

# The Health of Kittitas County



December 2009



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In 2007, Kittitas County Public Health Department published a Key Health Indicator Report covering 48 indicators in seven categories. In 2008, an additional report was published that focused on key indicators for Environmental Health. This year the reports have been combined and are presented here as “The Health of Kittitas County.”



Dr. Mark W. Larson

The categories that were chosen, and the indicators selected within those categories, were chosen with care. Some of the indicators chosen can be directly impacted by the work done at Kittitas County Public Health Department, others cannot. In this report, we present indicators related to Health Care Access, Illness and Injury, Behavioral Risk Factors, Environmental Health, Maternal and Child Health, and Social and Mental Health.

Most of the indicators have data at the county, state, and national level. Some do not. A few have no data at all because a reliable source for data does not exist. When choosing the indicators, a reliable source of data was given high importance, but in some cases an indicator was selected even without a data source because it was deemed so important that we should work towards the creation of one. Childhood immunization rates are a good example of an indicator without a data source. It is important to remember that we do not have good estimates of childhood immunization rates.

You will see both the most recent data available and the data presented in 2007 for each indicator. What you will *not* see is any comparison between the two available data sets. In order to compare data over time, it is useful to have at least a few years of data. Typically about five datasets should be presented before predicting trends. Once an acceptable amount of data has been collected, we will present trended data but we are still several years away from this capability. In the meantime, this report will be updated with the most recent data every two years.

You will also see a target for each indicator listed. In many cases this target is the Healthy People 2010 (HP 2010) goal which are national health objectives. When HP 2010 goals do not exist, local targets have been set.

We hope that you will join us in our quest for a safer and healthier Kittitas County and that “The Health of Kittitas County” is useful to you in this mission.

Sincerely,

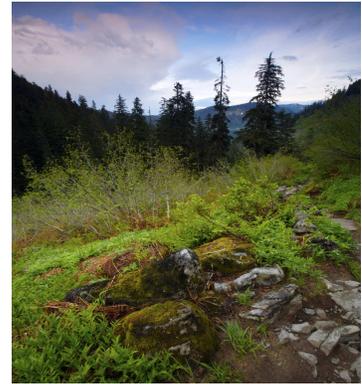
A handwritten signature in black ink that reads "Mark W. Larson M.D." The signature is written in a cursive, flowing style.

Mark W. Larson, M.D., Kittitas County Health Officer

*For more information or extra copies of this report, please contact the Kittitas County Public Health Department's Community Health Assessment Division at [communityassessment@co.kittitas.wa.us](mailto:communityassessment@co.kittitas.wa.us), (509) 962-7515, or by mail at 507 N. Nanum St. Suite 102, Ellensburg, WA 98926.*

*To view this report online visit <http://www.co.kittitas.wa.us/health/assessment.asp>.*

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# Medical Access



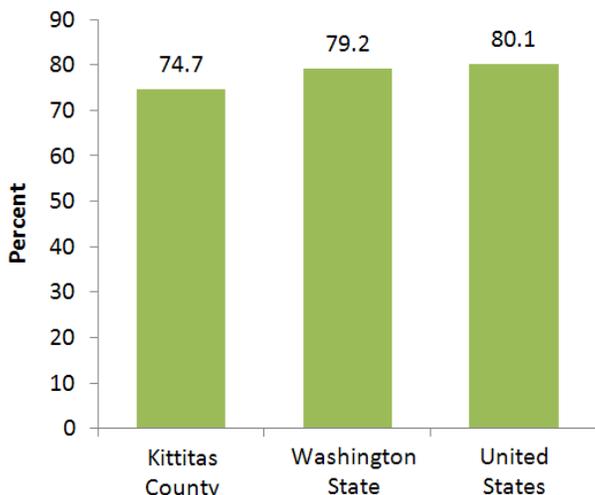
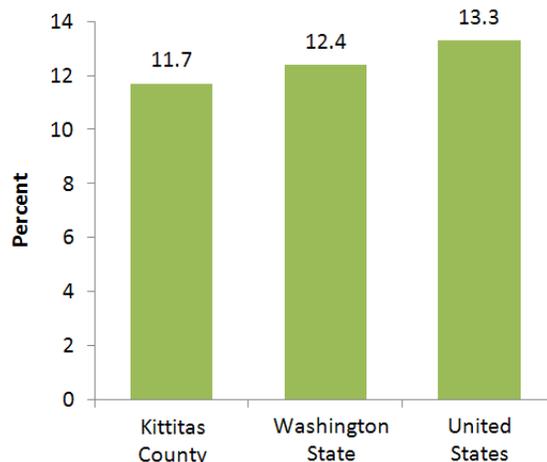
Regular access to a medical professional allows chronic health conditions to be better managed and can help prevent minor medical issues from turning into medical emergencies. One of the main goals of proposed health care reform is to improve access to medical care.

## Adult Unmet Medical Need

This indicator measures the **percentage of adults reporting unmet medical needs due to cost**. Kittitas County **did not meet the HP 2010 goal** in 2006 when 11.7% of adults reported unmet medical need due to cost.<sup>1</sup> Statewide, 12.4% of adults reported unmet medical need compared to 13.3% nationally.<sup>1</sup>

In 2004, 16.3% of adults in Kittitas County reported unmet medical need due to cost compared to 14.1% statewide and 13.4% nationally.<sup>1</sup>

**Target: 7%**



## Adult Medical Home

Adults with a medical home are more likely to access preventive care services and will be better able to manage chronic health conditions.

This indicator measures the **percentage of adults who have a personal health care provider**. Kittitas County **did not meet the HP 2010 goal** in 2007 when 74.7% of adults had a personal health care provider.<sup>1</sup> Statewide, 79.2% of adults had a personal health care provider compared to 80.1% nationally.<sup>1</sup>

**Target: 85%**

In 2006, 78.2% of adults in Kittitas County had a personal health care provider compared to 78.1% statewide and 80.0% nationally.<sup>1</sup>

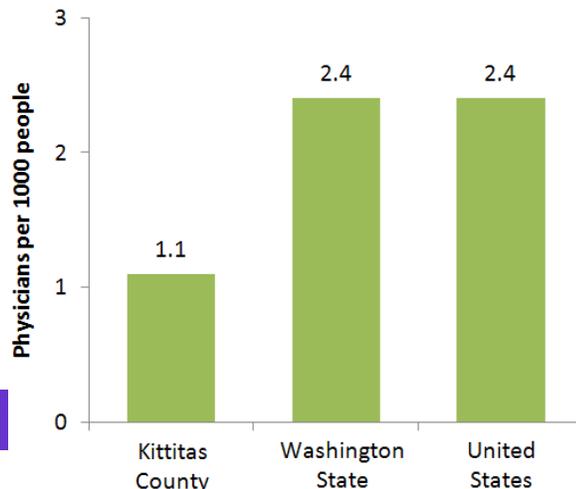
## Physician to Population Ratio

The physician to population ratio describes how many physicians there are per person in a community. A lower physician to population ratio means there are fewer physicians available. In this case it might be difficult for patients to find a physician.

This indicator measures the **physician to population ratio**. Kittitas County **did not meet the HP 2010 goal** in 2007 with 1.1 physicians for every 1000 people.<sup>2</sup> Statewide and nationally there were 2.4 physicians for every 1000 people.<sup>2</sup>

In 2006, there were 1.0 physicians for every 1000 people in Kittitas County compared to 2.4 for every 1000 people statewide and nationally.<sup>2</sup>

**Target: 3 per 1000**



One of the largest determining factors in obtaining medical care is health insurance. With the rising cost of medical care, the importance of health insurance is increasing. Medicare, Medicaid, and the Children's Health Insurance Plan (CHIP) are federal programs that help low income families and older adults obtain medical care.

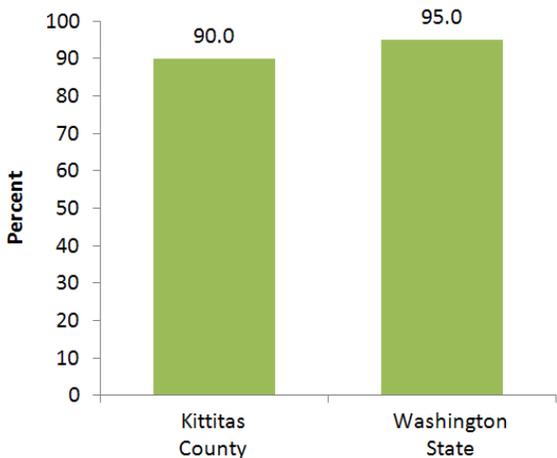
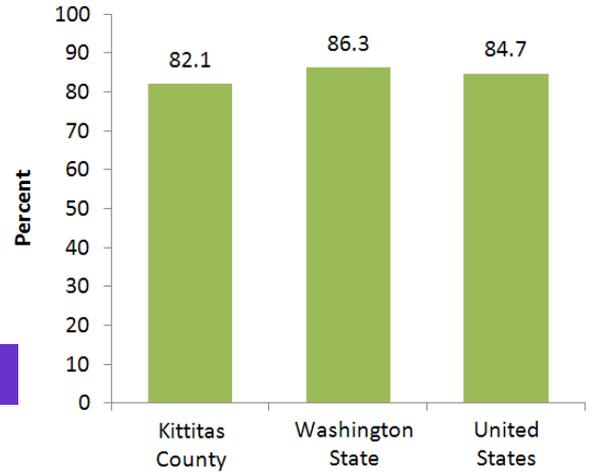


## Adult Health Insurance

This indicator measures the **percentage of adults who have health care insurance**. This includes those who have prepaid plans and/or government plans. Kittitas County **did not meet the HP 2010 goal** in 2007 when 82.1% of adults reported having health care insurance.<sup>1</sup> Statewide, 86.3% of adults had health insurance compared to 84.7% nationally.<sup>1</sup>

In 2006, 83.6% of adults in Kittitas County had health insurance compared to 85.6% statewide and 84.4% nationally.<sup>1</sup>

**Target: 100%**



## Youth Health Insurance

Children with health insurance are more likely to visit the doctor for well-child visits to ensure proper growth and development, and are more likely to seek medical treatment when ill.

This indicator measures the **percentage of youth who have health care insurance**. This includes those who have prepaid plans and/or government plans. Kittitas County **did not meet the HP 2010 goal** in 2008 when 90.0% of youth had health care insurance.<sup>3</sup> Statewide, 95.0% of youth had health insurance.<sup>3</sup> National data is not available.

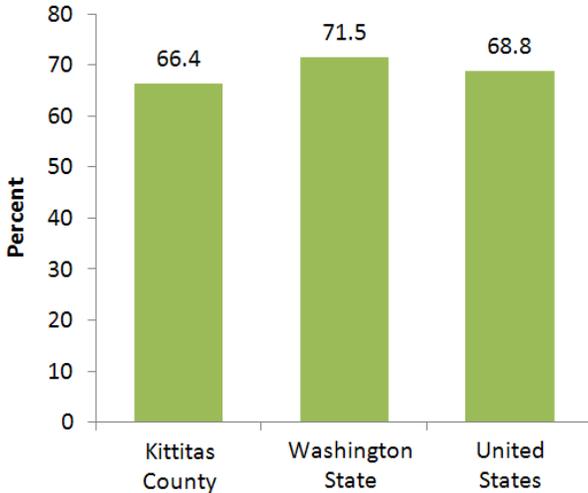
**Target: 100%**

Data prior to 2008 is not available at the county, state, or national level.

# Dental Visits



Dental visits are a telling measure of medical access. Many health insurance plans include medical coverage but do not cover dental care, leaving people on their own to find dental coverage or pay out of pocket for expenses. Annual dental visits are important for regular cleanings and screenings for cavities and gum disease.



## Adult Annual Dental Visit

This indicator measures the **percentage of adults who have visited a dentist in the last 12 months for any reason**. Kittitas County **met the HP 2010 goal** in 2006 when 66.4% of adults reported a dental visit in the previous 12 months.<sup>1</sup> Statewide, 71.5% of adults reported a dental visit compared to 68.8% nationally.<sup>1</sup>

In 2004, 59.0% of adults in Kittitas County reported a dental visit in the previous 12 months compared to 70.1% statewide and 69.6% nationally.<sup>1</sup>

**Target: 56%**

## To Maintain Good Oral Health

- Drink fluoridated water and use a fluoride toothpaste.
- Take care of your teeth and gums by brushing and flossing regularly.
- Avoid smoking. Those who smoke have four times the risk of developing gum disease.
- Limit alcohol. Heavy use of alcohol is a risk factor for oral and throat cancers.
- Eat wisely. Avoid snacks full of sugars and starches.
- Visit the dentist regularly to detect early signs of oral health problems.
- If you have diabetes, take care to manage your disease well to prevent increased risk of gum disease.
- Protect your child's teeth from decay with dental sealants.

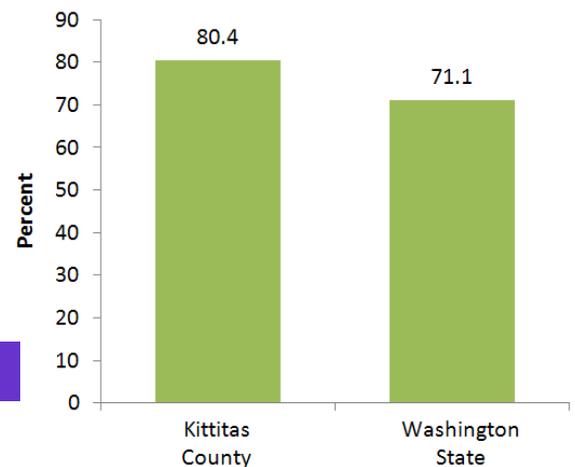


## Youth Annual Dental Visit

This indicator measures the **percentage of 10th grade students who have visited a dentist in the last 12 months for any reason**. Kittitas County **met the HP 2010 goal** in 2008 when 80.4% of 10th grade students reported a dental visit in the previous 12 months.<sup>4</sup> Statewide, 71.1% of 10th grade students reported a dental visit in the previous 12 months.<sup>4</sup> National data is not available.

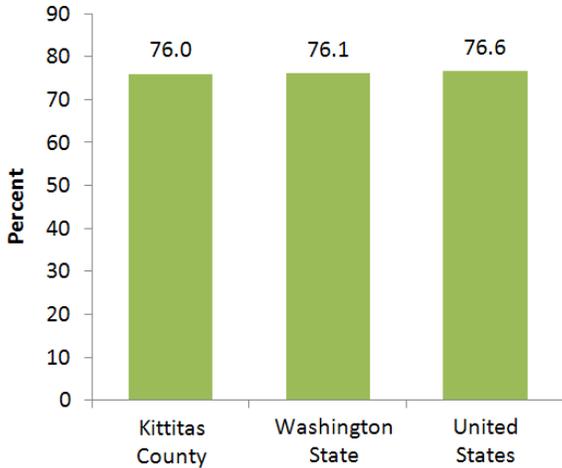
In 2006, 75.9% of 10th grade students in Kittitas County reported a dental visit in the previous 12 months compared to 71.5% statewide.<sup>4</sup>

**Target: 56%**



# Preventative Cancer Screening

The number of new cancer cases can be reduced and many cancer deaths can be prevented with preventative cancer screening. Research shows that screening for cervical and colorectal cancers as recommended helps prevent these diseases by finding precancerous lesions so they can be treated before they become cancerous. Screening for cervical, colorectal, and breast cancers also helps find these diseases at an early, often highly treatable, stage.



