that you eat a balanced diet?

Participants provided 1352 valid responses regarding whether or not they ate a balanced diet, the results of which are presented in Figure 99 on the next page. Two out of every three survey participants in DeKalb County said they ate a balanced diet. Statistical analyses of the data revealed that respondents 59 and older reported having a balanced diet more often than younger participants in the survey. Along these same lines, married participants were more likely to report eating a balanced diet than non-married participants.

EXERCISE AND DIET

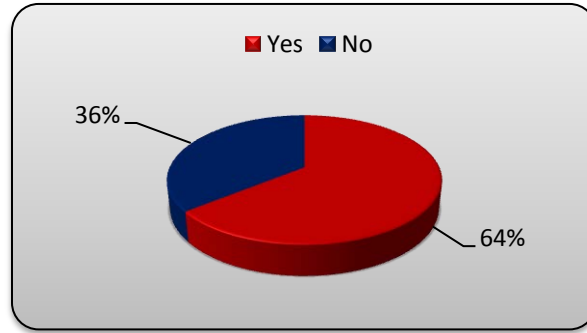


Figure 99: Balanced Diet

Q78: *Do you have any medical condition that prevents you from consuming fruits and/or vegetables?*

Figure 100 contains the results from the 1420 valid responses provided by participants regarding health conditions preventing them from consuming fruits and/or vegetables. This question was originally intended as a screener for Q79. However, it is interesting that 3 percent of respondents, or 43 individuals, could not consume fruits and/or vegetables because of a health condition.

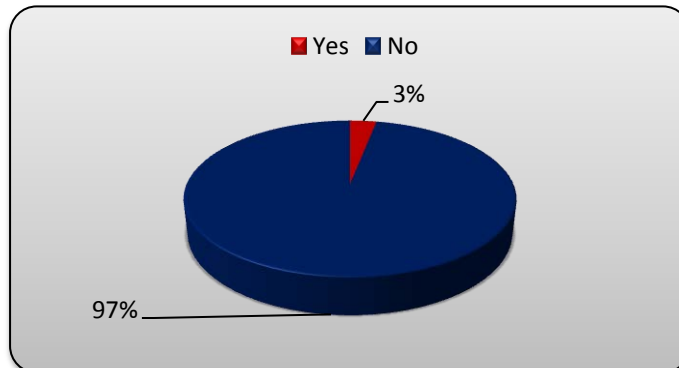


Figure 100: Interfering Medical Condition

Q79: *Typically, one serving of a fruit or a vegetable is about ½ cup in size. Generally, how many servings of fruits and vegetables do you eat each day?*

The number of servings of fruits and vegetables provided by participants are represented in Figure 101 on the next page. For this question, participants were instructed to write the exact number of servings of each on the survey. In all, there were 1286 valid responses for servings of fruits, and 1299 valid responses for servings of vegetables. Analysis of the data found that women reported eating more fruit and more vegetables than men. Whites were also more likely to report eating fruits and vegetables than members of other ethnic or

EXERCISE AND DIET

racial groups. Finally, statistical analysis of the dataset found that married participants in the survey were more likely to eat fruits and vegetables than non-married participants.

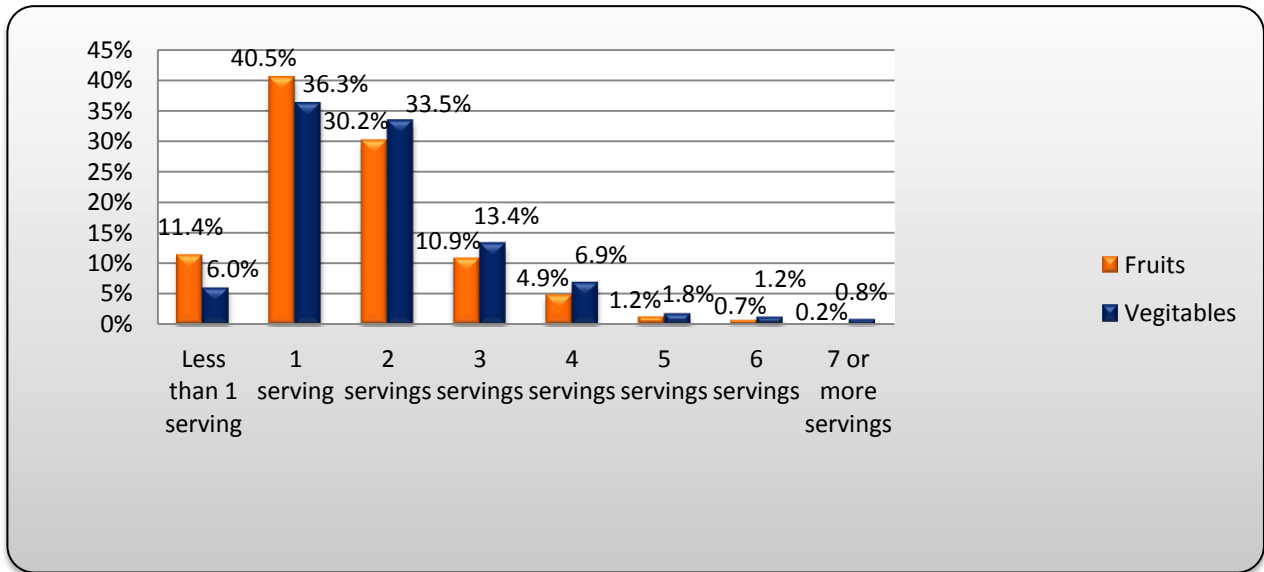


Figure 101: Number of Fruit and Vegetable Servings

Exercise

Q80: *During the past week, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?*

Figure 102 has the results from the 1406 valid response provided by participants regarding their participation in physical activities or exercises. In DeKalb County, married participants were more likely to report participating in exercise activities as compared to non-married participants.

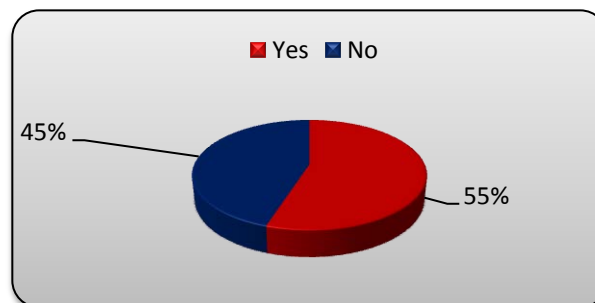


Figure 102: Participation in Physical Exercise

EXERCISE AND DIET

Q81: *If you answered yes to Q80, generally how many times per week do you take part in these physical activities?*

Figure 99 represents the results from the 755 valid responses provided by participants as to the frequency of physical exercise in which they participated during a given week. Average and median scores for engaging in physical activities were both three times per week.

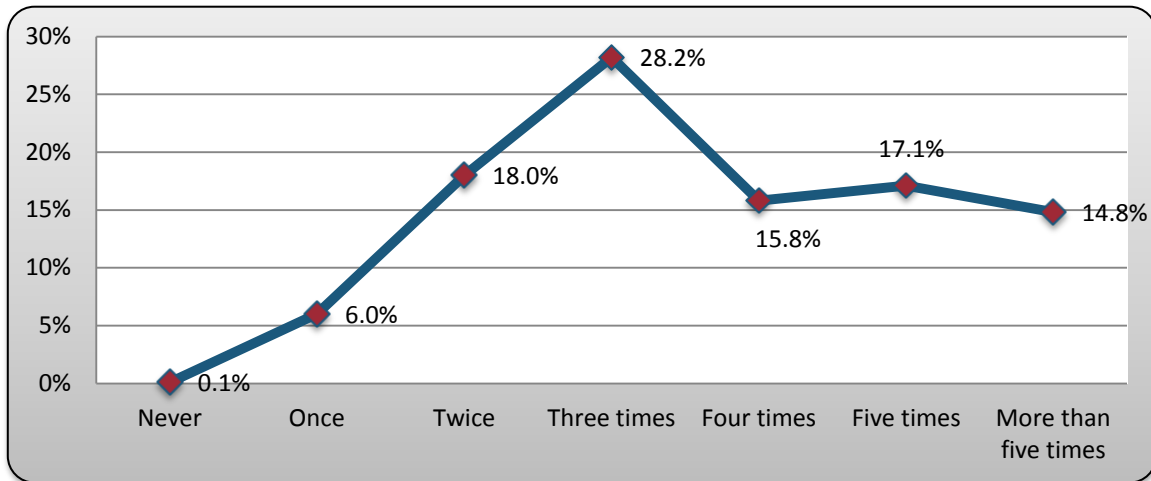


Figure 103: Physical Exercise Frequency

Q82: *How many minutes do you usually spend each time you take part in these physical activities?*

Figure 104 presents the results from the 773 valid responses provided by respondents as to the amount of exercise in which they participated. This question four choices for responses to the question. Average and median exercise time was both 30 to 60 minutes. Statistical analysis of the data found that men reported spending more time exercising than women.

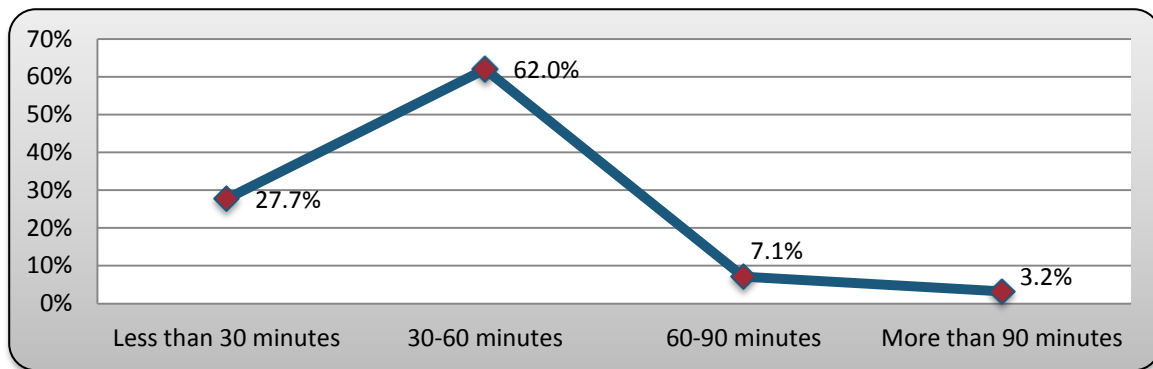


Figure 104: Amount of Exercise in Minutes

SMOKING

This section of the report provides information regarding the smoking and tobacco use habits of participants. Specific focus is given to the amount of participants who continue to smoke, the types of tobacco consumed, and both attempts at, as well as successes at, smoking cessation.

