



Health Department

IMPORTANT

This information has been updated as of <u>November 26, 2008</u>. Please discard all previous editions to ensure you have the most up to date information.

Community Health Status Assessment

Marion County Health Department

For further questions about data contact: health@co.marion.or.us

I:\PHM\Assessment\Data and Data sources\Data appendix, background, and master copies\Appendix\Appendix11.26.08.doc

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	2000 Population	2006 Population	Net Change	Percentage Change in Population	Total Area in Square Miles	Total Land Area in Square Miles	2000 Population Density (per square mile of land area)	2006 Population Density (per square mile of land area)
Marion								
County	286,300	306,665	20,365	7.10%	1,194.13	1.183.95	241.81	259.01
Oregon	3,436,750	3,690,505	256,755	7.50%	98,380.64	95,380.64	35.8	38.44

Notes:

- 1. Formulas:
 - a. Percentage change in Population = Net Change / Population for that year
 - b. Population Density = Total population of state or county in a particular year / total land area of state or county in square miles respectively
- 2. Total population, total area, and total land area for Marion County and Oregon for the year 2000 and 2006 were easily traceable to the US census bureau website.

Source:

U.S Census Bureau, American Community Survey, American FactFinder, Population, Housing Units, Area, and Density data set retrieved from <u>http://www.census.gov/main/www/cen2000.html</u> Population Research Center. Retrieved from: <u>http://www.pdx.edu/prc/annualorpopulation.html</u>.

Category 1: Demographics Age and Sex

	Marion County												
	Number								Percer	ntage			
		2002			2006			2002			2006		
Age Group	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	
<5	11,676	11,145	22,821	11,681	11,012	22,693	8.08%	7.61%	7.84%	7.51%	7.29%	7.4%	
514	22,435	21,305	43,740	23,234	22,458	45,692	15.53%	14.54%	15.03%	14.93%	14.86%	14.9%	
15-24	22,279	21,157	43,436	23,376	21,100	44,476	15.42%	14.44%	14.93%	15.02%	13.97%	14.5%	
25-44	42,437	41,072	83,509	46,082	39,176	85,258	29.37%	28.04%	28.70%	29.62%	25.93%	27.8%	
45-64	30,561	31,183	61,744	36,152	36,827	72,979	21.15%	21.29%	21.22%	23.24%	24.38%	23.8%	
65-74	8,076	9,346	17,422	7,962	9,311	17,273	5.59%	6.38%	5.99%	5.12%	6.16%	5.63%	
75 and older	7,036	11,292	18,328	7,094	11,200	18,294	4.87%	7.71%	6.30%	4.56%	7.41%	5.97%	
Total	144,500	146,500	291,000	155,581	151,084	306,665	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	

	Oregon											
		Number							Perce	ntage		
		2002			2006			2002			2006	
Age Group	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<5	116,502	111,166	227,668	118,826	112,084	230,910	6.71%	6.29%	6.50%	6.46%	6.05%	6.26%
514	250,741	238,117	488,858	250,241	239,480	489,721	14%	13.47%	13.95%	13.61%	12.93%	13.27%
15-24	249,536	236,969	486,505	261,815	249,314	511,129	14.36%	13.41%	13.88%	14.24%	13.46%	13.85%
25-44	519,168	503,298	1,022,466	518,525	491,736	1,010,261	29.88%	28.48%	29.17%	28.21%	26.55%	27.37%
45-64	411,786	420,123	831,909	487,014	499,931	986,945	23.70%	23.77%	23.74%	26.49%	26.99%	26.74%
65-74	103,859	120,162	224,021	109,283	119,936	229,219	5.98%	6.80%	6.39%	5.94%	6.48%	6.21%
75 and older	85,876	137,397	223,273	92,642	139,678	232,320	4.94%	7.77%	6.37%	5.04%	7.54%	6.3%
Total	1,737,468	1,767,232	3,504,700	1,838,346	1,852,159	3,690,505	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

Was Data Readily Available? Yes

Notes:

1. Data for 2000 was not available by age breakdown so 2002 data was used instead.

2. Marion county has a higher percentage of its population below the age of 44 years, and this is applicable in each of the categories of population less than 5 years, 5 - 14 years, 14 - 25 years and 25 - 44 years, when compared to Oregon. The Medicare eligible population in the state of Oregon has increased in 2006. In Marion county, as of 2006, the Medicare eligible population has decreased, and is also lesser than the Medicare eligible population of Oregon.

Source:

http://www.pdx.edu/prc/annualorpopulation.html

		Marion Co	ounty			Ore	egon	
	200	0		2006	2	000	2006	
	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
Population Subgroup (Self Identified as One Race)								
White	232,469	81.60%	260,664	83.70%	2,961,623	86.60%	3,186,177	86.10%
Black or African American	2,539	0.90%	3,360	1.10%	55,662	1.60%	63,631	1.70%
American Indian or Alaska Native	4,111	1.40%	11,671	3.70%	45,211	1.30%	67,269	1.80%
Asian	4,997	1.80%	7,552	2.40%	101,350	3.00%	135,746	3.70%
Native Hawaiian or other Pacific Islander	1,022	0.40%	787	0.30%	7,976	0.20%	8,250	0.20%
Some Other Race	30,148	10.60%	18,472	5.90%	144,832	4.20%	128,670	3.50%
Specific Ethnicity								
Hispanic or Latino	48,714	17.10%	66,545	21.40%	275,314	8.00%	379,034	10.20%

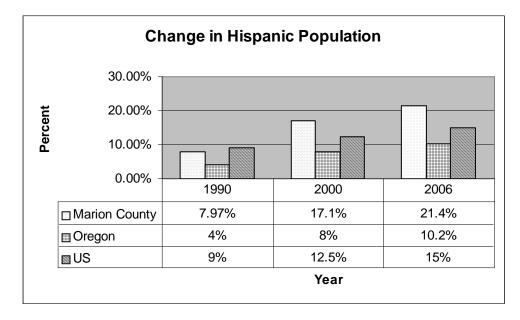
Notes:

- 1. The American Community Survey of 2006 portrays an increase in diversity in the State of Oregon since the U.S Census survey of 2000. In Oregon, there has been a percentage decrease in the White population with a percentage increase in the population of the African-American, Asian and American Indian races.
- 2. The American Community Survey of 2006 of Marion County, Oregon shows a trend similar to the population change of Oregon in terms of percentage increases in the African American, Asian and American Indian races. Unlike Oregon, Marion County in 2006 has seen an increase in the White population and decrease in the Native Hawaiian race since the Census survey of 2000.
- 3. The statistics from Marion County and Oregon reflect an increase in the percentage of Hispanic or Latino sub-population, with the percentage increase being higher in Marion County since the U.S Census of 2000. An increase in the Hispanic ethnic population raises the number of Spanish speaking people in Marion County, which in turn reflects a greater need for a bilingual staff for provision of health care services.
- 4. Please note that the break up of the total population of Oregon and Marion County into different races does not add up to the total population counts of the respective regions. The reason being that the Census Bureau has displayed data on the basis of individuals reporting their own race. So some individuals reported themselves as belonging to some other race or two or more races. Data was very easily traceable on the U.S Census Bureau website under the American Fact Finder data section.

Sources:

2000 Census data: <u>http://factfinder.census.gov/home/saff/main.html?_lang=en</u> 2006 American Community Survey: <u>http://quickfacts.census.gov/qfd/states/41000lk.html</u>

	Change in Hispanic Population									
	Marion County	Oregon	US							
1990	7.97%	4%	9%							
2000	17.1%	8%	12.5%							
2006	21.4%	10.2%	15%							



Source:

http://www.census.gov/prod/2001pubs/c2kbr01-3.pdf

http://www.census.gov/Press-Release/www/releases/archives/facts_for_features_special_editions/010327.html

		Marion	County		Oregon				
	2	2000	2	2006	2	2000	2006		
		Percentage of Population		Percentage of Population		Percentage of Population		Percentage of Population	
	Number	25+	Number	25+	Number	25+	Number	25+	
High School Graduation Rate									
	N/A	75.60%	N/A	78%	N/A	. 77.70%	N/A	81.70%	
Persons Aged 25 Years and Older With At Least A High School Diploma or									
Equivalency	46,773	26%	52,408	26%	591,229	26%	668,558	27%	
Percentage of Population with College Education or Higher (Some College+Associates+Bachelor+Graduate)									
Conege + Associates + Dacheloi + Graduate)	N/A	53.0%	N/A	54.0%	N/A	. 59.0%	N/A	61.0%	

Notes:

- 1. Marion County and Oregon have an increase in the high school graduation rates and people with education higher than college level. But Marion County has lower high school graduation rates and lesser percentage of people with education higher than college level, in terms of its population, when compared to Oregon.
- Please note the formula for High school graduation rate in Oregon and Marion County: High School graduation rate according to National Center for Education Statistics (NCES)= [Number of Regular Diplomas (CIM and Non-CIM)]. CIM: abbreviation for Certificate of Initial Mastery.
- 3. Percents for Persons Aged 25 Years and Older With At Least A High School Diploma or Equivalency = Number of persons aged 25 years and older with at least a high school diploma or equivalency/Population 25 years and older
- 4. Formula for college education or higher = Some college, no degree + associates degree + bachelors degree + graduate or professional degree/total population 25 years and over.

Sources:

http://factfinder.census.gov/home/saff/main.html?_lang=en http://www.ode.state.or.us/search/results/?id=126 http://www.ode.state.or.us/sfda/reports/r0070rpt.asp Population Research Center. Retrieved from: http://www.pdx.edu/prc/annualorpopulation.html

		Marion	County			Ore	gon	
	2	000	20)03	2	000	2003	
Non-English Speaking Persons	Number	Percentage of Population	Number	Percentage of Population	Number	Percentage of Population	Number	Percentage of Population
5 years and over who speak English less than very well	29,097	10.2%	39,122	12.6%	188,958	5.5%	244,250	6.5%
Spanish speaking who do not speak English at all (5 years and over)	2,353	0.8%	N/A	N/A	24,370	0.7%	N/A	N/A

Notes:

- 1. All the data in the form of percentages is the percentage of the total population of that county or state for which the statistics have been reported.
- 2. The ability to speak English very well or less than very well was self reported in the questionnaires by participants of the Census 2000 and American 2006 Community survey. Those who reported speaking English very well, were in general considered not to have any difficulty with English. Those who reported their ability to speak English as less than very well, were considered to have difficulty while speaking English.
- 3. Population speaking English less than very well: Oregon and Marion County have seen an increase in the population that speaks English less than very well. In fact Marion county has higher percentage of its population that is not fluent in English compared to Oregon.

Sources:

http://factfinder.census.gov/home/saff/main.html?_lang=en http://www.census.gov/acs/www/Products/Profiles/Single/2003/ACS/OR.htm

	Ν	Iarion Cou	nty		Oregon	
	2000	2006	Percentage Change	2000	2006	Percentage Change
Median Household Income (Inflation	\$40,314			\$40,916		100/
Adjusted Dollars)		\$ 45,270	12%		\$ 46,230	13%
Average Per Capita Income	\$18,408	\$20,351	11%	\$20,940	\$24,418	16.6%
Percentage Below Poverty Level:						
Children (18 years and younger)	18.1%	20.1%	2.0%	14.0%	16.8%	2.8%
Families	9.6%	10.0%	0.4%	7.9%	9.2%	1.3%
Total	13.5%	14.1%	0.6%	11.6%	13.3%	1.7%
Percentage Unemployed:						
Percentage in Labor Force aged 16 years and above	63.7%	64.5%	0.8%	65.2%	65.1%	0.1%
Percentage Unemployed	4.9%			4.2%		

Yes

Notes:

- 1. The year of the data is mentioned below the statistics, if the data is not from the year 2000 or 2006.
- 2. Oregon and Marion County have seen an increase in the household income, but Marion County has a household income lesser than Oregon by approximately \$1000.
- 3. The per capita income in Oregon and Marion County has increased since 2000. As of 2006, Marion County has a lower per capita income than Oregon. The per capita income of Oregon in the year 2006 (\$24,418) was 96.6% of the per capita income of U.S in the Year 2006 (\$25,267). The Oregon Benchmark of Year 2010 is 100%. In the year 2005, the Oregon Benchmark was 97%, which was not met by 2006 too.
- 4. In Oregon and Marion County the percentage of children below poverty line has increased since 2000. In fact Marion County has a higher percentage of children below poverty line in 2000 and 2006 compared to Oregon.
- 5. The percentages of families and total number of individuals below poverty line have increased for both Oregon and Marion County as of 2006. Marion County as of 2006 has a higher percentage than Oregon in both categories.
- 6. In Oregon the unemployment remained stable over 6 years. In Marion County the percentage of population unemployed was higher than Oregon in both years. As of 2006, the percentage of unemployment in Marion County has increased since 2000.
- 7. The data mentioned above in the form of percentages for the county or state is a percentage of the total population of the particular county or state respectively. The percentage of unemployed is a percentage of those who are in the labor force and are still unemployed.

Sources:

http://factfinder.census.gov/home/saff/main.html?_lang=en www.oregon.gov/OHPPR/RSCH/docs/OPS-healthinsurance2004.pdf www.oregon.gov/OHPPR/MAC/docs/Edlund_ChildUninsur_Jan06.pdf

	Marion County					0	regon	
	Number 2000	Number 2006	Percentage of Population 2000	Percentage of Population 2006	Number 2000	Number 2006	Percentage of Population	Percentage of Population 2006
Single Parent Families	15,914	19,584	6%	6%	177,273	208,026	5%	6%
Medicaid Eligibles	33,994	40,599	9.8%	12.6%	365,857	345,437	10.1%	9.8%
Food Stamp Recipients	36,677 (2001)	46,058 (2001)		14.8%	350,371 (2007)	451,929 (2007)		12.1%
Number of Subsidized Housing Units (Per Total Number of Households)	4,628	4,900	5.0%	4.4%	N/A	58,744	N/A	4.0%

Was Data Readily Available? Data for single parent families was but data for Medicaid eligibles, food stamps, and subsidized housing units was not.

Notes:

- 1. Marion County has a higher percentage of Medicaid eligibles than Oregon, which is evident from the higher percentage of children below poverty line, when compared to Oregon.
- 2. Marion County and Oregon have an increase in the percentage of food stamp recipients with Marion County having a higher percentage of its population receiving food stamps, when compared to Oregon.
- 3. Marion County has a higher proportion of subsidized housing units per total number of households, compared to Oregon (year 2006).
- 4. Data on number of subsidized housing units for Marion county is a combination of the data collected from housing authorities Marion County and Salem Keizer areas. The housing authorities of Salem Keizer and Marion county have a better count on the subsidized housing units in Salem Keizer and Marion county than the statewide list provided by Oregon Housing and Community Services in reference number 7 and 8 below.
- 5. The year of the data is mentioned below the statistics, if it is not from the year 2000 or year 2006.
- 6. All the data in the form of percentages is the percentage of the total population of that County or State for which the statistics have been reported.

Sources:

http://factfinder.census.gov/home/saff/main.html?_lang=en http://www.oregon.gov/DHS/healthplan/data_pubs/eligibles/2000/0700/elig0700.pdf http://www.oregon.gov/DHS/healthplan/data_pubs/eligibles/main.shtml#2003 http://www.oregon.gov/DHS/assistance/data/papage.shtml

Scott, Manager of Marion County housing Authority reported the statistics: sberglund@co.marion.or.us

Phil Dean, Salem Keizer Housing Authority (503-588-6463) pdean@city of salem.net reported the statistics on number of subsidized housing units in Salem Keizer area.

http://www.ohcs.oregon.gov/

http://www.oregon.gov/OHCS/ISD/PPR/docs/Inventory_By_County.xls

	Licensed Primary Care Physicians									
		Marion and Polk Enrolled in Mid- Independent Phy Association (M	Valley sicians	Ore	gon	US				
		Number	Percent	Number	Percent	Number	Percent			
	Internal Medicine	39	18	1774	36	134703	36			
	Family Practice	134	63	1646	33	107907	28			
2007	Pediatrics	23	11	671	13	67457	18			
	Obstetrics/Gynecology	15	7	576	12	46743	12			
	General Practice	1	<1	317	6	22983	6			
	Total	212	100%	4,984	100%	379,793	100%			

	Number Of Providers (per 100,000)							
		Marion County	Oregon					
	Primary Care	96.5	111.9					
2007	Obstetricians/Gynecologists	7.8	11.7					
	Pediatricians	11.4	15.1					

No for Licensed primary care physicians and yes for number of providers.

Notes:

- 1. Dean Larson, Executive Director of the Marion and Polk Medical Society was interviewed on June 11, 2008. Following are statements he has made regarding numbers of physicians in Marion and Polk Counties:
- 2. Currently, there is no single place where you can get one single answer. As of June 11, there are probably no more than 8 or 10 doctors in Marion and Polk Counties combined who are taking new clients. People call the medical society every day and are very angry, because they can't find a doctor. Some of the practices have a 6-month waiting list. There are many factors taken into consideration for determining whether doctors can take a new client. For example, not all physicians work fulltime, and schedules are set up differently, so we cannot say consistently that all physicians see a particular number of clients each day. Most surgeons will take any patient at any time. They are able to do this, because they can cost shift; Primary care physicians like Family Practice doctors, internists, and pediatricians, are not able to do that. Dean estimates that 50% of people entering medical school are females. Many of them become the primary care providers of children when they begin families. Thus, the bulk of female physicians work less than fulltime. Dean suggests that we request to review the Survey that Salem Hospital contracts to have done to determine the need for physicians in the Salem Hospital catchments area. Liability insurance in Oregon makes working here less attractive than working in other states where there is a cap to the amount of damages that can be sued for. Dean notes that when the state of Texas did a major liability reform it had an influx of over 6,000 physicians. Dean estimates that between 95% and 99% of physicians operating in Marion and Polk Counties are enrolled with MidValley Independent Physicians Association. Dean feels that a better count of physicians might be able to be made through medical insurance panels. That would take quite a bit of work, though. Dean agrees that the number of physicians is best counted for Marion and Polk counties rather than focusing on just Marion County. He believes that most clients receiving care in Marion and Polk County are residents of the two counties; he does not believe that many residents of neighboring counties come to Marion or Polk for medical care.
- Oregon Health Information Database defines primary care providers as including medical doctors, doctors of osteopathy, and physician assistants. Data for Obstetricians/Gynecologists is per 100,000 women aged 18 and older. Data for Pediatricians is per 100,000 children ages 0-17.

Sources:

Licensed Primary Care Physicians: Dean Larson, Executive Director of the Marion and Polk Medical Society

Number of Providers per 100,000: <u>http://www.oregonhealthinfo.com/</u>

	Primary Care Providers That Accept Medicare Patients (per 100,000)								
	(includes Bente	ion 3 on, Lane, Linn, Polk Counties)	Ore	egon					
	Total Primary Care Providers per 100,000	Primary Care Providers That Accept Medicare per 100,000	Total Primary Care Providers per 100,000	Primary Care Providers That Accept Medicare per 100,000					
2006	94.1	86.4	111.9	98.1					

	Percentage of Primary Care Providers Accepting New Medicare Patients								
	Region 3 (includes Benton, Lane, Linn, Marion, and Polk								
	Counties)	Oregon							
2006	60.9		66.2						

Yes

Notes:

- 1. Data was reported for regions and not separately for Marion County. The Oregon Health Information Database defined the regions.
- 2. Oregon Health Information Database defines primary care providers as including medical doctors, doctors of osteopathy, and physician assistants.

Source:

http://www.oregonhealthinfo.com/

	Licensed Dental Professionals (rate per total population)								
Marion County Oregon									
	Licensed Dentists	203	2,264						
2008	Denturists	5	N/A						
	Licensed Dental Hygienists	182	N/A						

Medicaid Dentist Availability							
Marion County Oregon							
2008	Dentists	59	N/A				
2008	Denturists	3	N/A				

No. Information was gathered by Dr. Daniel Saucy, a local dentist.

Notes:

1. Data was collected from the Oregon Board of Dentistry.

Sources:

Dr. Daniel Saucy, DMD Oregon Board of Dentistry Data for December 2007: <u>http://www.statehealthfacts.org/profileind.jsp?cat=8&sub=104&rgn=3</u> Kristi Jacobo, Dental/Vision Policy Analyst (DHS/DMAP), 503-945-6492

	Population Without Health Insurance											
	Region 3 (includes Benton, Lane, Linn, Marion, and Polk Counties)							Orego	n			
	NumberNumberAgesAges0-17%18-64%Total					Number Ages 0-17	%	Number Ages 18-64	%	Total	%	
2006	31,590	15.2	114,280	20.8	151,339	17.1	105,129	12.5	443,909	19.6	563,581	15.6

	Uninsured Persons										
	Mar Cou		Oreg	gon	Oregon Benchmark						
	Number	Percent	Number	Percent							
2000	48,788	48,788 17.1%		12.2%							
2006	52,798	16.9%	576,000	15.5%	8%						

Yes

Notes:

- 1. Data for "population without health insurance" was reported for regions and not separately for Marion County.
- 2. Oregon Benchmark is for 2010.

Sources:

"Population Without Health Insurance": http://www.oregonhealthinfo.com/

"Uninsured Persons": <u>http://factfinder.census.gov/home/saff/main.html?_lang=en</u> www.oregon.gov/OHPPR/RSCH/docs/OPS-healthinsurance2004.pdf www.oregon.gov/OHPPR/MAC/docs/Edlund_ChildUninsur_Jan06.pdf http://benchmarks.oregon.gov/Quan/BMReporting/default.aspx

			Н	ospital Bed	Utilization				
			2006				20	07	
	Salem Hospital	Santiam Memorial Hospital	Silverton Hospital	West Valley Hospital	US	Salem Hospital	Santiam Memorial Hospital	Silverton Hospital	West Valley Hospital
Staffed Beds	390	40	48	6	947,412	390	40	48	6
Licensed Beds	454	40	49	15	N/A	454	40	49	15
Total Acute Discharges	20,242	1,070	2,978	130	N/A	20.531	1,100	3,430	135
Total Acute Pat Days	(2000: 76,803) 86,962	(2000: 3,423) 2,818	(2000: 9,622) 8,121	(2000: 2,791) 337	N/A	93,445	3,149	9,234	322
Average Daily Census	238	8	22	1	N/A	256	9	25	1
Average Length of Stay	4.3	2.63	2.73	2.59	N/A	4.55	2.86	2.69	2.39
Occupancy	61.09%	19.30%	46.35%	15.39%	N/A	65.64%	21.57%	52.71%	14.70%
Number of Births	3,614	198	1,684	0	N/A	3,800	161	1,844	0
Number Inpatient Surgeries	6,928	392	920	0	N/A	7,418	375	1,202	0
Ambulatory Surgery Visits	5,206	1,010	3,529	221	N/A	4,519	1,179	3,747	202
Emergency Department Visits	(2000: 54,745) 74,053	(2000: 7,359) 10,181	(2000: 11,193) 19,165	(2000: 7,868) 11,840	N/A	71,808	11,155	22,423	12,819
Home Health Visits	69,488	0	0	0	N/A	65,578	0	0	0
Total Outpatient Visits	486,775	30,936	103,620	52,534	N/A	522,623	32.339	118,999	56,350

Yes, for two most recent years.