## Breast Cancer Screening

This indicator measures the **percentage of women age 40 or older who meet breast cancer screening recommendations**. In this report, women meet preventative breast cancer screening recommendations if they have had a mammogram within the past two years. Kittitas County **met the HP 2010 goal** in 2006 when 76.0% of women age 40 or older met the breast cancer screening recommendations.<sup>1</sup> Statewide, 76.1% of women met the recommendations compared to 76.6% nationally.<sup>1</sup>

**Target: 70%**

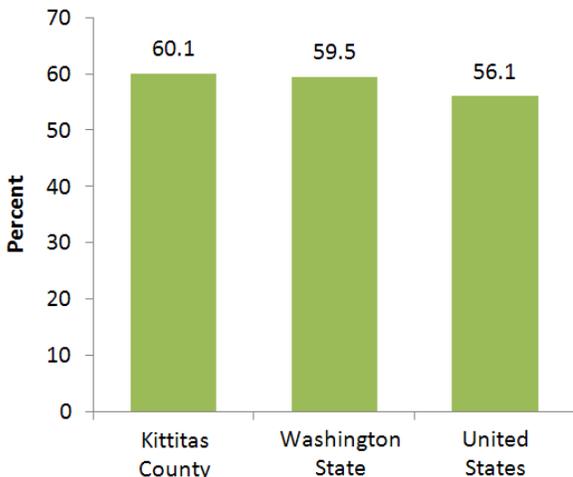
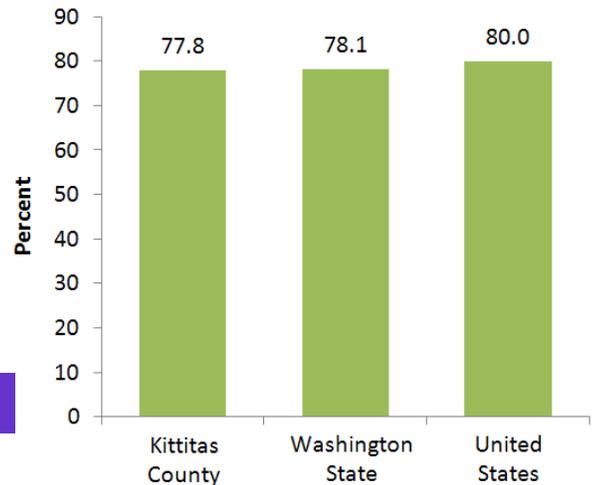
Data prior to 2006 is not available at the county, state, or national level.

## Cervical Cancer Screening

This indicator measures the **percentage of women age 18 or older who meet cervical cancer screening recommendations**. In this report, women meet preventative cervical cancer screening recommendations if they have had a pap test within the past three years. Kittitas County **met the HP 2010 goal** in 2006 when 77.8% of women age 18 or older met the cervical cancer screening recommendations.<sup>1</sup> Statewide, 78.1% of women met the recommendations compared to 80.0% nationally.<sup>1</sup>

Data prior to 2006 is not available at the county, state, or national level.

**Target: 70%**



## Colorectal Cancer Screenings

This indicator measures the **percentage of adults age 50 or older who meet colorectal cancer screening recommendations**. In this report, adults meet preventative colorectal cancer screening recommendations if they have had a blood stool test in the past year, a sigmoidoscopy in the past five years, or a colonoscopy in the past 10 years. Kittitas County **met the HP 2010 goal** in 2007 when 60.1% of adults age 50 or older met the colorectal cancer screening recommendations.<sup>1</sup> Statewide, 59.5% of adults met the recommendations compared to 56.1% nationally.<sup>1</sup>

**Target: 50%**

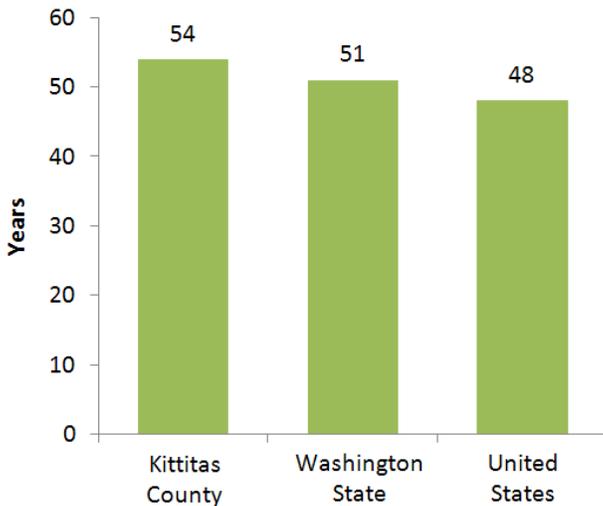
Data prior to 2007 is not available at the county, state, or national level.

# Hospitalizations



A healthier population will have fewer visits to the hospital and will live longer. Some conditions, such as asthma, are chronic medical conditions that pose a much lower risk to the patient if controlled. If not managed, patients may be more likely to seek help at a hospital instead of a clinic. Observing fewer asthma related hospitalizations indicates that asthma patients are able to manage their illness well.

Unintentional injury is the second leading cause of hospitalization in Kittitas County, following childbirth. Included in this category are motor vehicle accidents, falls, burns, and others. These injuries are considered preventable.



## Years of Healthy Life

In this report, healthy life refers to a person living in good, very good, or excellent health.

This indicator measures the **additional years of healthy life a 20 year-old is expected to live**. Kittitas County **did not meet the locally set target** in 2006–2007 when the average was an additional 54 years of healthy life.<sup>3</sup> Statewide, the average was an additional 51 years of healthy life compared to 48 years nationally (2004).<sup>3</sup>

**Target: 55 years**

During 2003–2005 the average was an additional 53 years of healthy life in Kittitas County, 51 years statewide, and 48 years nationally (2003).<sup>3</sup>

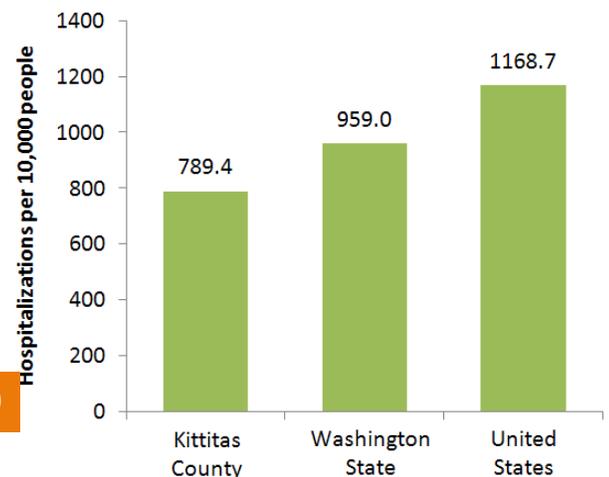


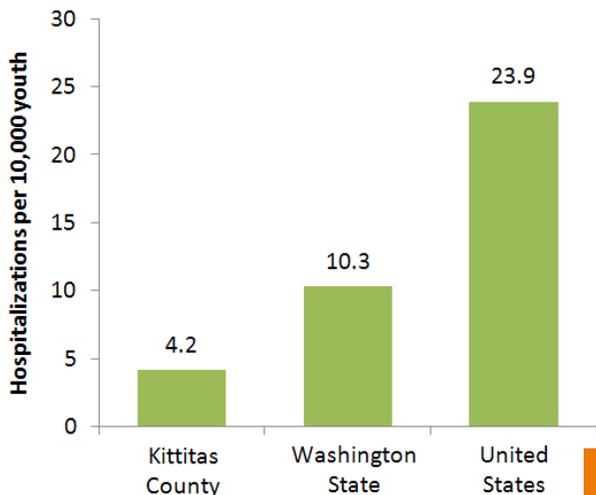
## Overall Hospitalization Rate

This indicator measures the **number of overall hospitalizations per 10,000 people (including hospitalizations for childbirth)**. Kittitas County **did not meet the locally set target** in 2007 when there were 789.4 hospitalizations per 10,000 people.<sup>5</sup> Statewide, there were 959.0 hospitalizations per 10,000 people<sup>5</sup> compared to 1168.7 hospitalizations per 10,000 people nationally (2006).<sup>6</sup>

In 2006, Kittitas County had an overall hospitalization rate of 744.1 per 10,000 people<sup>5</sup> compared to rates of 959.9 hospitalizations per 10,000 people statewide<sup>5</sup> and 1174.0 hospitalizations per 10,000 people nationally (2005).<sup>6</sup>

**Target: 500 per 10,000**





## Youth Asthma Hospitalizations

Complications from asthma can sometimes require hospitalization. If asthma is managed well, there will be fewer hospitalizations.

This indicator measures the **number of youth asthma hospitalizations per 10,000 children age 0–17**. Kittitas County **met the locally set target** in 2007 when there were 4.2 hospitalizations per 10,000 youth.<sup>5</sup> Statewide, there were 10.3 hospitalizations per 10,000 youth<sup>5</sup> compared to 23.9 hospitalizations per 10,000 youth nationally (national data includes only youth age 0–14, 2006).<sup>6</sup>

In 2006, Kittitas County had a youth asthma hospitalization rate of 7.0 per 10,000 youth<sup>5</sup> compared to rates of 10.8 hospitalizations per 10,000 youth statewide<sup>5</sup> and 26.2 hospitalizations per 10,000 youth nationally (2005, national data for age 0–14).<sup>6</sup>

**Target: 10 per 10,000**

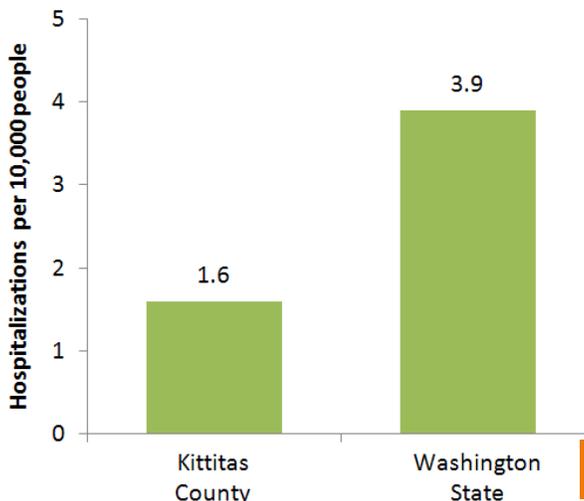
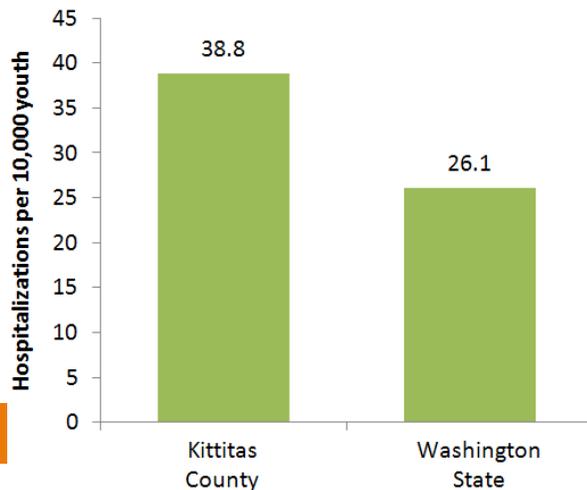
## Youth Unintentional Injuries

Unintentional injuries are the second leading cause of hospitalizations for youth in our community after respiratory diseases (excluding infant care immediately after birth).

This indicator measures the **number of youth unintentional injury hospitalizations per 10,000 children age 0–17**. Kittitas County **did not meet the locally set target** in 2007 when there were 38.8 hospitalizations per 10,000 youth.<sup>5</sup> Statewide, there were 26.1 hospitalizations per 10,000 youth.<sup>5</sup> National data is not available.

In 2006, Kittitas County had a youth unintentional injury hospitalization rate of 26.7 hospitalizations per 10,000 youth compared to the statewide rate of 26.8 hospitalizations per 10,000 youth.<sup>5</sup>

**Target: 20 per 10,000**



## Unintentional Poisonings

Ingesting too much of any substance, such as alcohol or pain medication, is considered unintentional poisoning. Unintentional poisonings requiring hospitalization are fairly rare, and they are preventable.

This indicator measures the **number of unintentional poisoning hospitalizations per 10,000 people**. Kittitas County **met the locally set target** in 2007 when there were 1.6 hospitalizations per 10,000 people.<sup>5</sup> Statewide, there were 3.9 hospitalizations per 10,000 people.<sup>5</sup> National data is not available.

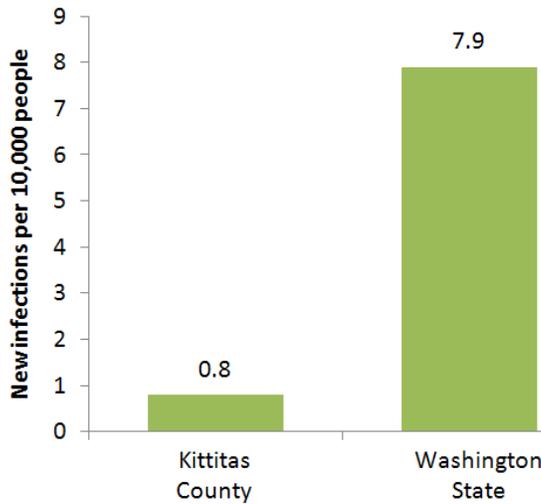
In 2006, Kittitas County had an unintentional poisoning hospitalization rate of 1.1 per 10,000 people compared to the statewide rate of 3.9 hospitalizations per 10,000 people.<sup>5</sup>

**Target: 2 per 10,000**

# Communicable Diseases



There are many types of communicable diseases (diseases that can be spread from one person to another). Some diseases, such as hepatitis C, tuberculosis, and many sexually transmitted diseases, do not have a vaccine to prevent them. The best way to protect yourself from communicable diseases that have no vaccine is to wash your hands frequently, avoid people who are sick, and follow safe sex practices.



## Hepatitis C

Hepatitis C is a disease that can lead to cirrhosis of the liver, liver failure, and liver cancer. People who have hepatitis C can have the illness for a long time with no symptoms. It is spread through blood.

This indicator measures the **number of new hepatitis C infections per 10,000 people**. Kittitas County **did not meet the HP 2010 goal** in 2007 when there were 0.8 infections per 10,000 people.<sup>7</sup> Statewide, there were 7.9 new infections per 10,000 people.<sup>7</sup> National data is not available.

In 2006, Kittitas County had a new hepatitis C infection rate of 2.4 per 10,000 people compared to the statewide rate of 9.7 infections per 10,000 people.<sup>7</sup>

**Target: 0.1 per 10,000**



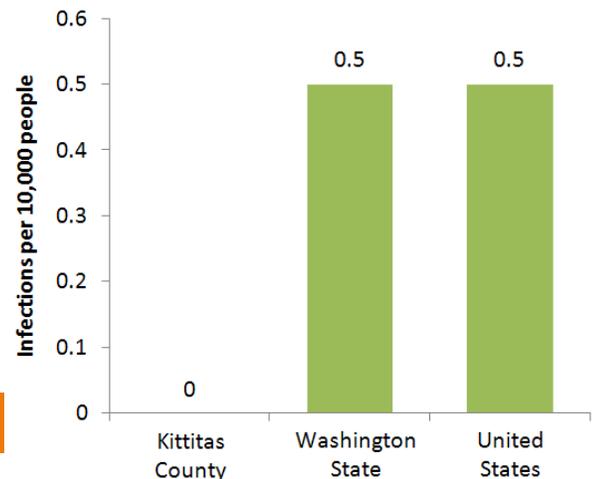
## Tuberculosis

Tuberculosis is a disease that usually affects the lungs. If not treated properly, tuberculosis can be fatal. Tuberculosis was the leading cause of death in the United States in the early 1900s. It is spread through the air.

This indicator measures the **number of tuberculosis infections per 10,000 people**. Kittitas County **met the HP 2010 goal** in 2007. No tuberculosis cases were reported.<sup>8</sup> There were 0.5 infections per 10,000 people statewide<sup>8</sup> and nationally (2006).<sup>9</sup>

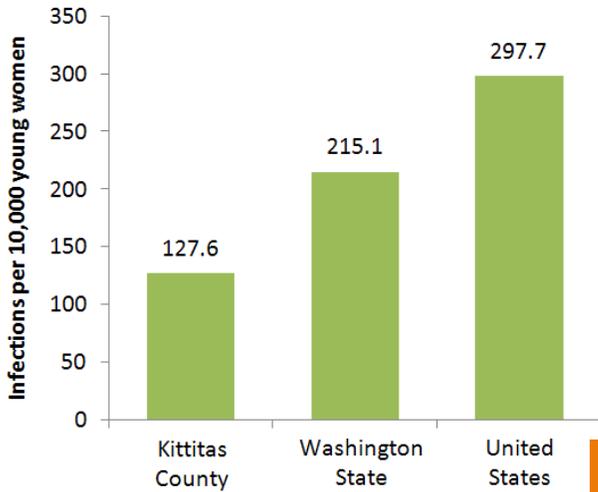
In 2006, no cases of tuberculosis were reported in Kittitas County.<sup>8</sup> The infection rate was 0.4 cases per 10,000 people statewide<sup>8</sup> and 0.5 cases per 10,000 people nationally (2005).<sup>9</sup>

**Target: 0.1 per 10,000**



# Sexually Transmitted Diseases

Sexually transmitted diseases (STDs) are simply that – diseases that are spread from person to person during sexual contact. The most common STDs are chlamydia, genital herpes, and gonorrhea. Individuals who are infected with STDs are at least two to five times more likely than uninfected individuals to acquire HIV infection if they are exposed to the virus through sexual contact.