Q83: *Not including cigarettes, do you regularly use (at least once a week) any of the following tobacco products?*

Figure 105 has the results from the 1440 valid responses provided by participants regarding whether or not they consumed any type of tobacco products other than cigarettes. As can be seen, very few respondents use the three types of tobacco products listed below. In DeKalb County, men reported using chewing tobacco, cigars, and a pipe more often than women. Non-whites were also found to be more likely to smoke a pipe than whites.

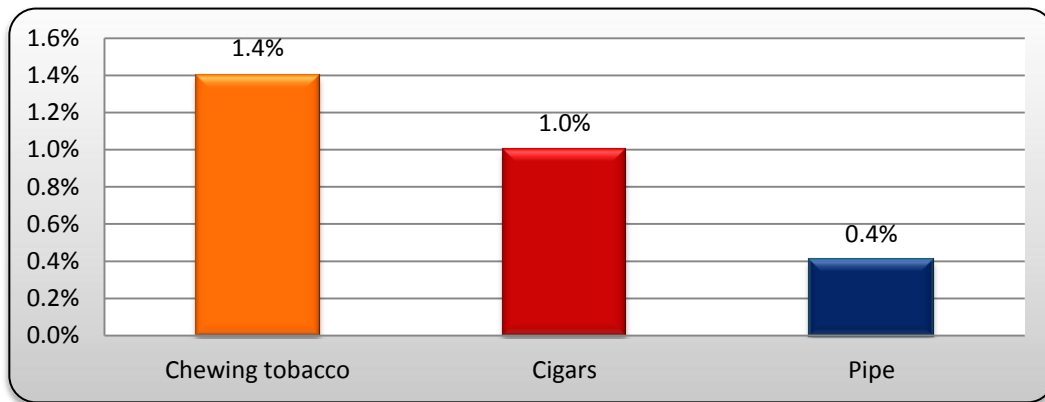


Figure 105: Non-Cigarette Tobacco Consumption

Q84: *Have you ever smoked cigarettes?*

The results from the 1403 valid responses provided by participants as to whether or not they had ever smoked cigarettes are presented in Figure 106 on the next page of this report. Figures 107 and 108 on the next page provide comparative results from the BRFSS for both Indiana and the United States, respectively. Comparison of the data found that residents of DeKalb County were more likely to have smoked cigarettes than residents of the nation as a whole. Among the DeKalb County results, men reported having smoked cigarettes more often than women.

SMOKING

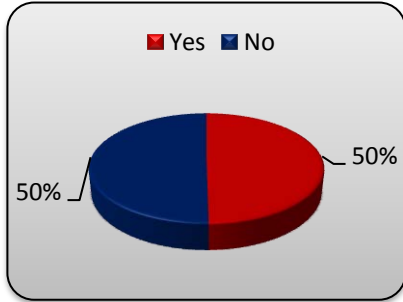


Figure 106: Cigarettes (DeKalb County)

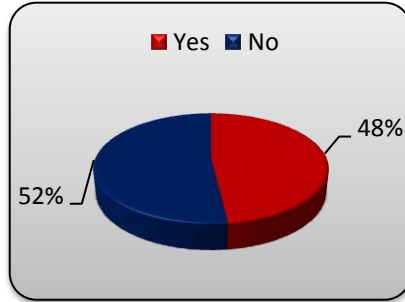


Figure 107: Cigarettes (Indiana)

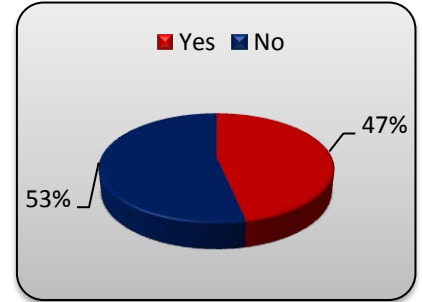


Figure 108: Cigarettes (U.S.)

Q85: Do you now smoke cigarettes every day, some days, or not at all?

Figure 109 presents the results from the 695 valid responses provided by survey participants regarding the frequency with which they smoke cigarettes. BRFSS results of the same nature for both Indiana and the United States are also presented for comparison. Comparison of local, state and national BRFSS data shows that DeKalb County residents have a higher rate of smoking cessation than residents of Indiana or the United States. Among DeKalb County results, men and non-married respondents were more likely to report that they had quit smoking as compared to married and female respondents. Participants between the ages of 18 and 59 and non-whites in the sample were more likely to smoke.

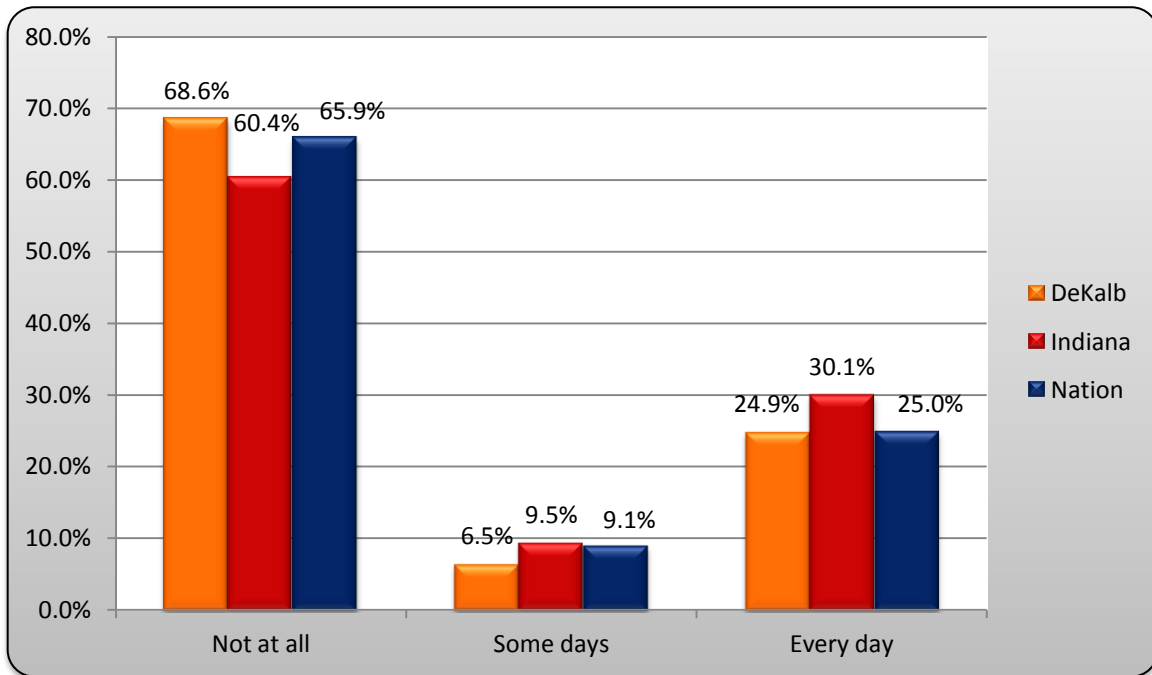


Figure 109: Cigarette Smoking Frequency

SMOKING

Q86: *During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit?*

Figure 110 presents the 153 valid DeKalb County responses regarding the length of time in which respondents had ceased smoking during the past year. Figures 111 and 112 present the comparative BRFSS results for Indiana and the United States. Statistical analysis of the data showed that among current smokers, residents in the state of Indiana and the nation were more likely to have tried to quit than residents of DeKalb County.

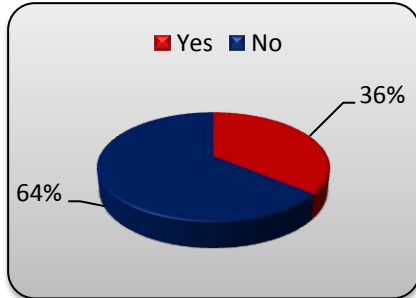


Figure 110: Cessation of Smoking (DeKalb County)

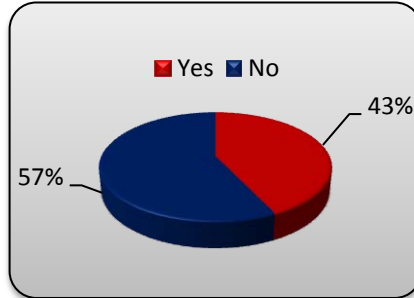


Figure 111: Cessation of Smoking (Indiana)

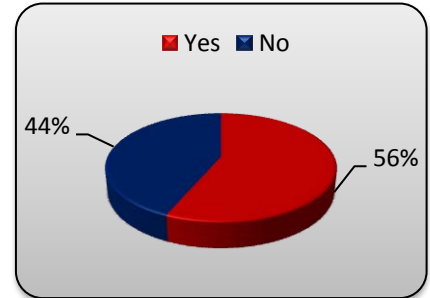


Figure 112: Cessation of Smoking (U.S.)

Q87: *Did you quit smoking...?*

Figure 113 presents the results from the 394 valid responses given by participants regarding the length of time in which they had completely ceased smoking. Comparative results from the BRFSS for Indiana and the United States are also presented. Statistical analysis of the data found that residents of DeKalb County were more likely to have quit smoking more than five years ago as compared to residents of Indiana. No statistically significant differences were found between DeKalb County and the nation.

