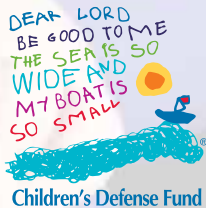




Ohio's Kids Count!



2008 Data Book

Produced by Children's Defense Fund-Ohio

KIDS COUNT Online

NATIONAL KIDS COUNT

www.kidscount.org

CLIKS: COMMUNITY – LEVEL INFORMATION ON KIDS

www.kidscount.org/cliks

STATE LEVEL DATA ONLINE

www.kidscount.org/sld

OHIO'S KIDS COUNT

www.childrensdefense.org/ohio

We appreciate and thank the Annie E. Casey Foundation for its funding and support of the publication of this data book. The findings and conclusions presented in this book are those of Children's Defense Fund-Ohio, and do not necessarily represent the opinions of the Foundation.

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What Is KIDS COUNT?



KIDS COUNT is a project of the Annie E. Casey Foundation which is a national and state-by-state effort to track the status of children in the U.S. By providing policymakers and citizens with benchmarks of child well-being, the KIDS COUNT goal is to enrich local, state, and national discussions concerning ways to secure better futures for all children.

Children's Defense Fund-Ohio serves as the state-level KIDS COUNT grantee for Ohio. As part of the KIDS COUNT network, CDF-Ohio strives to improve programs and policies for children and families by collecting and reporting credible data and promoting the use of data-based advocacy and communications strategies by releasing periodic issue briefs, issuing an annual state data book regarding the well-being of children and families in Ohio, and providing other resources available on our website. Please visit our website at www.childrensdefense.org/ohio to locate an electronic copy of this data book, the state and county fact sheets, other resources and previous KIDS COUNT publications. CDF-Ohio staff is available to present KIDS COUNT information to groups and agencies.

OHIO'S KIDS COUNT is a project of Children's Defense Fund-Ohio.

About Children's Defense Fund



Children's Defense Fund (CDF) was founded in 1973 by Marian Wright Edelman to provide a strong and effective voice for *all* the children of America, since they cannot vote, hire lobbyists, or speak out for themselves. CDF's Leave No Child Behind® mission is to ensure every child a *Healthy Start*, a *Head Start*, a *Fair Start*, a *Safe Start*, and a *Moral Start* in life and successful passage to adulthood with the help of caring families and communities.

We pay particular attention to the needs of poor and minority children and those with disabilities. CDF encourages preventive investment before children get sick or into trouble, drop out of school or suffer family breakdown. Using research and data, we work to shape federal, state and local policies that best serve our children's needs in a cost-effective manner.

CDF is a private, nonprofit, nonpartisan research and advocacy organization supported by foundations, corporate grants, and individual donations. As an independent voice for children, CDF does not accept government funds. Children's Defense Fund-Ohio began its work in 1981.

OHIO'S KIDS COUNT: 2008 Data Book

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About This Data Book

Ohio's KIDS COUNT: 2008 Data Book provides the most current, accurate information available about the well-being of Ohio's children for the state and within each of the eighty-eight counties. It contains updated comparison data for the 14 indicators in four categories of well-being. Each well-being category includes information about and a summary of the trends for each of the indicators. There are also charts and graphs that compare the state and county data as well as additional links to resources to help readers better understand and make the data useful. Highlights of programs with promising practice to improve the well-being of children have been included in each section. Technical and data notes have been included, which provide definitions and identify data sources.

In addition to the standard 14 indicators, a fact page has been added which provides state and county data for 11 Healthy People 2010 (HP 2010) child health indicators. This data includes the HP 2010 goal as well as the state and county measures to allow comparisons for each indicator.

There are individual fact sheets which contain data on the indicators for Ohio and each of the 88 counties. The data book and the fact sheets are also available on our website at www.childrensdefense.org/ohio.

INTRODUCTION

“ *If our American way of life fails the child, it fails us all.* ”

— Pearl S. Buck



The **BUCKEYE!** Ohioans have been identified with the fruit of the buckeye tree since the 1700s when the Indians bestowed the nickname of “Hetuch”—which means “eye of the buck deer”—on Col. Ebenezer Sproat, who opened the first court in the Northwest Territory located in Marietta. The nickname was passed on to other Ohioans and eventually to the state. Another accepted explanation is that the nickname refers to the large number of buckeye trees native to Ohio. The Ohio Legislature officially adopted the buckeye tree as the state tree in 1953. The buckeye tree grows best in deep fertile soils, and a mature tree can reach heights of more than 60 feet. The bark has been used for furniture, caskets, and artificial limbs. The nut is food for animals; furthermore, it has been used by humans as a good luck charm, a cure for many ailments, and a symbol for a nationally recognized state university.

Given the strong connection that Ohioans have to the buckeye, one would imagine that if there was a threat to the existence of the buckeye tree, the citizens of Ohio would come to its defense. Fortunately, the well-being of the buckeye tree is not in jeopardy; however, there is a threat to the well-being of some of the most vulnerable Buckeyes in Ohio—**OUR CHILDREN**. With the information provided in this year’s data book on *economic security, education, safety and the focus on health*, the hope is that the mature Buckeyes of Ohio will come to the rescue of the young, developing Buckeyes who are at risk of successfully thriving and putting down roots by providing them with fertile soil and the nurturing environment where they can grow and become future strong, healthy and productive Buckeye citizens.

The data in this year’s book has been updated to assess the trends of 14 measures in areas that make a difference in the well-being of children before and after they are born. The four categories are:

ECONOMIC SECURITY • HEALTH • EDUCATION • SAFETY

For the state and county fact sheets, the most recent figures are compared with corresponding data from 2001 to assess the trends for each indicator over time. For some measures there has been improvement; others have worsened, while others remain stagnant.



*“ One generation plants the trees;
another gets the shade. ”*

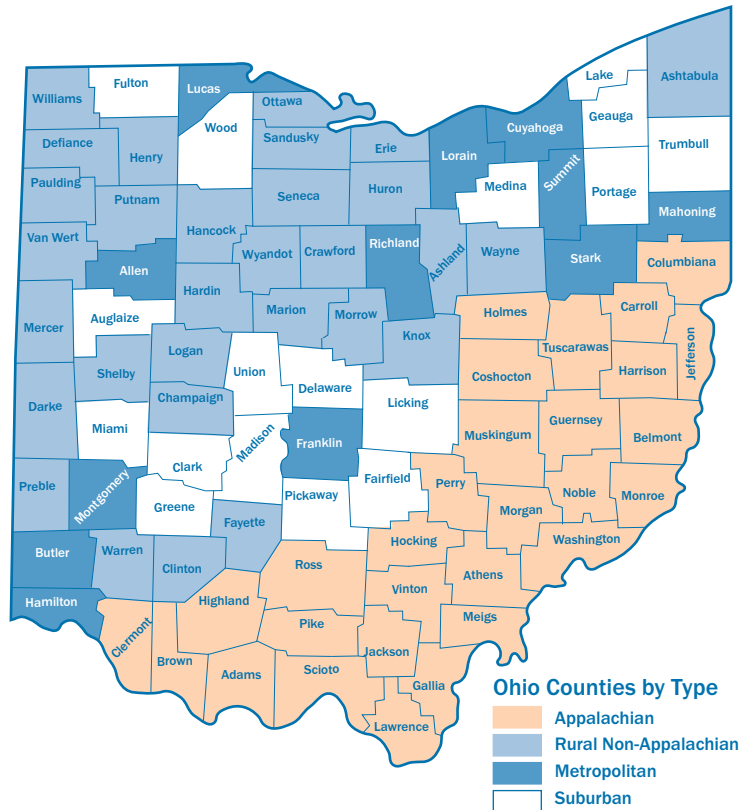
– Chinese Proverb

Since the physical and mental health of children before and after birth are critical factors in successful outcomes for children and the community, an additional focus in this year’s data book is the impact on Ohio from the implementation of the Healthy People 2010 (HP 2010) federal initiative. State and county measurements for Ohio’s children are provided for the child health indicators identified by HP 2010, along with the HP 2010 goals for each indicator. These comparisons will allow communities to gauge their need for resources as well as acknowledge their successes since the quality of the health of our children reflects the quality of the health of our communities.

As one of our state’s most precious resources and a gauge for the well-being of Ohio’s future, **our children** need as much and more protection and nurturing as we would give the Buckeye tree if its future were in jeopardy. This book is dedicated to all of our young Buckeyes.

December 2008, Children’s Defense Fund Ohio

LOOKING AT TRENDS OF OHIO'S CHILDREN



For this year's KIDS COUNT publication, Children's Defense Fund-Ohio is taking data analysis a step further. Last year, 14 indicators within four broad categories—**Economic Security, Health, Education, and Safety**—were selected to measure the well-being of Ohio's children. While the focus will remain on the same 14 indicators, new charts will allow readers to see how the indicators' rates change over time, comparing each county's trends to Ohio's trends as a whole. A few of the indicators have been reworded logically so that for every indicator, an increase is "worse," while a decrease is "better." For example, instead of reporting the graduation rate for the counties, we now report the rate of those not graduating, since an increase in this rate would be "worse." The data for select indicators is also disaggregated to look at how the county type—**Appalachian, Rural, Metropolitan, or Suburban**—influences (or does not influence) how the numbers look.

ECONOMIC SECURITY

Ohio's KIDS COUNT measures economic security by looking at the following indicators: children living in poverty; children receiving free or reduced price school lunch; children receiving food stamps; children in the child care assistance program; and state and county unemployment rates. Our trends analysis focuses on two of these: Child poverty and child care assistance.

Children in Poverty

Poverty is a powerful word; by powerful, it is meant that the word carries a mixed bag of connotations with it. When discussing economic conditions here in the United States, poverty as depicted in the media is usually a decaying urban core, with decrepit, boarded up houses; vacant, overgrown lots where businesses *used* to be; a horrific public school system where students cannot even get up-to-date textbooks and have little hope of moving on to higher education; and, of course, a poor, minority population that has inherited this desolate wasteland that was written off long-ago as a “poor investment area.” And there is nothing inaccurate about this description; however, it should be noted that this is not the only form that poverty can take. It can also be Appalachian, which is predominately white, has little development, small populations, few jobs, and few services—in all, Appalachian poverty means *isolation*. More so now than ever, though, poverty is beginning to become a reality for many Ohioans, and not just in the “official” Census Bureau definition. That is why Ohio's KIDS COUNT looks at more than just poverty rates. Poverty manifests itself in children eligible for free/reduced price lunch, children eligible for food stamps, children in the child care assistance program, and so on. With the nation's economy in a recession, inflation on the rise, and prices for basic necessities such as food increasing more than ever, poverty needs to be looked at in a more inclusive manner.

The rate of children living in poverty in Ohio increased from less than 15 percent in 2001 to more than 18 percent in 2005, a nearly 25 percent increase (Refer to Chart 1). Yet

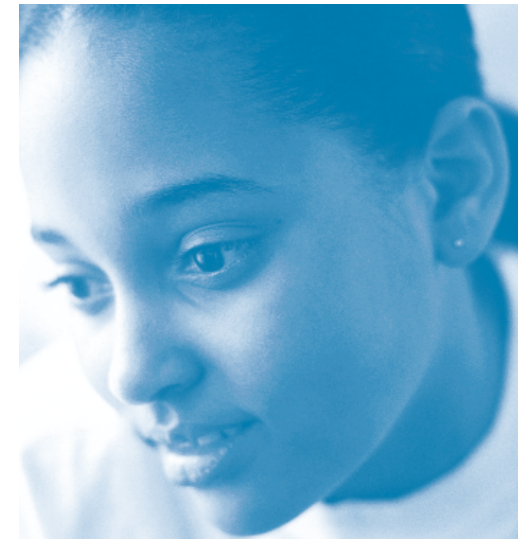
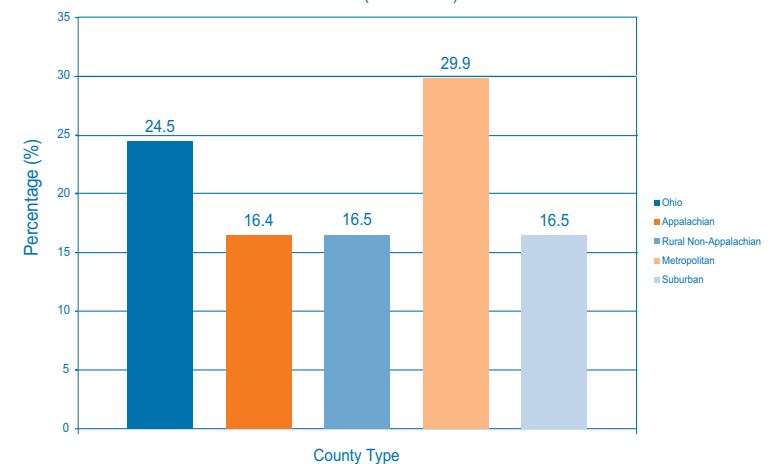


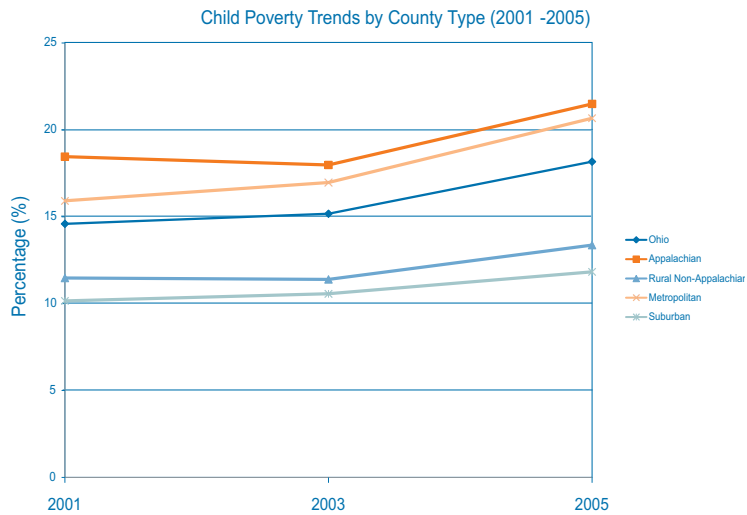
Chart 1

Percent Increase in % of Children in Poverty by County Type (2001-2005)



ECONOMIC SECURITY

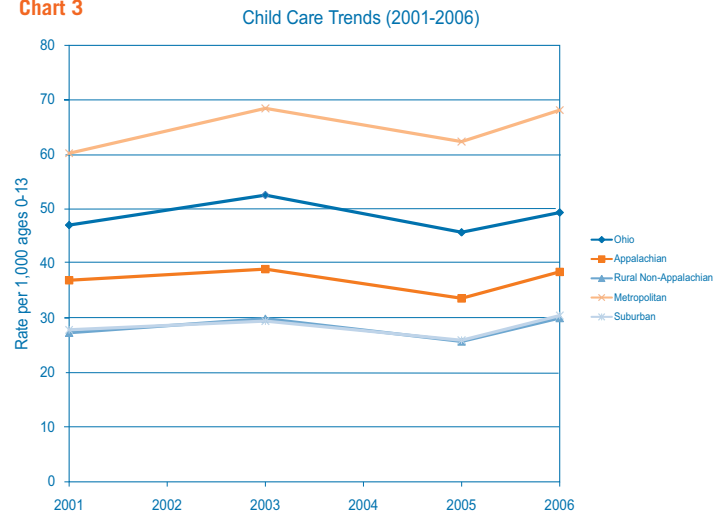
Chart 2



when broken down into the county types, metropolitan counties clearly experienced a greater increase of children in poverty than did the other county types. Appalachian, rural non-Appalachian, and suburban counties each saw an approximately 16.5 percent increase of children in poverty; contrastingly, metropolitan counties averaged a 30 percent increase. In terms of the actual poverty values, however, Appalachian counties consistently have the highest average rate of children in poverty: In 2005, 21.5 percent of children in Appalachian counties lived in poverty. But metropolitan counties are closing in on Appalachian counties, bringing a nearly three percent margin in 2001 down to less than one percent with a 2005 child poverty rate of 20.7 percent.

Though child poverty is increasing in rural non-Appalachian and suburban counties at roughly the same rate as Appalachian counties, the poverty rates themselves are drastically different. Children are faring much better in suburban and rural counties than in the Appalachian region, with poverty rates hovering around 12 and 13 percent as of 2005, respectively (*Refer to Chart 2*). Some Appalachian counties had over 30 percent of children living below the poverty line in 2005: Gallia (32.5%), Meigs (30.9%), Pike (30.1%), and Scioto (35.4%); many more are nearing the 30 percent mark. Similarly, some metropolitan counties had over 20 percent of their children living in poverty in 2005: Cuyahoga (25.4%), Franklin (20.1%), Lucas (25.2%), Mahoning (21.5%), and Montgomery (22.2%). In stark contrast, numerous rural and suburban counties had less than ten percent of their children living in poverty in 2005, with Warren and Delaware just above five percent.

Chart 3



Child Care Assistance

In the past, Ohio's KIDS COUNT has looked at the raw numbers of children in a child care assistance program. For comparison purposes, Ohio's KIDS COUNT decided to look at the rate of children in the program per 1,000 children ages 0-13, 13 being the age limit of the program (see data notes). By doing this, it is clear that metropolitan counties have consistently had rates well above the state average, and are more than double the rates of rural and suburban counties (*Refer to Chart 3*). Metropolitan averages were between 60 and 70 (children per 1,000 ages 0-13) from 2001 to 2006, while state averages were between 45 and 50 for the same time period. Rural and suburban counties experienced

nearly identical averages of 25 to 30 during this time period, and Appalachian counties had rates in the mid- to upper-thirties.

Also, when the rate of change over time is calculated, it is apparent that while all four county types experienced an increase of children in the child care assistance program from 2001 to 2006, metropolitan counties appear to be experiencing the greatest increase: The rate increased more than 13 percent from 2001 to 2006 (Refer to Chart 4). Although Appalachian counties have consistently experienced the second-highest rates of children in the program, these counties experienced the lowest increase in the rate over the 2001-2006 time period, even lower than the state as a whole. Also, somewhat surprisingly, the rural and suburban counties both experienced nearly ten percent increases in their rates of children in the program, which is not far behind the metropolitan counties' rate increase.

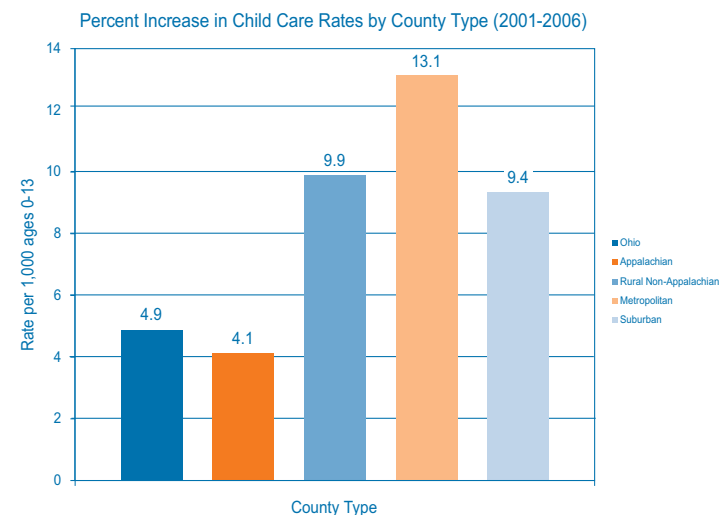
This data certainly provides food for thought. For instance, why do Appalachian counties have the highest child poverty rates and at the same time a relatively low rate of children in the child care assistance program? And why are metropolitan counties seeing the greatest increase in the rate of children in the program out of the four county types, while Appalachian counties are seeing the smallest increase when according to the data both county types have significant levels of child poverty? Perhaps this indicates that poverty is more complicated than just the income measurement that is so often employed.

Turning Data into Action

Finding Solutions for Childhood Food Insecurity

What would make a mother so desperate as to put a lock on the refrigerator or bind her children's hands to keep them from eating the food that must stretch until the end of the month? This was a reality in Cincinnati and resulted in the mother being charged with child abuse and her children placed in foster care. Hunger does not stop when the food stamps run out or on weekends when school is out. In Cincinnati, about 22,000 public school students receive free school lunch because of low family income. But what happens when school is out for weekends, holidays and breaks? With incomes and job availability not keeping up with food prices, these children are always at risk of missing meals and going to bed hungry.

Chart 4



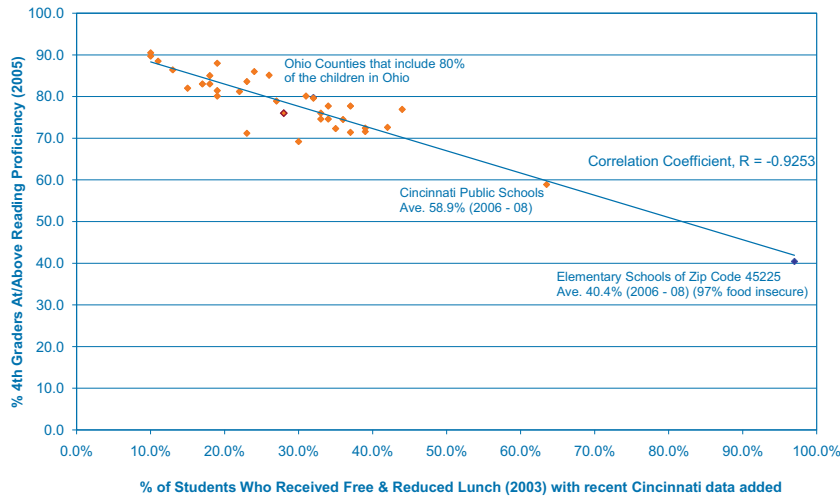
Average Weekly Cost for Full Time Child Care

Child Care Center	2006	2007
Infant	\$157	\$172
Toddler	\$142	\$152
Preschooler	\$128	\$136
Schoolager	\$110	\$119
Family Child Care Home	2006	2007
Infant	\$122	\$132
Toddler	\$116	\$125
Preschooler	\$110	\$118
Schoolager	\$100	\$109

Source: Ohio Child Care Resource and Referral Association

Table 1

Table 1: Students who Received Free & Reduced Price Lunch in 2003 are less likely to reach 4th Grade Reading Proficiency in later years



Childhood Food Solutions (CFS) has attacked this problem—properly called “food insecurity” and it is more than the here and now of being hungry; rather, it is a set of behaviors that develop from not knowing when or from where your next meal will come.