Notes:

- 1. Santiam Memorial Hospital is located in Stayton.
- 2. West Valley Hospital is located in Dallas
- 3. Jerry Nemer at the Oregon Association of Hospitals and Health Services (503-479-6010, jnemer@oahhs.org) is the contact for this indicator, and he is still collecting data.
- 4. Original indicator asked for the number of licensed hospital beds per total population. The information provided here is the best information that is presently available.
- Data for US is total staffed beds in all U.S. registered hospitals. Registered hospitals are those hospitals that meet the American Hospital Association's (AHA) criteria for registration as a hospital facility. Registered hospitals include AHA member hospitals as well as nonmember hospitals. US data was not available for 2007.

Sources:

Oregon Association of Hospital Health Systems: Oregon Hospital Utilization: <u>http://www.oahhs.org/data/utilization.php</u> <u>http://www.aha.org/aha/resource-center/Statistics-and-Studies/fast-facts.html</u>

	Medicare Primary Physician Availability								
			Marion County						
		Participating Physicians	Non-Participating Physicians	On Both Lists*					
	Family Practice	57	33	9	N/A				
2008	General Practice	2	4	0	N/A				
	Internal Medicine	57	36	13	N/A				

No. Data had to be collected from the Marion-Polk County Medical Society

Notes:

- 1. Participating physicians are defined as "agreeing to accept assignment on all terms."
- 2. Non-participating physicians are defined as "choosing on a claim-by-claim basis whether or not to accept assignment.
- 3. Jodi Berry indicated that at this time there is no formal system in place that totals physicians, on a daily basis, regarding who is and who is not accepting new patients, Medicare, or otherwise.
- 4. This data is updated as of May 21, 2008.

Sources:

Jodi Berry, Marion-Polk County Medical Society http://www.medicare.gov/Physician/Home.asp?bhcp=1

	Visiting Nurse Services/In Home Support Services										
	Marion County										
	Average WaitBillingCapacityPolicyPatients										
	First Call Home Health Agency	Varies	All	Varies	00						
2008	Providence Benedictine Nursing Center	Varies	All	Varies	80 facilities						
	Salem Hospital Home Health Care	No Max Capacity	All	48 hours maximum							

No. Data was only available on facilities for the state of Oregon and was not broken down by county.

Notes:

- 1. Billing policy for "all" includes Medicaid, Medicare, and Private insurance.
- 2. Data for First Call Home Health Agency for capacity and average wait period for new patients varies. The company has 3 full-time physical therapists and numerous full and part-time nurses and occupational therapists. Their capacity depends on what services are needed and the average wait time for new patients also depends on what services are needed. Patients needing nursing services are accepted quicker than patients needing physical therapy and/or occupational therapy.
- 3. Data for Providence Benedictine Nursing Center for capacity and average wait period for new patients varies. The company employs nurses, physical therapists, occupational therapists, speech and language pathologists, home health aids, social workers, and mental health nurses. They provide services for a 30-mile radius in Mt Angel and capacity depends on which services are needed. The average wait period for new patients depends on the current load and patients needing nursing services are accepted quicker than patients needing any of their other services.
- 4. Salem Hospital Home Health Care has no maximum capacity. The facility has an average of 450 people, and has been as high as 550, but no maximum capacity is in place. Their average wait period for new patients is a 48 hour maximum turnaround policy.
- 5. There are 80 facilities licensed in the state of Oregon but data for their capacity, billing policy, and average wait time for new patients is not readily available.

Sources:

Oregon DHS, Virginia Holt Betty McGarry, First Call Home Health Agency Carolyn Popma, Providence Benedictine Nursing Center Tammy Schnabel, Salem Hospital Home Health Care

Adults Who Have Someone That They Consider as Their Own Personal Doctor								
Marion County Oregon								
2002-2005 92.1 90.4								

Yes

Notes:

- 1. Original indicator stated, "proportion of population without a regular source of primary care (including dental services). Data was not readily available, so we are using "Adults Who Have Someone That They Consider as Their Own Personal Doctor," not including dental services.
- 2. The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling landline telephones, the data does not represent those populations who do not have access to a landline telephone.
- 3. Data is age-adjusted percentage for 2002-2005. Actual percentages are available online for each year 2000-2007 and can be viewed as a total percentage and according to age groups. Data demonstrates that older age groups are more likely to have a personal doctor than younger people. This may be of interest to compare to our population breakdown, since Marion County's population demonstrates a larger number of young adults than senior citizens.

Source:

State of Oregon Center for Health Statistics Adult BRFSS Survey, Select Topics by County: http://www.dhs.state.or.us/dhs/ph/chs/brfs/county/0205/hcaaaowndoc.shtml

	Per Capita Health Care Spending for Medicare Beneficiaries												
	Ma	rion Coun	ty	Orego	on State Avera	ge							
	Part A	Part B	Total	Part A	Part B	Total							
2008	402.56	369.96	772.52	not given	not given	720.98							
2007	384.91	347.13	732.04	not given	not given	683.2							
2006	363.58	322.04	685.62	not given	not given	638.18							
2005	361.59	292.63	654.22	not given	not given	608.95							
2004	339.91	273.98	613.89	not given	not given	570.87							
2003	313.47	250.63	564.1	not given	not given	522.65							
2002	302.35	250.69	553.04	not given	not given	512.4							
2001	299.98	225.02	525	not given	not given	486.86							
2000	227.59	174.02	401.61	not given	not given	419.52							

Yes

Notes:

- 1. In 2008 Medicare Part A (Hospital Insurance) helps cover the following:
 - a. Inpatient care in hospitals. This includes critical access hospitals and impatient rehabilitation facilities.
 - b. Inpatient stays in a skilled nursing facility (not custodial or long-term care)
 - c. Hospice care services
 - d. Home health care services
 - e. Inpatient care in a Religious Non-medical Health Care Institution (coverage is related to non-medical, non-religious parts of care) (medicare.gov)
- 2. In 2008 Medicare Part B (Medical Insurance) helps cover medically necessary services like doctors' services, outpatient care, and other medical services that Part A doesn't cover. Part B also covers preventative services. (medicare.gov)
- 3. Per Capita Health Care Spending varies widely from State to State and even among counties within a state.
- 4. More than half of Oregon's counties are in the bottom fifth of Medicare per capita spending for Medicare beneficiaries. Marion County is one of the Oregon Counties in the bottom fifth. Other states that experience this statistic are Vermont, Idaho, New Mexico, South Dakota, and Iowa.
- 5. High spending areas for Medicare include most of Texas, Louisiana, Florida and Southern California, while the Pacific Northwest, Iowa, North Carolina, and Virginia experience low spending levels.
- 6. Nationwide, Medicare spending per capita grew almost 45 percent from \$5,547 in 1998 to \$8,027 in 2005. This translates into an annual growth rate of 5.4 percent. Over the same time period the consumer price index grew at an annual rate of 2.8 percent. The Medicare Trustees and the Congressional Budget Office both predict that Medicare spending as a percentage of gross domestic product (GDP) will double by 2030.
- 7. Spending patterns do not necessarily coincide with more effective care or better health outcomes.
- 8. Better and more efficient management of Medicare spending is a strong focus for policy development. Methods developed for Medicare may be useful to other payment systems.
- 9. A Policy Analysis by Hopson and Rettenmaier for the National Center for Policy Analysis recommends several market-based reforms that will elicit provider responses leading to savings in Medicare per capita cost.

Sources:

Oregon Association of Hospital Health Systems: AAPCC Rates: http://www.oahhs.org/data/aapcc.php

U. S. Department of Health and Human Services. The Official U.S. Government Site for People with Medicare: www.medicare.gov Hopson, Amy and Rettenmaier, J., Medicare Spending Across the Map, July 2008

www.ncpa.org/pub/st/st313/st313.pdf

Full-time Public Health Department Equivalent Employees per 1,000 Population											
		Marion Cour	ıty	Oregon							
	FTE	Population	# per Total Population	FTE	Population	# per Total Population					
FY 2003-2004 (actual)	217.5	295,900	0.74		3,541,500						
FY 2004-2005 (actual)	266.6	298,450	0.89		3,582,600						
FY 2005-2006 (actual)	291.4	302,135	0.96		3,631,440						
FY 2006-2007 (actual)	272.2	306,665	0.89		3,690,505						
FY 2007-2008 (adopted)	296.4	311,070	0.95		3,745,455						
FY 2008-2009 (proposed)	309.5										

Yes

Notes:

1. Data on the number of FTEs at the state level is still being collected.

Sources:

Marion County FTE information provided by Judy Cleave, Supervisor, Marion County Health Department (jcleave@co.marion.or.us)

Health Department Total Operating Budget per Total Population											
	I	Marion County	y	Oregon							
	Budget \$	Population	Budget per total population	Budget \$	Population	Budget per total population					
FY 2003-2004 (actual)	21,199,497	295,900	71.64		3,541,500						
FY 2004-2005 (actual)	23,261,358	298,450	77.94		3,582,600						
FY 2005-2006 (actual)	25,824,940	302,135	85.48		3,631,440						
FY 2006-2007 (actual)	25,395,481	306,665	82.81		3,690,505						
FY 2007-2008 (adopted)	29,268,218	311,070	94.09		3,745,455						
FY 2008-2009 (proposed)	30,959,550										

Yes

Notes:

- 1. Excluded non-operating expenditures such as Contingency, Ending Fund Balance and Pass-Thru contracts.
- 2. Marion County FY runs July 1 through June 30.
- 3. Population figure is as of July 1 for the first year of the fiscal year.
- 4. Data on the state budget is still being collected.

Sources:

Ryan Matthews, Fiscal Analyst

(1) Program Area	FY 03-04 Actual	FY 04-05 Actual	FY 05-06 Actual	FY 06-07 Actual	FY 07-08 Adopted	FY 08-09 Proposed
Program Area	Actual	Actual	Actual	Actual	Adopted	Proposed
Public Health						
Communicable Disease Services	1,797,429	1,693,069	1,612,383	1,640,909	1,882,493	1,879,508
Immunization	514,022	527,655	609,591	503,927	624,862	656,757
Prevention/Rural/HIV	847,244	934,849	1,188,458	1,082,761	1,150,962	1,184,962
Environmental Health & Vital Stats	855,760	897,752	975,161	915,895	1,010,854	1,047,125
Early Childhood & Women's Health	2,171,933	2,325,322	2,109,395	1,880,410	2,225,890	2,377,714
WIC	1,171,556	1,186,625	1,252,213	1,328,461	1,285,604	1,551,131
Public Health Subtotal	7,357,944	7,565,272	7,747,201	7,352,363	8,180,665	8,697,197
Behavioral Health Developmental Disabilities	2,084,974	2,480,772	3,088,488	3,130,238	3,713,750	4,485,293
Outpatient Behavioral Health Drug Treatment Services	5,391,603 425,451	4,561,205 550,149	5,242,079 725,238	4,957,375 837,812	5,054,779 1,158,082	5,348,540 1,617,171
Community and Provider Services	1,446,386	1,273,294	1,682,062	2,014,148	2,221,431	2,444,152
Acute/Residential/Forensic	2,547,711	4,364,875	4,607,731	4,202,886	4,826,749	5,263,614
Gero-Psych	71,578	198,440	459,958	716,740	827,728	857,572
Behavioral Health Subtotal	11,967,703	13,428,735	15,805,556	15,859,199	17,802,519	20,016,342
Health Administrative Services (includes both PH and BH costs)	1,873,850	2,267,351	2,272,183	2,183,919	3,285,034	2,246,011
Total Operating Budget	21,199,497	23,261,358	25,824,940	25,395,481	29,268,218	30,959,550
,						
FTE	217.50	266.60	291.40	272.15	296.44	309.45

Marion County Health Department

Was Data Readily Available?

Yes

Notes:

- 1. Excludes Non-Operating expenditures such as Contingency, Ending Fund Balance and Pass-Thru contracts
- 2. Supplied by Ryan Matthews, Fiscal Analyst. This document breaks the budget out to demonstrate public health, behavioral health, and administrative services budgets. Program areas within public health and behavioral health are also broken out to demonstrate budget trends between FY 03-04 and FY 080-09.

Source:

Ryan Matthews, Fiscal Analyst

		FY 20	02-03		on County Hea 03-04	-	ent Annual Stat 104-05		eport 05-06	FY 20	06-07	FY 20	07-08
				Unduplicat		Unduplicat		Unduplicat		Unduplicat		Unduplicat	
Program Area			Number of	ed	Number of	ed	Number of	ed	Number of	ed	Number of	ed	Number of
	I	ed Clients	Encounters	Clients	Encounters	Clients	Encounters	Clients	Encounters	Clients	Encounters	Clients	Encounters
l Developmental	I		I		I							l	I
Disabilities		1,757	10,903	1,727	11,815	1,722	11,586	2,927	11,318	1,785	11,423	1,861	11,612
Acute		3,017	15,176	2,916	14,086	3,157	16,155	3,357	9,688	3,485	16,347	5,675	16,745
Alcohol & Drug Treatment	(1)	655	120,487	649	97,255	450	104,243	3,348	103,205	477	48,059	470	50,637
IDS & Out-of-Panel MH Providers		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	3,953	60,178	3,914	54,544
Behavioral Health -		7 000	100 400		70.405	F 17F	04.000	2 5 7 0	(2.004	F ())		4 200	(0.010
Other		7,992	109,430	5,953	79,495	5,175	84,398	3,578	63,984	5,633	63,685	4,300	60,910
Immunizations		1,167	3,364	5,803	7,653	5,627	6,961	7,480	11,245	6,529	8,135	11,060	16,058
	(2)	5,860	N/A	14,779	91,176	15,337	112,346	15,215	110,949	15,967	112,505	10,772	102,452
Public Health - Other		8,344	38,859	8,415	33,469	7,995	33,879	8,636	19,348	9,225	25,692	9,261	31,064
TOTAL CLINIC VISITS			298,219		334,949		369,568		329,737		346,024		344,022
Environmental Health Inspections		N/A	3,298	N/A	3,578	N/A	3,657	N/A	3,685	N/A	3,875	N/A	2,795
EH Food Handler Cards Issued		N/A	6,996	N/A	7,792	N/A	10,524	N/A	11,226	N/A	17,655	N/A	17,645
Birth/Death Certificates Issued	(3)	N/A	7,488	N/A	7,736	N/A	7,715	N/A	7,764	N/A	8,049	N/A	15,416
TOTAL		28,792	316,001	40,242	354,055	39,463	391,464	44,541	352,412	47,054	375,603	47,313	379,878
OUTBREAKS		237	9	454	15	341	16	493	28	789	28	406	22
													<i></i>

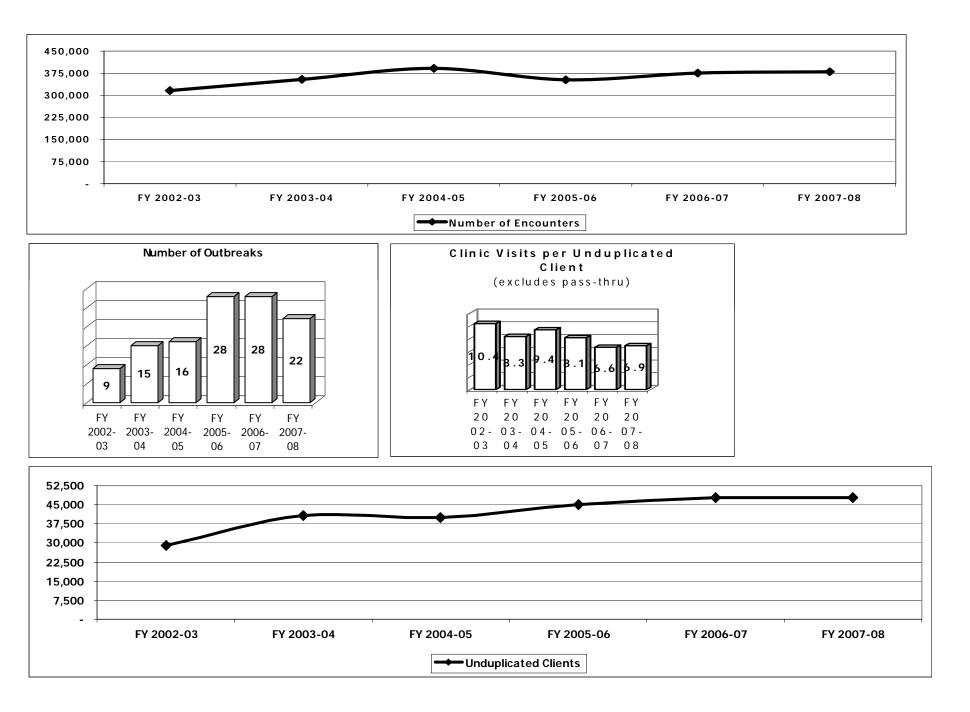
(1) FY 06-07 reflects a change in how the dispensary is billed. In the past dosing was billed daily, whether they were seen or not, which artificially inflated the # of encounters.

(2) Number of Encounters for WIC is only available after the TWIST conversion in November

2003.

(3) FY 2007-08 count of Death Certificates issued includes additional copies ordered for life insurance, Social Security, creditors, etc.

(4) Subcontractor statistics: FY 05-06 client count (4,007), FY 06-07 client count (3,953) and FY 07-08 client count (5,561) are included.



Proportion of persons satisfied with the quality of life in the community								
	Marion County	Oregon						
2008	66 % rate as Good or Excellent	N/A						

Yes, from the survey results

Notes:

The survey questions asking residents to rate their health... Total 53% rated health as good 23% rated health as fair 19% health is excellent 6% health was poor.

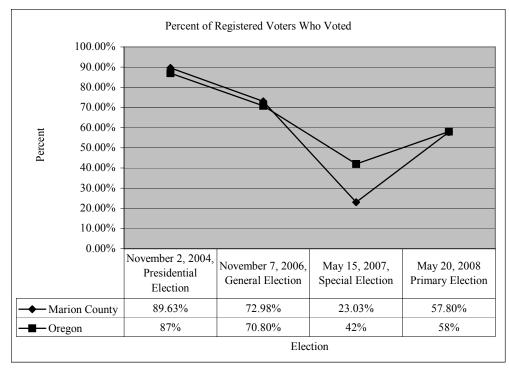
43% of residents reported chronic illnesses with these as the most reported: depression, diabetes, asthma, arthritis and high blood pressure.

Resident Survey responses on satisfaction with quality of life in Marion County:Good: 51%(1436 responses)Fair: 27%(761)Excellent: 15%(410)Poor: 7%(199)

Source:

Marion County Community Health Assessment survey

Percent registered to vote and percent of registered voters who voted out of eligible voters									
Percent registered to vote	Marion County	Oregon	US (2005)						
November, 2006	60% (136,572 people)	73.3 % (1,976,669 people)	72% (142 million)						
Percent of registered voters who voted	Marion County	Oregon	US (2005)						
November 2, 2004 Presidential Election	89.63%	87%	89% (126 million)						
November 7, 2006 General Election	72.98%	70.8%							
May 15, 2007, Special Election	23.03%	42%							
May 20, 2008 Primary Election	57.8%	58%							



Sources:

http://www.co.marion.or.us/CO/elections/may1507ballotreturnrate.htm

- http://www.co.marion.or.us/CO/elections/may202008ballotreturn.htm
- http://www.oregonvotes.org/may202008/cum.pdf
- http://www.co.marion.or.us/CO/elections/ReturnRates/nov072006brr.htm
- http://apps.co.marion.or.us/co/elections/results/NOVACC04.TXT
- http://blog.oregonlive.com/politics/vote_2007/
- http://www.oregonvotes.org/nov72006/g06stats.pdf
- http://washingtonpost.com/wp-dyn/articles/A40032-2004Dec31.html
- http://www.co.marion.or.us/CO/elections/ReturnRates/nov072006brr.htm
- http://www.pdx.edu/media/p/r/PRC PopEst Ages0-17 2007.xls
- http://oregonvotes.org/HAVA/elect q a/voter reg/howmany reg.html
- http://www.census.gov/Press-Release/www/releases/archives/voting/004986.html

Was Data Readily Available? Yes

Notes:

- For Marion County, the data for percent registered to vote is based on a population of eligible voters of 229,514 in 2006 and 136,572 registered voters in 2006.
- 2. For Oregon, the data on percent registered to vote is based on a population of eligible voters of 2.7 million in 2006 and 1,976,669 registered voters in 2006.
- November 2, 2004 presidential election for Marion County is based on 145,717 registered voters for 2004 and 130,609 returned votes.
- 4. November 2, 2004 presidential election for Oregon data is number of people who were eligible to vote, and registered, who voted in the presidential election
 - on November 2, 2004.
 - November 7, 2006 general election data got Marion County is percentage of ballots returned, based on 136,572 registered voters.
 - 6. November 7, 2006 Oregon general election data was taken directly from the website, already calculated.
 - May 15, 2007 special election data got Marion County is percentage of ballots returned, based on 137,280 registered voters by May 22, 2007.
 - May 15, 2007 Oregon special election data is based on 2,867,908 eligible voters in Oregon for 2007, and 1.2 million votes received.
 - Data for Marion County for the May 20, 2008 Primary Election is based on 83,259 returned ballots 144,019 registered voters as of May 7, 2008.
 - Data for Oregon for the May 20, 2008 primary election is based on 1,171,338 returned ballots and 2,028,009 registered voters as of May 20, 2008.

Number of parks									
Marion County Oregon									
City	39	N/A							
County	21	N/A							
State	5	185							
Other	47	N/A							
Total	112	185							

Yes and No. Data for Marion County was but more specific data for Oregon was not.