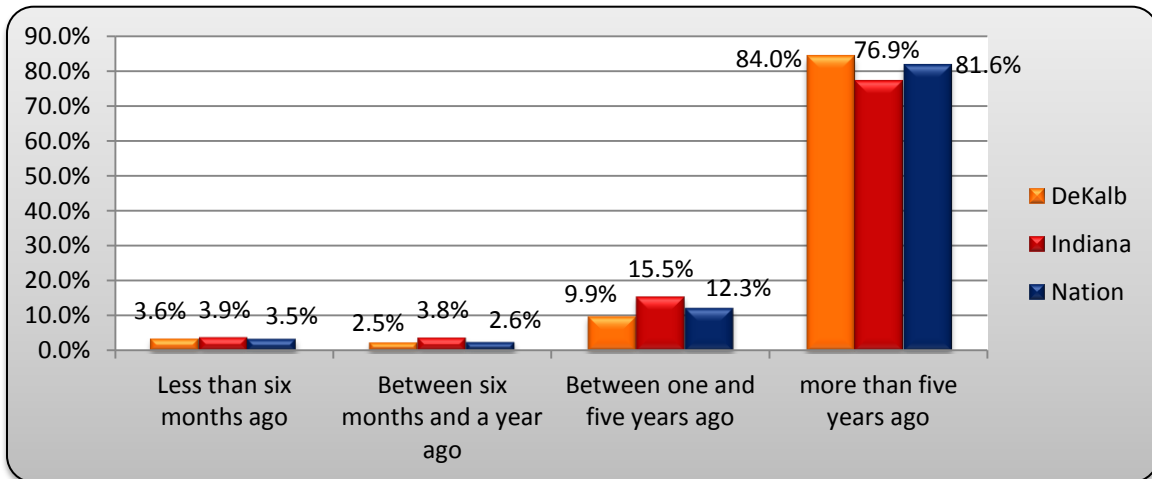


Figure 113: Complete Cessation of Smoking

Four questions on the survey were designed to investigate respondent behaviors concerning alcohol. Results of these questions are presented below.

Q88: One drink of alcohol is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days that you drank, about how many drinks did you drink on the average?

The average number of drinks reported from the 1366 valid responses was 1.86, while the median number of drinks was 1.00. In DeKalb County, married participants drank more on average than non-married participants; in addition, higher amounts of income were correlated with higher amounts of drinking. Comparison of the DeKalb County data to Indiana state and national BRFSS data revealed that DeKalb County residents had a higher average drinking rate as compared to the state and the nation.

Q89: Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more alcoholic drinks on one occasion?

Of the 612 valid responses for this question, the mean number of times in which participants had had 5 or more alcoholic beverages was 1.49 times. In general, men in DeKalb County were more likely to report binge drinking than women. Binge drinking episodes were three times higher than the state average and the national average

Q90: During the past 30 days, have you driven when you've had perhaps too much to drink?

Of the 1389 valid responses, the mean number of times in which participants had driven drunk in the past thirty days was .02. Only 51 of the 1389 respondents who answered this question indicated that they had driven while intoxicated. In DeKalb County, men and respondents under age 59 were more likely to report that they had driven after too much to drink. Comparison of local data to BRFSS data shows that residents of DeKalb County are twice as likely to drive intoxicated than residents of the state and the nation.

Q91: During the past 30 days, have you ridden with someone who had perhaps too much to drink?

Of the 1408 valid responses, only 1.9 percent of respondents, or 27 people, reported they had ridden with someone who had had too much to drink. DeKalb County participants between the ages of 18 and 59 reported they had ridden with someone who had drunk too much more often than other age groups.

FINANCIAL ISSUES

Data results contained in this section of the report deal with a series of questions designed to gauge economic hardship among DeKalb County residents. These questions examined whether or not participants had gone without heat in the last 12 months, whether or not they worried about paying rent/mortgage, and how often they worried about being able to buy food.

Q99: *Has there ever been a time in the past 12 months that you had to go without heat in your residence?*

Figure 114 has the results from the 1403 valid responses regarding whether or not they were forced to go without heat in their residence. Only 5 percent of the overall sample stated that they had to forgo heat at some point in the last year.

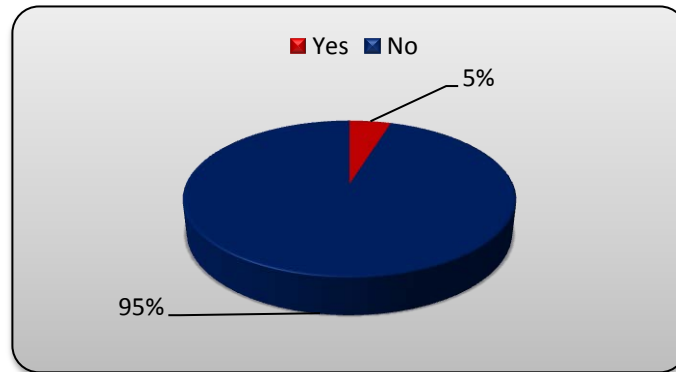


Figure 114: Time without Heat

Q100: *About how often in the past 12 months were you worried or stressed about having enough money to pay your rent/mortgage? Would you say you were worried or stressed...*

Results from the 1188 valid responses provided by participants regarding the frequency with which they worried about having enough money to pay their rent/mortgage are presented in Figure 115 on the next page. Comparative results from the BRFSS for the United States are also presented, as Indiana state data were not available for this question in 2010. In DeKalb County, women reported worrying more about paying rent/mortgage than men. Non-married participants were more likely to worry more about paying rent/mortgage than married participants in Dekalb County. Residents of DeKalb County were also more likely to worry about paying their rent/mortgage when compared to individuals in the United States.

FINANCIAL ISSUES

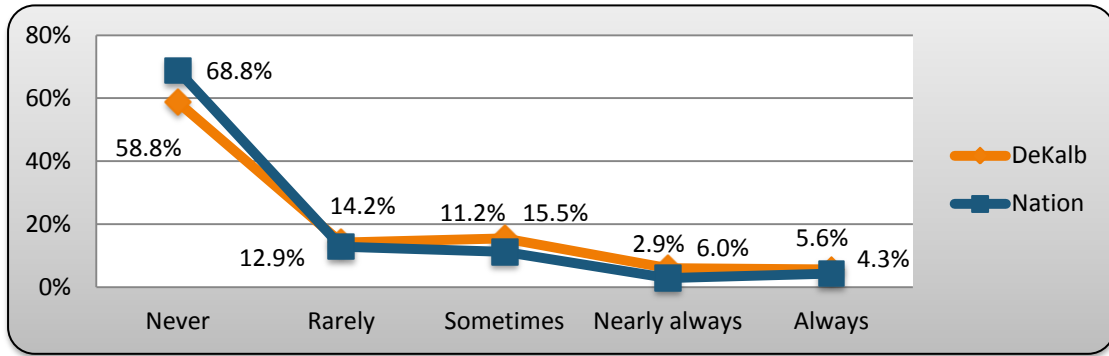


Figure 115: Frequency of Worry for Rent/Mortgage

Q101: *About how often in the past 12 months would you say you were worried or stressed about having enough money to buy food? Would you say you were worried or stressed...*

Figure 116 presents the results from the 1329 valid responses provided by participants regarding the frequency of worry and/or stress about having enough money to buy food. This figure also presents the comparative results from the BRSS for the United States, as Indiana state data were not available for this question in 2010. In DeKalb County, women reported being more likely to worry about buying food than men. Non-married participants in DeKalb County were more likely to worry than married participants. Residents of DeKalb County were also more likely to worry about having enough money to purchase food when compared to individuals in the United States.

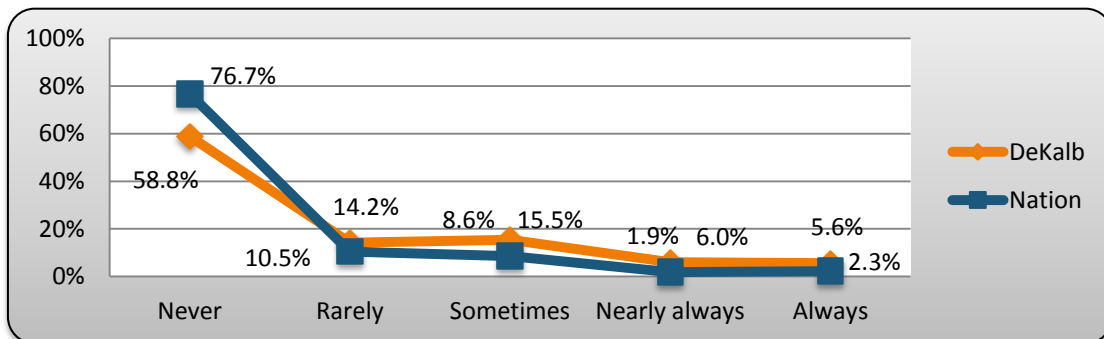


Figure 116: Frequency of Worry about Food

Q106: *In the past 12 months, have you visited a local food bank to get food for yourself or your family?*

Figure 117 on the next page presents the results from the 1418 valid responses provided by participants regarding whether or not they had visited a local food bank within the last year. Nearly one in ten respondents reported they visited a food bank in the last year. Among DeKalb County residents, non-married participants reported visiting the local food bank more than married participants.

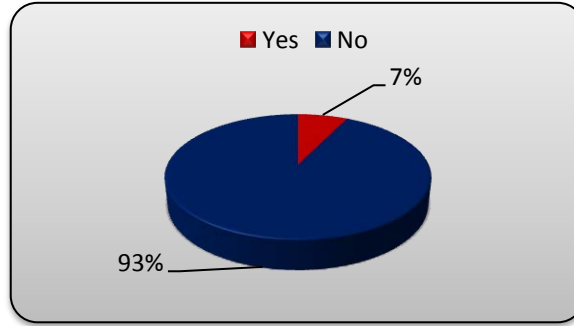


Figure 117: Visit to Local Food Bank

Q107: About how often over the last 12 months have you obtained food from a food bank or food pantry in DeKalb County?

The results from the 95 valid responses provided by participants regarding the frequency with which they obtained food from a food bank or food pantry in DeKalb County are presented in Figure 118 below.

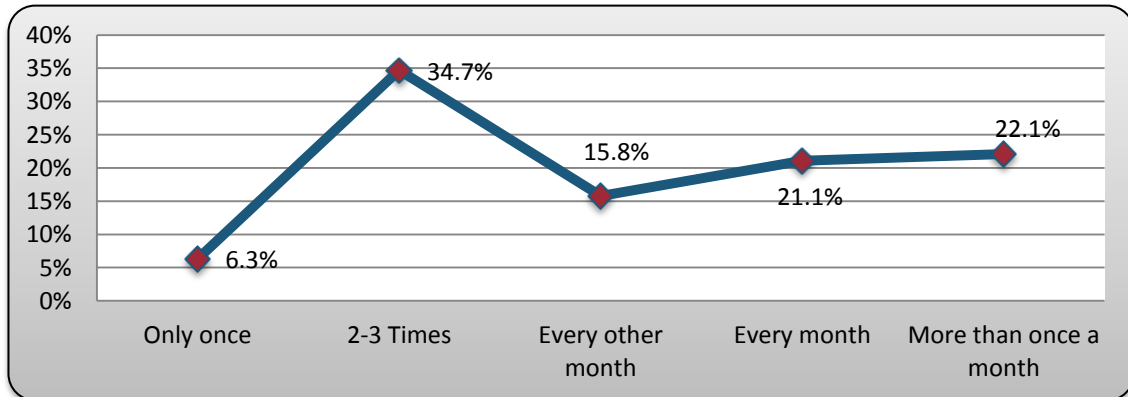


Figure 118: Frequency of Food Bank Visits

PRESCRIPTION USE AND DISPOSAL

The final section of DeKalb County Community Health Needs Survey report presents data on four questions that were tailored to examine prescription drug use, abuse and disposal.