## Chlamydia Infection

Chlamydia is the most common STD, and the highest rates are found in young people age 15–24. In this report only female infections are reported because women are more likely to be screened for infection during annual pap smears. Chlamydia often has no symptoms.

This indicator measures the **number of chlamydia infections per 10,000 women age 15–24**. Kittitas County **did not meet the HP 2010 goal** in 2008 when there were 127.6 infections per 10,000 women age 15–24.<sup>5</sup> Statewide, there were 215.1 infections per 10,000 women<sup>5</sup> compared to 297.7 infections per 10,000 women age 15–24 nationally (2007).<sup>10</sup>

In 2006, Kittitas County had a chlamydia infection rate of 101.2 per 10,000 women<sup>5</sup> compared to rates of 194.1 infections per 10,000 women statewide<sup>5</sup> and 280.8 infections per 10,000 women age 15–24 nationally.<sup>10</sup>

**Target: 100 per 10,000**

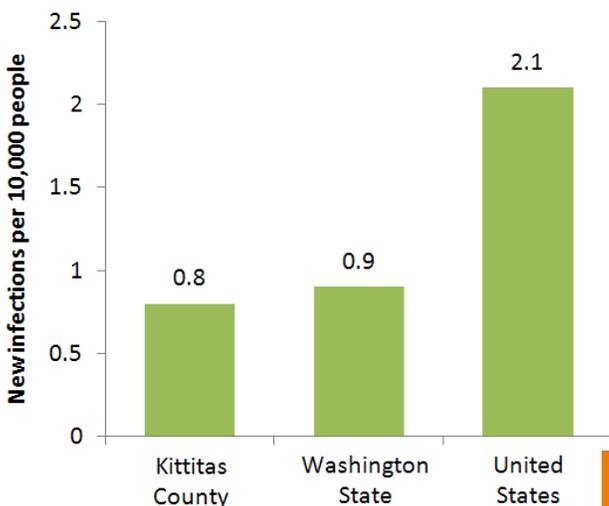
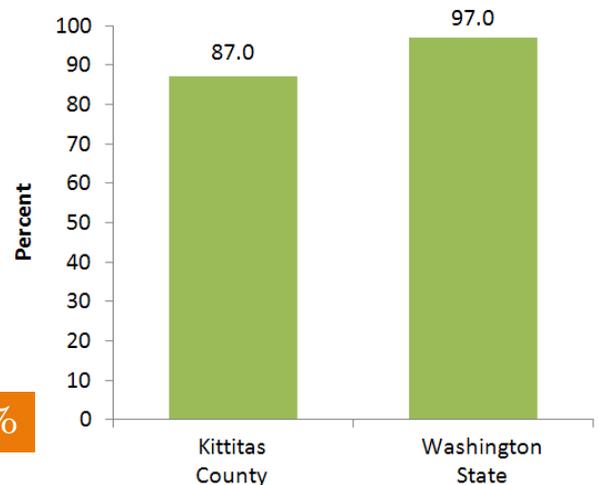
## Chlamydia Treatment

If chlamydia is untreated it can damage a woman's reproductive organs, even causing infertility. Chlamydia can be easily treated with antibiotics.

This indicator measures the **percentage of identified female chlamydia patients age 15–24 who receive proper treatment**. Kittitas County **did not meet the locally set target** in 2007–2008 when 87.0% of patients received proper treatment.<sup>3</sup> Statewide, 97.0% of chlamydia infections identified in women age 15–24 were treated properly.<sup>3</sup> National data is not available.

In 2004–2006, 89% of chlamydia infections identified in women age 15–24 were treated properly in Kittitas County compared to 93% statewide.<sup>3</sup>

**Target: 100%**



## HIV/AIDS

HIV is a virus transmitted by blood, semen, or vaginal secretions. Following initial infection, some individuals may have no symptoms for more than 10 years. The only way a person can know for sure if they have HIV is to be tested. HIV can progress to AIDS.

This indicator measures the **number of new HIV/AIDS infections per 10,000 people**. Kittitas County **did not meet the HP 2010 goal** in 2006 when 0.8 new infections were reported per 10,000 people.<sup>11</sup> Statewide, 0.9 new infections were reported per 10,000 people<sup>11</sup> compared to 2.1 new infections per 10,000 people nationally (2007).<sup>12</sup>

In 2004, 0.3 new infections were reported per 10,000 people in Kittitas County<sup>11</sup> compared to rates of 0.9 infections per 10,000 people statewide<sup>11</sup> and 2.0 infections per 10,000 people nationally (2006).<sup>12</sup>

**Target: 0.1 per 10,000**

# Vaccine Preventable Diseases



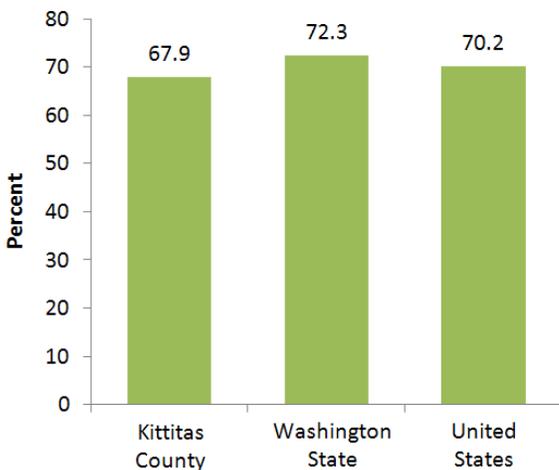
Some types of communicable diseases are preventable with vaccines. These include diseases that are very serious, such as polio which can cause paralysis. With routine vaccinations, the incidence of many vaccine preventable diseases have decreased significantly. The polio vaccine, for example, has decreased polio disease rates by 99% since its introduction in 1955.

## Childhood Immunization Rates

Children are now recommended to be immunized against diphtheria, *haemophilus influenzae* type b, hepatitis A, hepatitis B, human papillomavirus, measles, meningococcal, mumps, pertussis, pneumococcal, polio, rotavirus, rubella, tetanus, and varicella (chicken pox).

There are no reliable data sources that give childhood immunization rates at the national, state, and local level.

Target: 100%



Target: 80%

## Seasonal Flu Vaccine

Seasonal influenza can be dangerous to older adults. About 90% of seasonal flu-related deaths in the United States each year are in individuals age 65 or older. Older adults are recommended to get a seasonal flu vaccine each year.

This indicator measures the **percentage of adults age 65 and older who received a seasonal flu vaccine in the past year**. Kittitas County **did not meet the locally set target** in 2007 when 67.9% of adults age 65 and older received a flu vaccine.<sup>1</sup> Statewide, 72.3% of adults age 65 and older received a flu shot in the past year compared to 70.2% nationally.<sup>1</sup>

In 2006, 56.9% of older adults received a flu shot in Kittitas County compared to 70.8% statewide and 67.1% nationally.<sup>1</sup>

## Vaccine Preventable Disease Rates

This indicator measures the **rate of vaccine preventable disease per 100,000 people, reported by type**. For the most recent data, see the table to the right.

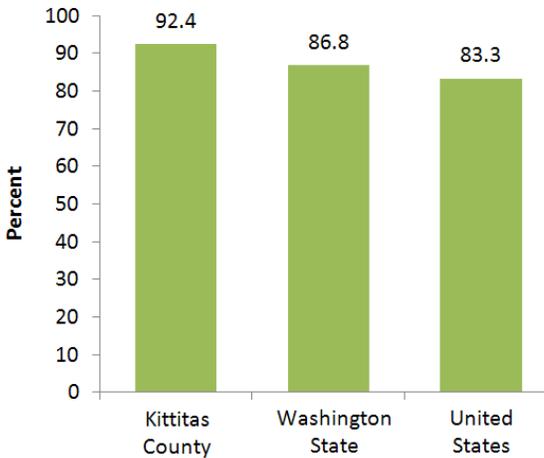
In 2006, Kittitas County did not report any cases of *haemophilus influenzae* type b (Hib), hepatitis a, hepatitis b, measles, mumps, rubella, or tetanus. The pertussis infection rate for Kittitas County was 5.83 infections per 100,000 people.

Target: 0 per 100,000

	Kittitas County <sup>5</sup>	Washington State <sup>5</sup>	United States <sup>9</sup>
Hib	0	0.1	0.1
Hepatitis A	0	0.9	1.2
Hepatitis B	0	1.0	1.6
Measles	0	0	0.02
Mumps	0	0.9	2.2
Pertussis	7.9	7.8	5.3
Rubella	0	0	0
Tetanus	0	0	0.01

All values are incidences per 100,000 people. Data for Kittitas County and Washington State, 2007. Data for United States, 2006.

Adults and children who have chronic medical conditions can still be in good general health if their conditions are well managed. Oral health is also important to good general health. Indicators on this page are important to determine the general health of the overall population.



## Adults in Good Health

This indicator measures the **percentage of adults who are in good health**. This indicator is based on self-reported data. Respondents were asked how they would describe their overall health. Those who answered excellent, very good, or good are considered to be in good health. Kittitas County **did not meet the locally set target** in 2007 when 92.4% of adults reported that they were in good health.<sup>1</sup> Statewide, 86.8% of adults were in good health, compared to 83.3% nationally.<sup>1</sup>

**Target: 95%**

In 2006, 86.6% of Kittitas County adults were in good health compared to 86.5% statewide and 83.6% nationally.<sup>1</sup>

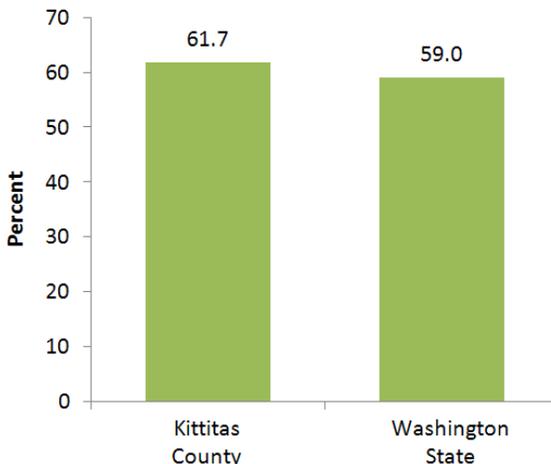
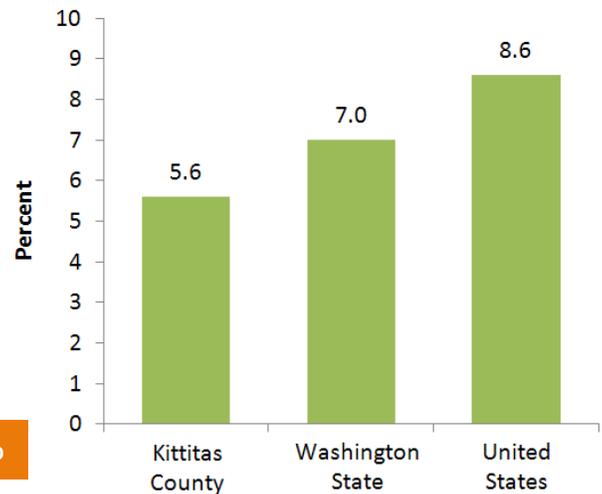
## Adult Diabetes Rates

Diabetes is a chronic health condition that is one of the leading causes of death and disability in the United States. Long-term complications can affect almost every part of the body.

This indicator measures the **percentage of adults who have ever received a diabetes diagnosis (excluding gestational diabetes)**. Kittitas County **did not meet the HP 2010 goal** in 2007 when 5.6% of adults stated that they had ever received a diabetes diagnosis.<sup>1</sup> Statewide, 7.0% of adults have ever received a diabetes diagnosis, compared to 8.6% nationally.<sup>1</sup>

In 2006, 6.3% of Kittitas County adults had ever received a diabetes diagnosis compared to 7.1% statewide and 8.1% nationally.<sup>1</sup>

**Target: 2.5%**



## Youth Dental Cavities

Good oral health is important to good overall health. Tooth decay (cavities) in children can cause pain, behavior problems, absence from school, and difficulty concentrating on learning.

This indicator measures the **percentage of second and third grade students who have ever had a cavity**. Kittitas County **did not meet the HP 2010 goal** in 2005 when 61.7% of students had evidence of a cavity (treated or untreated).<sup>13</sup> Statewide, 59.0% of students had evidence of a cavity.<sup>13</sup> National data is not available.

**Target: 42%**

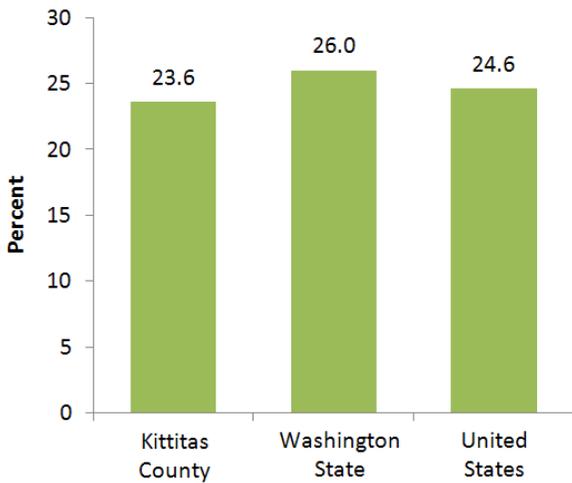
Data presented here is taken from the Washington State Smile Survey, conducted every five years. The next screening will occur in 2010.

# Healthy Diet



Compared to people who eat only small amounts of fruits and vegetables, those who eat more generous amounts – as part of a healthy diet – are likely to have reduced risk of chronic diseases. These diseases include stroke, type 2 diabetes, some types of cancer, and perhaps heart disease.

Recommendations for the amount of fruits and vegetables a person should try to eat vary depending on age, sex, and physical activity level. In this report, five or more servings of fruits and vegetables per day is considered a healthy amount. For vegetables, a serving could be a cup of raw or cooked vegetables, a cup of 100% vegetable juice, or two cups of raw leafy greens. For fruits, a serving could be a cup of fruit (about a small apple or 30 grapes), a cup of 100% fruit juice, or ½ cup of dried fruit.



## Adult Fruit and Vegetable Consumption

This indicator measures the **percentage of adults who report eating an average of five or more servings of fruits and vegetables per day**. Kittitas County **did not meet the HP 2010 goal** in 2007 when 23.6% of adults reported eating an average of five or more servings of fruits and vegetables per day.<sup>1</sup> Statewide, 26.0% of adults reported eating the recommended amount of fruits and vegetables compared to 24.6% nationally.<sup>1</sup>

In 2005, 25.3% of Kittitas County adults reported eating the recommended amount of fruits and vegetables compared to 25.2% statewide and 23.2% nationally.<sup>1</sup>

**Target: 50%**

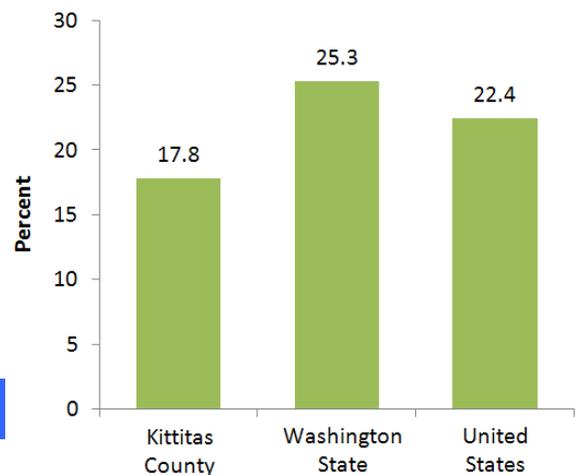


## Youth Fruit and Vegetable Consumption

This indicator measures the **percentage of 10th grade students who report eating an average of five or more servings of fruits and vegetables per day**. Kittitas County **did not meet the locally set target** in 2008 when 17.8% of 10th grade students reported eating an average of five or more servings of fruits and vegetables per day.<sup>4</sup> Statewide, 25.3% of students reported eating the recommended amount of fruits and vegetables<sup>4</sup> compared to 22.4% nationally (2007).<sup>14</sup>

In 2006, 26.9% of Kittitas County 10th grade students reported eating the recommended amount of fruits and vegetables<sup>4</sup> compared to 25.4% statewide<sup>4</sup> and 21.4% nationally (2005).<sup>14</sup>

**Target: 50%**



Regular physical activity is one of the most important things people can do for their health. It can help control weight and reduce the risk of cardiovascular disease, type 2 diabetes, and some types of cancers. It will also improve mental health and increase the chances of living longer.

