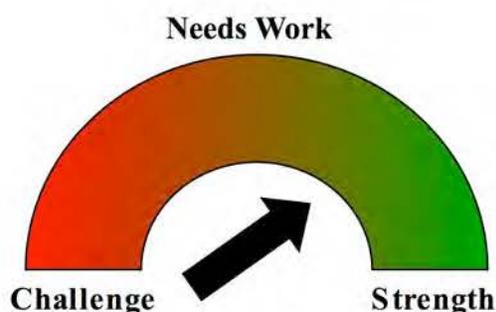


Mason County Community Health Report Card 2009-2010



Did You Know?

- A quarter of Mason County adults smoke cigarettes despite it being the #1 cause of preventable death in the United States.
- Only a third of Mason County infants, ages 19 to 35 months, are fully immunized, which offers protection from potentially life-threatening diseases.

The Good News is...

- 2/3 of Mason County adults get a recommended amount of physical activity.
- Mason County has a higher rate of healthy, full-term babies born, compared to Washington's average.
- All of the Mason County restaurants inspected in 2008 met safe food preparation standards.

It takes ***all*** of us to make Mason County healthy... YOU can help!

Mason County Public Health

Always Working for a Safer and Healthier Mason County

www.co.mason.wa.us



Mason County Board of Health

Dear Neighbors,

Mason County Public Health is pleased to present to you this publication, *Mason County Community Health Report Card – 2009 - 2010*. This is our first look at some of the indicators that determine how healthy we are as a community. We will be updating and adding to this document as new data becomes available. We will use this information to guide our priorities and evaluate how well we, as a community, are doing in improving our health and quality of life.

Mason County Public Health reports to the Mason County Board of Health. RCW 70.05 mandates that the local board of health “shall have supervision over all matters pertaining to the preservation of the life and health of the people within its jurisdiction...” Inherent in this mandate is the use of data to determine how healthy we are as a Mason County community. To determine public health policy and to set priorities around activities necessary to improve the public’s health, it is important to know the current status of our health. How do we compare to the State and other counties with similar characteristics? How close are we to meeting the national public health goals laid out in *Healthy People 2010*, or in State public health goals?

The assessment work needed to publish the *Mason County Community Health Report Card – 2009 - 2010* was substantial. We have limited resources so we want to assure we spend time and effort on the priority health issues. The key health indicators included in this publication demonstrate that, while we are doing fairly well in some areas, there is much room for improvement.

Mason County is a premier place to live, with the beauty of its natural resources and its strong community spirit. Dedicated individuals, organizations, and governments are all necessary to maintaining and enhancing the health and vitality of all residents.

We hope this document will help focus limited resources, instigate new partnerships, and create a county where people will flourish. Public health refers to actions society takes to protect the community as a whole. Our goal is for Mason County to be a community in which people can live healthy, productive lives and where people work together to positively change areas of concern.

The Mason County Board of Health and Mason County Public Health look forward to working with you, our neighbors, to preserve, sustain, and improve the quality of life in Mason County.

Sincerely,

A handwritten signature in black ink that reads "Ross Gallagher".

Ross Gallagher, Chair – 2009
Mason County Board of Health

MASON COUNTY PUBLIC HEALTH

VISION: A Healthy Mason County

MISSION: Promote health in Mason County through education, prevention, protection, and preparedness.

From the Director:

Welcome to our first Mason County Community Health Report Card. This document will remain a living document and will be updated as new data become available. In the future, additional key health indicators may be included when the public health system is able to collect data about them. The goal of this publication both now and in the future is to inform and guide public health policy and community action.

We are very fortunate in Mason County to have both citizens and organizations, as well as government, willing to work collectively to create a healthier Mason County. Public Health cannot achieve improved health status alone. It takes all of us working together to improve health. We all have key roles to play.

Public Health is an essential service guaranteed to all Washington residents. The work of Mason County Public Health is to help communities be safe and healthy.

What do public health agencies do?

- **Essential programs for improving health:** Programs such as communicable disease prevention, chronic disease prevention, and children and family early intervention programs help individuals and communities stay healthy.
- **Information that works:** Education and training programs on everything from infant mortality to healthy aging, information on community health trends, and statewide health and safety information provide individuals and communities with information they can use to make good decisions.
- **Protecting you and your family every day:** Services such as drinking water, clean indoor air, recreational water quality monitoring, septic system inspections, restaurant inspections, disease prevention, and emergency planning ensure individual and community health and safety.

We hope this publication will provide information that works to inform and guide all of us in making good public health decisions and establishing priorities that will improve the public's health. I want to thank every person and organization that works to improve the health and the quality of life in Mason County each and every day. I look forward to building on the relationships that currently exist and forging new relationships and partnerships as we work together towards a healthier Mason County.

Sincerely,



Vicki Kirkpatrick, Director
Mason County Public Health

Acknowledgements

This report card is modeled after Island County Health Department's "Health of Island County: Key Indicators Update 2005." Thanks to the University of Washington Masters of Public Health students in the class of 2008-09 for completing the legwork for this project. Mason County Public Health would also like to thank the many individuals and organizations that supported and contributed to this report.

Funding and Vision

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Commissioner Tim Sheldon

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Introduction

The Mason County Community Health Report Card is a tool designed to help Mason County service providers and citizens understand the community's overall health status as well as measure the effectiveness of community interventions to address priority areas. The report card is organized into 15 priorities or "health indicators." These indicators were selected because 1) they represent major threats to human health, 2) they have available data to measure progress, and 3) they have been identified as a priority by state and/or national public health authorities.