Q102: In the past 6 months, have you been prescribed...

Figures 119 through 127 show the results from the 1440 valid responses provided by participants as to the pharmaceuticals prescribed to them. In DeKalb County, residents between the ages of 18 and 58 reported being prescribed Vicodin and Adderall more often than other age groups. Married participants also reported a higher use of Vicodin than other participants. Indeed, results suggest that Vicodin is at least five times more likely to be prescribed to residents of DeKalb County than any of the other medications listed in the survey.

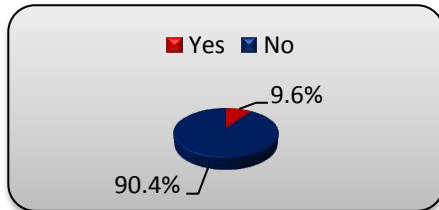


Figure 119: Vicodin

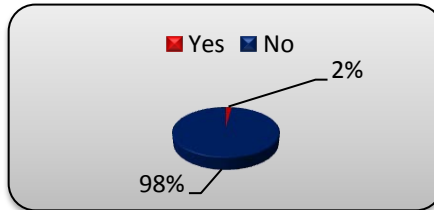


Figure 120: Oxycontin

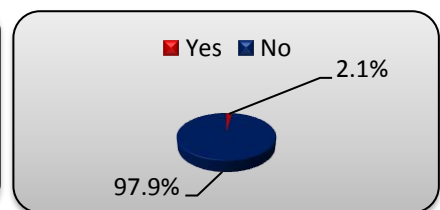


Figure 121: Percocet

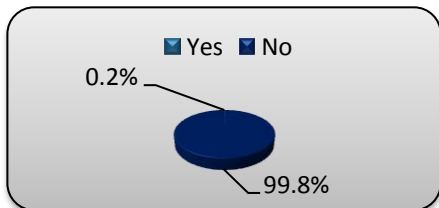


Figure 122: Dilaudid

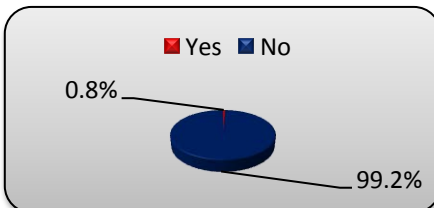


Figure 123: Ativan

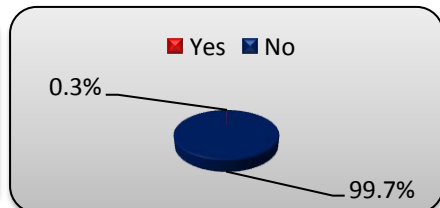


Figure 124: Adderall



Figure 125: Concerta

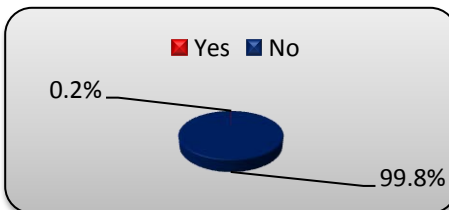


Figure 126: Ritalin

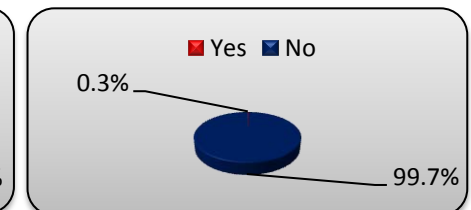


Figure 127: Vyvase

Q103: In the past 6 months, have you ever taken Vicodin, Ativan, Percocet, Oxycontin, or Dilaudid without a current prescription?

Figure 128 on the next page presents the results from the 1410 valid responses provided by participants regarding whether or not they had taken a narcotic drug without a current prescription. Only 3 percent of respondents stated that this was the case.

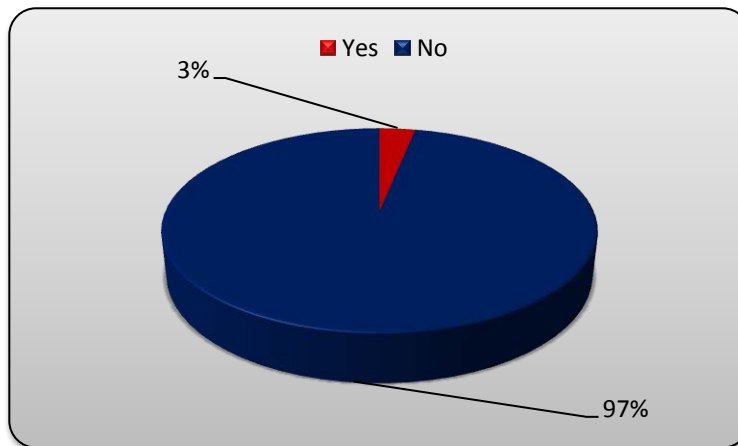


Figure 128: Narcotic Drug Use without Prescription

Q104: In the past 6 months, have you ever taken Adderall, Concerta, Ritalin, or Vyvanse without a current prescription?

Figure 129 presents the results from the 1408 valid responses provided by participants regarding their non-narcotic use of drugs without a current prescription. As before with narcotic drugs, only 3 percent of the sample stated that this was the case.

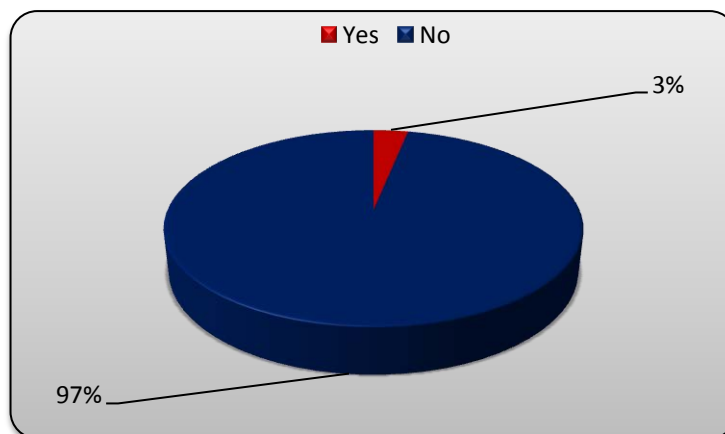


Figure 129: Non-narcotic Drug Use without Prescription

Q105: What do you most often do with your leftover prescription pain medication?

The results from the 1388 valid responses provided by participants regarding the disposal of their leftover prescription pain medication are presented in Figure 130 on the next page. As the figure reveals, the number one disposal method is to ensure that there are no leftover medications. Second on the list is to save them.

PRESCRIPTION USE AND DISPOSAL

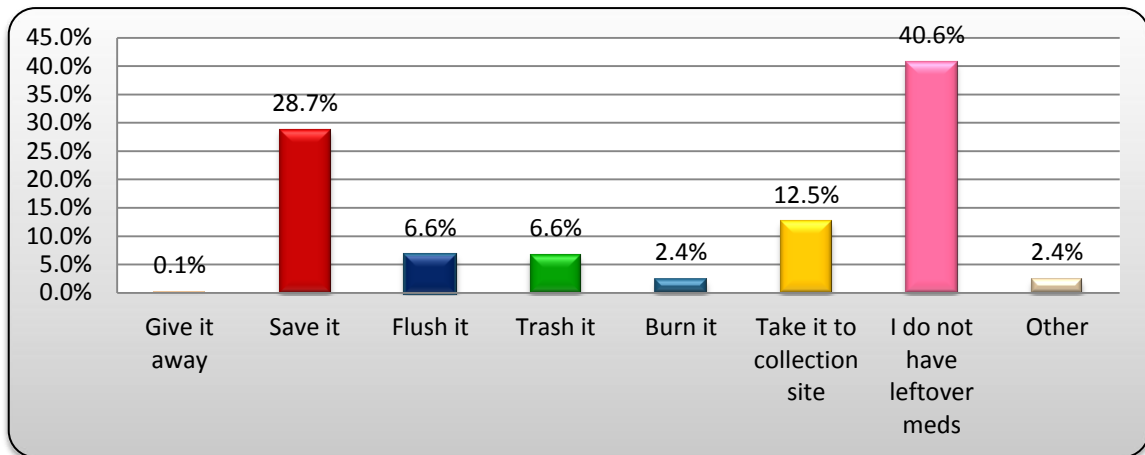


Figure 130: Disposal of Prescription Pain Medication

SUMMARY AND RECOMMENDATIONS

A great deal of information was collected as part of the DeKalb County Community Health Assessment. From the data, several issues have been identified as areas which should be considered carefully by DeKalb Health and the DeKalb County Health Department. These issues, and any subsequent recommendations, are summarized below.

With respect to the area of women's health, statistical comparisons between the DeKalb County results and data contained in the 2010 iteration of the BRFSS for Indiana and the United States establish as a fact that women in DeKalb County tend to wait longer on average to have a clinical breast exam. This data point should be coupled with the fact that over half of DeKalb County women do not regularly perform a breast self-examination. Given these facts, it is recommended that programs and initiatives should be undertaken to both educate and encourage the women of DeKalb County to place a higher priority on their breast health. All educational and encouragement efforts should highlight the benefits related to clinical breast examinations and breast self-examinations as a means of early detection of breast cancer. As part of the educational and encouragement efforts, women in DeKalb County should be reminded that the Affordable Care Act of 2010 now mandates that women be allowed to obtain a clinical breast exam without having to pay a health insurance co-pay. In other words, women who have health insurance now have the ability to obtain a free clinical breast exam.

