



Community Health Report Card

2012



Sarpy/Cass Department of Health and Wellness

This 2012 Community Health Report Card is the product of many community surveys and agency recordkeeping. The staff at the Sarpy/Cass Department of Health and Wellness finds value in all of this community health data. This 2012 Community Health Report Card is intended to briefly summarize the health status of our communities.





Population

2011

<i>Sarpy County</i>	<i>Cass County</i>	<i>Nebraska</i>
162,561	25,188	1,842,641

Leading Causes of Death

2005-2009

	<i>Sarpy County</i>	<i>Cass County</i>	<i>Nebraska</i>
1	Cancer	Cancer	Heart Disease
2	Heart Disease	Heart Disease	Cancer
3	Stroke	Unintentional Injuries	Stroke

Economics

Indicator

Current Data

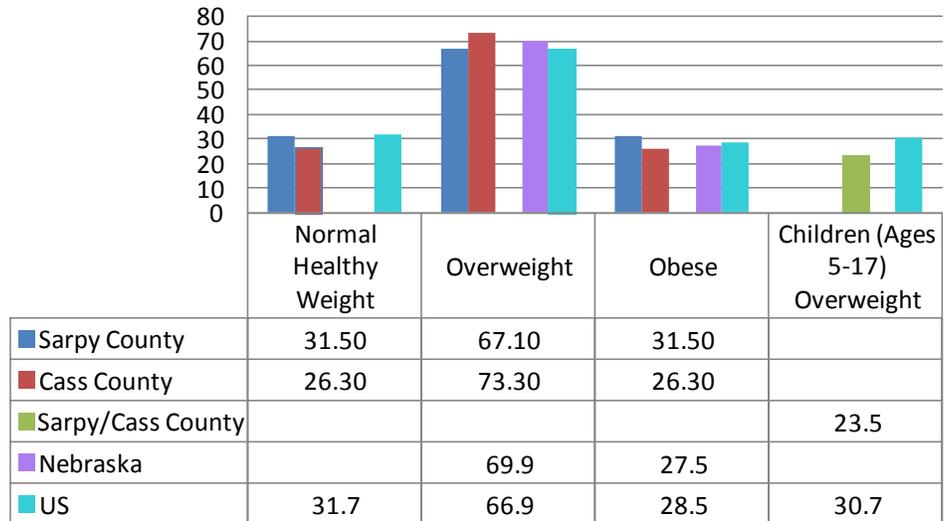
	<i>Sarpy</i>	<i>Cass</i>	<i>NE</i>
Home Ownership Rate (Source: U.S. Census Bureau, American Community Survey)	72.4 % 2006-2010	82.6 % 2006-2010	68.6 % 2006-2010
Unemployment Rate (Source: Bureau of Labor Statistics)	4.1 % 11/11-10/12	4.6 % 11/11-10/12	4.0 % 11/11-10/12
Poverty Rate (Source: U.S. Census Bureau, American Community Survey)	5.9 % 2009-2011	6.2 % 2009-2011	12.7 % 2009-2011
Median Household Income (Source: U.S. Census Bureau, American Community Survey)	\$64,043 2011	\$62,217 2008-2010	\$50,296 2011
Adults Aged 18-24 Reporting Having No Insurance Coverage for Healthcare (Source: 2011 PRC Community Health Assessment)	5.7 % 2011	10.0 % 2011	16.5 % 2011

