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# Director's Summary

The vision of the Sedgwick County Health Department is *Healthy Communities for Healthy People.*

There are many ways to assess the public health system and health care needs. This report seeks to answer questions about the health status of the community, including the conditions that exist in our community. Further, this report offers context by comparing multiple years of local and/or peer communities data.

We hope this book will provide community organizations, agencies, coalitions and Sedgwick County residents with measures that will support new and continued efforts to improve the health of Sedgwick County.

In 2010, our community prioritized five health issues based on the prevalence (number of people affected) and the level of community involvement to address the issues. Each issue is an adaptive and complex challenge. To improve health outcomes, each issue will require individual health behavior and systems changes to help individuals make healthy choices. Measures related to these priorities are found throughout this book.

This resource contains the most current information available for most indicators. However, different sources update information at different times. If health status information included here sparks additional questions about community health data, please contact our [Office of Community Health Assessment at 316-660-7335](#), and our staff will gladly assist with additional searches for information.

The staff members of the Sedgwick County Health Department look forward to using this health assessment to work with our community partners to lead changes that help create healthy lifestyles for Sedgwick County residents.

*Claudia Blackburn*

Claudia Blackburn  
Health Director



# Population

## Section 1 Population

Source: Unless referenced, the source of data for Section 1 is the US Census Bureau.

### Population

- According to the 2010 U.S. Census, the Sedgwick County population has reached 498,365 - the second largest county in Kan., following Johnson (544,179) and leading Shawnee (177,934), Wyandotte (157,505) and Douglas (110, 826).

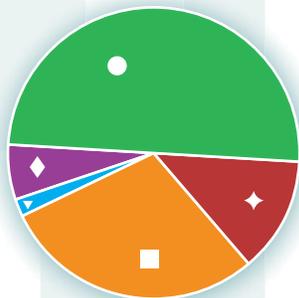
### Sedgwick County Population Facts

- Females make up 50.6 percent of Sedgwick County's total 2010 population; males 49.4 percent.
- Sedgwick County represents 17.5 percent of the total Kan. population of 2,853,118.
- From 2000-2010, Sedgwick County's population increased 9.8 percent; the state of Kansas almost 6 percent.
- From 2000-2010, Sedgwick County (10 percent) was the 10th fastest growing county in Kan.; Geary (23 percent), Johnson (20.6 percent) and Pottawatomie (18.6 percent) are the top three.
- Sedgwick County (499.6 people per square mile) is the state's third most population dense county behind Johnson (1,149.6) and Wyandotte (1,039.0).

## 1.1 Married Population

2010 Married population (>15 years) for Sedgwick County (totals, both genders)

● Married	50.2%
◆ Divorced	13.1%
■ Never Married	29.1%
▼ Separated	1.8%
◆ Widowed	5.8%



## 1.2 Population by Race and Ethnicity

According to the USA TODAY Diversity Index, Sedgwick County has the eighth highest diversity index in Kansas. According to the index, Wyandotte, Seward and Geary counties are the state's most diverse counties.

The index shows increases in every state since 2000. The index was created to measure how racially and ethnically diverse the population is. It uses the percentage of each race counted by the Census Bureau — white, black, Asian, American Indian, Native Hawaiian — and Hispanic ethnicity to calculate the chance that any two people are from different groups.

### Sedgwick County Residents by Race and Ethnicity, 2000 and 2010

- White, Not Hispanic
- ◆ Black, Not Hispanic
- American Indian or Alaska Native, Not Hispanic
- ▼ Asian, Not Hispanic
- ◆ Pacific Islander, Not Hispanic
- \* Other or two or more races, not Hispanic
- + Hispanic

	2000		2010	
●	359,489	79.4%	348,434	69.9%
◆	41,367	9.1%	44,931	9.0%
■	5,041	1.1%	4,456	0.9%
▼	15,137	3.3%	20,167	4.0%
◆	265	0.1%	378	0.1%
*	22,816	5.0%	15,363	3.1%
+	36,397	8.0%	64,636	13.0%
<b>Total</b>	<b>452,869</b>	<b>100.0%</b>	<b>498,365</b>	<b>100.0%</b>

*Why is race and ethnicity information important as it relates to the health of the community?*

To address health inequities in the diverse Sedgwick County population, decision-makers and community leaders must have up-to-date evidence to make data-driven decisions.

# Population

## 1.3 Nativity and Language

### Sedgwick County facts on nativity:

- In 2010, 8.4 percent of residents report being foreign born
- 91 percent of Sedgwick County residents were born in the United States
- 62 percent report being born in Kansas

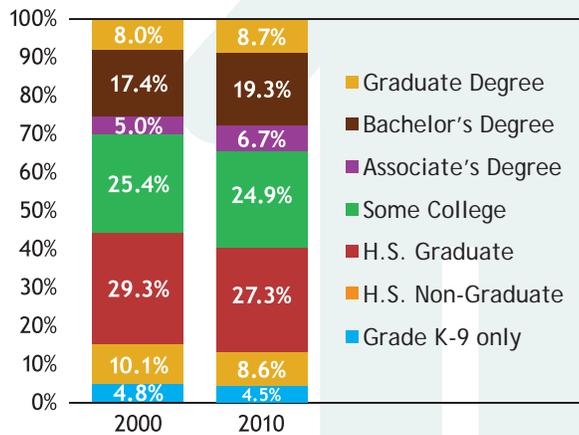
In Sedgwick County, 85.8 percent of the population five years of age and older speak only English. Of those not speaking only English, these are the most common languages spoken:

- Spanish or Spanish Creole (9.1 percent)
- Other Indo-European language (1.4 percent)
- Asian and Pacific Island languages (3.1 percent)
- Other (0.5 percent)

## 1.4 Population by Educational Attainment

2010 data show 34.7 percent of Sedgwick County residents 25 years and older have an associate's degree or higher compared to 30.4 percent in 2000.

Educational Attainment of Sedgwick County Residents 25 Years and Older



In 2000, 85.1 percent of the population had at least a high school diploma; in 2010, the number rose to 86.9 percent.

## 1.5 Population by Age

### Why is age an important factor to the overall health of the community?

The greatest population increases were seen among residents age 55 and older, indicating the need for health services planning. Many community health plans were based on addressing specific population groups by age. Based on 2010 U.S. Census reports, there were 56,969 adults age 65 and older, up from 51,574 in 2000. The school-age population (5 to 19) was 104,931.

### Sedgwick County Population by Age by Year

	2000		2010		% Change (2000 to 2010)
Younger than 5 years	35,697	7.9%	39,302	7.89%	10.10%
5 to 9 years	36,325	8.0%	37,627	7.55%	3.58%
10 to 14 years	35,043	7.7%	36,558	7.34%	4.32%
15 to 19 years	32,772	7.2%	35,231	7.07%	7.50%
20 to 24 years	30,791	6.8%	34,847	6.99%	13.17%
25 to 34 years	64,459	14.2%	70,319	14.11%	9.09%
35 to 44 years	72,868	16.1%	61,661	12.37%	-15.38%
45 to 54 years	59,162	13.1%	70,411	14.13%	19.01%
55 to 59 years	19,271	4.3%	30,969	6.21%	60.70%
60 to 64 years	14,907	3.3%	24,471	4.91%	64.16%
65 to 74 years	26,923	5.9%	29,289	5.88%	8.79%
75 to 84 years	18,677	4.1%	19,389	3.89%	3.81%
85 years and older	5,974	1.3%	8,291	1.66%	38.78%
	452,869	100.0%	498,365	100.00%	

# Population

## 1.6 Household Income

The 2010 median income of households in Sedgwick County was \$45,726, representing a one-year decline of 4.8 percent, and a two-year decline of 7.1 percent.

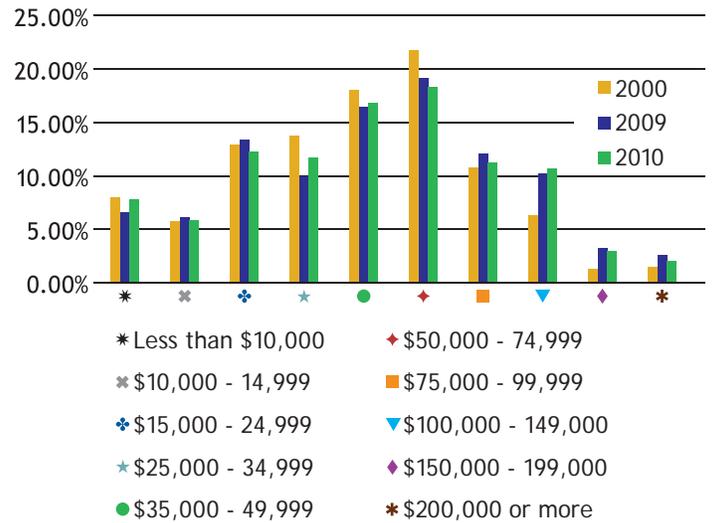
### Other Facts:

- 81.2 percent of households received earnings
- 15.6 percent of households received retirement income other than Social Security; averaging \$17,997 per household
- 25.5 percent of households received Social Security income; averaging \$16,739 per household

*Why is household income an important factor to the overall health of the community?*

- Some health outcome indicators show that those with higher incomes have improved health or make healthier choices (eat fruits and vegetables, don't smoke, etc.)
- Eligibility for many health programs like WIC and Medicaid are based on household income.

Sedgwick County Household Income by Year

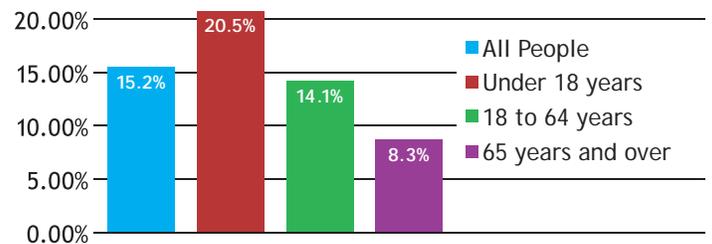


## 1.7 Poverty

In 2010, the U.S. poverty threshold for a single person age 65 or younger was \$11,344; for a family of four, including two children, it was \$22,113.

These charts display percentages of poverty for age groups and specific family structures. The least impoverished families are married couple families with no children in the home; the most impoverished are families with a female householder (no husband present) with children younger than age 18. Those age 65 and older are the least impoverished age group.

Poverty Status of Sedgwick County Residents in the Past 12 Months



Source: US Census Bureau, ACS One-year Estimates (2010)

Percentage of Sedgwick County Families Whose Income was Below the Poverty Level in the Past 12 Months

Family Type	Percent
● All families	11.0%
◆ Families with related children under 18	18.3%
■ Married couple families	4.9%
▼ Married couple families with related children under 18	8.0%
◆ Families with female householder, no husband present	32.2%
* Female householder w/ children under 18 years	39.9%

Source: US Census Bureau, ACS One-year Estimates (2010)

# Population

## 1.8 School Free & Reduced Lunch Populations

The National School Lunch Program (NSLP) is a federally assisted meal program operating in public and nonprofit private schools and residential child care institutions. It provides nutritionally balanced, low-cost or free lunches to children each school day.

Income eligibility guidelines are the household size and income levels prescribed annually by the secretary of agriculture for determining edibility for free and reduced price meals and for free milk. The free guidelines are at or below 130 percent of the federal poverty guidelines and the reduced price guidelines are between 130 and at or below 185 percent of the federal poverty guidelines.

Between 2006 and 2010 all Sedgwick County school districts have seen an increase in students enrolled in free or reduced lunch programs.

Students by District & Percent of Sedgwick County Students Enrolled in the Free/Reduced Meals Program by School

	Total Students Enrolled in 2010	2006	2010	Percent Change 2006 to 2010
Cheney, USD 268	808	18%	28%	56%
Clearwater, USD 264	1,324	20%	26%	30%
Derby, USD 260	6,671	34%	42%	24%
Goddard, USD 265	5,149	16%	25%	56%
Haysville, USD 261	5,048	36%	51%	42%
Maize, USD 266	6,615	12%	17%	42%
Mulvane, USD 263	1,936	23%	33%	43%
Renwick, USD 267	2,014	14%	18%	29%
Valley Center, USD 262	2,662	24%	34%	42%
Wichita, USD 259	49,658	66%	74%	12%

Source: USDA, School Meals Eligibility Manual  
KSDE, Report Cards

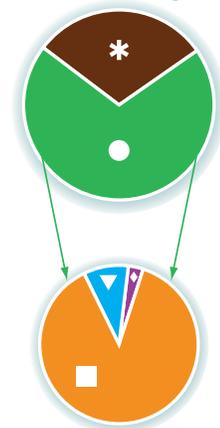
## 1.9 Employment

Employment Status of Sedgwick County Residents (2007 and 2010)

	2007	2010
● Population 16 Years and Older	358,504	379,108
● Not in Labor Force	108,781	114,949
● Labor Force	249,723	264,159
● Employed	233,627	233,995
● Unemployed	14,897	27,790
● Armed Forces	1,199	2,374
● In Labor Force	69.7%	69.7%
* Not in Labor Force	30.3%	30.3%
■ Employed	93.6%	88.6%
▼ Unemployed	6.0%	10.5%
◆ Armed Forces	0.5%	0.9%

Source: US Census Bureau, ACS One-year Estimates (2007 and 2010)

2010 Percentage



From 2007 to 2010, the percentage of residents in the labor force has not changed, however, unemployment has increased by 4.5 percent; a 75 percent increase.

The relationship between those in the labor force (or not) and employed (or unemployed) is depicted by pie-within-a-pie chart.

# Access to Care

## Section 2 Access to Care

### Why is access to care important to the health of the community?

In a six-volume series about the consequences of un-insurance, the Institute of Medicine (IOM) concluded the following:

- Compared to people with insurance, uninsured children and adults experience worse health and die sooner.
- Families can suffer emotionally and financially when even a single member is uninsured.

- Un-insurance at the community level is associated with financial instability for health care providers and institutions, reduced hospital services and capacity, and significant cuts in public health programs, which may diminish access to certain types of care for all residents, even those who have coverage.
- The nation as a whole is economically disadvantaged as a result of the poorer health and premature death of uninsured Americans. The IOM estimated the lost economic value of un-insurance is between \$65 billion and \$130 billion annually.

Source: Institute of Medicine. 2004. *Insuring America's Health*. Washington, DC: National Academy Press, p. xi

### 2.1 Percent Uninsured Residents under Age 65 with county comparisons

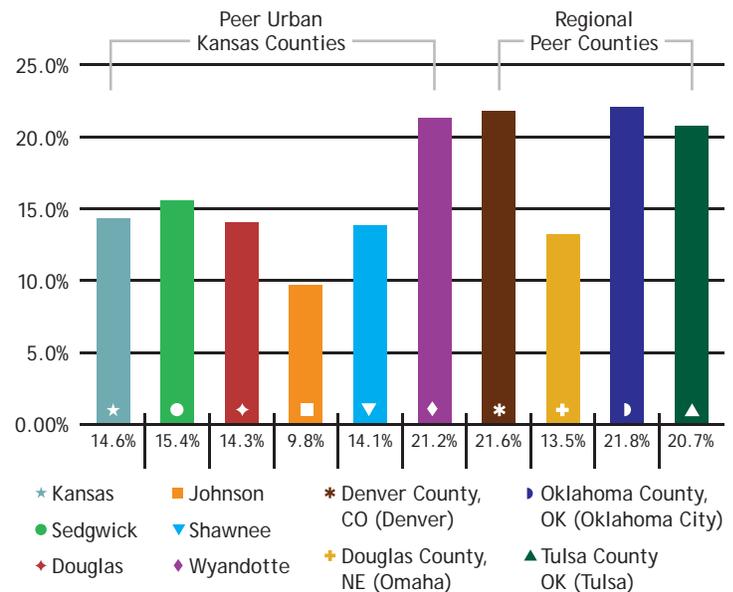
As compared to peer urban counties in Kan., Sedgwick County had fewer uninsured residents younger than age 65 than Wyandotte County, Kan. (Kansas City), but a higher percentage than other urban counties in the state. A trio of southwest Kan. counties: Hamilton (24.6 percent), Seward (25.0 percent) and Stanton (25.5 percent) had the highest percent of uninsured residents, while three northeast counties: Johnson (9.8 percent), Jefferson (11.9 percent) and Pottawatomie (12.1 percent) had the lowest.

#### Why present data for residents younger than age 65 only?

Most people age 65 and older are covered by Medicare or Supplemental Security Income (SSI). According to the CPS ASEC data during this time, fewer than 500,000 individuals (just under 1.5 percent) of the age 65+ population are uninsured nation-wide.

Source: US Census Bureau, CPS, ASEC

Percent Uninsured 2009 - Younger than Age 65, All Races, Both Sexes, All Incomes



Source: 2009 SAHIE Data

### 2.2 Uninsured Residents by Year

The Small Area Health Insurance Estimates (SAHIE) program was created to develop model-based estimates of health insurance coverage for counties and states. Data on health insurance coverage for all counties is not currently available elsewhere.

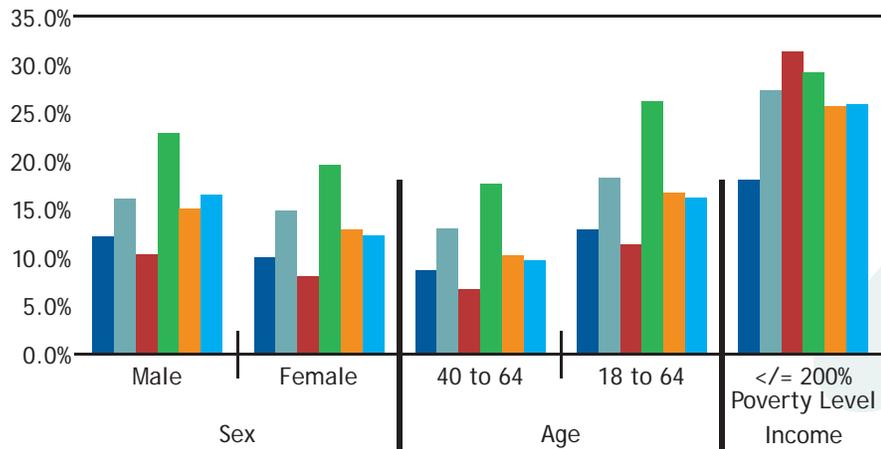
Sedgwick County is fortunate to have a number of health access points that provide medical homes to people without access to health insurance. More information about these access points can be found on the Sedgwick County Health Department website at [www.sedgwickcounty.org](http://www.sedgwickcounty.org).

Uninsured Sedgwick County Residents by Gender and Age, 2005 and 2009

	2005	2009
Sex	Male	12.0%
	Female	9.8%
Age	40 to 64	9.0%
	18 to 64	13.3%
Income	<= 200% poverty level	18.0%
		28.3%

From 2005 to 2009, lack of insurance has increased in each of the surveyed areas.