Cardiovascular disease, heart health and obesity are all related issues that DeKalb Health and the DeKalb County Health Department may wish to consider carefully. Fully 10.3 percent of DeKalb County respondents reported that they had been diagnosed with heart disease (a figure that was statistically higher than both the state and national datasets provided by the BRFSS), 46.5 percent of respondents reported a diagnosis of high blood pressure, and 42.3 percent of DeKalb County respondents reported that they have high cholesterol. In addition, 70.4 percent of respondents having a BMI classification of either overweight or obese and 11 percent of children being diagnosed as overweight. The key factors in the high incidence of poor cardiovascular health, heart disease and obesity in DeKalb County are most likely improper diet and a lack of regular exercise among survey respondents. Support for this conclusion comes from the fact that 63.0 percent of respondents reported trying to lose weight, and only 55 percent of respondents reported participating in regular exercise. Based on the evidence, the tie between lifestyle habits, obesity and heart disease is most probable. Therefore it is recommended that DeKalb Health and the DeKalb County Health Department undertake steps to get people to lose weight and exercise more. Community outreach initiatives should focus on promoting an active lifestyle and a balanced diet, one high in fruits and vegetables, as a way to help lower the obesity rate and prevent heart disease.

A 2007 study by Ann Hemmingway concerning a possible link between women's risk for heart disease and low-income economic status found that, in general, women who were impoverished had a greater chance of developing heart disease than those with a higher income. This suggests

SUMMARY AND RECOMMENDATIONS

that the added stress of financial survival coupled with the inability to access medical care due to financial restriction plays a role in the development of the disease for women. For instance, women restricted by finances would be less likely to be able to afford fruits and vegetables due to cost. Therefore, services and educational resources should aim to inform women as to simple and cost-effective ways in which they can include more healthy food in their diet and reduce stress as preventive measures to heart disease.

A high incidence of both depression and anxiety was found in DeKalb County, relative to the population of the United States. DeKalb County residents reported a statistically higher number of average days feeling sad, blue, or depressed as compared to other residents in the United States. DeKalb County residents also reported a statistically higher number of average days feeling anxious as compared to other residents of the United States. Addressing the high incidence of depression and anxiety within the DeKalb County community should be considered a priority, as both depression and anxiety have been linked to diminished health status, increased health care utilization and noncompliance with medical treatment (DiMatteo, Lepper & Croghan 2000). It is recommended that efforts to overcome the stigma associated with mental health issues also be given priority in DeKalb County, as the current study found evidence to suggest that DeKalb County residents may be resistant to seeking help for mental health issues. Q61 found that 27.5 percent of residents had been diagnosed with depression and/or anxiety in the past, but only 17.8 percent were currently in treatment for depression and/or anxiety. In addition, Q67 of the survey asked respondents if they were limited in any way in any activities because of physical, mental or emotional problems. Only 19 percent of respondents stated this was the case, which was a rate significantly lower than that of the state of Indiana and the nation. Although the issue of being limited due to mental or emotional problems was conflated with physical problems in the survey, the overall low percentage in Q67 is suggestive that DeKalb County residents are reluctant to admit when they may need assistance with mental and/or emotional problems. Mental and emotional health problems still retain a heavy stigma, a point that Corrigan (2004) found in his research on the topic. When taken together, the evidence suggests that one of the steps which DeKalb Health and the DeKalb County Health Department undertake should involve ways of reducing the negative stigma surrounding mental health issues. Concomitant to this, DeKalb Health and the DeKalb County Health Department should undertake efforts to address the rates of depression and anxiety in the population of DeKalb County residents.

Incidence of cancer appears to be relatively high in DeKalb County. Information contained in the Appendix B of this report shows that deaths from cancer are higher in DeKalb County than in any of the seven counties surrounding DeKalb County. In the current survey, 9.9 percent of respondents reported a diagnosis of any form of cancer (other than skin cancer) at some point in the past. In addition, 10 percent of female respondents reported a family history of ovarian cancer, and 23 percent of women in the survey reported a family history of breast cancer. As early

SUMMARY AND RECOMMENDATIONS

detection is still one of the best mechanisms to reducing the mortality rate associated with cancer (Etzioni et al., 2003), it is recommended that DeKalb Health and the DeKalb County Health Department undertake efforts to increase cancer screenings among the residents of DeKalb County.

The current survey found that an overwhelming majority of those polled reported having a working smoke detector in their residence. Relative to this, the number of residents who reported having a carbon monoxide detector and a fire extinguisher was low. Only 47 percent of participants reported having a carbon monoxide detector. DeKalb Health and the DeKalb County Health Department should work with community officials to increase the number of homes with fire extinguishers and carbon monoxide detectors to rates approximate to the number of homes with smoke detectors.

DeKalb Health was found to be the hospital of choice for only 55 percent of residents in DeKalb County. Steps should be undertaken by DeKalb Health to examine ways to encourage residents to use local resources when it comes to hospitalization and hospital care.

A final issue which emerged from the survey data concerns a spike in Vicodin prescriptions. Survey respondents were asked to report whether they had been prescribed one of nine different medications. Of the nine different types of prescription drugs listed in the survey, 9.6 percent of those polled reported being prescribed Vicodin at some point in the past six months. This rate is five times higher than that of the two second highest prescription medications, Percocet (2.1 percent) and Oxycotin (2.0 percent). This rate for Vicodin prescriptions is troubling but not unexpected: an ABC News report by Avila and Murray (2011) notes how the use of Vicodin has grown in America from 112 million prescribed doses in 2006 to 131 million prescribed doses in 2011. It is recommended that an investigation into the reasons for the high incidence of Vicodin prescription in DeKalb County should be conducted. Any educational resources developed by DeKalb Health and the DeKalb County Health Department should aim to create an understanding of the long-term consequences of Vicodin use and/or abuse. Furthermore, it is recommended that steps be taken to educate residents of DeKalb County about the addictive potential of overusing all forms of prescription medications.

APPENDIX A: OPEN-ENDED RESPONSES

Q6: In which public school district do you live?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
101	Carrel	566	none
108	Michigan	899	New Haven High
337	Ft Wayne Comm Sch	994	FWCS
385	MSD Steuben Co.	1069	not sure
400	Prairie Heights	1070	unknown
511	prairie heights	1382	Steuben Co (MSD of Steuben)

Q9: In what community is your primary doctor located?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
32	New Haven	728	Retired
162	clinic	745	Columbia City
177	Crown Point IN	755	Grabill
278	Hicksville	787	Hamilton
283	Hicksville, oh	843	Hamilton
291	LaGrange	916	Huntertown
331	Huntertown	919	Huntertown
337	Huntertown	930	Bryan, OH
472	Iowa	946	Shipshewana
476	Huntertown, IN	1022	Hamilton
482	Hamilton	1047	Noble
519	Coldwater, MI	1177	Richmond, IND
618	Grabill	1206	Hillsdale, Michigan
645	Grabill	1322	Huntertown
674	Hicksville, Ohio	1354	South Whitley Huntertown
721	Grabill		

Q10: For overall care, which hospital do you prefer for your health care needs?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
72	Depends on circumstances	814	no preference
239	Don't have	930	MCHA
278	Hicksville	952	no particular
283	Hicksville comm.	998	st martin
629	undecided	1064	None
662	Do not care for DeKalb Mem.	1136	no preference
	Or Lutheran never been	1193	IU Indianapolis
	anywhere else	1206	Hillsdale
740	No Preference	1347	Whatever my doctor would suggest

Q13: Please explain briefly in the box below why you feel that you do not have an adequate amount of health care coverage.

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
11	No answer given	110	Worked years for company had insurance taken away when told to another company do I have to buy my own. Only go to Dr. 2x a year. Insurance very costly.
13	lost vision and dental coverage with my permanent lay-off		
14	I haven't got a way to help with problems that come up from time to time. We don't make enough money	112	Because I don't have ANY health care coverage
18	not enough prescription coverage	114	Have none can't afford it
21	Dana Corp. cancelled my husbands life insurance, vision insurance, dental insurance, due to claim bankruptcy.	117	No Insurance but have worked all my life until disabled. Now I don't qualify for any help so I am extremely grateful to St. Martins for all they do.
22	No answer given	129	Cannot afford adequate insurance.
24	No answer given		
32	Can't afford it	130	Can't afford it!
34	do not have any	131	Currently have none, to expensive, not employer provided.
35	the coverage keeps going down and the premiums go up		
39	because Medicare is primary over my ins.	140	I don't have any at this time
42	I do not have income or insurance; but I go to St. Martin's clinic in Garrett. (maybe I should have marked yes.)	145	no health care coverage
48	because of diabetes, I am unable to obtain medical insurance. I am non retired and waiting for medicine next year	155	if you have to pay out of pocket for or unexpected illness you can end up spending a small fortune
58	self employed can't afford insurance	160	I do not have health coverage
74	can't afford more	162	employer does not provide any coverage
82	most not since it cost way more than can afford at times	167	I don't have any coverage because I cant afford it and I don't qualify for any assistance
87	have a Medicare advantage plan	181	no health insurance
91	the coverage only covers 70% until a high out of pocket is met. It has now drug card but a mail in program with a \$100 co-pay. Wages aren't high so cost is over priced.	191	No answer given
92	cannot afford it	195	money
		198	No answer given
		199	cant afford coverage, I go to the clinic in Garrett
		203	basic hosp./surgical coverage only insurance I have
		209	I worked for DeKalb Central school as a TIA. Our insurance was taken away. I can not find a insurance company who will cover me.



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
223	because my employer does not provide health insurance and I can afford minimal coverage	330	I only have United Health Care and prescription. Nothing that pays for Hosp. past the 80% United pays
237	the amount of deductible is high	333	The company I work for doesn't offer benefits. Individual Healthcare is too expensive to get so I go without
239	have high deductible health insurance only	339	With the high cost of medicine and hospitalization and with only Medicare, I cannot afford to get sick
242	forced to take my employers insurance- not as good as husband's	349	Job don't afford any can't afford on own plan
243	AARP doesn't cover much for the price that we are paying	352	the deductible is so high. So is the cost of the insurance
253	have none go to St Martin's clinic	355	My deductible is too high and the out of pocket expenses are too high
258	I don't have any	358	I have no health care coverage
266	the cost is extremely high, 200 a month. Deduct is 2500 per person. Thank you county commissioners.	364	H.S.A. acct, no dental and no vision very high deductible for family of 6
272	unemployed so no coverage	368	Health savings account is good but deductible is high 5000 snf premiums continue to rise
277	we have a high deductible plan that requires the first 4000 out of pocket.	369	things still cost a lot (to much out of pocket cost)
279	no vision, no dental	372	we currently do not have maternity coverage
283	with three children and expensive prescription drugs, health care courage is almost a necessity	373	I am self-employed so I only have a major medical plan
289	no insurance	376	After certain age health care coverage is removed
298	would like to afford Aflac	389	Because I am considered part time and do not qualify for health insurance, so we rely on my husbands
304	high premiums & high deductibles	392	Can't afford Ins.
305	you charge too much	394	Medicare doesn't love everything
307	No answer given	405	Many items have high deductibles or aren't covered.
314	Supplemental insurance does not cover, dental, eye, ins. could not cover with my insurance	413	Coverage is 70/30
322	Because Medicaid only coves limited healthcare needs	415	No answer given
324	can't afford it		
328	My employer offers only a high-deductible HAS, so we pay full price for all meds and services until that is met. Which means no significant coverage, as my services are kept to a minimum, the deductible never gets met.		



