



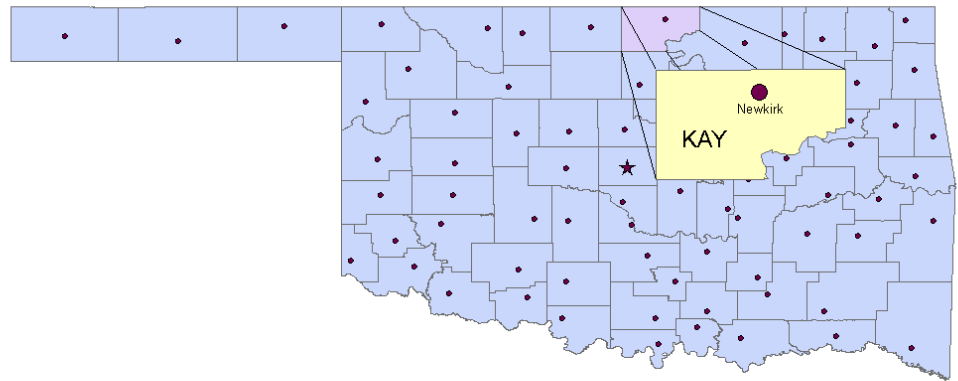
State of the County's Health Report

A Look Back To Move Forward

Kay County

The state of Oklahoma has been in a downward health trend since the 1990's, until recently. Through the efforts of the state and county health departments, state and local governments and the individual communities the health of Oklahomans is looking up. However, we could do more to improve the health of the citizens of Oklahoma.

This report focuses on the health factors for the citizens of Kay County. We will take a look back to discover what has been affecting the health of the citizens in order to move forward and make healthy, effective and safe changes for all.



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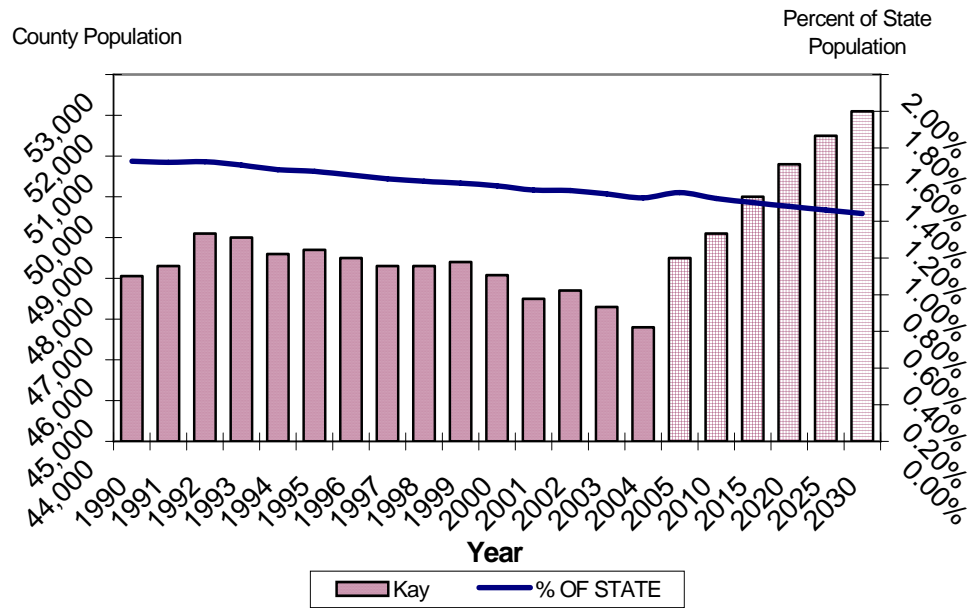
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Demographics

* U.S. Census Bureau

- Population estimates
 - no significant increase from 1990 to 2000 (48,056 to 48,080)
 - 2.7% decrease from 2000 to 2004
 - Ranked 60th for growth in state
- 2000 Census
- Hispanic/Latino ethnicity = 4%
- Race
 - Whites = 84%
 - Native Americans = 8%
 - Blacks = 2%
 - Other/Multiple = 6%
- Age
 - Under 5 = 7%
 - Over 64 = 17%
 - Median age = 38.1 years
- Housing units
 - Occupied = 19,157
 - Vacant = 2,647
- Disability (ages 21 to 64) = 21.8%
national average = 19.2%
- Families below poverty = 12.4%
national average = 9.2%

Kay County Population Growth with Projections



* Vital Statistics, Health Care Information Systems, OSDH &

Top 10 Leading Causes of Death

The top 10 leading causes of death table on the next page displays a broad picture of the causes of death in Kay County. Since many health-related issues are unique to specific ages, this table provides causes of death by age group at a glance. The causes of death that are present across almost every age group have been highlighted. From 1983 to 1993 heart disease killed 2,395 people in Kay County and is still the

leading cause of death among all age groups. According to the Centers for Disease Control, almost \$400,000 is spent on each heart disease-related death. With an average of 212 deaths a year, heart disease accounts for almost \$78 million a year in medical costs in Kay

Heart disease accounts for almost \$78 million a year in medical costs in Kay County.