General Health Status, Economic Health, and Social Capital are included because of the growing body of research showing that an individual's social, economic, and cultural position influences his or her health outcomes. These "social determinants of health" affect an individual's exposure to chronic stress, healthy or risky behaviors, environmental exposures, and access to resources that protect good health. In order to eliminate health inequities, these indicators need to be addressed and evaluated.

Physical Activity and Nutrition, Overweight and Obesity, Tobacco Use, Substance Abuse, Responsible Sexual Behavior, Mental Health, Injury and Violence, Environmental Quality, and Immunization are all included because they are the leading indicators for promoting health and preventing disease, according to the Healthy People (HP) 2010 initiative (developed by US Department of Health and Human Services). HP 2020 objectives are currently in development and will be reflected in this report once they become available.

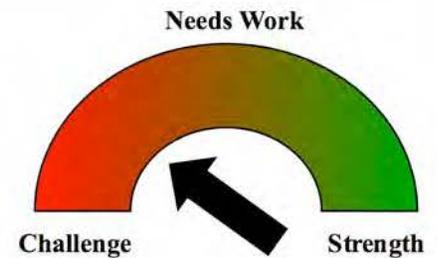
Maternal and Child Health and Oral Health are included as indicators because they are priorities of the Washington State Department of Health and one of the few programs in which local public health departments, including Mason County, still provide direct services. Investing in the health of pregnant women, infants, children, and adolescents will result in healthier, more productive adults. Promoting good oral health in these populations is critical to their overall well-being and success.

Each indicator page includes a brief narrative of why it is critical to community health and is graded on whether local measures meet corresponding Healthy People 2010 goals, if available. If none of the local measures met the HP 2010 goals, the indicator was designated as a Challenge. If at least one, but not all local measures met the HP 2010 goals, the indicator was designated as Needs Work. If most or all of the local measures met the HP 2010 goals, the indicator was designated as a Strength. If there was not a HP 2010 goal related to the indicator, it was ranked based on how close the local measures compare to the state measures. The long-term goal of this report is to move the needle towards Strength in *all* health indicators through collaborative efforts using best practice, sustainable intervention strategies.

Updated versions of the Mason County Community Health Report Card will be available at www.co.mason.wa.us.

General Health Status

Self-reported general health status is a measure of a person's physical, mental, and social well-being, and not merely the absence of disease. How people perceive their health and level of function is a strong predictor of life expectancy and ability to contribute to the community. Poor health affects people's ability to work, go to school, socialize with friends and family, or engage in community and political activities.



Income and education were the strongest predictors of self-reported health status. Adults living in households with incomes less than \$20,000 and those with less than a high school education were less likely to report that their health was good-to-excellent.

In Washington, people of American Indian/Alaska Native and Hispanic origin were the least likely to report good-to-excellent health when compared to non-Hispanic white, African American, and Asian adults. The demographics of Mason County includes 3.6% American Indian/Alaska Native origin and 6.2% Hispanic/Latino origin. (2)

National Healthy People 2010 Goal:

Increase the percentage of adults who have a high school degree or GED to 90%. (3)

Local Measures:

- Between 2005 and 2007, 81.8% of Mason County adults described their health as being good-to-excellent, compared to 86.7% in WA. (1)
- In 2007, 33% of Mason County adults earned less than \$25,000/year, compared to 18.7% statewide. (1)
- In 2007, 88.7% of Mason County adults had a high school degree or GED, compared to 92.9% in WA. (1) **Healthy People 2010 Goal Not Met**

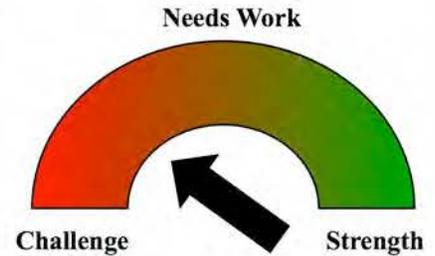
Community Resources:

Mason Matters, Private Providers, Local Hospitals, ESDs/Public Schools, Public Health, Civic Groups, Faith-Based Groups, Student Success Consortium, Mason County Literacy, Head Start/ECEAP Programs

Economic Health

A diverse economy leads to a healthier community. In Mason County the top 4 employment sectors are government (25%), retail (13%), manufacturing (13%), and construction (10%). (14) Significant poverty exists in some segments of the local population.

Poverty greatly impacts health status and well-being as it reduces individuals' ability to control aspects of their lives. Affordable, adequate housing also impacts health. Secure housing allows people to be ready to work or learn in school, have an increased sense of well-being, and decreased exposure to infectious and chronic diseases.



National Healthy People 2010 Goal:

Reduce the percentage of households experiencing food insecurity to 6% over a 12-month period. (3)

Local Measures:

Key Indicators	Mason County	WA
In 2006, per capita income (ranks 21 st among WA counties) (4)	\$27,807	\$38,212
In 2008, food stamp recipients (10)	158.40 per 1,000 people	126.43 per 1,000 people
In 2008, children in the Temporary Assistance for Needy Families (TANF) program (10)	115.86 per 1,000 people	87.81 per 1,000 people
In 2007, adults reporting that they 'sometimes' or 'often' ran out of food and had no money to buy more (1)	17.9 % experienced food insecurity	11% experienced food insecurity
In 2000, households that spent more than 30% of income on rent (4)	42.6%	41.5%
In 2000, persons living below the federal poverty level (4)	12.2%	10.6%

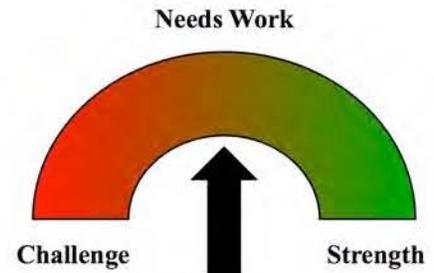
Healthy People 2010 Goal Not Met

Community Resources:

Economic Development Council, Shelton-Mason County Chamber of Commerce, North Mason Chamber of Commerce, Civic Groups, Work Source, Olympic College, Community Action Council, Mason County Housing Coalition, Mason County Shelter, Habitat for Humanity, Mason County Housing Authority, DSHS Programs, Local Food Banks, CHOICE Regional Health Network, Private Business Owners

Social Capital

Social capital is measured by social trust and participation in civic and social organizations. Communities that have inequitable distribution of wealth and privilege have less social trust among members and have poorer social capital. Strong social networks, where members share a sense of trust, mutual obligation, and support, are important to the health and happiness of community members. People who have strong social networks have been shown, in some cases, to be at lower risk of premature death.



National Healthy People 2010 Goal:

None available

Local Measures:

- In 2008, 69% of Mason County 8th grade students reported having adults they could talk to about something important, compared to 72% in WA. (5)
- In 2008, 56.9% of Mason County 8th grade students said there were opportunities in the community for pro-social involvement, compared to 66.6% in WA. (5)
- In 2008, 41.4% of Mason County 8th grade students had low attachment to the neighborhood where they lived, compared to 34.5% in WA. (5)
- In 2008, 25.76 out of 100 eligible Mason County residents were NOT registered to vote, compared to 27.54 per 100 in WA. (10)

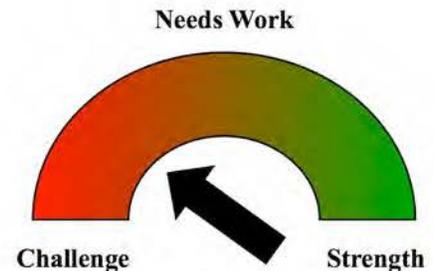
Community Resources:

Civic Groups, Political Organizations, Boys and Girls Club, Save Our Counties Kids (SOCK), City of Shelton Parks and Recreation, Mason County Parks Department, Public Schools, Faith-Based Groups, Timberland Regional Library, United Way, Volunteer Center of Lewis, Mason, and Thurston Counties, Girl and Boy Scouts, Skokomish Tribe, Squaxin Island Tribe

Access to Care

The quality of health care a community member receives depends on his or her ability to access health insurance coverage and a primary care physician.

Mason County is designated a geographic Health Professional Shortage Area (HPSA) because it lacks sufficient medical, dental, and mental health services to serve its population. As a result, many residents are forced to either leave the county or utilize the emergency department for routine primary care.



National Healthy People 2010 Goals:

- 1) Increase the proportion of people (65 and under) who have health insurance to 100%. (3)
- 2) Increase the proportion of adults who have a source of ongoing care (PCP) to 85%. (3)
- 3) Increase the percentage of pregnant women who receive prenatal care in the first trimester to 90%. (3)

Local Measures:

- Between 2007 and 2008, 74% of Mason County adults (18-64) had health insurance coverage, compared to 84% in WA. (8) **Healthy People 2010 Goal Not Met**
- In 2008, 93% of Mason County children (0-17) had health insurance coverage, compared to 95% in WA. (8) **Healthy People 2010 Goal Not Met**
- As of 2007-2008, 72% of Mason County adults had a primary care physician (PCP), compared to 79% statewide. (8) **Healthy People 2010 Goal Not Met**
- Between 2006 and 2007, 72% of Mason County women who gave birth received prenatal care starting in their first trimester, compared to 77% in WA. (8) **Healthy People 2010 Goal Not Met**

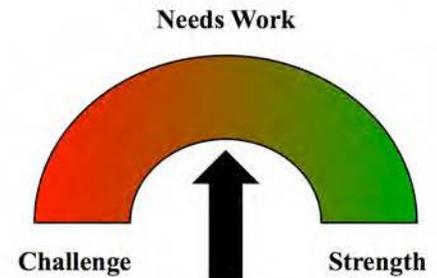
Community Resources:

Choice Regional Health Network, Private Medical, Dental, and Mental Health Providers seeing Medicaid and uninsured populations, Local Hospitals, Mason County Public Health, DSHS Programs, Mason County Transportation Authority, Paratransit

Physical Activity and Nutrition

A balanced diet and regular physical activity helps people maintain a healthy weight and enhanced quality of life. It also lowers the risk of many chronic diseases such as high blood pressure, heart disease, diabetes, and cancer.

In Mason County, the leading causes of death are cancer, heart disease and stroke. (7) Approximately 7% of the adult population has diabetes. (8)



Healthy People 2010 Goals:

- 1) Increase the proportion of adults who engage in regular (30+ min., 5 or more days/week), moderate physical activity to 50%. (3)
- 2) Increase the proportion of adolescents who engage in moderate physical activity (30+ min., 5+ days/week) to 35%. (3)
- 3) Increase daily intake of 2 or more servings of fruit to 75% for all age groups. (3)
- 4) Increase daily intake of 3 or more servings of vegetables to 50% for all age groups. (3)

Local Measures:

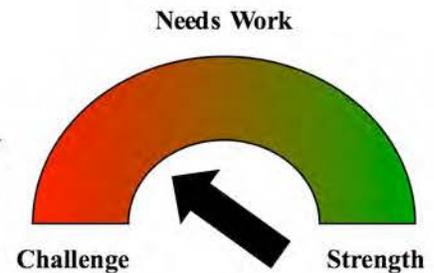
- In 2007, 67% of Mason County adults got a recommended amount of moderate physical activity (30+ min, 5+ days/week), compared to 62% in WA. (8) **Healthy People 2010 Goal Met**
- In 2008, 38% of Mason County 10th grade students participated in moderate physical activity (60+ min/day, 5+ days/week), compared to 44% in WA. (8) **Healthy People 2010 Goal Met**
- In 2007, 22% of Mason County adults consumed 5 or more fruits **and** vegetables daily, compared to 26% in WA. (8)
- In 2008, 32.2% of Mason County 8th grade students consumed 5 or more fruits **and** vegetables per day, compared to 28.1% in WA. (5)

Community Resources:

Shelton Parks and Recreation, Mason County Parks Department, Public Schools, WSU Extension Program, Mason General Hospital Diabetes Program, Mason County Public Health, Local Food Banks, Local Farmer's Market, Garden Raised Bounty (GRuB), Local Fitness Centers, Weight Loss Programs, Local Farmers, Senior Services of South Sound, Faith-Based Groups, Shelton Senior Center, Local Soup Kitchens, Community Action Council, Skokomish Tribe, Squaxin Island Tribe

Overweight and Obesity

Over the past three decades, obesity has increased significantly in the United States. Overweight or obese individuals are at increased risk of chronic diseases such as Type II diabetes, hypertension, heart disease, coronary artery disease, and some types of cancers. Today, obesity ranks as the second leading cause of *preventable* death.



Body Mass Index (BMI) is frequently used to measure a healthy body weight range. BMI is calculated by dividing weight in kilograms by the square of height in meters. An adult with a BMI between 18.5 and 24 is considered to have a healthy body weight. Adults are considered overweight if their BMI is 25 or greater, and obese if their BMI is at or above 30. BMI and growth charts developed by the Centers for Disease Control and Prevention (CDC) are used to assess healthy body weight in youth.

National Healthy People 2010 Goals:

- Increase adults who have a healthy body weight to 60%. (3)
- Reduce the overweight and obesity rate in children and adolescents to 5%. (3)

Local Measures:

- As of 2007-2008, 65% of Mason County adults were overweight or obese, compared to 61% in WA. (8) **Healthy People 2010 Goal Not Met**
- In 2008, 35% of Mason County 10th grade students were considered overweight or obese, compared to 25% in WA. (8) **Healthy People 2010 Goal Not Met**

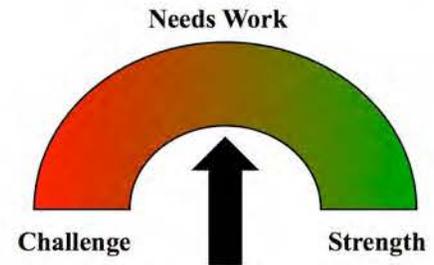
Community Resources:

Shelton Parks and Recreation, Mason County Parks Department, Public Schools, WSU Extension Program, Mason General Hospital Diabetes Program, Mason County Public Health, Local Fitness Centers, Weight Watchers, Skokomish Tribe, Squaxin Island Tribe

Tobacco Use

Tobacco use is the leading cause of preventable death in the United States. Over 440,000 people die each year from smoking, and an additional 38,000 people die from exposure to deadly secondhand smoke. (11)

High smoking rates have contributed to Mason County's distinction of having the second highest lung cancer mortality rate of all counties in Washington. (9)



National Healthy People 2010 Goals:

- 1) Reduce adult cigarette smoking rate to 12%. (3)
- 2) Reduce adolescent cigarette smoking rate to 16%. (3)
- 3) Increase the proportion of pregnant women who abstain from smoking while pregnant to 99%. (3)
- 4) Reduce the proportion of non-smokers exposed to environmental tobacco smoke to 56%. (3)

Local Measures:

- As of 2007-2008, 25% of adults in Mason County smoked cigarettes, compared to 16% in WA. (8)

Healthy People 2010 Goal Not Met

- In 2008, 22% of Mason County 10th grade students smoked cigarettes in the past 30 days, compared to 14% statewide. (8)

Healthy People 2010 Goal Not Met

- Between 2006 and 2007, 78% of Mason County women who gave birth abstained from smoking during pregnancy, compared to 90% statewide. (8)

Healthy People 2010 Goal Not Met

- In 2007, 10.1% of Mason County adults reported being exposed to environmental tobacco smoke in the workplace, compared to 9.3% in WA. (1)

Healthy People 2010 Goal Met

- In 2008, 29.4% of Mason County 8th grade students reported that smoking is allowed inside all or part of the home where they live, compared to 17.7% in WA. (5)

Healthy People 2010 Goal Met

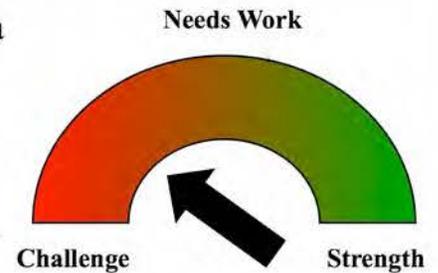
Community Resources:

ESDs/Public Schools, Mason County Public Health, Local Law Enforcement, WA ST Liquor Control Board, Skokomish Tribe, Squaxin Island Tribe, American Lung Association of WA, American Cancer Society, Students Against Destructive Decisions (SADD)

Substance Abuse

Alcohol and drug addiction contributes to many problems in a community, such as poor academic and work performance, crime, and higher rates of unintentional injury and death.

Alcohol is most frequently abused because it is legal, accessible, and socially acceptable. Binge drinking can be an indicator of alcohol abuse and is defined, in this report, as 5 drinks for men and 4 drinks for women on at least one occasion in the last 30 days.