What would you do if you were 12 years old and often hungry? Would you hoard food when you get it or hope your friend has food? Would you turn to selling drugs or to a man who is interested in you sexually? These are real solutions to a real problem that exists in many communities in Ohio.

Food is the most basic of human needs, so getting food takes precedence over getting an education, even though education might be a better long-term solution. Opportunities for drug-running and prostitution exist long before these children have gained conventional employment skills.

In fact, the devastating effect of food insecurity is clear by the time children are tested for 4th grade reading proficiency. Although students with low family income receive free lunch on school days, school only accounts for 178 days a year, and the other 187 days are food-insecure days.

The following data and tables provided by CFS.

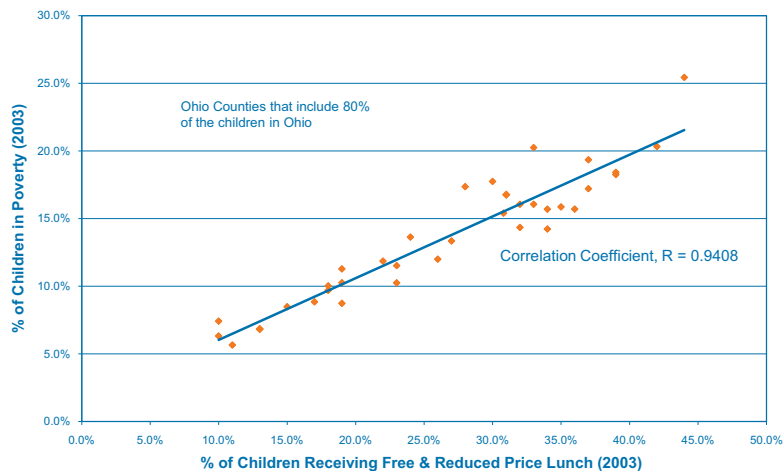
Table 1 shows the reading proficiency of 4th graders for counties across Ohio. In counties where more children need free lunch, reading proficiency becomes worse. CFS began its work in Cincinnati zip code 45225, a community with about 97% childhood food insecurity, no soup kitchen or “food line,” and very low reading proficiency—only about 40% of these food-insecure 4th graders are proficient in reading.

Table 2 shows the high correlation between poverty and food insecurity. We do not know which comes first. But, if hungry children do not learn to read, that will lead to poverty and poverty means insufficient food—a vicious cycle.

By about the sixth grade, a girl’s sexuality becomes of interest to successful men who can provide food. See **Table 3** to view the high adolescent birth rates that accompany food insecurity.

Table 2

Table 2: Poverty has a Very High Correlation with Free & Reduced Price Lunch



Also, by about the 6th grade, drug-running becomes an option for putting food on the table. Tables 4 and 5 explore the incidence of “adolescent adjudication for felonies.” These two tables show the relationship between literacy, food insecurity, and criminal behavior: **Table 4** correlates with what many incarceration experts say—most offenders failed to learn to read by the 4th grade – and **Table 5** confirms the correlation with food insecurity.

Table 6 shows that larger Ohio counties have the most significant food insecurity and that the Cincinnati Public School District, larger than many counties, has a serious problem.

Table 7 confirms that poor 4th grade math proficiency also correlates with food insecurity.

Studies have shown that children without an adequate diet have difficulty thriving. They are more likely to become ill and recover slowly from illness. They have trouble concentrating in school and do poorly on standardized tests. Ultimately, poor school performance hinders chances for an adequate career, resulting in low adult income and potential contribution to the community. Food insecurity in childhood contributes to an ongoing cycle of poverty. Food-insecure neighborhoods have three times as many births as food-secure communities and many food-insecure children are on a pathway to jail instead of a career.

Many surveys underestimate the extent of childhood food insecurity because mothers do not admit to having hungry children for fear they will be removed from them, and children rarely tell about their hunger for fear of being taken from their family. Based on the 2007 Hormel Hunger Survey, Cincinnati Children’s Hospital Survey and demographic information, about 35,000 children in Hamilton County Ohio (includes Cincinnati) are food insecure.

In response to this problem, CFS was founded in July 2007 by seven individuals in Cincinnati who were convinced of the overwhelming need to feed hungry children and convicted by a desire to do something about hunger in their community one zip code at a time. Their mission is to

Table 3

Table 3: Adolescent Birth Rate has a Very High Correlation with Free & Reduced Price Lunch

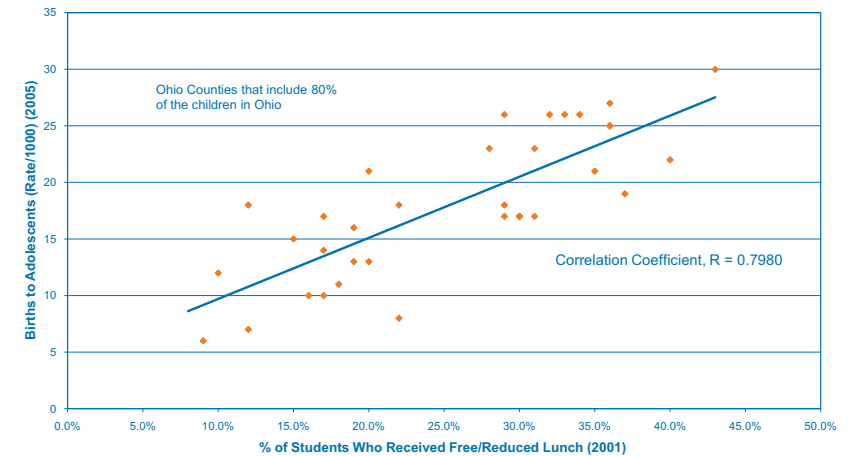


Table 4

Table 4: The Rate for Adolescents Adjudicated for Felonies has a High Correlation with Poor 4th Grade Reading Proficiency

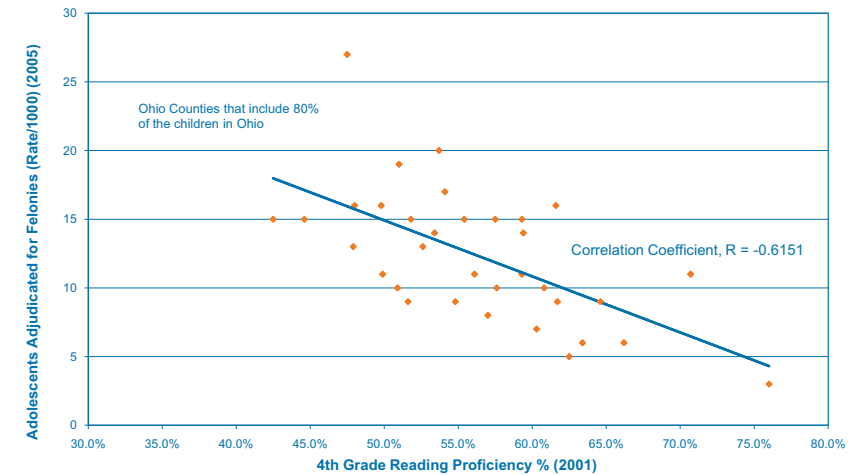


Table 5

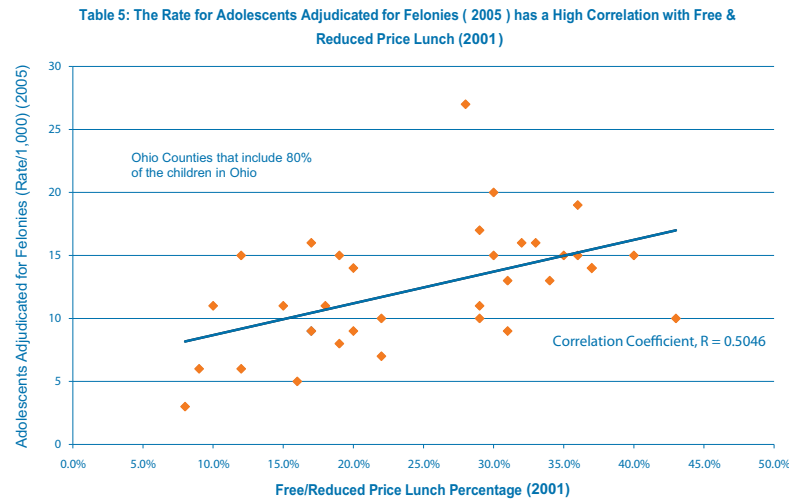
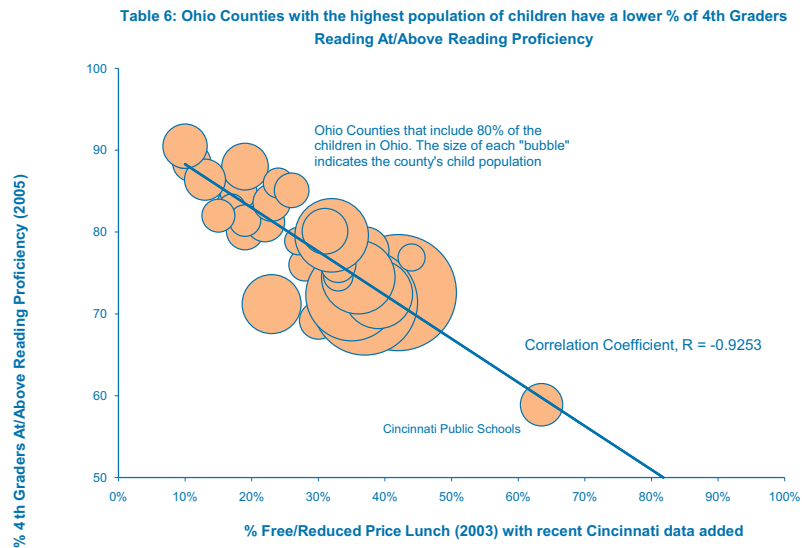


Table 6



develop solutions for childhood food insecurity that can be applied in a community, tested for effectiveness, and duplicated in other communities. CFS has been analyzing food insecurity for three years in the Cincinnati zip code 45225. Based on the research, CFS determined that in addition to being an area of high crime, 50% of children living in zip code 45225 are living in poverty; according to the 2000 U.S. Census, median family income was less than \$14,000; the infant mortality rate is three times higher than the rate for the U.S. and the same as for Mexico and Sri Lanka; and the birth rate is the same as Guatemala. A child living in 45225 is at risk of coming home to little or no food, missing meals and going to bed hungry. As a result of these factors, CFS targeted the 45225 zip code to help achieve food security so that children always know where food is available whenever their family has none.

Cincinnati schools provide breakfast and lunch on school days, but what happens on weekends, holidays, breaks and summer vacations—the 187 days that children are not in school? In today's economy, food stamp money does not go far. Government statistics show that 90% of food stamp allocation is spent within three days. To fill the gap during those times that the systems fall short, CFS began its work of providing food in one of the neighborhood schools in September 2007.

In partnership with a local food market, “Weekend Sacks” of food (12 oz. of food per child) were distributed every Friday to about 430 children to help them make it until December 31 when the next government check arrived. In March 2008, CFS partnered with Pipkins market, Kroger, Aldi and Sam’s Club to expand the program to provide “Spring Break Sacks” to children at two elementary schools in the 45225 area. Approximately 1,000 children each were provided with 6.5 pounds of food. The food sacks were assembled and distributed by volunteers from the community: teachers, school personnel and residents of an apartment community center. CFS moved next to institute its “2008 Summer Food Program.”

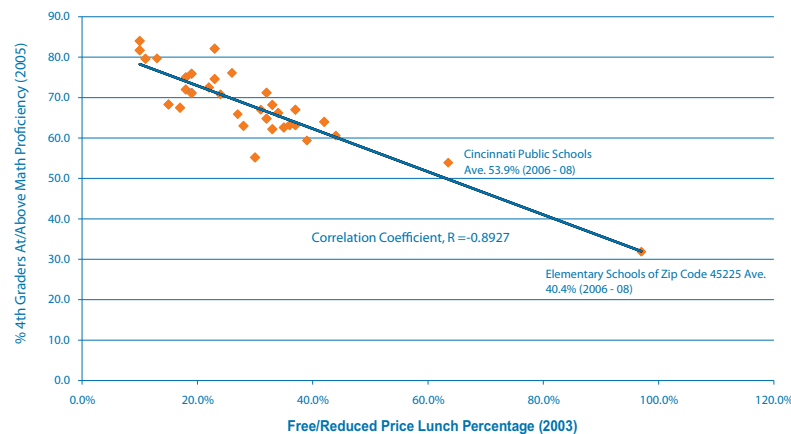
The summer food program continued the partnerships with the neighborhood schools, residents of the apartment complex, and community recreation

center to feed 1,000 hungry children a week for 12 weeks during the summer. The children were introduced to the Summer Food Program before the summer break by teachers at the schools who were provided with “sample” sacks. CFS analyzed data from 2007 and determined that the traditional summer lunch program locations were not reaching the numbers of children in need. In order to get the food to the children, CFS decided to distribute the food sacks in the neighborhoods where they live. Distribution points were set up at apartment sites, and locations served by the schools and recreation center. These sites also allow staff to ensure that the food gets into the hands of the children.

The problem of food insecurity is real and exists in many more zip codes throughout the state. CFS has developed a model that could be replicated in other communities. CFS is an all volunteer agency and depends on donations and the support of the community. For additional information, contact Tony Fairhead at 513-910-4162 or tony@childhoodfoodsolutions.org.

Table 7

Table 7: Students who Received Free & Reduced Price Lunch in 2003 are less likely to reach 4th Grad Mathematics Proficiency in later years



For More Information

The National Center for Children in Poverty <http://www.nccp.org>
 The National Center for Children in Poverty (NCCP) is the nation’s leading public policy center dedicated to promoting the economic security, health, and well-being of America’s low-income families and children. NCCP uses research to inform policy and practice with the goal of ensuring positive outcomes for the next generation. The Center promotes family-oriented solutions at the state and national levels.

Children’s Hunger Alliance <http://www.childrenshungeralliance.org>
 This organization focuses on combating child hunger throughout the state. CHA provides food and nutrition education to children, as well as contacts local communities and governmental agencies to expand existing nutrition programs. CHA has offices in a few major Ohio cities – Columbus, Cleveland, Cincinnati, and Dayton.

Ohio Department of Job and Family Services Office of Family Stability <http://jfs.ohio.gov/ofam/index.stm>
 This website offers links to the different food programs within the state (Commodity Supplemental Food Program, Emergency Food Assistance Program, and Food Stamps), and links to cash programs and other supportive services within the state.

Ohio Works First Program <http://jfs.ohio.gov/ofam/cmmandfsa.stm>
 Provides temporary assistance to needy families through the TANF program. The above link takes you to the page where individuals can apply for the Ohio Works First program and/or other assistance programs.

Ohio Office of Unemployment Compensation <http://jfs.ohio.gov/ouc/>
 This office provides information and application for unemployment benefits and employment opportunities.

Ohio Child Care Resource and Referral Association <http://www.occrra.org/>
 The Ohio Child Care Resource & Referral Association (OCCRRA) promotes the positive development of all children, especially those in out-of-home learning environments. OCCRRA’s membership consists of resource and referral agencies providing services to families, early childhood professionals, and communities throughout Ohio. Each member agency maintains a regional database of child care providers, provides families with information on how to select care, increases the quality effectiveness of providers by offering professional development opportunities, and provides information to policy and decision makers.

United States Department of Health & Human Services <http://aspe.hhs.gov/poverty/index>
 The federal organization that provides poverty guidelines, research, and measurement.



While all four of the areas are equally important, the focus for Ohio's KIDS COUNT 2008 is **Health**. Health is essential to a child's well-being, and includes the physical and mental well-being of the child. Considering that some 9 million children are uninsured in this global superpower of a nation, Ohio's Kids Count feels it is necessary to focus on **Health** to remind ourselves of what is truly important: The health and well-being of our nation's future—**our children**.

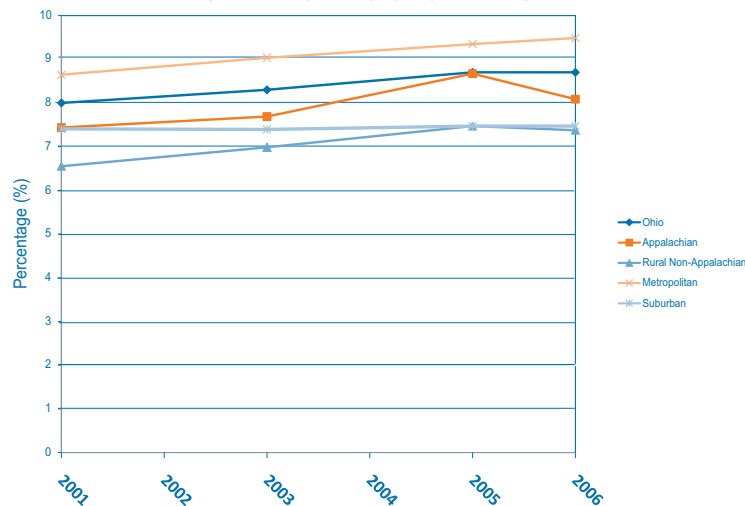
Low Birthweight

The percentage of babies born with a low birthweight (LBW)—less than 5.5 pounds—is something that KIDS COUNT has been tracking consistently over the years. According to the Child Trends DataBank, “infants born at a low birthweight are...at increased risk of long-term disability and impaired development.”¹ Healthy People 2010's goal for low birthweight rates is **five percent**, a goal that Ohio has yet to reach (although some individual counties have). In accordance with this year's trend analysis, Ohio's KIDS COUNT looks at LBW data disaggregated by county type from 2001 to 2006 (*Refer to Chart 5*). Not surprisingly, metropolitan counties have the highest LBW rate (8.6%), while rural non-Appalachian and suburban counties have the lowest rates. This is a logical conclusion if one looks at the discrepancy between white and Black LBW rates: Broken down by race, the white LBW rate is eight percent, while the Black LBW rate is 14 percent. Given that most of the metropolitan counties are disproportionately populated by Blacks (i.e. a higher percentage than the national percentage of 12.4%), including Cuyahoga, Franklin, Hamilton, and Montgomery, which have Black population rates of more than 20 percent, the fact that metropolitan counties have the highest LBW rates seems reasonable.

Curiously enough, in 2001, Appalachian and suburban counties had the same LBW rate (7.4%), while rural counties had the lowest rate of the county types (6.6%) and, as previously stated, metropolitan counties had the highest (8.6%). Over the course of the time period, Ohio saw an 8.7 percent increase in the LBW rate. Appalachian, rural, and metropolitan counties all experienced considerable increases: The rate for rural counties increased by 12.6 percent, while metropolitan counties saw a 9.7 percent increase;

Chart 5

Low Birthweight Trends by County Type (2001-2006)



Appalachian counties experienced an 8.7 percent increase as well. Contrastingly, suburban counties saw an increase in the LBW rate of less than one percent (0.9%) (Refer to Chart 6).

Lead Exposure (Elevated Blood Levels)

Exposure to lead is a serious concern for children in all communities, though especially in older neighborhoods where lead-based paint may still be present. While exposure to lead can be harmful to both adults and children, children are more at risk because their bodies are not fully developed. According to the National Network for Child Care (NNCC), a child exposed to lead can suffer damage to the brain and central nervous system. A study cited on the NNCC website found that “[s]ome effects, which may become permanent, include learning, behavioral, and physical problems including the following: speech and language handicaps, poor attention span, excitability and impulsiveness, difficulty maintaining balance, and stunted growth.”²

The HP 2010 goal is to eliminate all elevated blood lead levels in children, based on a statistic that “4.4 percent of children aged 1 to 5 years had blood lead levels exceeding 10 µg/dL during 1991–94,”³ which is the recommended level set by the Center for Disease Control (CDC). In Ohio in 2006, 21.3 children out of 1,000 still had elevated blood levels (EBLs), which are levels above the CDC’s limit of 10 micrograms per deciliter. Yet when disaggregated by county type, Appalachian, rural, and suburban counties all have rates of eleven children per 1,000 with EBLs. Conversely, metropolitan counties have a rate of twenty-seven (Refer to Chart 7). Upon further inspection, though, it appears that certain cities have much higher rates than others, the latter of which have rates closer to those of rural and suburban counties. For instance, Cuyahoga’s rate is 59.1, while Franklin’s is six. Other metropolitan counties with high rates include Lucas (38.9) and Mahoning (39.7), while Montgomery (9.9), Stark (11.8), and Summit (13.8) have rates that are reasonably low. Even Hamilton (18.4) and Allen (15.5) have fairly low rates. Some other counties that stand out as having high levels (more than two percent, or 20 per 1,000) include the following: for suburban counties, Clark (25.8); for Appalachian counties, Brown (22.8), Harrison (34.7), Jefferson (31.5), and Noble (22.2); for rural counties, Ashtabula (21.1), Crawford (32.8), and Erie (20.2). With a statewide EBL rate of more than two percent, Ohio has some work to do in order to meet HP2010’s goal of complete eradication of EBLs.