About the Counties

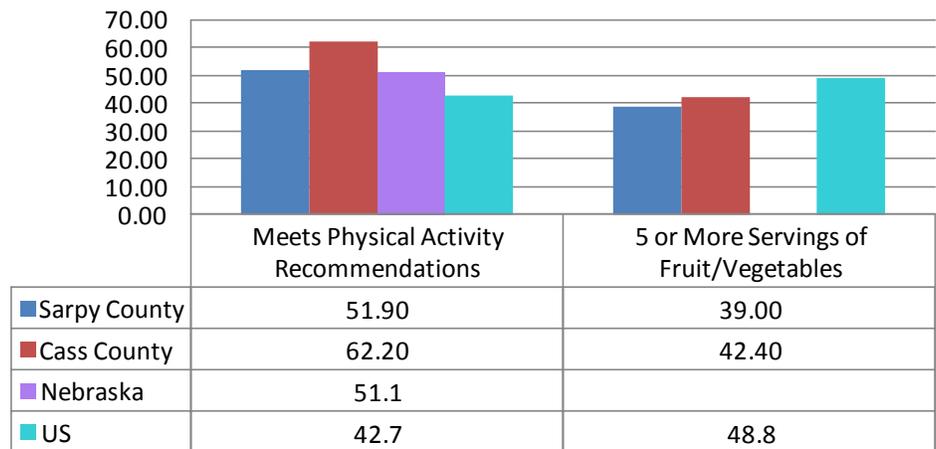


Key Indicators

Body Mass Index (BMI) Makeup (%) 2011 PRC Community Health Needs Assessment



Physical Well Being (%) 2011 PRC Community Health Needs Assessment



Key Indicators in Sarpy/Cass County

Body Mass Index, Physical Activity Level, Consumption of Fruits and Vegetables, Smoking, and Drinking are five modifiable risk factors that greatly impact the health of a community. Being overweight or obese, low partici-

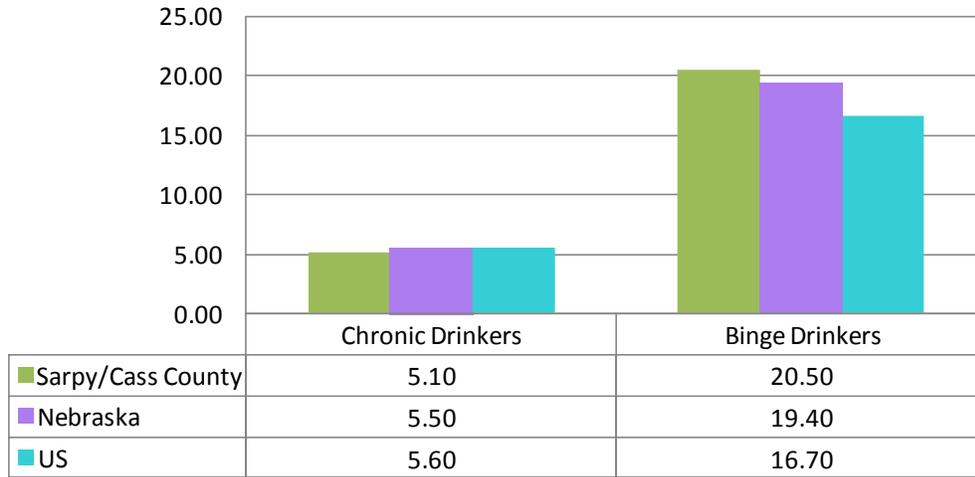
pation in physical activity, and diet are linked to several of the largest health issues within Sarpy and Cass County, including heart disease, stroke, and diabetes. The key to decreasing the number of people affected by such health

issues is in creating an environment that supports healthy lifestyles: opportunities to participate in exercise, eat more fruits and vegetables, and to cease smoking and heavy drinking.