Notes:

- 1. The parks included on the list for Marion County included all types of parks such as City, County, State, and other parks.
- 2. The parks included on the list for Oregon were state parks, state recreation areas, state natural areas, and other facilities in the U.S. state of Oregon managed by the Oregon State Parks and Recreation Department.

Sources:

http://oregon.hometownlocator.com/features/cultural,class,Park,scfips,41047.cfm http://en.wikipedia.org/wiki/List_of_Oregon_state_parks

Number of Neighborhood Crime Watch Areas										
		Salem	Silverton	Stayton	Woodburn	Oregon				
Number of Areas	2008	8	N/A	2	6	N/A				
Number of participating households	2008	5,350	N/A	20	60	N/A				

No

Notes:

- 1. Contact was made with several people at the Sheriff's office. Both people indicated that data was not kept on the actual number of crime watch areas in Marion County, only data on Salem specifically. Bob Schuegle expressed an interest in keeping data on this in the future, as it could be helpful for events such as emergency preparedness.
- 2. Numbers for Silverton are not available because the neighborhood watch areas are determined and maintained by each individual neighborhood and not associated with the police department.
- 3. The city of Woodburn has 31 neighborhoods on file, but only 6 of them are active. Of the 6 that are active, each area includes about 10 households.
- 4. Data is not available for this indicator for the state of Oregon.

Sources:

Jennifer Brewster, Marion County Sheriff's Department Bob Schuegle, Marion County Sheriff's Department Angie Hedrick, Salem Police Department Nick Wilson, Woodburn Police Department

Num	Number of organized after school recreational/educational activities for youth									
	Salem	Silverton	Stayton	Woodburn	Oregon					
2008	63 activities	43 activities	3 activities	Serving 320 kids per day	N/A					

No. Data was difficult to find and none was available for Oregon

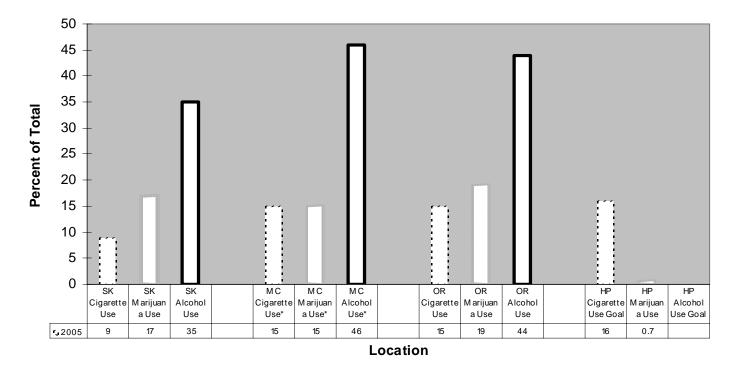
Notes:

- 1. The data for the City of Salem is recreational opportunities (not school sponsored) for youth in 2005. This includes activities such as: Little League, Boy/Girl Scouts, Softball, Baseball, Soccer, Football, Volleyball, Bowling, Swimming, and YMCA.
- 2. For Silverton, there are 43 activities offered through Silverton Together and activities offered through the YMCA are registration-based and vary daily.
- 3. For Stayton the YMCA offers numerous clubs and sport activities weekly but the number of activities varies daily and the pool offers approximately 3 activities on a regular basis.
- 4. Data for Woodburn is children, between the ages of 5-18, who participate in either an after school club or the Teen Scene program.
- 5. At this time it appears that data for this indicator is not kept for Oregon.
- 6. The majority of these activities involve a fee making them hard to access for people with no or low income.

Sources:

Bruce Bolton, City of Salem, Parks, Recreation, and Community Services Department Doreen Kelly, Resource Coordinator, Silverton Together Stu Spence, Recreation Services Manager, City of Woodburn

11th Graders Who Reported Use in the Past 30 Days, 2005



- SK: Salem Keizer School District. Salem Keizer School District does not participate in the Oregon Healthy Teens Survey. The Oregon Healthy Teens Survey is the source of data for Marion County.
- MC: Marion County. Data comes from the Oregon Healthy Teens Survey.
- HP: Healthy People 2010 Indicator Goals. There is no HP 2010 Goal for 11th grade alcohol use.
- *: Marion County data does not include Salem Keizer School District.

WAS THIS DATA READILY AVAILABLE?

Yes.

COMMENTS:

The Healthy People 2010 goal for Cigarette use in 11th grade is 15%. The Healthy People 2010 goal for Marijuana use in 11th grade is .7%. There is no Healthy People 2010 Goal for alcohol use in 11th grade.

NOTES:

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000.

Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include youth from Salem or Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. The data for cigarette use among 8th and 11th grade students in Salem-Keizer School District is provided.

For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison. Data by gender is not available.

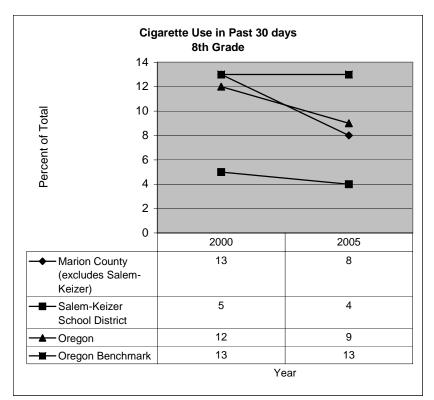
Sample Size:

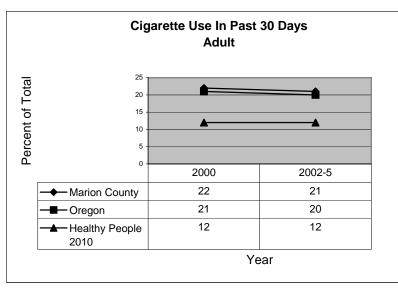
Sample size was not available for Marion County for 2000 for youth or adults. Sample size was not available for Salem-Keizer for 2000 or 2005. Sample size for Marion County 8th graders for 2005 was 1,350. Sample size for Oregon 8th graders for 2000 was 5,359. Sample size for Oregon 8th graders for 2005 was 3,354. Sample size for Marion County 11th graders was 1,207. Sample size for Oregon 11th graders for 2000 was 3,900. Sample size for Oregon 11th graders for 2005 was 2,546. Sample size for Marion County adults for 2002-2005 was 2,714. Sample size for Oregon adults for 2000 was 7,703. Sample size for Oregon adults for 2002-2005 was 37,333.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling landline telephones, the data does not represent those populations who do not have access to a landline telephone.

SOURCES:

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: <u>http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml</u>
- 2. Salem-Keizer School District Drug and Alcohol Survey. Available from: Cheryl Page, Salem-Keizer School District.
- 3. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml
- 4. http://www.oregon.gov/DAS/OPB/2005report/obm49.shtml





WAS THIS DATA READILY AVAILABLE? Yes.

COMMENTS:

The percentage of 8th and 11th graders who reported smoking cigarettes in the past 30 days in 2005 is the same for Marion County (rural areas) and Oregon. Fewer 8th and 11th graders in Salem Keizer report cigarette use than 8th and 11th graders in Marion County and Oregon. Cigarette use seems to increase between 8th and 11th grade; significantly more 11th graders report cigarette use than 8th graders in Salem-Keizer, Marion County, and Oregon. However, the percentage of 11th graders in Salem-Keizer, Marion County, and Oregon who reported cigarette use in the past 30 days was less than the Healthy People 2010 Benchmark.

Cigarette smoking among 8th and 11th graders in Salem-Keizer, Marion County (rural areas) and in Oregon has decreased since 2000. However, smoking has remained stable for adults in Marion County and in Oregon.

NOTES:

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000. Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include youth from Salem or Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. The data for cigarette use among 8th and 11th grade students in Salem-Keizer School District is provided.

For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison. Data by gender is not available.

Sample Size:

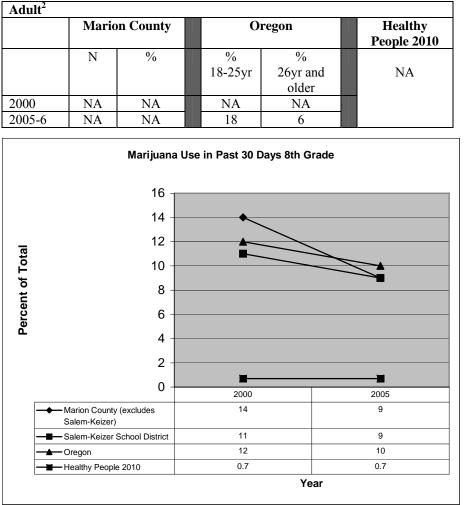
Sample size was not available for Marion County for

2000 for youth or adults. Sample size was not available for Salem-Keizer for 2000 or 2005. Sample size for Marion County 8th graders for 2005 was 1,350. Sample size for Oregon 8th graders for 2000 was 5,359. Sample size for Oregon 8th graders for 2005 was 3,354. Sample size for Marion County 11th graders was 1,207. Sample size for Oregon 11th graders for 2000 was 3,900. Sample size for Oregon 11th graders for 2005 was 2,546. Sample size for Marion County adults for 2002-2005 was 2,714. Sample size for Oregon adults for 2000 was 7,703. Sample size for Oregon adults for 2002-2005 was 37,333.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

SOURCE:

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml
- 2. Salem-Keizer School District Drug and Alcohol Survey. Available from: Cheryl Page, Salem-Keizer School District.
- 3. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml
- 4. http://www.oregon.gov/DAS/OPB/2005report/obm49.shtml



Youth data is readily available. Adult data is only available for Oregon.

COMMENTS:

The percent of 8th and 11th graders in Salem-Keizer and Marion County (rural areas) who reported using marijuana in the past 30 days has decreased since 2000, but is still significantly higher than the Healthy People 2010 Benchmark. Marijuana use among 8th and 11th graders in Oregon (as a whole) has also decreased since 2000, but the decrease is not as dramatic. In 2005, Marijuana use among 11th graders in Salem-Keizer and Marion County was significantly less than marijuana use among 11th graders in Oregon.

Marijuana use seems to increase with age up to 25 years, but then significantly decreases at 26 years of age and older.

There is a significant difference in marijuana use in 11th graders between females and males. In Marion County, in 2005, only 12 percent of females report marijuana use in the past 30 days compared to 17 percent of males. In Oregon, 19 percent of females report marijuana use in the past 30 days compared to 25 percent of males for 2000, and 17 percent

of females report marijuana use in the past 30 days compared to 21 for 2005.

NOTES:

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000.

Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. The data for marijuana use among 8th and 11th grade students in Salem-Keizer School District is provided.

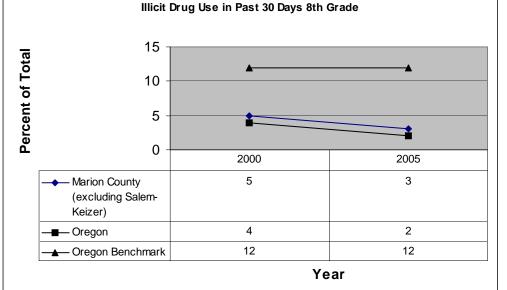
Sample Size:

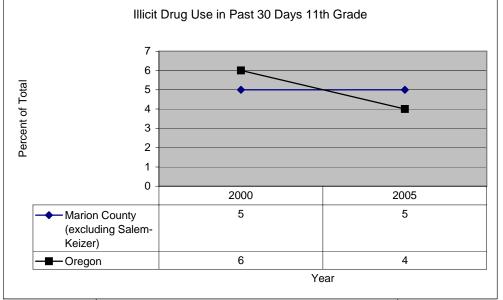
Sample size for Marion County for 2000 was not available for youth or adults. Sample size for Marion County for 8th graders for 2005 was 1,144. Sample size was not available for Salem-Keizer for 2000 or 2005. Sample size for Oregon for 8th graders for 2000 was 5,304. Sample size for Oregon for 2005 was 3,045. Sample size for Marion County for 11th graders for 2005 was 1,186. Sample size for Oregon for 11th graders for 2000 was 2,510. Sample size for adults for 2005-2006 was not available.

2010 benchmark for youth - denominator is youth 12-17 years of age. Adult benchmark is not available.

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: <u>http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml</u>
- 2. Salem-Keizer School District Drug and Alcohol Survey. Available from: Cheryl Page, Salem-Keizer School District.
- 3. National Survey on Drug Use and Health. Available at: <u>http://www.oas.samhsa.gov/2k6State/Oregon.htm</u>

Adult ²					
	Mario	on County	O	regon	Healthy People 2010
	N	%	18-25 yr	26yr and older	
2000	NA	NA	NA	NA	3.2%
2002- 2005	NA	NA	10	3	





Youth data is readily available. Adult data is only available for Oregon.

COMMENTS:

Illicit drug use among 8th graders in Marion County and Oregon decreased from 2000 to 2005. Illicit drug use among 11th graders in Marion County remained the same from 2000 to

2005, but decreased in Oregon. In general, more boys reported use of illicit drugs than girls.

Among adults, a higher percentage of people aged 18-25 years reported illicit drug use in the past 30 days than people aged 26 and older. The percentage of 18-25 year olds using illicit drugs (10%) is much higher than the Healthy People 2010 goal (3%). On the other hand, the percentage of adults aged 26 and older who reported using illicit drugs in the past 30 days is in line with the Healthy People 2010 Benchmark.

NOTES:

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion

County data by gender is not available for the year 2000.

Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. "Illicit Drug Use" is not included in the Salem-Keizer Drug Alcohol Survey, so this data is not available for Salem-Keizer.

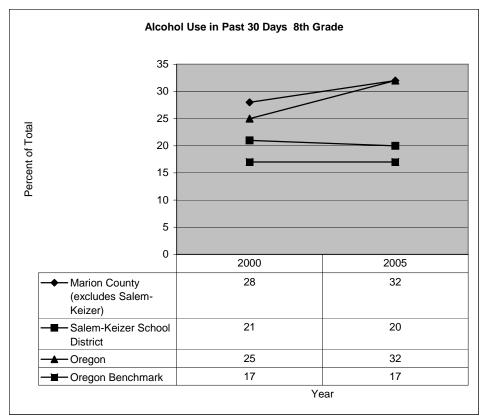
Sample Size:

Sample size was not available for Marion County for 2000 for youth or adults. Sample size for Marion County for 8th graders for 2005 was 1,206. Sample size

for Oregon for 8th graders for 2000 was 5,261. Sample size for Oregon for 8th graders for 2005 was 2,929. Sample size for Marion County for 11th graders for 2005 was 1,169. Sample size for Oregon for 11th graders for 2000 was 3,874. Sample size for Oregon for 11th graders for 2005 was 2,482. Sample size was not available for Marion County for adults for 2005-2006. Sample size was not available for Oregon for adults for 2005.

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml
- 2. National Survey on Drug Use and Health. Available at: http://www.oas.samhsa.gov/2k6State/Oregon.htm
- 3. http://www.oregon.gov/DAS/OPB/2005report/obm49.shtml

Adult ³						
	Mario	n County	Oreg	on	-	Healthy People 2010
	N	% Total	N	% Total		
2000	NA	NA	2520	58		NA
2002- 2005	1741	55	24120	58		



Yes.

COMMENTS:

In general, alcohol use in past 30 days has increased among 8th and 11th graders in Marion County (rural areas) and Oregon from 2000 to 2005-2006. Interestingly enough, alcohol use among 8th and 11th graders in Salem-Keizer decreased during this period.

In Marion County (rural areas) 8th and 11th grade more girls reported alcohol use than boys. In Oregon, 8th grade more girls reported alcohol use than boys; however, by 11th grade, more boys reported alcohol use than girls. Among adults, more males report alcohol use than females in both Marion County and in Oregon.

NOTES:

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000. Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. The data for alcohol use in the past 30 days among Salem-Keizer School District 8th and 11th graders is provided.

Sample Size:

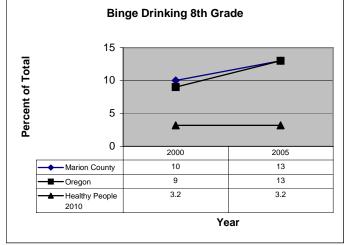
Sample size was not available for Marion County for 2000 for youth or adults. Sample size was not available for Salem-Keizer for 2000 or 2005. Sample size for Marion County 8th graders for 2005 is 1,305. Sample size for Oregon for 8th graders for 2002 was 5,243. Sample size for Oregon for 8th graders for 2005 was 3,167. Sample size for Marion County for 11th graders for 2005 was 1,191. Sample size for Oregon for 11th graders for 2000 was 3,871. Sample size for Oregon for 11th graders for 2005 was 2,523. Sample size for Oregon for 2005 was 2,523. Sample size for Oregon for 11th graders for 2002-2005 was 1,741. Sample size for Oregon for adults for 2000 was 2,520. Sample size for Oregon for adults for 2002-2005 was 24,120.

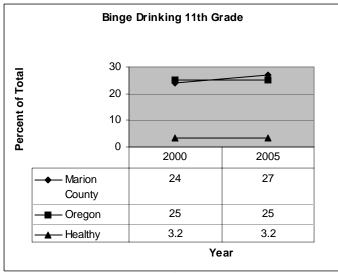
For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: <u>http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml</u>
- 2. Salem-Keizer School District Drug and Alcohol Survey. Available from: Cheryl Page, Salem-Keizer School District.
- 3. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml

Adult ²	Marion	County	Oreg	on	Healthy People 2010
	Ν	%	Ν	%	
		Total		Total	
2000	NA	NA	1451	24	13.4%
2002-5	1731	13	23967	14	





COMMENTS:

From 2000 to 2005-2006, binge drinking (5 or more drinks in one setting) in past 30 days increased among 8th and 11th graders in Marion County (rural areas). Binge drinking in the past 30 days also increased among

Oregon 8th graders during this period, and stayed the same among Oregon 11th graders. Binge drinking among 8th and 11th graders is significantly higher than the Healthy People 2010 Benchmark of 3.2%.

Among adults, more males reported binge drinking than females. Binge drinking among males in Marion County and males Oregon is significantly higher than the Healthy People 2010 goal of 13.4%; binge drinking among females in Marion County and in Oregon is below the Healthy People 2010 Benchmark.

NOTES:

- 8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000.
- Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.
- Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. The binge drinking question of the Salem-Keizer School District survey is for number of times binge drinking in the past 2 weeks (instead of past 30 days); therefore, data is not provided in the tables.
- For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison.

Sample Size:

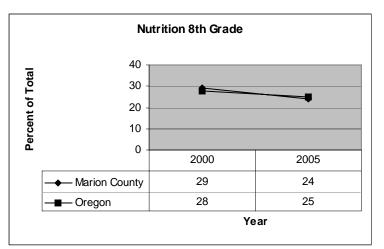
Sample size was not available for Marion County for 2000 for youth or adults. Sample size for Marion County for 8th graders for 2005 was 1,300. Sample size for Oregon for 8th graders for 2000 was 5,263. Sample size for Oregon for 8th graders for 2005 was 3,111. Sample

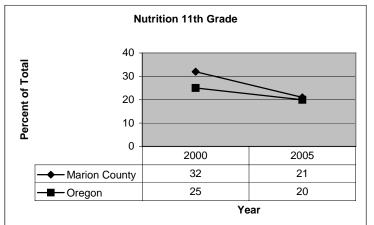
size for Marion County for 11th graders for 2005 was 1,181. Sample size for Oregon for 11th graders for 2000 was 3,879. Sample size for Oregon for 11th graders for 2005 was 2,484. Sample size for Marion County for adults for 2002-2005 was 1,731. Sample size for Oregon for adults for 2000 was 1,451. Sample size for Oregon for adults for 2002-2005 was 23,967.

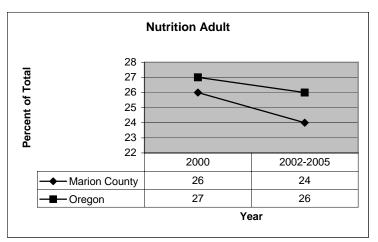
The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

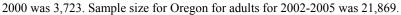
2010 Benchmark - youth benchmark has a denominator of youth 12-17 years old.

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: <u>http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml</u>
- 2. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.sht









The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

Separate benchmarks are set for the number of servings of fruit and the number of servings of vegetables; there is no benchmark for the combined servings.

SOURCES:

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml
- 2. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml

WAS THIS DATA READILY AVAILABLE? Yes.

COMMENTS:

Overall, about one quarter of 8th graders in Marion County and in Oregon consumed 5 or more fruits and vegetable per day in 2005. One fifth of 11th graders in Marion County and Oregon consumed 5 or more fruits and vegetables per day in 2005. For both 8th and 11th graders, the percent of students who consumed five or more fruits and vegetables decreased from 2000 to 2005.

The percentage of adults who reported consuming five or more fruits and vegetables per day decreased slightly from 2000 to 2006 in Marion County (26% vs 24%) and in Oregon (27% vs 26%).

NOTES:

Eating \geq 5 fruits/vegetables a day was the only nutrition question asked to both youth and adults.

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000. Salem-Keizer School District does not participate in the Oregon

Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. Nutrition is not included in the Salem-Keizer Drug and

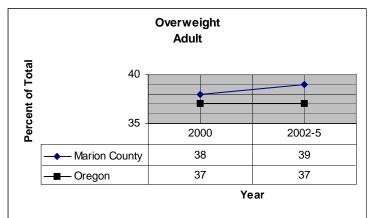
Alcohol Survey, so this data is not available for Salem-Keizer.

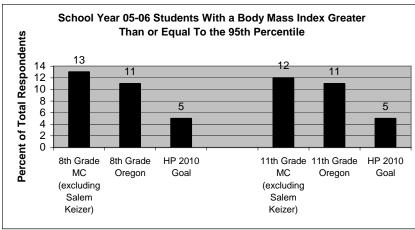
For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison. Data by gender is not available.

Sample Size:

Sample size for Marion County for 2000 was not available for youth or adults. Sample size for Marion County for 8th graders for 2005 was 1,383. Sample size for Oregon for 8th graders for 2000 was 5,089. Sample size for Oregon for 8th graders for 2005 was 3,557. Sample size for Marion County for 11th graders for 2005 was 1,214. Sample size for Oregon for 11th graders for 2002 was 3,731. Sample size for Oregon for 11th graders for 2005 was 2,574. Sample size for Marion County for adults for 2002-2005 was 1,570. Sample size for Oregon for adults for

8 th Grad		rion		0	regon		Healthy
	County				egon	I	People 2010
	N	% Total		Ν	% Total		5%
2000	NA	NA		9307	7		
2005-6	1226	13		3190	11	İ	
11 th Gra	de ¹			-			
		rion unty		0	regon		Healthy People 2010
	N	% Total	-	N	% Total		5%
2000	NA	NA		6640	7		
2005-6	1141	12		2460	11		





Data was readily available, except for 8th and 11th grade data from 2000.