Chart 6

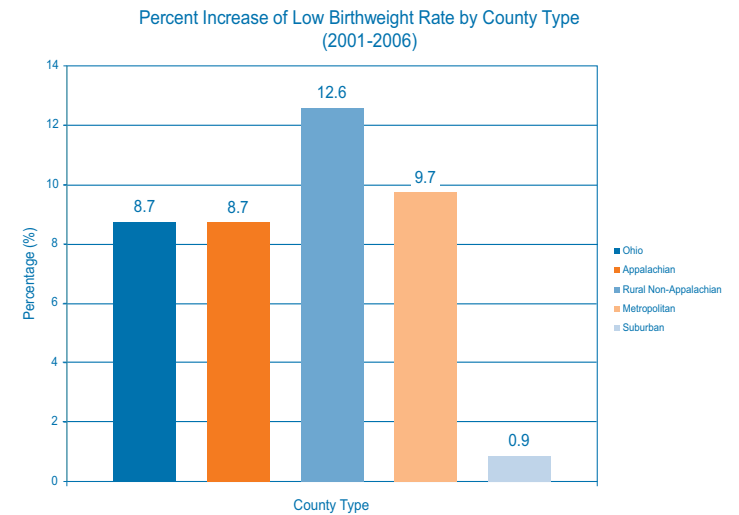


Chart 7

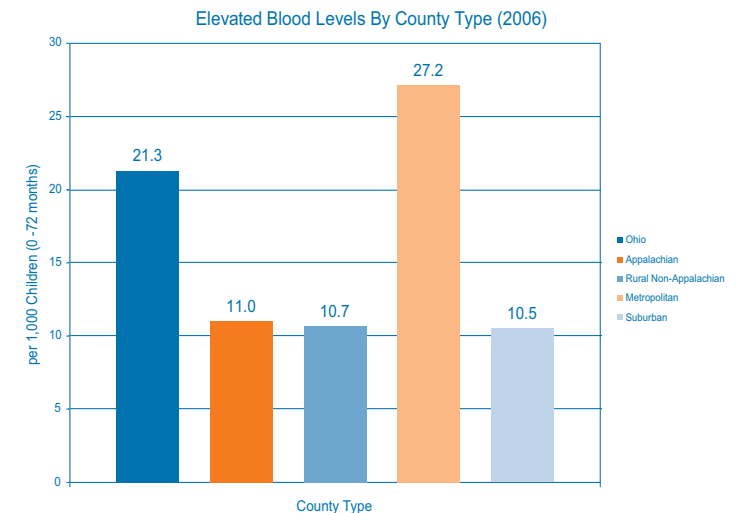
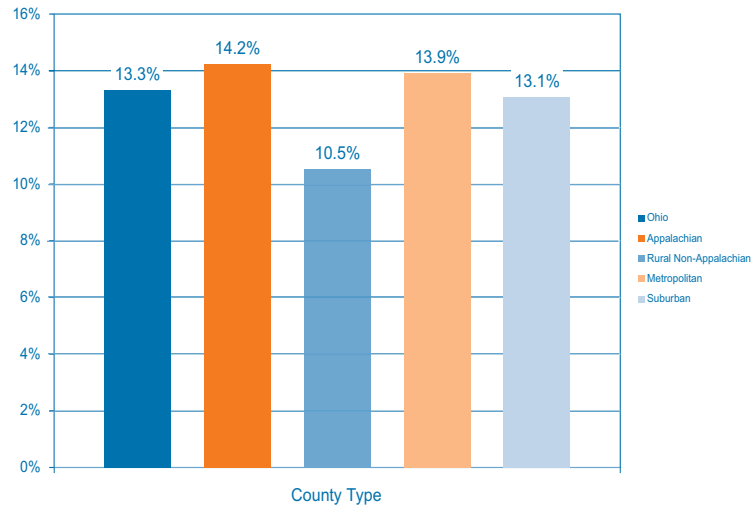


Chart 8

Asthma Prevalence for Children Ages 0 -17 by County Type (2004)



Asthma

Asthma is a respiratory disease that is typically diagnosed during childhood. Once diagnosed, it tends to stay with that person for life. This disease, while not contagious by any means, has seen a twenty-five percent increase in diagnosis since 1999 according to the Ohio Asthma Coalition (OAC).⁴ The OAC also reports that asthma is the leading cause of absence from school and hospitalization among children. Along with causing absence, asthma can also affect a child's education due to difficulty sleeping and decreased participation in school activities.⁵

According to the 2004 Ohio Family Health Survey, an estimated 13.3 percent of children under age 18 are diagnosed with asthma in the state of Ohio. A racial/ethnic breakdown reveals that 12.2 percent of white children have asthma, whereas for minorities, 9.8 percent of Asian children, 16 percent of Hispanic children, and 19.5 percent of Black children are diagnosed with asthma. A noteworthy bit of information for the racial/ethnic data is a statistic that the OFHS looks at for children diagnosed with asthma: Of the children diagnosed, what is the percentage of children who have had an ER visit in the past twelve months because of it? For Asian children, the percentage is 18.5 percent; for white children, it is 21.1 percent. For Hispanic children, however, the number jumps to 33.4 percent, and is even higher for Black children, at 34.3 percent. Even looking at the high and low ends of the confidence intervals, respectively, the white percentage does not reach the Black percentage (23.8% versus 27.6%, respectively).

Disaggregating the data by county type, as has been done for all other indicators thus far, reveals little discrepancy between the county types in terms of asthma prevalence (*Refer to Chart 8*). With the exception of rural counties having a comparatively low rate of asthma prevalence (10.5%), the rates for Appalachian (14.2%), metropolitan (13.9%), and suburban counties (13.1%) are fairly similar. Of course, Appalachian and rural counties tend to have lower populations, and this affects the reliability of estimation. In Adams County (Appalachian) for example, 91 children were surveyed. Based on this sample, it is estimated that 14.8 percent of the county's child population has asthma, though the 95% confidence interval tells us that the researchers believe the number could really be anywhere from 5.8 percent to 23.7 percent. Such is the problem with small samples.

Conversely, in Cuyahoga County, 1,775 children were sampled, and it is estimated based on this sample that 13.9 percent of the county's children have asthma, but the actual number could be anywhere from 11.6 percent to 16.2 percent. Of course, this interval is much smaller than Adams County's nearly 20% gap. Needless to say, this must be taken into account when dealing with these statistics.

Infant Mortality

Infant mortality is another indicator that the KIDS COUNT national data book has been analyzing for a considerable amount of time. According to the Ohio Department of Health, the infant mortality rate is “[t]he number of deaths to infants under 1 year of age per 1,000 live births for the population selected.”⁶ HP 2010 set a national goal of **4.5 infant deaths per 1,000 live births**. Utilizing the same 2005 data that is being used for this book, the 2008 national data book ranks Ohio 43rd (eighth worst) on its infant mortality rate of 8.3 per 1,000 live births.⁷ Utah, the 1st ranked state on infant mortality, has a rate of 4.5 per 1,000 live births, which meets the limit set by HP 2010 (Utah is the only state to do so as of 2008).⁸ This is certainly a notable discrepancy.

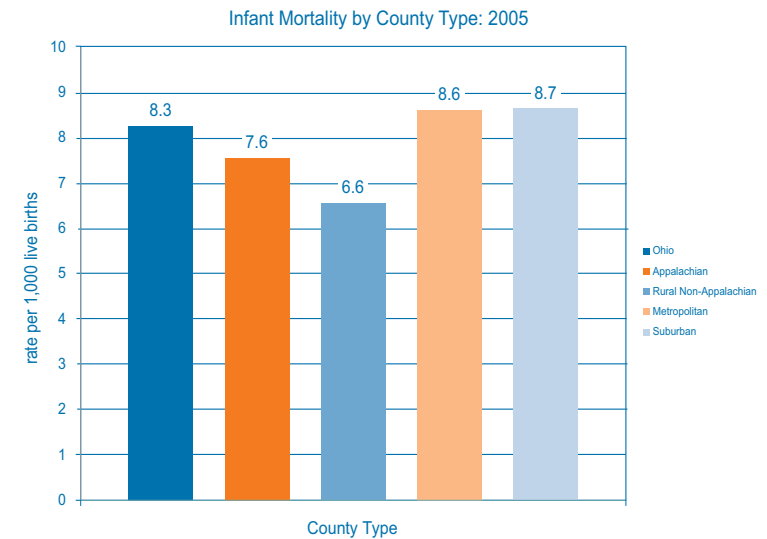
However, the rural counties in Ohio have a weighted collective rate of 6.6 per 1,000 live births, which is closer to Utah's rate. If the rural counties were ranked as a state this year, they would rank 21st overall. Appalachian counties, with a rate of 7.6, would rank 36th. Yet Ohio's metropolitan and suburban counties, with their rates of 8.6 and 8.7 respectively, would rank right where Ohio is: 43rd (Refer to Chart 9).

Turning Data into Action

Oral Health: A Children's Crisis

The throbbing pain of a toothache can be debilitating; it can mean missed school and work. The only option for relief is to get to the dentist as soon as possible. According to the Ohio Department of Health's *Oral Health and Access to Dental Care for Ohioans, 2007* report, a large proportion of Ohioans lack the means to access dental care in the event of such an emergency or for just routine oral care. Unnecessary dental disease and oral infections are costly problems for families, employers, and government. Severe dental problems can result in poor performance or absence from school or work. Oral disease has been associated with other serious health problems including heart and lung diseases, stroke, diabetes, low birthweight and premature births.

Chart 9





Access to dental care means that people can get the dental care they need when they want it. To get that care, a person must have a private dental office or safety net clinic and a means to pay for the care. Lacking such means is the most common barrier to accessing dental care. Although many low-income families have Medicaid to pay for dental care, they still may have difficulty accessing care because of the shortage of dentists and the fact that most dental offices do not accept Medicaid.

Approximately 4.25 million Ohioans lack dental coverage. Dental care is the Number One unmet health care need for Ohio children. Ohio falls short of the following Healthy People 2010 (HP2010) national objectives for children's oral health: to reduce the proportion of children with untreated dental decay, and to increase the proportion of children who use the oral health care system each year. The proportion (55%) of third grade children with untreated cavities was unchanged between 1998-99 and 2004-05. Children living in low income households, and those who are black or live in Appalachian counties are most likely to have untreated cavities and toothaches.

The American Academy of Pediatric Dentistry recommends that children visit a pediatric dentist when the first few teeth appear. These early visits allow the dentist to detect any problems and to keep parents up to date on their child's oral development. The visits also establish a relationship between the child and dentist that can last a lifetime. Proper speech development depends on healthy, fully developed baby teeth. A healthy smile is important for a child's social development, and sensitive, painful teeth can prevent a child from eating a proper diet and create a multitude of health problems.

In 2007, 30 percent of Ohio children had not visited a dentist in the previous year, 15 percent never had visited a dentist, 23 percent did not have dental care insurance, and 5 percent did not receive needed dental care due to the lack of financial resources or insurance. One in 10 children had a recent toothache, while 26 percent of third graders and 28 percent of 3-5 year-old Head Start children had untreated cavities.

The picture for access to dental care shows that Ohio has one dentist for every 1,882 people, resulting in more than 50 federally designated dental health professional shortage areas, mostly in rural areas (Vinton County has 1 dentist for every 6,715 residents and Meigs County has one for every 7,744) and due to inadequate numbers of dentists who serve low-income patients. Seventy-five percent of Ohio dentists did not participate in the Medicaid program in 2005, possibly due to the state reimbursement rate of only half of the cost of treatment. More than half of Ohio general dentists and two-thirds of pediatric dentists practice in urbanized areas (suburbs) that are not in central cities, and only 3-7

percent practice in rural areas. In contrast, programs that serve low-income populations are primarily located in central cities, smaller towns, and rural areas.

Many families who do not have access to routine, preventive dental care turn to the hospital emergency room when there is a dental emergency. This is more costly than getting routine care from a dentist and most often does not result in treatment of the problem because dentists are not generally on staff. As with most medical problems, the longer the treatment is put off, the more expensive it becomes.

The 2007 numbers for Franklin County—where Columbus, the state capital, is located—show that there is one dentist for every 1,223 people, 30 percent of children did not have a dental visit in the last year, 15 percent never visited a dentist, 21 percent are not covered by dental insurance, and 4 percent could not receive needed dental care.

One solution to providing access to dental care for low-income families is Ohio's dental clinics. These 120 clinics provide a safety net for people who have no dental insurance. A patient can receive treatment for any immediate problems and continue to receive ongoing preventive care. Four of these clinics are located in Franklin County: Ohio State University (614) 292-2751; Ohio State University Emergency Dental Clinic (614) 292-2751; Columbus Public Health (614) and the East Central Health Center. These clinics accept Medicaid and charge uninsured patients on a sliding scale based on income.

For a list of safety-net dental clinics across Ohio, go to: <http://www.ohiodentalclinics.com>.



For More Information

Ohio Help Me Grow Program www.ohiohelpmegrow.org

Provides developmental and health assistance from pregnancy through the toddler stage. This organization provides information on child nutrition, wellness, school readiness, safety, and other topics.

Ohio Health Plans – Healthy Start and Healthy Families

<http://jfs.ohio.gov/OHP/consumers/familychild.stm>

Information on the two different Medicaid programs for children and families.

Ohio Department of Mental Health

<http://www.mh.state.oh.us/>

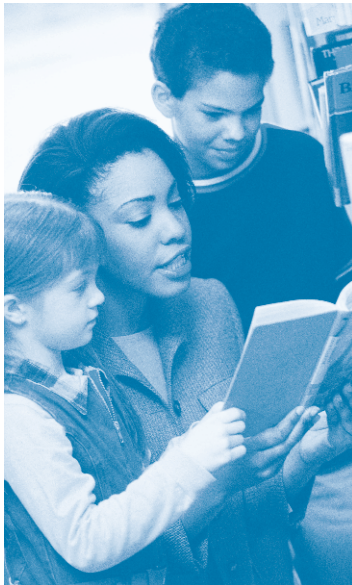
This agency provides information on mental health services and resources available to families.

Ohio Department of Health

<http://www.odh.ohio.gov>

This agency provides information and services to help Ohioans achieve optimal health.

EDUCATION



Graduation Rates

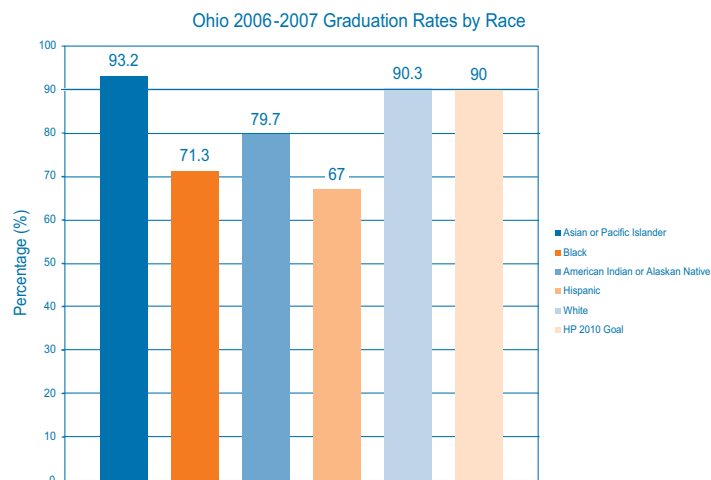
When deciding how to analyze education trends, it makes sense to look at the most telling measures possible. Debate continues around whether state evaluations are accurate in assessing the effectiveness of a school building or school district, and whether standardized tests are capable of measuring the abilities of every student that takes them. One way of gauging whether or not a school is effective without evaluating the curriculum is to examine the graduation rate. Just glancing at the 2006 county data in this book, there does not appear to be a whole lot of fluctuation from county to county. Only three counties score fairly low (more than twenty percent of students not graduating), while the vast majority of counties have non-graduation rates between zero and twenty percent.

Another “hot topic” is the poor performance of inner city schools, which have for the most part predominately Black student populations. With the rising popularity and criticism of charter schools, along with the reforms taking place in the cities’ public schools, the racial and ethnic disparities cannot be overlooked. Therefore, Ohio’s KIDS COUNT decided to look at the state graduation rates disaggregated by race; not surprisingly, the disparities displayed themselves.

The first objective of the *Educational and Community-Based Programs* chapter of Healthy People 2010 is to increase the high school graduation rate to 90 percent, which is something that many counties can say they have successfully accomplished. But HP 2010 is a versatile tool, and if it were used to assess the racial disparities of high school graduation rates at the state level, the only racial categories that achieved this goal for the '06-'07 school year were Whites and Asians/Pacific Islanders. American Indians/Alaskan Natives were well below this goal with a 79.7 percent graduation rate, and Blacks and Hispanics were even further behind with graduation rates around seventy percent (Hispanics had the lowest at 67 percent) (Refer to Chart 10).

There is data indicating a promising trend for Ohio's Black students, however: While Hispanics’ and American Indians’ rates have varied considerably from 2000 to 2007, and Whites’ and Asians’ rates have remained relatively steady, Black students have shown significant progress (Refer to Chart 11). From 2000 to 2007, Black students saw a nearly twenty percent increase in their graduation rate—for comparison, the next-highest increase

Chart 10



was American Indians' 7.6 percent (Refer to Chart 12). To dispel the common stereotype that urban Black youth have low success rates in impoverished public schools, one only has to look at the graduation rates of the public schools disaggregated by race. For the '06-'07 school year, Blacks had a higher graduation percentage than Whites in Cleveland, Cincinnati, Columbus, and Dayton public schools; in Toledo, they were about the same. The percentages of Black students in the school systems for that year were as follows: Cleveland, 66.6%; Cincinnati, 70.9%; Columbus, 62%; Dayton, 70.5%; Toledo, 46.2%. Such statistics warrant further investigation into the racial disparities that continue to plague Ohio's students.

Turning Data into Action Interventions for Troubled and Troubling Children

Our education system has struggled to accommodate the needs of children and youth with serious emotional disturbance/severe behavioral handicap (SED/SBH) and to effectively integrate them into mainstream classrooms. The Federal Individuals with Disabilities Education Act (IDEA) was passed, in part, to address the fact that more than a million children with behavioral disorders were excluded from public schooling on account of their behavior and the lack of services to meet their individual needs.

IDEA, signed into law in 1975, established that all children with disabilities have a right to a free, appropriate public education. It offers funding and policy assistance to states in providing appropriate support services (e.g., counseling and transportation) to students with special needs. In 1984, Congress authorized the National Institute of Mental Health to start the Child and Adolescent Service System Program (CASSP) to help states develop comprehensive, community-based systems of care for emotionally disturbed children and youth. However, neither IDEA nor CASSP has had a significant impact on the education of children with (SED/SBH), as observed by Congress during the 1990 reauthorization of IDEA. As a result, the U.S. Department of Education Office of Special Education Programs (OSEP) developed the *National Agenda for Achieving Better Results for Children and Youth with Serious Emotional Disturbance*. The Agenda's targets include expanding positive learning opportunities; strengthening school and community capacity; addressing issues of diversity; collaborating with families; promoting appropriate assessment; providing ongoing skill development; and creating comprehensive and collaborative systems.

Chart 11

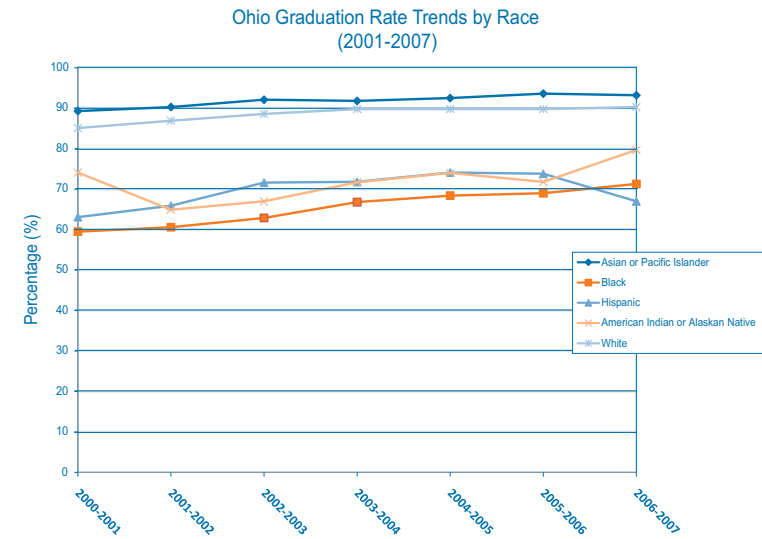
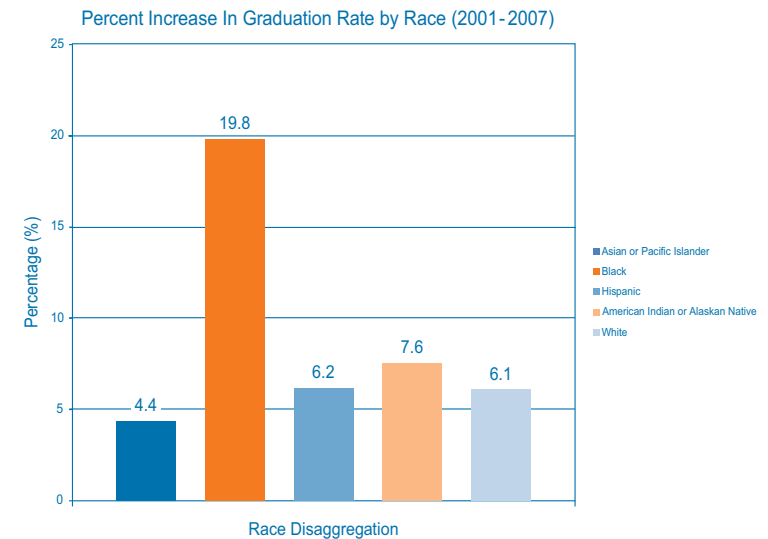


Chart 12



The following data from the Agenda suggest the magnitude of the problem:

- **Academic Outcomes.** Students with SED/SBH have lower grades than any other group of students with disabilities. They fail more courses and they more frequently fail minimum competency examinations than do other students with disabilities; they also are retained at grade level more often at the end of the school year. High school students with SED have an average grade point average of 1.7 (on a four-point scale), compared to 2.0 for all students with disabilities and 2.6 for all students. Forty-four percent received one or more failing grades in their most recent school year (compared to 31 percent for all students with disabilities). Of those who took minimum competency tests (22 percent were exempted), 63 percent failed some part of the test.
- **Graduation Rates.** Forty-two percent of youth with SED/SBH earn a high school diploma, as opposed to 50 percent of all youth with disabilities and 76 percent of similarly aged youth in the general population.
- **School Placement.** Eighteen percent of students with SED/SBH are educated outside of their local schools, compared to six percent of all students with disabilities. Of those in their local schools, fewer than 17 percent are educated in regular classrooms, in contrast to 33 percent of all students with disabilities.
- **Dropout Rates.** Forty-eight percent of students with SED/SBH drop out of grades 9 through 12, as opposed to 30 percent of all students with disabilities and 24 percent of all high school students. Another eight percent of students with disabilities, including students with SED/SBH, drop out before grade nine.
- **School Absenteeism.** Students with SED/SBH miss more days of school per year (an average of 18 days) than do students in any other disability category.
- **Encounters with the Juvenile Justice System.** Twenty percent of students with SED/SBH are arrested at least once before they leave school as opposed to nine percent of students with disabilities and six percent of all students. Fifty-eight percent of youth with SED/SBH are arrested within five years of leaving school, as opposed to 30 percent of all students with disabilities. Of those students with SED/SBH who drop out of school, 73 percent are arrested within five years of leaving school.
- **Identification Rates of Students of Varying Socio-Economic Backgrounds.** The rates of identification of children and youth with SED/SBH vary across racial, cultural, gender, and socioeconomic lines. Although African-American and white students represent 16 and 68 percent of the school age enrollment respectively, they represent 22 and 71 percent of the students classified as SED/SBH. On the other hand, Hispanic-Americans and Asian-Americans represent 12 and three percent of the school-aged population respectively, but only six and one percent of the students classified as SED/SBH. Data also suggest that students from low-socioeconomic backgrounds are over-represented and female students underrepresented among those identified with serious emotional disturbance.