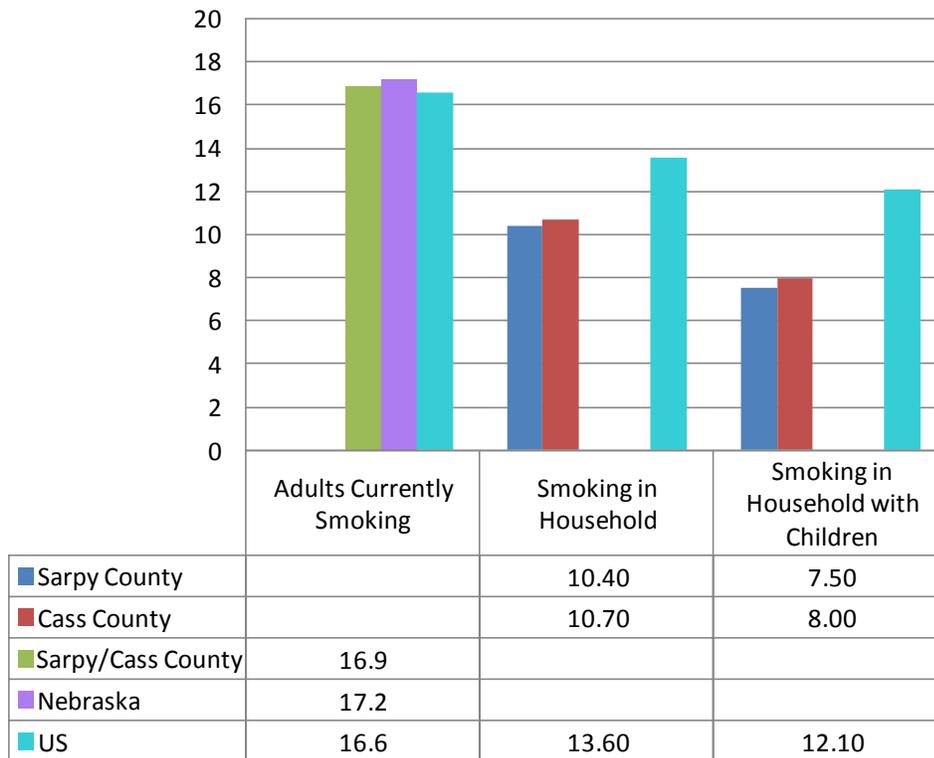
Key Indicators

Adult Drinking (%) 2011 PRC Community Health Needs Assessment



(Chronic: average of 2+ drinks per day. Binge: single occasion of 5+ drinks per man or 4+ drinks per woman.)

Adult Smoking (%) 2011 PRC Community Health Needs Assessment





Heart Disease, Stroke, & Diabetes

Indicator	Current Data				
	Sarpy	Cass	Sarpy/ Cass	NE	US
Heart Disease Deaths (Source: 2011 PRC Community Health Needs Assessment)	153.9	170.1		140.0	179.8
per 100,000 population, 2005-2009					
Stroke Deaths (Source: 2011 PRC Community Health Needs Assessment)	39.3	42.4		40.3	38.9
per 100,000 population, 2005-2009					
Number of Adults Ever Told That Their Blood Pressure Was High (Source: 2011 PRC Community Health Needs Assessment)			21.0%	27.1%	34.3%
Number of Adults Ever Told That Their Cholesterol Level Was High (Source: 2011 PRC Community Health Needs Assessment)			33.6%	37.4%	35.1%
Adults Report Being Diagnosed With Diabetes (Source: 2011 PRC Community Health Needs Assessment)	9.1%	8.4%		7.7%	10.1%

Heart Disease and Stroke in Sarpy and Cass County

In Sarpy County, Heart Disease and Stroke were the number 2 and number 3 killers (from 2005-2009), respectively, with cancer the top cause of mortality. In Cass County, heart disease was the second leading cause of death. While great improvement has been made in the prevention of heart disease and stroke deaths, there is still work to be done both at the national and local

level. This should come in programs working to improve outcomes in the five key indicators, as those five indicators are directly linked to heart disease and stroke outcomes.

It is important to note that while heart disease is one of the leading causes of death, it is also the second leading cause of hospitalization in Sarpy and Cass Coun-

ties, and accounted for \$93 million in hospital charges in 2010, according to the Nebraska Heart Disease and Stroke Prevention Program. Work towards healthier citizens would not only pay off in longevity of life, but also in a decrease in health care spending.



Indicator

Current Data

	<i>Sarpy</i>	<i>Cass</i>	<i>NE</i>	<i>US</i>
All Cancer Deaths (Source: 2011 PRC Community Health Needs Assessment)	161.1	186.5	167.7	173.6
per 100,000 population, 2005-2009				
Adults 50 Years and Older Who Have Had a Fecal Occult Blood Test (FOBT) within Two Years (Source: 2011 PRC Community Health Needs Assessment)	33.2%	30.4%	15.3%	28.3%
Adults 50 Years and Older Who Have Had a Sigmoidoscopy or Colonoscopy at Some Point in Their Lives (Source: 2011 PRC Community Health Needs Assessment)	77.4%	77.0%	61.8%	72.0%

Cancer

Cancer in Sarpy and Cass County

Between 2005-2009, Cancer was the leading cause of death in both Sarpy and Cass County. Proper and regular screenings are one of the best ways to prevent cancer deaths. This is very evident when talking about Colon Cancer. According to the Centers for Disease Control and Prevention, 60% of deaths from colon cancer could be prevented if every one aged 50 years or older

had regular screening tests. The Sarpy/Cass Department of Health and Wellness has acknowledged this important data, and participates in the Dress in Blue Day, delivering colon cancer prevention fact sheets, posters, and pay-check inserts to local businesses and public buildings, including setting up a booth at the Sarpy County courthouse and local grocery stores. A nurse and health

educator use this day to speak with passersby about the importance of screening and educating about colon cancer. This is an education effort that will continue for years to come.