COMMENTS:

In Oregon as a whole, the percentage of 8th and 11th grade students who have a BMI $\ge 95^{th}$ percentile increased from 2000 to 2005. In 2005-2006, percentage of students with a BMI $\ge 95^{th}$ percentile was the same for 8th graders and 11th graders. However, more boys had a BMI $\ge 95^{th}$ percentile than girls. The percent of 8th and 11th graders with a BMI $\ge 95^{th}$ percentile is much higher than the Healthy People 2010 Benchmark of 5%.

The percentage of adults who are classified as overweight (BMI 25 - 29.9) remained the same from 2000 to 2002-2005 in Marion County.

NOTES:

- BMI = Body Mass Index, which is a factor of height and weight (weight in kilograms divided by height in meters squared).
- Overweight for youth (8th and 11th grade) is defined as BMI is \geq 95th percentile
- Overweight for adults is a BMI between 25 and 29.9.
- 8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000.
- Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.
- Salem-Keizer School District has designed a "Drug and Alcohol

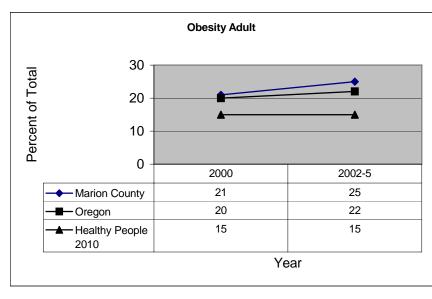
Survey" that is implemented in the Salem-Keizer School District each year. Overweight is not included in the Salem-Keizer Drug and Alcohol Survey, so this data is not available for Salem-Keizer.

- The 8th and 11th grade 2000 Marion County Data Report for the "overweight" question included "at risk for overweight". In addition, data by gender is not available in the 2000 Marion County or Oregon Data reports. Therefore, these data are not included on this chart.
- For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison. Data by gender is not available. **Sample Size:**

• Sample size was not available for Marion County for 2000 for youth or adults. Sample size for Marion County for adults for 2002-2005 was 2,564. Sample size for Oregon for adults for 2000 was 7,703. Sample size for Oregon for adults for 2002-2005 was 35,681.

- The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.
- 2010 Benchmark youth benchmark has a denominator of youth 12-19 years old.

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: <u>http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml</u>
- 2. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml



Adult obesity data is readily available.

COMMENTS:

Obesity (BMI \geq 30) among adults in Marion County increased between 2000 and 2002-2005 (21% to 25%). The percentage of adults who reported being obese in Oregon also increased between 2000 and 2002-2005; however, this increase was not as dramatic as it was in Marion County (20% to 22%). Neither Marion County nor Oregon has reached the Healthy People 2010 Benchmark of 15%.

NOTES:

BMI = Body Mass Index, which is a factor

of height and weight (weight in kilograms divided by height in meters squared).

- Youth are not classified as "obese", so this data is not relevant for 8th and 11th grade.
- For adults, obese is defined as $BMI \ge 30$.
- 8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000.
- Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.
- Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. Overweight/Obesity is not included in the Salem-Keizer Drug and Alcohol Survey, so this data is not available for Salem-Keizer.
- For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison. Data by gender is not available.

Sample Size:

•

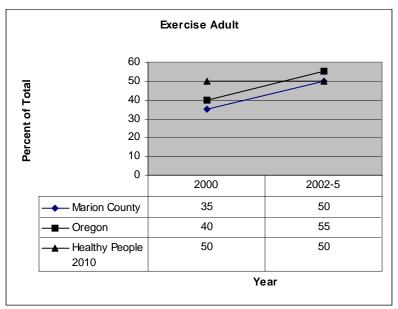
Sample size was not available for Marion County for adults for 2000. Sample size for Marion County for adults for 2002-2005 was 2,564. Sample size for Oregon for adults for 2000 was 7,703. Sample size for Oregon for adults for 2002-2005 was 35,681.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

2010 benchmark - youth benchmark for obesity is combined with overweight/obesity.

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml
- 2. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml

		Marion (County			Oreș	gon		Healthy People 2010
	Ν	%	%	%	N	%	%	%	
		Female	Male	Total		Female	Male	Total	
2000	NA	NA	NA	NA	5116	53	67	60	NA
2005-6	1387	78	85	81	3547	77	85	81	
11 th Grad	le ¹			-					
		Marion (County			Oreș	gon		Healthy People 2010
	N	%	%	%	N	%	%	%	
	N	% Female	% Male	% Total	N	% Female	% Male	% Total	
2000	N NA	, -			N 3763	, .	, .		85%



COMMENTS:

Data on exercise is difficult to compare because of differences in questions. However, it appears that the percentage of students involved in regular physical activity increased for both 8th and 11th graders between 2000 and 2005. The percentage of adults reporting regular exercise

also increased between 2000 and 2002-2005. The percentage of adults who report regular exercise in both Marion County and in Oregon meet the Healthy People 2010 Benchmark of 50%; however, the percent of 11^{th} graders reporting regular exercising is significantly less than the Healthy People 2010 Benchmark.

NOTES:

The definitions for exercise for youth and adults are different. "Exercise" data for 8th and 11th grade was reported as ≥ 20 minutes vigorous exercise for ≥ 3 days. Adult exercise was reported as meeting CDC recommendations for moderate or vigorous exercise.

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000. Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol

Survey" that is implemented in the Salem-Keizer School District each year. Exercise is not included in the Salem-Keizer Drug and Alcohol Survey, so this data is not available for Salem-Keizer.

For the adult data, the BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison. Data by gender is not available.

Sample Size:

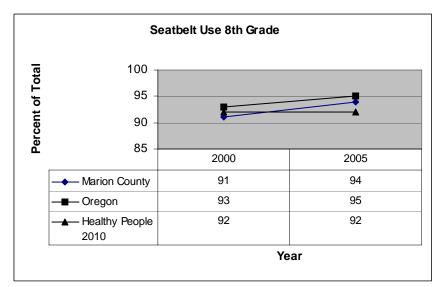
Sample size was not available for Marion County for 2000 for youth or adults. Sample size for Oregon for adults for 2000 was not available. Sample size for Marion County for 8th graders for 2005 was 1,387. Sample size for Oregon for 8th graders for 2000 was 5,116. Sample size for Oregon for 8th graders for 2005 was 3,457. Sample size for Marion County for 11th graders for 2005 was 1,221. Sample size for Oregon for 11th graders for 2000 was 3,763. Sample size for Oregon for 11th graders for 2005 was 2,570. Sample size for Marion County for adults for 2002-2005 was 1,313. Sample size for Oregon for adults for 2002-2005 was 18,518.

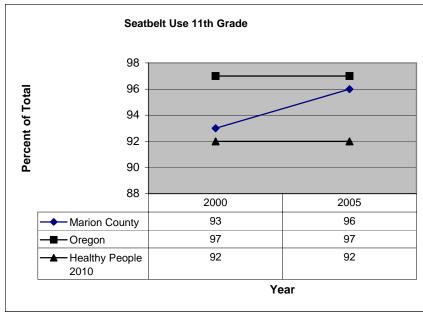
The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

2010 benchmark – youth benchmark is for 20 minutes of vigorous exercise for \geq 3 days. Denominator for youth is grades 9 – 12.

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: <u>http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml</u>
- 2. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml

Adult ²					
	Mario	on County	Or	egon	Healthy People 2010
	N	%	N	%	
2000	NA	NA	NA	84	92%
2006	NA	NA	NA	94	





WAS THIS DATA READILY AVAILABLE? Yes, readily available for youth. Not available for adults.

COMMENTS:

The percentage of 8th and 11th graders reporting seat belt use increased between 2000 and 2005. The percentage of Marion County 8th and 11th graders reporting seat belt use is very similar to the percentage of Oregon 8th and 11th graders reporting seat belt use. The percentage of adults reporting seat belt use increased significantly from 2000 to 2002-2005. The percent of regular seat belt use among youth and adults in both Marion County and Oregon exceeds the Healthy People 2010 Benchmark.

NOTES:

Data is percent of youth who always, most of the time, or sometimes wear a seat belt when riding in a car driven by someone else.

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000.

Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. Seatbelt use is not included in the Salem-Keizer Drug and Alcohol Survey, so this data is not available for Salem-Keizer.

Sample Size:

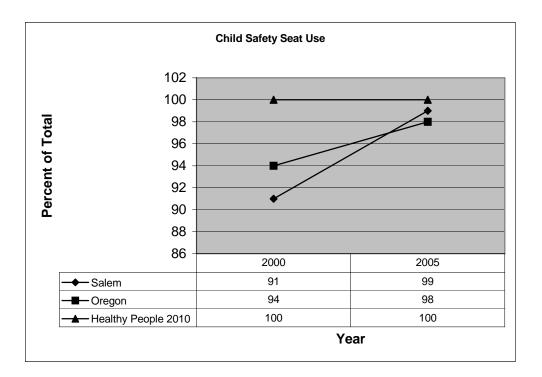
Sample size for Marion County for 2000 was available for youth or adults. Sample size for Oregon for adults for 2006 was not available. Sample size for Marion County for 8th graders for 2005 was 1,376. Sample size for Oregon for 8th graders for 2000 was 4,860. Sample size for Oregon for 8th graders for 2005 was 3,473. Sample size for Marion County for 11th graders for 2005 was 1,214. Sample size for Oregon

for 11th graders for 2000 was 3,610. Sample size for Oregon for 11th graders for 2005 was 2,557.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

2010 benchmark is written for all persons (92% of all persons will regularly wear a seatbelt)

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml
- National Highway Traffic Safety Administration. Available at: <u>http://oregon.gov/ODOT/TS/docs/Seatbelts/06statebeltrates.pdf</u>



No. Data was faxed by ODOT.

COMMENTS:

Marion County has seen a dramatic increase in child safety seat use from 2000 to 2005 (91% to 99%). The percent of observed use of child safety seats in Marion County is now similar to the percentage of observed use of child safety seats in Oregon. However, the Healthy People 2010 benchmark of 100% of children being restrained in a child safety seat is not being met.

NOTES:

Data is "observed use" that is collected in 14 cities in Oregon, including Salem.

Sample size:

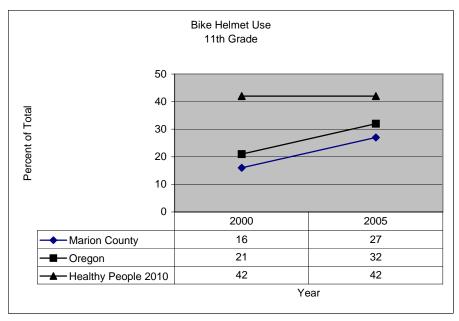
Sample size for Marion County and Oregon for 2000 and 2005 was not available.

SOURCE:

Carla Levinski. Oregon Department of Transportation.

Bicycle helmet use (always, mostly, sometimes)

Bike Helmet Use 8th Grade 80 70 60 Percent of Total 50 40 30 20 10 0 2000 2005 30 42 - Marion County 38 50 -Oregon -Healthy People 2010 76 76 Year



WAS THIS DATA READILY AVAILABLE?

Readily available for youth. Not available for adults.

COMMENTS:

The percent of Marion County and Oregon 8th and 11th graders who reported using a bicycle helmet "always, most of the time, or sometimes" increased between 2000 to 2005; however, the overall percentage is still very low and does not meet the Healthy People 2010 benchmark.

More 8th graders in Marion County and in Oregon reported using helmets than 11th graders in Marion County and in Oregon. Overall, 8th and 11th graders in Marion County reported using helmets less frequently than 8th and 11th graders in Oregon. Marion County 8th graders reported less use of helmets than 8th graders in Oregon. Marion County 11th graders also reported less use of helmets than 11th graders in Oregon.

NOTES:

Data is from among the 8th and 11th graders who rode a bicycle in past year (among those who rode a bike in the past year, percent who always, most of the time, or sometimes wore a helmet).

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000. Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is

implemented in the Salem-Keizer School District each year. Bicycle Helmet Use is not included in the Salem-Keizer Drug and Alcohol Survey, so this data is not available for Salem-Keizer.

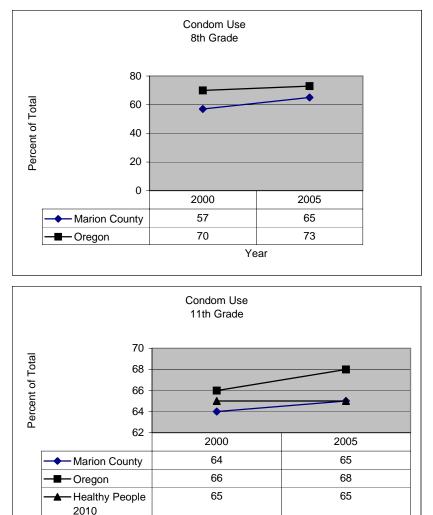
2010 benchmark – Denominator is different. 76% of children 1-15 years of age will regularly wear helmets. 42% of 16 years and older will regularly wear helmets

Sample Size:

Sample size for Marion County for 2000 was not available for youth or adults. Sample size for Marion County for 8th graders for 2005 was 985. Sample size for Oregon for 8th graders for 2000 was 3,978. Sample size for Oregon for 8th graders for 2005 was 2,572. Sample size for Marion County for 11th graders for 2005 was 670. Sample size for Oregon for 11th graders for 2000 was 2,224. Sample size for Oregon for 11th graders for 2005 was 1,474.

SOURCE:

1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml



WAS THIS DATA READILY AVAILABLE?

Youth data was readily available. Adult data was not available.

COMMENTS:

Among those who reported having sex, the percentage of 8th graders who reported using a condom the last time they had sex increased between 2000 and 2005. However, the percentage of Marion County 8th graders who reported using a condom the last time they had sex is less than the percentage of Oregon 8th graders. In 2005 more Marion County boys than girls reported using condoms the last time they had sex. This gender difference was not found for Oregon 8th graders. The percentage of 11th graders reporting condom use the last time they had sex is inline with

the Healthy People 2010 Benchmark in both Marion County and in Oregon.

Among those who reported having sex, the percentage of Marion County 11th graders who reported using a condom the last time they had sex was about the same as the percentage of Oregon 11th graders who reported using a condom. This percentage is in line with the Oregon Benchmark. The percentages of 11th graders in Marion County and Oregon who reported using a condom the last time they had sex stayed about the same between 2000 and 2005. Once again, a higher percentage of 11th grade boys than 11th grade girls in Marion County reported using a condom the last time they had sex.

NOTES:

Data is from among those who reported having had

sex, the percent that used a condom the last time they had sex.

8th and 11th grade Marion County data comes from the Oregon Healthy Teens Survey. 8th and 11th grade Marion County data by gender is not available for the year 2000.

Salem-Keizer School District does not participate in the Oregon Healthy Teens Survey; therefore, the "Marion County" data does not include Salem-Keizer.

Salem-Keizer School District has designed a "Drug and Alcohol Survey" that is implemented in the Salem-Keizer School District each year. Condom Use is not included in the Salem-Keizer Drug Alcohol Survey, so this data is not available for Salem-Keizer.

Sample Size:

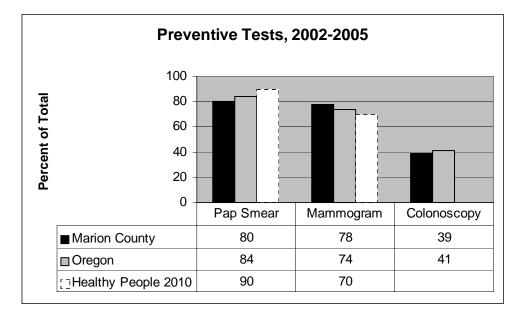
Sample size for Marion County for 2000 was not available for youth. Sample size for Marion County for 8th graders for 2005 was 169. Sample size for Oregon for 8th graders for 2005 was 490. Sample size for Marion County for 11th graders for 2005 was 490. Sample size for Oregon for 11th graders for 2000 was 1,471. Sample size for Oregon for 11th graders for 2005 was 1,054.

2010 benchmark – denominator for youth is $9 - 12^{\text{th}}$ grade.

SOURCES:

- 1. Oregon Healthy Teens Survey. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/index.shtml
- 2. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml

Year

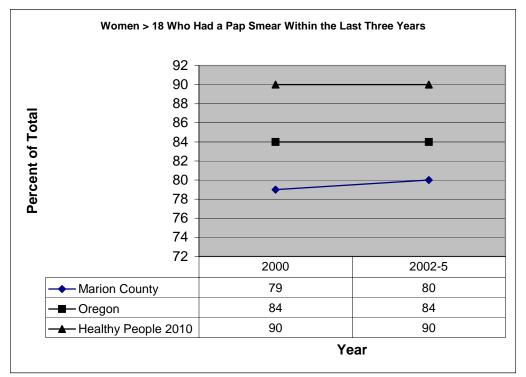


Notes:

- 1. Pap smears are in women > 18 who have been tested in the last three years.
- 2. Mammograms are in females older than or at 40 years of age who have been tested in the last two years.
- 3. Colonoscopies are in adults older than or at 50 years of age.
- 4. There is no Healthy People 2010 indicator for Colonoscopy.
- 5. The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling landline telephones, the data does not represent those populations who do not have access to a landline telephone.
- 6. BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison.

SOURCE:

Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml



Youth data is not available. Adult data is readily available.

COMMENTS:

The percentage of women receiving a pap smear in the past 3 years is slightly lower for Marion County than for Oregon. What's more, the percentage of women receiving a pap smear did not increase between 2000 and 2002-2005 for Marion County or for Oregon. The percentage of women receiving a pap smear is below the Healthy People 2010 Benchmark in both Marion County and in Oregon.

NOTES:

Data represents females 18 years of age and older who had a pap smear in past 3 years.

BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison.

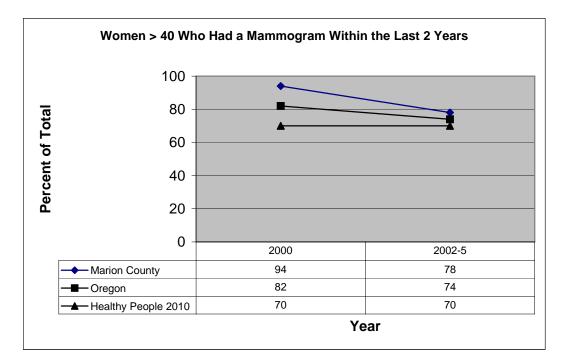
Sample Size:

Sample size for Marion County for 2000 was not available. Sample size for Marion County for 2002-2005 was 305. Sample size for Oregon for 2000 was 4,446. Sample size for Oregon for 2002-2005 was 4,043.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

SOURCE:

1. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml



Yes.

COMMENTS:

More women in Marion County reported having mammograms than women in Oregon. However, the percentage of women who received a mammogram in the past 2 years decreased significantly from 2000 to 2005-2006 among both women in Marion County and women in Oregon. The percentage of women receiving mammograms in Marion County and in Oregon is higher than the Healthy People 2010 Benchmark.

NOTES:

Data is females 40 years of age and older who had a mammogram in past 2 years.

BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison.

Sample Size:

Sample size for Marion County for 2000 was not available. Sample size for Marion County for 2002-2005 was 342. Sample size for Oregon for 2000 was 3,004. Sample size for Oregon for 2002-2005 was 4,601.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling land-line telephones, the data does not represent those populations who do not have access to a land-line telephone.

SOURCE:

1. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml

Adult ¹ > 50 Years of Age							
	Mario	on County		Or	egon		Healthy People 2010
	n	%		Ν	%		
2000	NA	NA		NA	NA		N/A
2002-5	301	39		3939	41		

The 2002-2005 combined data was readily available. No available data for 2000.

COMMENTS:

The percentage of adults over 50 years of age who received a colonoscopy in the past 5 years is about the same for Marion County and Oregon. However, the percentage seems lows (MC = 39% and OR = 41%)

NOTES:

Data is men and women aged 50 and over who had colonoscopy or sigmoidoscopy in past 5 years.

BRFSS data from years 2002 through 2005 were combined in order to have a large enough sample size. The combined 2002-2005 data for Oregon was used in order to have an accurate comparison. Data by gender is not available.

The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by calling landline telephones, the data does not represent those populations who do not have access to a land-line telephone.

2010 Benchmark – benchmark is only available for "ever had" a sigmoidoscopy, so it's not included in the table.

SOURCE:

1. Behavioral Risk Factor Surveillance System. Marion County and Oregon data. Available at: http://www.dhs.state.or.us/dhs/ph/chs/brfs/index.shtml

	Air Quality: Percentage of residents living in an area that does not meet air quality standards for carbon monoxide					
	Marion County	Oregon	Healthy People 2010 Goal			
2000	59%	N/A	0%			
2006	61%	N/A				

Yes and No. Data was available for Marion County but not for Oregon.

Notes:

- 1. Data for Marion County for 2000 is based on a population of 286,300 people.
- 2. Data for Marion County for 2006 is based on a population of 306,665 people.
- 3. Healthy People 2010 goal is to "Reduce the proportion of persons exposed to air that does not meet the U.S. Environmental Protection Agency's health-based standards for harmful air pollutants." The specific goal for carbon monoxide is 0% of people.