Compared to all students with disabilities: (1) students with SED/SBH are more likely to be placed in restrictive settings and are more likely to drop out of school; (2) their families are more likely to be blamed for the student's disability and are more

likely to make tremendous financial sacrifices to secure services for their children; and (3) their teachers and aides are more likely to seek reassignment or leave their positions.

Significantly improving results for children and youth with SED/SBH requires a vision of transformed service systems, reoriented professional attitudes, and an emphasis on positive outcomes. Toward these ends, OSEP and the participants in the planning process identified the following seven interdependent strategic targets:

- Expand Positive Learning Opportunities and Results
- Strengthen School and Community Capacity
- Value and Address Diversity
- Collaborate with Families
- Promote Appropriate Assessment
- Provide Ongoing Skill Development and Support
- Create Comprehensive and Collaborative Systems

Underlying the seven targets are several key assumptions that embody an understanding that a flexible and proactive continuum of services must be built around the needs of children with SED/SBH and their families. Furthermore, services must not only be available, but must be sustained and comprehensive, and must collaboratively engage families, service providers, and children and youth with serious emotional disturbance. Finally, both the needs of these children and increasing demographic diversity of our nation call for cross-agency, school, and community-based relationships that are characterized by mutual respect and accountability—with the child always in focus. Accordingly, OSEP identified the following three cross-cutting themes that reflect this understanding:

Collaborative efforts must extend to initiatives that prevent emotional and behavioral problems from developing or escalating;

- Services must be provided in a culturally sensitive and respectful manner; and
- Services must empower all stakeholders and maintain a climate of possibility and accountability

Promising approaches toward systems development have addressed the need to nurture collaboration, innovation, and an outcome-oriented approach to planning and decision making. Some initiatives have done so successfully by involving children, teachers, and advocates in planning and evaluating new systems. Other efforts have provided policy makers with an opportunity for hands-on decision making regarding specific students so that they can understand the need to blend services and funding. Still other promising approaches provide common training and workshops to families, educators, human service workers, administrators, board members, and advocates in order to support collaboration, nourish transdisciplinary orientations, and sustain local networks.



According to the Ohio Department of Education, over 19,000 students with SED/SBH were enrolled in Ohio schools for the 2007-08 school year. For that same period there were over 24,500 disciplinary occurrences which translates to an 81% discipline rate for these students compared to a discipline rate of 26% for the students with no disabilities.

One response to the need to provide young people with a socially and academically rich environment, and to prepare them for reintegration into mainstream settings with community support is Cleveland, Ohio's *Positive Education Program* (PEP). PEP has been recognized locally and nationally for its excellence in programming and as a model special education program for providing intensive interventions to troubled students. PEP's Guiding Principles incorporate many of the targets and recommendations developed by the OSEP.

Core to PEP's success is the Re-EDucation philosophy which grounds its work with troubled and troubling children and their families. Re-ED (Re-Education of Emotionally Disturbed Children) is a dynamic, strength-based, family-centered approach for working with children and youth with severe emotional disturbance. It was developed in the early 1960s by Dr. Nicholas Hobbs and his colleagues at Vanderbilt University at the request of the National Institute for Mental Health (NIMH). NIMH was seeking a new paradigm for the treatment of children with severe emotional disturbance that would be both highly accessible and effective.

Key features of the Re-ED philosophy:

- Re-ED insists on a language of wellness over illness. It focuses on strengths, not deficits. Believing that successful living is healing, in Re-ED, professionals work to string together one good day after another until life is overwhelmed by a better way of living.
- Trust is the essential component in developing a healthy relationship between the child and the adult professional.
- Collaborative, trusting working relationships with all significant people in a child's life are critical to creating an environment where the child can learn, grow, and succeed.
- A positive culture that encourages innovation and an openness to integrate emerging best practices are critical to a Re-ED organization.
- Primary authority for decision making around a well-being of children is placed in the capable hands of those professionals who are with the child at his/her most vulnerable moments.
- Treatment is active teaching anchored in the present aimed at building competence.

Started in 1971 by Rico Pallotta to help schools create strategies to work with their most challenging students, PEP has grown into an organization which helps troubled and troubling children and youth successfully learn and grow through the Re-ED approach, blending quality education and mental health services in partnership with families, schools, and communities. PEP operates many programs which address **special education for severe and challenging behaviors, autism,**

early childhood, community support and consultation and training. PEP has a staff of more than 600 caring and competent professionals who impact the lives of 3,000 children and their families annually.

The backbone of PEP is the integrated Special Education and Mental Health Services for Children and Youth with Severe and Challenging Behaviors. The Re-ED philosophy provides the framework that creates a therapeutic environment where there are expectancies for normal, healthy behavior, where competence is stressed, and energy is focused on finding and building strengths that promote positive growth. The components of these services are:

- **Day Treatment Centers**

The ten Day Treatment Centers serve school-age children and youth who have been diagnosed with an emotional disturbance in an integrated educational and mental health environment. These centers serve as both the school and therapeutic treatment center for the children and youth with multiple disabilities.

Behavioral strategies, positive interventions, and supports provide the predictability, structure and consistency young people need. Individual and group meetings, lessons, and activities are used to teach new ways of perceiving, thinking, feeling and behaving. Individualized programming builds functional skills and academic competence that promote cognitive and social-emotional growth and development.

In addition to specializing in working with children and youth with serious emotional, social, and behavioral challenges, four centers have additional specialties which include:

- Serving children with significant cognitive delays
- Serving children and youth with significant developmental disabilities and considerable impairment in communication, including children diagnosed within autism spectrum disorders and severe mental retardation.
- Meeting the needs of troubled teens transitioning to adulthood. Personalized programs are designed with each student and family to facilitate their preparedness for work and career, community participation, independent living, and lifelong learning.

- **PEP Early Childhood Centers – Preschool Child with a Disability Services**

Using a strength-based model of care, professionals provide integrated educational and mental health services to Preschool Children with a Disability (PCD). In collaboration with families and school districts, PEP helps children develop skills necessary for success in school and in life. Referrals for PCD services are made by the school district in partnership with the family.

Working from the belief that a parent is a child's first and best teacher, PEP teaches skills that enable them to help both themselves and their child, and children develop new competencies that prepare them for a life of



For More Information

Gear up Ohio

<http://regents.ohio.gov/gearup/>
Gear Up (Gaining Early Awareness and Readiness for Undergraduate Programs) is a program in Ohio founded in 2006. The purpose of this organization is to encourage students in the pursuit of a successful academic career.

Ohio Head Start Association, Inc.

www.ohsai.org
Lists local program information for each of Ohio's counties.

Ohio Department of Education

<http://www.ode.state.oh.us>
This agency provides information and data on state district school systems and students.

Ohio Coalition for the Education of Children with Disabilities

<http://www.ocecd.org>
This organization is dedicated to advancing the educational interests of children with disabilities.

personal growth and success. With the supportive approach, children gain a sense of self-confidence and a desire for learning that will assist them in school and life. The lesson plans are aligned with the Ohio Department of Education's Early Learning Content Standards and carefully monitored through the Assessment Evaluation and Programming System.

• **PEP Assist**

PEP Assist is a consulting and training service provided to schools and programs designed to teach best practices for working with at-risk children. Services are individually tailored to meet the unique needs of each district. Working in partnership with public schools, PEP staff develops innovative programs and staff development opportunities to serve children with severe and challenging behaviors in their school of residence.

PEP Assist staff has extensive training and expertise in working with at-risk children and youth identified with diagnoses including: emotionally disturbed, autism spectrum disorder, attention deficit/hyperactive disorder, developmentally disabled, and multi-disabled.

Another critical component of PEP is **Community Support**. The supports provided to the community are:

• **PEP Connections**

PEP Connections is designed to serve children and youth who have been diagnosed with a serious emotional disturbance; are involved with two or more county child service systems such as child welfare and juvenile court; and are either at serious risk of removal from their families and the community, or are returning to their families and community from placement. Connections brings all of the people invested in a child's life together to create and implement a coordinated plan that will support the child and the family. Each family is assigned a Community Support Case Manager who provides intensive mental health services and support and takes the lead in building a coordinated plan that builds on the child's and family's strengths.

• **PEP Tapestry**

Cuyahoga County (Cleveland) was the recipient of a multi-million dollar federal initiative to develop a more efficient and family-friendly system to provide support to children who have a serious emotional disturbance and their families. This system of care, named Tapestry, is built on the successful work of PEP Connections and Family-to-Family, a large foster care initiative funded by the Annie E. Casey Foundation. Tapestry is designed to bring more support to more families, reducing their reliance on the public systems. Among Tapestry's primary goals are: increased voice and choice from parents and other caregivers who support these children; and an emphasis on services provided by local, neighborhood-based organizations, and the more traditional service providers. PEP is the first mental health agency to pilot Tapestry.

- **Day Care Plus**

Day Care Plus provides consultation services and technical assistance to child care providers, as well as support for families with children experiencing difficulties in the child care setting. Working with staff, parents and all agencies involved, Day Care Plus Consultants develop a seamless and effective program for children experiencing social, emotional, and behavioral difficulties. Day Care Plus has three primary goals: to improve the social, behavioral, and emotional functioning of at-risk children in child care; and, to increase the competencies of childcare staff. However, the ultimate goal is to maintain children successfully in their child care placements.

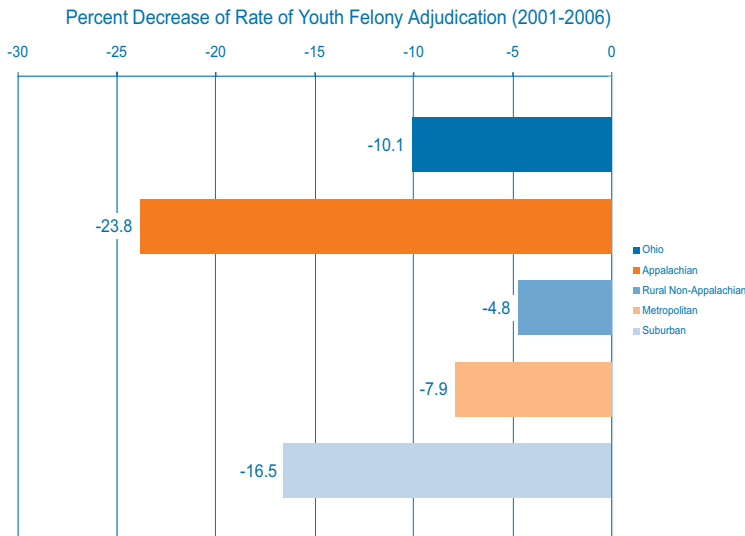
- **Help Me Grow**

PEP is a Help Me Grow provider in Cuyahoga County. Help Me Grow Ongoing Home Visiting provides support and services to promote the well being of children prenatal to age three who are at risk for developmental delay, abuse, or neglect.

PEP's Help Me Grow program maintains the PEP philosophy that a parent is a child's first and best teacher. Following the model of the PEP's Early Childhood Centers (ECC), the PEP's Help Me Grow program is the only home visiting program in the country that utilizes the ECC trained parent-staff as Home Visitors.

The PEP program is an investment in children's lives and the future of communities. For more information, go to the PEP website www.pepcleve.org or contact Susan Berger at 216-361-4400 or berger@pepcleve.org.

Chart 13



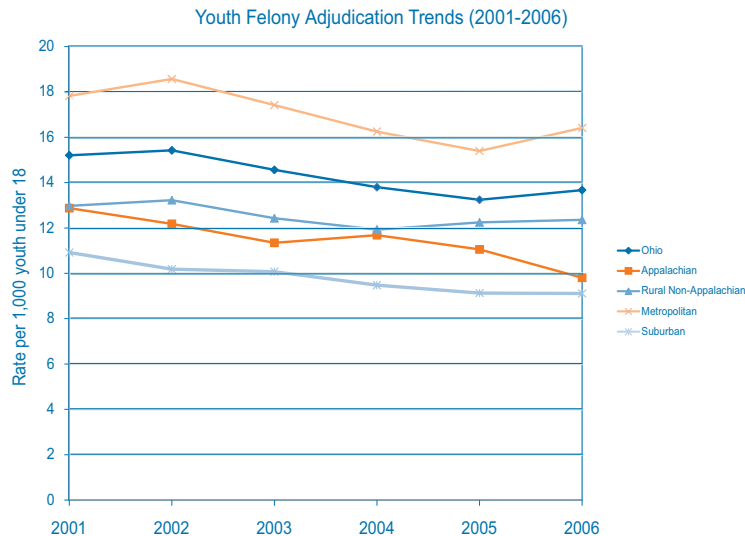
Youth Felony Adjudication

The rate of youths adjudicated for felonies, an indicator chosen by Ohio’s KIDS COUNT to measure youth safety, is calculated by dividing the number of youth felony adjudications in each county by the number of youths age 14 to 17 in the respective county and multiplying by one thousand. The period under analysis for this publication is from 2001 to 2006. When the data is disaggregated by county type, the rate is consistently highest among metropolitan counties, with a 2006 rate of 16.4 adjudications per one thousand 14 to 17 year olds; the lowest rate is among suburban counties with a 2006 rate of 9.1 per one thousand 14 to 17 year olds, with rural and Appalachian counties ranking in between. Over this period of time, though, it should be noted that each county type experienced a decline in the rate of youth adjudication, with the state as a whole experiencing a ten percent drop (*Refer to Chart 13*).

While it is true that from 2001 to 2006 each county type experienced a decline in the rate of youth adjudication, the amount of decline was various for each county type. Appalachian counties experienced the most significant decline, with a nearly 24 percent decrease. While as of 2006 the Appalachian counties still have the second lowest rate for this indicator—suburban counties having the lowest—the margin between Appalachian and suburban has decreased from a two point difference in rates to a 0.7 point difference. This is due to the Appalachian counties’ 24 percent decrease in youth adjudication over the six year period, even though the suburban counties saw a noteworthy decrease of 16.5 percent as well (*Refer to Chart 14*).

This leads into an interesting point: The two county types with the lowest youth adjudication rates every year from 2001 to 2006 are also the two county types that saw the largest decreases during that time period. While suburban counties saw the aforementioned 16.5 percent drop, metropolitan counties, which had rates well above the other three county types throughout the six year period, only saw a drop of 7.9 percent—less than half the size of what suburban counties experienced. Rural counties experienced the least amount of change over the six-year period, with less than a five percent decrease in youth adjudication.

Chart 14



Child Abuse and Neglect

Child abuse and neglect are sensitive subjects to deal with, yet they are grim realities in the world we inhabit. The weight of the consequences of abuse and neglect can be huge and last a lifetime; therefore detection, cessation and prevention whenever and wherever possible are extremely important. Unfortunately, these are difficult statistics to capture because they can manifest themselves in a wide variety of ways, many of them subtle and undetectable. Ohio's KIDS COUNT looks to the reports provided by the Ohio Department of Job and Family Services for its statistical information.

To track the amount of abuse and neglect that Ohio's children are subjected to, Ohio's Kids Count looks at the rate of cases of abuse or neglect reported per one thousand children less than eighteen years old. To look at trends in abuse rates, the rates were compared over a time period from 2001 to 2006 and disaggregated by county type (*Refer to Chart 15*). Over this period of time, Ohio as a whole saw a nearly six-percent decrease in its rate of children abused and neglected (from 10.7 to 10.1 per 1,000 children). At the county type level, however, metropolitan counties were the only type that saw a decrease, but it was, nevertheless, a substantial one of nearly 16 percent (13.1 to 11 per 1,000 children) (*Refer to Chart 16*). One should keep in mind that over this period, metropolitan counties had the highest rate of child abuse at any given time within the period. Conversely, suburban counties at any given time within the period had the lowest rate of child abuse. However, suburban counties also saw a 37 percent increase in their rate from 2001 to 2006 (from 5.2 to 7.2 per 1,000 children). Appalachian and rural counties saw increases in their rates as well: Appalachian counties' rate went up from 9.4 to 10.4 per 1,000 children (a ten percent increase); the rural rate increased from 9.1 to 10.1 per 1,000 children (an 11 percent increase).

Turning Data into Action

Opportunities for Teen Parents

There is good news about the number of teen mothers in the United States – they are on the decline. But, in spite of this trend, it is important to note that U.S. teen birth rates remain higher than those of other industrialized countries. Teen birth rates in the United States remain particularly high for teens of color and those living in low-income communities. Many of these teens have grown up in poverty and, along with their children, are vulnerable to further disadvantage and disconnection from society.

Chart 15

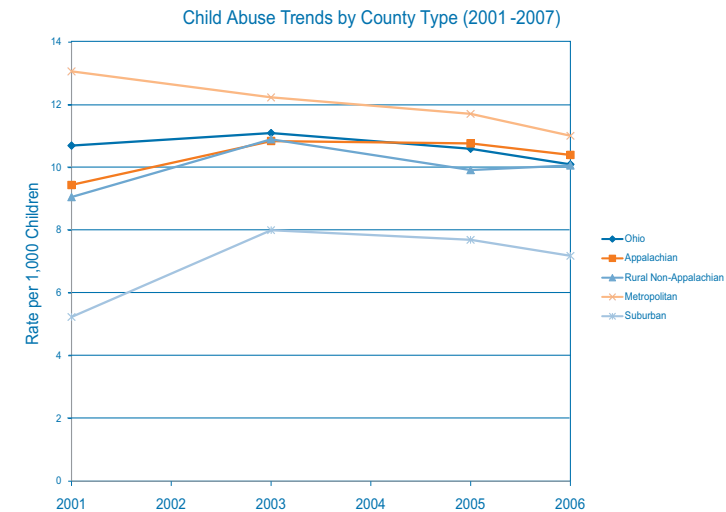
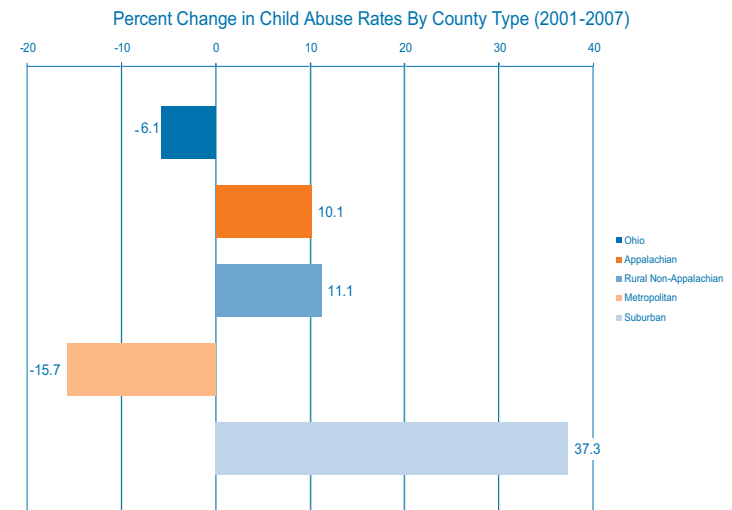


Chart 16





According to the KIDS COUNT *data snapshot, Number Two, September 2006, "Teen Motherhood at Record Low in United States,"* the drop in teen pregnancy and teen birth rates over the past decade is a result of increased abstinence among teens, higher contraceptive use among sexually active teens, and more effective contraceptive methods. Sexually active youth who have informed conversations with parents or other adults about contraception and other reproductive health issues are less likely to become pregnant, father a child, or contract a sexually transmitted disease as a teenager. Reducing teen pregnancy is one way of connecting at-risk youth to opportunities that help them succeed. Ohio's rate of teen pregnancy has dropped 10 percent between 2001 and 2006, from 22 to 20 teen births per 1000 births.

Teen childbearing can have long-term negative effects on both the adolescent mother and the newborn. These challenges include:

- The increased risk of educational failure. Nationally, nearly one in three girls cited pregnancy as the reason they dropped out of school in 2004. With every thing else being equal, having a child before the age of 20 reduces academic attainment by almost 3 years.

With the lower educational attainment, young mothers often find themselves at a distinct disadvantage in the labor market. When they do work, they have lower family incomes and higher rates of poverty than women giving birth at a later age. The poverty rate for children born to teenage mothers who have never married and who did not graduate from high school is 78 percent; compared to 9 percent of children born to women over age 20 who are currently married and graduated from high school.

Children born to young mothers are at higher risk of being born low birthweight and dying within their first year of life. They are also more likely to miss out on emotional and cognitive stimulation crucial to healthy child development.

One Ohio community has recognized the impact of teen pregnancy and has implemented a program to address the issue. In October 2006, under the guidance of Summit County Juvenile Court Judge Linda Tucci Teodosio, the court developed a Family Resource Center (FRC) through the use of Temporary Assistance to Needy Families (TANF)/ Prevention, Retention, and Contingency (PRC) funds to provide assistance to court-involved youth and families in five priority populations:

- Pregnant and Parenting Youth
- Truant youth
- Community Re-entry for youthful offenders
- Domestic violence issues
- School to Work for youth seeking jobs

The FRC Teen Parent Program mission is to provide court-involved pregnant and parenting girls with assistance in accessing community resources, peer support, and education. By providing case management services, monthly support groups, review hearings and program incentives, teen parents are empowered to make better choices for themselves and their children while reducing court involvement.

Families are referred to the FRC Teen Parent Program by court officers, including magistrates, probation officers and intake officers. To be eligible for the Teen Parent Program, families must meet the PRC requirements, be enrolled as a client at the FRC, and have a pregnant or parenting youth in the household.

Families whose income exceeds the PRC income limits will not receive on-going case management services, but they may receive a one-time needs assessment and referral service. They are also welcome to attend the monthly teen parent support groups.

Through the Incentive Program, participating youth have the opportunity to accumulate points that may be “cashed in” to receive incentives such as gift cards and baby items. Points are granted to participants based on attendance at the FRC Teen Parent Support Group, school grades, and attendance at appointments with counselors and caseworkers.

FRC Teen Parent Support Group topics include pregnancy prevention, education, decision making, STD/HIV prevention, body image, and healthy relationships. Participants are urged to support and encourage each other to make better choices. Each session averages 12-15 youth.