Injuries

Indicator

Current Data

	<i>Sarpy</i>	<i>Cass</i>	<i>Sarpy/ Cass</i>	<i>NE</i>	<i>US</i>
<i>Deaths from Unintentional Injuries</i> <small>(Source: 2011 PRC Community Health Needs Assessment)</small>	24.7	47.3		35.7	37.0
	per 100,000 population, 2005-2009				
<i>Deaths from Motor Vehicles</i> <small>(Source: NDHHS Vital Statistics)</small>			8.78	12.4	
	per 100,000 population, 2004-2008				
<i>Child Always Wears a Seatbelt or Appropriate Restraint when Riding in a Vehicle Ages 0-17</i> <small>(Source: 2011 PRC Community Health Needs Assessment)</small>			96.9%		91.6%
<i>Child Always Wears a Helmet when Riding a Bicycle Ages 5-16</i> <small>(Source: 2011 PRC Community Health Needs Assessment)</small>			52.7%		35.3%

Injuries in Sarpy and Cass County

Unintentional injuries are the third leading cause of death in Cass County. Injuries are also the number one cause of death nationwide for people up to age 44. In Sarpy and Cass County, the leading cause of injury death is due to motor vehicle accidents. For this reason, efforts to increase the number of adults wearing seatbelts, and the number of children either in seatbelts or proper child passenger safety seats, is vitally important.

At the Sarpy/Cass Department of Health and Wellness, the Safe Kids Sarpy/Cass County Coordinator regularly gives presentations in the community about a variety of topics to prevent injuries, including Spot the Tot, Child Passenger Safety, Fall Prevention, Anti Texting and Driving, and Bike Helmets.

The health department also has child passenger safety technicians who regu-

larly educate families on how to properly install a car seat through community events and regularly scheduled fitting stations at the SCDHW office.



Respiratory Disease

Indicator	Current Data				
	Sarpy	Cass	Sarpy/ Cass	NE	US
Adults Who Have Been Diagnosed with Chronic Lung Disease <small>(Source: 2011 PRC Community Health Needs Assessment)</small>	8.6%	6.0%			8.4%
Adults Who Currently Have Asthma <small>(Source: 2011 PRC Community Health Needs Assessment)</small>	8.6%	5.3%		7.8%	7.5%
Children Who Currently Have Asthma Ages 0-17 <small>(Source: 2011 PRC Community Health Needs Assessment)</small>	13.5%	6.2%			11.8%
Adults Who Currently Smoke <small>(Source: 2011 PRC Community Health Needs Assessment)</small>			16.9%	17.2%	16.6%

Respiratory Disease in Sarpy and Cass County

With the passing of the Clean Indoor Air Act, it has become increasingly difficult for smokers to smoke in public places. With such a change in environment, the hope is that the number of smokers in communities will also decrease, and, in effect, such health issues as chronic lung disease will also decrease. The Environmental Health Coordinator at the Sarpy/Cass Department of Health and Wellness regu-

larly responds to Clean Indoor Air Act complaints by visiting businesses, restaurants and bars to ensure they are compliant with the law.

There is a proven link between children's exposure to secondhand smoke and the onset and severity of asthma. For this reason, it is healthiest for adults with children to either smoke outside or to cease smoking altogether.

Staff at the health department regularly partner with the local tobacco prevention coalitions to educate the public about the effects of smoking on adults, children, and unborn babies.



Sarpy/Cass Department of Health and Wellness

Sexually Transmitted Diseases

Indicator

Current Data

Number of Chlamydia Cases Ages 15-19

(Source: Nebraska DHHS, Epidemiology)

321 cases (Sarpy/Cass)
per 10,000 people, 2009-2011

Number of Chlamydia Cases Ages 20-24

(Source: Nebraska DHHS, Epidemiology)

523 cases (Sarpy/Cass)
per 10,000 people, 2009-2011

Number of Gonorrhea Cases Ages 15-19

(Source: Nebraska DHHS, Epidemiology)

45 cases (Sarpy/Cass)
per 10,000 people, 2009-2011

Number of Gonorrhea Cases Ages 20-24

(Source: Nebraska DHHS, Epidemiology)

77 cases (Sarpy/Cass)
per 10,000 people, 2009-2011

STD in Sarpy and Cass County

Sexually transmitted diseases are a public health concern throughout the country. In Sarpy and Cass County, the highest gonorrhea and chlamydia rates are in young people ages 15-19. Sexually transmitted disease prevention and education can be a challenge, as these age groups are often hard to reach.