The amount of recommended physical activity varies by individual depending upon age. In this report, moderate exercise for at least 30 minutes per day on five or more days per week or vigorous exercise for at least 20 minutes per day on three or more days per week is considered a healthy amount of physical activity. Moderate exercise could be walking briskly, gardening, bicycling slower than 10 miles per hour, or playing doubles tennis. Vigorous exercise could be race walking, jogging, or running, swimming, aerobic dancing, or playing singles tennis.

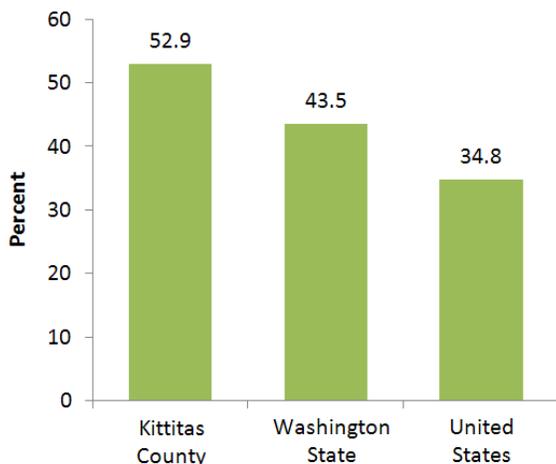
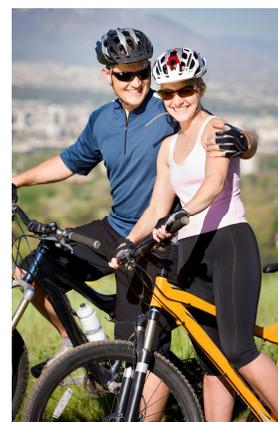
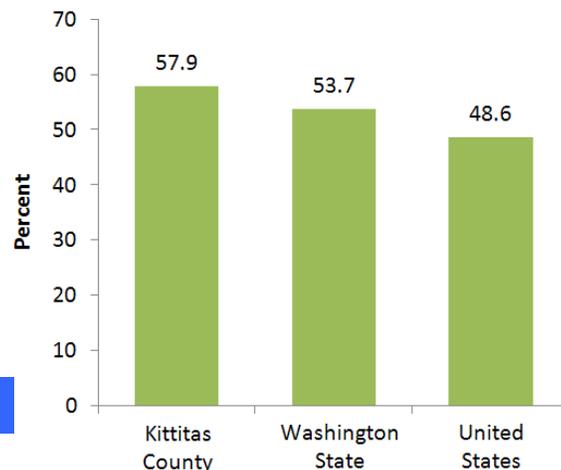


## Adult Physical Activity

This indicator measures the **percentage of adults who report meeting physical activity recommendations**. In this report, physical activity recommendations are moderate physical activity for at least 30 minutes per day on five or more days per week or vigorous exercise for at least 20 minutes per day on three or more days per week. Kittitas County **did not meet the locally set target** in 2007 when 57.9% reported meeting the recommendations.<sup>1</sup> Statewide, 53.7% of adults reported meeting the recommendations compared to 48.6% nationally.<sup>1</sup>

In 2005, 63.6% of Kittitas County adults reported meeting physical activity recommendations compared to 54.6% of adults statewide and 49.1% nationally.<sup>1</sup>

Target: 75%



## Youth Physical Activity

This indicator measures the **percentage of 10th grade students who report participating in physical activity for at least 60 minutes on five or more days per week**. Kittitas County **did not meet the locally set target** in 2008 when 52.9% of 10th grade students reported meeting the recommendations.<sup>4</sup> Statewide, 43.5% of students reported meeting the recommendations<sup>4</sup> compared to 34.8% nationally (2007).<sup>14</sup>

In 2006, 56.4% of Kittitas County 10th grade students reported meeting the recommendations<sup>4</sup> compared to 41.9% of students statewide<sup>4</sup> and 38.5% nationally (2005).<sup>14</sup>

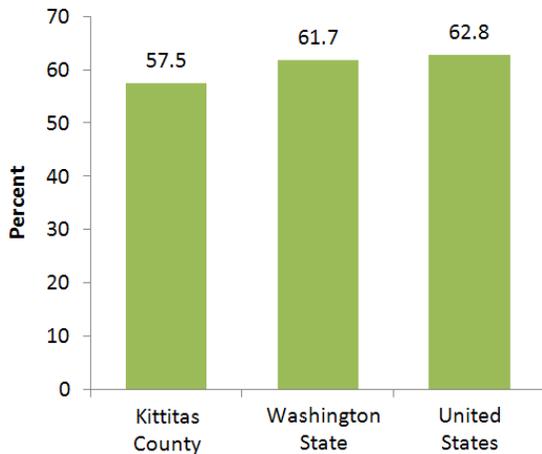
Target: 75%

# Overweight and Obese



Obesity is one of the largest health threats facing our nation today. It has been linked with heart disease, high blood pressure, and a variety of other medical conditions, some of which are life threatening. The safest way to reduce and avoid obesity is through diet and exercise.

In this report, classifications of overweight and obese are different for youth and adults. Both classifications are based on body mass index values which are determined by a height and weight ratio calculation. Youth are classified as overweight or obese if their body mass index value falls into the top 15% of CDC growth charts. Adults are classified as overweight or obese if their body mass index value is 25 or higher (for example, a 5'9" adult weighing 169 pounds or more). All data presented here are self-reported.



## Adult Overweight and Obese

Adults with a body mass index value of 25 or greater are considered overweight. An adult with a body mass index value of 30 or higher is considered obese.

This indicator measures the **percentage of adults who are overweight or obese**. Kittitas County **did not meet the HP 2010 goal** in 2007 when 57.5% of adults were considered overweight or obese.<sup>1</sup> Statewide, 61.7% of adults were overweight or obese compared to 62.8% nationally.<sup>1</sup>

**Target: 40%**

In 2006, 61.1% of Kittitas County adults were overweight or obese compared to 60.6% statewide and 61.3% nationally.<sup>1</sup>



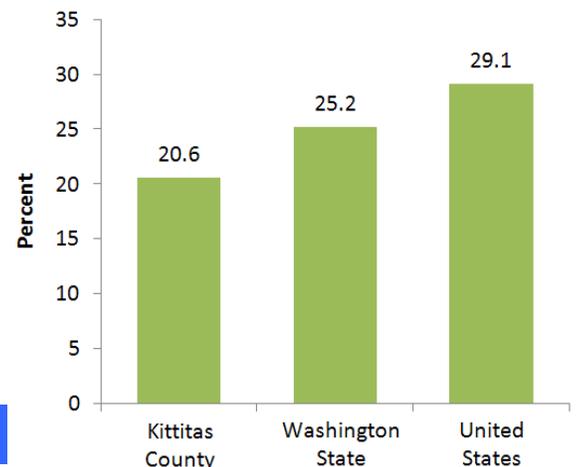
## Youth Overweight and Obese

Youth with a body mass index value in the top 15% of CDC growth charts are considered overweight. Youth with a body mass index value in the top 5% of CDC growth charts are considered obese.

This indicator measures the **percentage of 10th grade students who are overweight or obese**. Kittitas County **did not meet the HP 2010 goal** in 2008 when 20.6% of 10th grade students were considered overweight or obese.<sup>4</sup> Statewide, 25.2% of 10th grade students were overweight or obese<sup>4</sup> compared to 29.1% nationally (2007).<sup>14</sup>

In 2006, 15.9% of Kittitas County 10th grade students were overweight or obese<sup>4</sup> compared to 24.7% statewide<sup>4</sup> and 28.6% nationally (2005).<sup>14</sup>

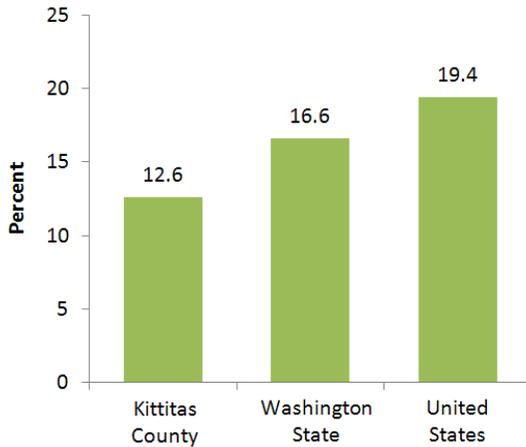
**Target: 5%**



Tobacco use is the single most preventable cause of disease, disability, and death in the United States. Causing a long list of health problems from heart disease to cancer, an estimated 443,000 Americans die prematurely from smoking or exposure to secondhand smoke each year. According to the CDC, for every person who dies from smoking, 20 more people suffer from at least one serious tobacco-related illness.



## Adult Smoking



Adult smoking rates are impacted by the number of adults who started smoking in their youth and the number who have quit. The adult smoking rate should decrease if fewer youth start smoking and more adults quit.

This indicator is a measure of the **percentage of adults who report smoking in the last 30 days**. Kittitas County **did not meet the HP 2010 goal** in 2007 when 12.6% of adults reported smoking in the last 30 days.<sup>1</sup> Statewide, 16.6% of adults reported smoking compared to 19.4% nationally.<sup>1</sup>

In 2006, 18.2% of Kittitas County adults reported smoking in the last 30 days, compared to 17.0% statewide and 19.6% nationally.<sup>1</sup>

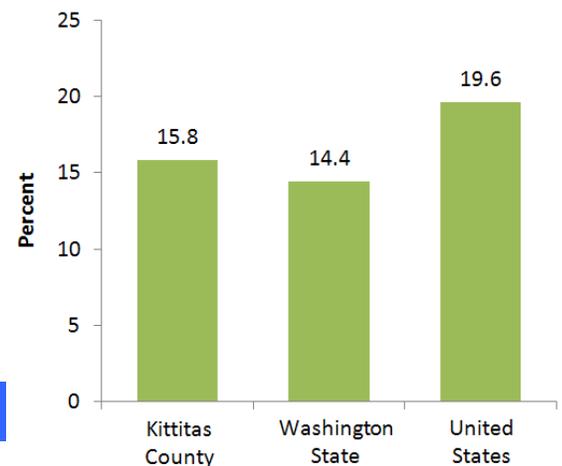
**Target: 12%**

## Youth Smoking

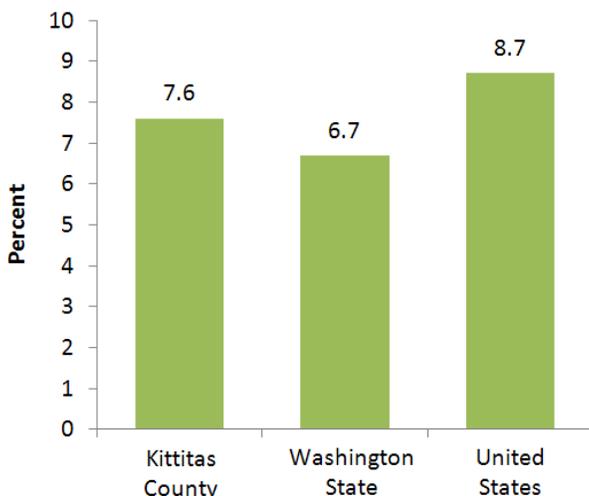
Most long-time smokers become addicted to tobacco before their eighteenth birthday. Educating youth to avoid smoking will reduce the number of smokers and the number of smoking-related deaths in the future.

This indicator is a measure of the **percentage of 10th grade students who report smoking in the last 30 days**. Kittitas County **met the HP 2010 goal** in 2008 when 15.8% of 10th grade students reported smoking in the last 30 days.<sup>4</sup> Statewide, 14.4% of 10th grade students reported smoking<sup>4</sup> compared to 19.6% nationally (2007).<sup>14</sup>

In 2006, 17.9% of Kittitas County 10th grade students reported smoking in the past 30 days<sup>4</sup> compared to 14.9% statewide<sup>4</sup> and 21.4% nationally (2005).<sup>14</sup>



**Target: 16%**



## Youth Chewing

Chewing tobacco, also known as smokeless tobacco, has the same addictive and carcinogenic properties as cigarettes, but in a different form.

This is a measure of the **percentage of 10th grade students who report using chewing tobacco in the last 30 days**. Kittitas County **did not meet the HP 2010 goal** in 2008 when 7.6% of 10th grade students reported using chewing tobacco in the last 30 days.<sup>4</sup> Statewide, 6.7% of 10th grade students reported using chewing tobacco<sup>4</sup> compared to 8.7% nationally (2007).<sup>14</sup>

In 2006, 11.7% of Kittitas County 10th grade students reported using chewing tobacco in the last 30 days<sup>4</sup> compared to 6.4% statewide<sup>4</sup> and 7.5% nationally (2005).<sup>14</sup>

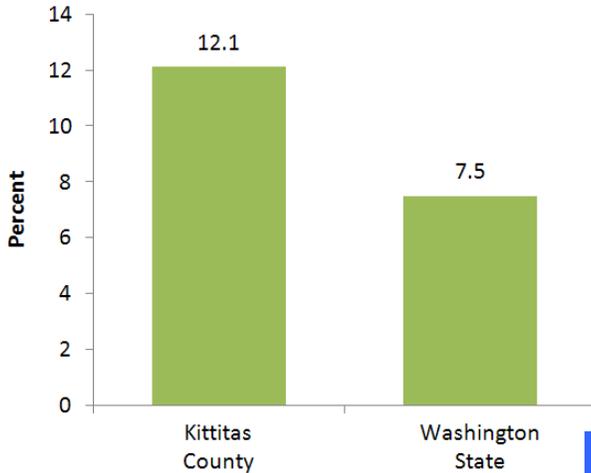
**Target: 1%**

# Illicit Drugs



Illicit drug use is expensive and detrimental to one's health. It can increase the likelihood of engaging in other risky behaviors while under the influence of the drug. Illicit drug use can also lead to drug addiction—a disease that impacts the brain. However, drug addiction is a preventable and treatable disease.

## Adult Illicit Drug Use



Illicit drug use in adults should be kept below 2% of the entire population according to the HP 2010 goal. A self-reported estimate of illicit drug use in Washington State and in Kittitas County is available, but only for individuals who live at 200% of the federal poverty level or below (an income of \$42,400 or less for a family of four in 2008). National data is not available.