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
416	I don't feel my coverage fulfills all of my health needs as a family along with the cost.	561	not offered at my place of employment
417	High deductible	567	\$5,000 deductible
419	Deductible is so high it is really just emergency insurance.	589	own fault, signing up for plan with huge deductible
426	I don't have health coverage it's too expensive.	592	we have none
428	Because-none-is not enough	598	I only have Medicare because I'm disabled. I do not qualify for Medicaid coverage and I can't afford any other coverage, my disability just isn't enough to go around
429	Out of pocket cost		
436	Cost of drugs (presc.)		
438	No answer given		
443	My insurance doesn't cover eye care and doesn't cover hardly any for dental	601	No ins.
447	Rising -cost you never have enough!	607	Unaffordable
452	I have no coverage. Husband work is temporary. My company doesn't offer ins. any more	612	my company that I work for, don't cover me
455	Self employed insurance to expensive for self-employed	613	I only have an advantage plan. Cannot afford a supplement
457	No answer given	614	Because I think they charge way too much for health care & ins. Doesn't want to pay much!
469	I have just been diagnosed with Hashimoto's Disease and will lose my insurance 2/29/12	618	High deductibles 80% of \$50,000 is a hell of a lot
470	The co-pays and deductibles are too high \$6000	619	We may have adequate yet the premium is high for the group coverage and deducts & out of pocket horrible
474	Our deductible is set higher than our annual medical bills	636	Don't have any
482	Not enough coverage for money spent	643	Low Income
486	Don't have any at all	645	Have to pay full price until you meet your deductible
492	insurance companies always giving us the run around not wanting to pay	646	If I got really sick and had an operation it wouldn't cover
521	No job	647	Unemployed
536	Don't cover good	664	Husband unemployed cannot afford health ins. At this time
540	My work maxes out on most major medical issues at \$100,000	667	Doesn't pay enough, high deductible
541	I have none and can't afford right now	677	I don't have any
542	No answer given	682	No insurance at all
545	No coverage from work, due to my diabetes I cannot get insurance	688	Our deductible is too high and no Rx coverage
		689	I hate H.S.A.!



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
704	have to wait on VA-inadequate treatment- just push pills have 18 prescriptions takes months to get appointments can't afford Medicare supplement do not get some treatment needed/requested	762	I could use an mri but the hip coverage doesn't have enough in the account to cover that. It also doesn't cover chiropractic services
705	can't afford premiums	764	extremely high deductible to keep premiums low
706	cause no one will cover me b/c of my previous medical history & cause I'm prone to cysts & cancer	767	no dental and eye care
709	cannot afford it right now	777	too high of a deductible
714	no job, no insurance	782	we have a high deductible H.S.A. account all costs are out of pocket until deductible is met
732	most of these questions should not be asked, it is none of anyone's business.	791	husband turn 65 insurance dropped for wife
733	need dental ins.	795	because everything costs so much
736	deductible is very high	799	its cobra and is going to run out in a few months
739	don't have any	805	I only have hospital coverage - misc. testing and outpatient service is not covered
740	have only catastrophic ins	818	No health insurance
743	I need a lot	821	Eyes and dental can't afford
747	we have not experienced many health problems lately so have not had to use insurance as much. But prescriptions are out of the roof	832	It cost too much. We pay for it ourselves. No company policy
750	you still have to pay sometimes a lot out of your own pocket	835	No cancer, dental coverage
751	I have no coverage except Medicare hospital I cant afford Medicare b	842	Dental / eye policy is minimal/lacking
753	I have had in the past breast cancer and I take insulin so no one wants to insure me now	856	High deductible
754	too expensive too high deductible too expensive medication coverage	858	My health discount plan only comes some medical and prescriptions not to bad! Does not discount my insulin
756	money	863	To be able to afford health insurance we were forced to choose a plan with a very high deductible
757	it is limited to what it covers	865	Deductible very high - they are twice about going to the doctor
761	H.S.A. plan with continual increases with premiums and deductible for the same coverage year after year	868	Medicare only pays 80%
		870	Because I have no sort of insurance can't afford it
		871	I fell on my neighbor's porch and broke my hip I still have a lot of bills to pay



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
872	Too much out of pocket expense before insurance pays for anything	985	Drugs are so high in price that my co-pay went up to \$80 for 3 mo. Supply. I pay \$800 a month for insurance
874	As of April 2012 I won't have any health care coverage. My cobra runs out and I will have to acquire state hc coverage costing \$800 - \$1700 a month I have been rejected by anthem and Aetna	986	I have no coverage
879	You need a proofreader or maybe someone that can read. I can't afford the deductibles.	992	I'm uninsurable. I have had stents put in, have diabetes, high BP.
880	Still a lot of out-of-pocket expenses	998	Can't get hospital help without pay my fortune.
881	Self-employed - H.S.A. acct. A lot of out-of-pocket expense	999	High deductible - expensive premiums
889	Because I don't any?	1001	Can't seem too able to get any.
890	I have no health care coverage. I pay cash if I go to the doctor.	1010	My work health plan is terrible!
893	Don't pay enough	1017	My insurance does not cover everything; such as going to a dermatologist
918	To expensive for the proper coverage. Deductible is too high for lower rate.	1030	No dental INS- my son had to go to 6 months w/ out Rx coverage due to loss of job and loop holes in Obama healthcare for dependents up to age 26
923	Cancer	1038	I have been uncovered for 4 months and HIP won't pick up coverage until you have been uncovered for 6 months
933	Have none	1047	Can't afford any better
935	Deductible to high	1049	Due to being on Medicare Medicare cannot go to dentist, or eye doctor. Cannot pay for these bills not covered by Medicare, Medicaid.
946	I have none and can't afford right now	1063	I don't have any my wife can't get health insurance so I don't have any either.
952	Coverage has steadily debilitated over most insured's past and continues (as it is for profit)	1064	It cost too much
954	Single and one income. It cost a lot to go to the doctor and some test think I need.	1065	I have none.
956	Rising costs; greater use of technology	1075	Medicare covers 80% rest comes out of pocket.
969	The cost for better coverage was too much.	1083	Do not have secondary insurance
972	Excessive co-pays	1090	I have no medical or health care insurance at this time.
974	Cannot afford	1105	we seem to spend a lot out of pocket
979	Employer does not give insurance		
984	Pay a lot of "out of pocket" expenses		



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
1106	with the cost of health care insurance and deductibles for insurance constantly on the wise who does have adequate coverage	1203	we are self-employed with an individual plan with high deductible \$10,000 and high premium \$15,600 per year.
1108	Ins. does not cover medication that works for me	1205	need to cover more
1116	No health care coverage	1206	work doesn't give it to part time. Not until 1 year of work completed
1121	don't have any	1208	cost is too high
1124	cant afford it	1209	I have to pay a \$1500 ded
1125	I pay a large sum of money out of my paycheck and pay a large deductible. By the time I meet the deductible it starts all over.	1226	to much co-pay
1127	deductible is too high (\$6,000) so it is expensive to get procedures done.	1228	have trouble w Medicare paying bills
1132	I do not have insurance. My employer does not offer it. Private health insurance is not affordable. I do not have any sort of health or dental insurance	1240	rising cost od insurance and prescription drugs and will not have any if I lose my job
1135	it doesn't cover my needs	1246	premiums are too high. Out of pocket expenses are too high. (pay first 2,500.00) cannot afford to go to the doctors or use insurance
1154	Husband Self-employed- costly insurance-only afford major medical-very high deductible.	1252	a catastrophic malady cost to rectify would likely take all of my assets
1157	No answer given	1266	I have no insurance cant afford any
1158	because laid off can afford it	1271	widowed none offered through my employment
1165	not enough coverage, too high deductible	1272	always use more
1170	I am on limited income and can afford only Medicare A+D no Supplement	1274	no prescription
1176	I have HAS and for dental, Vision and any medical \$750-the company provides does not go far. Have to do without dr. visits.	1276	No answer given
1178	no eye care, and dental	1278	in network providers are not in our area, generally. Does not give us a lot of "alternative" options, such as chiropractic
1179	Spend down way too high. Coverage for emergencies only	1279	have no form of coverage
1180	Coverage, cost, a lot of meds not covered, a lot of tests not covered.	1285	self-employed insurance to expensive
1189	No answer given	1292	I can't get insurance! Not even from the government
		1300	Had back surgery now no one will hire me
		1307	I have no insurance
		1313	Medicare doesn't cover everything
		1314	I have none- can't afford it!