# Access to Care



	Sedgwick	Johnson	Wyandotte	Shawnee	Douglas
	2005	2009	2009	2009	2009
Male	12.0%	16.1%	10.8%	22.9%	15.3%
Female	9.8%	14.6%	8.8%	19.5%	12.9%
40 to 64	9.0%	13.1%	6.9%	17.6%	10.8%
18 to 64	13.3%	18.9%	11.7%	26.4%	16.6%
Income <= 200% Poverty Level	18.0%	28.3%	31.7%	29.2%	25.8%

Source: US Census Bureau, SAHIE (2005 and 2009)

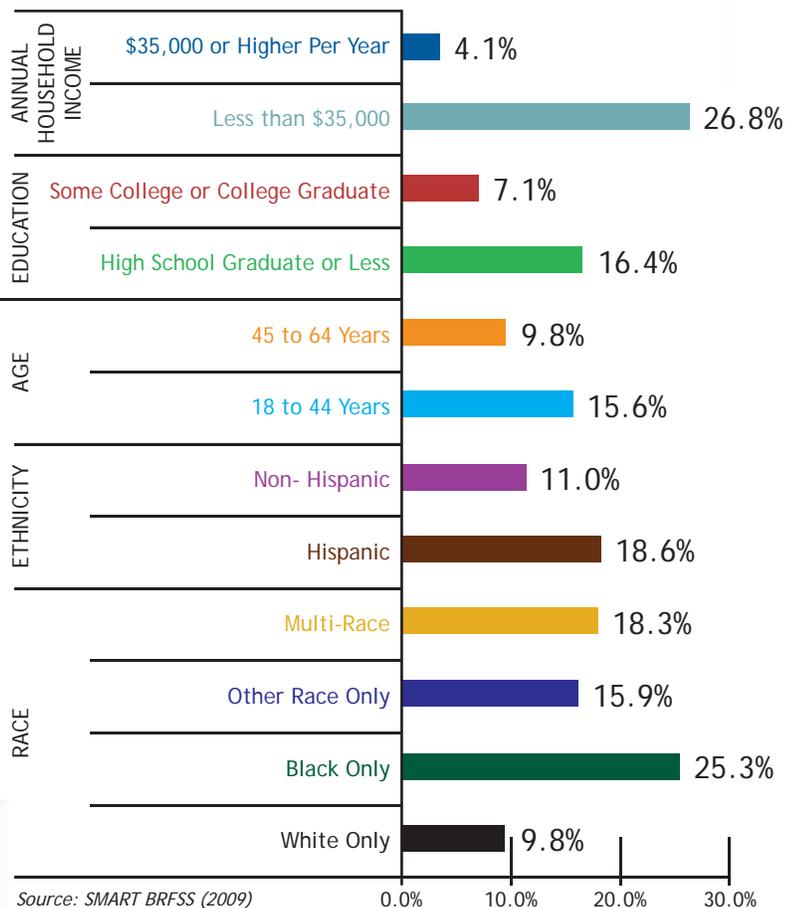
## 2.3 Health Coverage by Selected Characteristics

The chart indicates the percentage of adults who lack health care coverage by age groups, household income, education, and race/ethnicity for Sedgwick County residents in 2009. Note: The percent given equals the percent of uninsured in that category. For example, 4.1 percent of people who make \$35,000+ are not insured.

### Percentage of Sedgwick County Adults Ages 18 to 64 Years Who Lack Health Care Coverage, 2009

*Why is this data important to the overall health of the community?*

The data shows that social determinants of health, such as income, education and race/ethnicity, impact access to care.



Source: SMART BRFSS (2009)

# Birth

## Section 3 Birth

Source: (Unless referenced) all data in this section is the KDHE Annual Summary of Vital Statistics, 2000-2009

Birth statistics such as premature births, low birth weight, teenage pregnancy, and insufficient prenatal care are all indicators of a newborn's health and subsequent quality of life. However, assuring healthy babies is not just about prenatal care. The health of babies is an important indicator of the health of the community.

None of these indicators exists in a vacuum. Interactive relationships with co-existing factors may compound the likelihood of poor birth outcomes, especially for teens. Examples include family income, access to care through health insurance, adequate prenatal care, high school graduation, oral health, drug and tobacco use, mental health, and obesity.

As described in the section on access to care, lack of health insurance influences care-seeking behaviors, which in turn may result in late initiation of prenatal care and less healthy prenatal behavior, all potential negative impacts on birth outcomes. Poor birth outcomes are not only emotionally and financially devastating for families, they are costly for state and federal financing systems. For example, Medicaid finances 40 percent of the four million annual births in the United States, and pays for 50 percent of hospital stays for premature and low-birth-weight infants.

Throughout this section, references are made to *Healthy People 2010*. Developed with the best scientific knowledge available, *Healthy People 2010* is a comprehensive set of disease prevention and health promotion objectives for America. National health objectives were designed to identify the most significant preventable threats to our health and to establish goals to reduce those threats. *Healthy People 2010* established these targets to be achieved by the year 2010. The *Healthy People 2020* goals were released during final edits to this publication.

## 3.1 Births by Age

In recent history, the number of births each year in Sedgwick County has remained relatively stable. In 2009:

- 78 percent of births were to mothers age 20 - 34 and just 12 percent of all births were to mothers age 19 and under.
- Of the 41,388 births to Kansas residents, 20 percent (8,293) were to residents of Sedgwick County.

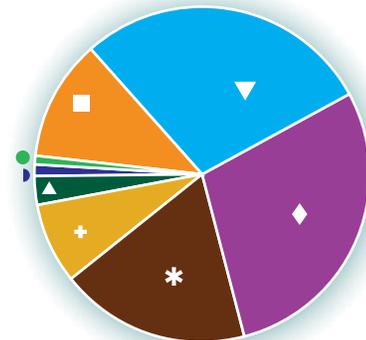
10-year facts:

- Total births have increased annually except during 2001 and 2005.
- The majority of births (29.5 percent) are to women age 25 - 29, followed by 20 - 24 (29.3 percent) and 30 - 34 (19.4 percent).

### Births to Sedgwick County Residents by Age of Mother and Year

Ages	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 to 44	45+	Total
2000	14	1,004	2,348	2,174	1,504	643	142	6	7,835
2001	14	885	2,171	2,166	1,421	624	129	9	7,419
2002	19	880	2,202	2,208	1,528	603	112	9	7,561
2003	10	854	2,215	2,170	1,518	640	152	9	7,566
2004	11	868	2,266	2,215	1,555	674	157	10	7,756
2005	10	903	2,240	2,306	1,503	634	146	2	7,744
2006	10	899	2,417	2,375	1,458	627	132	7	7,925
2007	9	937	2,383	2,468	1,654	658	127	7	8,243
2008	14	943	2,416	2,532	1,523	685	137	11	8,261
2009	13	986	2,393	2,542	1,598	617	135	9	8,293
10-yr. AVG	12	916	2,305	2,316	1,526	641	137	8	7,861
10-yr. %	0.16%	11.65%	29.33%	29.46%	19.42%	8.15%	1.74%	0.10%	

### Births to Sedgwick County Residents by Age of Mother and Year (10-Year Percent)



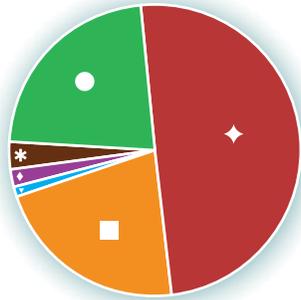
# Birth

## 3.2 Births by Race/Ethnicity

Fifty percent of all babies born in Sedgwick County were white; 23 percent were Hispanic and 22 percent black; other, Asian and Native American made up the remainder of births.

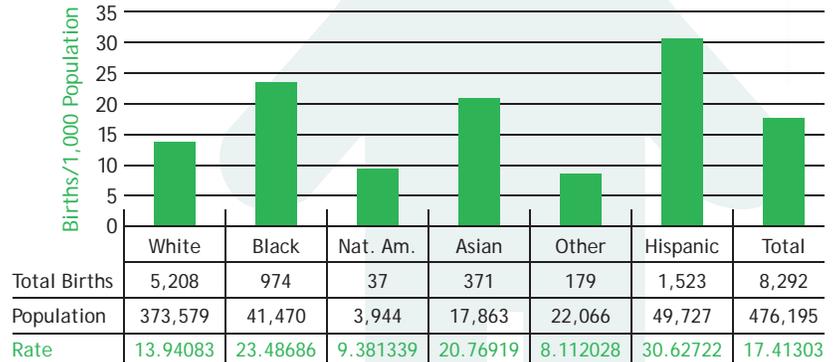
2009 Births in Sedgwick County by Race/Ethnicity

- Hispanic 23%
- ◆ White 50%
- Black 22%
- ▼ Nat. Am. 0%
- ◆ Asian 2%
- \* Other 3%



The crude birth rates (births/1000 of that population) for the most common race/ethnicities indicates that Hispanic had a crude birth rate of 30.6; followed by black (23.5) and Asian (20.8).

2009 Sedgwick County Birth Rates by Race/Ethnicity



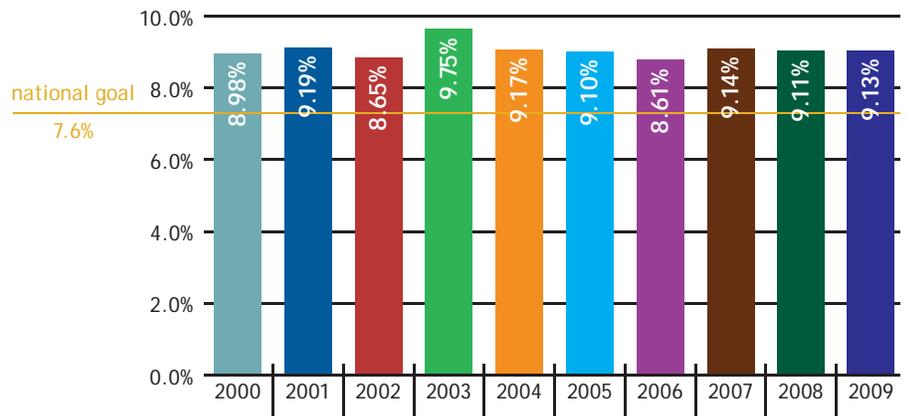
*Why is race/ethnicity birth data important?*

Inferences can be drawn from these data for health planning and planning for other community services.

## 3.3 Preterm Births

A preterm birth is a birth before 37 weeks gestation. According to *Healthy People 2010*, preterm birth is the leading cause of neonatal deaths that are not associated with birth defects. The national goal, set by *Healthy People 2010*, is to reduce preterm births to 7.6 percent of all births.

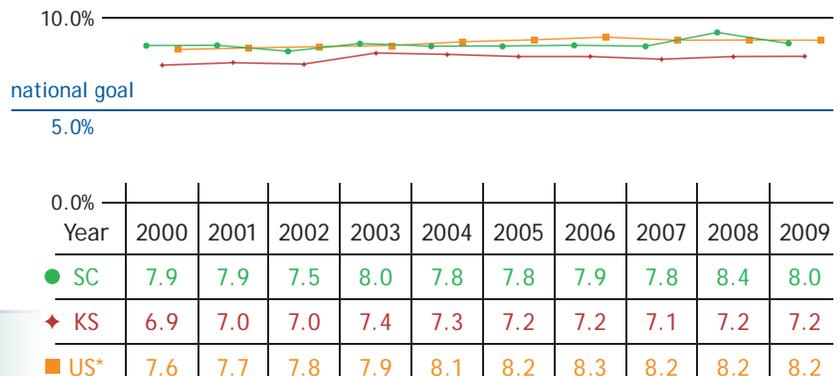
Preterm Births as Percent of all Births to Sedgwick County Mothers by Year



## 3.4 Low-Birth-Weight Births

Low birth weight (LBW), defined as birth weight less than 2,500 grams (5.5 pounds), remains a major problem across the United States. LBW is the most prevalent and dominant risk factor for infant mortality (infant death prior to the first birthday) and childhood developmental disorders. The *Healthy People 2010* goal is to reduce low-birth-weight births to 5 percent of all births.

Low Birth Weight Births as Percent of all Births by Place and Year



Sources: Sedgwick County and Kansas Data: KDHE Annual Summary of Vital Statistics  
US Data: CDC National Vital Statistics Report

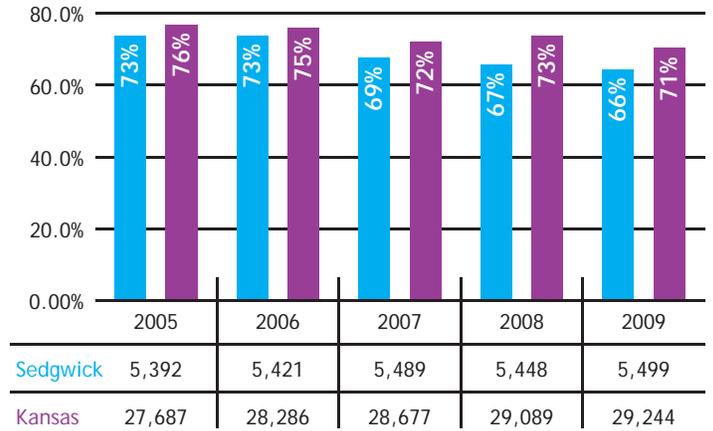
# Birth

## 3.5 First Trimester Care

Adequate prenatal care is a critical factor in achieving a healthy pregnancy outcome. Early prenatal care can identify maternal disease and risks for complications of pregnancy, thus improving birth outcomes. The national *Healthy People 2010* goal is to increase the proportion of pregnant women who receive early and adequate prenatal care beginning in the first trimester of pregnancy to 90 percent. In Kansas in 2009, 75.8 percent of non-teen mothers received prenatal care in their first trimester, while only 59.2 percent of teen mothers did.

- The data show that teenage mothers are least likely to receive early prenatal care.
- Initiation of prenatal care in the first trimester, a major preventive factor in birth outcomes, has been declining over the last five years.
- Sedgwick County mothers continue to seek early prenatal care less frequently than mothers throughout Kansas.

Births by Initiation of Prenatal Care in First Trimester



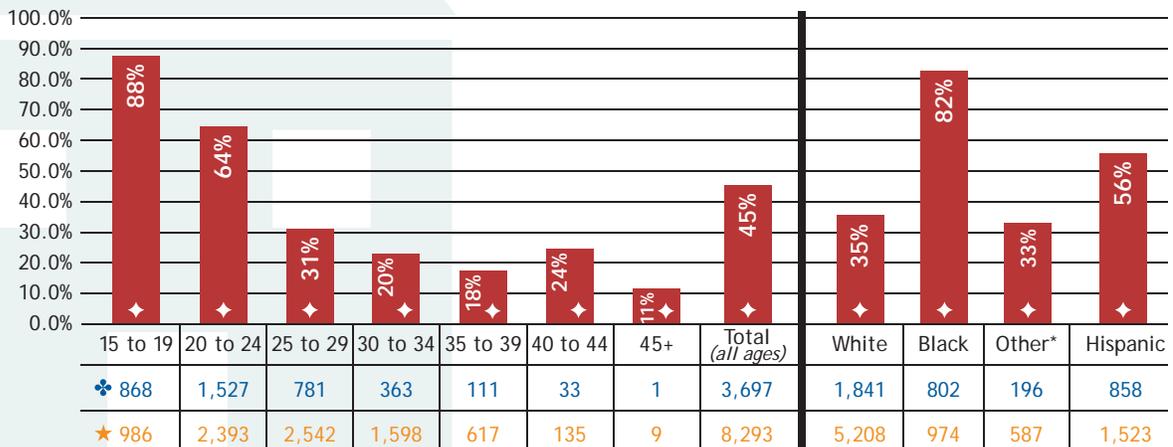
Source: KDHE KIC & KDHE Annual Summary of Vital Statistics, 2005-2009

## 3.6 Out-of-Wedlock Births

According to the National Center for Health Statistics, the proportion of births to unmarried women is a key social indicator. Tracking this data reveals that children of unmarried mothers are at higher risk of having adverse birth outcomes such as low birth weight and infant mortality. Children of unmarried mothers are also more likely to live in poverty than children of married mothers. In 2009, 41 percent of all births in the United States were to unmarried women. In 2009, 37.6 percent of all births in Kansas and 45.1 percent of all births in Sedgwick County were to unmarried women.

Out-of-Wedlock Births by Age and Race/Ethnicity to Sedgwick County Mothers, 2009

◆ Out-of-Wedlock Births ★ Total Births ◆ Percent of Out-of-Wedlock Births



\*other includes Native American, Asian, selection of two or more races, or other non-specified race.

## 3.7 Teenage Pregnancy

### Kansas:

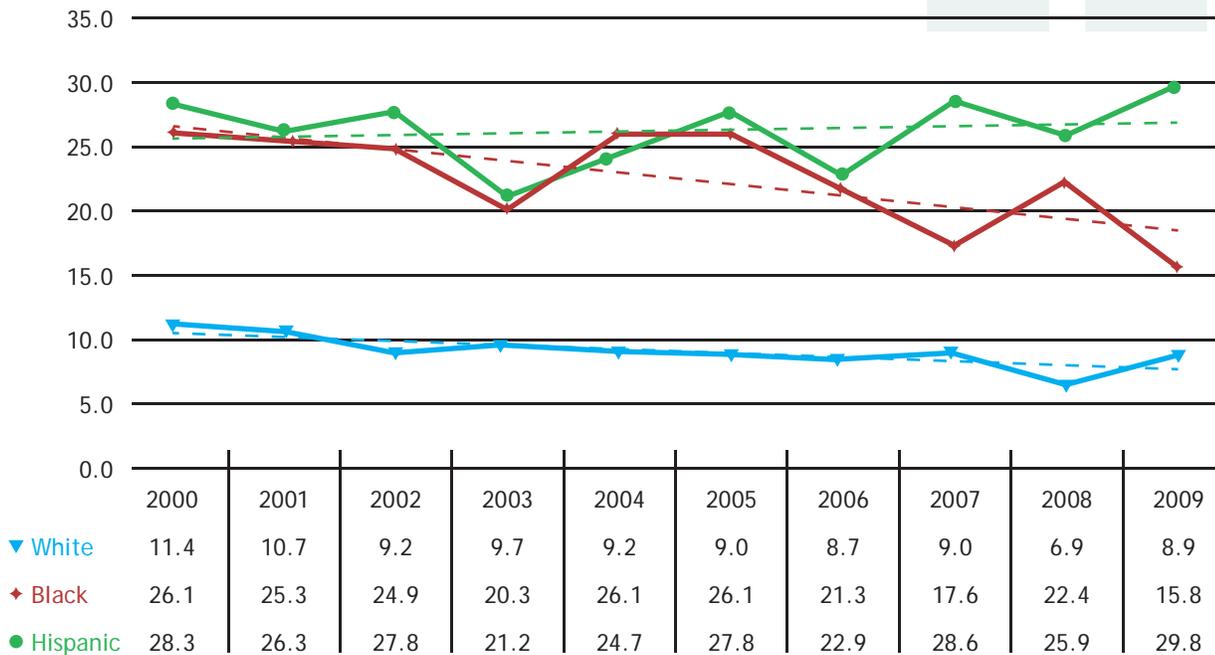
Despite an increase in the number and rate of teenage pregnancies (age 10-19) in each of the four years prior (2005-2008), 2009 saw a decreasing rate that is consistent with a longer downward trend. The rate in 2009 was 26.8 per 1000 females age 10-19 (a total of 5036), down from 28.6 in 2008.

### Sedgwick County:

In 2009, there were 370 pregnancies to mothers age 17 and younger. The teen pregnancy rate of 13.7 per 1,000 females age 10 - 17, was up from 11.9 in 2008.

Over the last decade, teenage pregnancy has declined among two groups, while the racial disparity continues.

Sedgwick County Teen Pregnancy Rate, Ages 10-17



--- Note: Flat, dotted lines depict linear averages.

# Injury

## Section 4 Injury

Regardless of gender, race or economic status, injuries remain a leading cause of death for Americans of all ages. Additionally, millions of Americans are injured each year and survive. Unintentional accidents, such as falls, broken bones and motor vehicle accidents vary widely in their impact on people, from temporary discomfort and inconvenience to more serious suffering and disability, chronic pain, lifestyle modifications and even death.

This section describes various types of injuries, such as fractures, burns, and poisoning obtained through hospital discharge data from Kansas Information for Communities (KIC) and motor vehicle accident data obtained from the Kansas Department of Transportation (KDOT).

Although this data does not separate intentional and unintentional injury, unintentional injuries commonly include burns, falls, poisonings, and road traffic injuries; intentional injury commonly includes domestic violence and poisonings from drug or alcohol overdose.