County. Alzheimer's disease and the complications associated has increased from the 14th ranked cause of death (1983-1993) to the 9th leading cause of death in persons 65 and older accounting for a 273% increase in deaths.

* Behavioral Risk Factor Surveillance System, Health Care Information System, OSDH & Health Affairs Journal, R. Strum, 2002

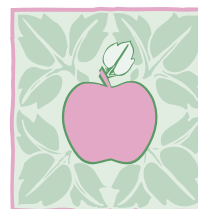
Nutrition and Obesity

With the United States coming in as the most obese country in the world, health care costs related to obesity and poor nutrition are on the rise.

Of the 292 million people in the United States, 129 million are overweight or obese according to their body mass index (BMI). The number of obese (BMI > 29) and overweight (BMI 25-29) Oklahomans has been increasing at the

same rate as the nation, and health care costs are reflecting this downward spiral of health. For persons under the age of 65, on average, health care costs are \$395 more for obese individuals and are even greater for persons over the age of 65.

In 2002-2004, 30.5%



**Sensible Foods – Sensible Portions
5 to 9 Fruits & Vegetables a Day**

(14,664) of people in Kay County were considered obese which accounted for an additional \$5,792,438 in medical costs for the county. These costs are underestimated because they do not take into account the percentage of obese or overweight persons who are over the age of 65.

Top 10 Causes of Death by Age Group Kay County 1993-2003

	0-4	05-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	CONGENITAL ANOMALIES 19	UNINTENTIONAL INJURY 11	UNINTENTIONAL INJURY 46	SUICIDE 23	CANCER 39	HEART DISEASE 100	CANCER 226	HEART DISEASE 1987	HEART DISEASE 2332
2	PERINATAL PERIOD 18	CANCER 3	SUICIDE 13	UNINTENTIONAL INJURY 20	UNINTENTIONAL INJURY 34	CANCER 80	HEART DISEASE 203	CANCER 1016	CANCER 1376
3	UNINTENTIONAL INJURY 9	SUICIDE 2	CANCER 3	CANCER 9	HEART DISEASE 30	UNINTENTIONAL INJURY 19	BRONCHITIS/ EMPHYSEMA/ ASTHMA 29	STROKE 465	STROKE 505
4	SIDS 4	MENINGITIS 1	HOMICIDE/ LEGAL INTERV. 3	HEART DISEASE 9	SUICIDE 20	LIVER DISEASE 14	STROKE 23	BRONCHITIS/ EMPHYSEMA/ ASTHMA 291	BRONCHITIS/ EMPHYSEMA/ ASTHMA 330
5	HOMICIDE/ LEGAL INTERV. 2	OTHER 2	HEART DISEASE 2	HOMICIDE/ LEGAL INTERV. 9	DIABETES MELLITUS 7	DIABETES MELLITUS 13	UNINTENTIONAL INJURY 19	INFLUENZA/ PNEUMONIA 186	UNINTENTIONAL INJURY 287
6	ACUTE BRONCHITIS 1		SEVEN CAUSES TIED 1	STROKE 3	STROKE 6	SUICIDE 12	DIABETES MELLITUS 16	DIABETES MELLITUS 164	INFLUENZA/ PNEUMONIA 203
7	INFLUENZA/ PNEUMONIA 1			BENIGN TUMOR 2	HIV 5	STROKE 8	LIVER DISEASE 11	UNINTENTIONAL INJURY 128	DIABETES MELLITUS 202
8	MENINGITIS 1			BRONCHITIS/ EMPHYSEMA/ ASTHMA 2	LIVER DISEASE 5	BRONCHITIS/ EMPHYSEMA/ ASTHMA 7	INFLUENZA/ PNEUMONIA 9	KIDNEY DISEASE 66	SUICIDE 95
9	MENINGOCOCCAL INFECTION 1			DIABETES MELLITUS 2	HOMICIDE/ LEGAL INTERV. 4	VIRAL HEPATITIS 4	SUICIDE 9	ALZHEIMER'S DISEASE 62	KIDNEY DISEASE 73
10	OTHER 21			INFLUENZA/ PNEUMONIA 2	VIRAL HEPATITIS 3	SEPTICEMIA (BLOOD POISONING) 3	SEPTICEMIA (BLOOD POISONING) 6	SEPTICEMIA (BLOOD POISONING) 51	ALZHEIMER'S DISEASE 65