It is important that the community make a concerted effort to teach young

people to make healthy and responsible choices to prevent STD's, including getting tested regularly if at high-risk for infection. Parents are the most important support group for this age group.



Senior Health

Indicator

Current Data

	<i>Sarpy</i>	<i>Cass</i>	<i>NE</i>	<i>US</i>
<i>Alzheimer's Disease Deaths</i> (Source: 2011 PRC Community Health Needs Assessment)	18.6	26.6	25.4	23.4
	per 100,000 population, 2005-2009			
<i>Adults 50 years and Older with Arthritis/Rheumatism</i> (Source: 2011 PRC Community Health Needs Assessment)	32.9%	41.8%	35.4%	
<i>Adults 65 years and Older with Medicare Supplemental Insurance</i> (Source: 2011 PRC Community Health Needs Assessment)	80.8%	74.5%		75.5%

Senior Health in Sarpy and Cass County

As our technology in healthcare has improved, seniors are living longer. This means that public health will have to adjust to accommodate an aging population, covering new health issues.

Falls are the number one cause of death and injury in people over the age of 65. Fall prevention programs and education outreach will be needed for prevention. Resources for those taking

care of their elderly relatives will also need to become more readily available within communities.

As a way to address the needs of our elder citizens, the SCDHW will be adding a geriatric educator to our staff.



Sarpy/Cass Department of Health and Wellness

Infant Health

Indicator

Current Data

	Sarpy	Cass	NE	US
Infant Mortality Rate (Source: 2011 PRC Community Health Needs Assessment)	4.4	5.2	5.4	6.4
per 1,000 live births, 2005-2009				
Low Weight Births (Source: 2011 PRC Community Health Needs Assessment)	6.9%	6.7%	7.1%	8.2%
2001-2007				
Number of Infants Who Are Ever Breastfed (Source: CDC, Breastfeeding Report Card, 2012)			82.2%	
			2009	
Number of New Mothers Who Breastfed for 6 Months (Source: CDC, Breastfeeding Report Card, 2012)			53.4%	
			2009	

Infant Health in Sarpy and Cass County

Infant Health data is often the most telling sign of a community's health. Prenatal care is one of the largest factors in having a healthy pregnancy and baby. Outreach to ensure that soon-to-be mothers are getting healthcare is especially important.

At the Sarpy/Cass Department of Health and Wellness, a Maternal Child Health Outreach Coordinator conducts regular home visits

for those who have requested it. She specializes in teaching mothers, often young, about the benefits of breastfeeding, and assists them in troubleshooting life factors that could negatively affect their pregnancy or newly born baby.



Mental Health

Indicator

Current Data

	<i>Sarpy</i>	<i>Cass</i>	<i>Sarpy/ Cass</i>	<i>US</i>
<i>Children Taking Prescriptions for ADD/ADHD Ages 5-17</i> <small>(Source: 2011 PRC Community Health Needs Assessment)</small>			8.1%	6.5%
<i>Adults with Symptoms of Chronic Depression Lasting 2+ Years</i> <small>(Source: 2011 PRC Community Health Needs Assessment)</small>	19.8%	18.6%		26.5%
<i>Adults with Major Depression Seeking Help</i> <small>(Source: 2011 PRC Community Health Needs Assessment)</small>	100%	81.8%		82.0%

Mental Health in Sarpy and Cass County

In Sarpy and Cass County, the second leading cause of death for those aged 15-24 is suicide. This is a major public health concern. Within these communities, mental health care will have to become more proactive to identify and assist youth who are experiencing depression, one of the leading causes of suicide.

Parents and peers should be taught to recognize signs of a person thinking about harming themselves, and how to get them proper help. This will come with community partnerships between the mental health, medical, public health, educational, and faith-based communities.

Resources about suicide prevention should be made readily available for people within the Sarpy and Cass County communities.

The SCDHW has established a workgroup to support local school efforts in behavioral health education.