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
1318	Still owe too much after 90/10	1393	Not enough coverage for family.
1321	No answer given		One person to the doctor and money is gone.
1337	I have no insurance	1399	Maybe, because of our age
1348	I don't have any- go to free clinic	1403	Have to pay too much out of my own pocket
1352	No answer given	1423	We have no dental because it's more money
1360	Eye Care and dental- can't afford	1426	To my knowledge, I have none and don't qualified for assisted insurance
1377	Due to a thyroid problem I have my blood work done every 6 weeks. My insurance does not cover lab work. As a result I put the cost on a credit card.	1427	No answer given
1379	I do not have coverage. Only my son does in our household and he is covered by Hoosier Health Wise.	1428	Deductible too high
1381	No answer given	1430	No vision or dental
1383	The high price of medical cost these days and employers making insurance coverage so high, insurance is unaffordable and no coverage is very risky.	1431	It would be nice if coverage-increased for a bit more money than decreasing for more money
1384	BY Dec. 31 of 2012 I will no longer have health care insurance.	1435	I don't have health insurance
		1436	Cost of spend down
		1443	Too Expensive to get insurance with excellent coverage

Q30: *What prevented you from getting an influenza vaccine?*

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
6	Don't think it works	80	don't feel need
13	Didn't want it	82	usually don't get flu got it one time did get shot
15	never wanted it	83	don't think it helps
18	did not want	88	Didn't think about
20	not needed	93	does make me sick
22	Don't want it	98	missed appt.
37	dr. advised against	99	did not want it
41	Have never had one	105	not interested
43	never heard of it	106	never have had one
45	No answer given	108	no reason
52	knowledge of the side effects of the vaccine	116	just didn't
54	Don't Like Concept	125	Didn't think it necessary
57	Don't Want One	126	didn't want it
59	Don't Need	128	I didn't deem it necessary
69	No answer given	132	never had one
70	No answer given	134	not necessary
71	Don't want	135	No answer given



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
143	did not want it	352	makes me sick
144	never got around to it	353	not needed
147	I never get the flu	354	I just didn't want one!!!
150	no need	358	I always get sick afterwards & multiple times after having me.
163	didn't think to do it		
167	choose not to	364	very ill the last vaccine
169	did not want it	366	choose not to
175	Just didn't	370	didn't need
179	not necessary	372	No answer given
184	Didn't need it	374	Not Wanted
189	Don't think its necessary	375	Do not feel it is necessary
203	Don't think it's needed	397	they make me sick
204	Hate shots	401	don't believe in them
205	The vac only lowers a certain type there are so many viruses out there.	404	didn't feel I needed it
		405	didn't take time
212	Thought I had one.	418	Good Immune System
217	didn't want one	419	I don't like taking medication unless I have to
219	Didn't want it	426	didn't think about it
226	Didn't think it was necessary	427	took it once made me very sick
228	opted out	428	choose not to
231	no need for plus have never got one.	431	didn't think necessary
		433	didn't trust it
238	prefer natural healthcare	434	not recommended
239	Don't feel the need for one	437	my choice
244	personal preference	443	never had one
246	never will, never have	447	I was sick
248	No answer given	452	didn't think I needed it
257	haven't had flu	456	Not interested
261	don't get them	461	never get them
267	don't want it	465	never thought of it
268	never get the flu	473	religious beliefs
270	do not want one	476	Don't believe in it!
278	no need	478	don't believe in it
279	don't want	480	just didn't
293	did I really need it?	486	didn't want it
306	choice to not vaccinate	488	have allergies
311	just didn't want one	489	makes me pick
316	Time	492	don't believe in them would rather get flu
322	forgot to/side tracked		
329	allergic	496	I get ill when I get it
332	do not want extra vaccines	497	Don't want one
339	It does not cover all influenzas so why put it in my body.	503	in 85 yr never had
		509	not interested
340	Don't want it	510	gillian barca
344	Do Not Feel A Need For It	514	opted not to this yr.



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
517	story's of no good	732	Don't Want It
518	just didn't this year	741	I question its efficacy
519	no interest	746	Don't Feel
531	feel there is no need	747	Don't Feel the Need To
532	it has not been recommended	749	Don't Want It
541	don't believe it	752	Not Interested
542	didn't want	753	Husband Truck Driver With Him
549	it makes me sick		
555	Didn't get around to it.	760	Did not want it
559	No answer given	761	Don't Want It
561	Don't get them	762	There are several flu strains & only 1 in five as a vaccine and b/c I don't want to put toxins in my body like that
562	Not needed		
563	I was sick when it was offered at work		
564	Don't think its necessary	764	unnecessary
567	Don't get sick	765	Didn't want
569	ineffective	767	No answer given
574	No answer given	773	Don't ever get sick
575	didn't want one	784	I don't think I need one yet.
577	just didn't get one		Don't get flu.
582	No answer given	787	don't care to
592	Don't want one	790	didn't want one
593	undermines natural immunity	794	Do not believe in them
597	No answer given	795	No answer given
599	do not take flu shots	800	no desire
600	never thought I needed it.	805	Never had the vaccine shot
602	No desire	810	Never get the flu
610	Did not want it	811	chose not to
615	didn't want one	817	didn't think necessary
623	allergic	820	just didn't
626	put it off-forgot	824	never wanted it
628	Don't see a need at this time	825	the toxins in them
630	makes me sick	828	not interested
645	didn't want it	830	That vac. Is unneeded
646	I don't get the flu	833	egg based can not eat eggs
658	not important	834	not interested
661	not concerned	844	never had or needed one
663	Didn't feel like it	845	avail. To the more susceptible
664	Wasn't sure if I wanted one	850	intended too-but didn't
689	makes me sick!	863	Just never have
698	didn't want to!	865	don't believe in it
708	Didn't Want It	869	did not want
713	Not Sure its Effectiveness	871	never had one
724	Do Not Believe in Flu Shots	872	always feel bad after shot, for wks
731	Don't See the Value in Taking This Vaccine	884	allergy to eggs



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
885	never thought about	1061	the one and only I did get made
888	don't know		me sick
890	not interested	1064	Didn't need to bother
892	didn't think necessary	1067	allergy to eggs
897	just don't	1068	poss transplant rejection
918	I don't think I need it	1071	did not want it
920	not necessary	1072	couldn't get to VA
923	I don't believe in them	1073	Don't need one
927	didn't want it	1076	Do not believe in getting them
933	just didn't do it this year	1084	allergic
934	effectiveness/risk the need is very much debated in research	1087	have allergies
937	don't believe in it	1090	time
938	it's a shot :(1091	didn't take time
940	personal choice	1097	didn't take time to get
942	never had one	1099	Didn't want to~didn't think it made much difference in the
944	don't want it		past
946	I don't want one	1100	never get one
948	rarely get sick and don't like shots	1107	don't want
951	I feel it's unnecessary	1111	did not care
952	I consider them presently unnecessary	1115	don't think it necessary
957	didn't want it	1121	don't want it
959	I didn't feel I needed it	1125	just didn't get around to it. Had one last yr.
962	don't care for one	1131	forgot
963	future repercussions	1134	just didn't
964	don't believe in it	1139	unnecessary
965	didn't feel it was necessary	1140	don't trust them
971	didn't want one	1145	not necessary
972	didn't take the time	1146	too busy
977	not interested	1150	personal preference
994	did not want one	1154	concern it would increase own immune system
1009	time	1159	do not inject bad stuff into my veins
1015	Don't feel the need		
1017	Didn't think it was important	1160	was sick
1018	choose not to	1170	did not get flu
1030	allergic to eggs	1174	did not feel the need
1036	been fine without it, so far	1176	Fee no need for it
1043	felt lucky	1177	not interested
1050	Didn't have time see Doctor	1192	don't like needles
1051	Didn't want	1196	Did not see need
1052	not interested	1199	Do not like shots
1053	stuff that's in it	1200	did not feel it was necessary
1056	Didn't want it	1205	No answer given

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
1206	Do Not Like Shots or anything in my Nose	1319	haven't had a chance yet?
1208	not worth time to do	1322	At the time I was at Dr.
1216	hard on my asthma	1325	don't believe in them
1219	did not want it	1332	Didn't want to
1221	Didn't take time	1333	Don't want one
1222	don't get sick often	1337	Did not want it
1223	No answer given	1340	causes me to feel sick
1224	never had one	1346	My good health
1231	Age & Shortage	1348	did not think of it
1232	don't feel I need it, don't get sick	1355	never got around to it
1239	take good vitamins that protect me	1358	keep forgetting
1243	Don't need it	1359	allergic
1244	did not want it	1368	Don't believe in them
1251	didn't get to it	1369	hate shots
1252	don't need!!!	1381	Hg content!
1253	did not want	1385	ingredients
1270	Did not feel I needed it.	1392	shot phobia
1271	did not feel the need	1395	rarely get sick
1272	didn't want to	1397	not needed
1277	I don't want it	1398	only one time I did, I got sick more
1281	Never Been Interested	1408	no reason
1282	Don't Feel I Need It	1409	No answer given
1283	time/schedule	1414	didn't want one
1285	Don't seem to need it	1422	Vaccinations are unnecessary
1293	did not want to	1424	Wasn't necessary
1303	Do not get flu shots	1426	Don't agree with it
1308	don't care for them	1432	Procrastination
1310	didn't feel it was necessary	1442	Don't get flu
1312	time/money/an they don't cover all viruses	1444	wasn't sure I wanted it
1318	became sick once	1446	unimportant
		1448	no reason
		1449	not necessary

Q32: Where do you get most of your health care information?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
35	spouse	128	don't really
52	my chiropractor	134	medical book
54	Personal Research	145	scammers
72	I am a R.N.	147	I have a degree in nursing
90	Dr. Oz	154	tv
93	all above	176	Ins. Company
113	professional journals	230	No answer given
125	I hide and watch	238	No answer given



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
253	clinic	836	tv, radio
304	I am a NP	842	classes/seminars education programs offered by Women's Resource ctr and Women's Health Advantage. These are wonderful.
325	V.A.		
349	wife		
352	books		
358	Daughter's pediatrician		
359	Media	851	TV
384	mail from Doctors & etc	855	VA
386	I'm a Registered Nurse	865	No answer given
388	DeKalb Health Flyer	872	At work-I work in a healthcare setting
401	I am a nurse, get my info @ work		
416	work	888	union at work
419	wife	915	health dept emails
425	chiropractor	931	work nursing home
454	TV	934	research
465	reading	946	books
474	My employers	952	books on nutrition
480	Business Diro @school	973	television
515	I am a retired nurse so only go to the dr. when necessary. Usually have a yearly mammogram but couldn't get one before I left for Az. Intend to do so when I return in April.	998	st martin's
		1003	employer
		1005	work in physician office
		1017	School, parents
		1064	I don't
		1070	VA
520	nurse	1087	work in healthcare
597	V.A.	1097	I work in health care
629	reading and conversations	1106	daughter is a nurse
630	all the above	1116	tv
643	VA-Fort Wayne	1129	corporation nurse
644	TV	1135	agent
646	Maureen Salaman Books	1143	computer
689	work/Kroger pharmacy	1163	my union hall
706	All	1170	wife
708	My Mom	1180	No answer given
711	Ins. Agent	1183	employer
726	Job	1210	Most of above
732	Employer	1235	work
746	Schooling	1239	No answer given
753	Free Clinic	1248	RN (employed)
755	Colleagues/myself	1276	at work (hospital employee)
756	TV	1348	I go to a clinic
787	school	1379	medical books that I own
793	I am R.N.	1381	internet including medical journals
795	nursing school		
799	all the above		
822	T.V.		