The FRC Teen Parent Program measures success by the following outcomes:

- Linkage to community teen parent resources
- Linkage to resources for basic needs
- Linkage to counseling services
- Received prenatal care
- Enrollment in school and/or improved attendance
- Employment and/or increased employability skills
- Completion of court orders and probation
- Reduced court involvement
- Increased knowledge about pregnancy prevention
- Increased knowledge about sexually transmitted diseases (STDs)
- Child remains in the custody of the teen parent

For More Information

Ohio Safe Kids Coalition

www.ems.ohio.gov/emsc/safekids/skmain.htm

The Safe Kids Coalition supports public information and many other programs aimed at educating communities on the prevention of both fatal and non-fatal injuries to children. The Safe Kids Coalition has more than 24 regional offices throughout the state.

Ohio Department of Youth Services

<http://www.dys.ohio.gov/dysweb/default.aspx>

This agency operates the state juvenile corrections and rehabilitation facilities for the confinement and treatment of youth adjudicated delinquent.

Prevent Child Abuse Ohio (PCAO)

www.pcao.org

This organization is dedicated to preventing child abuse and neglect through community education and information. They also offer many different programs and resources.

Public Children Services Association of Ohio (PCSAO)

www.pcsao.org/index.htm

PCSAO supports children's safety and their stability through advocacy and training.

Fight Crime/Invest in Kids Ohio

www.fightcrime.org/oh

This organization reviews research on preventing children from becoming criminals and provides it to policymakers and the public.

During 2007-08, the FRC Teen Parent Program provided needs assessments, referral services, and ongoing case management to over 60 court-involved families. There were a total of 39 teen parents from 37 families enrolled at the FRC.

Of the 39 teen parents whose families were enrolled at the FRC during 2007-08:

- 100% (29) of all pregnant youth received prenatal care
- 94% (34) were linked to resources for basic needs
- 92% (32) maintained custody of their children
- 83% (31) were linked to teen parent resources
- 64% (25) had increased knowledge about Pregnancy Prevention
- 58% (23) were linked to counseling services
- 58% (23) had reduced court involvement and/or completion of court orders
- 43% (17) enrolled in school and/or improved attendance
- 38% (15) had increased knowledge about STDs
- 2 attained employment and/or increased employability skills

Summit County's teen birth rate has improved 22%, from a rate of 23 to 18 teen births per 1000 births between 2001 and 2006. The FRC Teen Parent Program incorporates many of the components that reduce the risks to teen parents and their children. Hopefully, the involvement of families in the program will continue to reduce the rate of teen pregnancy and the risks to teen parents.

For more information about the Teen Parent Program, contact **Charece M. Harris**, Youth & Family Specialist, FRC Summit County Juvenile Court at 330-379-3616 or charris@cpccourt.summitoh.net.

Endnotes

¹ From Child Trends DataBank website: <<http://www.childtrendsdatabank.org/indicators/57LowBirthweight.cfm>>

² *Lead exposure in the home*. In M. Lopes (Ed.) CareGiver News (August, insert). Amherst, MA: University of Massachusetts Cooperative Extension, 1994. Taken from NNCC website at <<http://www.nncc.org/Health/lead.home.html#anchor741080>>

³ Healthy People 2010 Midcourse Review, Chapter 8: Environmental Health. <<http://www.healthypeople.gov/data/midcourse/>>

⁴ Ohio Asthma Coalition "Fast Facts" web page. <<http://www.ohioasthmacoalition.org/asthma/learn.htm>>

⁵ Ibid.

⁶ Ohio Department of Health Information Warehouse. <<http://dwhouse.odh.ohio.gov/datawarehousev2.htm>>

⁷ The Annie E. Casey Foundation *2008 KIDS COUNT Data Book*, p 43.

⁸ Ibid.

HEALTHY PEOPLE 2010

One of the issues with the Ohio's KIDS COUNT Data Book is something that can be brought up about any advocacy publication—how can the data be turned into action? In particular, the 2008 *Ohio's KIDS COUNT Data Book* has chosen to shine the spotlight on **Health: the Physical and Mental Well-being of Ohio's Children**, which is intended to focus on the improvement of a variety of indicators that can benefit the health of our children. This book goes on to highlight trends in these indicators in order to show the current conditions of our children, as well as to show how the conditions have changed over the recent years. But sometimes it can be unclear as to how “good” or how “bad” the conditions are. For example, if ten children out of one thousand have amounts of lead in their blood that the Center for Disease Control has deemed too high, is that bad? Or should we strive to bring that number down? Ohio's KIDS COUNT believes there is always room for improvement, which is why **Healthy People 2010** has been chosen as a guideline of **turning data into action**.

Healthy People 2010 (HP 2010) is a federal initiative in the United States that provides set objectives for measuring the health of the population. Its origins can be traced back to a 1979 Surgeon General report titled “Healthy People,” which evolved into “Healthy People 2000” in 1990. In 1988, the Healthy People Consortium was formed to develop HP 2000 at the request of the Public Health Service. The Consortium is made up of hundreds of state and federal agencies representing the following sectors: public health, mental health, substance abuse, environmental, advocacy, and business. Beginning with the 1979 Healthy People report, these reports have been developed through a broad consultation process and are designed to effectively track progress over a given time period.

HP 2010 has twenty-eight focus area chapters that are intended to achieve two broad goals:

- 1) **Increase quality and years of healthy life**
- 2) **Eliminate health disparities**

These two goals are very much intertwined with one another, since in order to achieve the first goal, the second must be met; likewise, the reverse is also true. The goals alone are very open-ended and abstract, so the focus area chapters of HP 2010 are comprised of much more detail and specificity. Each focus area chapter has its own goal statement which explains its overall purpose. Varying numbers of objectives and sub-objectives are then listed depending on the focus area chapter, which provide tangible ways of measuring the goal of the focus area. For example, in focus area chapter one, the following is given:



Title: Access to Quality Health Services

Goal: Improve access to comprehensive, high-quality health care services.

Objective 1-1: Increase the proportion of persons with health insurance.

This is an illustration of the explicitness of HP 2010: Broad, intangible goals, such as “eliminate health disparities,” are operationalized into measurable variables such as Objective 1-1.

Implementation

As previously mentioned, the Healthy People Consortium is the main force behind implementation, and has been since its formation in 1988; membership has since doubled to include more than four hundred organizations. Virtually all state and territorial health departments are part of the Consortium and serve as the coordinators of Healthy People for their respective states and territories. HP 2010’s website lists the following statistics:

As of Fall 1999, 47 states as well as DC and Guam have published their own HP 2000 plans.

As of Summer 2001, 15 states have released HP 2010 plans.

The Consortium advocates other methods of implementation besides making state HP plans, however, HP is designed so that any person or organization can craft a plan in order to measure progress. The HP 2010 website gives the following suggestions on how to contribute to Healthy People:

- 1) Integrate Healthy People objectives into current programs, special events, publications, and meetings.**
- 2) Incorporate Healthy People into healthy community initiatives.**
- 3) Utilize Healthy People in Planning.**
- 4) Use Healthy People objectives in performance measurement activities.**
- 5) Join the Consortium.**

Essentially, these suggestions all indicate that Healthy People will benefit everyone and can be used by anyone at the local, state, and national levels. It can be used by schools to monitor the health of students; by neighborhood groups to promote healthy communities; by senior living centers for the benefit of residents. Regardless of the size of the community, HP 2010 is a useful tool that has been provided to the public by an unrivaled alliance of health organizations. Given that HP 2010 is so versatile that anyone can utilize it for promoting better public health, the question must be asked: Is HP 2010 actually being used?

Healthy People in Healthy Communities

One example of implementation besides the federal and state plans is a publication titled *Healthy People in Healthy Communities: A Community Planning Guide Using Healthy People 2010*. This document was prepared by the Office of Disease Prevention and Health Promotion, Office of Public Health and Science, U.S. Department of Health and Human Services. The HP 2010 website describes it as “a guide for building community coalitions, creating a vision, measuring results, and creating partnerships dedicated to improving the health of a community. It includes ‘Strategies for Success’ to help in starting community activities.”¹ Effectively, this document shows step-by-step how community leaders can practically apply HP 2010 to their own unique predicaments.

Healthy People in Healthy Communities should be on every community and civic leader’s desk. Not only does it describe in detail the contents and purpose HP 2010, but it also provides a systematic method (with the acronym MAPIT) for applying HP 2010 to any community, from a variety of perspectives.

Mobilize Key Individuals and Organizations

Assess Community Needs, Strengths, and Resources

Plan for Action

Implement the Action Plan

Track Progress and Outcomes

Not only are there multiple pages dedicated to each of the five steps, but “Strategies for Success” depending on the person’s role in society, specifically for community members, health professionals, and local government and university partners. The appendix also contains a one-page, three-step approach to using HP 2010 to achieve community goals. The one-pager happens to express precisely what using HP 2010 can achieve through documenting progress:

“First, it can keep coalition members interested and motivated because they will be able to see real changes in the community that result from the actions of the coalition. Second, it can generate interest from those who have had reservations about or lacked awareness of your efforts, and thus help you broaden your coalition. And, third, it can demonstrate to those who fund community efforts that your initiative is working to improve your community.”²

By itself, it could be argued that HP 2010 is just another document, not necessarily a ‘practical tool.’ *Healthy People in Healthy Communities* is an accompanying ‘How To’ book, which functions as an instruction booklet to show community leaders, agency directors, and key stakeholders how to make use of HP 2010. The goal of Ohio’s KIDS COUNT is to make more people who are in the position to implement HP 2010 aware of the resources available to them such as *Healthy People in Healthy Communities*.

HP 2010 Key Focus Areas for Ohio’s KIDS COUNT

HP 2010 has a wide range of objectives covering 28 Focus Area Chapters; therefore, Ohio’s KIDS COUNT has selected those objectives that directly relate to KIDS COUNT indicators for comparison purposes. In addition to these, some are mentioned simply because of their general significance with regard to children’s health.

Chapter 1: Access to Quality Health Services

Access to quality health services is something that every child should have, with no exceptions. This is one of the keys to eliminating the health disparities that too often prevail in our society. The goal of this chapter is to improve access to comprehensive, high-quality healthcare services, including preventive, primary, emergency, long-term, and rehabilitation.

Relevant objectives:

- Increase the proportion of persons with health insurance to 100 percent.
- Increase the number of states that have implemented guidelines for pre-hospital and hospital pediatric care.
- Reduce hospitalization rates for pediatric asthma to 17.3 admissions per 10,000 youths.

Chapter 7: Educational and Community-Based Programs

With operating costs continually on the rise, administrators are constantly searching for ways to cut spending, and extra-curricular programs are one of the first things to go. Likewise, inner-city neighborhoods tend to lack the same public health services available in more affluent areas. The goal for Chapter 7 is to increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and improve health and quality of life, and tools such as *Healthy People in Healthy Communities* could help achieve this goal.

Relevant objectives:

- Increase high school completion to 90 percent.
- Increase education in health priority areas.
- Increase the proportion of tribal and local health service areas or jurisdictions that have established a community health promotion program that addresses multiple HP 2010 focus areas.
- Increase the proportion of local health departments that have established culturally appropriate and linguistically competent community health promotion and disease prevention programs.

Chapter 8: Environmental Health

Chapter eight's goal is to promote health for all through a healthy environment. In today's society, a healthy environment should be mandatory. City development and utility departments have more than enough codes in effect, and there should be no reason why they are not enforced. In objectives such as 8.1, the goal for 2010 is "elimination of elevated blood levels in children," but statistics show that Ohio is far from reaching this goal.

Relevant objectives:

- Eliminate elevated blood lead levels in children.
- Increase the proportion of schools with official school policies ensuring the safety of students and staff from environmental hazards to 100 percent.

Chapter 9: Family Planning

According to a publication titled *New Frontiers in Contraceptive Research: A Blueprint for Action* (2004), "[i]mproved child health and development is associated with healthy, planned pregnancies." Moreover, "[p]reparation for a healthy pregnancy can help both parents minimize economic hardship, achieve educational and career goals, and stabilize their relationship, all of which is ultimately beneficial to their children as well."³ With this in mind, the goal of Chapter 9 is to improve pregnancy planning and spacing and prevent unintended pregnancy.

Relevant objectives:

- Reduce pregnancies among adolescent females to 43 per 1,000 females ages 15 to 17.
- Increase the proportion of adolescents who have never engaged in sexual intercourse before age 15 years to 88 percent.

Chapter 15: Injury and Violence Prevention

The goal for this chapter is to reduce injuries, disabilities, and deaths due to unintentional injuries and violence. According to the National Center for Health Statistics (NCHS), as of 2005 the leading cause of death for minors (ages 1-17) is unintentional injury, which caused 7,102 deaths in 2005.⁴ *Healthy People 2010* states the following:

The injury and violence prevention objectives aim to reduce such injuries, disabilities, and deaths, thereby increasing the quality and years of healthy life. Contributing to the elimination of health disparities, they also emphasize interventions that focus on populations most at risk for unintentional injury and violence.⁵

Relevant objectives:

- Increase the use of child restraints to 100 percent.
- Reduce maltreatment of children to 10.1 per 1,000 children under age 18 years (20 percent improvement).
- Reduce child maltreatment fatalities to 1.4 per 100,000 children under age 18 years (12 percent improvement).
- Reduce physical fighting among adolescents in grades 9 through 12 to 32 percent.
- Reduce weapon carrying by adolescents on school property to 4.9 percent.

Chapter 16: Maternal, Infant, and Child Health

By far the most relevant section to the Ohio's KIDS COUNT Data Book, Chapter 16, is exclusively concerned with the health of mothers and children. The goal of this section, which is to improve the health and well-being of women, infants, children, and families, echoes the mission of KIDS COUNT. The majority of the objectives pulled for the data book come from this chapter. Certainly all of the objectives in this section are important to the mission of KIDS COUNT, with the following highlighted relevant objectives:

Relevant objectives:

- Reduce fetal and infant deaths to the following rates: 4.4 per 1,000 live births plus late fetal deaths for perinatal period (28+ weeks of gestation till less than 7 days after birth); 4.5 per 1,000 live births for all infant deaths within one year of birth.
- Reduce the rate of child and adolescent deaths to the following rates (per 100,000 in age group): 20.0 for ages 1 to 4; 13.0 for ages 5 to 9; 16.5 ages 10 to 14 (taken from Objective 16.3).
- Increase the proportion of pregnant women who receive early and adequate prenatal care to 90 percent.
- Reduce low birthweight (LBW) and very-low birthweight (VLBW) to 5 and 0.9 percent of live births, respectively.
- Reduce preterm births to 7.6 percent of live births.

Chapter 18: Mental Health and Mental Disorders

Good physical health does not alone constitute a healthy child, and Chapter 18 addresses this issue. This chapter's goal is to improve mental health and ensure access to appropriate, quality mental health services.

Relevant objectives:

- Reduce the rate of suicide attempts by adolescents to a twelve-month average of 1.0 percent.
- Increase the proportion of children with mental health problems who receive treatment to 66 percent.
- Increase the proportion of juvenile residential facilities that screen admissions for mental health problems to 55 percent (10 percent improvement).

Chapter 19: Nutrition and Overweight

According to a 2004-2005 study of third graders done by Healthy Ohioans, the percentage of overweight children in the United States tripled between 1980 and 2002.⁶ The same report states that overweight children are more likely to be affected with asthma, bone and joint problems, sleep problems, high blood pressure, high cholesterol, Type 2 diabetes, early growth and puberty, and psychological problems.⁷ At the same time, many children are not getting the recommended servings of milk, fruits, vegetables, and whole grains. With this in mind, the goal of Chapter 19 is to promote health and reduce chronic disease associated with diet and weight.

Relevant Objectives:

- Reduce the proportion of children and adolescents who are overweight or obese to five percent.
- Reduce growth retardation among low-income children under age 5 years to four percent.

Chapter 21: Oral Health

According to HP 2010, oral health plays an important part in our overall health throughout our lives.⁸ Oral health is something people take for granted; indeed, for many people, routine six-month dental visits are a part of our everyday life. However, HP 2010, while pointing to the improvement of this country's oral health over the past fifty years, still calls to mind the disparities that continue to exist:

“The improvement of America’s oral health over the past 50 years is a public health success story: Most of the gains have resulted from application of effective prevention and control measures. The burden of oral diseases falls hardest on those persons who have the least access to prevention and treatment. Access to care is associated with socioeconomic factors such as race and ethnicity, education level, and income. Profound disparities exist in some oral disease levels and in receipt of care among various populations in the United States.”⁹

With the overall goal of eliminating health disparities in mind, the goal of this chapter is to prevent and control oral and craniofacial diseases, conditions, and injuries and improve access to related services.

Relevant objectives:

- Reduce the proportion of children and adolescents who have dental caries experience in their primary or permanent teeth to 42 percent.

- Reduce the proportion of children with untreated dental decay in primary and permanent teeth to 21 percent.
- Increase the proportion of children who have received dental sealants on their molar teeth to fifty percent.
- Increase the proportion of children and adults who use the oral health care system each year to 56 percent.
- Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year to 66 percent.
- Increase the proportion of school-based health centers with the following oral health components: Dental sealants—15%; Dental care—11% (25 percent improvement).

Chapter 26: Substance Abuse

Substance abuse is one of the harsh realities of life, and it must be recognized before it can be properly treated. Countless, unfortunate stories remind us that if substance abuse is not properly dealt with, it can negatively impact the lives of children and adolescent teens in many different ways. The goal of Chapter 26 is to reduce substance abuse to protect the health, safety, and quality of life for all, especially children.

Relevant objectives:

- Reduce the proportion of adolescents who report that they rode, during the previous 30 days, with a driver who had been drinking alcohol to thirty percent.
- Increase the age and proportion of adolescents who remain alcohol and drug free (for adolescents aged 12 to 17 years, the target is 16.1 percent free of alcohol, 17.4 percent free of marijuana).
- Increase the proportion of adolescents who perceive great risk associated with substance abuse (for adolescents aged 12 to 17 years, the target is fifty percent perceiving great risk associated with consuming five or more alcoholic drinks at a single occasion once or twice a week, 36 percent for smoking marijuana once per month, and 57 percent for using cocaine once per month).

Endnotes

- ¹ Taken from description found at <<http://www.healthypeople.gov/Publications/HealthyCommunities2001/default.htm>>
- ² *Healthy People in Healthy Communities*, p 43.
- ³ Nass, S., and Strauss, J., eds. *New Frontiers in Contraceptive Research: A Blueprint for Action*. Washington, DC: National Academies Press, 2004. As referenced in *Healthy People 2010 Midcourse Review*. Chapter 9: Family Planning, Introduction. <<http://www.healthypeople.gov/data/midcourse/html/focusareas/FAQ9Introduction.htm>>
- ⁴ Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System. <www.cdc.gov/ncipc/wisqars>
- ⁵ *Healthy People Midcourse Review*, Chapter 15: Injury and Violence Prevention, Introduction. <<http://www.healthypeople.gov/data/midcourse/html/focusareas/FA15Introduction.htm>>
- ⁶ Taken from page 1, *Introduction*, from *A Report on the Body Mass Index of Ohio's Third Graders: 2004-2005*, by Ohio Department of Health Division of Family and Community Health Services
- ⁷ *Ibid.*, pp 9-10.
- ⁸ *HP 2010 Midcourse Review*, Chapter 21: Oral Health, Introduction. <<http://www.healthypeople.gov/data/midcourse/html/focusareas/FA21Introduction.htm>>
- ⁹ *Ibid.* This text cites the following source for information: U.S. Department of Health and Human Services (HHS). *Oral Health in America: A Report of the Surgeon General*. Rockville, MD: HHS, National Institutes of Health (NIH), National Institute of Dental and Craniofacial Research (NIDCR), 2000, pp 61-93, 155-188.

OHIO'S CHILD POPULATION: QUICK FACTS AND TRENDS

- The percentage of children ages 0 to 17 that make up Ohio's total population decreased from 25 percent in 2001 to 24 percent in 2007. The number of children in this age group dropped 3.37 percent during this time period, from 2,847,856 to 2,751,874.
- The proportion of children that make up the total population as of 2007 ranges from 16.6 percent in Athens County to 33.6 percent in Holmes County. Franklin County has a relatively high proportion of children—25.5 percent, the 12th highest of the 88 counties—compared to other metropolitan counties like Cuyahoga, Hamilton, Mahoning, and Montgomery, whose proportions are roughly in the middle range. Overall, Ohio's proportion of children dropped from 25 to 24 percent from 2001 to 2007.
- Thirteen of Ohio's counties—that is, 14.8 percent—saw an increase in the child population. Delaware County and Warren County saw the largest increases—35.9 and 19.2 percent, respectively—while the rest of the increases were fewer than ten percent. Of the 13 counties that experienced a decline of more than ten percent in the child population, eleven (85 percent) were rural or Appalachian counties. The county with the greatest loss was Monroe County (15 percent).
- At the national level, Ohio had the 24th lowest percentage of the population represented by children ages 0 to 17 at 24.0 percent. The percentage ranged from a low of 21.1 in Vermont to a high of 30.9 in Utah.
- The percentage of live births in Ohio has dropped by 0.6 percent from 2001 to 2006, causing a 2.6 percent decrease in the number of children ages 0 to 5 over that same time period. Likewise, the number of children ages 6 to 13 declined 6.6 percent during that time. However, the number of children ages 14 to 17 increased 1.6 percent.
- While the decline of live births in Ohio was 0.6 percent from 2001 to 2006, it was not a steady decline; rather, the number of live births dropped from 151,410 in 2001 to 148,483 in 2003 (a 1.9 percent decrease), continued downward to 148,255 in 2005, and then increased to 150,510 in 2006 (a 1.5 percent increase from 2005).
- From 2000 to 2007, the populations of White, Black, and American Indian/Alaskan Native children decreased at rates of 6.5, 5.4, and 13.3 percent, respectively. Over the same time period, Asian, Native Hawaiian/Pacific Islander*, and Hispanic child populations saw considerable increases at rates of 22.5, 12.7, and 23.1 percent, respectively (see table below).