Data source: *Vital Statistics*, Health Care Information Division, Oklahoma State Department of Health
Produced by: Injury Prevention Service, Oklahoma State Department of Health

Injury and Violence

Across the nation and the state of Oklahoma, unintentional and violence-related injuries are on the rise. Unintentional injuries account for the 4th leading cause of death in the United States and the 5th leading cause of death in Oklahoma from 1999-2002. For persons ages 1 to 44 in Oklahoma, unintentional injuries are the leading cause of death.

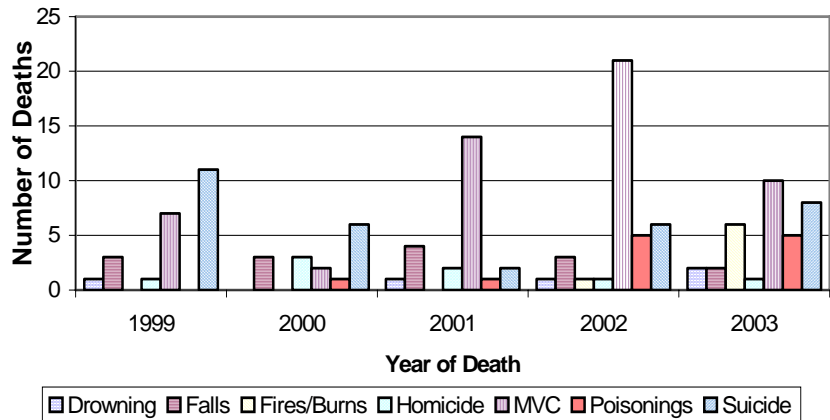
This trend does not change much in Kay County. Unintentional injuries are the leading cause of death from ages 5 to 24 and the 2nd cause of death in ages 25 to 44 in Kay County.

It is estimated that for every motor vehicle-related death \$1.1 million in economic costs are incurred. For Kay County which has an average of 11

motor vehicle-related deaths a year, that translates to over \$12 million a year.

Violence-related injuries (homicide and suicide) in Kay County are ranked in the top 10 in seven of the eight age groups (see Top 10 list on page 3).

Injury and Violence-Related Deaths in Kay County, 1999-2003



* *Vital Statistics*, Health Care Information Systems, OSDH & Centers for Disease Control

Tobacco Use

According to the 2005 State of the State's Health Report, tobacco use among Oklahomans has remained fairly stable from 1990 to 2002. Oklahoma has been consistently higher in its tobacco use than the nation and is 30% higher than the nation on the amount of tobacco consumed per capita (103 packs vs. 79 packs).

Tobacco use is no longer just the

problem of the individual but also the community as a whole. With health care costs on the rise, targeting areas such as tobacco use is an effective way to control those costs.

In 2002, the CDC estimated that a person that used tobacco accrued over \$3,300 in health care costs per year. According to the Behavioral

Risk Factor Surveillance System, it is estimated that 25.7% (12,357) of people in Kay County use tobacco of some sort. Medical costs accumulated by those persons are over \$40 million a year for Kay County.

“Medical costs accumulated by those persons are over \$40 million a year for Kay County”

* *Behavioral Risk Factor Surveillance System*, Health Care Information System, OSDH & American Diabetes Association, 2002

Physical Activity, Wellness and Diabetes

The increasing inactivity of the U.S. population is contributing to an increase in numerous poor health-related outcomes. Physical inactivity robs the body of precious energy needed to function properly, in turn health declines and rates of various chronic diseases escalate.

According to the 2002-2004 Behavioral Risk Factor Surveillance System (BRFSS), it is estimated that 27.6%

(13,270) of people in Kay County had no leisure activity in the past month at the time they were surveyed.