This indicator is a measure of the **percentage of adults who report using any illicit drug in the last 30 days**. Kittitas County **did not meet the HP 2010 goal** in 2008, when 12.1% of adults who lived at 200% of the federal poverty level or below reported illicit drug use in the last 30 days.<sup>15</sup> This is higher than the state rate of 7.5%.<sup>15</sup>

In 2003, 12.3% of Kittitas County and 7.5% of Washington State residents who lived at 200% of the federal poverty level or below reported illicit drug use in the last 30 days.<sup>15</sup>

**Target: 2%**



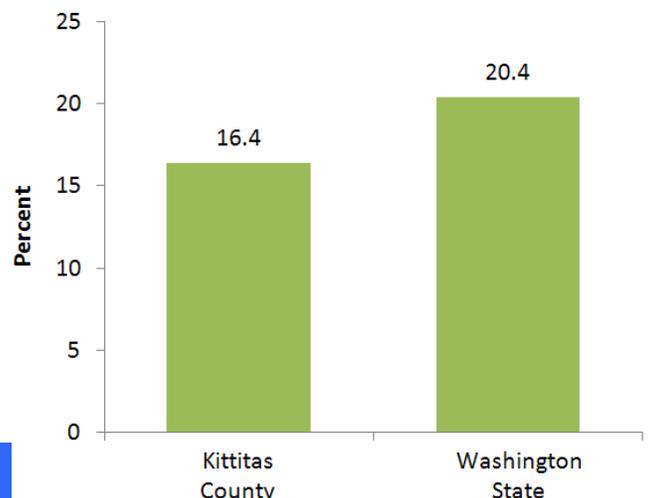
## Youth Illicit Drug Use

Illicit drug use in youth should be kept below 11% according to the HP 2010 goal. Tenth grade illicit drug use is an important key health indicator, as drug use at an early age is directly related to poor school performance, increased chance of addiction, and other risky behaviors. Data is self-reported. Illicit drug use includes marijuana use.

This indicator is a measure of the **percentage of 10th grade students who report using any illicit drug in the last 30 days**. Kittitas County **did not meet the HP 2010 goal** in 2008, when 16.4% of 10th grade students reported illicit drug use in the last 30 days.<sup>4</sup> This is lower than the state rate of 20.4%.<sup>4</sup> National data is not available.

In 2006, 19.5% of Kittitas County 10th grade students reported illicit drug use in the last 30 days, compared to 19.4% statewide.<sup>4</sup>

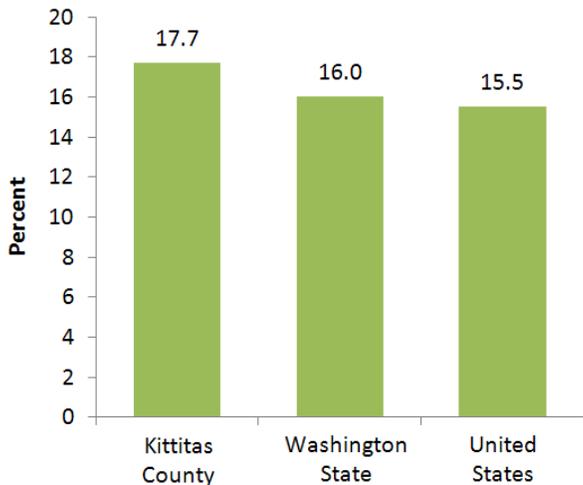
**Target: 11%**





Alcohol use is very common in our society. Drinking alcohol has immediate effects than can increase the risk of many harmful health conditions. Excessive alcohol use, by either heavy drinking or binge drinking, can lead to an increased risk of health problems such as liver disease or unintentional injuries. Heavy drinking is defined as more than two drinks per day on average for men or more than one drink per day on average for women. Binge drinking is defined as five or more drinks on one occasion.

Underage drinkers are more likely to experience school problems (such as higher absence rates and poor grades). Underage drinking can cause changes in brain development that may have life-long effects.



## Adult Binge Drinking

In this report binge drinking is defined as five or more drinks on one occasion. A drink is 12 oz. of beer, six oz. of wine, or one oz. of hard liquor.

This indicator is a measure of the **percentage of adults who report binge drinking in the last 30 days**. Kittitas County **did not meet the HP 2010 goal** in 2007, when 17.7% of adults reported binge drinking in the last 30 days.<sup>1</sup> Statewide, 16.0% of adults reported binge drinking compared to 15.5% nationally.<sup>1</sup>

**Target: 6%**

In 2006, 18.5% of Kittitas County adults reported binge drinking in the last 30 days, compared to 14.4% statewide and 15.2% nationally.<sup>1</sup>

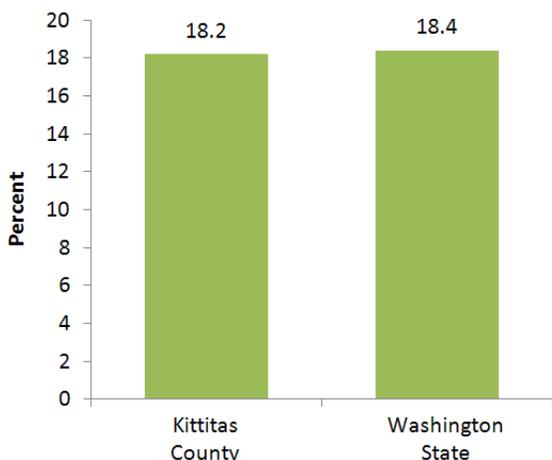
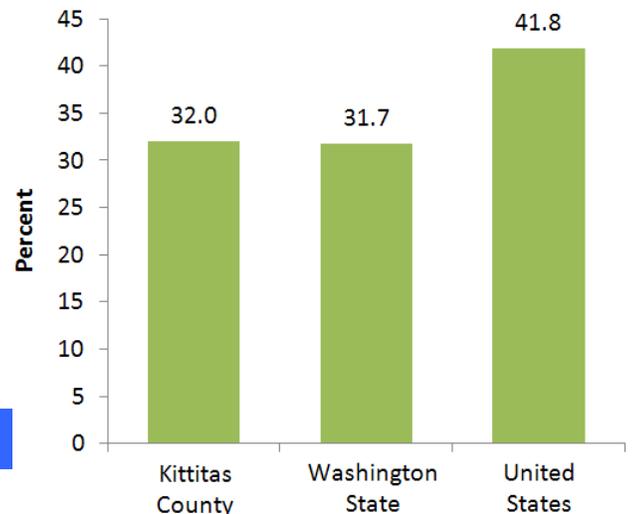
## Youth Alcohol Use

Alcohol use as a youth increases the risk of addiction later in life. It can also increase participation in risky behaviors.

This indicator is a measure of the **percentage of 10th grade students who report drinking more than a sip of alcohol in the last 30 days**. Kittitas County **did not meet the HP 2010 goal** in 2008, when 32.0% of 10th grade students reported drinking in the last 30 days.<sup>4</sup> Statewide, 31.7% of 10th grade students reported drinking<sup>4</sup> compared to 41.8% nationally (2007).<sup>14</sup>

In 2006, 38.7% of Kittitas County 10th grade students reported drinking in the last 30 days<sup>4</sup> compared to 32.8% statewide<sup>4</sup> and 42.0% nationally (2005).<sup>14</sup>

**Target: 11%**



## Youth Binge Drinking

In this report binge drinking is defined as five or more drinks on one occasion. A drink is 12 oz. of beer, six oz. of wine, or one oz. of hard liquor.

This indicator is a measure of the **percentage of 10th grade students who report binge drinking in the last two weeks**. Kittitas County **did not meet the HP 2010 goal**. In 2008, 18.2% of Kittitas County 10th grade students reported binge drinking in the last two weeks compared to 18.4% statewide.<sup>4</sup> Nationally, 23.7% of 10th grade students reported binge drinking in the last 30 days (cannot be compared to county or state level data due to difference in time frame, 2007).<sup>14</sup>

In 2006, 23.2% of Kittitas County and 19.6% of Washington State 10th grade students reported binge drinking in the last two weeks.<sup>4</sup> Nationally, 24.6% of tenth grade students reported binge drinking in the last 30 days (2005).<sup>14</sup>

**Target: 2%**

# Wastewater Management



Wastewater, or sewage, can be dangerous to people and animals. Sewage contains fecal coliform and other bacteria, protozoa, viruses, and inorganic, volatile organic, and synthetic organic chemicals that can make people and animals very sick if ingested. Potential illnesses include diarrhea, cholera, typhoid fever, giardiasis, and hepatitis A. Exposure to sewage can be limited by ensuring all septic systems are designed, installed, and maintained properly. Most exposures to sewage occur after a septic system fails.

## Timely Corrective Action

Occasionally septic systems fail, meaning the septic system is no longer functional. When this happens, environmental public health staff must respond quickly to minimize the risk of public exposure to sewage. The faster corrective action is initiated, the lower the risk of illness due to septic exposure.

This indicator is a measure of the **percentage of identified on-site sewage failures with appropriate corrective action initiated by the health jurisdiction within two weeks**. Statewide and national data are not available, but Kittitas County [met the locally set target](#) in 2009 with 100% of identified failures having appropriate correction action initiated within two weeks.<sup>16</sup>

In 2008, Kittitas County also met the locally set target of 100%.<sup>3</sup> Statewide, 96% of identified failures had appropriate corrective action initiated within two weeks.<sup>3</sup>

Target: 100%



## Timely Resolution of Failures

When an on-site sewage system fails, or is no longer functional, a timely resolution will protect the public from sewage exposure and reduce the chance of failures in the future.

This indicator is a measure of the **percentage of on-site sewage failures resolved to the satisfaction of the health jurisdiction within 90 days**. Statewide and national data are not available, but Kittitas County [met the locally set target](#) in 2009 with 100% of failures resolved to the satisfaction of the health jurisdiction within 90 days.<sup>16</sup>

Target: 100%

Data is not available for 2008 at the state, county, or national level.

## Systems Installed Correctly

If an on-site sewage system is properly installed, the likelihood of failures or repairs in the future is reduced and the subsequent risk to human health is minimized.

This indicator is a measure of the **percentage of on-site sewage systems installed correctly**. Statewide and national data are not available, but Kittitas County [met the locally set target](#) in 2009 with 100% of systems installed correctly.<sup>16</sup>

When Kittitas County meets the locally set target of 100% of septic systems installed correctly, human health will be protected by reducing the chance of septic system failure and subsequent exposure to septic material.

Target: 100%



## Sewage and Surface Water

Washington State law requires all septic systems to be at least 100 feet from surface water, although waivers are available for systems within 75 feet. No system may be installed closer than 75 feet of surface water. The chance of water contamination due to a septic leak, spill, or failure increases the closer the septic system is to surface water. By reducing the number of septic systems installed within 100 feet of surface water, the likelihood of water contamination or human illness due to septic issues will remain minimal.

This indicator is a measure of the **percentage of new septic systems installed within 100 feet of surface water**. Statewide data is not available, but Kittitas County [met the locally set target](#). No new septic systems were installed within 100 feet of surface water in 2009.<sup>16</sup>

Data is not available for 2008 at the state or county level.

Target: 10%



## Did You Know...?

With proper maintenance and use, septic systems can function properly for decades, possibly even a lifetime.

To maintain your septic system, **avoid**:

- Dumping large quantities of grease or cooking oil
- Flushing non-biodegradable hygiene products
- Dumping chemicals, including pesticides, herbicides, or anything with high bleach or lye content
- Excessive water dumped quickly; check for plumbing leaks

**And check for:**

- Tree roots or buildings, driveways, or other impervious surfaces. They should not be on a septic area.



## On-site Sewage Failures

On-site sewage failures occur when a system is no longer functional. Human health can be protected by reducing the number of septic system failures each year.

This indicator is a measure of the **number of on-site sewage failures in one calendar year**. Statewide and national data are not available, but Kittitas County **did not meet the locally set target** in 2009. Three on-site sewage failures were reported in the first three quarters of 2009.<sup>16</sup>

Statewide and national data is not available for 2008, but Kittitas County reported nine on-site sewage failures during 2008.<sup>16</sup>

Target: 0 failures

# Food Safety



Safe food handling, storage, and preparation is imperative for keeping the public safe from foodborne illnesses. If food is not prepared, cooked, or stored properly, bacteria, viruses, or chemical contamination may occur, potentially causing serious illness. The very young, very old, and immunocompromised persons are most at risk for suffering severe effects from a foodborne illness, although anyone may become sick if they ingest large amounts of illness-causing compounds. All food service establishments are regulated and inspected by the public health department. The inspectors check temperatures, kitchen set-up, food worker behavior, and other factors that could lead to foodborne illness.

## One or More Critical Violations

Critical violations are behaviors, food temperatures, or establishment set-ups that are likely to cause a foodborne illness if not corrected immediately. Critical violations are the red items on a food inspection report. An establishment may be shut down if it reaches a threshold number of critical violations.

This indicator is a measure of the **percentage of permanent food establishment inspections with one or more critical violations**. Statewide and national data are not available, but Kittitas County **did not meet the locally set target** in 2009. Between January and October 2009, 46.5% of permanent food establishment inspections had one or more critical violations.<sup>16</sup>

Data is not available for 2008 at the state, county, or national level.

Target: 30%



## 35 + Critical Violation Points

Critical violations are behaviors, temperatures, or establishment set-ups that are likely to cause a foodborne illness if not corrected immediately. An established number of points are awarded for each type of violation. Any food service establishment with 35 or more critical violation points at once is in danger of spreading a foodborne illness.

This indicator is a measure of the **percentage of permanent food service establishments with 35 or more critical violation points during a single inspection**. Statewide and national data are not available, but Kittitas County **did not meet the locally set target** in 2009. Between January and October of 2009, 6.2% of permanent food establishment inspections had 35 or more critical violation points during a single inspection.<sup>16</sup>

In 2008, Kittitas County also had 6.2% of permanent food establishment inspections with 35 or more critical violation points during a single inspection.<sup>3</sup> Statewide, 7.0% of inspections had 35 or more critical violation points during a single inspection.<sup>3</sup>

Target: 3%

## Foodborne Illnesses

If prevention measures fail, foodborne illnesses may occur. This indicator is a measure of the **rate of foodborne illness per 100,000 people, reported by type**.

The four most common bacterial foodborne illnesses are caused by the bacteria *Campylobacter*, *E. coli*, *Salmonella*, and *Listeria*.

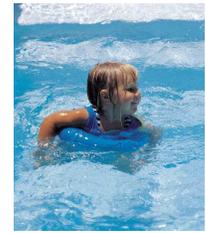
Rates of foodborne illness have decreased in Kittitas County from 2006 to 2007, but Kittitas County's goal of eliminating foodborne illness has not been met. Only 2007 data is presented here.

Target: 0 per 100,000

	Kittitas County <sup>5</sup>	Washington State <sup>5</sup>	United States <sup>17</sup>
<i>Campylobacter</i>	3.3	15.7	12.8
<i>E. coli</i>	0	2.2	1.2
<i>Salmonella</i>	5.7	11.8	14.9
<i>Listeria</i>	0	0.4	0.3

All values are incidences per 100,000 people.

Water recreation, most often occurring in public swimming pools and spas, can provide endless fun when in a safe and clean environment. However, public pools and spas can cause injury or illness if not properly maintained. The public health department is responsible for inspecting safety measures and water quality at all public pools and spas. Water recreation also occurs in other water bodies, such as streams and creeks. The public health department does not inspect surface water recreation areas, so surface water can pose greater potential for illness or injury.



## One or More Critical Violations

Critical violations in a public health inspection can be chemical imbalances, bacterial presence, or lack of safety mechanisms that could cause illness, injury, or death if not corrected.

This indicator is a measure of the **percentage of public swimming pool inspections with one or more critical violations**. Statewide and national data are not available, but Kittitas County **did not meet the locally set target** in 2009. Between January and October 2009, 82.0% of public swimming pool inspections had one or more critical violations.<sup>16</sup>

**Target: 30%**

Data is not available for 2008 at the state, county or national level.

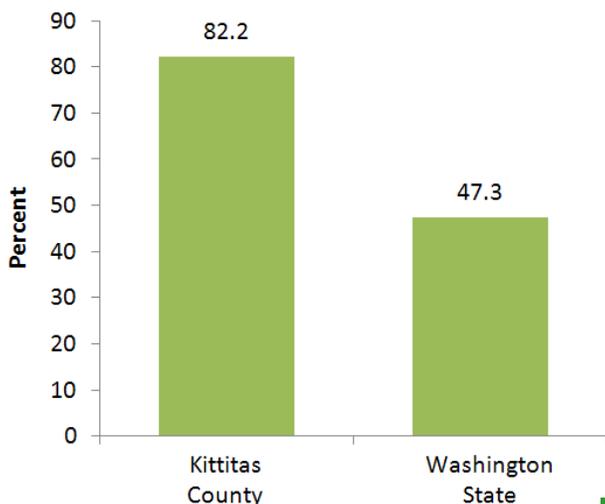
## Three or More Critical Violations

Critical violations in a public health inspection can be chemical imbalances, bacterial presence, or lack of safety mechanisms that could cause illness, injury, or death if not corrected. An establishment may be a danger to the public if it has three or more critical violations at once.