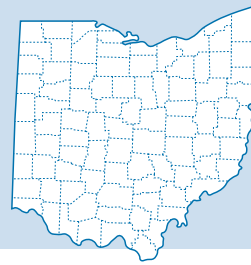
Ohio's Children: Racial Breakdown		White	Black	AIAN	Asian	NHPI*	Hispanic
2000	#	2,324,315	415,082	6,334	31,376	731	80,338
	%	80.47	14.37	0.22	1.09	0.03	2.78
2007	#	2,172,482	39,2750	5,493	38,451	824	98,874
	%	79.1	14.3	0.2	1.4	0	3.6
	% change	-6.5	-5.4	-13.3	22.5	12.7	23.1

Source: U.S. Census Bureau, 2000 Census, 2007 ACS

* For Native Hawaiians/Pacific Islanders, The 2007 ACS estimates them making up 0.0% of the child population. To compensate for this, Kids Count Ohio calculated the NHPI population based on 0.03% (the percentage from 2000).



Ohio



Capital: Columbus
 Total Population: 11,463,513
 Child Population: 2,770,035

Race:
 White-84% • Black-11.8% • Latino-2.3% • Asian-1.5%
 Estimated Median Household Income: \$44,532



Children's Defense Fund-Ohio

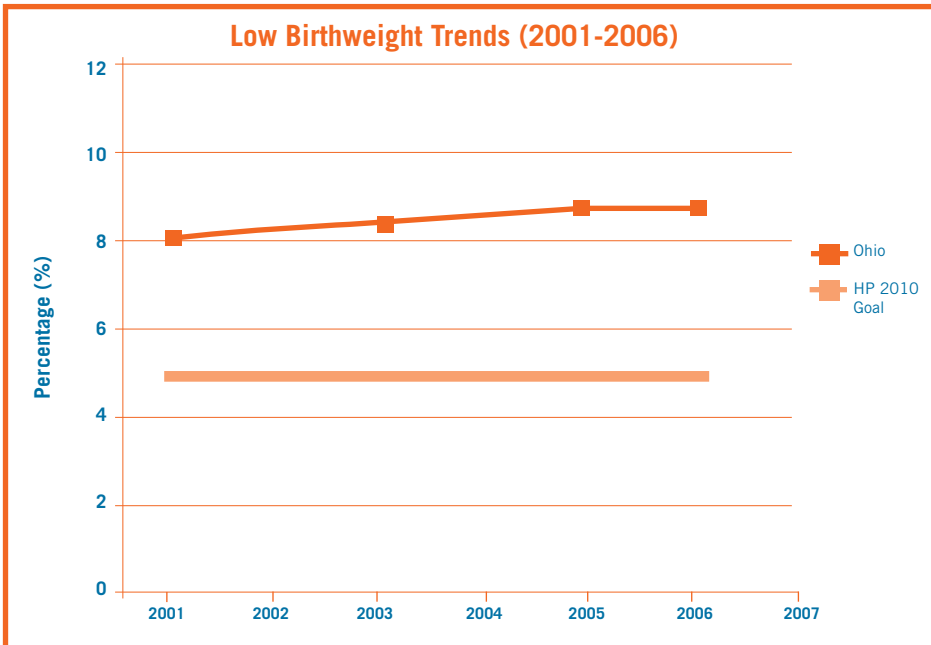
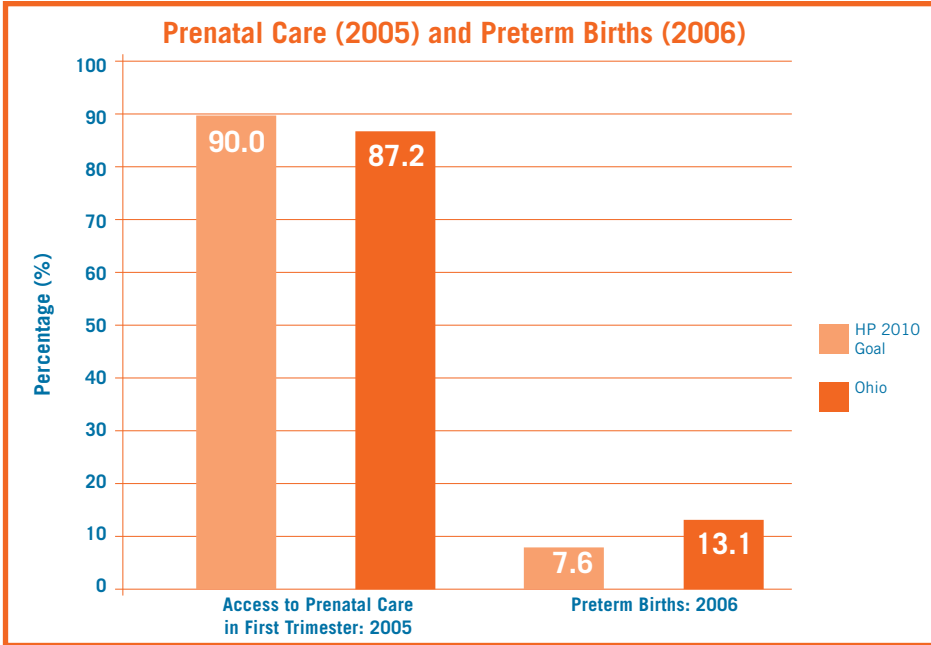


PERCENT CHANGE OVER TIME

Ohio



Indicator	Year	Ohio % or Rate
Children living in poverty	2001	15
	2006	19
Children receiving free/reduced price lunch	2001	22
	2007	27
Unemployment rate	2001	4
	2007	6
Children receiving food stamps	2001	12
	2007	20
Children in child care assistance programs (Rate/1000)	2001	47
	2006	49
Births to adolescents (Rate/1000)	2001	22
	2006	20
Infants born at low birthweight	2001	8
	2006	9
Children in public health care programs	2001	27
	2005	41
4th graders less than proficient in math	2001	43
	2007	24
4th graders less than proficient in reading	2001	46
	2007	20
Students not graduating from high school	2001	19
	2007	14
Children abused or neglected (Rate/1000)	2001	11
	2006	10
Children in foster care (Rate/1000)	2001	13
	2006	11
Adolescents adjudicated for felonies (Rate/1000)	2001	15
	2006	14



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.9	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	13.3
	Asthma Episode (%)	50.3
	Asthma ER Visits (%)	24.1
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	69.6
	% Never Visited a Dentist	14.6
	% Uninsured for Dental Care	22.9
% Who Could Not Receive Needed Dental Care	4.6	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	128,801
	Total EBLs	2,742
	Rate/1000	21.3
		Eliminate Elevated Blood Lead Levels in Children

MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	1,046	7.1	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1,225	8.3	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	828	5.6	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	397	2.7	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
426	20.1	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

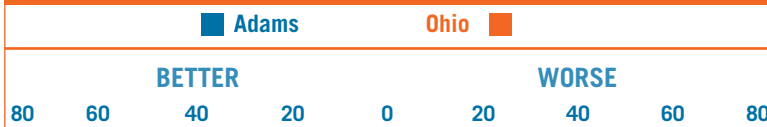
Adams



County Seat: West Union
 County Type: Appalachian
 Total Population: 28,240
 Child Population: 6,934

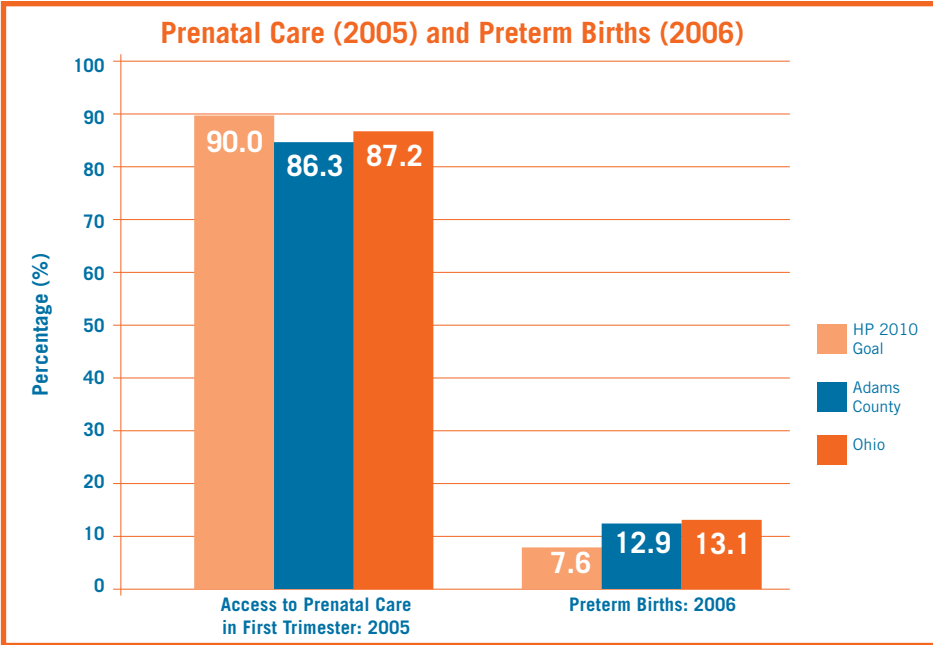


PERCENT CHANGE OVER TIME



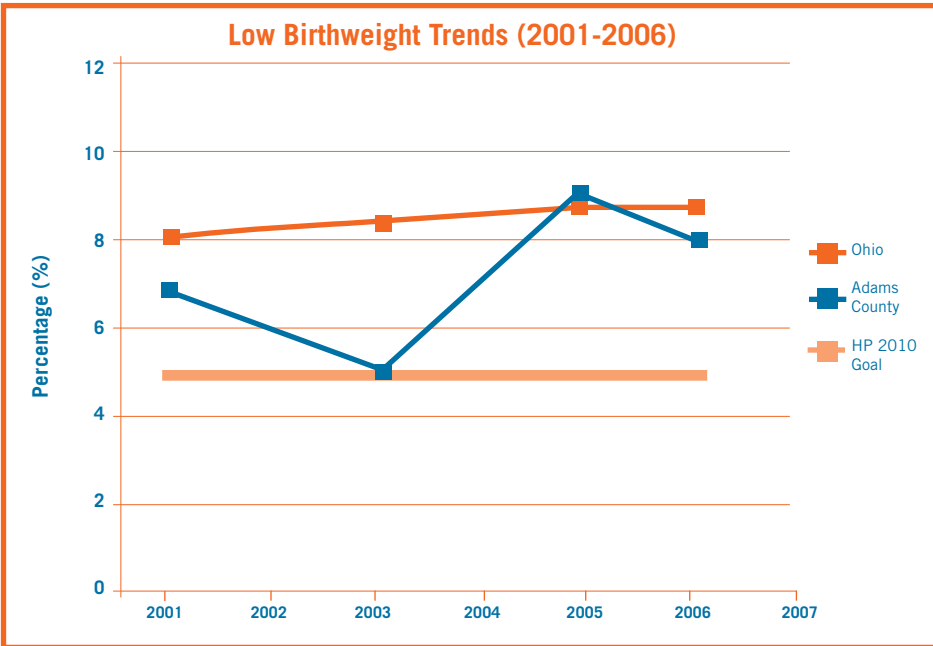
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	25	15
	2005*	29	19
Children receiving free/reduced price lunch	2001	36	22
	2007	42	27
Unemployment rate	2001	7	4
	2007	8	6
Children receiving food stamps	2001	17	12
	2006*	30	20
Children in child care assistance programs (Rate/1000)	2001	10	47
	2006	27	49
Births to adolescents (Rate/1000)	2001	30	22
	2006	21	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	47	27
	2005	68	41
4th graders less than proficient in math	2001	60	43
	2007	29	24
4th graders less than proficient in reading	2001	65	46
	2007	20	20
Students not graduating from high school	2001	21	19
	2006*	9	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	9	10
Children in foster care (Rate/1000)	2001	12	13
	2006	18	11
Adolescents adjudicated for felonies (Rate/1000)	2001	7	15
	2006	9	14

*Refer to page 225 for details.



HEALTH INDICATORS

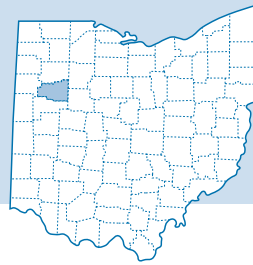
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 21.9	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 14.8	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 81.2	
	Asthma ER Visits (%): 3.9	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 70.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17.7	
	% Uninsured for Dental Care: 25.2	
	% Who Could Not Receive Needed Dental Care: 7.7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 443	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 6	
	Rate/1000: 13.5	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	2	4.8
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	4.5
Infant Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	9.6
2005	#	Rate (per 1000 live births)
	4	4.5
Neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	7.2
2005	#	Rate (per 1000 live births)
	1	2.9
Post-neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	2.4
2005	#	Rate (per 1000 live births)
	1	1.2
Child Death (1-14 yrs)		HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	3	57
		<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Allen



County Seat: Lima
 County Type: Metropolitan
 Total Population: 105,310
 Child Population: 26,318

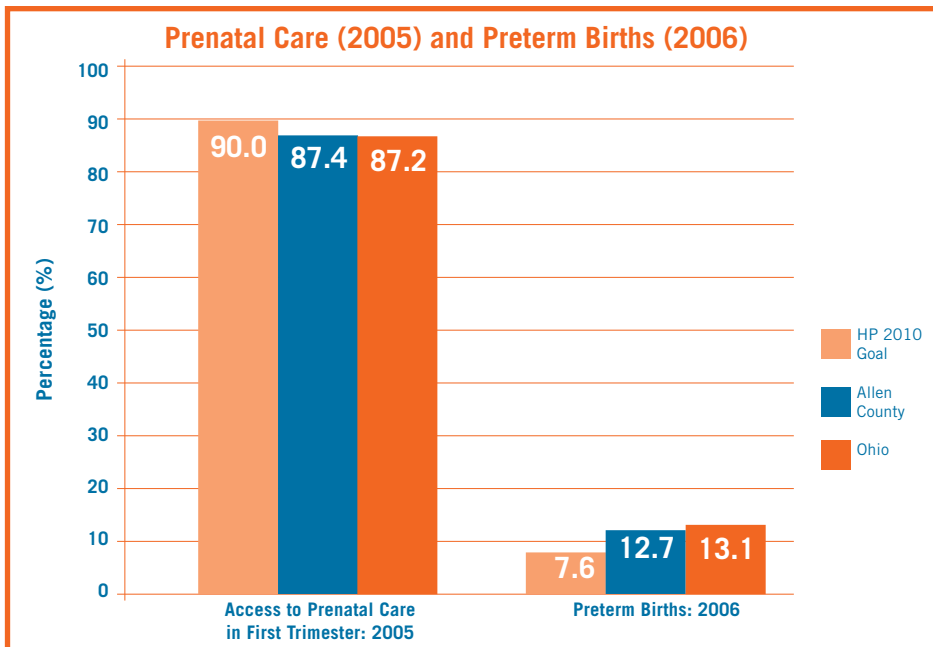


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	16	15
	2006*	16	19
Children receiving free/reduced price lunch	2001	32	22
	2007	38	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	12	12
	2006*	20	20
Children in child care assistance programs (Rate/1000)	2001	23	47
	2006	33	49
Births to adolescents (Rate/1000)	2001	34	22
	2006	26	20
Infants born at low birthweight	2001	10	8
	2006	9	9
Children in public health care programs	2001	26	27
	2005	41	41
4th graders less than proficient in math	2001	46	43
	2007	25	24
4th graders less than proficient in reading	2001	52	46
	2007	19	20
Students not graduating from high school	2001	21	19
	2006*	13	14
Children abused or neglected (Rate/1000)	2001	21	11
	2006	16	10
Children in foster care (Rate/1000)	2001	8	13
	2006	8	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	19	14

*Refer to page 225 for details.

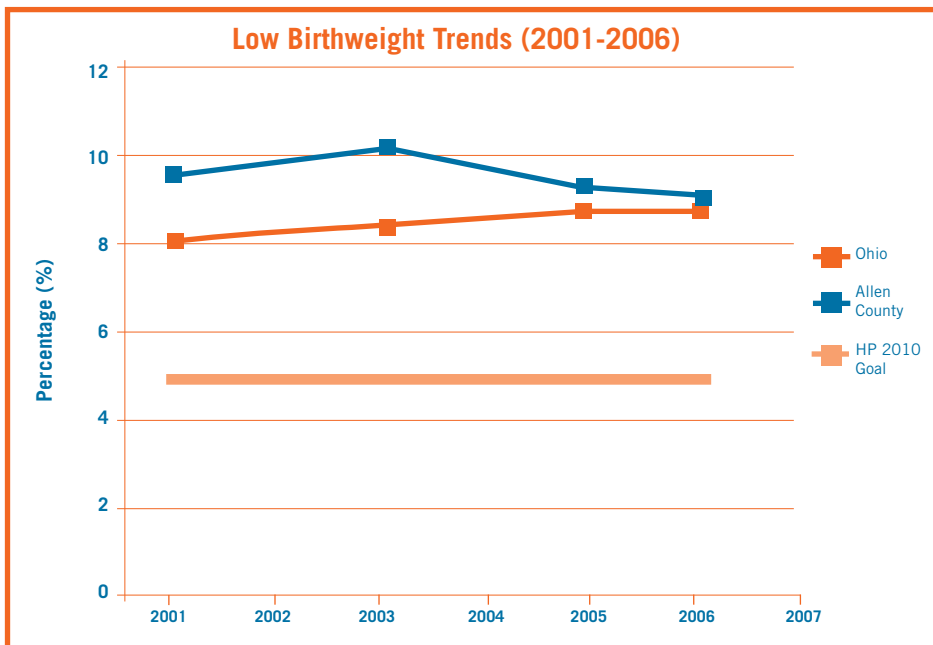


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 22.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	4.6
	Asthma Episode (%)	46.9
	Asthma ER Visits (%)	18.8
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	69.5
	% Never Visited a Dentist	12.4
	% Uninsured for Dental Care	25.3
	% Who Could Not Receive Needed Dental Care	4.1
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	1,358
	Total EBLs	21
	Rate/1000	15.5

HP2010 Goals:

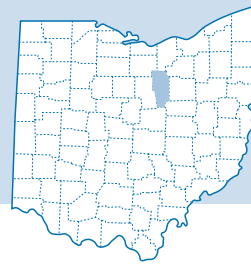
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	12	8.3
		4.5
Infant Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	15	10.4
		4.5
Neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	10	6.9
		2.9
Post-neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	5	3.5
		1.2
Child Death (1-14 yrs)		HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	6	29.3
		• 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)

Ashland



County Seat: Ashland
 County Type: Rural Non-Appalachian
 Total Population: 54,387
 Child Population: 12,869



Children's Defense Fund-Ohio

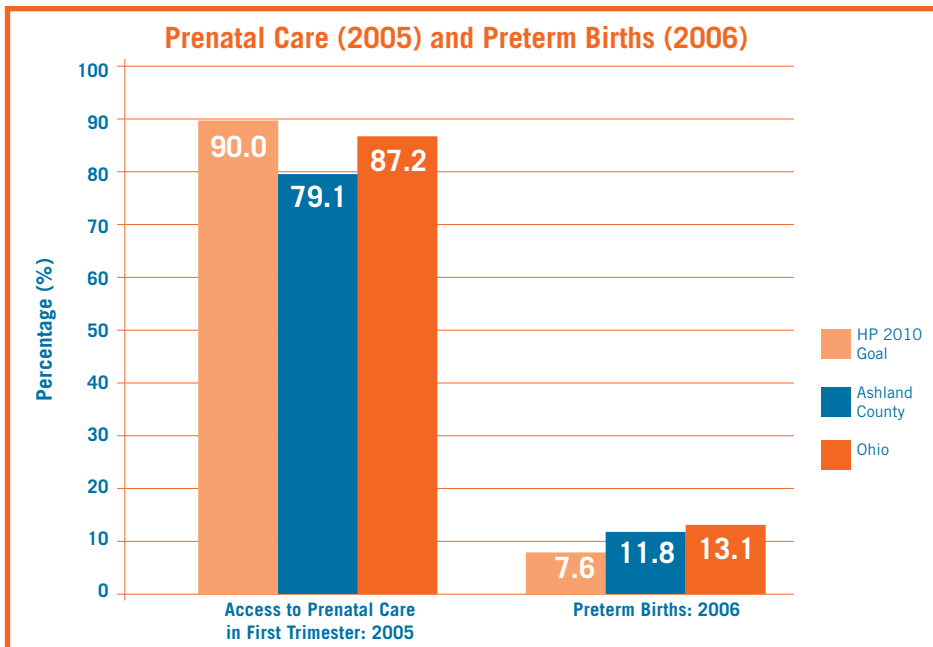


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	13	15
	2005*	17	19
Children receiving free/reduced price lunch	2001	17	22
	2007	27	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	5	12
	2006*	12	20
Children in child care assistance programs (Rate/1000)	2001	11	47
	2006	21	49
Births to adolescents (Rate/1000)	2001	22	22
	2006	13	20
Infants born at low birthweight	2001	4	8
	2006	8	9
Children in public health care programs	2001	17	27
	2005	34	41
4th graders less than proficient in math	2001	41	43
	2007	23	24
4th graders less than proficient in reading	2001	44	46
	2007	17	20
Students not graduating from high school	2001	12	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	7	10
Children in foster care (Rate/1000)	2001	6	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	10	15
	2006	11	14

*Refer to page 225 for details.