National Healthy People 2010 Goals:

- 1) Increase adolescents, ages 12-17, who are *not* using *alcohol* or *illicit drugs* to 91%. (3)
- 2) Reduce drug-induced deaths to 1.2 per 100,000 population. (3)
- 3) Reduce adult binge-drinking to 13.4%. (3)
- 4) Reduce alcohol-related motor vehicle deaths to 4.8 per 100,000 population. (3)

Local Measures:

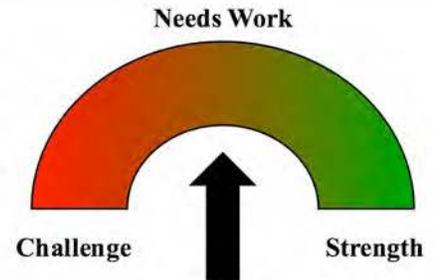
- In 2008, 63% of Mason County 10th grade students were **not** using alcohol, compared to 68% in WA. (8) **Healthy People 2010 Goal Not Met**
- In 2008, 87.6% of Mason County 8th grade students were **not** using illicit drugs, compared to 90.9% in WA. (5) **Healthy People 2010 Goal Not Met**
- Between 2003 and 2005, Mason County's drug-induced death rate was 20 per 100,000, compared to 13 per 100,000 in WA. (9) **Healthy People 2010 Goal Not Met**
- As of 2007-2008, 14% of Mason County adults reported binge-drinking, compared to 16% in WA. (8) **Healthy People 2010 Goal Not Met**
- In 2007, 75% of traffic fatalities in Mason County were alcohol-related, compared to 41% in WA. (10) **Healthy People 2010 Goal Not Met**

Community Resources:

Interagency Group, Mason County Drug Abuse and Prevention, ESDs/Public Schools, Behavioral Health Resources, Providence St. Peter's Chemical Dependency Center, Alcoholic's Anonymous, Skokomish Tribe, Squaxin Island Tribe, Students Against Destructive Decisions (SADD), First Responders

Responsible Sexual Behavior

Sexually transmitted infections (STIs) can cause serious medical and reproductive health problems. The long-term complications of STIs are an economic burden to society, costing an estimated 1/2 billion dollars for bacterial STIs in Washington annually. (9) STIs are associated with risky sexual behavior and are highly preventable. Education, early detection, and treatment efforts are recommended to reduce infectious disease rates in a community.



National Healthy People 2010 Goals:

- 1) Reduce the chlamydia rate among people 15-24 to 3,000 per 100,000 population. (3)
- 2) Increase the number of adolescent females who have had formal reproductive health education on abstinence to 88%, and birth control methods to 73%. (3)
- 3) Increase the number of adolescent males who have had formal reproductive health education on abstinence to 85%, and birth control methods to 70%. (3)

Local Measures:

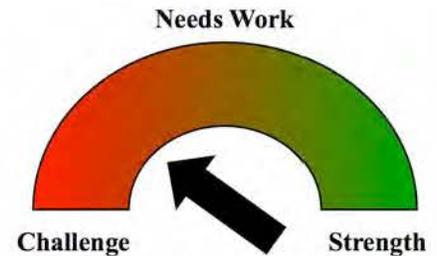
- Between 2007 and 2008, Mason County's reported chlamydia infection rate for women, 15-24, was 2,275 per 100,000, compared to 2,277 per 100,000 statewide. (8) **Healthy People 2010 Goal Met**
- In 2008, 35% of Mason County 10th grade students were taught in class that abstinence is a way to prevent pregnancy and sexually transmitted diseases, compared to 36.6% in WA. (5) **Healthy People 2010 Goal Not Met**
- In 2008, 27.7% of Mason County 10th grade students were taught in class about abstinence AND other ways to prevent pregnancy and sexually transmitted diseases, compared to 36.7% statewide. (5) **Healthy People 2010 Goal Not Met**

Community Resources:

Mason County Public Health, Public Schools, Planned Parenthood, Teen Council

Mental Health

The Surgeon General defines good mental health as the successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with adversity. There is a high association between poor mental health and incidences of crime, substance abuse, and homelessness.



National Healthy People 2010 Goals:

- Increase treatment for adults with recognized depression to 64%. (3)
- Reduce the age-adjusted suicide rate to 4.8 per 100,000. (3)
- Reduce suicide attempts by adolescents, grades 9-12, to 1.0 per 100,000. (3)

Local Measures:

- Between 2007 and 2008, 15% of Mason County adults reported 14 or more days of poor mental health in the past month, compared to 10% in WA. (8)
- Between 2003 and 2005, the age-adjusted suicide rate in Mason County was 15 per 100,000, compared to 13 per 100,000 in WA. (9) **Healthy People 2010 Goal Not Met**
- In 2008, 9.8% of Mason County 10th graders reported attempting suicide in the past 12 months, compared to 8.9% in WA. (5) **Healthy People 2010 Goal Not Met**

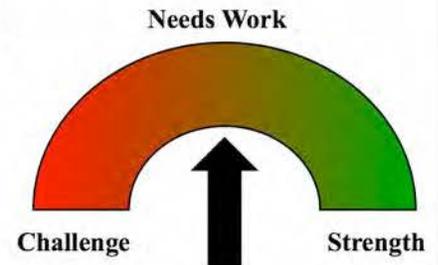
Community Resources:

BHR, Private Mental Health Providers, Capital Clubhouse, Crisis Clinic

Injury and Violence

Unintentional injury is the leading cause of death for children in the U.S. and in Mason County. Preventing injuries is far less expensive than treating injuries. For example, every child safety seat saves \$1,360 in direct medical costs. (9)

Domestic violence is a leading cause of injury and death in women. Children exposed to domestic violence are at risk for social, emotional, and cognitive problems, and perpetuating violent behavior as adults.