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
1396	my medical books from when I attended medical school- had to drop out due to an adrenal tumor -Cushing's Syndrome	1397	Dr's + all available material
		1422	chiropractor
		1436	T.V

Q33: What would be your main method or way of getting information from authorities in a large-scale disaster or emergency?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
29	All- Above	755	My Connections to the hospital as a staff doctor
74	family		
93	all above	799	All Above
175	?	800	police dispatch
257	police officer- probably would be called out to work	809	son-full-time fireman
264	amateur radio	832	ham radio
384	911	842	Husband fire fighter
397	don't know never been in that situation	852	police
401	fire dept. scanner	862	retired firefighter
425	my husband fire pager	890	preplanned method
514	husband works for county	966	home phone
585	depends-is there electricity, cells worthy or what?	1006	Husband's fire pager
629	TV and/or neighbors, family	1010	work for Emergency Service
630	all the above	1131	what is available
688	ham radio	1159	In a LARGE SCALE emergency what services will be available? I will use ALL available Goofy?
706	All	1357	Grandson police officer
709	Hand Phone	1444	phone/land line

Q45: Are you using contraceptives to...?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
46	neutered	1289	Prevent possible transmission of infection because of recurrent prostate infectious
412	tubes tied/cut/burn		
997	hormone replacement therapy		
1284	vasectomy		

Q46: In you are not currently using contraceptives, what is the main reason?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
117	I don't need it	229	no
150	do not need	238	philosophy
196	NA	308	don't use

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
402	fixed	873	N/A
403	pregnancy not possible	918	just not using
439	past child hearing	924	not applicable
449	past needing them	942	don't need to
486	don't use	952	we are aware of and practice abstinence during ovulation portion of menstrual cycle
566	NA		
608	Do not need them		
612	can't get pregnant due to a major car accident years ago	981	NA
630	none of your business	1026	N/A
637	no need	1051	Don't Need
		1068	no no
		1121	husband is sterile
		1143	no exposure L.O.L.
		1159	Penis is bent and will not get stiff :(
		1160	no need
		1207	Ed
		1238	We use family planning methods because we feel birth control is unsafe to health
			partner disabled
		1239	I don't need it
		1348	not trying to get pregnant but not worried about getting pregnant we do not have any children happy either way (with or without pregnancy)
		1381	N/A
		1441	

Q55: In the past year, have any of the following kept you from taking the child(ren) in your household to a doctor or health care facility?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
150	No doctor/no need not sick	1030	Husband only worked 4 months last year (laid off) I only work part time
198	Child has insurance		
374	Not Needed		
657	No answer given	1067	time
746	No	1154	healthy children
761	No answer given	1180	not needed
799	No answer given	1203	we take our children for care if they need to be seen. I am the one who doesn't go because of the cost.
834	only because I have insurance		

Q60: If you answered yes to Q59, which of the following ways of bullying were used?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
92	school	706	Letters
475	at school	1188	(through) using others and skyping

Q105: What do you most often do with your leftover prescription pain medication?

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
41	Donate to Clinic's	574	holding
42	wash down sink	608	Need to Dispose
76	water it	708	Nothing
140	Just have Tylenol	822	Still have it
172	Give it to my doctor to take to the Matthew 25 Clinic	852	mash and put in kitty liter
246	stop taking b/c it didn't work/ help	853	keep it
367	Return it to Dr.	873	We use only extra-strength Tylenol
374	NA	960	st martins clinic
391	save to find designated prescription drug collection site	1006	return to physician for disposal
504	pour vinegar in bottle and throw away	1035	free clinic
510	offer it to st. martins clinic in Garrett	1070	I have fentanyl patches and morphine Cancer VA Prescribed
520	fill with water then after liquid pour down drain	1112	donate to st martin clinic
562	N/A	1138	Take to sheriff dept.
		1193	Return to Dr.
		1309	Take to Dr's ofc.
		1449	depends on the kind of drug it is

**Q114: Please think about the following environmental health issues in DeKalb County.
Tell us whether you think each issue is a...?**

<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
30	Deer population	616	Air quality. Metal Technologies Plant S. Side Town
125	Board of health has too much regulatory power	716	Benzene, Too many women (especially) dying of breast cancer
156	pet feces	726	Greenhouse effect
242	Air quality; dirt left on siding	746	trash on side of roads; buildings (barns) falling down; vehicle "storage"; "garbage" around rural residences
320	lack of snow plowing	751	use of pesticides
413	safe disposal of oil, chemicals	799	air quality
417	air quality	806	trash and road kill
433	air quality		
454	feel we live in a pretty clean community		



<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
807	air quality	1146	open burning-tires/trash
826	Industrial pollution	1153	misplaced industry in middle of farmland
856	cutting down trees		
864	cattle and hog farms	1170	air pollution
934	Commercialized food, GMO, non-organic, steroids, hormones, antibiotics	1178	air and other food
		1193	failed septic systems in old Homes
941	spraying from the air	1195	contamination from factories
952	air pollution (intrusive zoning practices) dangerous (industrial) traffic and work related injuries. Note: all these are down-played.	1216	litter
		1231	air pollution
		1249	air pollution
954	health inspector for restaurants	1280	standing water, runoff
976	septic systems (Hm)	1303	wind farms-safety for all
1028	DeKalb metal (Sir stench chemicals)	1334	Corporate/government and restriction
1035	wind power	1346	we drive on a known cancer causing agent-tar!!

Q117: Which of the following best describes your race or ethnicity?

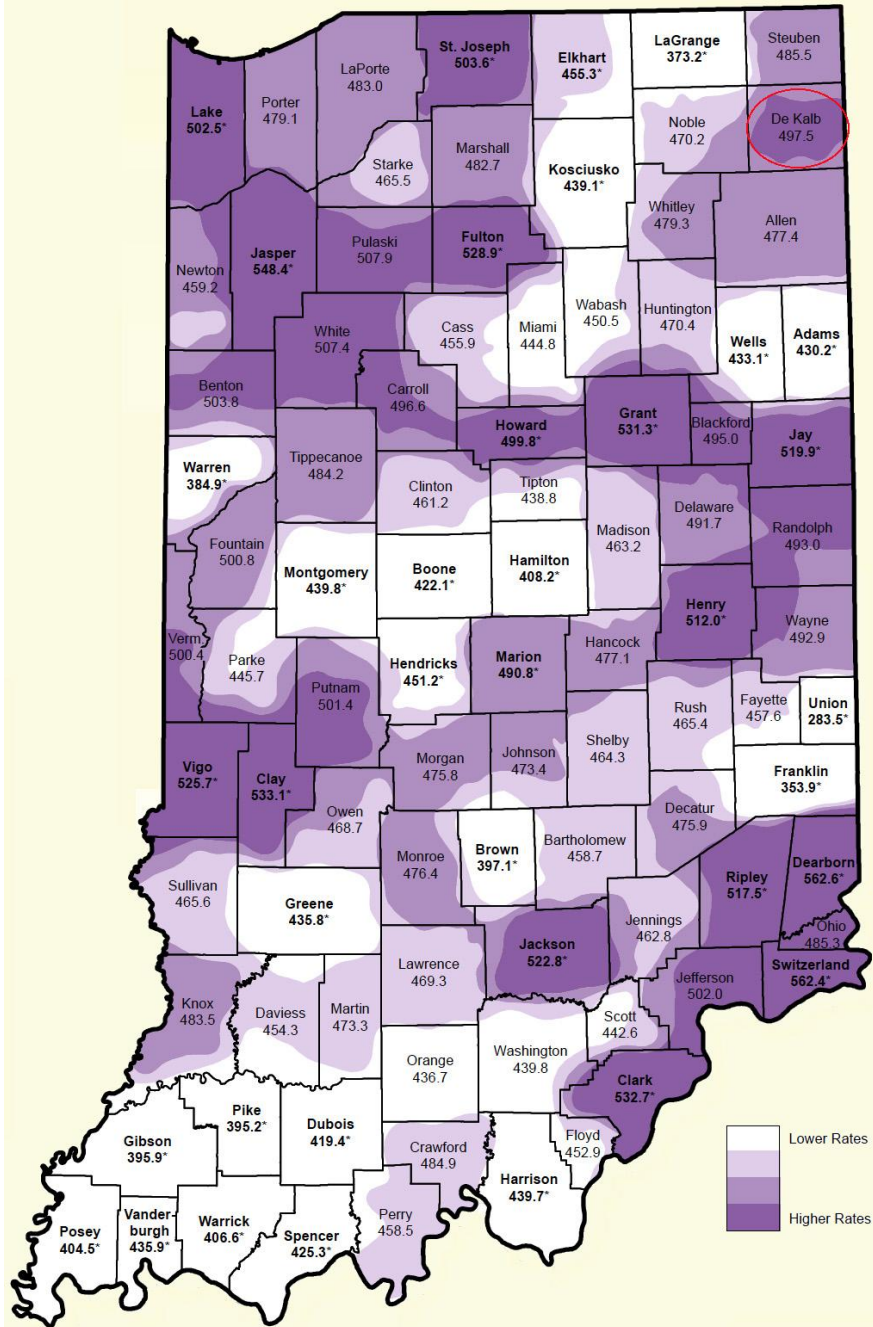
<u>Case ID</u>	<u>Response</u>	<u>Case ID</u>	<u>Response</u>
74	don't ans	175	Can you ask this question. Too many others in the world.
90	American		
		732	1 of the Above

APPENDIX B: CANCER DATA

Overall Cancer Deaths in DeKalb County, Indiana and by Counties Surrounding DeKalb County

	Number of Cases	Rate per 100,000 people
DeKalb County, Indiana	1056	497.5
Steuben County, Indiana	883	485.5
Allen County, Indiana	8050	477.4
Noble County, Indiana	1071	470.2
Williams County, Ohio	194	441.3
Paulding County, Ohio	94	435.1
Defiance County, Ohio	180	410.0
LaGrange County, Indiana	622	373.2

Please note that the rates presented above are age-adjusted to 2000 Census population estimates. Indiana data are taken from the *Indiana Cancer Facts & Figures 2012: A sourcebook for planning and implementing programs for cancer prevention and control* and are for years 2004-2008. Ohio data are taken from *Ohio Cancer Facts & Figures 2010* and are for years 2003-2007. An incident map of death rate from cancer in the state of Indiana is presented on the next page of this appendix.



*=Significantly different (either higher or lower) than state rate (P<.05).

Technical note: This map presents age-adjusted county incidence rates using a smoothed interpolated surface and is intended to provide a generalized depiction of rate variability throughout the state.

Source: Indiana Cancer Facts & Figures 2012: A sourcebook for planning and implementing programs for cancer prevention and control.

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