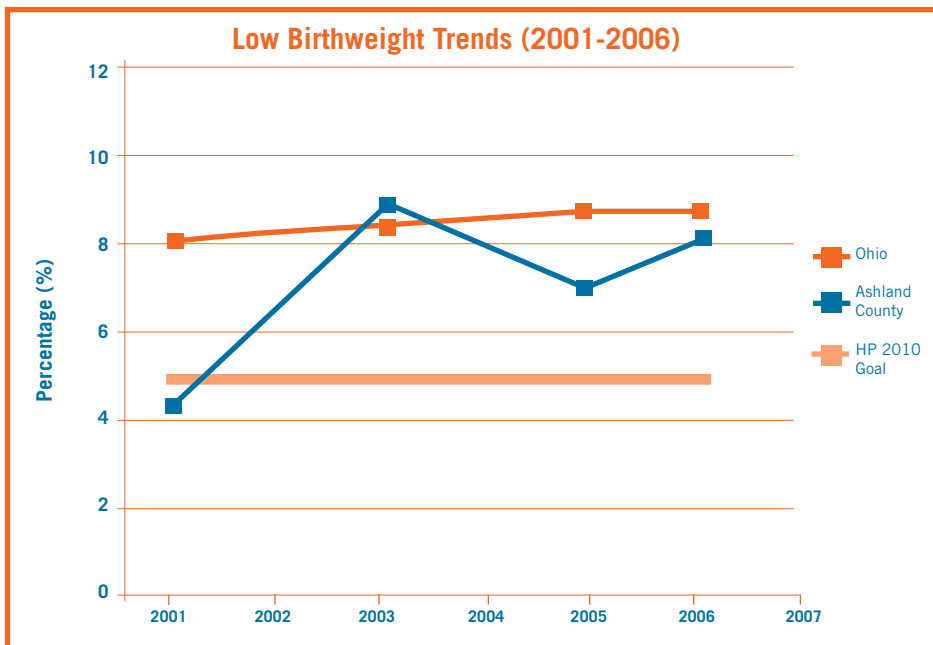


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 20.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	10
	Asthma Episode (%)	37.1
	Asthma ER Visits (%)	19.3
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.9
	% Never Visited a Dentist	12.3
	% Uninsured for Dental Care	22.5
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	7
	Total Children Screened (0-72 months)	462
	Total EBLs	2
	Rate/1000	4.3

HP2010 Goals:

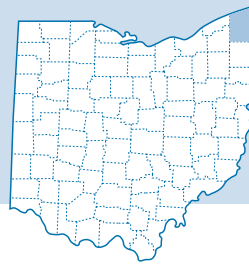
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	5	7.7	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	6.2	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	4.6	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	1.5	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
5	51.6	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Ashtabula



County Seat: Jefferson
 County Type: Rural Non-Appalachian
 Total Population: 101,500
 Child Population: 24,581



Children's Defense Fund-Ohio



PERCENT CHANGE OVER TIME

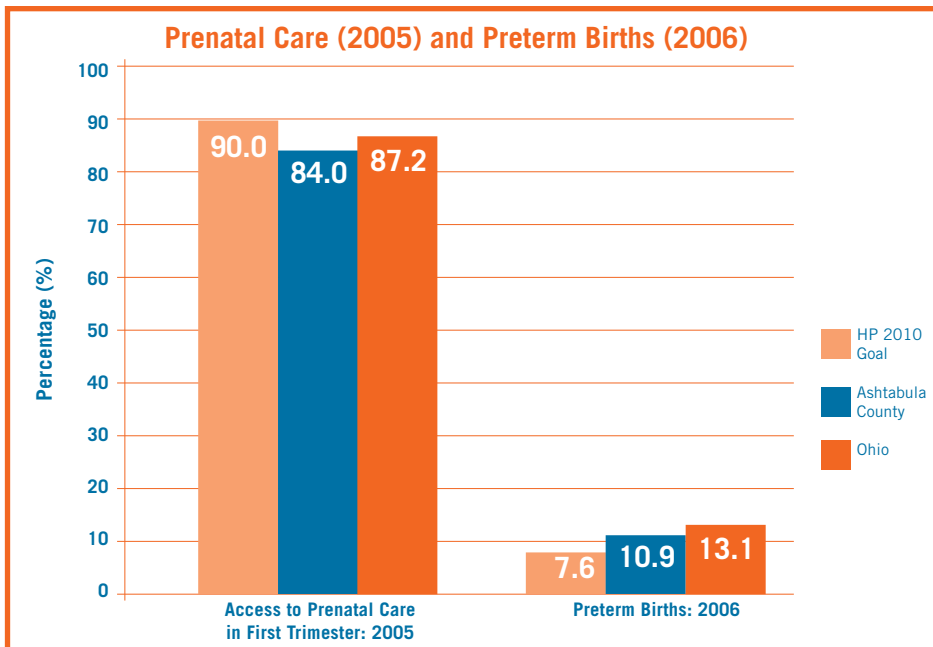
Ashtabula Ohio

BETTER WORSE

80 60 40 20 0 20 40 60 80

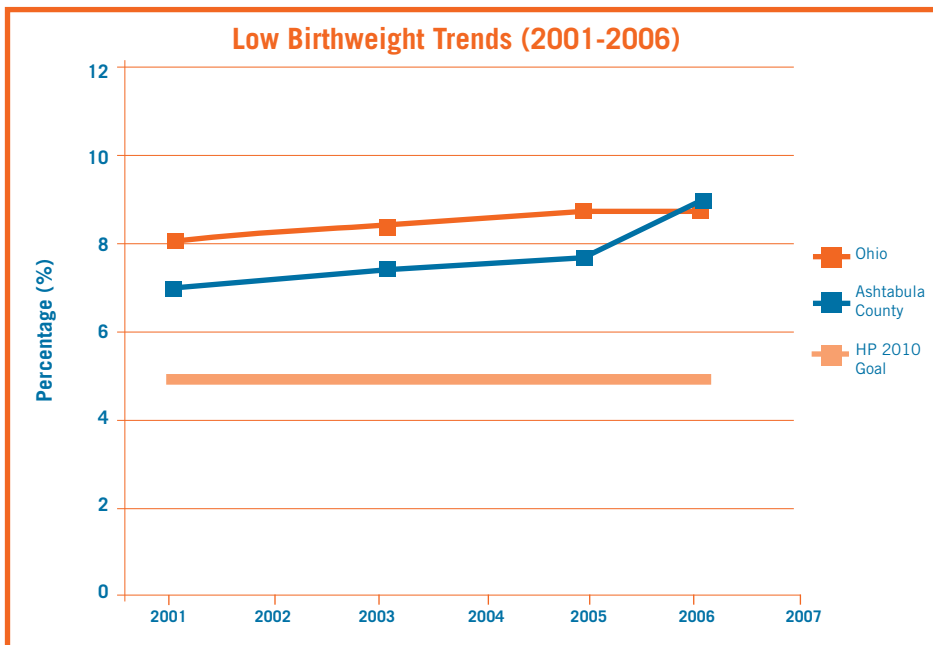
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	20	15
	2006*	21	19
Children receiving free/reduced price lunch	2001	27	22
	2007	36	27
Unemployment rate	2001	6	4
	2007	7	6
Children receiving food stamps	2001	12	12
	2006*	22	20
Children in child care assistance programs (Rate/1000)	2001	43	47
	2006	50	49
Births to adolescents (Rate/1000)	2001	28	22
	2006	16	20
Infants born at low birthweight	2001	7	8
	2006	9	9
Children in public health care programs	2001	33	27
	2005	50	41
4th graders less than proficient in math	2001	54	43
	2007	21	24
4th graders less than proficient in reading	2001	55	46
	2007	18	20
Students not graduating from high school	2001	15	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	5	11
	2006	7	10
Children in foster care (Rate/1000)	2001	11	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	11	15
	2006	9	14

*Refer to page 225 for details.



HEALTH INDICATORS

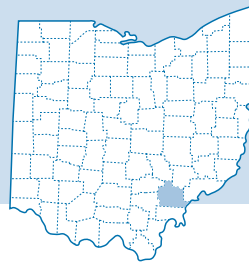
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 23.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	10
	Asthma Episode (%)	26.9
	Asthma ER Visits (%)	17.1
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.6
	% Uninsured for Dental Care	24.6
2006	% Who Could Not Receive Needed Dental Care	5.1
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	853
	Total EBLs	18
	Rate/1000	21.1
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	12	9.3	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	10	7.8	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	9	7	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	0.8	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
4	21.3	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

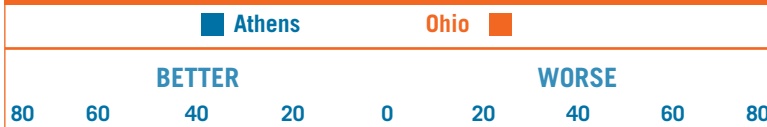
Athens



County Seat: Athens
 County Type: Appalachian
 Total Population: 63,237
 Child Population: 10,628

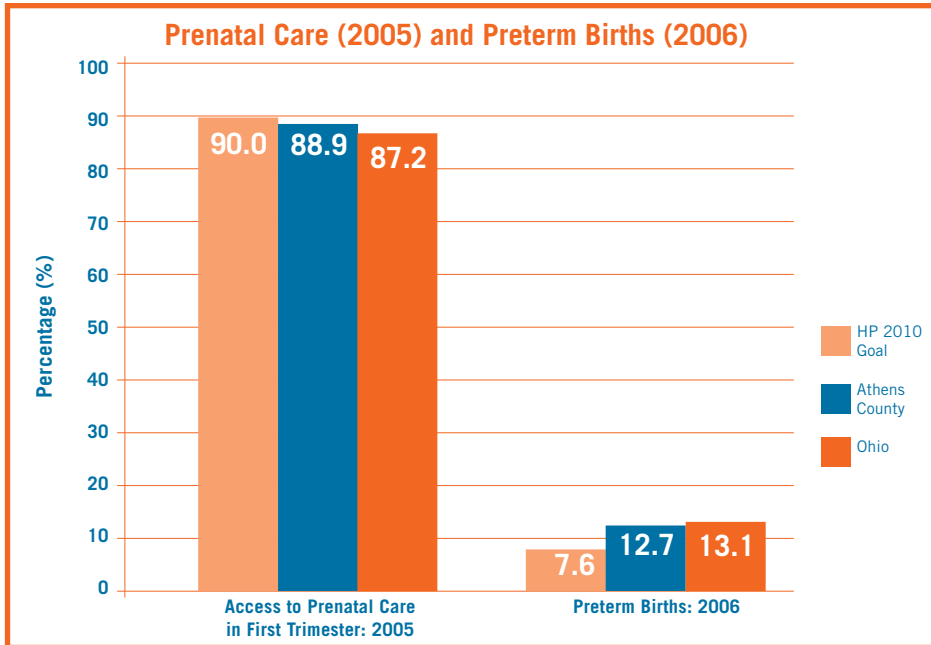


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	22	15
	2005*	29	19
Children receiving free/reduced price lunch	2001	28	22
	2007	34	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	22	12
	2006*	30	20
Children in child care assistance programs (Rate/1000)	2001	50	47
	2006	37	49
Births to adolescents (Rate/1000)	2001	21	22
	2006	20	20
Infants born at low birthweight	2001	9	8
	2006	8	9
Children in public health care programs	2001	47	27
	2005	67	41
4th graders less than proficient in math	2001	53	43
	2007	32	24
4th graders less than proficient in reading	2001	56	46
	2007	23	20
Students not graduating from high school	2001	13	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	13	11
	2006	19	10
Children in foster care (Rate/1000)	2001	15	13
	2006	15	11
Adolescents adjudicated for felonies (Rate/1000)	2001	10	15
	2006	10	14

*Refer to page 225 for details.

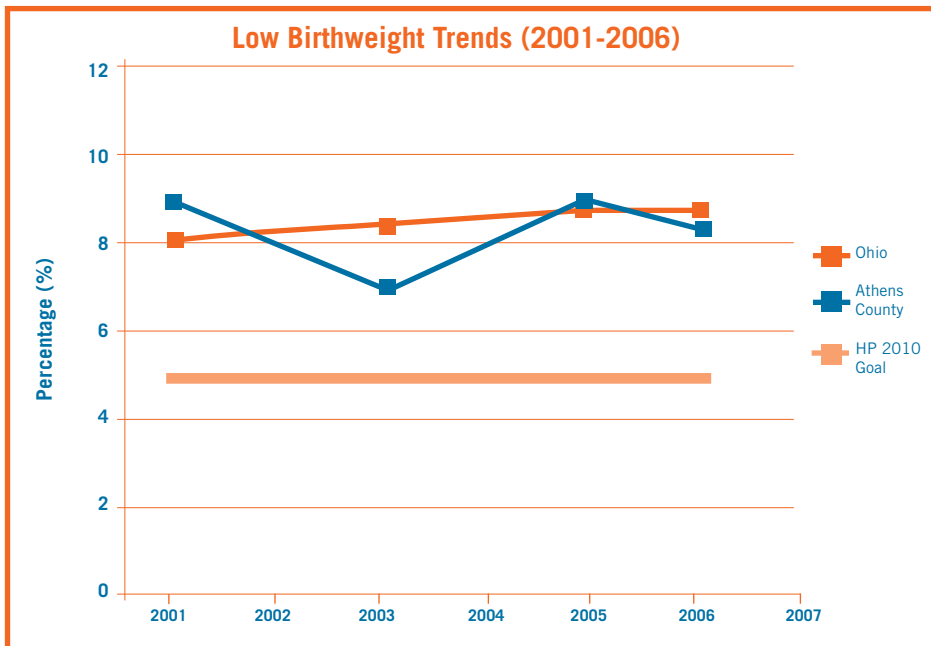


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 23.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	13.5
	Asthma Episode (%)	52.1
	Asthma ER Visits (%)	11.2
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	21.7
	% Who Could Not Receive Needed Dental Care	5.6
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	660
	Total EBLs	3
	Rate/1000	4.5

HP2010 Goals:

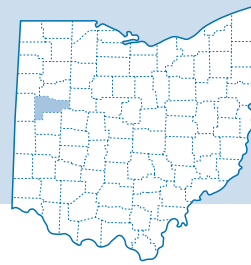
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



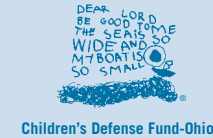
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	2	3.5	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	7	12.2	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	5.2	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	7	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	12.8	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Auglaize



County Seat: Wapokoneta
 County Type: Suburban
 Total Population: 46,463
 Child Population: 11,721

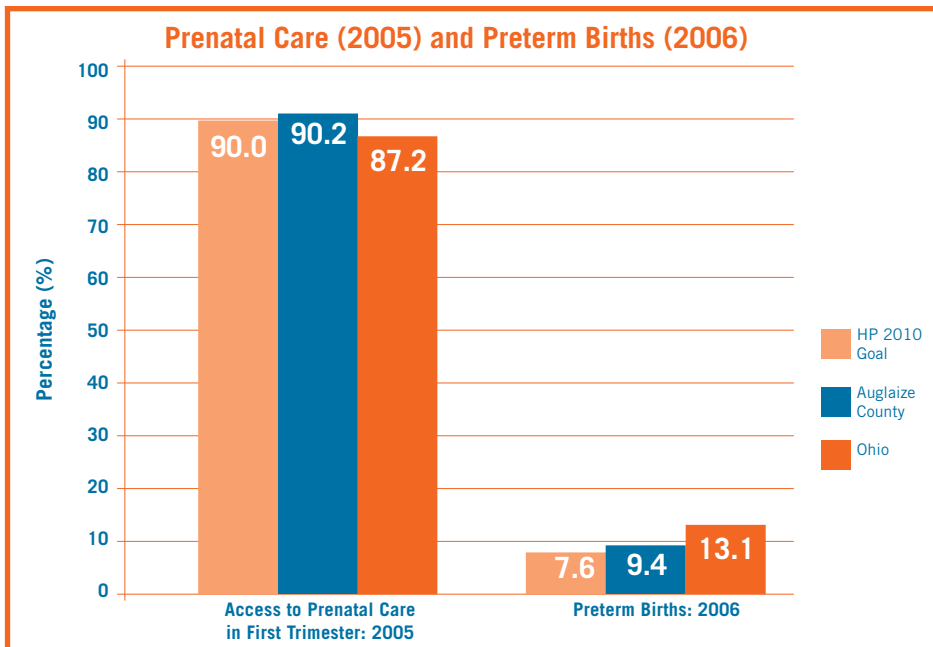


PERCENT CHANGE OVER TIME



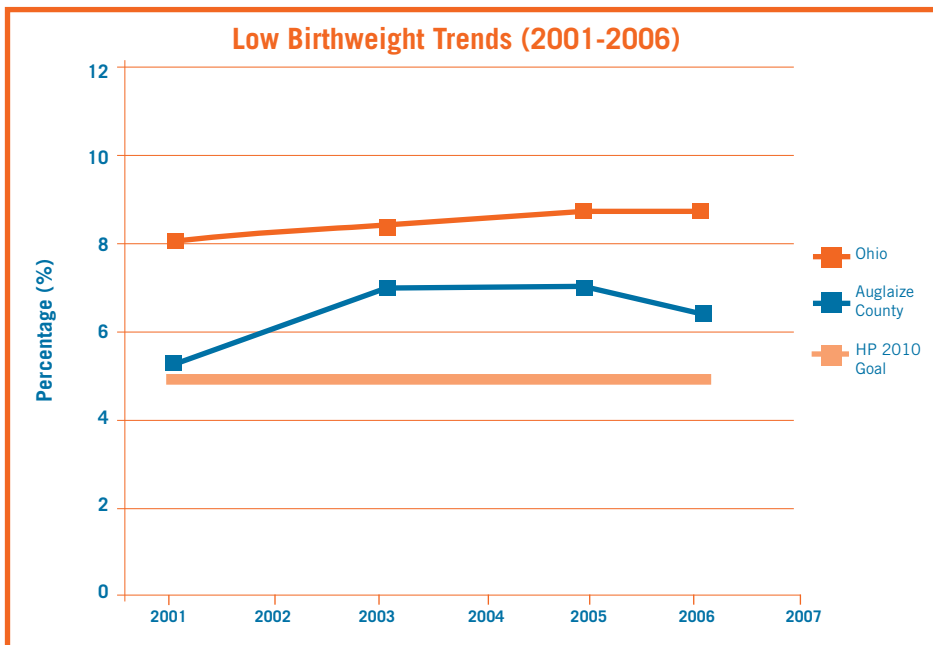
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	8	15
	2005*	9	19
Children receiving free/reduced price lunch	2001	11	22
	2007	17	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	4	12
	2006*	9	20
Children in child care assistance programs (Rate/1000)	2001	26	47
	2006	18	49
Births to adolescents (Rate/1000)	2001	18	22
	2006	11	20
Infants born at low birthweight	2001	6	8
	2006	6	9
Children in public health care programs	2001	12	27
	2005	24	41
4th graders less than proficient in math	2001	33	43
	2007	18	24
4th graders less than proficient in reading	2001	37	46
	2007	15	20
Students not graduating from high school	2001	5	19
	2006*	2	14
Children abused or neglected (Rate/1000)	2001	2	11
	2006	10	10
Children in foster care (Rate/1000)	2001	5	13
	2006	2	11
Adolescents adjudicated for felonies (Rate/1000)	2001	11	15
	2006	10	14

*Refer to page 225 for details.



HEALTH INDICATORS

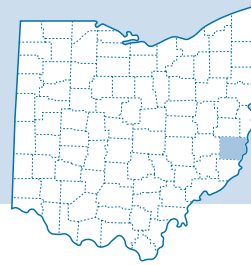
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 16.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	0.8
	Asthma Episode (%)	100
	Asthma ER Visits (%)	100
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	69.2
	% Never Visited a Dentist	14.6
	% Uninsured for Dental Care	22
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	2.4
	Total Children Screened (0-72 months)	322
	Total EBLs Rate/1000	4
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	3	4.9	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	6.5	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	3.3	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	3.3	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
2	22.4	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Belmont



County Seat: Clairsville
 County Type: Appalachian
 Total Population: 68,310
 Child Population: 13,681

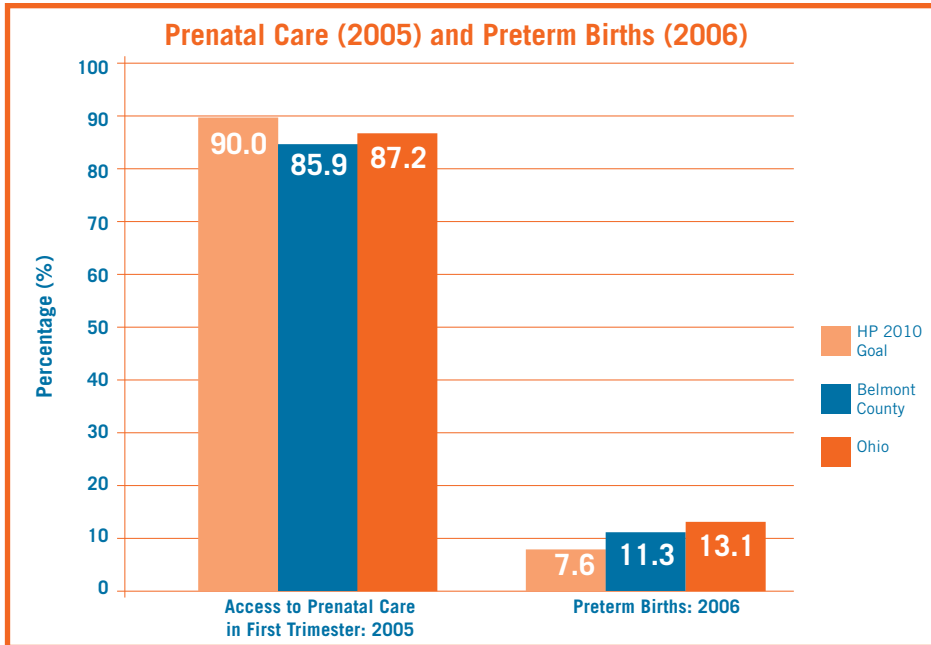


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	22	15
	2006*	22	19
Children receiving free/reduced price lunch	2001	23	22
	2007	32	27
Unemployment rate	2001	6	4
	2007	6	6
Children receiving food stamps	2001	18	12
	2006*	23	20
Children in child care assistance programs (Rate/1000)	2001	39	47
	2006	36	49
Births to adolescents (Rate/1000)	2001	8	22
	2006	8	20
Infants born at low birthweight	2001	8	8
	2006	4	9
Children in public health care programs	2001	41	27
	2005	53	41
4th graders less than proficient in math	2001	45	43
	2007	22	24
4th graders less than proficient in reading	2001	43	46
	2007	17	20
Students not graduating from high school	2001	13	19
	2006*	10	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	12	10
Children in foster care (Rate/1000)	2001	9	13
	2006	8	11
Adolescents adjudicated for felonies (Rate/1000)	2001	4	15
	2006	4	14

*Refer to page 225 for details.