In the United States, the leading causes of injury deaths in 2006, according to the latest data available, as classified by mechanism, were:

### U.S. Leading Causes of Injury Deaths 2006

● Motor Vehicle	43,664
◆ Firearm	30,896
■ Poisoning	37,286
▼ Fall	21,647
◆ Suffocation	14,179

Source: CDC, NCHS

## 4.1 Injury Statistics from Hospital Discharge Data by Diagnosis

One way to look at injury is by hospitalization diagnosis. It is important to note that these are in-patient, not emergency department visits. Typically, no notable change is seen when examining these statistics year-to-year; however, when unusually high or low numbers are reported, officials must ask why.

### Hospital Inpatient Discharge Statistics for SG County (2009 and 5-Year Average)

Diagnosis	2009	5-Year Average
● Complication of device - implant or graft	817	777
● Complications of surgical procedures or medical care	665	631
● Poisoning by other medications and drugs	479	400
● Fracture of neck of femur (hip)	410	430
● Intracranial injury	365	348
● Fracture of lower limb	336	353
● Other fractures	209	284
● Poisoning by psychotropic agents	222	204
● Fracture of upper limb	186	187
● Other injuries and conditions due to external causes	141	181
● Crushing injury or internal injury	120	143
● Skull and face fractures	67	88
● Superficial injury - contusion	52	94
● Poisoning by non-medicinal substances	65	51
● Open wounds of head - neck - and trunk	36	79
● Burns	45	38
● Joint disorders and dislocations - trauma-related	31	41
● Open wounds of extremities	32	52
● Sprains and strains	29	39
● Spinal cord injury	15	16

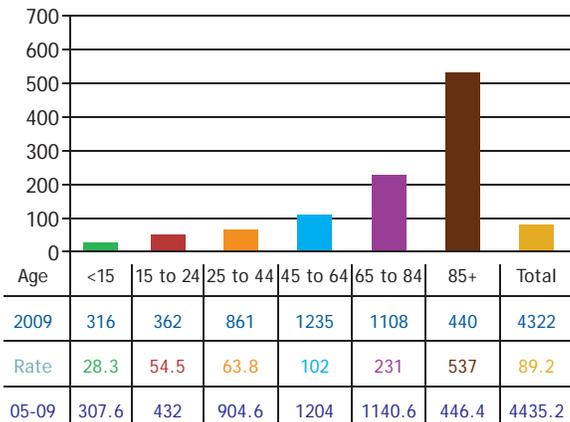
Source: KDHE, KIC

# Injury

## 4.2 Injury Statistics from 2009 Hospital Discharge Data by Age in Sedgwick County (per 10,000)

In 2009 there were 4,322 hospitalizations due to injury or poisoning; this is less than the five-year average of 4,435.

### Age-adjusted Rate of Hospitalizations Due to Injury or Poisoning by Age in Sedgwick County, 2009



Source: KDHE, KIC

## 4.3 Motor Vehicle Accidents, Injuries and Deaths by Year

It is important to note that these data refer to the number of people injured, as opposed to number of accidents.

### Motor Vehicle Accident Injuries and Deaths in Sedgwick County and Kansas by Year (numbers)

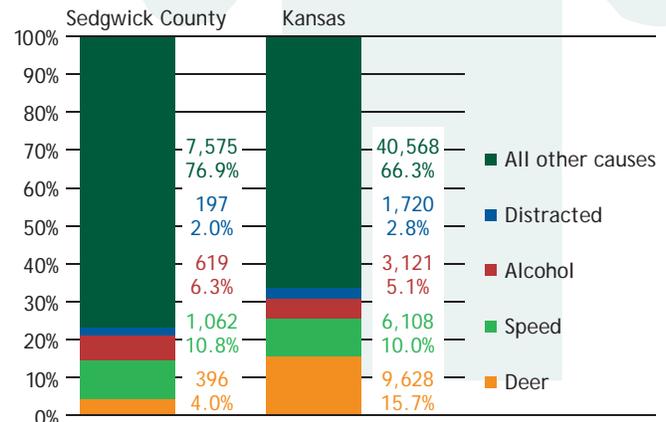
Year	Sedgwick County		Kansas	
	Injury	Death	Injury	Death
2000	6,076	39	29,047	461
2001	6,443	48	28,828	494
2002	5,750	68	27,059	511
2003	4,728	36	24,795	469
2004	4,744	47	23,776	460
2005	4,612	52	22,723	428
2006	4,796	61	22,320	468
2007	4,905	39	22,904	416
2008	4,518	32	21,058	385

Source: KDOT

## 4.4 Motor Vehicle Accidents by Year and Cause

In 2009, deer, speed and alcohol accounted for approximately 21 percent of all motor vehicle accidents in Sedgwick County. By contrast, those same indicators accounted for 31 percent of all motor vehicle accidents each year in Kansas. In Kansas, 16 percent of accidents were deer-related; in Sedgwick County about 4 percent were deer-related.

### Sedgwick County and Kansas Motor Vehicle Accidents by Cause, 2009



## 4.5 Automobile Accidents Attributed to Driver Distractions

### Kansas:

The number of accidents attributed to cell phone use has nearly doubled over the last six years. According to statistics provided by the Kansas Department of Transportation, in 2010, 176 people were injured and six deaths were attributed to cell phone use while driving. In 2010, other electronic devices, including DVD players, stereos, GPS units, etc. contributed to 46 injuries and zero deaths. Other distractions in or around the vehicle, including applying makeup, reading newspapers, children, food, etc. contributed to 347 injuries and six deaths in 2010. There is a strong correlation between age of driver and distracted driving accidents; 53 percent of all cell phone related accidents were from drivers age 24 and younger.

### Sedgwick County:

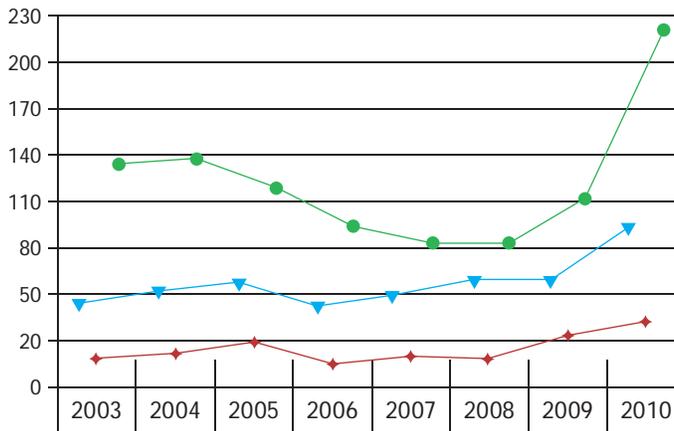
As the chart and table illustrate on the next page, the number of accidents attributed to distracted driving has increased from 190 in 2003 to 353 in 2010. In 2010, cell phone use while driving was listed as the cause for 30 injuries and one death and 75 injuries were caused by other distractions in the car.

Continued on pg 14

# Injury

## 4.5 Automobile Accidents Attributed to Driver Distractions Continued

Number of Automobile Accidents Attributed to Driver Distractions in Sedgwick County, 2003-2010



Number of Automobile Accidents Attributed to Driver Distractions in the State of Kansas & Sedgwick County

Year	Cell Phones		Other Electronic Devices		Other Distraction in or around Vehicle	
	KS	SG	KS	SG	KS	SG
2003	198	45	81	12	956	133
2004	260	53	111	16	991	138
2005	292	58	104	19	909	119
2006	350	44	104	8	843	96
2007	350	49	111	14	801	84
2008	394	61	102	13	832	84
2009	499	61	201	23	1,020	113
2010	536	95	180	35	1,303	223

Source: KDOT

# Mortality

## Section 5 Mortality

Studying causes of death and differences among population groups can help understand the overall health status of a population. Death rates reflect the cumulative impact of individual behaviors, environmental factors and the community's health care system.

This section provides a description of Sedgwick County's mortality. Sedgwick County death statistics are also provided by gender and race/ethnicity breakdown. All races are reported as non-Hispanic. The leading causes of death are provided by age. All rates are age-adjusted per 100,000.

### Note:

Age-adjusted refers to an age standardization technique used to better allow populations to be compared when the ages of the populations are quite different. For instance, a community with a large elderly population would tend to have more deaths than a community with a larger population of youth. Age-adjustment addresses this baseline discrepancy.

### Note:

Death statistics for Sedgwick County, Kansas are vital and health statistics data gathered from the Kansas Information for Communities (KIC) database, and is the most current available data. Some limitations should be addressed as set forth by the KIC database researchers: death statistics were gathered from death certificates mandated by Center for Health and Environmental Statistics at the Kansas Department of Health and Environment. Causes of death refer to the underlying cause of death, or the origin of the chain of events that led to the subsequent fatality. All rates are age-adjusted to the standard U.S. 2000 population.

### 5.1 Mortality Rates

In 2008, the U.S. age-adjusted death rate, which takes the age of the population into account, was a record low at 758.7 deaths per 100,000 U.S. population. As is illustrated below, the Sedgwick County age-adjusted death rate is higher than the state of Kansas rate, which is slightly higher than the U.S rate.

Sedgwick County and Kansas Death Statistics by Year: Age-Adjusted Rates per 100,000

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
KS	846.4	839.8	845.7	817.9	790.1	818.9	792.7	780.4	782.3	759.4
SC	883	879.2	902.3	885.4	840	900.9	819.5	829.3	797.2	799.3

Sources: US: CDC, NCHS

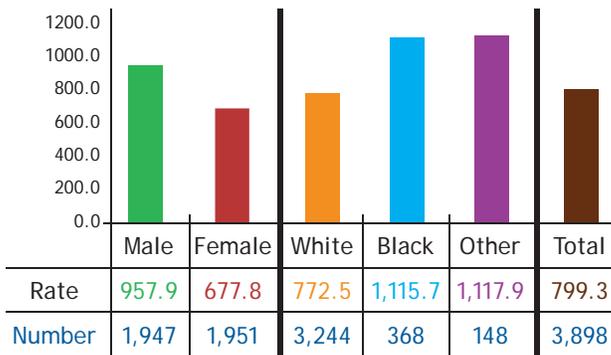
Sedgwick County and Kansas: KDHE, KIC and Annual Summary of Vital Statistics

# Mortality

## 5.2 Mortality by Gender and Race

Studying variations in mortality and survival may provide important clues to understanding the determinants of health outcomes related to differences in lifestyle choices, health care seeking behavior and access to health services. This section provides a description of Sedgwick County's mortality.

Sedgwick County Deaths and Age-adjusted Rates per 100,000, 2009



Sources: KIC

Sedgwick County Mortality Rate by Gender and Race: Age-adjusted Rates per 100,000

	Male	Female	White	Black	Other
2005 SG	1,071.7	770.5	875.3	1,195.7	1,057.5
2005 KS	973.5	698.4	802.9	1,118.9	1,133.1
2009 SG	957.9	677.8	772.5	1,115.7	1,117.9
2009 KS	911.7	643.4	750.6	1,009.4	953.5

Source: KIC

### Why are mortality rates important?

The mortality rate provides a measure for health behaviors and other health factors like access to care. Over the last five years, every population in Sedgwick County and Kansas has improved (lower mortality rate) except Sedgwick County residents who reported "Other" for "Race."

## 5.3 Leading Causes of Death

Nationally, heart disease and cancer continue to be the leading causes of death in the United States, as in Sedgwick County and in Kansas.

As displayed below, causes of death refer to the underlying cause of death, or the origin of the chain of events that led to the subsequent fatality. All rates are age-adjusted to the standard U.S. 2000 population, and the most currently available. Limitations declared by KIC database researchers address the fact that death statistics are collected from death certificates mandated by Center for Health and Environmental Statistics at the Kansas Department of Health and Environment.

Leading Causes of Death in Sedgwick County, Kansas, and the United States, 2009 (rate per 100,000)

Causes of Death	Sedgwick County			Kansas	US
	2000 (R)	2009 (N)	2009 (R)	2009 (R)	2009* (R)
● Heart disease	229	858	176	162.5	179.8
● Cancer	198.5	852	175.5	173.3	173.6
● Chronic lower respiratory diseases	59.7	252	52.9	50.9	42.2
● Cerebrovascular disease (Stroke)	55.4	193	39.7	43	38.9
● Accidents and adverse effects	20.2	155	31.3	28.8	37
● Diabetes	23.6	84	17.7	20.2	20.9
● Alzheimer's disease	12.7	106	22.1	23.7	23.4
● Pneumonia and influenza	21.9	88	17.9	17.8	16.2
● Kidney disease	15	102	21.2	17.4	14.8
● Motor vehicle accidents	10.5	56	11.5	13.9	na
● Suicide	10.8	67	14.1	13.4	11.7
● Sepsicemia	12.9	69	14.2	11.1	10.9

(R) = Rate, (N) = Number; \*preliminary

Source: KIC; US Source: CDC/NCHS

Sedgwick County rates for the leading causes of death - heart disease and cancer - remain similar to U.S. rates. However, deaths from chronic lower respiratory disease and kidney disease are higher than in the United States. Diabetes deaths are slightly lower in Sedgwick County than in Kansas and the United States.

# Mortality

## 5.4 Leading Cause of Death by Age Group

Sedgwick County Leading Cause of Death by Age Group, 2009

Age group	Number of all causes of death	Leading cause of death	Number of deaths by leading cause
Under 15	96	Conditions of perinatal period (early infancy)	29
15 to 24	44	Motor vehicle accidents	12
25 to 44	207	Other accidents and adverse effects	39
45 to 64	861	Cancer	278
65+	2,690	Heart disease	680
All ages	3,898	Heart disease	858

Source: KIC

*Why is this death data important to the health of the community?*

For the last five years the leading causes of death have not changed among any age group.

## 5.5 Suicide

The Healthy People 2010 objective is to reduce the suicide rate to 5 per 100,000.

### United States

In 2009 (most recent preliminary data), suicide became the 10th leading cause of death in the country, accounting for 36,547 deaths. The risk of dying from suicide is more than 15 times for the white population than for the black population (30,138 deaths compared to 1,954 respectively). The age groups with the highest suicide rate in the United States were ages 45 - 54 (17.2 percent) with the number of suicides at 7,426.

Source: CDC/NCHS

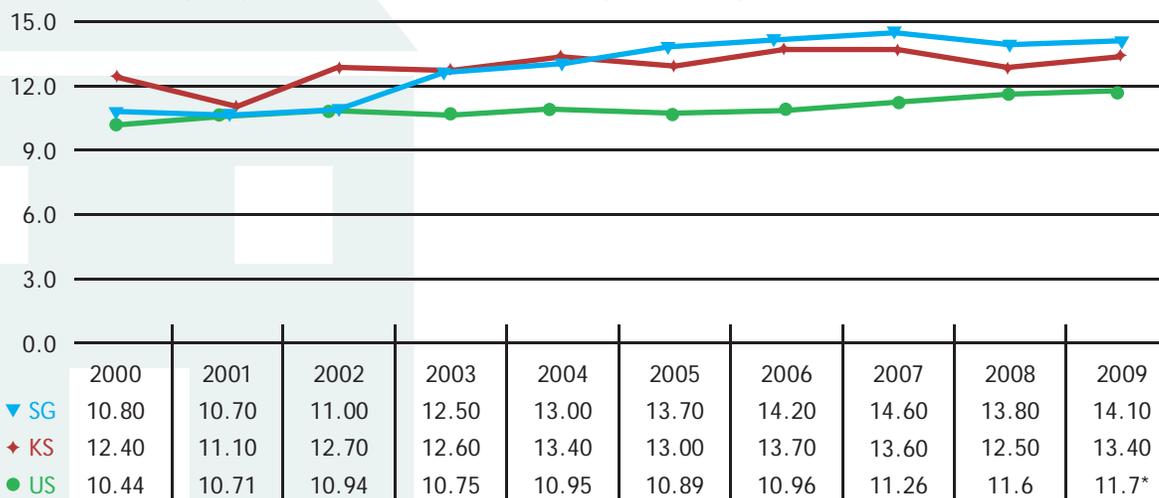
### Kansas

In 2009 there were 376 suicide deaths in Kansas, and 348 of those were white. The highest reported suicide rate by age group was 18.8 per 100,000 in the 25 - 44 age range. That age group also had the highest number of suicide deaths with 135 deaths reported.

### Sedgwick County

In 2009 there were 67 suicide deaths in Sedgwick County, 57 of those were white. The highest reported suicide rate by age group was 21.4 per 100,000 in the 45-64 age range. This age group also had the highest number of suicide deaths with 26 reported.

Suicide Age-adjusted Rates per 100,000 in Sedgwick County, Kansas and the United States



Source: State/County rates - KIC, US rate: CDC/NVSR; \* preliminary

# Mortality

## Suicide Deaths in Sedgwick County by Age Group and Year

	15 to 24	25 to 44	45 to 64	65+	All ages
2000	#	22	9	12	48
2001	13	18	15	#	48
2002	13	18	7	10	48
2003	6	21	22	8	57
2004	13	20	23	#	60
2005	6	24	24	8	63
2006	10	25	20	10	65
2007	10	22	25	10	68
2008	13	32	14	#	64
2009	6	23	26	12	67

Source: KIC

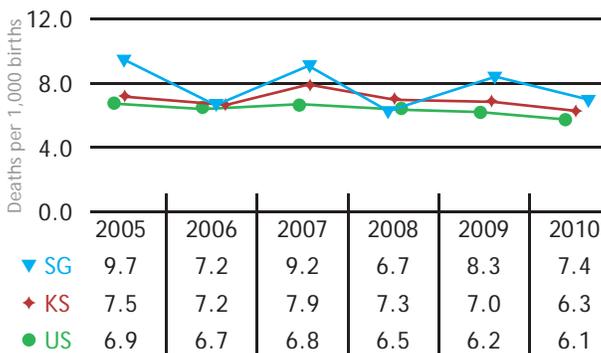
Note: There were too few under age 15 to report.

Note: # means there were fewer than 6.

## 5.6 Infant Deaths

The Kansas Department of Health and Environment Annual Summary of Vital Statistics provided the following state data. A total of 290 infant deaths occurred to Kansas residents in 2009. Infant mortality rates are deaths before the first birthday per 1,000 live births in specified group. In 2009 in Kansas, the infant mortality rate was 7.01/1,000 live births, down from 7.25 in 2008. The disparity in the infant, neonatal and post neonatal death rates between white non-Hispanics and black non-Hispanics continues to be a public health concern. In 2009 in Sedgwick County, there were 69 infant deaths, 8.32 deaths per 1,000 live births. The Healthy People 2010 goal is to reduce the infant mortality rate to no more than 4.5 deaths per 1,000 live births.

## Infant Mortality Rate by Year in Sedgwick County, Kansas and the United States

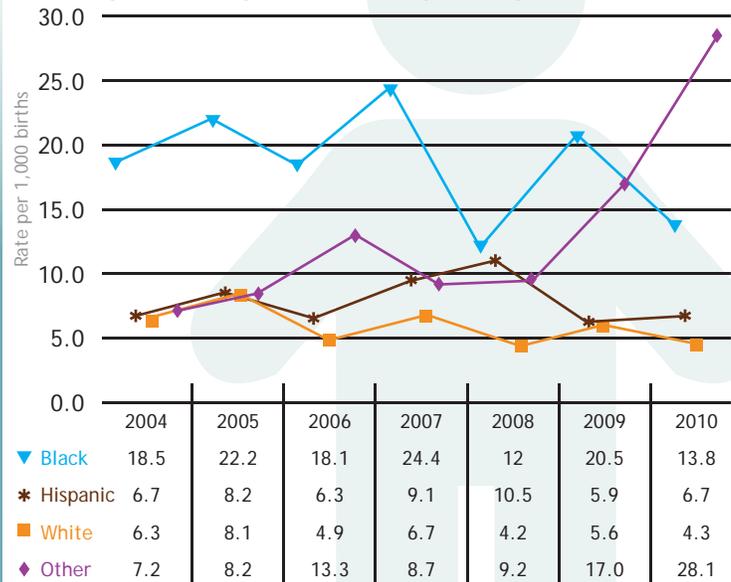


Source: KDHE Annual Summary of Vital Statistics and CDC, NCHS

Since 2005, infant mortality rates have improved for Sedgwick County, Kansas and the United States.