National Healthy People 2010 Goals:

- 1) Reduce deaths caused by motor vehicle crashes to a rate of 8.0 per 100,000 population. (3)
- 2) Reduce unintentional injuries in children to a rate of 9,000 per 100,000 population. (3)
- 3) Reduce the number of children found to be victims of maltreatment by state child welfare agencies to a rate of 10.2 per 1,000 population. (3)
- 4) Reduce the incidence of physical assault by intimate partners to a rate of 3.3 per 1,000 population. (3)

Local Measures:

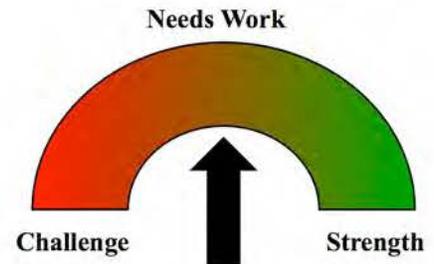
- Between 2003 and 2005, the Mason County motor vehicle death rate was 29 per 100,000 population, compared to 11 per 100,000 statewide. (9) **Healthy People 2010 Goal Not Met**
- Between 2006 and 2007, the Mason County childhood hospitalization rate for unintentional injuries was 280 per 100,000, compared to 207 per 100,000 in WA. (8) **Healthy People 2010 Goal Met**
- Between 2004 and 2006, the rate of Mason County children in accepted referrals to Child Protective Services (CPS) was 40 per 1,000 population, compared to 28 per 1,000 statewide. (9) **Healthy People 2010 Goal Not Met**
- Between 2003 and 2005, the reported domestic violence case rate in Mason County was 1,125 per 100,000, compared to 872 per 100,000 in WA. (9) **Healthy People 2010 Goal Not Met**

Community Resources:

Turning Pointe, Students Against Destructive Decisions (SADD), Center for Advocacy and Personal Development, Crime Victims Advocacy Network, Mason County Free Legal Aid, Mason County DUI/Traffic Safety Task Force, DSHS Programs, Mason County Public Health, Area Agency on Aging, First Responders

Environmental Quality

The goal of public health is to reduce the community's exposure to potential environmental hazards. This is accomplished by tracking disease trends and ensuring aspects of the environment, such as food, drinking water, and air quality, meet safety standards.



National Healthy People 2010 Goals:

- 1) Increase the proportion of persons whose community water systems meet safe drinking water standards to 95%. (3)
- 2) Increase the proportion of food service retailers who meet safe food preparation standards to 81% for fast food service retailers, and to 70% for full-service food retailers. (3)

Local Measures:

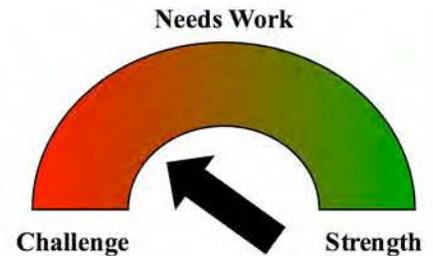
- In 2005, 70% of Mason County's Community Group A Systems and 63% of Community Group B Systems were in compliance with all state water quality standards. (7) **Healthy People 2010 Goal Not Met**
- In 2008, 100% of Mason County's permanent food establishments had less than 36 critical violation points when inspected, compared to 93% in WA. (8) **Healthy People 2010 Goal Met**
- In 2008, 76% of Mason County residents with on-site sewage failures took corrective action within 2 weeks, compared to 95% in WA. (8)

Community Resources:

Hood Canal Coordinating Council, WSU Extension Office, Mason County Public Health, Mason Conservation District

Immunization

Immunizations have led to a dramatic decline in the incidence of disability and death due to many infectious diseases. Immunizations are most effective when the majority of the public is vaccinated against a disease. Barriers to people becoming fully immunized may include access to care, tracking of immunization records, information sharing between providers, and anti-immunization sentiment in the media.



Child Profile, an immunization registry developed by Washington State Department of Health, is used by medical providers to store patient vaccine records and ensure immunization compliance. Local and state immunization compliance data is compiled using Child Profile.

National Healthy People 2010 Goals:

- 1) Increase the proportion of fully-immunized children, ages 19-35 months, to 80% (4-DTP, 3-Polio, 1-MMR, 3-Hib, 3-HepB, 1-Varicella, and 4-PCV). (3)
- 2) Increase the proportion of high risk adults (age 65+) who received an influenza vaccination *in the past 12 months* to 90%. (3)
- 3) Increase the proportion of high risk adults (age 65+) *who have ever* received a pneumococcal vaccination to 90%. (3)

Local Measures:

- In 2008, 39% of Mason County children, age 19 to 35 months, were fully immunized, compared to 42% in WA. (8) **Healthy People 2010 Goal Not Met**
- Between 2007 and 2008, 64% of Mason County adults, age 65 and over, had an influenza vaccination in the past 12 months, compared to 72% in WA. (8) **Healthy People 2010 Goal Not Met**
- In 2007, 63.3% of Mason County adults, age 65 and over, received a pneumococcal vaccination, compared to 70.9% statewide. (1) **Healthy People 2010 Goal Not Met**

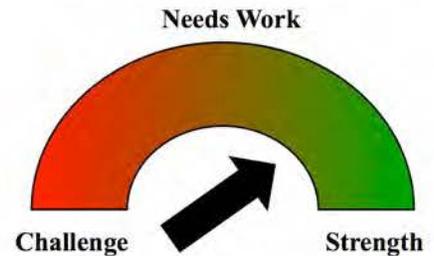
Community Resources:

Private Providers, Local Pharmacies, Mason County Public Health, Child Profile Immunization Registry, Public Schools, Childcare Providers, Head Start/ECEAP Program

Maternal & Child Health

Unintended pregnancies are associated with poor health outcomes in infants due to delayed prenatal care, poor maternal nutrition, cigarette use, stress, and domestic violence.