This indicator is a measure of the **percentage of permanent public swimming pool inspections with three or more critical violations during a single inspection**. Statewide and national data are not available, but Kittitas County **did not meet the locally set target** in 2009. Between January and October 2009, 12.0% of public swimming pool inspections had three or more critical violations during a single inspection.<sup>16</sup>

Data is not available for 2008 at the state, county or national level.

**Target: 3%**



## Fecal Coliform in Streams

Fecal coliform is a type of bacterial growth that can be found in streams that can cause human illness. When levels of fecal coliform exceeding 100 colonies per 100 mL of water are found during water quality testing (an impaired stream) it is important that a pollution control plan is implemented. A pollution control plan can help reduce the amount of contamination in the stream.

This indicator is a measure of the **percentage of impaired streams with a pollution control plan**. Kittitas County **did not meet the locally set target**. In 2008, there were 45 streams impaired with high levels of fecal coliform in Kittitas County. Of these, 37 (82.2%) had a pollution control plan in place.<sup>18</sup> Statewide, 47.3% of streams impaired with high levels of fecal coliform had a pollution control plan in place.<sup>18</sup> National data is not available.

In 2004, 88.5% of Kittitas County and 40.9% of statewide streams impaired with high levels of fecal coliform had a pollution control plan in place.<sup>18</sup>

**Target: 100%**

# Drinking Water



Drinking water comes from Group A systems, Group B systems, or private wells. Group A systems serve 15 or more households. These systems are regulated by the Washington State Department of Health, although water system inspections (also called sanitary surveys) are conducted by the local health department. Group B systems serve between two and 14 households and are regulated by the local health department. Private wells can serve up to two households, and are maintained and regulated by the homeowners, although the local health department can provide guidance on testing and maintenance.

## Group B Monitoring Compliance

Nitrate and coliform bacteria levels are an indicator of water quality. To be in compliance with Group B monitoring requirements systems should have a bacteriological test each year and a nitrate test every three years.

This indicator is a measure of the **percentage of Group B water systems in compliance with monitoring requirements**. Statewide and national data are not available, but Kittitas County **did not meet the locally set target** in 2009. In 2009, 14.9% of Group B water systems had received a bacteriological test in the past year and a nitrate sample within the past three years.<sup>16</sup>

Data is not available for 2008 at the state, county, or national level.

**Target: 100%**



## Group B Water Quality

The Washington State Water Quality Regulations and Guidelines outline the levels of certain organic and inorganic compounds that are allowable in Group B drinking water systems.

This indicator is a measure of the **percentage of Group B water system samples that meet water quality regulations and guidelines for coliform bacteria and nitrates**. Statewide data is not available, but Kittitas County **did not meet the locally set target** in 2009. For those Group B systems that were in compliance with monitoring requirements, 99.1% of samples met water quality regulations and guidelines.<sup>16</sup>

**Target: 100%**

Data is not available for 2008 at the state or county level.

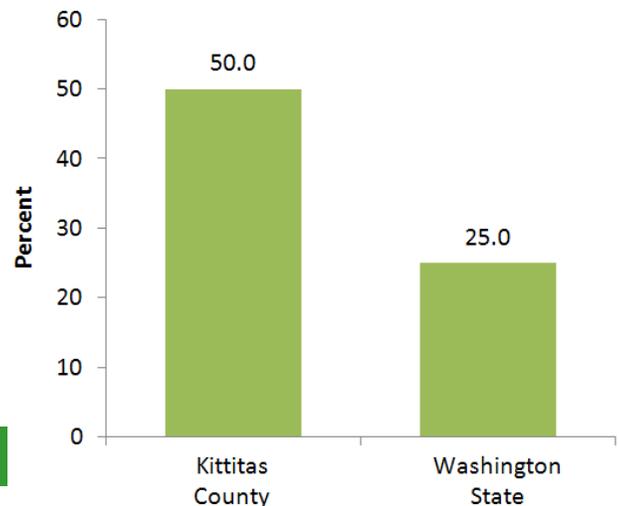
## Sanitary Surveys

Sanitary surveys are inspections performed on Group A water systems to ensure compliance with the Federal Safe Drinking Water Act.

This indicator is a measure of the **percentage of sanitary surveys requiring corrective action**. Kittitas County **did not meet the locally set target**. In 2008, 50.0% of sanitary surveys in Kittitas County (8 of 16) required corrective action, while 25.0% of sanitary surveys statewide required corrective action.<sup>19</sup> National data is not available.

In 2007, 50.0% of sanitary surveys in Kittitas County (7 of 14) and 21.9% of surveys statewide required corrective action.<sup>19</sup>

**Target: 0%**





## Disease Outbreaks

Disease outbreaks can occur if drinking water systems are contaminated with organic, inorganic, volatile organic, or other compounds, or contaminated with harmful levels of bacteria or viruses. The most common waterborne diseases are caused by the bacteria *Giardia*, *Cryptosporidium*, *E. coli*, *Salmonella*, and *Shigella*.

This indicator is a measure of the **number of waterborne disease outbreaks (2+ cases)**. Kittitas County **met the locally set target** of zero waterborne disease outbreaks in 2009.<sup>20</sup> Washington State also reported zero waterborne disease outbreaks in 2009.<sup>20</sup> National data is not available.

In 2007, there were no waterborne disease outbreaks in Kittitas County, but there were three outbreaks affecting 58 people in Washington State.<sup>20</sup>

**Target: 0 outbreaks**

## Indoor Domestic Water Usage

Groundwater quantity is currently unknown in Kittitas County. Measuring household indoor water usage, coupled with a ground water study, will help county residents determine appropriate water usage practices.

This indicator is a measure of **daily water withdrawals, in gallons, per household for domestic (indoor) use only**. Data is currently not available, but is being collected at the county level in 2010, available for reporting in 2011.

If Kittitas County meets the locally set target of 350 gallons per day per household, the county will have met water use recommendations established by the Washington State Department of Health and regulated by the Washington State Department of Ecology.



**Target: 350 gallons/day**



## Domestic Property Water Usage

Groundwater quantity is currently unknown in Kittitas County. Measuring household indoor and outdoor water usage, coupled with a ground water study, will help county residents determine appropriate water usage practices.

This indicator is a measure of **daily water withdrawals, in gallons, per household for indoor and outdoor use**. Data is currently not available, but is being collected at the county level in 2010, available for reporting in 2011.

If Kittitas County meets the locally set target of 1250 gallons per day per household, the county will have met water use recommendations established by the Washington State Department of Health and regulated by the Washington State Department of Ecology.

**Target: 1250 gallons/day**

# Solid Waste



Solid waste, more commonly known as garbage or trash, can range from kitchen scraps and household waste to large appliances or farm and ranch chemicals. If not properly disposed of, contaminants from solid waste materials can leach into groundwater, soil, or air, potentially causing contamination that can lead to human illness. Permitted solid waste facilities are responsible for ensuring deposited materials are properly sealed, stored, and disposed of. If a facility is out of compliance with its permit, the chance of soil, water, or air contamination is heightened.

## Solid Waste Facilities

Solid waste facilities accept, store, and dispose of approved waste products through recycling, reuse, or decontamination before transfer to a landfill or other disposal site.

This indicator is a measure of the **percentage of permitted solid waste facilities in substantial compliance with their permit conditions**. Statewide and national data are not available, but Kittitas County **did not meet the locally set target** in 2009. Between January and October 2009, 97.3% of solid waste facilities were in substantial compliance with their permit conditions.<sup>16</sup>

In 2008, 88.6% of solid waste facilities were in substantial compliance with their permit conditions.<sup>16</sup> Statewide and national data are not available.

**Target: 100%**



## Corrected Solid Waste Complaints

Solid waste complaints encompass permitted facilities and private residences, and can range from a pile of tires in a neighbor's yard to waste material leaking at a solid waste facility.

This indicator is a measure of the **percentage of identified solid waste complaints with appropriate corrective action initiated within two weeks**. Statewide and national data are not available, but Kittitas County **met the locally set target** in 2009. Between January and October 2009, 100% of solid waste complaints had appropriate corrective action initiated within two weeks.<sup>16</sup>

**Target: 100%**

Data is not available for 2008 at the county, state, or national level.

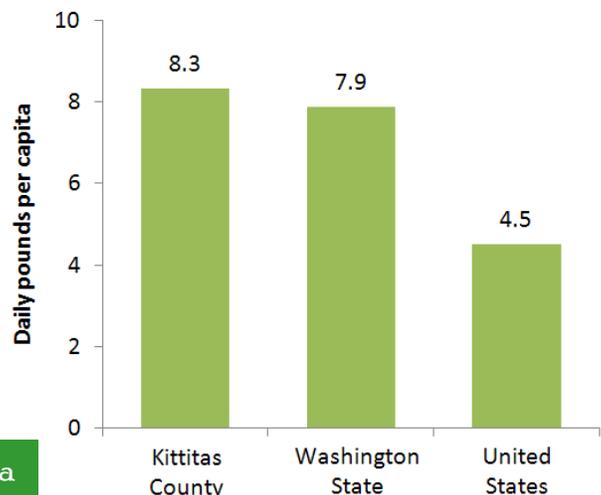
## Garbage Generated

Garbage, or municipal solid waste, is household waste material, including material that is eventually composted or recycled.

This indicator is a measure of **pounds of municipal solid waste (garbage) generated daily per capita**. Kittitas County **did not meet the locally set target** in 2007 when residents produced 8.3 pounds of garbage daily, including materials that are composted or recycled.<sup>21</sup> This rate is similar to Washington State (7.9 pounds)<sup>21</sup> but higher than the national rate (4.5 pounds, 2008).<sup>22</sup>

In 2006, 7.9 pounds of garbage were produced daily per capita in Kittitas County<sup>21</sup> compared to 8.0 pounds statewide<sup>21</sup> and 4.6 pounds nationally (2007).<sup>22</sup>

**Target: <5 pounds daily per capita**



Zoonotic and vectorborne diseases are illnesses carried and transmitted by vertebrates (pets, livestock, and wildlife) and arthropods (ticks, mites, mosquitoes, and fleas) to humans. Illnesses can be transmitted by ingestion of animal feces or urine, arthropod bites, or by direct contact such as bites or scratches. If an animal tests positive for a disease like West Nile virus or rabies, public health professionals will take actions to reduce and halt the spread of the disease.



## Rabies



Rabies is transmitted when the rabies virus makes contact with mucous membranes or open cuts in the skin. The public health department follows up with all reported animal bites in the county and sends suspect animals to a laboratory for rabies testing.

This indicator is a measure of the **number of positive animal rabies cases**. In 2009 Kittitas County **did not meet the locally set target**. There was one positive rabies case in Kittitas County.<sup>23</sup> Statewide, there were 14 positive cases of animal rabies<sup>23</sup> and 6940 cases nationwide (2006).<sup>24</sup>

In 2008 there were zero positive animal rabies cases in Kittitas County, 17 cases in Washington State,<sup>23</sup> and 6418 cases nationally (2005).<sup>24</sup>

Target: 0 cases

## West Nile Virus in Sentinel Animals

West Nile virus (WNV) is transmitted by blood to blood contact, primarily via mosquitoes. The virus often appears in birds and horses (called sentinel animals) before surfacing in humans. Therefore, WNV in birds and horses is an indicator of high WNV risk to humans.

This indicator is a measure of the **number of positive West Nile virus cases in sentinel animals**. Kittitas County **did not meet the locally set target** in 2009. Two birds and 16 horses tested positive for WNV.<sup>25</sup> Statewide, 22 birds and 73 horses were confirmed with WNV<sup>25</sup> compared to 725 birds and 260 horses nationally.<sup>26</sup>

In 2008 there were zero positive bird cases and one positive horse case of WNV in Kittitas County,<sup>25</sup> 24 bird and 41 horse cases statewide,<sup>25</sup> and 3026 bird and 224 horses cases nationally.<sup>26</sup>

Target: 0 cases



## West Nile Virus in Mosquitoes

West Nile virus (WNV) is transmitted by blood to blood contact, primarily via mosquitoes. By monitoring mosquitoes for WNV infection, public health officials can monitor the risk of human infection.

This indicator is a measure of the **number of West Nile virus cases in mosquitoes**. Kittitas County **did not meet the locally set target**. In 2009, two mosquito samples tested positive for WNV in Kittitas County<sup>25</sup> compared to 341 samples statewide<sup>25</sup> and 6295 samples nationally.<sup>26</sup>

In 2008 there were no mosquito WNV cases in Kittitas County,<sup>25</sup> 57 cases in Washington State,<sup>25</sup> and 8770 cases nationally.<sup>26</sup>

Target: 0 cases



# School Safety & Outdoor Air Quality



Throughout the school year, parents of Kittitas County children trust schools to keep their children safe and healthy while on school grounds. Individual school safety policies can ensure potential safety and health hazards are addressed.

Outdoor air quality can be affected by forest fires, weather patterns, pollution, pollens, and other factors. Poor air quality can cause adverse health effects in the very young, very old, or anyone with respiratory or cardiovascular disease. In high doses or with prolonged exposure, poor air quality can cause adverse health effects even in healthy people.

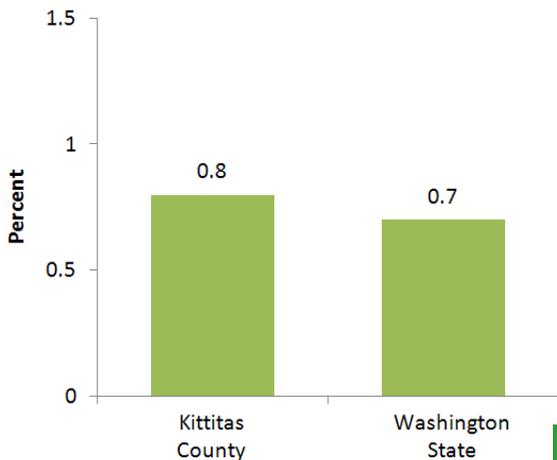
## School Safety Policies

Schools are individually responsible for developing and enforcing safety policies addressing health and injury hazards on school grounds. Though safety policies are not mandated by law, schools with policies are more likely to take precautions to protect students, staff, and community members from injury or illness while on school grounds.

This indicator is a measure of the **percentage of schools with school safety policies**. Statewide and national data are not available, but Kittitas County **met the locally set target** in 2009, with 100% of schools having a school safety policy in place.<sup>16</sup>

Data is not available for 2008 at the county, state, or national level.

**Target: 100%**



## 1-Hour Outdoor Air Quality

In this report, outdoor air quality is measured by particulate matter 2.5 (PM2.5), very fine particles (2.5  $\mu\text{m}$  or smaller in diameter) that can lodge deep in lung tissue if inhaled. PM2.5 can affect everyone, but even in short periods of time it can cause problems for the very old, very young, and people with asthma or other respiratory ailments if concentrations are high.

This indicator is a measure of the **percentage of 1-hour time period measurements with an average PM2.5 reading at or above 35  $\mu\text{g}/\text{m}^3$** . EPA standards require daily averages lower than 35  $\mu\text{g}/\text{m}^3$ . Kittitas County **did not meet the locally set target**. In 2008, PM2.5 reached 35  $\mu\text{g}/\text{m}^3$  or higher 0.8% of the time in Kittitas County.<sup>27</sup> Statewide, 0.7% of readings showed PM2.5 at 35  $\mu\text{g}/\text{m}^3$  or higher.<sup>27</sup> National data is not available.