Sources:

EPA Green Book: <u>http://www.epa.gov/air/oaqps/greenbk</u> <u>http://www.epa.gov/oar/oaqps/greenbk/stpopoll.html</u> <u>http://www.pdx.edu/prc/annualorpopulation.html</u>

Water Quality: Number of persons served by community water systems						
Marion CountyOregonHealthy People 2010 Goal						
	Number	Number	95%			
As of June, 2008	9370					

Fluoridated water: Percentage of residents provided with at least 1ppm fluoride drinking water							
	Marion County	Oregon					
2005							

Yes and No. Data for water quality was available on water systems, but totals had to be calculated by hand. **Notes:**

- 1. A "Community Water System" is defined as a "public water system which serves at least 15 service connections and is regularly serves at least 25 year-round residents." (EPA.gov)
- 2. Marion County data is a running tally from number of designated active community water systems in Marion County therefore we are unable to calculate a percentage for comparison.
- 3. The Oregon data is a running tally from the number of designated active Oregon community drinking water systems therefore we are unable to calculate a percentage for comparison.
- 4. Healthy People 2010 goal is to "Increase the proportion of persons served by community water systems who receive a supply of drinking water that meets the regulations of the Safe Drinking Water Act." The target is 95%.
- 5. According to the Centers for Disease Control (CDC) the recommended optimum range of fluoride to prevent dental caries is a concentration of 0.7-1.2 ppm, with the lower concentration recommended for warmer climates (where water consumption is higher) and the higher concentration for colder climates. The max level allowed in Oregon is 4.0ppm according to DHS.
- 6. Percent for Marion County is based on 222,030 people provided with water with at least 1ppm fluoride out of a population of 302,135 for the year 2005.
- 7. Cities in Marion County that have at least 1ppm fluoride in their drinking water include Keizer, Salem, Silverton, Sublimity, and Turner.
- 8. Percent for Oregon is based on 733,721 people provided with water with at least 1ppm fluoride out of a population of 3,631,440 for the year 2005.

Sources:

Oregon DHS, Drinking Water Program, Safe Drinking Water Information System:

http://170.104.158.45/countyinventory.php3

http://170.104.158.45/inventorylist.php3

http://www.healthypeople.gov/Document/HTML/Volume1/08Environmental.htm

http://www.epa.gov/ogwdw000/wsg/wsg_66a.pdf

DHS Drinking Water Program:

http://oregon.gov/DHS/ph/dwp/tools.shtml

http://www.pdx.edu/prc/annualorpopulation.html

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm4841a1.htm

Food and Waterborne Disease Average Rate Per 100,000 For 2002-2006					
		Marion County	Oregon	Healthy People 2010 Goal	
Foodborne					
	E. Coli	4.2	3.4	1	
	Listeria	0.66	0.25	0.25	
	Salmonella	13.2	11.2	6.8	
	Shigella	12.2	3.6	N/A	
Waterborne	-				
	Cryptosporidium	0.26	1.44	N/A	
	Giardia	11.01	9.83	N/A	

Yes

Notes:

- 1. Average rates were calculated by adding up all rates for 2002 to 2006 and dividing by 5 (for 5 years).
- 2. E. coli, listeria, salmonella and shigella are bacterium that can cause foodborne illness.
- 3. E.coli can be a very serious diarrheal illness caused from infected symptomatic people or from food or water contaminated with human or animal feces. It is frequently transmitted by undercooked ground beef or unpasteurized milk. Nationally, there were 1.31 cases per 100,000 in 2006.
- 4. Listeria is associated with consuming non-pasteurized milk or cheese, and is especially risky for pregnant women. National data for Listeria is not readily available.
- 5. Salmonella results frequently from contaminated food and or infected pet reptiles. National data is not readily available for Salmonella.
- 6. Shigella transmitted by fecal-oral route, ingestion of contaminated food or water, or person-to-person from unclean hands. Nationally there were 10,484 cases in 2005 which is a rate of 3.5 per 100,000.
- 7. All diseases listed are reportable diseases.
- 8. Foodborne illness complaints are usually unconfirmed cases of food poisoning reported by the general public for investigation by Environmental Health.
- 9. The Healthy People 2010 goal is to "Reduce infections caused by key foodborne pathogens."
 - a. The target for E. coli is 1 case per 100,000 people.
 - b. The target for Listeria is 0.25 cases per 100,000 people.
 - c. The target for Salmonella is 6.8 cases per 100,000 people.
 - d. There is no target for Shigella.
- 10. Cryptosporidium is protozoan that is often associated with diarrhea in humans. It has created outbreaks in municipal water systems, and has been associated with contaminated swimming pools. Transmission to humans can occur from farm livestock, young animals in petting zoos, and from outbreaks in child care centers. National data on Cryptosporidium is not readily available.
- 11. Giardia is a parasite that causes giardiasis, a waterborne disease. Humans are the primary reservoir of infection, but it can infect dogs, cats, beavers, and other animals, which then can contaminate water. People become infected directly by hand to mouth or indirectly by ingestion of contaminated water or food. Nationally there were 19,789 cases in 2005, which is a rate of 6.7 per 100,000.

Sources:

DHS Acute and Communicable Disease Prevention:

http://www.oregon.gov/DHS/ph/acd/stats.shtml

http://www.healthypeople.gov/Document/HTML/Volume1/10Food.htm

http://www.usatoday.com/news/health/2007-04-12-ecoli-leafy-greens_N.htm

http://www.cdc.gov/ncidod/dbmd/phlisdata/shigtab/2005/ShigellaIntroduction2005.pdf

Control of Communicable Disease Manual, 18th Edition, David L. Heyman. MD, Editor.

http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5607a2.htm

Children u	Lead Exposure: Children under 5 years of age who are tested and have blood levels exceeding 10µg/dL						
	Marion County	Oregon	Healthy People 2010 Goal				
2000-2007	63	1,003	0%				

Yes

Г

Notes:

- 1. From 01/01/2000 to 12/31/2007 there were a total of 1003 cases of a child 6 years of age or younger with a blood lead test greater than or equal to 10µg/dL in Oregon. Of these, 63 (6.3%) were reported to live in Marion County.
- 2. The Healthy People goal is to "Eliminate elevated blood lead levels in children." The target is 0%.

Sources:

Oregon Childhood Lead Poisoning Prevention Program http://www.healthypeople.gov/Document/HTML/Volume1/08Environmental.htm# Toc490564709

Rabies in Animals: Number of reported cases						
	Marion County	Oregon				
2002	0	14				
2003	0	7				
2004	0	7				
2005	1	8				
2006	0	25				

Vector-borne Disease: Cases of Lyme Disease 2002-2006								
Marion County		Ore	gon	Healthy People 2010 Goal				
Cases	Average Rate	Cases	Average Rate					
7	0.46	104	0.58	9.7 cases per 100,000 people				

Yes. Rates for Lyme disease were calculated by hand.

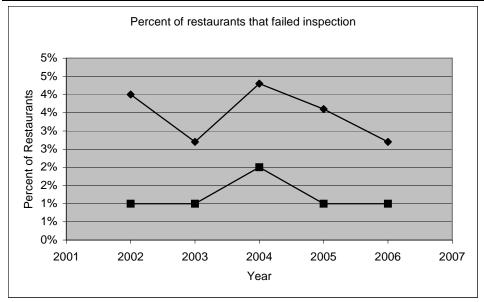
Notes:

- 1. Animals with rabies include bats, cats, dogs, and foxes.
- 2. Lyme disease is transmitted to humans by tick bites from infected ticks. Because the tick is so tiny, it often goes unnoticed. It can cause systemic symptoms, arthritis, and cardiac issues in varying combinations over months to years. Although endemic in certain areas of the East coast, Wisconsin, and Minnesota, cases are noted in California and Oregon. Nationally, there were 23.305 cases of Lyme disease in 2005, which is a rate of 7.9 per 100,000.
- 3. The Healthy People 2010 goal is to "reduce Lyme disease." The target is 9.7 cases per 100,000 people.

Sources:

DHS Acute and Communicable Disease Prevention: <u>http://www.oregon.gov/DHS/ph/acd/stats.shtml</u> <u>http://www.pdx.edu/prc/annualorpopulation.html</u> http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5623a1.htm

	Percent of restaurants that failed inspection									
	Mar	ion County			Oregon					
	Number of Restaurants	Number of FTC's	Percent of Total	Number of Restaurants	Number of FTC's	Percent of Total				
2002	695	28	4%	10,060	98	1%				
2003	791	21	2.70%	10,450	118	1%				
2004	704	30	4.30%	10,371	157	2%				
2005	717	26	3.60%	10,537	107	1%				
2006	712	19	2.70%	10,507	94	1%				



Yes and No. Data was available for number of restaurants and number that failed inspection, but rates had to be calculated by hand.

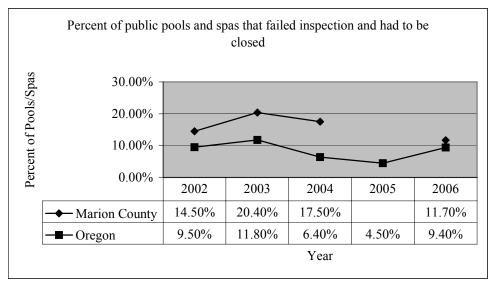
Notes:

1. A restaurant not passing inspection is listed as failure to comply (FTC). The restaurant must then comply on a full reinspection within 30 days or be subject to closure or further administrative action. Consumers can find a placard on the restaurant entrance that indicates if a facility passed the last routine health inspection.

Source:

http://www.oregon.gov/DHS/ph/foodsafety/stats.shtml

	Percent of public swimming pools and spas that failed inspection and had to be closed								
	Marion County				Oregon	1			
	Number of Pools/Spas	Number of Closures	Percent of Total	Number of Pools/Spas	Number of Closures	Percent of Total			
2002	200	29	14.50%	3,257	311	9.50%			
2003	201	41	20.40%	3,263	388	11.80%			
2004	199	35	17.50%	3,243	209	6.40%			
2005	N/A	N/A	N/A	3,281	150	4.50%			
2006	273	32	11.70%	3,429	325	9.40%			



Yes and No. Data was available for number of pools and spas and number that failed inspection and had to be closed, but rates had to be calculated by hand.

Notes:

1. Data for number of closures for Marion County for 2005 was not submitted.

Source:

Marion County Environmental Health http://oregon.gov/DHS/ph/foodsafety/stats.shtml

Adults in good mental health (had no poor mental health in the last 30 days)							
	Marion County	Oregon	Oregon Benchmark 2010	Healthy People 2010			
2002-2005	64.1	61.5	N/A	N/A			

Yes

NOTES:

Indicator had to be changed from "during the past 30 days, average number of days for which adults report that their mental health was not good" to "Adults in good mental health (had no poor mental health in the last 30 days)." For the initial indicator we had to request special reports from Renee Boyd (Renee.K.Boyd@state.or.us) at the Center for Health Statistics BRFSS Division.
 Age-adjustment is based on three age groups: 18-34: 35-54: 55+ per the U.S. Standard Million

2. Age-adjustment is based on three age groups: 18-34; 35-54; 55+, per the U.S. Standard Million

3. The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by telephone, the data does not represent those populations who do not have access to a telephone.

4. Age-adjustment is a method of adjusting data from two or more populations at the same time to account for the differences in rates that occur solely from age differences so that the data can be compared.

SOURCES:

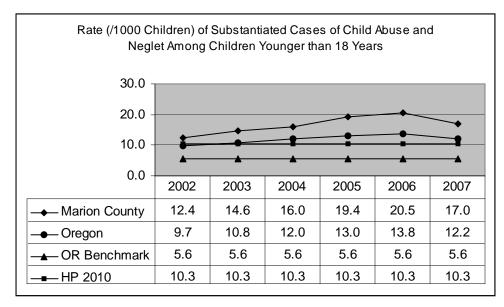
State of Oregon Center for Health Statistics Adult Survey (BRFSS), selected topics by county. http://www.dhs.state.or.us/dhs/ph/chs/brfs/county/index.shtml

NARRATIVE:

Adults in Marion County surveyed as part of BRFSS were slightly less likely than Oregon residents in general to have had poor mental health days in the previous month.

Data collected via the BRFSS survey may not be totally representative of Marion County residents as it is conducted via the standard landline telephone system. The survey does not reach people without landlines or those who rely solely on cell phones.

Rate (/1000 children) and number of substantiated cases of child abuse and neglect among children younger than 18 years:									
	Mari Cou		Oregon		Oregon Benchmark 2010 Indicator 50	Healthy People 2010 Indicator 15-33a			
	Count	Rate	Count	Rate					
2002	988	12.4	8,424	9.7					
2003	1,188	14.6	9,447	10.8					
2004	1,306	16.0	10,622	12.0	5.6	10.3			
2005	1,558	19.4	11,255 13.0						
2006	1,662	20.5	12,043	13.8					
2007	1,387	17.0	10,716	12.2					



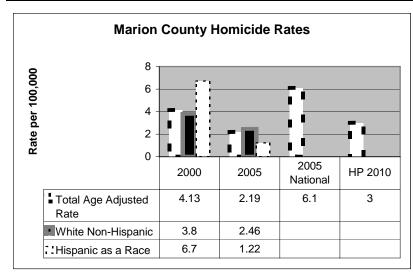
Yes

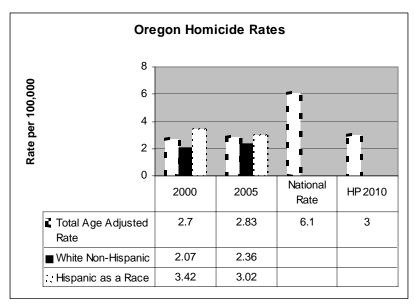
NOTES:

- 1. Child abuse and neglect are defined according to ORS 419B.005 "physical abuse, mental injury, neglect, sexual abuse, and threat of harm."
- 2. According to the Marion County Anti-Drug Strategic Plan for 2005, there is an increased manufacture and use of methamphetamines in Marion County. Consistent with this, the county District Attorney reported that between July and September of 2004, 307 formal petitions filed in Marion County courts on behalf of children were due to parental involvement with meth. The result of high rates of meth production and use is high numbers of children are in homes with meth which can have violent consequences.
- 3. Oregon Benchmark for this indicator is "Substantiated number of child abuse victims per 1,000 under 18." The 2010 target is 5.6 per 1,000.
- 4. The Healthy People 2010 goal is to "Reduce maltreatment and maltreatment fatalities of children." The target is 103.3 per 1,000.

- State of Oregon Department of Human Services Child Abuse and Neglect Reports http://oregon.gov/DHS/abuse/publications/children/
- Marion County Public Safety Coordinating Council, Anti-Drug Strategic Plan 2005, Mid-Year Status Report
- Center for Disease Control and Prevention Healthy People 2010. Objective 15-33a "Reduce maltreatment of children." http://www.healthypeople.gov/document/html/volume2/15injury.htm
- Oregon Progress Board Objective 50 "Child Abuse and Neglect" <u>http://www.oregon.gov/DAS/OPB/2005report/obm50.shtml</u>
- State of Oregon Revised Statutes 2007 Edition. http://www.leg.state.or.us/ors/
- Oregon Progress Board Benchmarks. http://www.oregon.gov/DAS/OPB/2005report/obm50.shtml

Homicide Rates, Age-Adjusted per 100,000							
		urion unty	Oreș	gon	National Overall Rate	Healthy People 2010 Indicator 15- 32	
	2000	2005	2000	2005			
Total Age Adjusted Rate	4.13	2.19	2.7	2.83	6.1		
Count	12	7	93	103	18,124		
White Non-Hispanic	3.8	2.46	2.07	2.36		3	
Count	8	6	60	71			
Hispanic as a Race	6.7	1.22	3.42	3.02			
Count	4	1	12	13			





WAS DATA READILY AVAILABLE?

Yes and No. The data for overall rates was readily available on the Center for Health Statistics Annual Report Volume II website. The age-adjusted, ageadjusted white and age-adjusted nonwhite rates were provided via a special report from Victoria Buelow (Victoria.h.buelow@state.or.us), Phone: 971-673-1150), research analyst at the CHS.

NOTES:

- 1. Data for the overall rates was easily accessible by the public on the State of Oregon Center for Health Statistics Annual Report, Volume II, website.
- 2. Age-adjusted, age-adjusted white, and age-adjusted non-white rates were provided by a special report run by the Center for Health Statistics. Data was gathered using information from the Death Certificate Data and the Portland State University Population Research Center.
- 3. Age-adjustment is a method of adjusting data from two or more populations at the same time to account for the differences in rates that occur solely from age differences so that the data can be compared.
- 4. Healthy People 2010 goal is to "Reduce homicides." The specific target is 3 per 100,000.
- **5.**Nationally, in 2005, there were 18,124 homicides, which is an age-adjusted rate of 6.1 per 100,000.

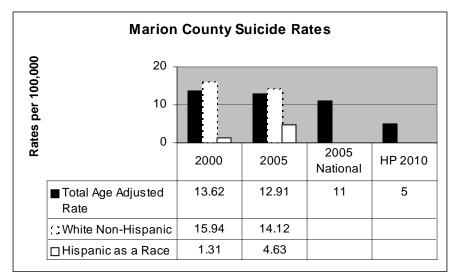
SOURCES:

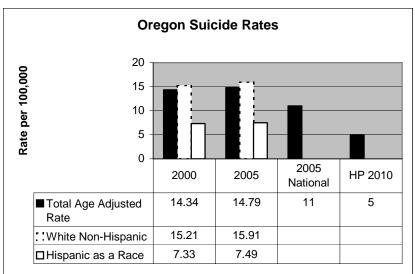
- State of Oregon Center for Health Statistics, Annual Report, Volume II, Section 6, table 6-37, table 6-38. http://www.dhs.state.or.us/dhs/ph/chs/data/vol2.shtml
- Center for Disease Control and Prevention Healthy People 2010. Objective 15-32 "Reduce Homicide" http://www.healthypeople.gov/document/html/volume2/15injury.htm
- http://www.cdc.gov/nchs/FASTATS/homicide.htm

NARRATIVE:

Marion County homicide rates decrease between 2000 and 2005, exceeding the Healthy People 2010 target of 3 per 100,000. This trend was seen across all racial groups, with particular improvement in the non-white population.

Suicide Rates, Age-Adjusted per 100,000							
	Marion County				National Overall Rate	Healthy People 2010 Indicator 18-1	
	2000	2005	2000	2005			
Total Age Adjusted Rate	13.62	12.91	14.34	14.79	11.0		
Count	38	39	502	559	32,637		
White Non-Hispanic	15.94	14.12	15.21	15.91		5.0	
Count	37	34	467	518		5.0	
Hispanic as a Race	1.31	4.63	7.33	7.49			
Count	1	4	17	21			





Yes and No. The data for overall rates was readily available on the Center for Health Statistics Annual Report Volume II website. The age-adjusted, age-adjusted white and age-adjusted non-white rates were provided via a special report from Victoria Buelow

(Victoria.h.buelow@state.or.us), Phone: 971-673-1150), research analyst at the CHS.

NOTES:

- 1. Data for the overall rates was easily accessible by the public on the State of Oregon Center for Health Statistics Annual Report, Volume II, website.
- 2. Age-adjusted, age-adjusted white, and ageadjusted non-white rates were provided by a special report run by the Center for Health Statistics. Data was gathered using information from the Death Certificate Data and the Portland State University Population Research Center.
- 3. Age-adjustment is a method of adjusting data from two or more populations at the same time to account for the differences in rates that occur solely from age differences so that the data can be compared.
- 4. Healthy People 2010 goal is to "Reduce the suicide rate." The specific target is 5 per 100,000
- 5. Nationally, in 2005, there were 32,637 suicides, which is an age-adjusted rate of 11 per 100,000.

SOURCES:

- Center for Disease Control and Prevention Healthy People 2010. Objective 18-1 "Reduce the suicide rate"
- http://www.healthypeople.gov/document/html/volume2/18mental.htm
 State of Oregon Center for Health Statistics Annual Report, Volume II, Section 6, table 6-37,
- table 6-38 http://www.dhs.state.or.us/dhs/ph/chs/data/vol2.shtml http://www.cdc.gov/nchs/fastats/suicide.htm

NARRATIVE:

Marion County suicide rates showed slight improvement overall between 2000 and 2005, though the rate for the age-adjusted non-white population increased. All rates for Marion and Oregon are significantly higher than the Healthy People 2010 target of 5 suicides per 100,000.

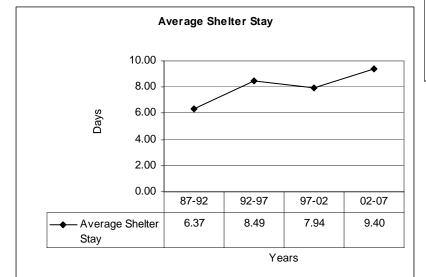
Category 7: Social and Mental Health

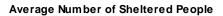
Domestic Violence Against Intimate Partners (intimate partner violence is not available to calculate rates)

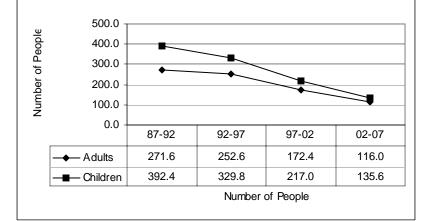
The following data was made available by the Mid Valley Women's Crisis Service director Jayne Downing (jayne@mvwcs.com) 503-

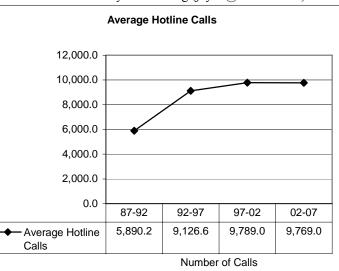
378-1572. She tracks the numbers only for her organization, which is the largest and oldest in Marion County. Canyon Crisis Center also takes calls, but their numbers were not available.

	Average Hotline Calls	Average Adults in Shelter	Average Children in Shelter	Average Shelter Stay (days)
87-92	5,890.2	271.6	392.4	6.37
92-97	9,126.6	252.6	329.8	8.49
97-02	9,789.0	172.4	217.0	7.94
02-07	9,769.0	116.0	135.6	9.40









WAS DATA READILY AVAILABLE? No

NOTES:

1. Jayne Downing noted that after September 11th the number of calls and shelter placements started to decrease. This was the case nationwide. Consensus was that when people didn't feel safe in general, they were less likely to leave their home and start over. For the year 2008, Jayne said that they are on track to significantly increase their numbers.

SOURCES:

Mid Valley Women's Crisis Service. 503-378-1572 Director Jayne Downing jayne@mvwcs.org

NARRATIVE:

Law enforcement collects data on domestic violence between cohabiting partners, family and friends, but discrete data for intimate partner violence is not available. However, the Mid-Valley Women's Crisis Service was able to provide data showing that since 1987, the number of women and children requesting shelter has decreased, but the average length of stay has increased. This trend may reflect that women are using other resources such as the Temporary Assistance to Domestic Violence Survivors (TA-DVS). However, as the Mid-Valley Crisis Service's numbers show, that trend seems to be chancing and in spite of programs such as TA-DVS, their numbers are going up again. Crisis hotline calls had been on a steady upward trend until the 9/11/01 terrorist attacks, at which time calls

immediately dropped off. The director of the Service reports that this mirrored a national trend. It's thought that the events of 9/11 caused a general feeling of being unsafe that made women less likely to take the additional risk of leaving their abusive homes to start over. All women living in abusive homes do not call the crisis hotline or request shelter, however it is likely that the trends are generally reflective of what is happening in the community. The average number of days a person spends in the shelter is steadily increasing. The director of the Service speculates, "The longer stay often reflects when resources - especially housing - become more difficult to obtain. For example, depending on the size of the family, they could be on the waiting list for public housing for quite some time. It also reflects some changes in how we work with the women who are staying with us. We have always provided individualized advocacy, but we have increased the breadth of services and support over the last year or so."