Additional indepth information on significant disparities in infant deaths, social and behavioral risk factors, and promising practices can be found in Sedgwick County Infant Mortality Health Issues Brief - 2011.

## Sedgwick County Infant Mortality Rate by Race and Year



## Sedgwick County: Number of Infant Death by Race/Ethnicity and Year

	Black	Hispanic	Other	White	All
2002	14	8	*	50	76
2003	15	*	*	25	46
2004	16	8	*	33	60
2005	19	11	*	41	75
2006	16	9	7	25	57
2007	22	13	*	36	76
2008	12	16	*	22	55
2009	20	9	10	29	69
2010	13	10	14	22	60

Note: Asterisk (\*) indicates fewer than six and therefore too few to report. Additionally, some infant deaths do not report race.

# Morbidity

## Section 6 Sedgwick County Morbidity

In terms of public health and epidemiology, morbidity can refer to the incidence and prevalence of a disease, the state of acquiring a disease, or the severity of a disease.

### Cancer

Cancer is a group of diseases characterized by uncontrolled growth and spread of abnormal cells. Cancer is caused by both external factors (tobacco, infectious organisms, chemicals and radiation) and internal factors (inherited mutations, hormones, immune conditions and mutations that occur from metabolism).

The risk of developing many types of cancer can be reduced by practicing healthy lifestyle habits, such as eating a healthy diet, getting regular exercise and not smoking. Also, the sooner a cancer is found and treatment begins, the better the chances that the treatment will be successful.

The Healthy People 2020 goal related to cancer is to reduce the number of new cancer cases as well as the illness, disability and death caused by cancer. Anyone can develop cancer. Since the risk of being diagnosed with cancer increases with age, around 78 percent of all cancers are diagnosed in persons age 55 and older.

Roughly 1,596,670 new cancer cases are expected to be diagnosed in the United States in 2011. Nearly 571,950 Americans are expected to die of cancer, more than 1,500 people a day. Cancer is the second most common cause of death in the United States, exceeded only by heart disease. In the United States, cancer accounts for nearly one of every four deaths.

In the coming decade, as the number of cancer survivors approaches 12 million, understanding survivors' health status and behaviors will become increasingly important.

Each year, approximately 2,000 people are diagnosed with cancer in Sedgwick County. For selected cancers and comparisons within the 50 U.S. states in 2007 (with one being the highest in number of new cases), Kansas ranked 19th for breast cancer, 16th for ovarian cancer, 31st for cervical cancer, 28th for prostate cancer, 7th for thyroid cancer and 22nd for melanoma of the skin.

Sources: NIH, HP 2020, NCI, CDC

## 6.1 Cancer Type by Location, Number and Rate

The following table indicates the number of new cancers reported by type and the rate for each. The Sedgwick County rates are similar to the rates for the state of Kansas. These cancers are reported for the whole population; cancers affecting only males or females are reported separately. Notice that lung and colorectal cancers are among the highest incidence and rate each year.

Cancer Type by Number and Rate per 100,000 in Sedgwick County, Kansas and United States

Cancer	2007 SC		2007 KS		2007 US	KS Ranking
	N	Rate	N	Rate	Rate	
● Bladder (including in situ)	93	20.3	605	20.4	20.5	23
● Brain	26	5.4	178	6.2	*	15
● Colorectal	219	46.4	1,367	46.1	45.5	23
● Esophagus	17	#	130	4.4	*	41
● Hodgkins Lymphoma	11	#	69	2.5	*	33
● Kidney and Renal Pelvis	79	17	447	15.3	15.4	26
● Larynx	19	#	108	3.7	*	30
● Leukemia	53	11.2	355	12.2	*	9
● Liver and Biliary Tree	47	10	210	7.1	*	28
● Lung and Bronchus	297	65	1,832	62.7	65.6	25
● Melanoma of Skin	101	21.4	582	20.1	18.7	22
● Multiple Myeloma	28	6	166	5.7	*	5
● Non-Hodgkins Lymphoma	100	21.7	595	20.4	18.8	6
● Oral Cavity and Pharynx	47	10	321	10.7	*	26
● Pancreas	45	10	260	8.8	*	46
● Soft Tissue	8	#	82	2.9	*	Na
● Stomach	24	5	133	4.4	*	46
● Thyroid	84	18	397	14.3	11.5	7
● Unknown Primary	29	6.2	247	8.3	*	*
● All other sites	108	23.5	666	22.8	*	*
● Total for Selection	1,435		8,750		*	*

Source: SG/KS - KIC; US - CDC Data (<http://apps.nccd.cdc.gov/uscs/>)

1 Only top 10 primary sites given

\* Not Available

Note: # denotes fewer than 20 cases were reported.

Age adjusted rates per 100,000 used from 2000 U.S. Census population.

## 6.2 Female Cancers

Mammograms are the best method to detect breast cancer early. According to 2010 BRFSS data, 78.4 percent of Sedgwick County women age 40 and older had a mammogram within the past two years, which is similar to the state of Kansas at 76.0 percent. The Healthy People 2010 goal was to increase the proportion of women age 40 and older who have received a mammogram within the preceding two years to 70 percent, which means both Sedgwick County and Kansas exceeded the goal. Another important cancer screening for women is the Pap (Papanicolaou) test: a microscopic examination of cells collected from the cervix. The Pap test is used to detect cancer, changes in the cervix that may lead to cancer, and noncancerous conditions, such as infection or inflammation. BRFSS data from 2010 shows that 84.2 percent of Sedgwick County women age 18 and older had a Pap test within the past three years compared to 82.7 percent of all Kansas women age 18 and older. There were so few incidents of cervical cancer in the last four years that a rate could not be calculated. The Healthy People 2010 goal was to increase the proportion of women age 18 and older who receive a Pap test at least every three years to 90 percent.

Source: BRFSS, HP2010

### Female Cancer Statistics for Sedgwick County, Kansas and the United States by Type and Year

Cancer	2007 SC		2007 KS		2007 US	KS Ranking
	N	Rate	N	Rate	Rate	
● Cervix	15	#	94	6.8	*NA	31
● Corpus uteri (including NOS)	72	28.3	377	24.2	24.1	24
● Female Breast	299	120	1,916	123	120	19
● Ovary	25	10	187	12	12.2	16
● Total for Selection	411		2,574			

Source: KIC; CDC

# Indicates the total number of cases not sufficient to determine a rate

\* Not available

## 6.3 Male Cancers

Prostate cancer is the most commonly diagnosed cancer in men, and second only to lung cancer in the number of cancer deaths. In the United States in 2007, 223,307 men were diagnosed with prostate cancer, and 29,093 men died from it. The PSA (prostate-specific antigen) test measures the level of an enzyme in the blood that increases due to diseases of the prostate gland, including prostate cancer. Doctors often use the PSA test and DRE (digital rectal exam) as prostate cancer screening tests; together, these tests can help doctors detect prostate cancer in men who have no symptoms of the disease. The 2010 BRFSS data shows that 57.5 percent of men in Sedgwick County age 40 and older had a PSA test within the past two years.

Source: CDC United States Cancer Statistics

### Male Cancer Statistics for Sedgwick County, Kansas and the United States by Type and Year

Cancer	2007 SC		2007 KS		2007 US	KS Ranking
	N	Rate	N	Rate	Rate	
● Prostate	292	139	2,072	156	157	28
● Testis	13	#	72	5.3	*	28
● Total for Selection	305		2,144			

Source: SG-KIC; CDC

# Indicates the total number of cases not sufficient to determine a rate

\* Not available

## 6.4 Asthma

Asthma is a chronic inflammatory disorder of the airways characterized by episodes of reversible breathing problems due to airway narrowing and obstruction. These episodes can range in severity from mild to life threatening. Symptoms of asthma include wheezing, coughing, chest tightness, and shortness of breath. Daily preventive treatment can prevent symptoms and attacks and enable individuals who have asthma to lead active lives.

Currently in the United States, more than 23 million people have asthma. The burden of respiratory disease affects individuals and their families, schools, workplaces, neighborhoods, cities and states. Because of the cost to the health care system, the burden of respiratory diseases

Continued on pg 20

# Morbidity

## 6.4 Asthma Continued

also falls on society; it is paid for with higher health insurance rates, lost productivity and tax dollars. Annual health care expenditures for asthma alone are estimated at \$20.7 billion.

Asthma affects people of every race, sex and age. However, significant disparities in asthma morbidity and mortality exist, in particular for low-income and minority populations.

Source: *Healthy People 2020*

### Prevalence (percentage) of Current Asthma in Kansas by Age

	0 to 4	5 to 9	10 to 14	15 to 17	Adult
2006	4.5%	7.9%	13%	13.9%	8.3%
2007	4.9%	8.2%	10.6%	9.7%	8.4%
2008	5.9%	8.3%	10.6%	12.4%	8.7%
2009	4.2%	8.9%	10.7%	10.4%	8.5%

Source: *BRFSS*

Reducing hospitalizations for asthma is a goal and is a national standard measure. This table reports the rate of asthma hospitalizations for Sedgwick County.

### Asthma Hospitalizations in Sedgwick County

	2003	2004	2005	2006	2007	2008
Under 1	29	19	16	16	21	19
1 to 4	188	137	127	141	110	114
5 to 14	138	89	108	129	104	81
<15	355	245	251	286	235	214
15 to 24	55	37	23	19	29	38
25 to 44	115	90	81	51	66	59
45 to 64	134	94	108	71	82	75
65 to 84	58	60	58	44	35	30
85+	7	7	11	#	#	#
Total	724	533	532	475	451	420

### Adults in Sedgwick County Who Have Been Told They Currently Have Asthma by Year

2006	2007	2008	2009	2010
8.6%	8.5%	8.7%	6.5%	11.3%

Source: *SMART BRFSS*

## 6.5 Tuberculosis (TB)

In 2010, a total of 11,181 TB cases were reported in the United States, for a rate of 3.6 cases per 100,000 population, which was the lowest rate recorded since national reporting began in 1953.

In 2010, the TB rate among foreign-born persons in the United States was 11 times greater than among U.S.-born persons. TB rates among Hispanics, non-Hispanic blacks and Asians were seven, eight, and 25 times greater, respectively, than among non-Hispanic whites. Continued progress in meeting the goal of TB elimination will hinge on improving TB

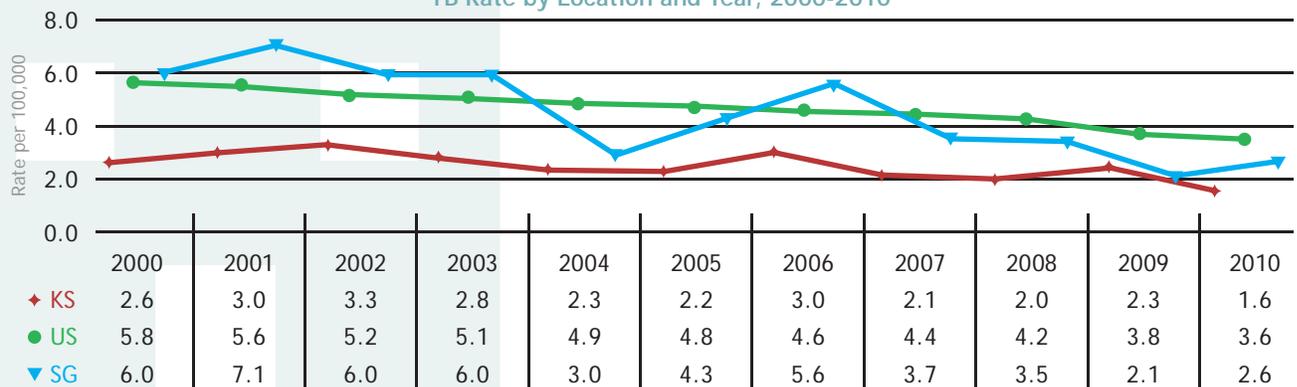
control and prevention activities among disproportionately affected populations.

Source: *CDC*

KDHE statistics show 46 new TB cases statewide in 2010. The range for the past five years has varied from 57 to 89 cases. Sedgwick County reported 12 new cases and traditionally reports more new cases each year than all other Kansas counties.

In 2010, the Sedgwick County Health Department provided treatment for 166 people with latent TB, a total of 1320 LTBI patient visits.

TB Rate by Location and Year, 2000-2010



# Morbidity

## Active TB Cases in Kansas and Sedgwick County, 2010

	Sedgwick County	Kansas
● Male	7	26
● Female	5	20
● American Indian/ Alaska Native	0	1
● Asian/Pacific Islander	7	14
● Black	3	12
● White	1	8
● Hispanic all races	1	11
● Ages 15-24	0	2
● Ages 25-44	5	19
● Ages 45-64	3	8
● Ages 65+	4	12
● Co-infection with HIV	0	0
<b>Total</b>	<b>12</b>	<b>46</b>

Source: KDHE TB Program

### 6.6 Oral Health

Cavities are the most common chronic disease in childhood. Children often get cavities in the molars (back teeth) where there are lots of cracks for bacteria to hide. Not only are untreated cavities painful, they can be deadly. Untreated cavities can cause brain and heart abscess formations. Children have died from these secondary conditions due to delayed treatment. Even milder forms of untreated decay can result in unnecessary pain and suffering, poor nutrition (it is hard to eat), and can stop a child from smiling.

Among the students screened during the 2010-2011 school year, 931 were in need of emergency dental care. A dental emergency may include hemorrhage, infection, pain or trauma that requires immediate attention.

In Sedgwick County in 2010, 25 percent of adults did not visit a dentist, hygienist or dental clinic within the past year, compared to Kansas at 27.1 percent.

### Percentage of Kansas Adults Who Did Not Visit a Dentist, Dental Hygienist or Dental Clinic within the Past Year, 2010

● Kansas	27.1%
● Less than high school	49.1%
● High School Graduate or GED	35.5%
● Some College	29.4%
● Hispanic	38.5%
● White	26.0%
● Black	37.9%

Source: BRFSS

## Sedgwick County School Oral Health Screening Results 2010-2011

	All SG Schools	USD 259	All Other
Number Children Screened	29,326	23,175	6,151
Untreated Decay - Children with obvious untreated caries in at least 1 tooth.	18.89%	19.58%	16.31%
Treated Decay - Children with at least one restoration.	43.32%	44.19%	40.07%
Sealants Present	36.07%	36.25%	35.41%
Urgent Care Needed - Swelling/Other Present	3.17%	3.35%	2.50%

Source: KDHE

### 6.7 Communicable Diseases in Sedgwick County

Communicable or infectious diseases are caused by agents that include bacteria, viruses, and parasites. Examples of modes of transmission include contact with the body or fluids of an infected person, droplets in the air, sexual activity, and ingesting contaminated food or water.

Communicable diseases cause a wide range of illnesses. A majority of these diseases can be prevented by good hand hygiene, environmental sanitation, and safe sexual practices. In addition, safe food handling and storage and cooking foods to adequate temperatures can minimize the risk of illness.

By law, Kansas physicians, laboratories, schools, childcare centers, etc. are required to report notifiable diseases to the local health department when they are identified or suspected. Furthermore, any condition may be reported if it is believed to be a threat to the public's health. Reporting plays a key role in local and state efforts to control communicable diseases, monitor the health of the community and provide the basis for preventive action. The number of cases actually reported is considered to represent only a small portion of the total number of cases in the community.

Continued on pg 22

# Morbidity

## Sedgwick County Health Department Selected Communicable Disease Activity (CONFIRMED CASES ONLY)

	YTD				
	2010	2009	2008	2007	2006
<b>Enteric Disease</b>					
Campylobacter	48	57	45	52	36
Cryptosporidiosis	3	4	5	52	5
E. coli O157:H7	0	0	2	0	0
E. coli (other shiga-toxin producing)	3	2	2	1	0
Giardiasis	16	20	20	24	14
Salmonellosis	60	48	60	38	41
Shigellosis	14	116	20	4	16
<b>General Disease</b>					
Hepatitis A	1	0	3	1	1
Hepatitis B, acute	4	1	2	3	1
Hepatitis B, chronic	12	7	8	22	24
Hepatitis C, chronic	392	490	522	393	433
Legionellosis	4	2	1	1	4
Meningitis, other bacterial	0	0	0	0	0
Meningitis, Neisseria meningitides	1	2	0	1	0
Strep Group A, invasive disease	1	4	10	18	15
Strep pneumoniae, invasive	16	13	23	27	14
Tularemia	1	1	1	2	2
2009 H1N1 Influenza A virus	18	309	N/A	N/A	N/A
<b>Vaccine Preventable Disease (VPD)</b>					
Haemophilus Influenzae, invasive	5	5	4	6	6
Measles (Rubeola)	0	0	0	0	0
Mumps	0	0	0	3	4
Pertussis	24	35	17	16	26
Varicella (Chickenpox)*	86	47	124	140	122
<b>Tuberculosis</b>					
Tuberculosis, active	12	10	16	17	26
Tuberculosis, infection	166	379	602	585	753
<b>Vector-Borne</b>					
Lyme Disease	0	0	3	0	0
West Nile Virus**	0	0	0	35	11
<b>Sexually Transmitted Diseases *</b>					
Chlamydia	2,629	2,605	2,431	2,297	2,116
Gonorrhea	636	703	758	656	627
Syphilis (primary, secondary & early latent)	29	32	24	3	4
Prevalent HIV/AIDS ***	703	729	696	654	619

Data are adjusted regularly based on cases status being updated and/or most recent lab report.

\* All Varicella (chickenpox) suspect cases reported to the health department without lab confirmation.

\*\*Prior to 2008, all suspect, probable and confirmed cases of WNV were included in the totals. Beginning in 2008, only confirmed cases were included.

\*\*\*Prevalent cases are those presumed living with HIV/AIDS who were diagnosed in Sedgwick County.

CDC case definitions are available at: [www.cdc.gov/mmwr/preview/mmwrhtml/00047449.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/00047449.htm).

## 6.8 HIV/AIDS Incidence & Prevalence for Sedgwick County and Kansas

HIV/AIDS surveillance enhances efforts to prevent HIV transmission, improve allocation of resources for treatment services, and assist in evaluating the impact of public health interventions. In the United States, the rate of new HIV infections has slowed from more

than 150,000 in the mid-1980s to 55,000-58,500 per year now (CDC). Despite the substantial decline, the rate of new infections is still unacceptably high, making prevention as important as ever.

HIV and AIDS Statistics for Kansas and Sedgwick County (1999-2010)  
Incidence (the number of new occurrences) and  
Prevalence (total persons currently living with the disease)

Year	Kansas HIV		Kansas AIDS		Sedgwick Co. HIV		Sedgwick Co. AIDS	
	Incidence	Prevalence	Incidence	Prevalence	Incidence	Prevalence	Incidence	Prevalence
• 1999	52	489	108	663	13	114	37	200
• 2000	47	534	85	739	13	127	25	221
• 2001	73	603	86	809	25	152	19	236
• 2002	79	681	84	872	15	167	28	256
• 2003	71	747	117	967	15	179	37	282
• 2004	81	827	92	1,048	22	201	33	310
• 2005	100	926	119	1,155	22	222	36	344
• 2006	98	1,024	90	1,237	26	248	29	371
• 2007	81	1,103	106	1,337	20	266	22	392
• 2008	115	1,259	106	1,344	28	318	19	378
• 2009	107	1,297	120	1,439	33	331	29	398
• 2010	80	1,198	101	1,478	29	310	19	393

Source: KDHE

# Morbidity

## 6.9 Diabetes

### Background

According to the most recent CDC estimates, 24 million U.S. children and adults, or 7.8 percent of the population, have diabetes - and among them, almost 6 million are undiagnosed. Among people who are age 60 and older, 23 percent have diabetes. This age-group accounts for about half of all persons with diabetes in the U.S., suggesting the burden of diabetes will continue to grow as our population ages.