The BRFSS also indicated that 10.6% (5,096) of Kay County citizens have been diagnosed by a health professional as having diabe-



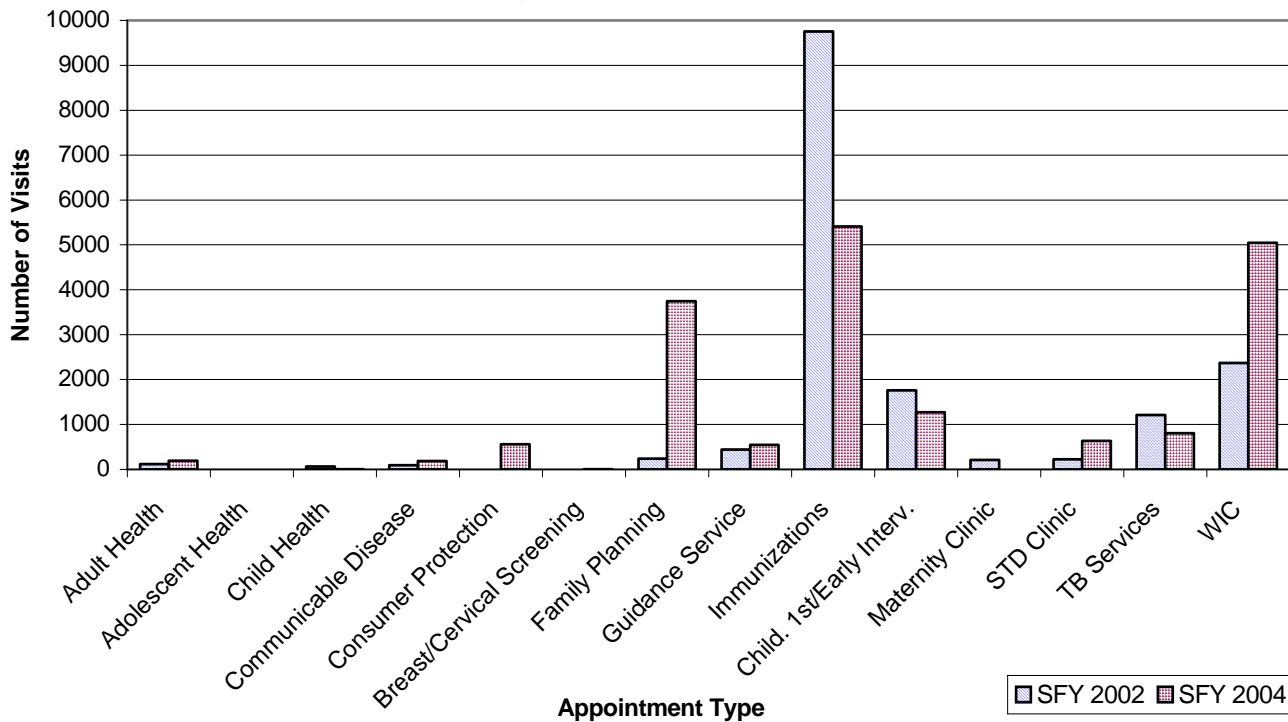
Increase activity gradually. Moderate exercise for 30 minutes 5 days a week.

tes. In 2002, the per capita annual healthcare costs for people with diabetes was \$13,243 compared to \$2,560 for people without diabetes. Persons with diabetes accumulated health care costs of \$67,486,328 in one year for Kay County.

County Health Department Usage

* PHOCIS, Community Health Services, OSDH

**Attended Appointments for Kay County Health Department
by State Fiscal Year**



Health Care Costs Summary

Cardiovascular Disease (Heart Disease)

- Average 212 deaths a year
- \$369,476.69 per death
- Total—\$78,329,058.28 a year

Obesity

- 30.5% of population (14,664)
- \$395 in additional medical costs per person
- Total—\$5,792,438.00

Motor Vehicle-Related Injury Death

- Average 11 deaths per year
- \$1,120,000.00 in economic costs per death
- Total—\$12,320,000.00 a year

Tobacco Use

- 25.7% of population (12,357)
- \$3,300 in health care costs
- Total—\$40,778,100.00 a year

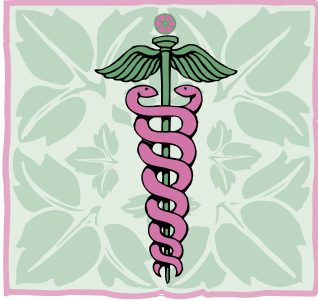
Diabetes

- 10.6% of population (5,096)
- \$13,243 in healthcare costs a year
- Total—\$67,486,328 a year

Grand Total for Kay County:

\$204,705,924.28





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Looking Back to Move Forward

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The Oklahoma Turning Point Initiative is public health improvement in action. The success of the Turning Point process involves a partnership between the department of health, local communities, and policy-makers. The Oklahoma Turning point engine is fueled by a community-based decision making process whereby local communities tap into the capacities, strengths, and vision of their citizens to create and promote positive, sustainable changes in the public health system, and the public's health.

Oklahoma Turning POINT



*Oklahoma Community Partners
in Public Health Innovation*