Oregon Healthy People Marion Oregon Benchmark County 2010 2010 Count Count 2003 546 48 N/A N/A 65 2004 512 71 2005 611 793 68 2006 **Alcohol Related Motor Vehicle Deaths**

Alcohol Related Motor Vehicle Injuries

	Marion County	Oregon	Oregon Benchmark 2010	Healthy People 2010
	Count	Count		
2003	11	155		
2004	18	146	N/A	N/A
2005	11	153		
2006	9	158		

WAS DATA READILY AVAILABLE?

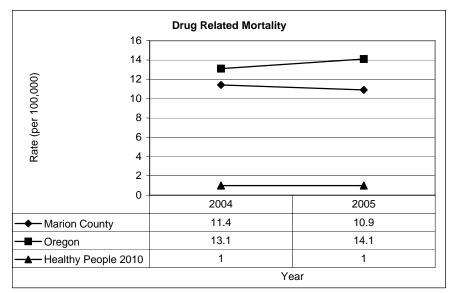
No

NOTES:

- 1. Raw crash data numbers were taken from ODOT Crash Analysis and Reporting Annual Crash Summary Book.
- 2. Numbers may not be complete because numbers are people who are admitted to a hospital for injuries and tested for blood alcohol levels. This means anyone who has injuries not severe enough to be taken to the hospital would not be included in this count.
- 3. In May of 2007 House Bill 2895 was passed that modifies the requirement that health care providers notify law enforcement officer or agency if person believed to be driver in motor vehicle accident has blood alcohol level exceeding legal limit for operating motor vehicle. Previously it was the decision of the arresting officer whether or not to request a test of blood alcohol content.
- 4. Katharine Jones (katharine.m.jones@odot.state.or.us) said Oregon Department of Transportation does not calculate alcohol related death and injury rates, they just have the total numbers. And they don't have them broken down into age groups.
- Healthy People 2010 indicator 26-1 target population group is U.S. civilians who are noninstitutionalized. The noninstitutionalized population of Oregon and Marion County are not available at this time. However, these numbers might be available after the 2010 Census.

- Oregon Department of Transportation, Transportation Data
 <u>http://www.oregon.gov/ODOT/TD/TDATA/car/CAR_Publications.shtml</u>
- 74th Oregon Legislative Assembly Summary, House Bill 2895, 2007
- Center for Disease Control and Prevention Healthy People 2010 Indicator 26 http://www.healthypeople.gov/document/html/volume2/26substance.htm

	Drug Related Mortality Rate (per 100,000 population)							
	Marion County		Oregon		Oregon Benchmark 2010	Healthy People 2010		
	Count	Rate	Count	Rate		1		
2004	34	11.4	471	13.1	N/A	l per 100,000		
2005	33	10.9	511	14.1		100,000		



No

NOTES:

- 1. Data only available beginning in 2004.
- 2. Healthy People 2010 goal is "Reduce drug-induced deaths." The specific target is 1 death per 100,000 people.
- 3. Nationally, in 2005, there were 33,541 deaths that were "drug-related mortality" which is a rate of 11.3 per 100,000.
- 4. "The Drug Related Mortality category includes ICD codes across several causes of death, many of which can be categorized as unintentional injuries, mental disorders, and suicide." Victoria Buelow, Center for Health Statistics <u>Victoria.h.buelow@state.or.us</u>. This means that these deaths are related to ALL drugs, not just illicit drugs.

SOURCES:

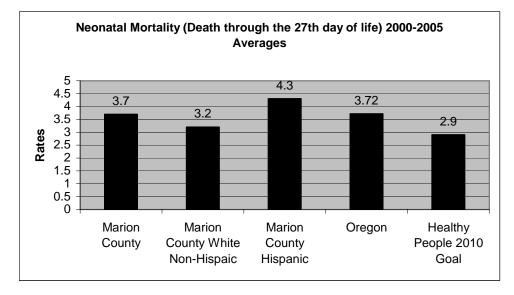
- State of Oregon Center for Health Statistics Annual Report, Volume II, Tables 6-38, 6-37 <u>http://www.dhs.state.or.us/dhs/ph/chs/data/vol2.shtml</u>
- Center for Disease Control and Prevention Healthy People 2010 Indicator 26
 http://www.healthypeople.gov/document/html/volume2/26substance.htm
- <u>http://www.cdc.gov/nchs/data/nvsr/nvsr56/nvsr56_10.pdf</u>

NARRATIVE:

Drug related mortality rates for Marion County and Oregon are significantly higher than the Healthy People 2010 target of 1 per 100,000 people. Marion's numbers are small so the small decrease between 2004 and 2005 is not significant. Marion's numbers are slightly lower than Oregon's.

Defined as death through the end of the 27th day of life. Rate is per 1,000 live births.

Neonatal Mortality (Rate per 1,000 live births)									
	Marion County		Oregon						
	Number	Rate	Number	Rate	Healthy People 2010 Goal				
2001	15	3.3	158	3.5					
2002	16	3.6	172	3.8	2.0 mor				
2003	18	3.9	173	3.8	2.9 per 1,000 live births				
2004	13	2.8	178	3.9	1,000 live births				
2005	18	3.8	177	3.9					



WAS DATA READILY AVAILABLE?

Yes/No See notes

Notes:

- 1. The only data that provides race breakdowns on this indicator is the state's VistaPHw analysis program. However, the data in this analysis program consists of very small sample sizes.
- 2. Both the white and Hispanic groups are groups in Marion County.
- 3. Nationally, in 2003, the neonatal mortality rate was 4.6 per 1,000 live births.

Sources:

http://www.state.or.us/dhs/ph/chs/data/birth/lbvl.shml www.orgon.gov.DHS/ph/ofhs http://www.healthypeople.gov/data/midcourse/html/focusareas/FA09TOC.htm Center for Health Statistics Annual Report: http://www.dhs.state.or.us/dhs/ph/chs/data/vol2.shtml http://www.healthypeople.gov/document/HTML/Volume2/16MICH.htm http://www.cdc.gov/nchs/data/nysr/nysr54/nysr54_16.pdf

1	initiant mortanty face domin	ieu og oregon rieutin		
	Infant M	lortality (rate per 1,		
	Marion County	Oregon	-	WAS DATA READILY AVAILABLE? Yes – through DHS

Oregon

Benchmark

4.5 per

1,000 live

births

Yes – t	hrough	DH
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Notes:

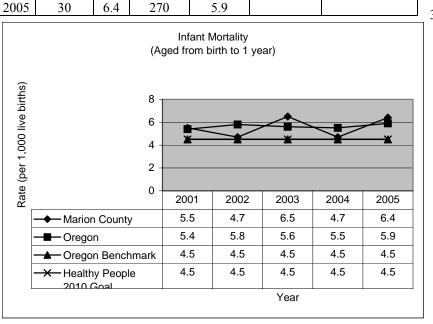
Healthy People

2010 Goal

4.5 per

1,000 live births

- 1. Both the white and Hispanic groups are groups in Marion County.
- 2. The CDC reports that the infant mortality rate for the U.S. in 2004 was 6.78 infant deaths (under 1 year of age) per 1,000 live births.
- There continues to be racial/ ethnic disparities in 3. infant mortality rates.
- Non-Hispanic black women had the highest 4. infant mortality rates.
- 5. Higher rates at 12.23 in District of Columbia, 10.31 in Louisiana and 9.90 in Mississippi were considerably higher than Oregon's 5.47 rate in 2004.
- 6. Nationally, in 2004, there were 27,936 infant deaths, which is a rate of 6.8 per 1,000 live births.
- 7. Oregon Benchmark is for 2010.



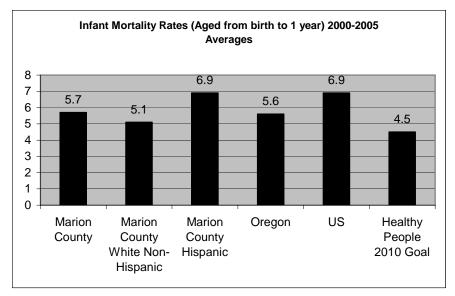
Rate

5.4

5.8

5.6

5.5



Sources:

Number

25

21

30

22

2001

2002

2003

2004

Rate

5.5

4.7

6.5

4.7

Number

245

260

256

252

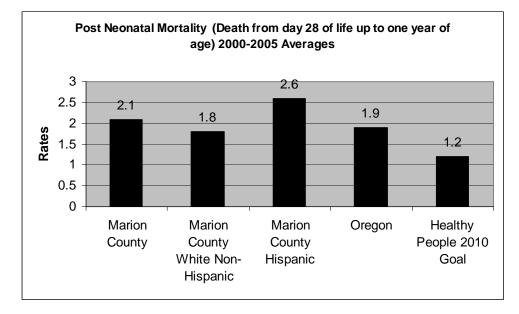
www.dhs.state.or.us/dhs/ph/chs/data/birth/lbvl.shtml http://www.cdc.gov/hchs/search.htm

State of Oregon VistaPHw program: Oregon Department of Human Services/Public Health Division.

http://www.healthypeople.gov/data/midcourse/html/focusareas/FA09TOC.htm http://www.oregon.gov/DHS/ph/ofhs/ http://www.cdc.gov/nchs/pressroom/07/newsreleases/infantmortality.htm http://www.dhs.state.or.us/dhs/ph/chs/data/vol2.shtml http://www.cdc.gov/nchs/fastats/infant_health.htm http://benchmarks.oregon.gov/Quan/BMReporting/default.aspx

Defined as death from day 28 of life up to one year of age. **Rate is per 1,000 live births.**

			-Neonatal N per 1,000 liv		v
	Marion Co	ounty	Orego	n	Healthy People 2010
	Number	Rate	Number	Rate	Goal
2001	10.0	2.2	87.0	1.9	
2002	5.0	1.1	88.0	1.9	1.2 m m
2003	12.0	2.6	83.0	1.8	1.2 per 1,000 live births
2004	9.0	1.9	47.0	1.6	
2005	12.0	2.5	93.0	2.0	



WAS DATA READILY AVAILABLE? Yes

Notes:

- 1. The data available for this indicator comes from the state's VistaPHw analysis program. The data consists of a very small sample sizes, therefore the graph above may not represent post neonatal information accurately.
- 2. Both the white and Hispanic groups are groups in Marion County.
- 3. Nationally, in 2003, the post-neonatal mortality rate was 2.2 per 1,000 live births.

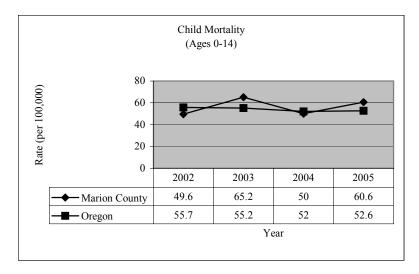
Sources:

http://www.state.or.us/dhs/ph/chs/data/birth/lbvl.shml www.orgon.gov.DHS/ph/ofhs http://www.healthypeople.gov/data/midcourse/html/focusareas/FA09TOC.htm Center for Health Statistics Annual Report: http://www.dhs.state.or.us/dhs/ph/chs/data/vol2.shtml http://www.healthypeople.gov/document/HTML/Volume2/16MICH.htm http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5508a10.htm

Category 8: Maternal and Child Health Child Mortality Rate

Child Mortality defined as deaths to children between ages 1 and 14, from all causes per 100,000 children in this age range.

	Child N	Aortality (ages 0-14)	
	Marion County		Oregon	
	Number	Rate	Number	Rate
2002	33	49.6	399	55.7
2003	44	65.2	399	55.2
2004	34	50	379	52
2005	41	60.6	376	52.6



WAS DATA READILY AVAILABLE?

No

Notes

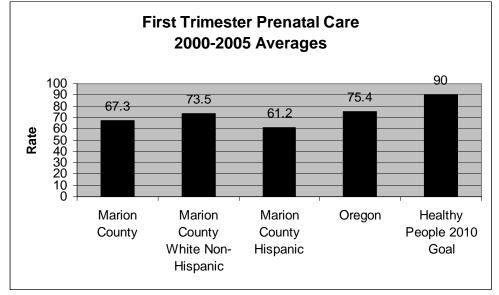
- Child mortality is defined as "a death of a child from age 0 to 14." 1.
- Healthy People 2010 categorizes child mortality in three groups; mortality to children aged 1-4 years old, mortality to 2. children aged 5-9 years old and mortality to adolescents aged 10-14 years old. Therefore, there is no Healthy People 2010 goal available for this indicator. There is no Oregon Benchmark for this indicator.
- 3.

Sources:

Center for Health Statistics Annual Report: http://www.dhs.state.or.us/dhs/ph/chs/data/vol2.shtml http://www.kidscount.org/datacenter/compare results.jsp?i=80 http://www.childdeathreview.org/statisticsOR.htm

Defined as the number of pregnant women who enter into prenatal care during the first three months of their pregnancy. **Rate is Per 100 Live Births.**

First Trimester Prenatal Care (as percent of total births)				
	Marion County	Oregon	Oregon Benchmark	Healthy People 2010 Goal
2002	73.7	81.6		
2003	72.3	81.1		
2004	72.5	80.4	90%	90%
2005	73.4	81.0		
2006	74.1	79.2		



WAS DATA READILY AVAILABLE?

Yes/no See notes

Notes:

- 1. No rate is shown for the African American, Native American, and Asian/Pacific Islander populations in this graph because the sample size for each of these three populations was very small.
- 2. Both the white and Hispanic Groups are groups in Marion County.
- 3. Marion County Health Department has been working on improving care for early prenatal care since 1997.
- 4. In 1999 the Health Department received a three-year grant from Northwest Health Foundation to develop a Community Prenatal Task Force to provide prenatal care for uninsured women.
- 5. In 2003 Salem Hospital and Mid Valley Independent Physicians Association funded Marion's Prenatal Project. The goal is to provide equitable, patient centered, timely, early prenatal care to women in Marion and Polk counties.
- 6. Salem Hospital Laboratory provides discounted prenatal laboratory testing for cash payment and Mission Medical Imaging provides discounted ultrasounds for cash payments.
- 7. Before 2003, High-risk clients were referred for prenatal care and delivery to OHSU in Portland.
- 8. Oregon Benchmark is for 2010

Sources:

www.dhs.state.or.us/dhs/ph/chs/data/birth/lbvl.shtml

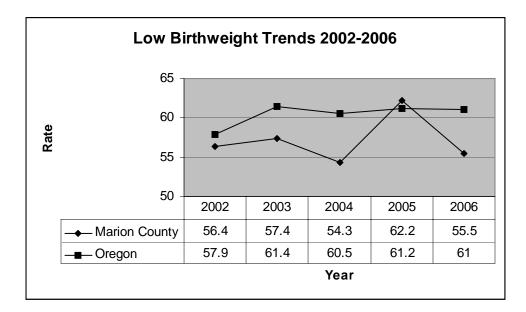
http://www.cdc.gov/hchs/search.htm

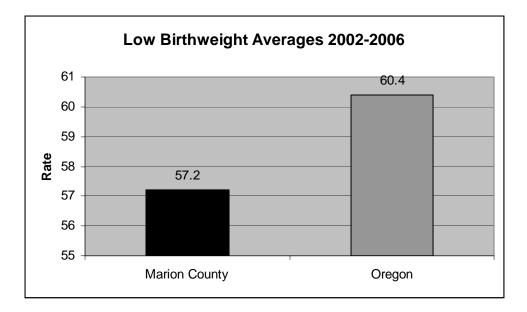
State of Oregon VistaPHw analysis program: Oregon Department of Human Services/Public Health Division.

http://www.healthypeople.gov/data/midcourse/html/focusareas/FA09TOC.htm

http:www.dhs.state.or.us/dhs/ph/chs/data/birth/birthdata/shtml

http://benchmarks.oregon.gov/Quan/BMReporting/default.aspx





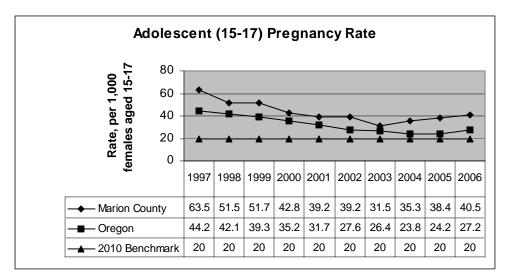
Yes/no. Data was readily available for the groups shown in the graph.

Notes:

- 1. No data has been found that provides African American, Native American and Asian/pacific Islander breakdowns.
- 2. The Percentages for Oregon, Marion County, White, and Hispanic were calculated manually by adding up the years 2002 through 2006 and dividing the total by five.

Sources:

State of Oregon VistaPHw analysis program: Oregon Department of Human Services/Public Health Division. <u>http://www.healthypeople.gov/Data/midcourse/html/default.htm#FocusAreas</u> <u>http://www.dhs.state.or.us/dhs/ph/chs/data/birth/lblb.shtml</u> <u>http://www.dhs.state.or.us/dhs/ph/chs/data/birth/trends.shtml</u> <u>http://www.healthypeople.gov/document/HTML/Volume2/16MICH.htm</u>



WAS DATA READILY AVAILABLE?

No

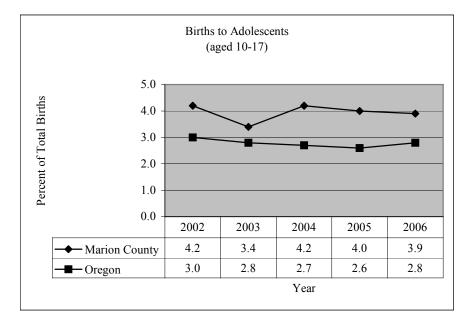
Notes:

- Marion County Health Department began work on reducing Marion County's teen pregnancy rate by implementing a STARS (Students Today Aren't Ready for Sex) Program in the late 90's. The STARS program trains high school teen leaders to mentor middle school peers to learn to say "NO" to sexual involvement at an early age.
- 2. Despite the efforts of STARS, Marion County's rate of teen pregnancy remained higher than state averages, and didn't start declining until Emergency Contraception was introduced in early 2000.
- 3. Emergency Contraception (also known as the "morning after pill" or Plan B) became available in family planning clinics in early 2000.ECP (emergency contraception) works by preventing both ovulation or fertilization and possibly post-fertilization implantation. ECP's are distinctly different from abortion methods such as RU46, that act after implantation. ECP's intent is for occasional use, when primary methods of contraception fail. It is licensed for use up to 72 hours after sexual intercourse.
- 4. Sandra Harms (503) 931-3828 who works with Students Today Aren't Ready for Sex (STARS) for DHS. She said that STARS is 'evidence based' based on best practices. STARS is not researched based. They have taken pieces from other programs that are researched based and molded them to fit our community. They had the evaluation done in 2004 because the STARS Foundation was very active that year in bringing in donations, so they had extra money. STARS Foundation has not been that active since 2004, so they don't have enough funds for another evaluation. I asked her if they have any evidence to prove that STARS is creating a delay in sexual activity or that STARS has impacted the teen pregnancy rate, and Sandra said that they do informal evaluations throughout the year that show changes in intent to become sexually active and an increase in knowledge, but no scientific study has been done to prove these statements

Sources:

- Oregon Progress Board 2010 Benchmarks. Oregon Shines Goal #2: safe, caring, and engaged communities: social support: health: #39. http://benchmarks.oregon.gov/Quan/BMReporting/default.aspx
- State of Oregon Center for Health Statistics County Data Book, Table 23 http://www.dhs.state.or.us/dhs/ph/chs/data/cdb.shtml
- State of Oregon VistaPHw analysis program: Oregon Department of Human Services/Public Health Division.
- http://en.wikipedia.org/wiki/Emergency_contraception

Births to Adolescents								
	Marion	County	Oregon					
	Number	Percent of Total Births	Number	Percent of Total Births				
2002	187	4.2	1,358	3.0				
2003	156	3.4	1,272	2.8				
2004	193	4.2	1,228	2.7				
2005	188	4.0	1,203	2.6				
2006	195	3.9	1,348	2.8				



Yes

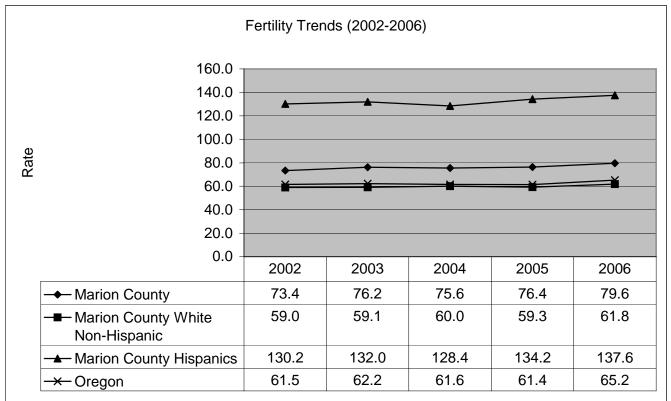
Notes:

1. Data is live births to adolescents ages 10-17.

Source:

http://www.dhs.state.or.us/dhs/ph/chs/data/teenp.shtml

The number of births to women of all ages per 1,000 women in the population aged 15 to 44. (Births to women by race and ethnicity).



WAS DATA READILY AVAILABLE? Yes

Notes:

- 1. There is no Healthy People 2010 goal for this indicator.
- 2. The graphs show that Hispanic populations are having babies at a much higher rate than any other race group including the Marion County and the state of Oregon.
- 3. There are cultural and social assumptions that contribute to the high rate among the Hispanic population but nothing that clearly shows why this is happening.
- 4. White, African American, Native American, Asian Pacific Islander, and Hispanic groups are all for Marion County.