**Target: 0%**

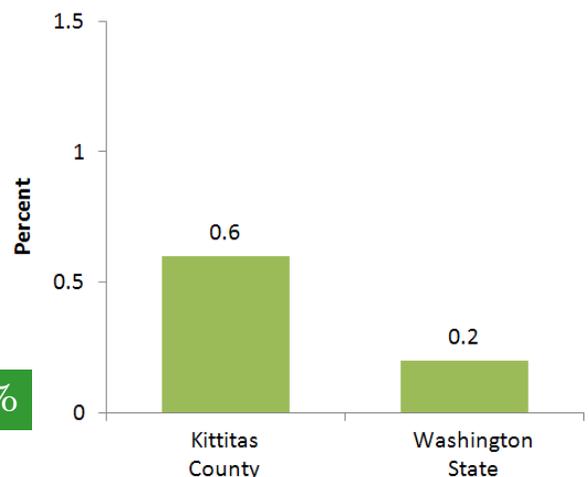
In 2007, 0.5% of readings in Kittitas County showed PM2.5 at 35  $\mu\text{g}/\text{m}^3$  or higher compared to 1.1% statewide.<sup>27</sup>

## 24-Hour Outdoor Air Quality

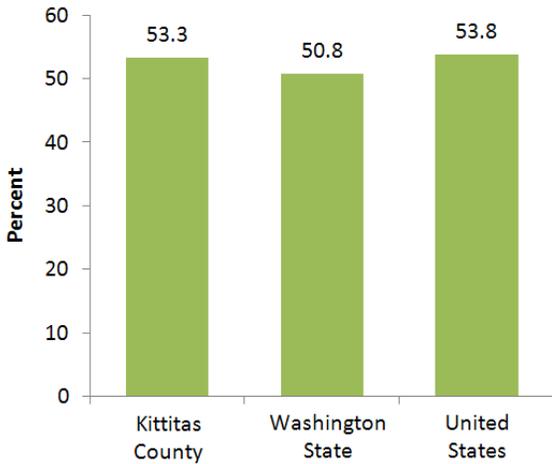
This indicator is a measure of the **percentage of 24-hour time period measurements with an average PM2.5 reading at or above 35  $\mu\text{g}/\text{m}^3$** . A 24-hour average at or above 35  $\mu\text{g}/\text{m}^3$  is considered unhealthy by the EPA. Kittitas County **did not meet the locally set target**. In 2008, PM2.5 reached 35  $\mu\text{g}/\text{m}^3$  0.6% of the time (2 of 360 days with available data) compared to 0.2% of readings statewide.<sup>27</sup> National data is not available.

In 2007, none of the 49 days in Kittitas County with available data had a 24-hour average PM2.5 value at or above 35  $\mu\text{g}/\text{m}^3$ .<sup>27</sup> Statewide, 0.5% of readings reached this critical value.<sup>27</sup>

**Target: 0%**



Some of the most important determinants of an individual's health are set before birth. By avoiding alcohol and tobacco during pregnancy a woman increases the chance that her child will be healthy at birth and later in life. Similarly, by eating a healthy diet and breastfeeding after childbirth, a woman can further increase the likelihood that her child will live a long, healthy life.



## Unintended Pregnancy

Intended pregnancies usually have better birth outcomes than unintended pregnancies. In this report, unintended pregnancies include unwanted and mistimed pregnancies (did not want to become pregnant ever or wanted to get pregnant later).

This indicator measures the **percentage of pregnancies that were unintended**. Kittitas County **did not meet the HP 2010 goal** in 2004–2006 when 53.3% of pregnancies were unintended.<sup>28</sup> Statewide, 50.8% of pregnancies were unintended<sup>28</sup> compared to 53.8% nationally (2002).<sup>29</sup>

In 2001–2003, 56.8% of Kittitas County pregnancies were unintended<sup>28</sup> compared to 54.4% statewide<sup>28</sup> and 49.0% nationally (1995).<sup>29</sup>

**Target: 30%**

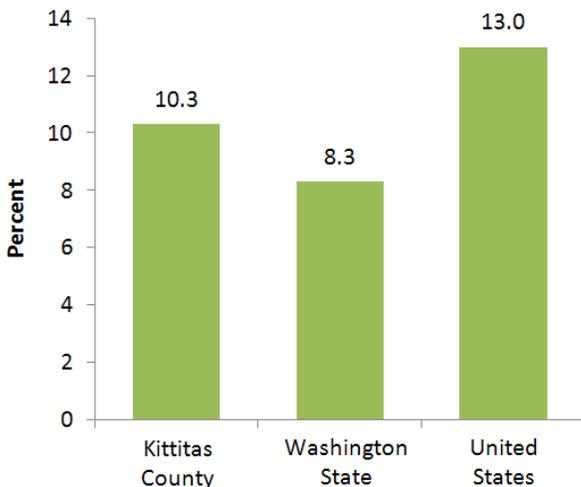
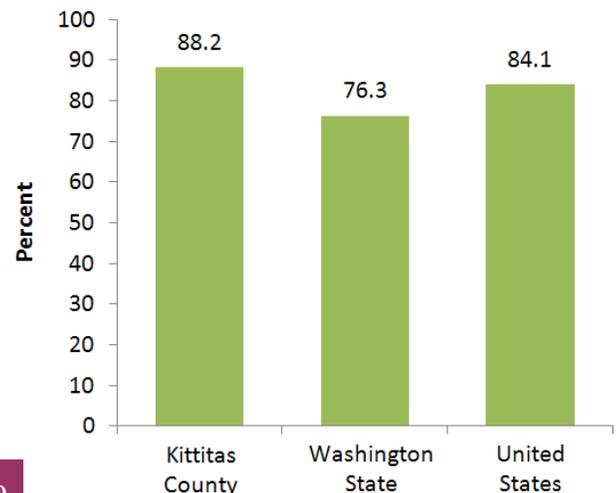
## Prenatal Care

Early prenatal care (within the first three months of pregnancy) is a determinant of positive birth outcomes. The earlier a woman knows she is pregnant, the sooner she can modify her behavior (if needed) to promote her health and the health of her baby.

This indicator measures the **percentage of women receiving prenatal care during the first trimester of pregnancy**. Kittitas County **did not meet the HP 2010 goal** in 2007 when 88.2% of women received prenatal care during the first trimester.<sup>30</sup> Statewide, 76.3% of women received first trimester prenatal care<sup>30</sup> compared to 84.1% nationally (2003–2005).<sup>31</sup>

In 2006, 89.0% of pregnant women in Kittitas County received first trimester prenatal care compared to 78.5% statewide.<sup>30</sup>

**Target: 90%**



## Prenatal Smoking

By avoiding tobacco during pregnancy a woman increases the chance that her child will be healthy at birth and later in life.

This indicator measures the **percentage of women who smoke during the third trimester of pregnancy**. Kittitas County **did not meet the HP 2010 goal** in 2007 when 10.3% of pregnant women smoked during the third trimester of pregnancy.<sup>30</sup> Statewide, 8.3% of women smoked during the third trimester<sup>30</sup> compared to 13.0% nationally (2004).<sup>32</sup>

In 2006, 7.5% of pregnant women in Kittitas County smoked during the third trimester compared to 8.5% statewide.<sup>30</sup>

**Target: 1%**

# Births



Certain things that occur during pregnancy can affect infant mortality (the death of children younger than one year of age). Factors that can contribute to infant mortality include smoking, drug and alcohol abuse, poor nutrition, stress, insufficient prenatal care, or chronic illness or other medical problems during pregnancy.

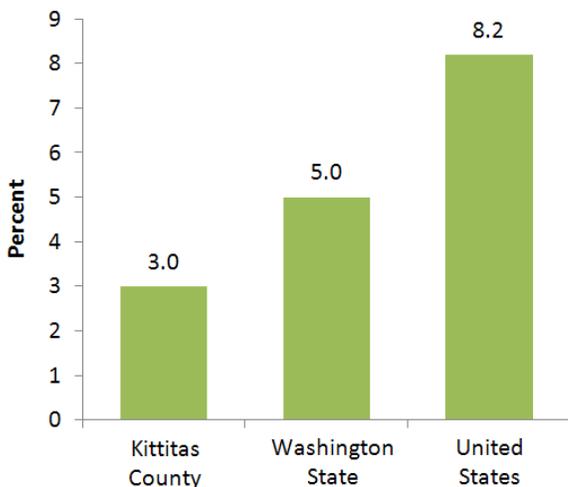
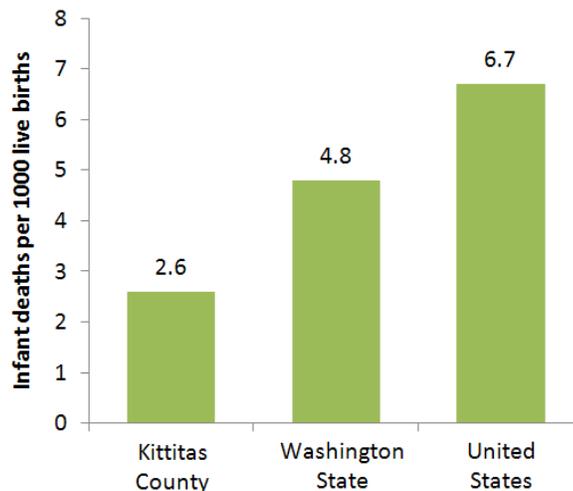
Certain factors at birth can also impact a child's life. Low birthweight babies are at increased risk for serious health problems as newborns, lasting disabilities, and certain chronic medical conditions as an adult. Children born to teen mothers are more likely to have chronic medical problems, exhibit behavior problems, and have lower cognitive attainment and proficiency scores at kindergarten entry.

## Infant Mortality

This indicator measures the **number of deaths of infants younger than one year of age per 1000 live births**. Kittitas County **met the HP 2010 goal** in 2007 with 2.6 infant deaths per 1000 live births.<sup>5</sup> Statewide, there were 4.8 infant deaths per 1000 live births<sup>5</sup> compared to 6.7 per 1000 births nationally (2006).<sup>33</sup>

In 2005 there were 3.0 infant deaths per 1000 live births in Kittitas County.<sup>5</sup> Statewide there were 5.1 deaths per 1000 live births<sup>5</sup> compared to 6.9 per 1000 births nationally.<sup>33</sup>

**Target: 4.5 per 1000**



## Low Birthweight

Low birthweight babies are born weighing 5.5 pounds or less. These babies are at increased risk for serious health problems as newborns, lasting disabilities, and certain chronic medical conditions as an adult.

This indicator measures the **percentage of babies born at a low birthweight**. Kittitas County **met the HP 2010 goal** in 2006 when 3.0% of babies born to Kittitas County residents had a low birthweight.<sup>28</sup> Statewide, 5.0% of babies had a low birthweight<sup>28</sup> compared to 8.2% nationally (2007).<sup>33</sup>

In 2005, 1.9% of babies born to Kittitas County residents had a low birthweight<sup>28</sup> compared to 4.7% statewide<sup>28</sup> and 8.3% nationally (2006).<sup>33</sup>

**Target: 5%**

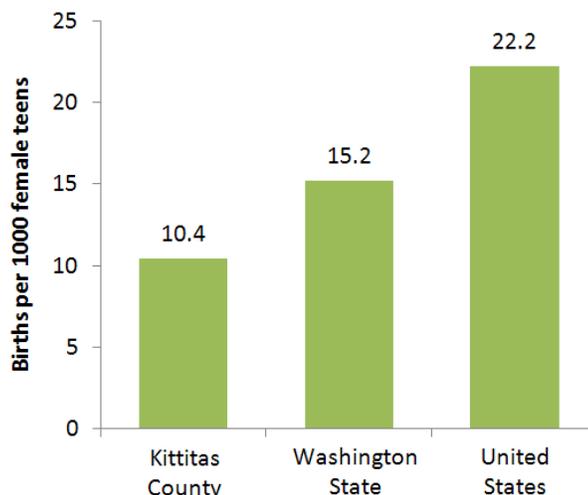
## Teen Birth Rate

In this report, the teen birth rate refers to the number of female teens ages 15–17 who give birth per 1000 female teens.

This indicator measures the **teen birth rate per 1000 female teens age 15–17**. Kittitas County **did not meet the locally set target** in 2006 when the teen birth rate was 10.4 births per 1000 female teens.<sup>28</sup> Statewide, there were 15.2 births per 1000 female teens<sup>28</sup> compared to 22.2 births per 1000 female teens nationally (2007).<sup>33</sup>

In 2005, local data is not available because there were less than five births meeting the criteria. There were 14.9 births per 1000 teens statewide<sup>28</sup> and 22.0 births per 1000 female teens nationally (2006).<sup>33</sup>

**Target: 10 per 1000**



Breastfeeding recommendations vary by organization, but many recommend breastfeeding exclusively for at least six months. This means that the baby should be fed breast milk only (no water, no juice, no nonhuman milk, and no foods).

There are benefits to breastfeeding for both babies and mothers. There is a lower risk of ear infections, asthma, obesity, diabetes, and sudden infant death syndrome in babies. Mothers have a lower risk of breast cancer, ovarian cancer, and postpartum depression.

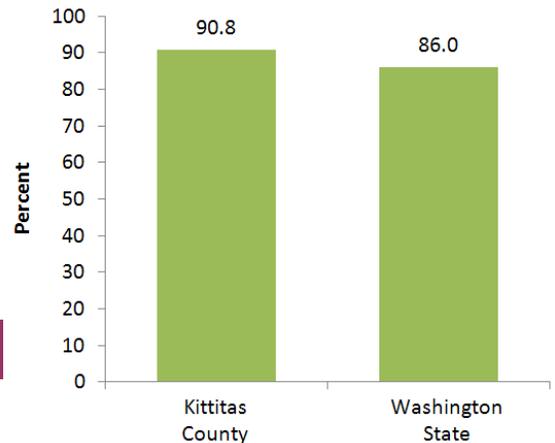


## Breastfeeding Initiation

This indicator measures the **percentage of women enrolled in the Women, Infants, and Children (WIC) Program who initiated breastfeeding their infants**. Kittitas County **met the HP 2010 goal** in 2008 when 90.8% of women enrolled in the WIC Program initiated breastfeeding their infants.<sup>34</sup> Statewide, 86.0% of women enrolled in the WIC Program initiated breastfeeding.<sup>34</sup> National data is not available.

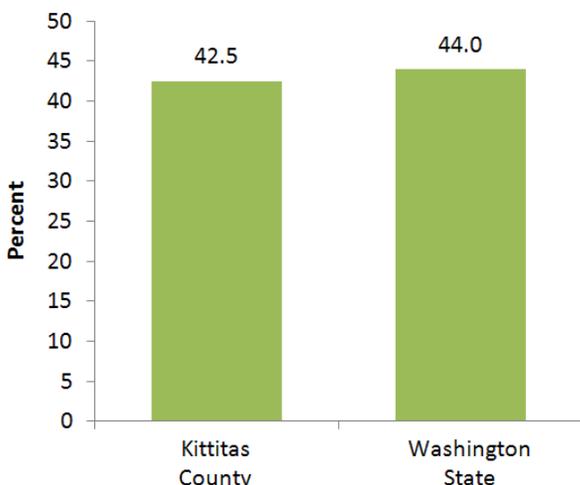
In 2006, 91.5% of Kittitas County women enrolled in the WIC Program initiated breastfeeding after giving birth, compared to 85.5% statewide.<sup>34</sup>

**Target: 75%**



## Did You Know...?

- Breast milk has disease-fighting cells called antibodies that help protect infants from germs, illness, and even Sudden Infant Death Syndrome (SIDS).
- Breastfeeding is linked to a lower risk of ear infections, asthma, obesity, diabetes, and stomach viruses in infants.
- Breastfeeding is linked to a lower risk of breast cancer, ovarian cancer, and postpartum depression in mothers.
- For most babies, breast milk is easier to digest than formula.
- Premature babies do better when breastfed compared to premature babies who are fed formula.
- Breastfeeding can save you between \$1,160 and \$3,915 per year, depending on the brand of formula.
- Fully breastfed infants typically need fewer sick care visits, prescriptions, and hospitalizations than never-breastfed infants.
- Breastfeeding mothers miss less work.



## Breastfeeding Duration

This indicator measures the **percentage of women enrolled in the Women, Infants, and Children (WIC) Program who breastfed their infant for at least six months**. Kittitas County **did not meet the HP 2010 goal** in 2008 when 42.5% of women enrolled in the WIC Program breastfed their infant for at least six months.<sup>34</sup> Statewide, 44.0% of women enrolled in the WIC Program breastfed their infant for at least six months.<sup>34</sup> National data is not available.