About 8.5 percent of Kansas adults - roughly 180,000 - have been diagnosed with diabetes. The 2009 Sedgwick County rate is slightly higher at 8.7 percent. An additional 120,000 adult Kansans have undiagnosed diabetes. The prevalence of doctor-diagnosed diabetes is 14.8 percent for adults ages 55-64 years and 19.4 percent for those 65 years and older. There is little difference between local, state and national data when considering diabetes rates.

The prevalence of diabetes is associated with socioeconomic factors such as income and education. About 11.1 percent of Kansas adults whose annual household income is less than \$50,000 have diabetes versus 6.2 percent for those with an income higher than \$50,000. The prevalence of diabetes is also higher for adult Kansans who do not have a college degree (9.7 percent) compared to those who have graduated from college (6.4 percent). In Sedgwick County, as noted for the state trend, as education and income levels increase, diabetes prevalence decreases.

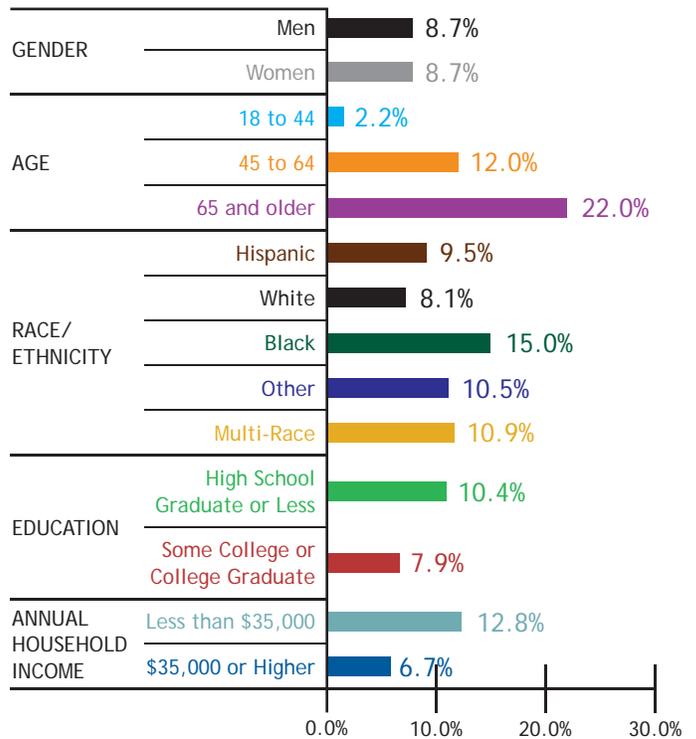
Diabetes is more prevalent in certain population subgroups in Kansas. In 2009, the age-adjusted prevalence of diagnosed diabetes was higher among non-Hispanic blacks (14.3 percent), non-Hispanic persons of other race groups or multiple races (11.3 percent) and Hispanics (13.7 percent) as compared to non-Hispanic whites (7.6 percent). The age-adjusted prevalence of diabetes among American Indian groups is 15.3 percent.

Adults Diagnosed with Diabetes in Sedgwick County, Kansas and United States, 2009

	Yes	Yes (pregnancy-related)	No	No (pre-diabetes or borderline diabetes)
Sedgwick County	8.6	0.9	89.8	0.7
Kansas	8.5	0.7	90	0.8
United States	8.3	0.7	89.5	1.2

Source: BRFSS

Adults Diagnosed with Diabetes, Sedgwick County 2009



Source: [www.kdheks.gov/brfss/Expansion/index.html](http://www.kdheks.gov/brfss/Expansion/index.html)

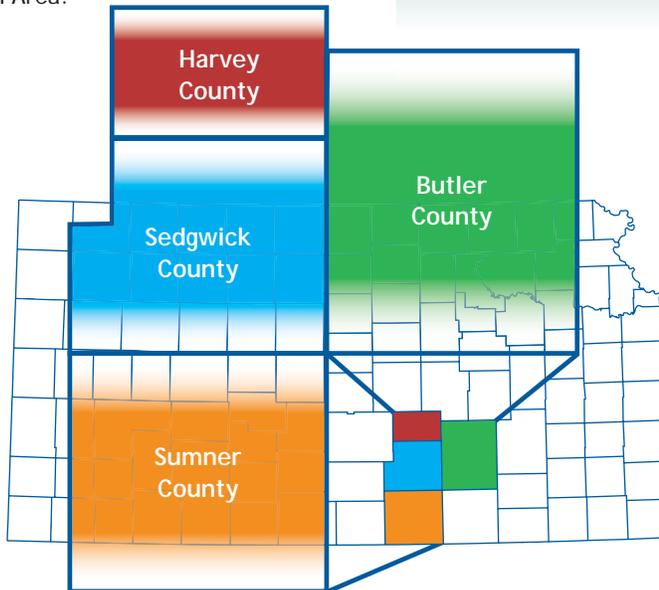
# Leading Health Indicators

Healthy People provides science-based, 10-year national objectives for improving the health of all Americans. Healthy People 2020 was launched on December 2, 2010, with an ambitious, yet achievable, 10-year agenda for improving the nation's health. Healthy People 2020 contains 42 topic areas with nearly 600 objectives and 1,200 measures. A smaller set of Healthy People 2020 objectives, called Leading Health Indicators, has been selected to communicate high-priority health issues and actions that can be taken to address them.

These **leading health indicators** highlight critical health issues that, if left unaddressed, can result in future public health problems. This section of the data book features **eight measures** related to the leading health indicators. Some indicators were addressed in previous sections. The 12 leading health indicators include access to health services; clinical preventive services; environmental quality; injury and violence; maternal, infant and child health; mental health; nutrition, physical activity, and obesity; oral health; reproductive and sexual health; social determinants; substance abuse; and tobacco.

In this section, where data are available, gender, age, race, education, and income data are provided as these measures help assess impacts of social determinants of health. Additionally, Sedgwick County is compared to peer urban counties in our region of the United States, as well as the counties that make up the Wichita Metropolitan Statistical Area.

Physical Activity  
Tobacco Use  
Adult Obesity  
Nutrition  
Binge Drinking  
Health Status  
Motor Vehicle Crash Deaths  
Mental Health



# Leading Health Indicators

## 7.1 Physical Activity

### Why is this important?

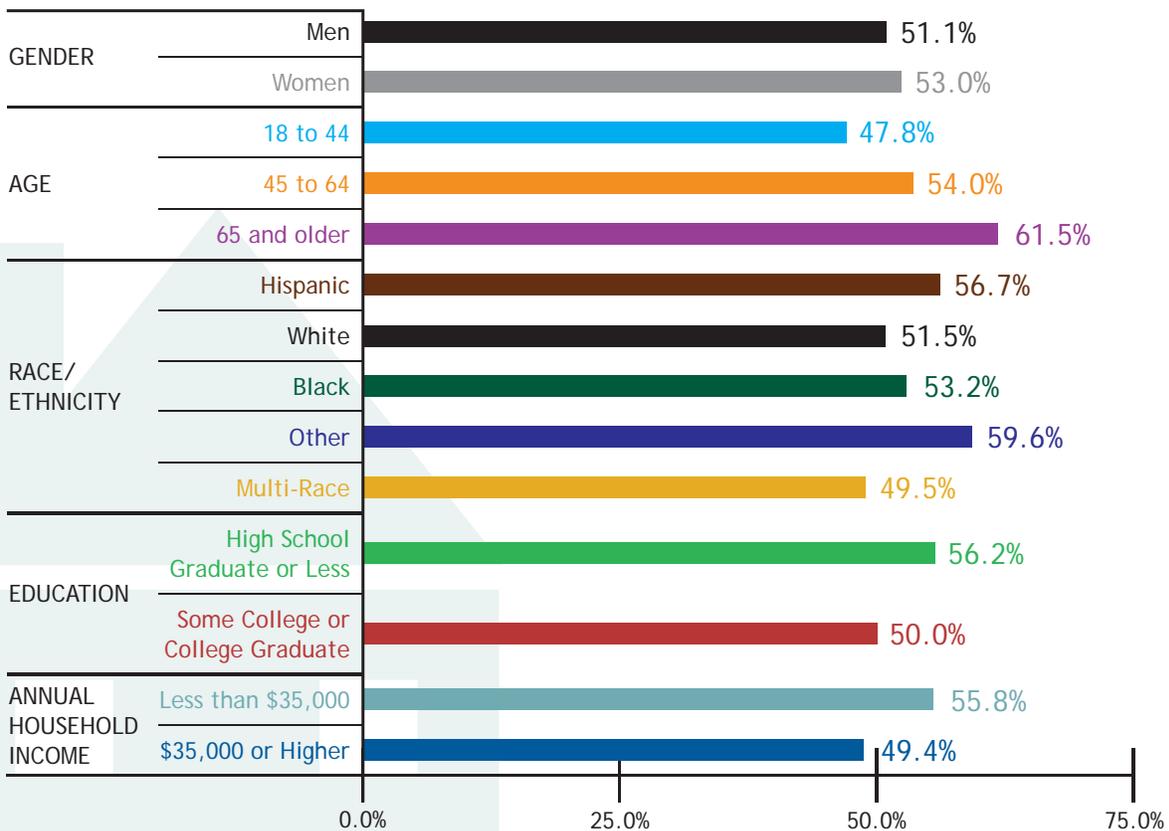
All Americans should be regularly physically active to improve overall health and fitness and to prevent many adverse health outcomes. The benefits of physical activity occur in generally healthy people, in people at risk of developing chronic diseases, and in people with current chronic conditions or disabilities.

Physical activity affects many health conditions, and the specific amounts and types of activity that benefit each condition vary. In developing public health guidelines, the challenge is to integrate

scientific information across all health benefits and identify a critical range of physical activity that appears to have an effect across the health benefits. One consistent finding from research studies is that once the health benefits from physical activity begin to accrue, additional amounts of activity provide additional benefits.

Although some health benefits seem to begin with as little as 1 hour a week, research shows that a total amount of 2 hours and 30 minutes a week of moderate-intensity aerobic activity, such as brisk walking, consistently reduces the risk of many chronic diseases and other adverse health outcomes.

Percentage of Adults not Participating in Recommended Level of Physical Activity\*, 2009



Source: BRFSS 2009

\*Physical activity guidelines surveyed by BRFSS: 30+ minutes of moderate physical activity five or more days per week, or vigorous physical activity for 20+ minutes three or more days per week

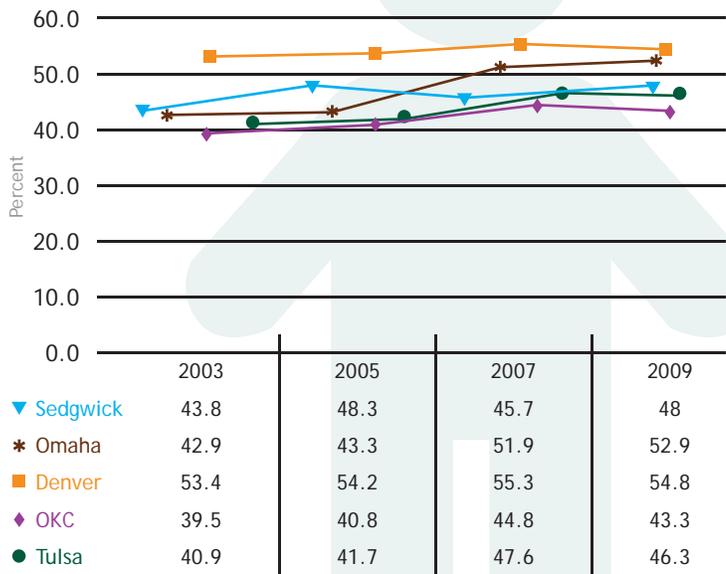
# Physical Activity

## How does Sedgwick County compare?

In 2009, 49 percent of U.S. adults did not meet physical activity recommendations; in Kansas, 51.5 percent of adults did not meet the recommendations; and in Sedgwick County, even more adults reported not getting the recommended level of physical activity, 52 percent. However, since 2003, the percent of Sedgwick County adults achieving the physical activity recommendations has improved as the comparison chart illustrates.

**Other Metro Areas:**  
Compared to regional peer metro areas, Sedgwick County has an average number of physically active adults.

Adults with Recommended Amount of Physical Activity by County and Year



Source: BRFSS

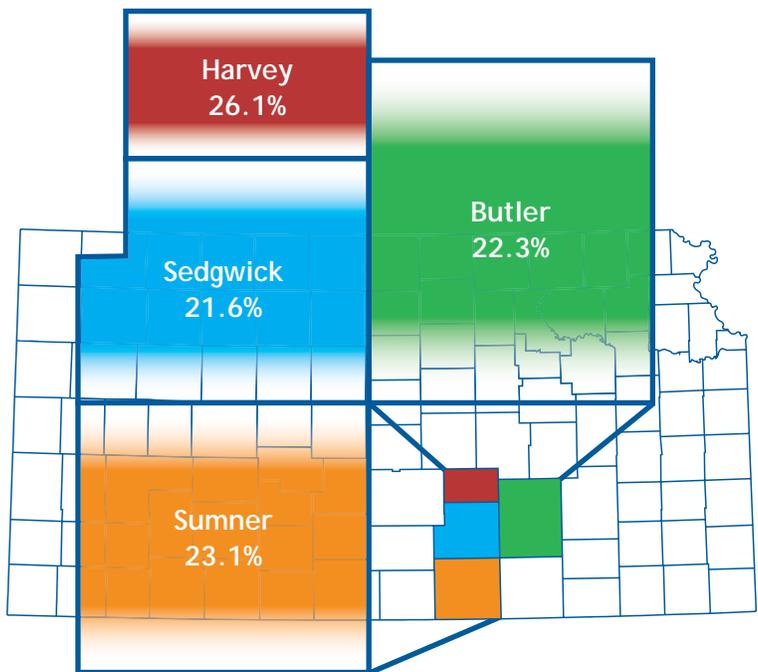
## Kansas Counties:

Compared to other counties in Kansas, Sedgwick County ranked 102nd for the number of adults reporting no leisure-time physical activity. In other words, Sedgwick County adults are the fourth most active in their leisure time. Johnson County had the best health outcome for this indicator and Wyandotte County had the worst.

Source: County Health Rankings

Percentage of Adults Who Report no Leisure Time Physical Activity in the Wichita Metropolitan Statistical Area (MSA)

- Butler 22.3%
- Harvey 26.1%
- Sedgwick 21.6%
- Sumner 23.1%



Source: 2009 BRFSS

# Leading Health Indicators

## 7.2 Tobacco Use

### Why is this important?

Smoking harms nearly every organ of the body, causing many diseases and reducing the health of smokers in general. Quitting smoking has immediate, as well as long-term benefits, reducing risks for diseases caused by smoking and improving health in general. While smoking is the leading cause of lung cancer, smoking also causes several other cancers including cervical, kidney, pancreatic, stomach, bladder, esophageal, laryngeal, oral and throat cancers. In addition to cancers, smoking causes

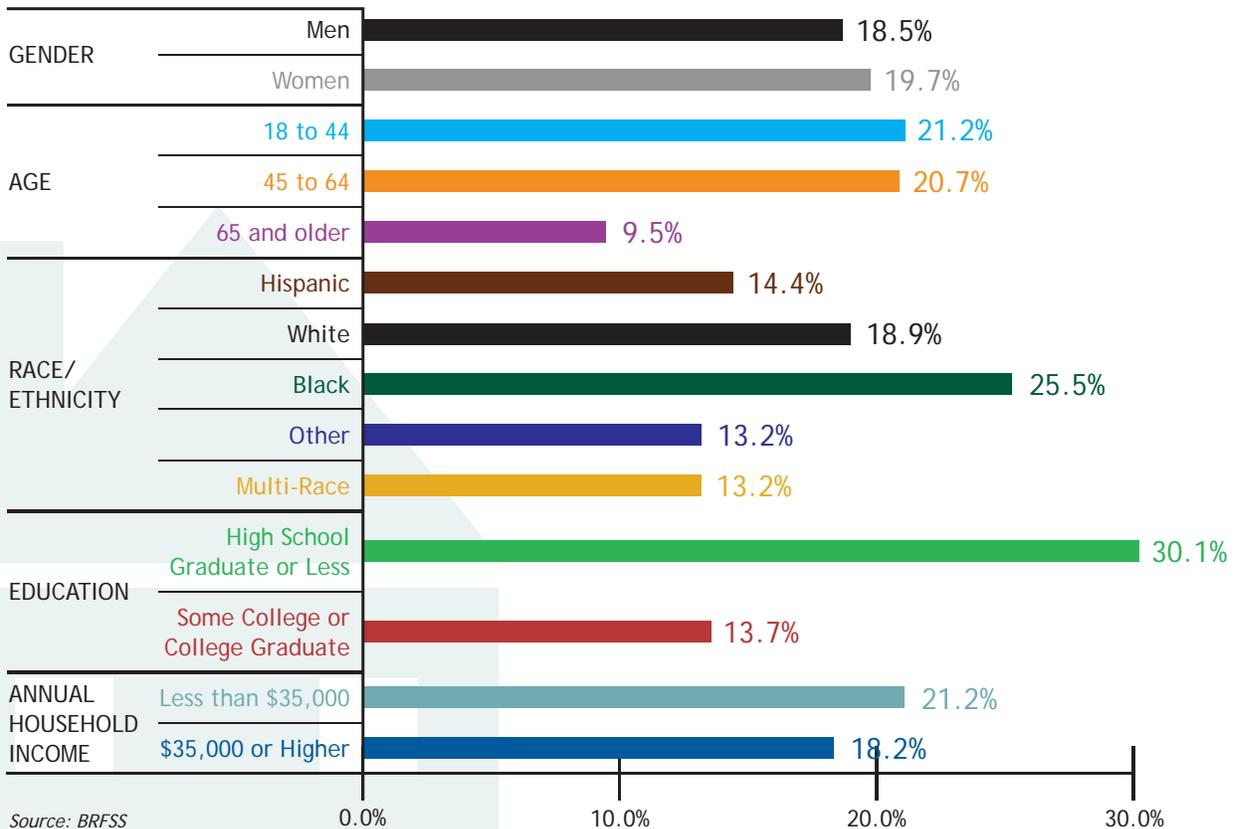
chronic lung diseases, coronary heart and cardiovascular diseases, and reproductive effects.

*Source: Surgeon General's Report on Tobacco Use*

In addition to the negative health effects, smoking results in increased medical costs. An analysis of data from the U.S. Centers for Disease Control & Prevention and other research, the annual smoking-caused health care costs in Kansas were \$927 million and the annual smoking-caused Medicaid costs were \$196 million.