Sources:

State of Oregon VistaPHw analysis program: Oregon Department of Human Services/Public Health Division. http://www.healthypeople.gov/Data/midcourse/html/default.htm#FocusAreas

Perc	Percent of Adults in Good General Health			Pe	ercent of A	dults in G	ood Physical	Health	
	Marion County	Oregon	Oregon Benchmark	Healthy People 2010		Marion County	Oregon	Oregon Benchmark	Healthy People 2010
2002-2005	83.10%	84.30%	72%	N/A	2002- 2005	63.40%	62%	N/A	N/A

WAS DATA READILY AVAILABLE?

Yes

SOURCE:

Center for Health Statistics –Adult Survey (BRFSS) http://www.dhs.state.or.us/dhs/ph/chs/brfs/county/0205/gdgenhlthaa.shtml

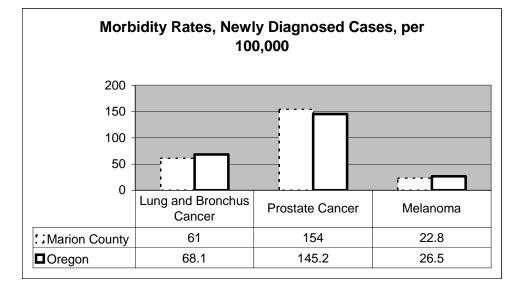
Oregon Progress Board Indicator 46: Perceived Health Status http://www.oregon.gov/DAS/OPB/2005report/obm46.shtml

http://benchmarks.oregon.gov/Quan/BMReporting/default.aspx

NOTES:

- 1. Good general health: Reported that their health in general was "excellent", "very good", or "good" when asked on a five-point scale ("excellent", "very good", "good", "fair", and "poor").
- 2. Good physical health: had no poor physical health in past 30 days.
- 3. Age-adjustment is based on three age groups:18-34; 35-54; and 55+, per the U.S. Standard Million
- 4. Age-adjustment is a method of adjusting data from two or more populations at the same time to account for the differences in rates that occur solely from age differences so that the data can be compared.
- 5. The Behavioral Risk Factor Surveillance System (BRFSS) is an on-going telephone health survey system that tracks health conditions and risk behavior. Because information is gathered by telephone, the data does not represent those populations who do not have access to a telephone.
- 6. Oregon Benchmark states "72% of Oregonians whose self-perceived health status is very good or excellent." This indicator is not comparable, because data is for those who responded "excellent", "very good", or "good."
- 7. Oregon Benchmark is for 2010.
- 8. For the Marion County Health Department survey, for the questions titled "How is your health?" 73% of respondents indicated that their health was good or excellent.

Morbidity Rates, Newly Diagnosed Cases, per 100,000							
	Marion	County	Ore	gon			
	2000	2005	2000	2005			
Breast Cancer	167.9	127.2	145.3	130.5			
Cervical Cancer	10.9	5.4	8.5	5.8			
Colorectal Cancer	63.3	47.4	52	45.7			
Lung and Bronchus Cancer	75.7	61	70.6	68.1			
Prostate Cancer	180.2	154	170.8	145.2			
Melanoma	18.9	22.8	23.5	26.5			
Oral Cancer	10.8	11.2	11.1	9.7			



WAS DATA READILY AVAILABLE?

No

NOTES:

- 1. Age-adjustment is a method of adjusting data from two or more populations at the same time to account for the differences in rates that occur solely from age differences so that the data can be compared
- 2. The rate here is for breast cancer morbidity in women. The American Cancer Society estimates that in 2008 there will be 1,990 new cases of breast cancer in men in 2008, and 450 deaths.

SOURCES:

Catherine Riddell Research Analyst Oregon State Cancer Registry Phone: (971) 673-1113 FAX: (971) 673-0996 catherine.a.riddell@state.or.us

Mortality Rates per 100,000							
	Marion C	County	Oregon				
	2000	2005	2000	2005			
Total Deaths	848.4	798	859.6	849.6			
Unintentional Injury	31.4	31.8	34	39.3			
Diabetes Mellitus	24.4	39.4	24.6	31.1			
Pneumonia/Influenza	17.8	16.5	18.5	16.7			
Stroke	41.9	37.4	39.2	33.6			
Cardiovascular Disease	222.1	167.1	206.7	185.1			
All Cancer	206.4	181.7	203.4	200.4			
Breast Cancer	13.6	12.6	14.1	13.1			
Bronchus & Lung Cancer	59.7	52	60.5	57.7			
Colorectal Cancer	14.3	12.9	14.8	14.4			
Cervical Cancer (females)	0.7	0.7	2.1	2.2			

WAS DATA READILY AVAILABLE? Yes

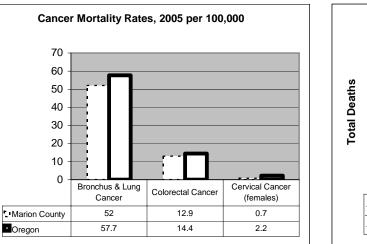
SOURCE:

Center for Health Statistics, Annual Report, Volume 2, Section 6: Mortality.

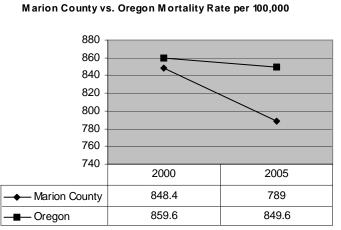
http://www.oregon.gov/DHS/ph/chs/index.shtml

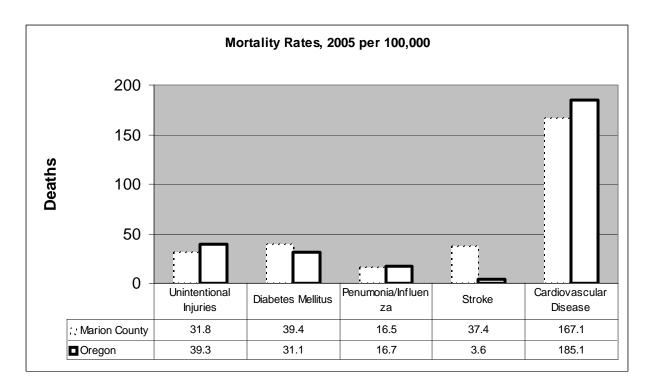
NOTES:

- 1. Age-adjusted mortality, and breakdowns by race and gender were not available.
- The age-adjusted mortality rates in Marion County and Oregon for melanoma of the skin are not statistically significant. In 2000 17 Marion County residents died from melanoma of the skin and 11 in 2005. 107 Oregonians died from melanoma of the skin in 2000 and 117 died in 2005. The number of deaths decreased in Marion County and increased in Oregon.



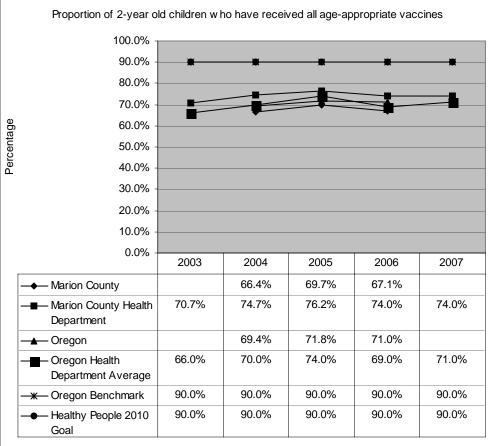
Deaths





Proportion of 2-year old children who have received all age-appropriate vaccines									
	Marion County	Marion County Health Department	Oregon	Oregon Health Department Average	Oregon Benchmark	Healthy People 2010 Goal			
2003	N/A	70.7%	N/A	66.0%					
2004	66.4%	74.7%	69.4%	70.0%					
2005	69.7%	76.2%	71.8%	74.0%	90%	90%			
2006	67.1%	74.0%	71.0%	69.0%					
2007	N/A	74.0%	N/A	71.0%					

Department data is based on information in IRIS, which is the states immunization medical records system, about children who have received immunizations from the Marion County Health Department even only once rather than actual caseload of children



Was Data Readily Available? Yes

Notes:

 Data for Marion County relies on physician reporting to ALERT immunization database and therefore actual rates may be higher.

2. Marion County Health

County Health Department even only once rather than actual caseload of children who received all their vaccines

who received all their vaccines from the Marion County Health Department.

- For Health Department data, the 43133 series includes 4 DTaP (Diphtheria, Tetanus, and Pertussis), 3 IPV (Polio), 1 MMR (Measles, Mumps, Rubella), 3 Hib (Haemophilus influenzae type b), and 3 Hepatitis B.
- 4. Starting in 2006 the State of Oregon began requiring the varicella vaccination, which accounts for some drop in immunization rates.
- Oregon Benchmark is 90% of 2year-olds who are adequately immunized. Benchmark is for 2010.
- Healthy People 2010 goal is to "Increase in and Maintenance of Vaccination Coverage Levels Among Children Aged 19 to 35 Months." The specific target is 90 percent.
- National data reported through CDC states that rates for routinely recommended vaccines vary from state to state. A low of 59.5% to a high of 83.6% in

Massachusetts is still below the 2010 goal.

Sources:

www.oregon.gov/DHS/ph/imm/docs/Rates/OR.Table/06feb08.pdf http://benchmarks.oregon.gov/Quan/BMReporting/default.aspx#d324337c-8fe0-4406-ad37-181ed9bf060d http://www.healthypeople.gov/Document/HTML/Volume1/14Immunization.htm Sara Beaudrault, MPH, VFC/AFIX Coordinator, Immunization Program, Oregon DHS http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5634a2.htm

	e ever been neumococca		l for			oportion of who have ev pneumoco		nmunized f	or	
2002	Marion County 73.7%	Oregon 65.0%	Healthy People 2010 Goal	Proportion of Adults	100.0 80.0 60.0					
2002	67.4%	71.0%		ion o	40.0 -			•		
2003	58.2%	69.4%	90%	port						
2004	67.0%	71.4%		Pre	20.0 -					
2003		74.70%			0.0 -	2002	2003	2004	2005	2006
2000	/0.8%	/4./070	1	[73.7	67.4	58.2	67.0	76.8
					— ■ — Oregon	65.0	71.0	69.4	71.4	74.7
					─▲ Healthy People 2010 Goal	90	90	90	90	90
				l	2010 000					
	n of adults a immunized							Year		
		in the past			Proportion of ad immunized in	-		lder who		en
	immunized	in the past		Adults	-	n the past		lder who		en ▲
	immunized for infl Marion	in the past luenza	12 months Healthy People 2010 Goal	n of Adults	immunized in	n the past		lder who		en
ve been i	immunized for infl Marion County	in the past luenza Oregon	12 months Healthy People 2010 Goal	rtion of Adults	immunized in 100 80	n the past		lder who		en
ve been i 2002	immunized for infl Marion County 70.6%	in the past luenza Oregon 68.0%	12 months Healthy People 2010 Goal	roportion of Adults	immunized in 100 80 60 40 20	h the past		lder who		en ▲
2002 2003	immunized for infl Marion County 70.6% 64.6% 69.5%	in the past luenza Oregon 68.0% 70.5%	12 months Healthy People 2010 Goal 90%	Proportion of Adults	immunized in 100 80 60 40	h the past		lder who		2006
2002 2003 2004	immunized for infl Marion County 70.6% 64.6% 69.5% 70.7%	in the past luenza Oregon 68.0% 70.5% 71.0%	12 months Healthy People 2010 Goal 90%	Proportion of Adults	immunized in 100 80 60 40 20	h the past	12 mont	Ider who hs for inf	fluenza	
2002 2003 2004 2005	immunized for infl Marion County 70.6% 64.6% 69.5% 70.7%	Oregon 68.0% 70.5% 71.0% 68.9%	12 months Healthy People 2010 Goal 90%	Proportion of Adults	immunized in 100 80 60 40 20 0	2002	2003	Ider who hs for inf	fluenza	2006
2002 2003 2004 2005	immunized for infl Marion County 70.6% 64.6% 69.5% 70.7%	Oregon 68.0% 70.5% 71.0% 68.9%	12 months Healthy People 2010 Goal 90%	Proportion of Adults	immunized in 100 80 60 40 20 0 Marion County	2002 70.6 68	2003 64.6	Ider who hs for inf 2004 69.5	2005 70.7	2006 73.1

Yes and No. Data for Marion County was easily available, but data for the state was not.

Notes:

- 1. The Healthy People 2010 goal is to "Increase the proportion of adults who are vaccinated annually against influenza and ever vaccinated against pneumococcal disease." The target for pneumococcal pneumonia is 90 percent.
- 2. The pneumococcal vaccine is recommended for adults aged 65 and older and persons aged 2 and older if they have a chronic illness, are immunocompromised, or have an HIV infection.
- 3. The Healthy People 2010 goal is to "Increase the proportion of adults who are vaccinated annually against influenza and ever vaccinated against pneumococcal disease." The target for influenza is 90 percent.

Sources:

http://apps.nccd.cdc.gov/brfss/display.asp?cat=IM&yr=2006&qkey=4408&state=OR http://www.healthypeople.gov/Document/HTML/Volume1/14Immunization.htm

Syphilis					
Averag	Average Rate				
Per 10	Per 100,000				
2003-	-2007				
Marion					
County	Oregon				
0.63	1.44				

Yes

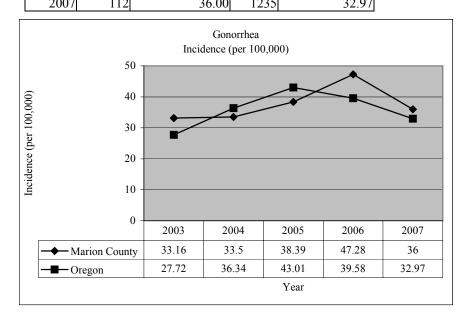
Notes:

- 1. Syphilis, a genital ulcerative sexually transmitted disease, causes significant complications if untreated. It can facilitate transmission of HIV.
- 2. Untreated early syphilis in pregnant women results in perinatal death in up to 40% of cases and, if acquired during the four years prior to pregnancy, can cause infection in the fetus in 80% of cases.
- 3. The State Health Division reports that syphilis cases reported in 2006 reflect a 16% decrease compared to the 57 cases reported in 2005. Oregon ranked 41st in US cases for 2006.
- 4. Syphilis cases are more prevalent in certain areas of the country. 47.1% of cases were in the South.
- 5. Primary stage of syphilis (the time between infection and start of the first symptom) usually occurs with 10-90 days after contact. Secondary stage starts with the development of a non-itchy rash anywhere on the body and can resolve without treatment. This progresses to latent stages of the disease, and can appear 10-20 years after the infection was first acquired. At this stage, the disease may damage the internal organs, including the brain, nerves, eyes, heart, and joints.
- 6. For our purposes, and due to the low numbers, Early Syphilis represents an aggregate of primary, secondary, and early latent cases of less than one year's duration. The 48 early syphilis cases reported for the state in 2005 represent a 16% decrease compared to 2005. The majority of 2006 cases were among men who have sex with men.
- 7. There is no Healthy People 2010 goal for this indicator.

Sources:

www.oregon.gov/DHS/ph/std/docs/county www.cdc.gov/std/sats/syphilis.htm

Gonorrhea									
	Mar	ion County		Oregon					
	Cases	Rate (per 100,000)	Cases	Rate (per 100,000)					
2003	98	33.16	982	27.72					
2004	100	33.5	1302	36.34					
2005	116	38.39	1562	43.01					
2006	145	47.28	1461	39.58					
2007	112	36.00	1235	32.97					



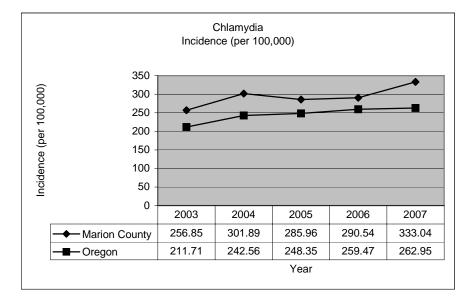
Yes Notes:

- 1. Gonorrhea is the second most commonly reported sexually transmitted infection (STI) in the US. It frequently is a major cause of infertility or ectopic pregnancies (when the fertilized ovum is implanted in any tissue other than the uterine wall).
- The South continues to report the highest numbers of cases, however, rates on the West increased 31.8% between 2002-2006.
- 3. Highest rates were found among adolescents and young adults in 2006.
- 4. The Oregon Health Division reports a 6.6% decrease from those reported in 2005.
- 5. There is no Healthy People 2010 goal for this indicator.

Sources:

http://oregon.gov/DHS/ph/acd/arpt/arpt06/gonorrhea.pdf http://www.cdc.gov/std/stats/gonorrhea.htm

	Chlamydia									
	Μ	arion County	Oregon							
	RateCases(per 100,000)		Cases	Rate (per 100,000)						
2003	759	256.85	7,498	211.71						
2004	901	301.89	8,690	242.56						
2005	864	285.96	9,019	248.35						
2006	891	290.54	9,576	259.47						
2007	1,036	333.04	9,849	262.95						



Yes

Notes:

- 1. Chlamydia is the most commonly reported STI in the US and in Oregon. In 2006, there was an increase of 6.2% from 2005. The Oregon Health Division reports that the highest rates of infection occur among women in the ages 15-24.
- 2. There are often no symptoms in women and also like gonorrhea can cause fertility problems and chronic pelvic pain.
- 3. Pregnant women with Chlamydia can pass the infection to their infants during delivery causing neonatal opthalmia and pneumonia. Due to the large burden of disease and risks associated with infection, CDC recommends screening for all sexually active women aged less than 26 years.
- 4. There is no Healthy People 2010 goal for this indicator.

Source:

www.oregon.gov/DHS/ph/acd/arpt/arpt06/chlamy.pdf

	HIV/AIDS									
	Mario	Oreg	Healthy People							
	HIV/AIDS cases	Rate Per 100,000	HIV/AIDS cases	Rate Per 100,000	2010 AIDS Cases Goal					
2003	24	8.1	325	ŕ	1 new					
2004	19	6.4	322	9.0	case per 100,000					
2005	19	6.3	303	8.3	people					
2006	15	4.9	284	7.7						
2007	25	8.0	260	6.9						

Yes

Notes:

- 1. AIDS and HIV positive cases for Marion County are new AIDS was first reportable in 1981. Since that time 6,040 people were diagnosed with AIDS in Oregon, and 3,168 of them have died.
- 2. HIV infection (as opposed to AIDS) became reportable in Oregon, Oct 1, 2001.
- 3. Marion County had the second highest <u>new incidence</u> of HIV/AIDS cases in the state in 2006. Multnomah County's rate at 402.9 /100,000 skews the rest of the state.
- 4. Marion County had the second highest rate per 100,000 (319) people living with HIV/AIDS in 2006 next to Multnomah County.
- 5. Healthy People 2010 goal is to "reduce AIDS among adolescents and adults." The target is 1 new case per 100,000 people.

Sources:

Jeff Capizzi, Research Analyst, Oregon Dept. of Human Services, HIV/STD/TB Program http://www.healthypeople.gov/Document/HTML/Volume1/13HIV.htm

Bacterial Meningitis 2003-2007						
Marion	County	Ore	gon			
	Average		Average			
	Rate Per		Rate Per			
Cases	100,00	Cases	100,00			
16	1.06	251	1.38			

Notes:

- Meningococcal disease (meningitis) is serious and can be fatal though 90-1. 95% of people infected can be treated effectively with antibiotics.
- 2. Meningitis is an infection in the fluid of a person's spinal cord and brain. It can be viral or bacterial. Viral is usually less severe and resolves without

specific treatment.

- 3. Symptoms include acute onset of fever, intense headache, nausea, vomiting, stiff neck and photophobia. Sometimes a rash occurs.
- 4. Oregon Health Division reported 41 cases in 2006, a 17-year low. Oregon is on the decline, but still has higher rates than the nation.
- 5. Meningococcal vaccine is effective against four serogroups (A, C, Y and W135) but will not cover the serogroup B strain.
- 6. The majority of illness in Oregon in 2006 were caused by serogroup B organisms, and occur primarily among infants, ages 10-19 and persons over age 70.
- 7. Healthy People 2010 goal is to "Reduce bacterial meningitis in young children aged 1-23 months." Because data for both Marion County and Oregon represents people of all ages this goal does not apply.

Sources:

www.oregon.gov/DHS/ph/acd/arpt/arpt06/mening.pdf www.oregon.gov/DHS/ph/acd/diseases/nmenin/nemenin.shtml http://www.healthypeople.gov/document/HTML/volume1/14Immunization.htm Control of Communicable Diseases Manual, 18th edition, David L.Heyman MD, American Public Health Association

Was Data Readily Available?

Yes

Notes:

- 1. Hepatitis is a liver disease caused by the Hepatitis A virus infecting humans through fecal-oral transmission. Hepatitis A is a foodborne disease, frequently caused by an infected food handler.
- 2. The Oregon Health Division reports that 47 cases of acute Hepatitis A were reported in 2006.
- Vaccine is recommended for long-term prevention and is 3. available for all children 1 year of age and older. It will

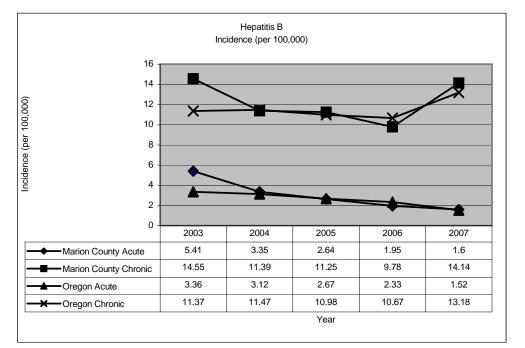
Hepatitis A 2003-2007								
Marion	Healthy People							
Cases	Average Rate Per 100,00	Cases	Average Rate Per 100,00	2010 Goal				
				4.5 cases per				
22	1.46	252	1.39	100,000				

be required for all school age children in the fall of 2008. The low rates of Hepatitis A are attributed to the vaccine.