Unintended pregnancies cost Washington state taxpayers an estimated **\$145 million/year** for prenatal and delivery care. (9) This does not include expenses that occur after delivery, such as health insurance coverage and economic support.



National Healthy People 2010 Goals:

- 1) Increase planned pregnancy rates to 70%. (3)
- 2) Decrease adolescent pregnancies to 39 per 1,000 births. (3)
- 3) Reduce infant mortality to 4.5 per 1,000 live births. (3)
- 4) Reduce the overall low birth weight rate to 5%. (3)

Local Measures:

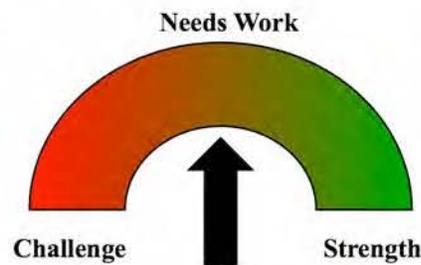
- In 2006, an estimated 46.7% of pregnancies in Mason County were planned, compared to 49.2% in WA. (15) **Healthy People 2010 Goal Not Met**
- Between 2006 and 2007, Mason County's rate of live infants born to women, ages 15-17, was 24 per 1,000, compared to 16 per 1,000 for WA. (8) **Healthy People 2010 Goal Met**
- Between 2001 and 2003, the infant mortality rate for Mason County was 4.2 per 1,000 live births, compared to 5.7 per 1,000 in WA. (6) **Healthy People 2010 Goal Met**
- Between 2006 and 2007, 4% of Mason County births were considered low birth weight, compared to 5% in WA. (8) **Healthy People 2010 Goal Met**

Community Resources:

Community Action Council, Mason County Public Health, Childcare Action Council, Head Start/ECEAP Programs, Family Education and Support Services, Private Providers

Oral Health

Oral health is an integral part of a person’s overall health and quality of life. Research shows that children with toothaches have more trouble concentrating and learning in school, more frequent “sick days” and poorer self-esteem. In adults, gum disease can increase risk of cardiovascular disease, stroke, pre-term labor, and low birth weight babies. Good oral health is achieved through a daily hygiene routine and regular visits to the dentist. Access to dental care was the top health concern identified by Mason County residents.



National Healthy People 2010 Goals:

- 1) Reduce the incidence of children (6-8 yrs) who have *experienced tooth decay* to 42%. (3)
- 2) Reduce the incidence of children (6-8 yrs) who have *untreated tooth decay* 21%. (3)
- 3) Increase the number of children (6-8 yrs) that have *protective dental sealants* to 50%. (3)

Local Measures:

- In 2007, 65.9% of Mason County residents surveyed said they had dental insurance, compared to 67.1% in WA. (1)
- In 2008, 56% of adults had seen a dental professional in the past 12 months, compared to 74% in WA. (8)

• In 2005:

Elementary School Children (Age 7-9)	Mason County (12)	WA (13)	HP 2010 GOAL
Decay Experience	60%	59%	Goal Not Met
Untreated Decay	10.9%	19.7%	Goal Met
Has Protective Dental Sealants	15%	44.8%	Goal Not Met

Community Resources:

Mason County Children’s Dental Coalition, Mason County Public Health, Private Dental Providers, School-Based Sealant Programs, Mason Community Dental Clinic, Thurston-Mason Dental Society

Appendix

The following tables compare Mason County's health data to five other WA counties. These counties are identified as "similar" to Mason County and are commonly used during contract negotiations for salary surveys. They are included in this report to be another point of reference when looking at local data.

Domain	Indicator	Mason	Jefferson	Island	G.Harbor	Clallam	Lewis
General	Good-to-Excellent Health Status (self-report)	82%	89%	89%	80%	86%	83%
General	Income less than \$25,000/year	33%	unavailable	15%	34%	28%	31%
General	Have a HS diploma or GED	89%	92%	97%	86%	92%	90%
Economic	Per Capita Income	\$27,807	\$38,004	\$33,750	\$26,793	\$29,267	\$26,638
Economic	Food Stamp Recipients (per 1000)	158.4	121.35	65.52	419.52	159.55	209.9
Economic	TANF-Child Recipients (per 1000)	115.86	85.74	34.82	153.01	117.36	120.01
Economic	Experienced Food Insecurity (no \$ for food)	18%	8%	6%	17%	9%	16%
Economic	Households who spend less than 30% of income on rent	43%	49%	40%	49%	46%	40%
Economic	Persons below federal poverty level	12%	11%	7%	16%	13%	14%
Soc. Capital	8th grade students who have adults to talk to about something important	69%	70%	67%	71%	74%	75%
Soc. Capital	8th grade students who say there are opportunities for community involvement	57%	73%	71%	67%	73%	65%
Soc. Capital	8th grade students who have low attachment to the neighborhood where they live	41%	43%	35%	48%	38%	36%
Soc. Capital	Eligible residents NOT registered to vote	26%	7%	22%	32%	17%	26%

Appendix (continued)