*Source: Campaign for Tobacco Free Kids, The Toll of Tobacco in Kansas*

Percentage of Adults who are Current Smokers in Sedgwick County, 2009



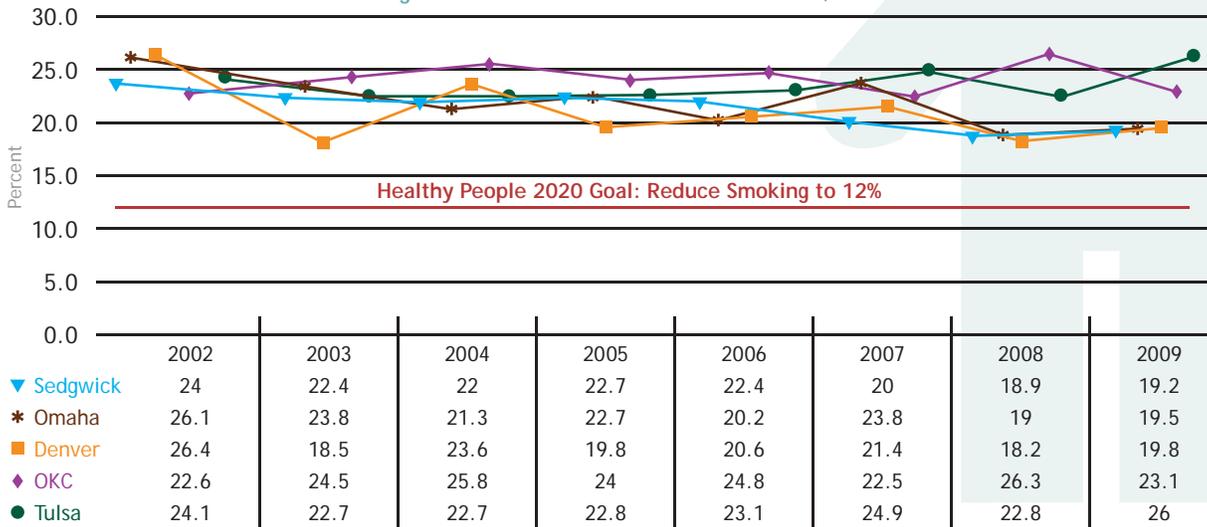
# Tobacco Use

## How does Sedgwick County compare?

In the United States, 17.9 percent of adults smoke. In Kansas, 17.8 percent of adults smoke, which is lower than Sedgwick County at 19.2 percent. Over the past 8 years there has been a decrease in the percentage of adult smokers in Sedgwick County.

*Other Metro Areas:  
Compared to regional peer metro areas, Sedgwick County currently has the lowest percentage of smokers.*

Percentage of Adults who are Current Smokers, 2002-2009

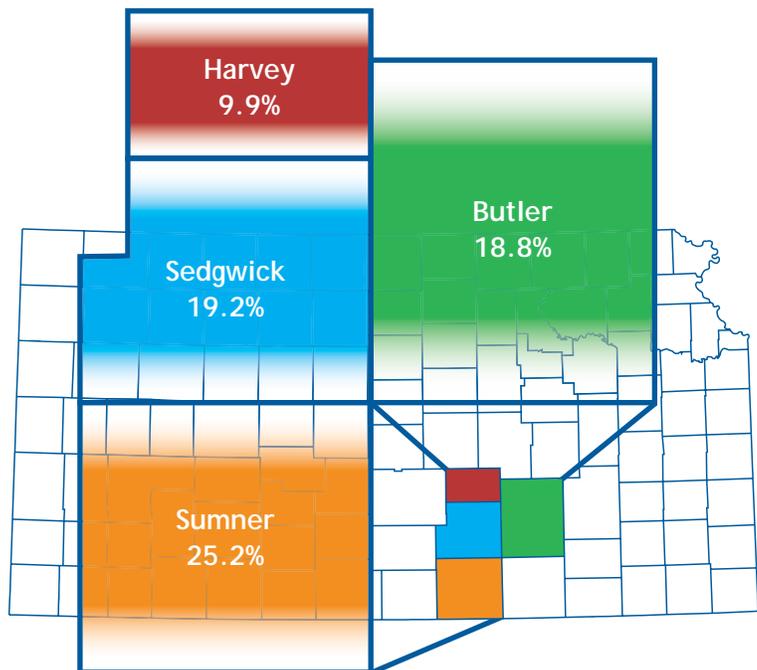


## Kansas Counties:

Compared to other counties in Kansas, Sedgwick County ranked 79th, in the lowest quartile (fourth). Sheridan County had the best health outcome for this indicator and Wyandotte County had the worst.

Percentage of Adult Smokers in the Wichita Metropolitan Statistical Area (MSA)

- Butler 18.8%
- Harvey 9.9%
- Sedgwick 19.2%
- Sumner 25.2%



Source: BRFSS, 2009

# Leading Health Indicators

## 7.3 Adult Obesity

### Why is this important?

Obesity is one of the most challenging health crises the country has ever faced. While we have made some important progress to solve this health crisis, we need to do much more.

In 2001, 61 percent of U.S. adults were overweight or obese, and nearly 12 percent of children and adolescents were overweight. Today the rates are even higher: more than two-thirds of adults - 190 million people - are overweight or obese; nearly one-third of children and teens fall into these categories. Childhood obesity rates have tripled since 1980. In some places and among some groups, the problem is much worse. In Mississippi, nearly 70 percent of adults and 44 percent of children are overweight or obese. Overall, almost half of all black women are obese.

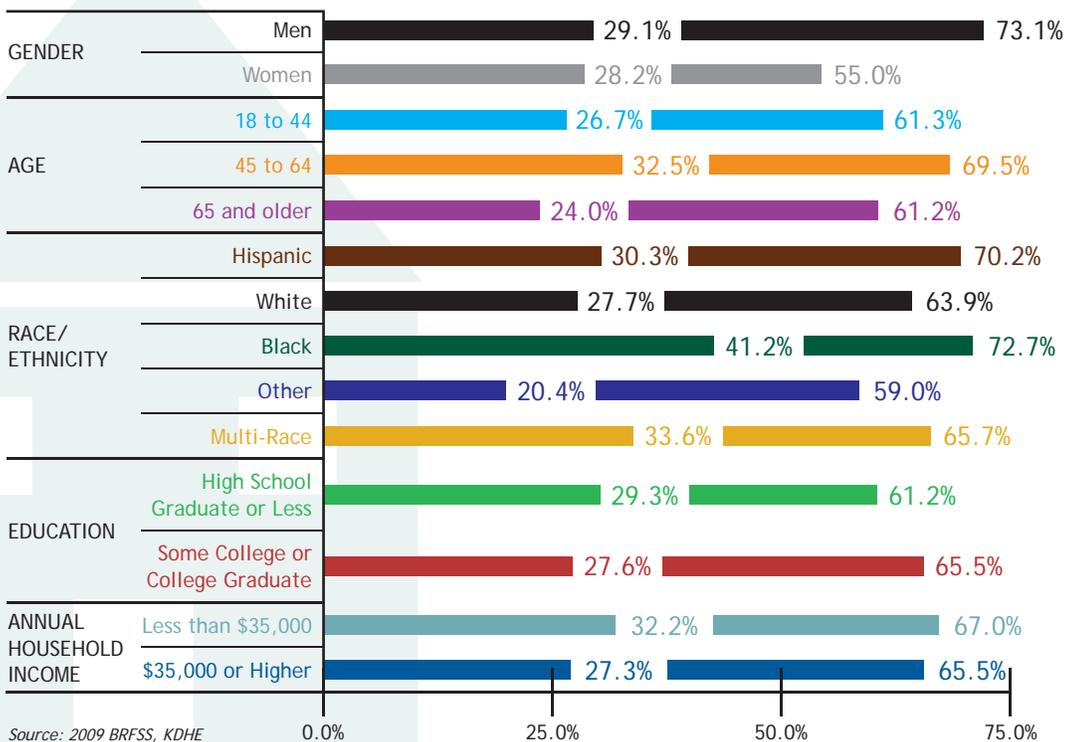
The U.S. Centers for Disease Control and Prevention (CDC) estimates that obesity kills more than 110,000 Americans every year. In addition, obesity plays a role in many millions of cases of chronic illness, including high blood pressure, high cholesterol, diabetes, heart disease, stroke, arthritis and cancer. Even when they don't result in death, these ailments can make life painful and difficult for patients and their families.

Obesity is also enormously expensive. Every year, obesity costs U.S. employers \$73 billion in lost productivity. Even worse, America spends more than \$150 billion annually on health care linked to obesity. We all know that our country's health care costs are already high, and are continuing to rise. Reducing obesity has the potential to significantly ease this problem.

Source: *F as in Fat: How Obesity Threatens America's Future* - 2011

Weight Classification of Adults in Sedgwick County, 2009	Category	Neither Overweight nor Obese (bmi less/= 24.9)	Overweight (bmi 25.0 - 29.9)	Obese (bmi 30.0 - 99.8)
	%	35.8%	35.8%	28.2%

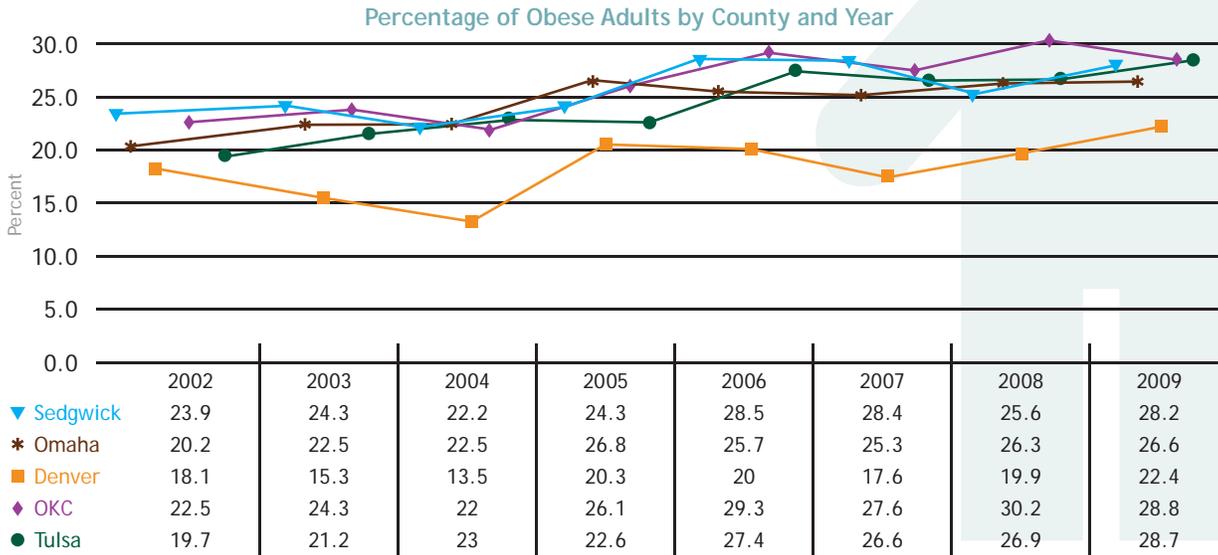
Percentage of Adults who are Obese (first percentage) or both Overweight or Obese (second percentage), 2009



# Adult Obesity

## How does Sedgwick County compare?

In the United States, 26.9 percent of adults are obese with a BMI greater than 30.0. In Kansas, 28.8 percent of adults are obese, which is higher than Sedgwick County at 28.2 percent.

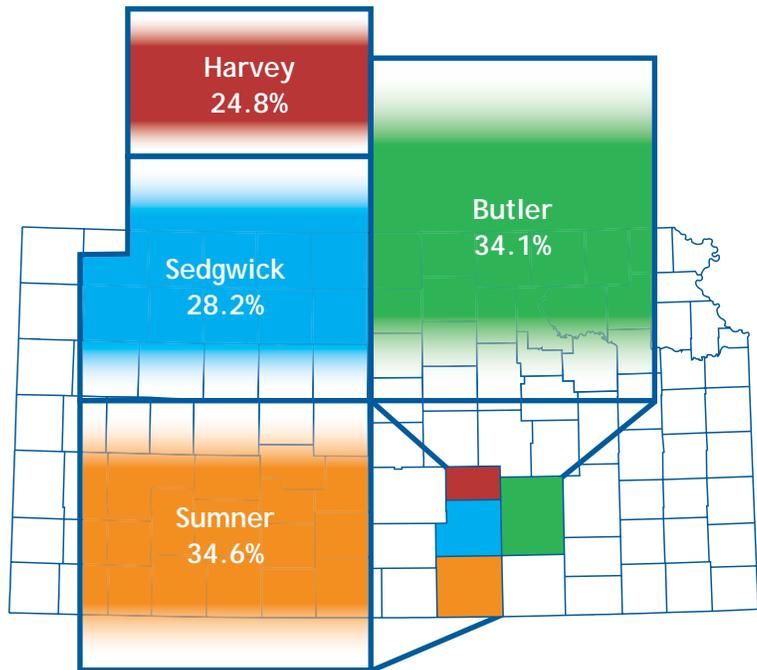


## Kansas Counties:

Compared to other counties in Kansas, Sedgwick County ranks 29th and is in the second highest quartile. Johnson County has the best health outcome for this indicator and Saline County has the lowest.

## Percentage of Obese Adults in the Wichita Metropolitan Statistical Area

- Butler 34.1%
- Harvey 24.8%
- Sedgwick 28.2%
- Sumner 34.6%



Source: 2009 BRFSS

# Leading Health Indicators

## 7.4 Nutrition

### Why is this important?

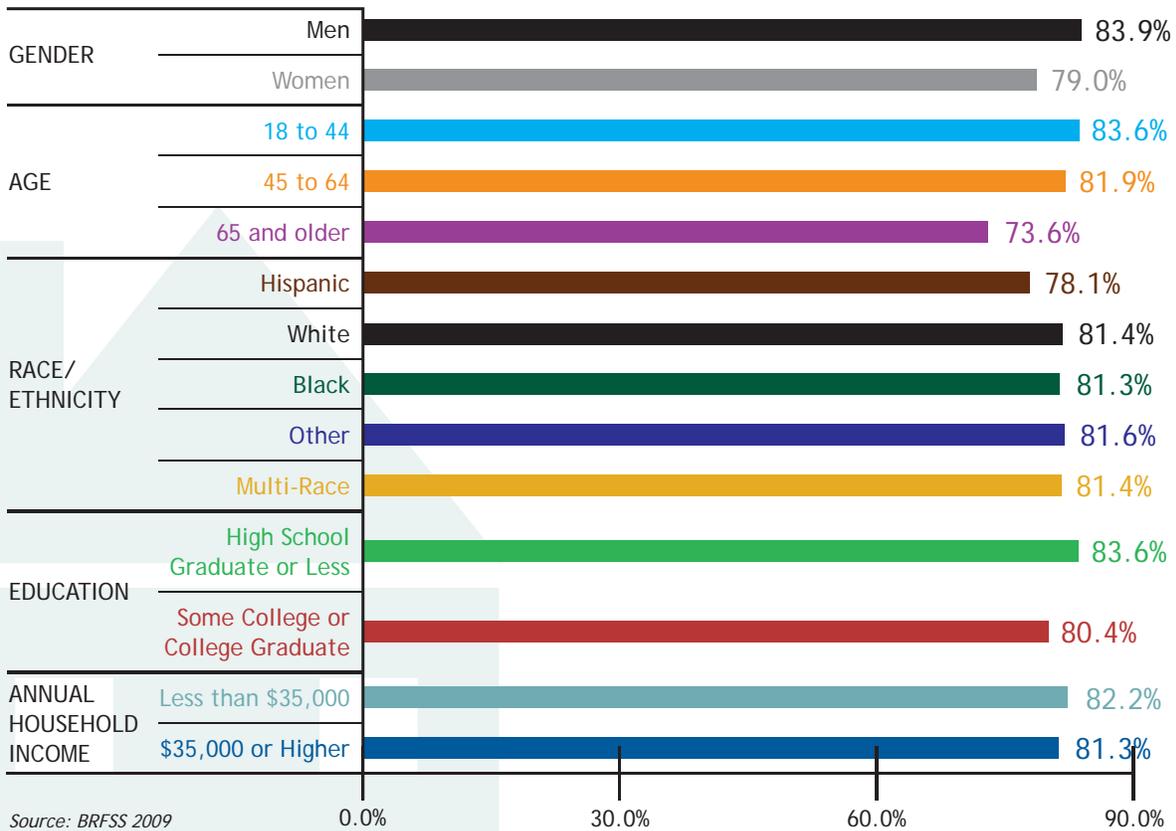
Most fruits and vegetables are naturally low in calories and provide essential nutrients and dietary fiber. They may also play a role in preventing certain chronic diseases. When compared to people who eat only small amounts of fruits and vegetables, those who eat more generous amounts tend to have reduced risk of chronic diseases. These diseases

include stroke, type 2 diabetes, some types of cancer, and perhaps cardiovascular disease and hypertension.

Regular consumption of fruits and vegetables should be part of a healthy diet and lifestyle.

Source: Myplate.gov

Percentage of Adults who Reported Consuming Fruits and Vegetables fewer than Five Times per Day, 2009



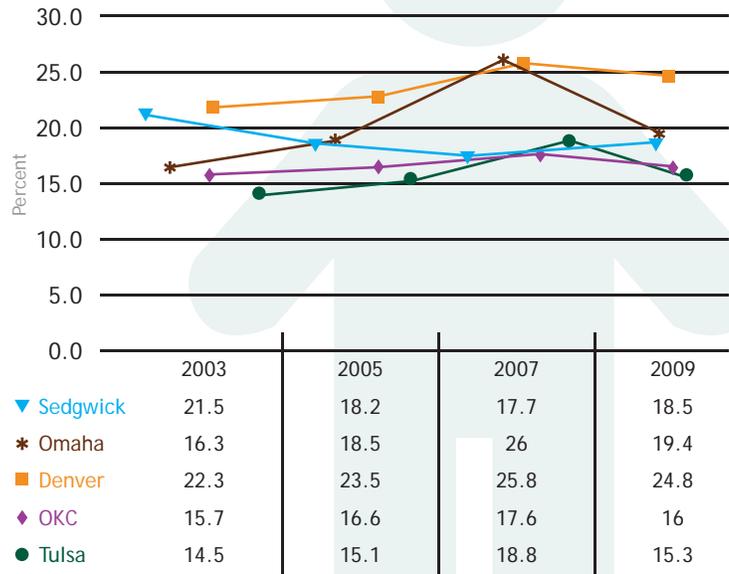
# Nutrition

## How does Sedgwick County compare?

In the United States, 76.6 percent of adults reported consuming fruits and vegetables fewer than five times a day. In Kansas, 81.4 percent of adults reported consuming fruits and vegetables fewer than five times a day, which is slightly lower than Sedgwick County at 81.5 percent.