Sources:

www.oregon.gov/DHS/ph/acd/arpt/arpt06/hepa.pdf http://www.healthypeople.gov/Document/HTML/Volume1/14Immunization.htm

Hepatitis B 2003-2007							
	Marion County Oregon						
Ac	ute	Chr	onic	Ac	ute	Chronic	
Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000
45	2.99		12.22		2.6		11.53



Yes

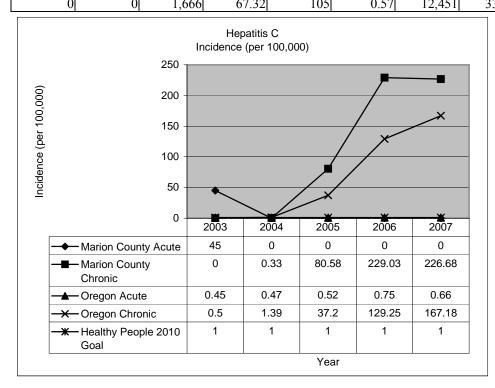
Notes:

- 1. Hepatitis B is a vaccine preventable viral disease caused by virus from the infected person passed to another through blood, semen or saliva into the blood stream of another non-immune person.
- 2. Acute Hepatitis B is diagnosed by presence of IgM antibody in the blood.
- 3. A decline in Hepatitis B began after the vaccine was licensed in 1982.
- 4. The State reported 86 acute cases in 2006, high-risk populations such as men who have sex with men, multiple heterosexual partners, and injection drug users made up over half the reported cases.
- 5. Chronic Hep B- the likelihood of becoming a chronic carrier is affected by the age at the time of infection. Fewer than 6% of acutely infected adults born in the US become carriers, compared with 25-90% infants born of a Hep B infected mother.
- 6. Perinatal infection can be prevented by prompt administration of hepatitis B immune globulin and initiation of the three dose hepatitis B vaccination series.
- 7. In Oregon, 43% of chronic carriers were born in hepatitis B endemic countries.
- 8. Chronic carriers are not reportable in many states, so we are not able to compare Oregon to the rest of the US.
- 9. Acute symptoms can last several weeks, and up to 6 months. Children under age 5 are often asymptomatic. Symptoms can include jaundice, fever, fatigue, nausea, vomiting, abdominal pain, dark urine and clay colored stools.
- 10. Chronic Hepatitis is that which lasts for a long period of time, usually 6 months or more. They may have no evidence of liver disease, or may have complications of liver disease including cirrhosis of the liver or liver cancer.
- 11. Healthy People 2010 goal is to "Reduce hepatitis B." The targets are broken down by age groups; 19-24, 25-39, and 40 and older, Because data for Marion County and Oregon for this indicator is people of all ages this goal does not apply.

Sources:

www.oregon.gov/DHS/ph/acd/arpt/arpt06/hepb_acute.pdf www.cdc.gov/ncidod/diseases/heptatitis/b/faqb/htm www.cdc.gov/ncphi/diss/nndss/casedef/hepatitisbcurrent.htm http://www.healthypeople.gov/document/HTML/volume1/14Immunization.htm

Hepatitis C 2003-2007								
	Marion	County			Ore	gon		
Ac	ute	Chronic		Acute Chronic			onic	
Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000	Healthy People 2010 Goal
0	0	1,666	67.32	105	0.57	12,451	335.52	1 new case per 100,000



Yes

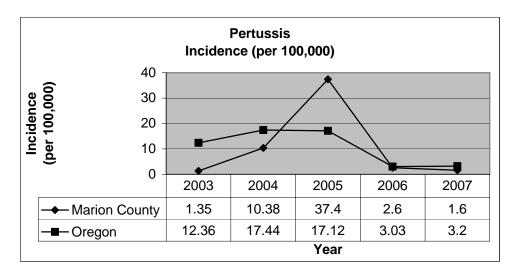
Notes:

- 1. The increase in numbers starting in 2005 is attributed to the fact that Chronic Hepatitis C became a reportable disease to the state in 2005.
- 2. Most infections are due to illegal injection drug use.
- 3. Acute is defined as lasting for a short period of time, but can begin rapidly and have intense symptoms.
- 4. Chronic is defined as lasting for a long period of time, usually 3 months or more, and may reoccur.
- 5. The Healthy People 2010 goal is to "reduce hepatitis C." The target is 1 case per 100,000.

Sources:

www.oregon.gov/DHS/ph/acd/artp/arpt06/hepC.pdf http://www.healthypeople.gov/Document/HTML/Volume1/14Immunization.htm

Pertussis 2003-2007					
	Iarion County	C	Dregon		
Average Rate Cases Per 100,000		Cases	Average Rate Per 100,000		
161	10.67	1917	10.63		



Yes

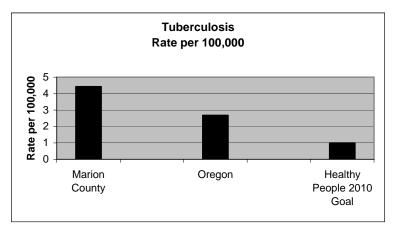
Notes:

- 1. Pertussis is a highly contagious acute bacterial infection of the respiratory tract. It is a preventable disease.
- 2. Immunizations begin at 2 months of age, and the last dose in the first series is administered by age 5.
- 3. Pertussis often goes undiagnosed in adolescents and adults, and very well could be more present than reported.
- 4. It has been noted that the immunity appears to wane by middle school, time for the booster named Tdap. Adults need to receive Tdap every 10 years.
- 5. Starting in school year 2008-2009 7th grade students will need a Tdap for school admission.
- 6. Healthy People 2010 goal is to "Reduce or eliminate indigenous cases of vaccine-preventable diseases." The target is for children under age 7. Because the data for Marion County and Oregon are people of all ages this goal does not apply.

Source:

www.oregon.gov/DHS/ph/acd/arpt/arpt06/pertussis.pdf

Tuberculosis 2003-2007					
	arion unty	Or	Healthy People 2010 Goal		
Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000	1 new case per 100,000	
67	4.43	488	2.68	100,000	



C	Was Yes		
	Marion County	Oregon	Note
2003	1	8	
2004	0	7	
2005	2	4	
2006	3	4	
2007	1	6	

otes:

- The Oregon Health Division reports: for the past decade, tuberculosis incidence has 1. been declining in both the US and Oregon.
 - The national TB incidence rate in 2007 was the lowest recorded since national reporting began in 1953. However, the TB rate among foreign born persons (Hispanics and Asians) were 9.7 times higher than US born persons. Black US born rates were eight times that of white US born.
 - Tuberculosis (TB) is common in countries such as Africa, Latin America, and SE Asia.
- 2. The case rate in 2005 for Oregon is consistently lower than the national rate, 2.8 compared to national rate of 4.8.
 - California, Florida, Illinois, New York, and Texas, combined had more than half of the TB cases.
 - In 2004 and 2005, Marion County was second in the state for numbers of TB cases. Multhomah County = 47 & 40, • Marion County = 16 & 18 cases, and Washington County = 15 & 17 cases making up 73% of the reported cases that vear.
- 3. The highest number of TB cases in Oregon (and including Marion County) in 2007 was seen among Hispanics.
 - Asian/Pacific Islanders represented the second highest proportion of TB cases.
 - Risk factors for TB include: foreign born, alcohol, non IV drug use, homeless, HIV positive, previous history of TB, • migrant work,
 - Six percent of the cases reported in 2007 were also HIV positive.
- 4. According to the tuberculosis department at the Marion County Health Department, approximately 85 percent of TB cases are from people who are foreign born.
- The Healthy People 2010 goal is "to reduce tuberculosis." The target is 1 new case per 100,000 people. 5.
- 6. In Marion County, for 2003-2007, there were no reported cases of drug resistant tuberculosis. Drug resistant tuberculosis is defined as "resistance to 2 or more drugs."
- 7. In 2005, two Marion County children were from the same family. One was under age two.
- 8. Of the cases in 2006, 2 children were under age seven.
- 9. In 2007, a child was under age 2.

Sources:

Tuberculosis:

http://oregon.gov.DHS/ph/tb/data http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5711a2.htm http://www.cdc.gov/travel/yellow/BookCh4-TB.aspx http://www.healthypeople.gov/Document/HTML/Volume1/14Immunization.htm

Childhood Tuberculosis:

www.oregon.gov/DHS/ph?hiv/data/docs/TB.xls www.oregon.gov/DHS/ph/tb/data/or2006data.pdf

www.oregon.gov/DHS/ph/tb/data/casecount.pdf

Measles 2003-2007					
Mai Cou		Ore	gon		
Cases	Average Rate Per 100,000	Cases	Average Rate Per 100,000		
3	0.2	9	0.05		

Yes

Notes:

- 1. According to the State Health Division, Measles is no longer endemic in Oregon, but cases are occasionally imported. In 2006, cases reported in Oregon were imported from Asia and Africa. The risk of measles remains low.
- 2. The number of cases is low because measles is a vaccine preventable disease.
- 3. The Healthy People 2010 goal is "Reduce or eliminate indigenous cases of vaccine-preventable diseases." The measles target is 0 cases.

Sources:

www.oregon.gov/DHS/ph http://www.healthypeople.gov/Document/HTML/Volume1/14Immunization.htm

Mumps 2003-2007					
Marion County Oregon					
	Average		Average		
	Rate Per		Rate Per		
Cases	100,000	Cases	100,000		
1	0.07	20	0.11		

Was Data Readily Available?

Yes

Notes:

- 1. The incidence of Mumps in the US has decreased with the routine childhood vaccinations, but began reoccurring in 2006. Cases were among both vaccinated and unvaccinated in Lane County.
- 2. The number of cases is low because mumps is a vaccine preventable disease.

Sources:

www.oregon.gov/DHS/ph/acd/arpt/arpt06/mumps.pdf http://www.healthypeople.gov/Document/HTML/Volume1/14Immunization.htm

Community Health Status Assessment 2008 Resident S
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	English	Spanish	Russian	Average
	Out of 2,623	Out of 274	Out of 19	Out of 2,916
How is your health?	53.4% Good (1,400)	45.3% (124)	53.% (10)	53% rate as good
	21.0% Fair (551)	42.7% (117)	26% (5)	23% rate as fair
	19.8% Excellent (519)	8% (22)	5% (1)	19% rate as excel.
	5.8% Poor (153)	4% (11)	16% (3)	6% rate as poor
Do you have health insurance?	Out of 2,623	Out of 274	Out of 19	Out of 2,916
Yes	81.0.% (2,119)	20.4% (56)	42% (8)	75% rated yes
No	19.2% (504)	79.6% (218)	58% (11)	25% rated no
What kind of insurance?	Out of 2,122 (501 skipped)	Out of 59 (215 skipped)	Out of 8 (10 skipped)	Out of 2,916
	64.7 % private	30.5% (18)	75% (6)	
	Medicaid	35.6% (21)	12.5% (1)	
	Medicare	20.3(12)	0	
	SCHIP	1.7% (1)	0	
	Other	1.7% (1)	12.5% (1)	
Last time sought health care?	Out of 2,623	Out of 274	Out of 19	Out of 2,916
Within last 30days	46.6% (1223)	30.3% (83)	32% (6)	45%
Within last 12 mos	37.1% (973)	29.9% (82)	21% (4)	36%
• More than 1-2 yrs ago	13.8% (362)	28.1% (77)	21% (4)	15%
• Never	2.5% (65)	11.7% (32)	0	.03%
Do you have a chronic illness?	Out of 2,623	Out of 274	Out of 19	Out of 2,916
• no	56.6% (1486)	82.5% (226)	79% (15)	59% says no
• yes	43.4% (1137)	17.5% (48)	21% (4)	41% says yes
If yes, what kind of chronic illness	Top illnesses listed in order:			
	 Depression (226) Diabetes (226) Asthma (221) Arthritis (167) Hi Blood pressure (119) 	 Diabetes (16) Depression (12) Thyroid (7) Arthritis (5) Asthma -(4) 	No leading illness	

	English	Spanish	Russian	Average
Gender	Out of 2,522 (101 skipped)	Out of 262 (12	Out of 19	Out of 2,803 (113
		skipped)		skipped)
• Male	32 % (808)	11.8% (31)	32.% (6)	30% were male
• Female	68% (1,717)	88.2% (231)	68% (13)	70% were female
Race/Ethnicity	Out of 2,522 (101 skipped)	Out of 262 (12 skipped)	Out of 19	Out of 2,803 (113 skipped)
• White	81.1% (2,046)	1.5% (4)	94.7% (18)	74% (2,068)
African American	1.7% (42)	0	0	2% (42)
Asian	1.6% (41)	0	0	2% (41)
Pacific Islander	1% (25)	0	0	1% (25)
American Indian	1.5% (38)	0	0	1% (38)
• Other	3.1% (78)	1.2% (3)	5.3%(1)	3% (82)
None Given	10% (252)	97.3% (255)	0	18% (507)
that skipped the question and 62 Age Group (2773 responses)	n overall demographic statistics be 20 who answered "none given") Out of 2,522 (101 skipped)	Out of 262 (12	Out of 19	Out of 2,803 (113
	• • • • • • • • • • • • • • • • • • •	skipped)		skipped)
• Under 18	1.9% (48)	2.3% (6)	11% (2)	2%
• 18-29	20.2% (510)	42.7% (112)	26% (5)	22%
• 30-39	20.3% (513)	41.2% (108)	42% (8)	22%
• 40-64	47.9 % (1208)	13.4% (35)	21% (4)	45%
• 65 >	9.8% (246)	0.4% (1)	0	9%
Satisfaction w Quality of Life	Out of 2,522 (101 skipped)	Out of 262 (12 skipped)	Out of 19	Out of 2,803 (113 skipped)
• Poor	7.2% (181)	6.0% (17)	5.0 % (1)	7% (199)
	26.6% (672)	30% (79)	53% (10)	27% (761)
• Fair	20.070 (072)			
Fair Good	52.5% (1323)	41% (107)	32% (6)	51% (1436)

	English	Spanish	Russian	Average	
What else do you want us to know?	Out of 2,522 (101 skipped)	Out of 262 (12	Out of 19	Out of 2,803 (113	
		skipped)		skipped)	
	English answers	Spanish	Russian		
Top answers	1. Lack of insurance or access	1. Need for free or low	1. Cost of medical		
	to care (122)	cost clinics (9)	care (1)		
	2. Not enough Doctors,	2. Access to care (5)			
	specialists, or those willing to				
	take medicare, or OHP (96)				
	3. Concerns about cost of	3. Not enough Dr's,			
	medical care (75)	and no insurance (4)			
	4. Access to mental health (52)				
	5. More preventive or				
	alternative care (22)				
	6. Low cost dental care (17)				

SURVEY BOX LOCATIONS

Thank you to the following locations, which helped us with the Resident Survey:

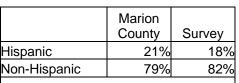
Various Mill City locations collected by Cheri Girod, Salem Senior Center, Silverton Together, First Presbyterian Church, Temple Beth Shalom Church, Department of Human Services, Union Gospel Mission, Ike box, Salem Police Department, 24 Hour Fitness, South Salem Senior Center, Colonia Libertad, YMCA, St. Edwards, Meals on Wheels, and the following Marion County offices: Public Works, Family Planning Clinic, Health Clinic, WIC, Health Department Administration, Vital Statistics/Environmental Health, Behavioral Health, Lancaster Health Department office, School-Based Health Center, Rural Health Department offices (Woodburn, Stayton and Silverton), Board of Commissioners, Methadone Clinic, and the County Fair Booth

Demographics of Resident Survey Respondents

2,623 English + 274 Spanish + 19 Russian = 2,916 Total (Internet and Paper)

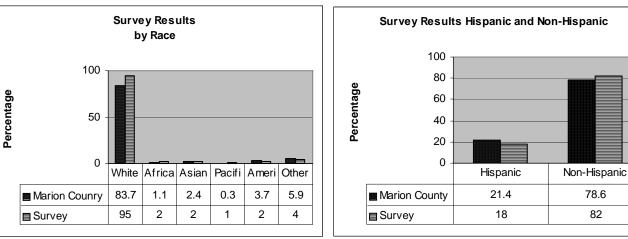
Online Surveys						
English 1,248			Marie	on		
Spanish 13			Cour	nty	Survey	
Russian 1	Male		Ę	51%	30%	
1,262	Female	Э	49%	70%		
Paper Surveys English 1,375 Spanish 261	Survey based becaus this qu					
Russian 18 1,654						
	Marion					
	County	Sι	irvey			
White	83.7%		95%			
African American	1.1%		2%			
Asian	2.4%		2%			
Pacific Islander	0.3%		1%			
American Indian	3.7%		2%			
Other	5.9% 4%					
Survey data for this surveys because it o	he 620:					

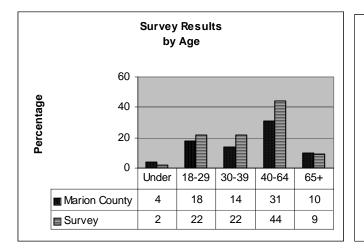
people who gave no race or the 113 people who skipped the question.

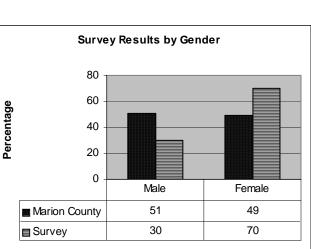


Survey data for this chart is based on 2,803 surveys because 113 people skipped this question

	Marion County	Survey				
Under 18	4%	2%				
18-29	18%	22%				
30-39	14%	22%				
40-64	31%	44%				
65+	10%	9%				
Survey data for this chart is based on 2,803 surveys because 113 people skipped this question						







2008 Provider Survey Results Summary – 162 responders. Most frequent responses.

	 #1. What health problem do you believe most adversely affects Marion County? (Select three) Drug Abuse (108) Access to Health Care (104) Mental Health (96)
Question	#2. What socioeconomic factors do you think most adversely affect the community? (Select three) Lack of affordable health care (98) Poverty (95) Property crimes/vandalism/theft- (53) Child abuse neglect (48)
Question	 #3. Which environmental health issue currently affects the community most adversely? (Select three) Meth labs (130) Illegal dumping (76) Air quality (73) Food borne illness (67)
Question	 #4. What health care/prevention/access gaps do you see most often in the Marion County community? (Select three) Tie- mental health and substance abuse (127 each) Overweight- obesity (86) Maternal and Child Health (45)
	 #5. Regarding the gaps identified above, where in Marion County do you see these gaps occurring most frequently? all that apply) Salem (127) Woodburn (100) Mill City/ Canyon (63) Keizer (53)
Question	 #6. In what area is Marion County most lacking resources to address the issues identified above? (All that apply) Funding for reduced cost health care (108) Funding for reduced cost mental health (107) More alcohol drug services (97) Funding for reduced cost substance abuse treatment (96) Primary prevention services (70)
Question	 #7. What else do you want us to know about health care services in Marion County? Need more mental health services (17) Cost of care (10) Universal health care (6) Need more doctors, help for prevention child abuse, & child mental health (5 each) Need more collaboration and dental care (4 each)
Question	 # 8 Rate your satisfaction with your quality of life in our community (consider your sense of safety, well-being, participation in community life, associations, etc. 66% Good (107) 21% Fair (34) 10.5% Excellent (17)
Question	#9. Please check the box that best describes your field of work.
	Social services 21.6% (35) Education 14.2% (23) Medical care 13.6% (22) Mental health provider 9.3% (15) Public Health 8.0% (13)

Others: Miscellaneous occupations (12), County government (11), Community health care (11), City government (6), concerned Marion County resident (5), Early childhood advocate (2), Insurance provider (1)

Marion County Community Health Assessment Committee 2008

Community Men	nbers			
<u>Name</u>	Organization	phone	<u>e-mail</u>	Representing
Adams, Kevin	Silverton Hospital	873-1688	kadams@silvhosp.org	Hospitals
Anderson, Carol	ESD		Carol.Andersen@wesd.org	Education
Baldwin, Ginny	Santiam Hospital	769-2175	gbaldwin@santiamhospital.com	Hospitals
Beare, John	Health Advisory Board Chair		<u>bearej@comcast.net</u>	HAB & Residents of Marion Co
Boschler, Monica	Silverton Hospital	503-873-1544	mboschler@silvhosp.org	Hospitals
Boyd, Jodi	Medical Society	362-9669	hr@mpmedsociety.org	Medical Providers
Duboise, Renee	DHS	373-1422	rene.l.duboise@state.or.us	Children & Families
Garrett, David	Salem Hospital	561-2743	DAVID.GARRETT@salemhospital.org	
Goettsch, Tamra	Children & Families Commission	589-3200	tgoettsch@co.marion.or.us	Children & Families
Lawson, Sally	SPD	304-3473	Sally.lawson@state.or.us	Seniors
McDonald, Sara	Marion Co. BOC	584-4740	smcdonald@co.marion.or.us	BOC
Prouty, Kathy	DHS	373-0853	Kathy.Prouty@state.or.us	Human services
Pulsipher, Gary	Silverton Hospital		gpulsipher@silvhosp.org	Hospitals
Saucy, Dr. Daniel	MPY Dental Society	399-0724	ddsdmd@teleport.com	Dental Providers
Sellers, Susan	MC Jail		ssellers@co.marion.or.us	Corrections
Sheffield, Veronica	MVIPA	371-7701	veronica@mvipa.org	Insurer & Providers
Simmons, Heather	Head Start		simmonsh@mwvcaa.org	
Marion County H	lealth Department	·		
Beall, Marybeth	Divisional Director	566-2994	mbeall@co.marion.or.us	Behavioral Health
Brown, David	WIC	585-4947	dbrown@co.marion.or.us	Supervisor
Calkins, Rod	Administrator	588-5357	rcalkins@co.marion.or.us	Administrator
Cleave, Judy	Early Childhood	361-2693	jcleave@co.marion.or.us	Supervisor
DeBlase, Greg	Environmental Health	588-5346	gdeblase@co.marion.or.us	Sanitarian
Fillion, Sara	CD	576-4631	sfillion@co.marion.or.us	Health Resources Coordinator
		500.0010		Retired
Freeman Gail	Public health	566-2610	gfreeman@co.marion.or.us	Supervisor
Heilman, Pam	Divisional Director	588-5612	pheilman@co.marion.or.us	Health services
Johnson, Tonya	Rural services	566-2901	tjohnson@co.marion.or.us	Supervisor
Landers, Karen	Physician	588-5357	klanders@co,marion.or.us	Public Health Officer
Saito, Shiraz	Salem Hospital	562-2745	shiraz.sait@gmail.com	Intern
Smith, Laynie	CD	588-5403	lysmith@co.marion.or.us	Supervisor
Stewart, Sandy	Divisional Director	584-4862	sstewart@co.marion.or.us	Behavioral Health
Sherman, Rick	Environmental Health	588-5387	rsherman@co.marion.or.us	Supervisor
Trejo, Gerardo	WIC	373-3781	gtrejo-martinez@co.marion.or.us	Health Educator
White, Kelly	CD	576-4634	klwhite@co,marion.or.us	Health Educator