Domain	Indicator	Mason	Jefferson	Island	G.Harbor	Clallam	Lewis
Access to Care	Adults with health insurance	74%	76%	85%	74%	78%	76%
Access to Care	Children (0-17) with health insurance	93%	88%	87%	88%	93%	89%
Access to Care	Have a Primary Care Physician (PCP)	72%	77%	79%	74%	78%	77%
Access to Care	Pregnant women receiving prenatal care in 1st trimester	72%	75%	79%	68%	76%	78%
PA & Nutrition	Adults getting recommended moderate physical activity	67%	60%	71%	66%	59%	61%
PA & Nutrition	10th grade students getting recommended moderate physical activity	38%	57%	37%	52%	unavailable	50%
PA & Nutrition	Adults consuming 5 or more fruits and vegetables daily	22%	26%	27%	20%	24%	27%
PA & Nutrition	8th grade students consuming 5 or more fruits and vegetables daily	32%	33%	30%	26%	33%	25%
Overweight/Obesity	Adults who are overweight/obese	65%	56%	62%	64%	63%	72%
Overweight/Obesity	10th grade students who are overweight/obese	35%	24%	18%	29%	unavailable	30%
Tobacco Use	Adults who smoke	25%	31%	16%	24%	20%	19%
Tobacco Use	10th grade students who smoke	22%	14%	16%	18%	unavailable	16%
Tobacco Use	Women who abstain from smoking during pregnancy	78%	78%	87%	76%	79%	79%
Tobacco Use	Adults who are exposed to secondhand smoke in the workplace	10%	8%	31%	30%	38%	32%

Appendix (continued)

Domain	Indicator	Mason	Jefferson	Island	G.Harbor	Clallam	Lewis
Tobacco Use	8th grade students who say smoking is allowed inside their home	29%	unavailable	unavailable	unavailable	unavailable	unavailable
Substance Abuse	10th grade students not using alcohol	63%	67%	70%	68%	unavailable	66%
Substance Abuse	8th grade students not using illicit drugs	88%	unavailable	unavailable	unavailable	unavailable	unavailable
Substance Abuse	Rate of deaths that are drug-induced (per 100,000)	20	unavailable	unavailable	25	21	18
Substance Abuse	Adults that binge-drink	14%	19%	15%	23%	14%	15%
Substance Abuse	Rate of alcohol-related motor fatalities	75%	56%	60%	41%	50%	43%
Responsible Sexual Behavior	Reported chlamydia infections (per 100,000)	2,275	1,793	2,227	2,147	2,289	1,917
Responsible Sexual Behavior	10th grade students taught in class about abstinence	35%	unavailable	unavailable	unavailable	unavailable	unavailable
Responsible Sexual Behavior	10th grade students taught in class about abstinence & other ways to prevent pregnancy & STDs	28%	unavailable	unavailable	unavailable	unavailable	unavailable
Mental Health	Adults reporting 14 or more days of poor mental health in the past month	15%	unavailable	11%	12%	9%	13%
Mental Health	Age-adjusted suicide rate (per 100,000)	15	unavailable	11	15	24	21
Mental Health	10th grade students who attempted suicide in past 12 months	10%	3%	11%	8%	unavailable	9%
Injury & Violence	Motor vehicle death rate (per 100,000)	29	unavailable	13	16	22	16
Injury & Violence	Childhood unintentional injury hospitalizations (per 100,000)	280	208	181	214	248	249

Appendix (continued)

Domain	Indicator	Mason	Jefferson	Island	G.Harbor	Clallam	Lewis
Injury & Violence	Children in accepted referrals to CPS (per 100,000)	40	29	32	57	32	31
Injury & Violence	Reported domestic violence case rate (per 100,000)	1,125	820	unavailable	897	891	961
Env. Quality	Water systems in compliance with water quality standards	70% group A, 63% group B	unavailable	unavailable	unavailable	unavailable	unavailable
Env. Quality	Permanent food establishments with less than 36 critical violation points	100%	100%	unavailable	94%	88%	100%
Env. Quality	Residents with onsite sewage failures taking corrective action within 2 weeks	76%	83%	unavailable	100%	100%	53%
Immunization	Children, age 19-35 months, fully immunized	39%	38%	26%	56%	43%	52%
Immunization	Adults, 65 and over, who had an influenza vaccination in the past 12 months	64%	71%	73%	69%	72%	66%
Immunization	Adults, 65 and over, who have received a pneumococcal vaccination	63%	67%	78%	63%	76%	62%
Maternal/Child Health	Pregnancies that are planned	47%	46%	55%	46%	47%	47%
Maternal/Child Health	Youth pregnancy rate, age 15-17(per 1000)	24	unavailable	8	22	13	19
Maternal/Child Health	Infant mortality rate (per 1000 live births)	4	unavailable	7	8	4	6
Maternal/Child Health	Babies born with a low birth weight	4%	4%	4%	5%	4%	4%

Appendix (continued)

Domain	Indicator	Mason	Jefferson	Island	G.Harbor	Clallam	Lewis
Oral Health	Residents who have dental insurance	66%	48%	54%	48%	52%	55%
Oral Health	Adults who have seen a dentist in past 12 months	56%	62%	71%	60%	69%	63%
Oral Health	Children who have 1) decay experience 2) untreated decay 3) dental sealants	1) 60% 2) 11% 3) 15%	unavailable	unavailable	unavailable	unavailable	unavailable

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- (3) <http://wonder.cdc.gov/data2010/focus.htm>
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- (5) <http://www.askhys.net/layout.asp?page=reports/FactSheets> (WA Healthy Youth Survey 2008)
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- (7) <http://www.masonmatters.org/ds2006.htm>
- (8) <http://www.doh.wa.gov/PHIP/khi/lphi/indicator.htm>
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- (11) <http://www.cdc.gov/tobacco/>
- (12) Mason County Smile Survey 2005, Mason County Public Health
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