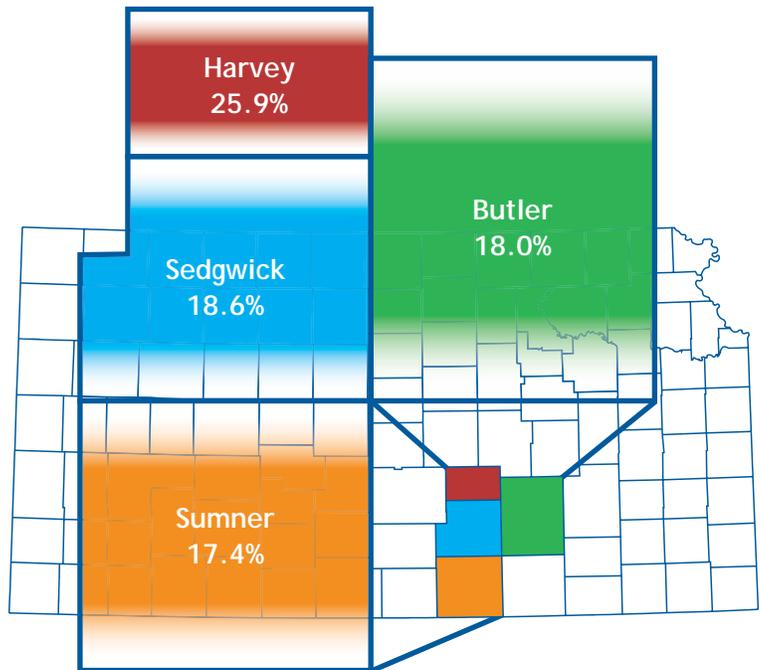
*Other Metro Areas:  
Sedgwick County is average compared to regional peer metro areas in this health factor.*

Adults who have Consumed Fruits and Vegetables Five or More Times a Day, 2009



## Adult Fruit and Vegetable Consumption in Wichita Metropolitan Statistical Area

- Butler 18.0%
- Harvey 25.9%
- Sedgwick 18.6%
- Sumner 17.4%



Source: BRFSS 2009

# Leading Health Indicators

## 7.5 Binge Drinking

### Why is this important?

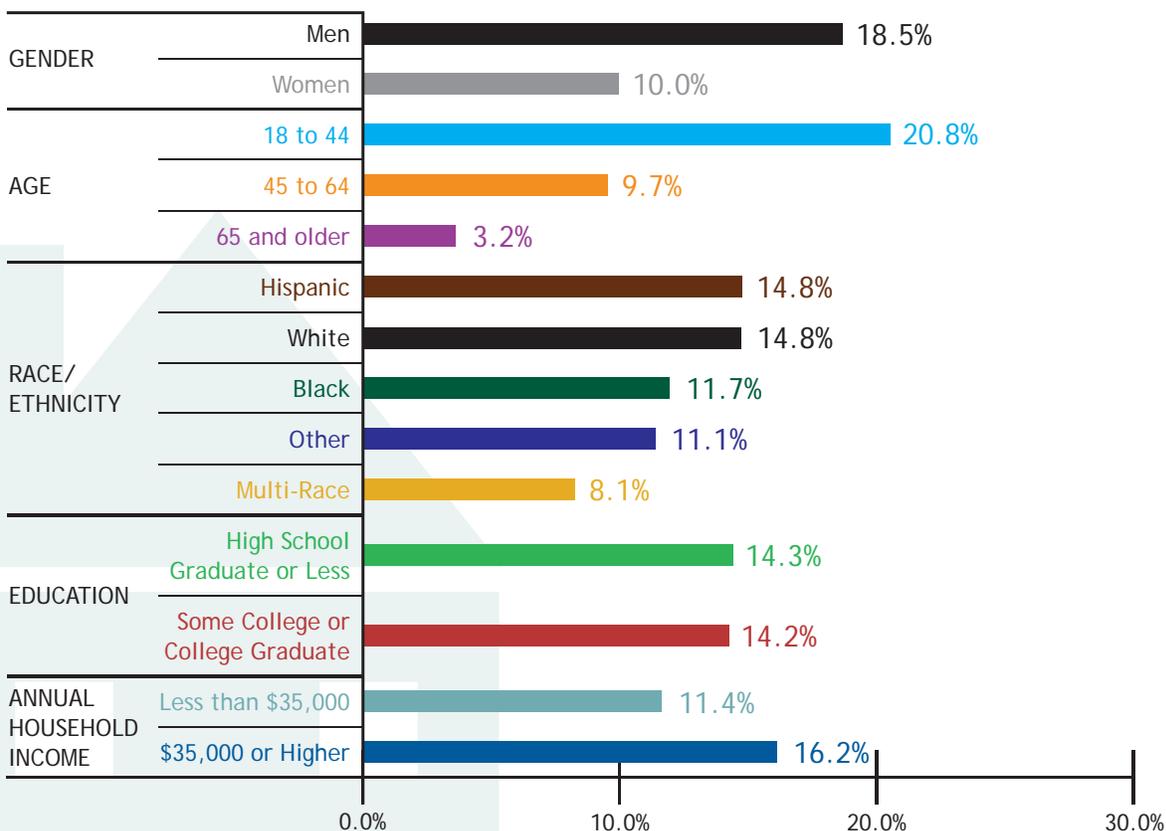
New estimates show that binge drinking\* is a bigger problem than previously thought. More than 38 million U.S. adults binge drink about four times a month, and the largest number of drinks per binge is eight, on average. This behavior greatly increases the chances of getting hurt or hurting others due to car crashes, violence and suicide. Drinking too much, including binge drinking, causes 80,000 deaths in the United States each year, and in 2006 cost the economy \$223.5 billion. Binge drinking is a problem in

all states, even in states with fewer binge drinkers because they are bingeing more often and in larger amounts.

\*The definition for binge drinking changed in 2006. Binge drinking was defined as "five or more drinks on one occasion for adults" (2005 and previous) and is now defined as "five or more drinks on one occasion for males, and four or more drinks on one occasion for females" (2006 to present).

Source: CDC

Percentage of Adults who are Binge Drinkers, 2009



# Binge Drinking

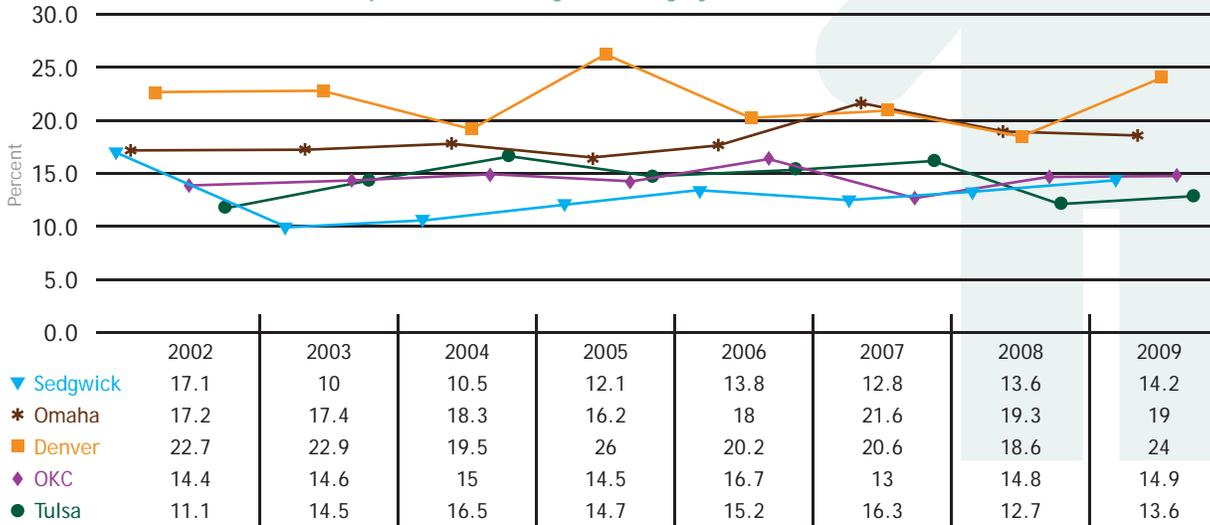
## How does Sedgwick County compare?

In the United States 15.8 percent of adults report binge drinking. In Kansas, 14.5 percent of adults report binge drinking, which is higher than Sedgwick County at 14.2 percent.

Over the past 8 years the number of adults reporting binge drinking in Sedgwick County has remained steady.

**Other Metro Areas:**  
Compared to the following regional peer metro areas, Sedgwick County currently has the second lowest percentage of binge drinkers.

Reported Adult Binge Drinking by Location and Year



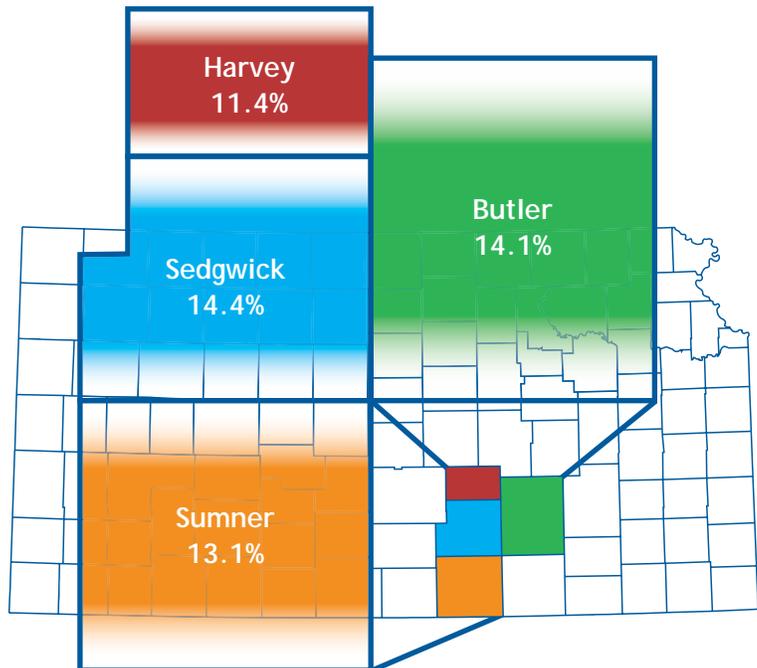
Healthy People 2020 Goal: Reduce the proportion of persons engaging in binge drinking during the past month (adults aged 18 years and older) to 24.3 percent

## Kansas Counties:

Compared to other counties in Kansas, Sedgwick County ranks 60th and is in the second lowest quartile. Linn County has the best health outcome for this indicator and Riley County has the lowest.

## Percentage of Binge Drinking in the Wichita Metropolitan Statistical Area

- Butler 14.1%
- Harvey 11.4%
- Sedgwick 14.4%
- Sumner 13.1%



Source: BRFSS 2009

# Leading Health Indicators

## 7.6 Health Status

### Why is this important?

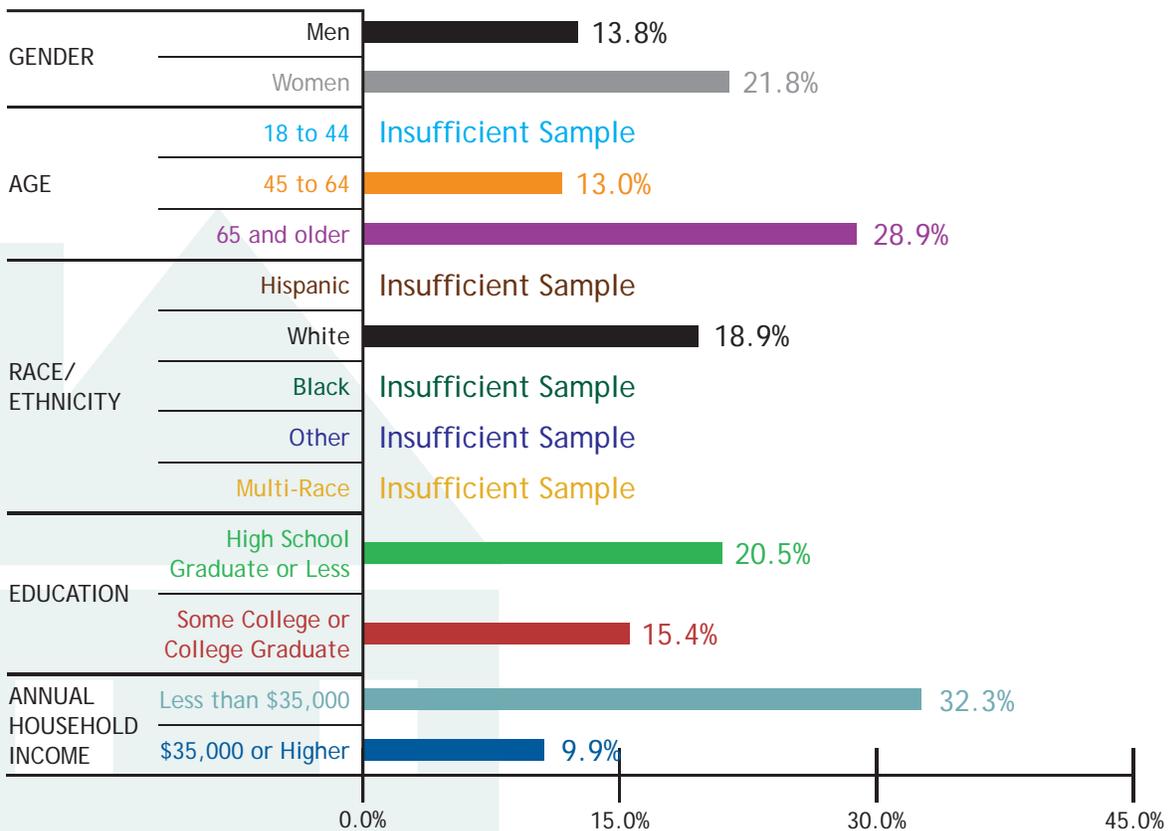
Self-reported health status is a general measure of health-related quality of life in a population. This measure is based on survey responses to the question: "In general, would you say that your health is excellent, very good, good, fair, or poor?"

Self-reported health status is a widely used measure of people's health-related quality of life. In addition

to measuring how long people live, it is important to also include measures of how healthy people are while alive - self-reported health status has been shown to be a very reliable measure of current health.

*Source: County Health Rankings*

Percentage of Adults with Fair or Poor Self-Perceived Health Status, 2009



# Health Status

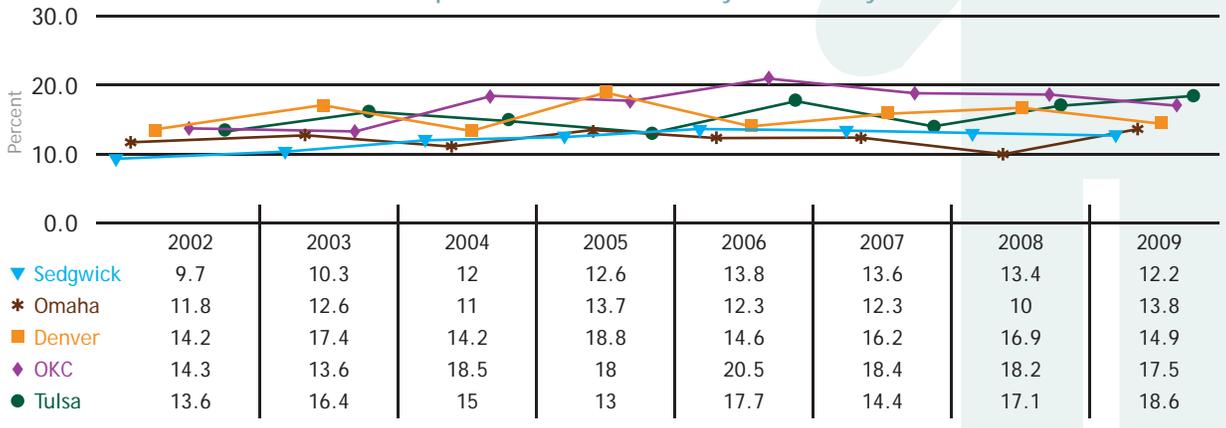
## How does Sedgwick County compare?

In the United States, 14.5 percent of adults report fair or poor health. In Kansas, 12.3 percent of adults report poor or fair health, which is higher than Sedgwick County at 12.2 percent.

Over the past 8 years there has been an increase in the number of adults reporting fair or poor health status in Sedgwick County.

*Other Metro Areas:  
Compared to regional peer metro areas, Sedgwick County currently has the lowest percentage of adults reporting fair or poor health status.*

Adults who Report Fair or Poor Health by Peer County and Year

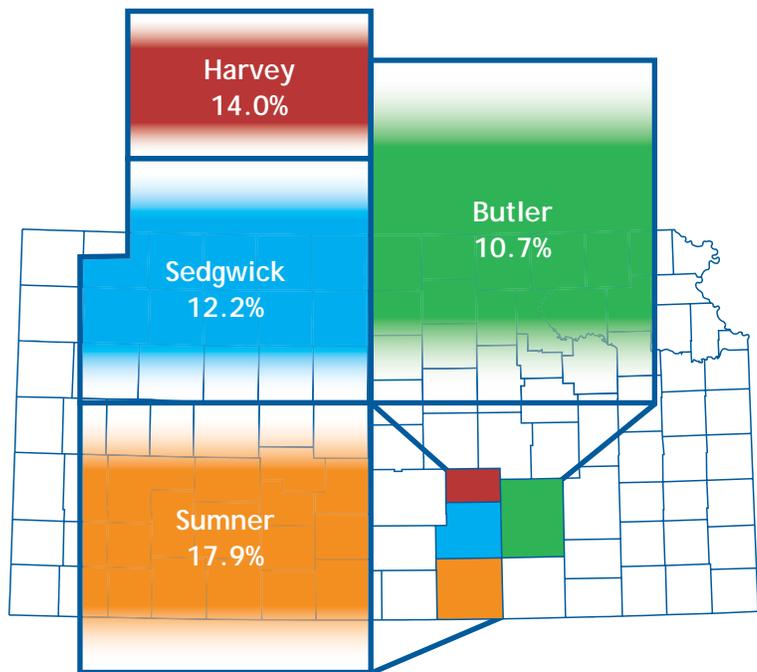


## Kansas Counties:

Compared to other counties in Kansas, Sedgwick County ranks 38th and is in the second highest quartile. Kiowa County has the best health outcome for this indicator and Wilson County has the lowest. This data uses seven years of data to generate a county estimate.

## Adult Fair or Poor Health Status in the Wichita Metropolitan Statistical Area (MSA)

- Butler 10.7%
- Harvey 14.0%
- Sedgwick 12.2%
- Sumner 17.9%



Source: 2009 BRFSS

# Leading Health Indicators

## 7.7 Motor Vehicle Crash Deaths

### Why is this important?

Motor vehicle crashes (MVC) are the leading cause of death among Americans age 5-34. More than 2.3 million adult drivers and passengers were treated in emergency departments as the result of being injured in motor vehicle crashes in 2009. The economic impact is also notable: the lifetime costs of crash-related deaths and injuries among drivers and passengers were \$70 billion in 2005.

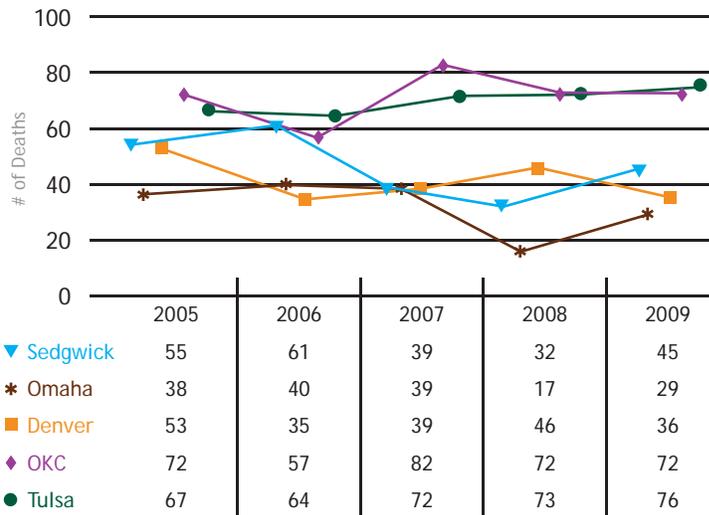
Distracted driving is a major cause for motor vehicle crashes, some resulting in death, in Sedgwick County and Kansas. Distracted driving is any activity that could divert a person's attention away from the primary task of driving. All distractions endanger driver, passenger, and bystander safety. These types of distractions include:

- Texting
- Using a cell phone or smartphone
- Eating and drinking
- Talking to passengers
- Grooming
- Reading, including maps
- Using a navigation system
- Watching a video
- Adjusting a radio, CD player, or MP3 player

But, because text messaging requires visual, manual, and cognitive attention from the driver, it is by far the most alarming distraction. The best way to end distracted driving is to educate all people about the danger it poses.