**Target: 50%**

In 2006, 44.3% of Kittitas County women enrolled in the WIC Program breastfed their infant for at least six months, compared to 44.4% statewide.<sup>34</sup>

# Mental Health and Depression



Mental health indicators are difficult to track and interpret because they are so complex and are impacted by a variety of factors. In addition, most mental health indicators are self-reported. Self-reported data are less accurate when dealing with sensitive and personal issues, such as mental health.

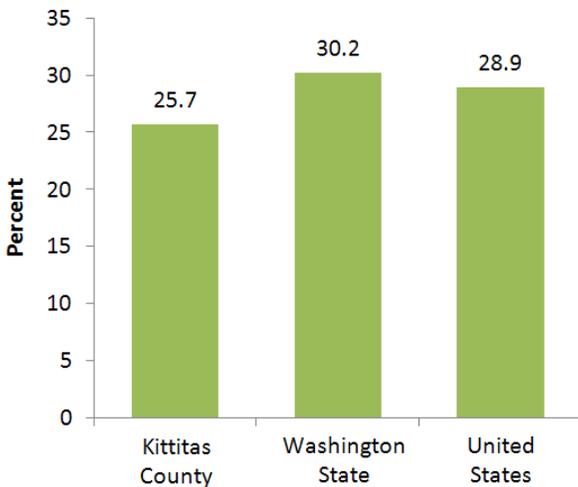
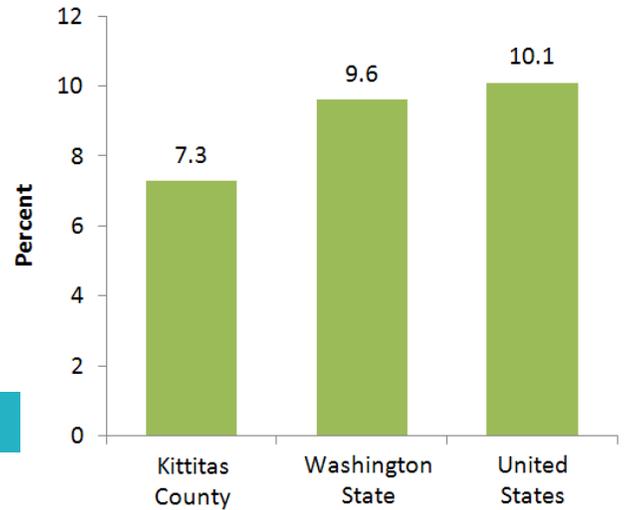
## Adult Mental Health

Mental health includes stress, depression, and problems with emotions.

This indicator measures the **percentage of adults who reported poor mental health for at least 14 of the past 30 days**. Kittitas County **did not meet the locally set target** in 2007 when 7.3% of adults reported poor mental health for at least 14 of the past 30 days.<sup>1</sup> Statewide, 9.6% of adults reported poor mental health compared to 10.1% nationally.<sup>1</sup>

In 2006, 10.3% of adults in Kittitas County reported poor mental health for at least 14 of the past 30 days compared to 9.4% statewide and 10.2% nationally.<sup>1</sup>

**Target: 2%**



## Youth Depression

A depressive episode involves feeling so sad or hopeless every day for at least two weeks that a person stops doing some normal activities.

This indicator measures the **percentage of 10th grade students who report a depressive episode in the previous 12 months**. Kittitas County **did not meet the locally set target** in 2008 when 25.7% of 10th grade students reported a depressive episode in the previous 12 months.<sup>4</sup> Statewide, 30.2% of 10th grade students reported a depressive episode<sup>4</sup> compared to 28.9% nationally (2007).<sup>14</sup>

In 2006, 32.6% of 10th grade students in Kittitas County reported a depressive episode in the previous 12 months<sup>4</sup> compared to 30.3% statewide<sup>4</sup> and 28.9% nationally (2005).<sup>14</sup>

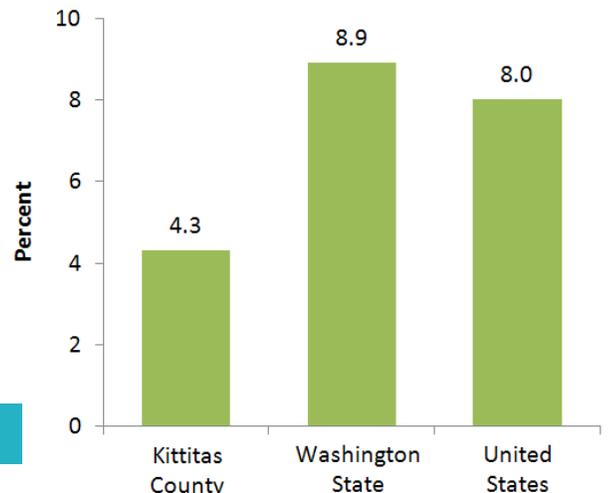
**Target: 15%**

## Youth Suicide Attempts

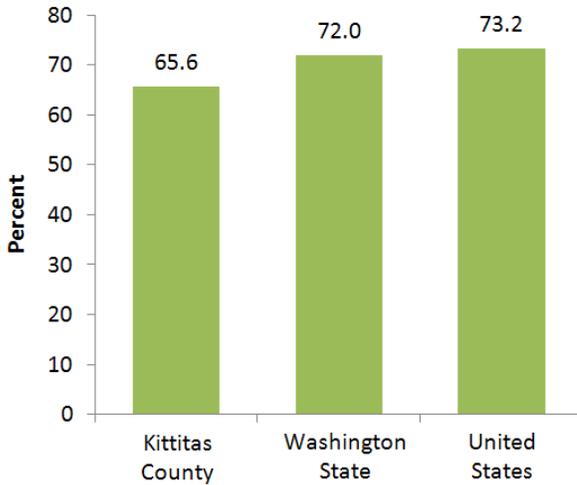
This indicator measures the **percentage of 10th grade students who report a suicide attempt in the previous 12 months**. Kittitas County **did not meet the HP 2010 goal** in 2008 when 4.3% of 10th grade students reported a suicide attempt in the previous 12 months.<sup>4</sup> Statewide, 8.9% of 10th grade students reported a suicide attempt<sup>4</sup> compared to 8.0% nationally (2007).<sup>14</sup>

In 2006, 4.5% of 10th grade students in Kittitas County reported a suicide attempt in the previous 12 months<sup>4</sup> compared to 4.6% statewide<sup>4</sup> and 9.1% nationally (2005).<sup>14</sup>

**Target: 1%**



The health of society is based on the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics. These are called the social determinants of health.



## High School Graduation Rates

Adults with at least a high school diploma tend to be healthier, earn higher wages, and live longer than those without a high school diploma.

This indicator measures the **percentage of youth who graduate from high school on time**. Kittitas County **did not meet the HP 2010 goal** in 2008 with 65.6% of youth graduating from high school on time.<sup>35</sup> Statewide, 72.0% of youth graduated on time<sup>35</sup> compared to 73.2% nationally (2007).<sup>36</sup>

In 2006, 85.9% of youth in Kittitas County graduated from high school on time<sup>35</sup> compared to 70.4% statewide<sup>35</sup> and 74.7% nationally (2005).<sup>36</sup>

**Target: 90%**

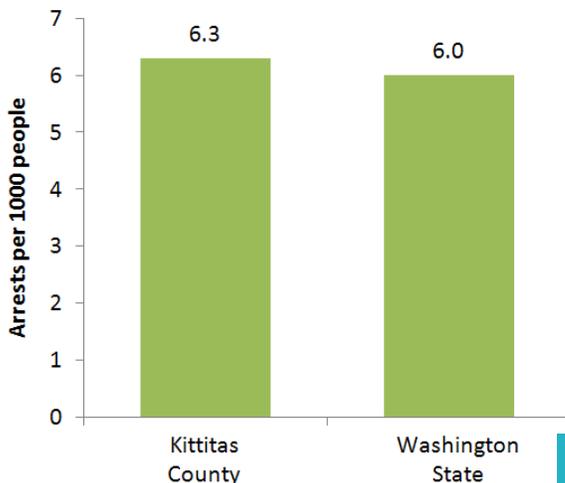
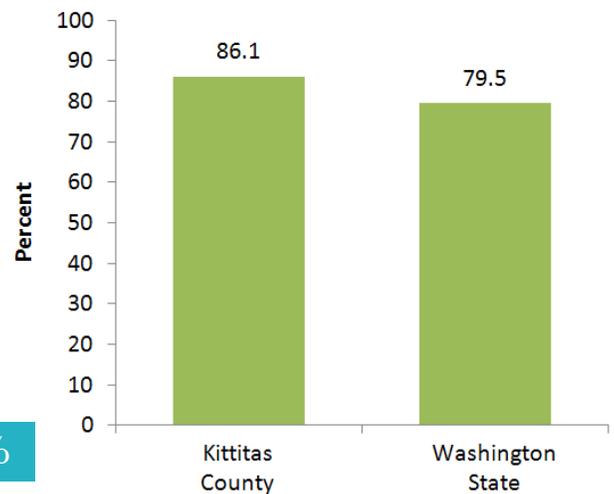
## Youth Food Security

Food security means having enough to eat on a regular basis. While food banks and other charities address food security problems due to financial shortcomings, food access is still a problem for many youth.

This indicator measures the **percentage of 10th grade students who never skip meals or eat less due to financial shortcomings**. Kittitas County **did not meet the HP 2010 goal** in 2008 when 86.1% of 10th grade students reported sufficient food security.<sup>4</sup> Statewide, 79.5% of 10th grade students had sufficient food security.<sup>4</sup> National data is not available.

In 2006, 88.4% of 10th grade students in Kittitas County reported sufficient food security compared to 78.3% statewide.<sup>4</sup>

**Target: 94%**



## DUI Arrests

Driving under the influence (DUI) of alcohol or other drugs is dangerous for the driver and passengers, as well as for other motorists or pedestrians who happen to cross paths with the impaired driver.

This indicator measures the **rate of DUI arrests per 1000 people (including non-drivers)**. Kittitas County **did not meet the locally set target** in 2008 with 6.3 arrests per 1000 people.<sup>37</sup> Statewide, 6.0 arrests were made per 1000 people.<sup>37</sup> National data is not available.

In 2006, 14.1 arrests were made per 1000 people in Kittitas County compared to 6.7 arrests per 1000 people statewide.<sup>37</sup> The higher rate of arrests in Kittitas County during 2006 may be due an increase in patrols focused on impaired driving rather than an actual difference in the number of impaired drivers.

**Target: 1 per 1000**

# Abuse and Neglect



Abuse and neglect are important social determinants of health. They can be inflicted on those of any age, but older adults, disabled adults, and children are most vulnerable. Forms of inflicted abuse can be physical, emotional, sexual, or substance (in the case of an unborn child). Abuse and neglect can include physical, medical, educational, or emotional neglect, or abandonment. Social support networks can help reduce abuse and neglect.

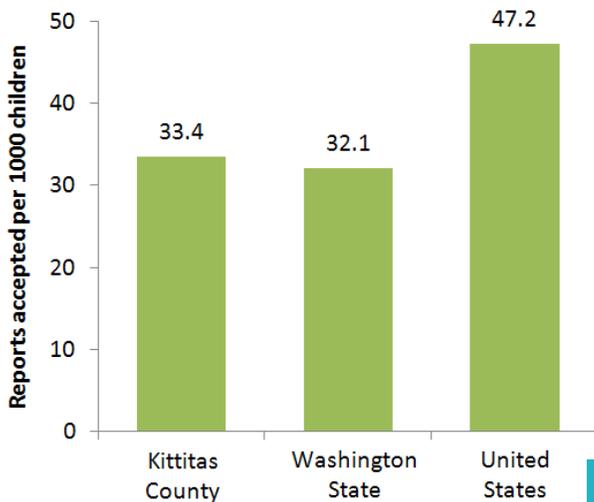
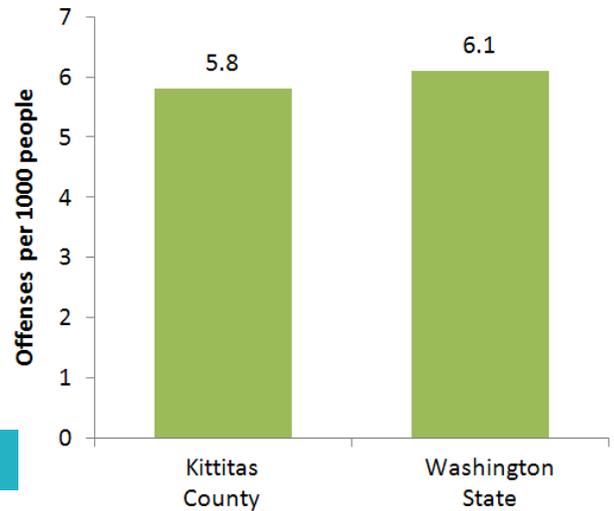
## Domestic Violence Offenses

Domestic violence includes any violence of one family member against another family member. Acts of domestic violence are often not reported to police when they should be.

This indicator measures the **number of reported domestic violence offenses per 1000 people**. Kittitas County **did not meet the HP 2010 goal** in 2007 with 5.8 offenses reported per 1000 people.<sup>28</sup> Statewide, 6.1 offenses were reported per 1000 people.<sup>28</sup> National data is not available. Note that the HP 2010 goal is 3.3 *actual* incidences per 1000 people (rather than the number of *reported* incidences per 1000 people as presented here).

In 2006, there were 3.2 offenses reported per 1000 people in Kittitas County and statewide.<sup>28</sup>

**Target: 3.3 per 1000**



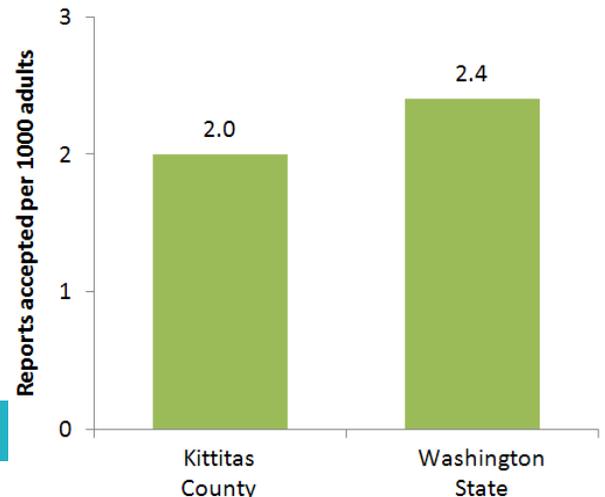
## CPS Reports Accepted

Anyone can report suspected child abuse or neglect to the division of Child Protective Services (CPS). In Washington, some people (such as health care professionals) are required by law to report suspected abuse or neglect. If a report is deemed credible by CPS, it will be accepted for follow-up. CPS may have another name in other states.

This indicator measures the **rate of reports accepted by CPS per 1000 children age 0–17**. Kittitas County **did not meet the HP 2010 goal** in 2008 with 33.4 reports accepted by CPS per 1000 children.<sup>28</sup> Statewide, 32.1 reports were accepted by CPS per 1000 children compared to 47.2 reports accepted per 1000 children nationally (2007).<sup>28</sup>

In 2006, there were 46.6 reports accepted by CPS per 1000 children in Kittitas County compared to 34.3 reports per 1000 children statewide and 47.9 per 1000 children nationally.<sup>28</sup>

**Target: 10.3 per 1000**



## Vulnerable Adult Abuse Referrals

Some adults are considered vulnerable to adult abuse. These include older adults and those with developmental or other disabilities. Adult abuse can be physical, emotional, financial, neglectful, or sexual.

This indicator measures the **number of vulnerable adult abuse reports accepted by the Department of Social and Human Services (DSHS) per 1000 adults age 20 and older**. Kittitas County **did not meet the locally set target** in 2008 with 2.0 accepted reports per 1000 adults.<sup>38</sup> Statewide, 2.4 reports were accepted per 1000 adults.<sup>38</sup> National data is not available.

In 2006, there were 1.3 reports accepted per 1000 adults in Kittitas County compared to 2.3 reports accepted per 1000 adults statewide.<sup>38</sup>

**Target: 0.1 per 1000**

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