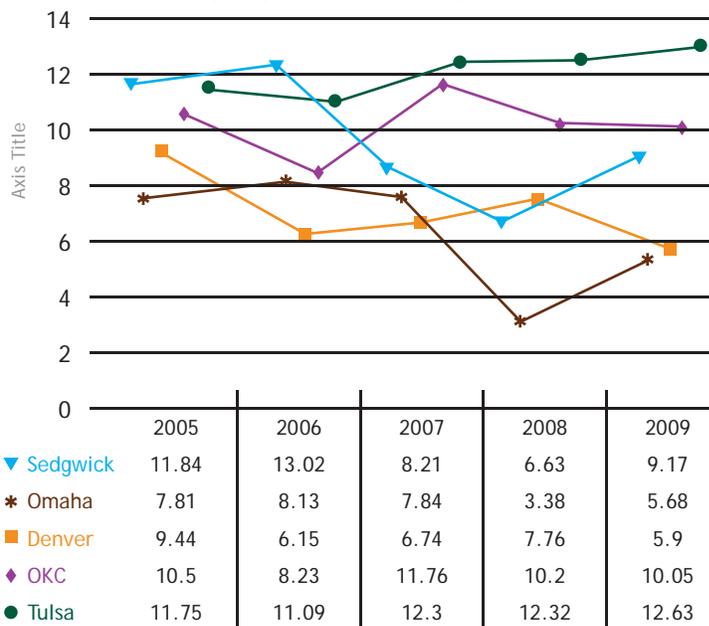
Source: CDC and NHTSB

MVC Fatalities by Regional Peer County and Year



Source: CDC and NHTSB

MVC Fatalities per 100,000 Population by Regional Peer County and Year



Source: CDC and NHTSB

# Motor Vehicle Crash Deaths

## How does Sedgwick County compare?

In 2009, the traffic fatality rate in the United States was 11.01 deaths per 100,000. In Kansas, there were 13.69 deaths per 100,000 people, which is higher than Sedgwick County at 9.17 percent.

Over the past 5 years, the traffic fatality rate in Sedgwick County has been decreasing.

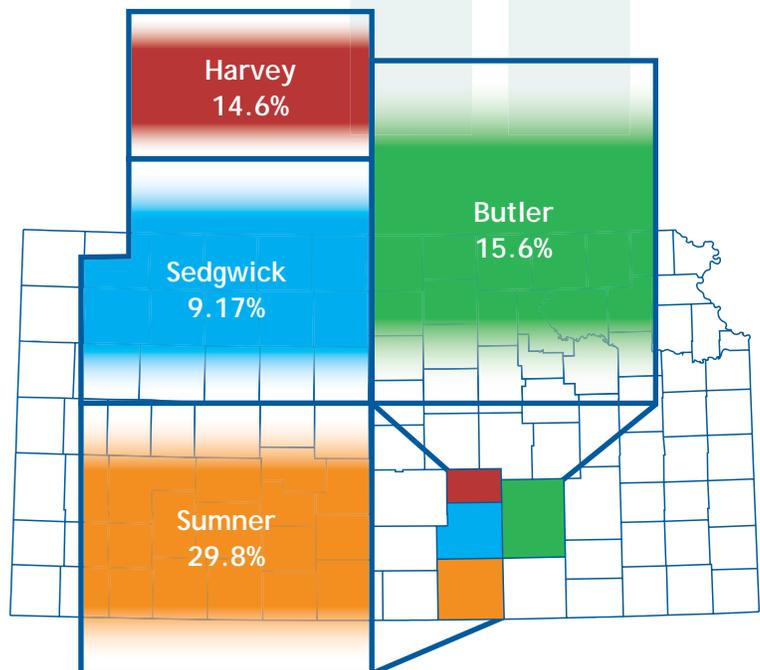
*Other Metro Areas:  
Compared five regional peer metro areas,  
Sedgwick County ranks third in MVC  
fatalities by year and MVC fatality rate.*

## Kansas Counties:

Compared to other counties in Kansas, Sedgwick County ranks 8th and is in the highest quartile. Johnson County has the best health outcome for this indicator and Stevens County has the worst.

## MVC Fatality Rates (per 100,000 population) in the Wichita Metropolitan Statistical Area (MSA)

● Butler	15.6%
● Harvey	14.6%
● Sedgwick	9.17%
● Sumner	29.8%



Source: NHTSA

# Leading Health Indicators

## 7.8 Mental Health

### Why is this important?

Mental health refers to the successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and cope with adversity. Mental health is essential to personal well-being, family and interpersonal relationships, and contribution to community or society. Mental illnesses are medical conditions that disrupt a person's thinking, feeling, mood, ability to relate to others, and daily functioning.

The burden of mental illness on health and productivity has long been underestimated. An estimated 26.2 percent of Americans age 18 and older, or about one in four adults, suffer from a diagnosable mental disorder in a given year. Left untreated, mental disorders can disrupt nearly every aspect of life, including education,

careers, social relationships (including marriage), health habits and drug and alcohol use. This is supported by the data presented in Table 7.8.2.

Although recovery from mental illness is possible, nearly two-thirds of all people with diagnosable mental disorders do not seek treatment. Delays in seeking treatment range from six years to more than 20 years, during which the disorder often worsens and becomes more disruptive. Stigma surrounding the receipt of mental health treatment is among the many barriers that discourage people from seeking treatment. Stigma leads others to avoid living, socializing, working with, or employing people with mental disorders. Research suggests that stigma may be reduced through education about the signs, symptoms and prevalence of mental illness.

*Source: KDHE Special Reports, Mental Illness and Stigma Status in Kansas: 2009 Behavioral Risk Factor Surveillance System*

**Table 7.8.1**  
Mental Illness Diagnoses in Sedgwick County and Kansas,  
Weighted Estimates for Adults Age 18 and older

	Sedgwick	Kansas
Percentage of Adults Who are EVER Diagnosed with <b>Depression</b>	17.9%	14.7%
Percentage of Adults Who are EVER Diagnosed with <b>Anxiety</b>	11.4%	10.3%

*Source: KDHE, BRFSS 2010*

These data provide a closer look at two mental illnesses.

- Respondents reported they had been told by a doctor that they have a depressive disorder (including depression, major depression, dysthymia, or minor depression). In 2010, it was estimated that 17.9 percent of adults age 18 and older in Sedgwick County had ever been diagnosed with *depression*.
- Respondents reported they had been told by a doctor that they have an anxiety disorder (including acute stress disorder, anxiety, generalized anxiety disorder, obsessive-compulsive disorder, panic disorder, phobia, posttraumatic stress disorder, or social anxiety disorder). In 2010, it was estimated that 11.4 percent of adults age 18 and older in Sedgwick County had ever been diagnosed with *anxiety*.

# Mental Health

**Table 7.8.2**  
Mental Illness Diagnoses in Sedgwick County, Weighted Percentages by Gender, Age, Education, Income and Disability

		Percentage of Adults EVER Diagnosed with Depression	Percentage of Adults EVER Diagnosed with Anxiety
GENDER	Men	13.5%	9.2%
	Women	22.0%	13.5%
AGE	18 to 44	16.8%	10.1%
	45 to 64	21.3%	13.8%
	65 and older	13.9%	10.2%
EDUCATION	High School Graduate or Less	20.1%	16.1%
	Some College or College Graduate	16.8%	9.2%
ANNUAL HOUSEHOLD INCOME	Less than \$35,000	27.0%	24.0%
	\$35,000 or Higher	14.4%	6.1%
DISABILITY	Living with a Disability	34.2%	25.6%
	Living without a Disability	12.1%	6.4%

Source: KDHE, BRFSS 2010

**Table 7.8.3**  
Percentage of Adults Who Reported Their Mental Health Was "Not Good" on 14 or More Days in the Past 30 Days

GENDER	Men	6.4%
	Women	10.9%
AGE	18 to 44	9.5%
	45 to 64	9.1%
	65 and older	5.3%
RACE/ETHNICITY	Hispanic	8.0%
	White	8.8%
	Black	15.0%
	Other	4.1%
	Multi-Race	*
EDUCATION	High School Graduate or Less	12.2%
	Some College or College Graduate	7.0%
ANNUAL HOUSEHOLD INCOME	Less than \$35,000	12.9%
	\$35,000 or Higher	6.9%

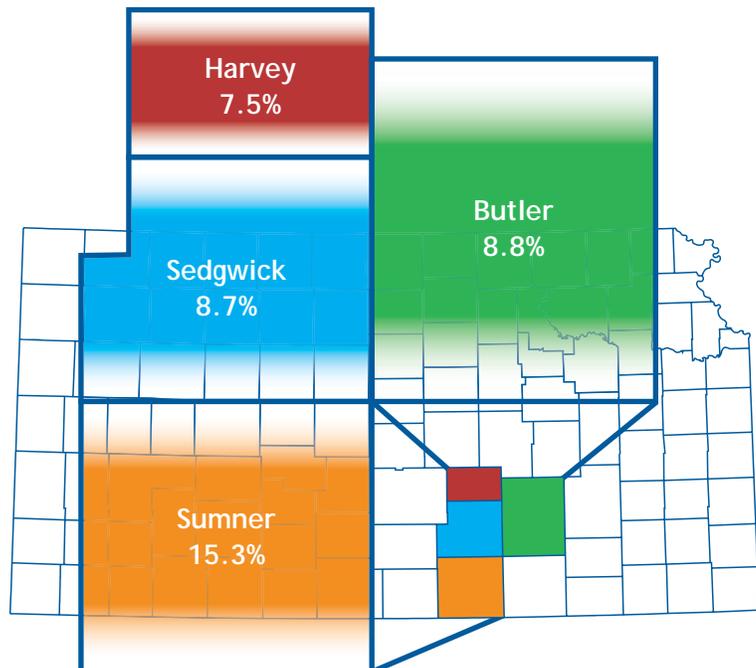
Source: BRFSS 2009

## How does Sedgwick County compare?

### Poor Mental Health in Wichita Metropolitan Statistical Area

Percent reporting "not good" mental health in 14 or more of the last 30 days

- Butler 8.8%
- Harvey 7.5%
- Sedgwick 8.7%
- Sumner 15.3%



Source: BRFSS 2009

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**Behavioral Risk Factor Surveillance System (BRFSS):** BRFSS is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Currently, data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam.  
<http://www.cdc.gov/brfss/>

**Campaign for Tobacco-Free Kids, "The Toll of Tobacco in Kansas",** July 2009.  
[http://www.tobaccofreekids.org/facts\\_issues/toll\\_us/kansas](http://www.tobaccofreekids.org/facts_issues/toll_us/kansas)

**Census Bureau (US), American Community Survey (ACS) One-year Estimates:** ACS is an ongoing survey that provides data every year, giving communities the current information they need to plan investments and services. Information from the survey generates data that help determine how more than \$400 billion in federal and state funds are distributed each year.  
<http://www.census.gov/acs/www/>

**Census Bureau (US), American FactFinder:** Factfinder is a web tool to help you find data about the United States, Puerto Rico and the Island Areas. The data in American FactFinder comes from several censuses and surveys.  
<http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

**Census Bureau (US), Current Population Survey (CPS) Annual Social and Economic Supplement (ASEC):** The CPS is administered by the Census Bureau using a probability selected sample of about 60,000 occupied households.  
<http://www.census.gov/did/www/sahie/about/faq.html#q3>

**Census Bureau (US), Small Area Health Insurance Estimates (SAHIE):** This program produces estimates of health insurance coverage for states and all counties. In July 2005, SAHIE released the first nation-wide set of county-level estimates on the number of people without health insurance coverage for all ages and those under 19 years old. In October 2011, SAHIE released 2008 and 2009 estimates of health insurance coverage by age, sex, race, Hispanic origin, and income categories at the state-level and by age, sex, and income categories at the county-level.  
[www.census.gov/did/www/sahie/](http://www.census.gov/did/www/sahie/)

**Census Bureau (2010, US Population and Housing Census):** The U.S. Census counts every resident in the United States. Census information affects the numbers of seats your state occupies in the U.S. House of Representatives. And people from many walks of life use census data to advocate for causes, rescue disaster victims, prevent diseases, research markets, locate pools of skilled workers and more.  
<http://2010.census.gov/2010census/>

**Centers for Disease Control and Prevention (CDC):** The CDC is one of the major operating components of the Department of Health and Human Services. CDC's Mission is to collaborate to create the expertise, information, and tools that people and communities need to protect their health - through health promotion, prevention of disease, injury and disability, and preparedness for new health threats.  
<http://www.cdc.gov/>

**Centers for Disease Control and Prevention (CDC),** Joyce A. Martin, M., Brady E. Hamilton, P., Paul D. Sutton, P., Stephanie J. Ventura, M., Fay Menacker, D. P., Sharon Kirmeyer, P., et al. (2009, January 7). National Vital Statistics Reports (Vol 57 Num 7), Births: Final Data for 2006.  
[http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57\\_07.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57_07.pdf)

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**Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS):** NCHS is the nation's principal health statistics agency, compiling statistical information to guide actions and policies to improve the health of Americans.  
<http://www.cdc.gov/nchs/>

**County Health Rankings:** This web site provides access to the 50 state reports, ranking each county within the 50 states according to its health outcomes and the multiple health factors that determine a county's health. Each county receives a summary rank for its health outcomes and health factors and also for the four different types of health factors: health behaviors, clinical care, social and economic factors, and the physical environment.  
<http://www.countyhealthrankings.org/>

**Healthy People (2010 and 2020):** Healthy People provides science-based, national goals and objectives with 10-year targets designed to guide national health promotion and disease prevention efforts to improve the health of all people in the United States.  
[http://www.cdc.gov/nchs/healthy\\_people.htm](http://www.cdc.gov/nchs/healthy_people.htm)

**Institute of Medicine.** 2004. Insuring America's Health. Washington, DC: National Academy Press, p. xi

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<http://www.kdheks.gov/hci/annsumm.html>

**Kansas Department of Health and Environment (KDHE), Kansas Information for Communities (KIC):** The KIC system gives users the chance to prepare their own queries for vital event and other health care data. The queries designed into this system will answer many health data requests. KIC programs allow you to generate your own table for specific characteristics, year of occurrence, age, race, Hispanic origin, sex, and county. Other information sources are also listed.  
<http://kic.kdhe.state.ks.us/kic/index.html>

**Kansas Department of Health and Environment (KDHE), Tuberculosis (TB) Program:** The KDHE TB program provides support to local public health agencies, private physicians, and health care facilities involved in the screening, diagnosis, and treatment of tuberculosis. The program works to prevent transmission of TB through treatment and education.  
<http://www.kdheks.gov/tb/>

**Kansas Department of Transportation (KDOT).** 2007 Kansas Traffic Accident Facts, County Summaries. Accessed from  
<http://www.ksdot.org/burtransplan/prodinfo/2007factsbook/County.pdf>

**Kansas State Department of Education (KSDE), Report Cards:** Report cards provide information for any county, organization (i.e. school district), or school in the state of Kansas. Among the information available are: school/district addresses, email addresses, homepage addresses, administrators, enrollment, dropouts, graduates, staff, vocational education enrollment, violence, crime, suspensions, expulsions, attendance rate, advanced science, advanced math, algebraic mastery, schedule, student improvement plans, staff development, student satisfaction, salaries, certified teachers, noncertified teachers, inclement weather dates, and accreditation information.  
<http://online.ksde.org/rcard/>

**"MyPlate" via US Department of Agriculture, Center for Nutrition Policy and Promotion.**  
<http://www.choosemyplate.gov/>

**National Cancer Institute (NCI):** NCI coordinates the National Cancer Program, which conducts and supports research, training, health information dissemination, and other programs with respect to the cause, diagnosis, prevention, and treatment of cancer, rehabilitation from cancer, and the continuing care of cancer patients and the families of cancer patients.  
<http://cancer.gov/>

**National Highway Traffic Safety Administration (NHTSA), National Center for Statistics and Analysis (NSCA):** NSCA is responsible for providing a wide range of analytical and statistical support to NHTSA and the highway safety community at large.  
[http://www-nrd.nhtsa.dot.gov/departments/nrd-30/ncsa/STSI/20\\_KS/2010/20\\_KS\\_2010.htm](http://www-nrd.nhtsa.dot.gov/departments/nrd-30/ncsa/STSI/20_KS/2010/20_KS_2010.htm)

**National Institutes of Health (NIH):** NIH is a part of the U.S. Department of Health and Human Services is the nation's medical research agency and consists of 27 different components called Institutes and Centers. Each has its own specific research agenda.  
<http://nih.gov/>

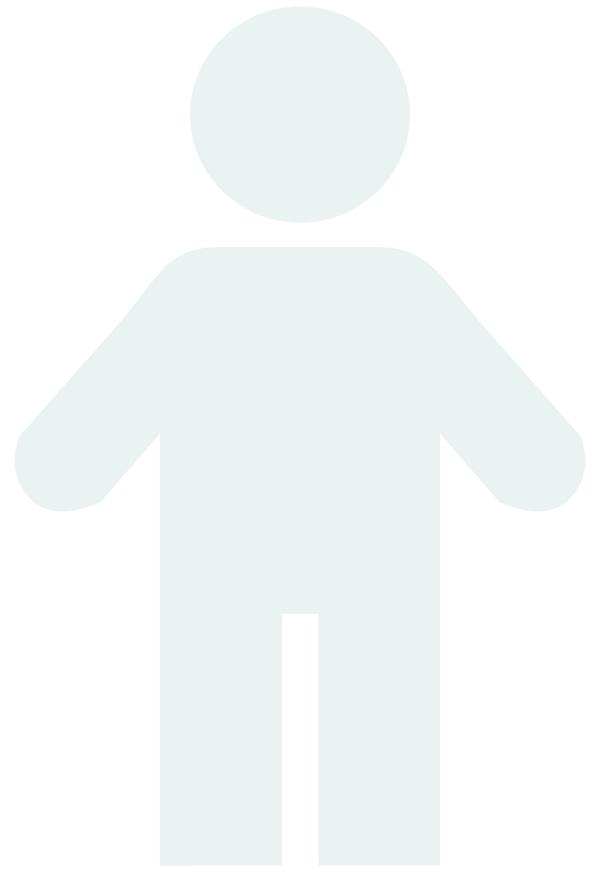
**Selected Metropolitan/Micropolitan Area Risk Trends (SMART) BRFSS:** Using BRFSS data, SMART BRFSS analyzes the data of selected metropolitan and micropolitan statistical areas with 500 or more respondents. This data can be used to identify emerging health problems, establish and track health objectives, and develop and evaluate public health policies and programs.  
<http://apps.nccd.cdc.gov/BRFSS-SMART/>

**Trust for America's Health, "F as in Fat: How Obesity Threatens America's Future", 2011.**  
<http://www.rwjf.org/files/research/fasinfat2011.pdf>

**US Department of Agriculture (USDA), School Meals Eligibility Manual:** This resource contains information on determining eligibility for free and reduced price meals for the National School Lunch Program (including commodity schools and the After School Snack Program); and the School Breakfast Program. It is also applicable to the Special Milk Program for Children when schools and institutions serve free milk to eligible children. While this eligibility guidance directly addresses the school programs, it is also generally applicable to the Child and Adult Care Food Program and the Summer Food Service Program when individual children's eligibility must be established. These programs are collectively considered the Child Nutrition Programs.  
<http://www.fns.usda.gov/cnd/guidance/default.htm>

**USA Today Diversity Index:** The Index was created in 1991 to measure how racial and ethnically diverse a population is. It uses the percentage of each race county by the federal government -- white, black, Asian, American Indian, Native Hawaiian -- and each ethnicity -- Hispanic or non-Hispanic -- to calculate the change that any two people are from different groups. The result ranges from 0 (no diversity) to 100.  
<http://www.usatoday.com/news/nation/census/county-by-county-diversity.htm>

*If you have questions*  
about community health data, please call  
our community health assessment coordinator  
at 316-660-7335 for more information.



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