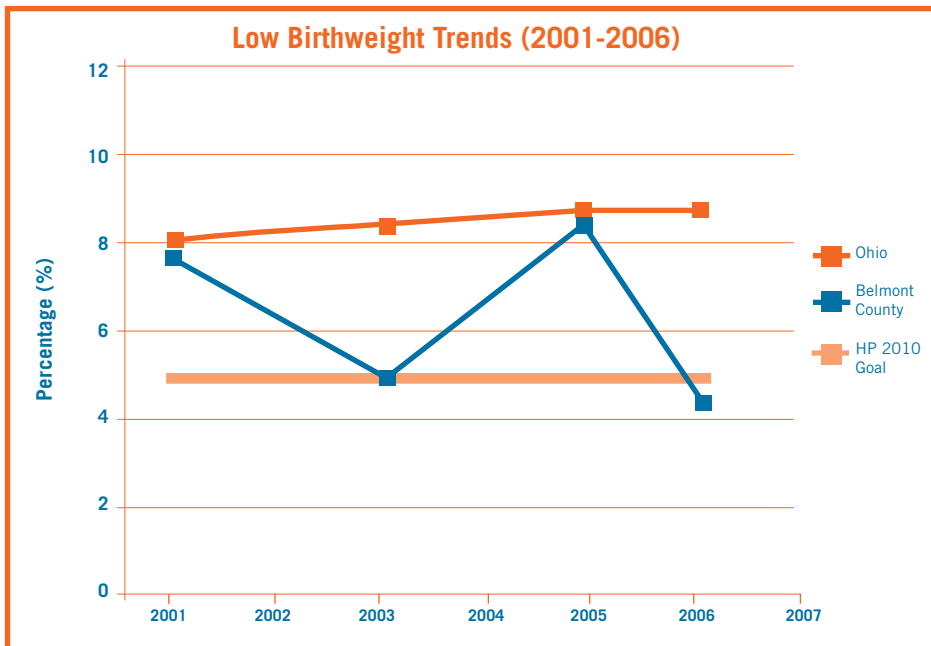


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 23.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	14.4
	Asthma Episode (%)	53
	Asthma ER Visits (%)	41.6
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	72.7
	% Never Visited a Dentist	14
	% Uninsured for Dental Care	24.5
	% Who Could Not Receive Needed Dental Care	4.1
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	554
	Total EBLs	8
	Rate/1000	14.4

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



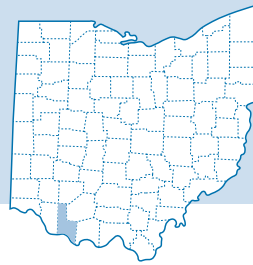
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	7	9.7
2005	#	Rate (per 1000 live births)
	10	13.9
2005	#	Rate (per 1000 live births)
	8	11.1
2005	#	Rate (per 1000 live births)
	2	2.8
2005	#	Rate (per 100,000 children ages 1-14)
	1	9.8

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Brown



County Seat: Georgetown
 County Type: Appalachian
 Total Population: 43,775
 Child Population: 11,162

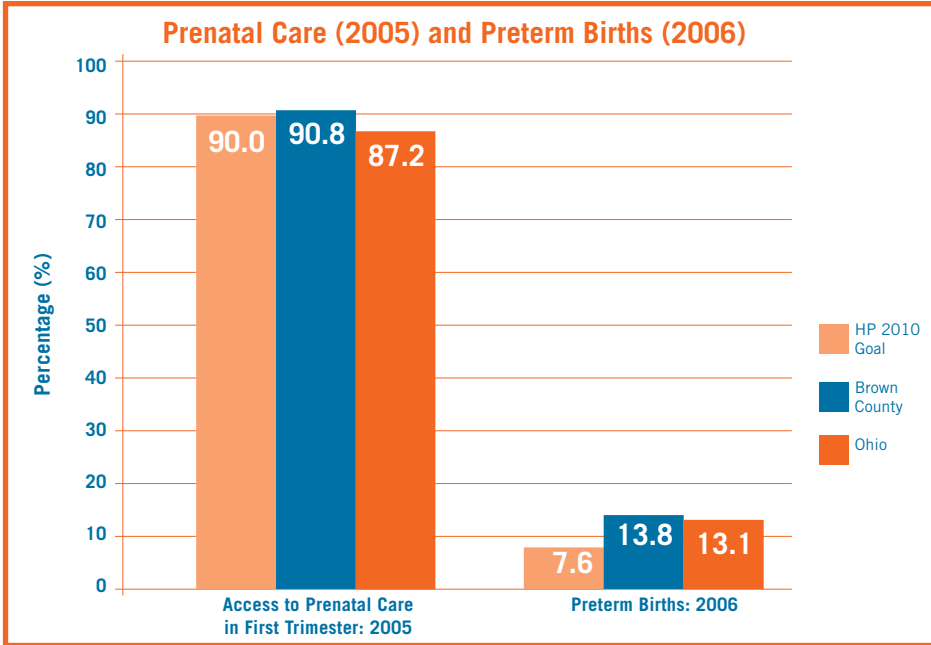


PERCENT CHANGE OVER TIME



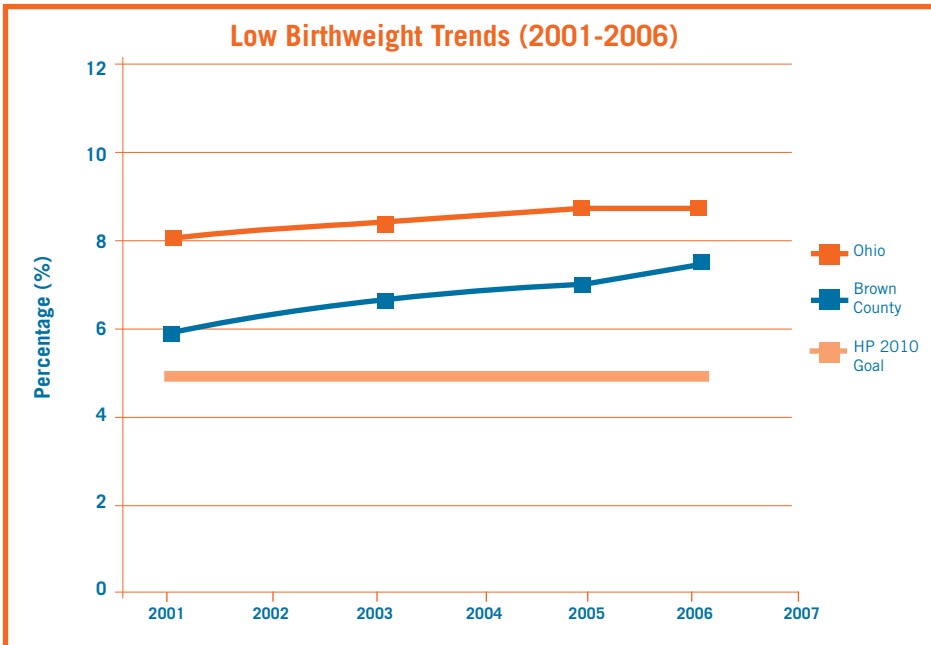
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	16	15
	2005*	21	19
Children receiving free/reduced price lunch	2001	21	22
	2007	29	27
Unemployment rate	2001	6	4
	2007	6	6
Children receiving food stamps	2001	8	12
	2006*	17	20
Children in child care assistance programs (Rate/1000)	2001	11	47
	2006	21	49
Births to adolescents (Rate/1000)	2001	15	22
	2006	18	20
Infants born at low birthweight	2001	7	8
	2006	10	9
Children in public health care programs	2001	28	27
	2005	46	41
4th graders less than proficient in math	2001	53	43
	2007	18	24
4th graders less than proficient in reading	2001	50	46
	2007	17	20
Students not graduating from high school	2001	20	19
	2006*	10	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	10	10
Children in foster care (Rate/1000)	2001	12	13
	2006	12	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	12	14

*Refer to page 225 for details.



HEALTH INDICATORS

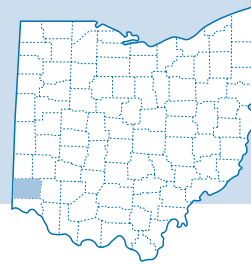
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 16.1	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 14.3	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 44.1	
	Asthma ER Visits (%): 16.1	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 67.2	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 10.8	
	% Uninsured for Dental Care: 25	
	% Who Could Not Receive Needed Dental Care: 3.7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 394	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 9	
	Rate/1000: 22.8	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 3	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 5.3	
	Rate (per 1000 live births): 1.8	
Year	Infant Mortality	HP2010 Goal
2005	#: 1	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 1.8	
	Rate (per 1000 live births): 1.8	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 1	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 1.8	
	Rate (per 1000 live births): 1.8	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 0	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 0	
	Rate (per 1000 live births): 0	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 0	Rate (per 100,000 children ages 1-14): <ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)
	Rate (per 100,000 children ages 1-14): 0	
	Rate (per 100,000 children ages 1-14): 0	

Butler



County Seat: Hamilton
 County Type: Metropolitan
 Total Population: 353,386
 Child Population: 87,340

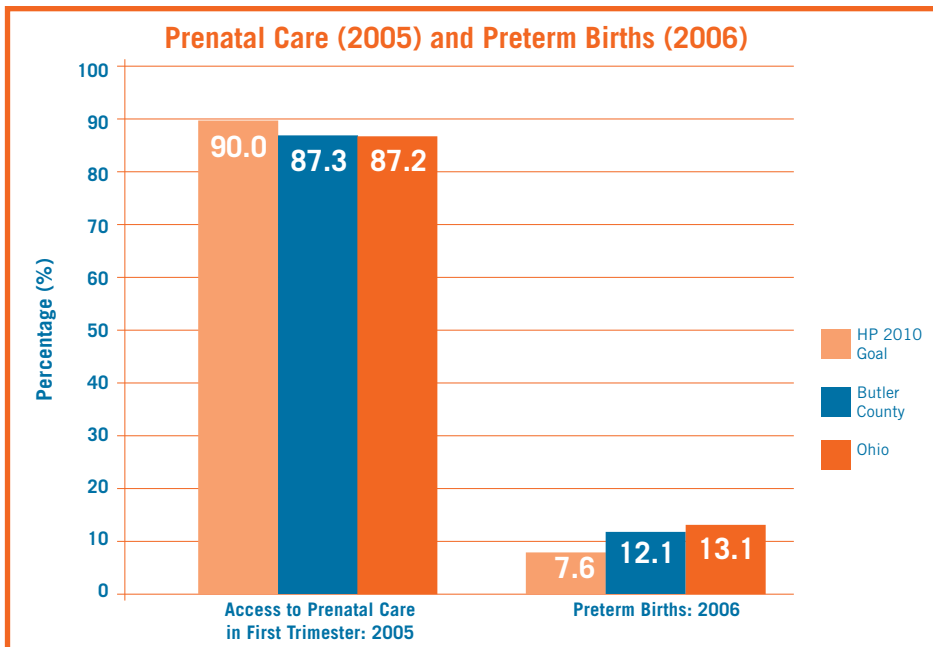


PERCENT CHANGE OVER TIME



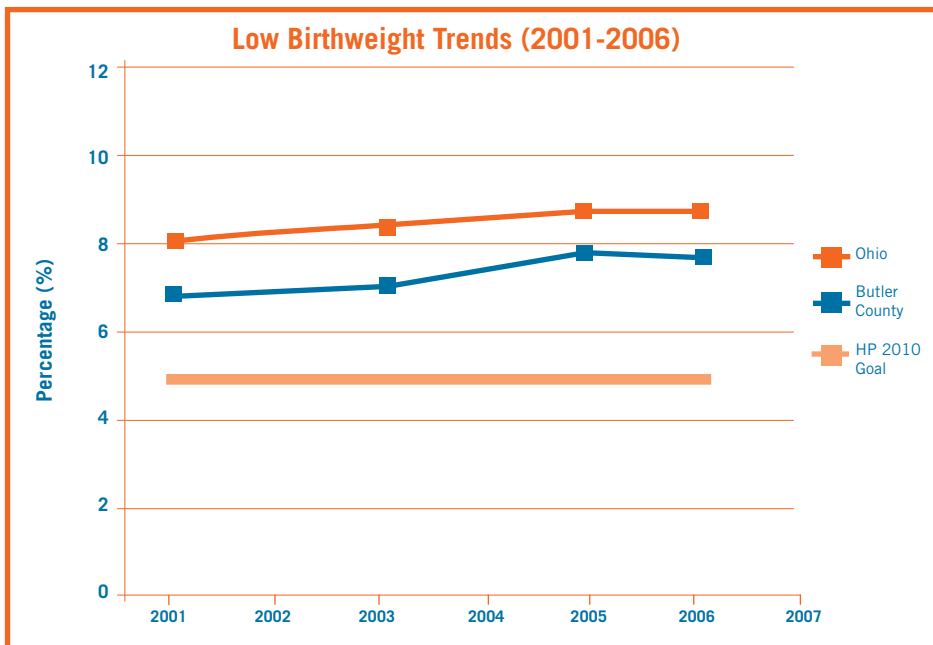
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2006*	16	19
Children receiving free/reduced price lunch	2001	16	22
	2007	21	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	8	12
	2006*	15	20
Children in child care assistance programs (Rate/1000)	2001	22	47
	2006	27	49
Births to adolescents (Rate/1000)	2001	19	22
	2006	23	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	18	27
	2005	32	41
4th graders less than proficient in math	2001	38	43
	2007	18	24
4th graders less than proficient in reading	2001	41	46
	2007	15	20
Students not graduating from high school	2001	19	19
	2006*	10	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	10	10
Children in foster care (Rate/1000)	2001	8	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	17	15
	2006	14	14

*Refer to page 225 for details.



HEALTH INDICATORS

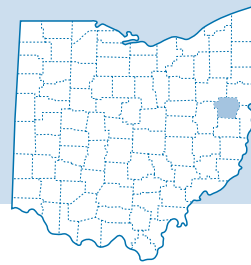
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 9.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 15.1	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 62.4	
	Asthma ER Visits (%): 14.6	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 75.4	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 12.7	
	% Uninsured for Dental Care: 23.9	
	% Who Could Not Receive Needed Dental Care: 3.4	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 2,813	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 17	
	Rate/1000: 6.0	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 33	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 6.7	
Year	Infant Mortality	HP2010 Goal
2005	#: 42	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 8.6	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 28	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 5.7	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 14	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 2.9	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 13	Rate (per 100,000 children ages 1-14): 19.7
	Rate (per 100,000 children ages 1-14): 19.7	
		<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Carroll



County Seat: Carrollton
 County Type: Appalachian
 Total Population: 28,777
 Child Population: 6,508

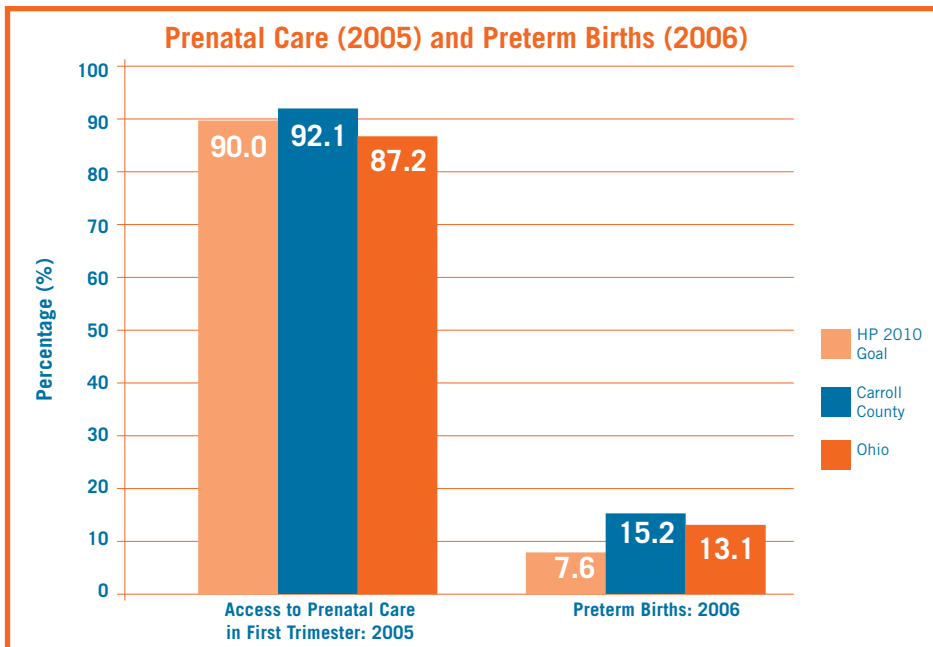


PERCENT CHANGE OVER TIME



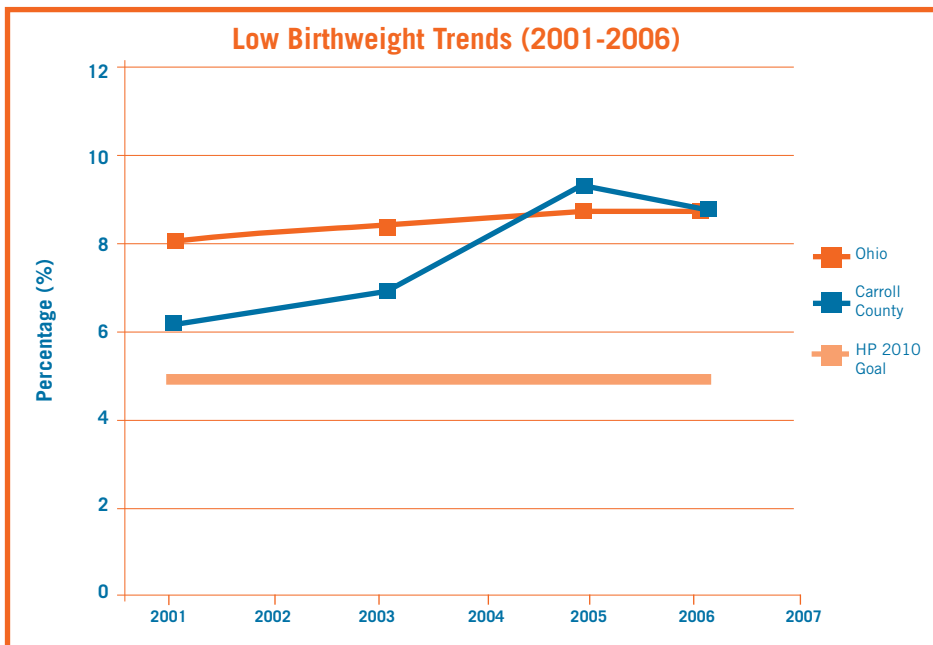
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	18	15
	2005*	20	19
Children receiving free/reduced price lunch	2001	35	22
	2007	33	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	9	12
	2006*	17	20
Children in child care assistance programs (Rate/1000)	2001	13	47
	2006	16	49
Births to adolescents (Rate/1000)	2001	14	22
	2006	7	20
Infants born at low birthweight	2001	6	8
	2006	9	9
Children in public health care programs	2001	25	27
	2005	50	41
4th graders less than proficient in math	2001	32	43
	2007	22	24
4th graders less than proficient in reading	2001	41	46
	2007	17	20
Students not graduating from high school	2001	9	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	9	11
	2006	10	10
Children in foster care (Rate/1000)	2001	3	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	6	15
	2006	4	14

*Refer to page 225 for details.



HEALTH INDICATORS

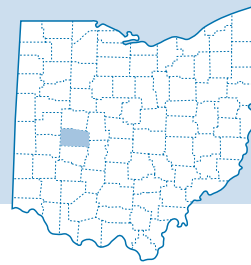
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 16.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	3.3
	Asthma Episode (%)	65.7
	Asthma ER Visits (%)	34.3
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	66.9
	% Never Visited a Dentist	17
	% Uninsured for Dental Care	27.6
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	6.1
	Total Children Screened (0-72 months)	149
	Total EBLs Rate/1000	2
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	1	3.4	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	3.4	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	3.4	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
2	40.3	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Champaign



County Seat: Urbana
 County Type: Rural Non-Appalachian
 Total Population: 39,413
 Child Population: 9,565



Children's Defense Fund-Ohio



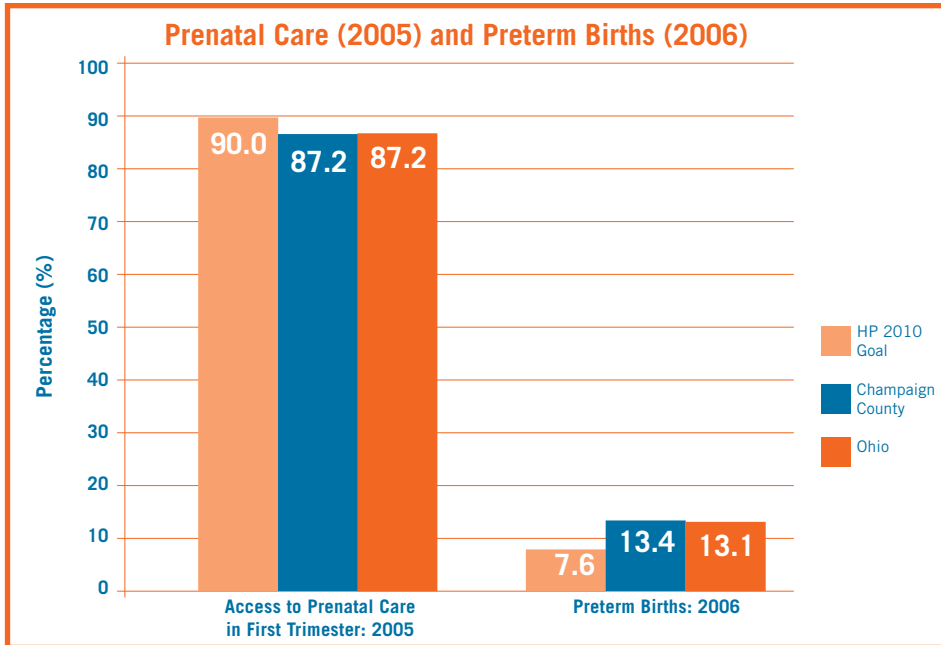
PERCENT CHANGE OVER TIME

■ Champaign ■ Ohio

BETTER 80 60 40 20 0 20 40 60 80 WORSE

Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	12	15
	2005*	14	19
Children receiving free/reduced price lunch	2001	11	22
	2007	19	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	7	12
	2006*	13	20
Children in child care assistance programs (Rate/1000)	2001	24	47
	2006	23	49
Births to adolescents (Rate/1000)	2001	23	22
	2006	22	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	20	27
	2005	37	41
4th graders less than proficient in math	2001	44	43
	2007	25	24
4th graders less than proficient in reading	2001	49	46
	2007	21	20
Students not graduating from high school	2001	15	19
	2006*	9	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	11	10
Children in foster care (Rate/1000)	2001	5	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	15	15
	2006	11	14

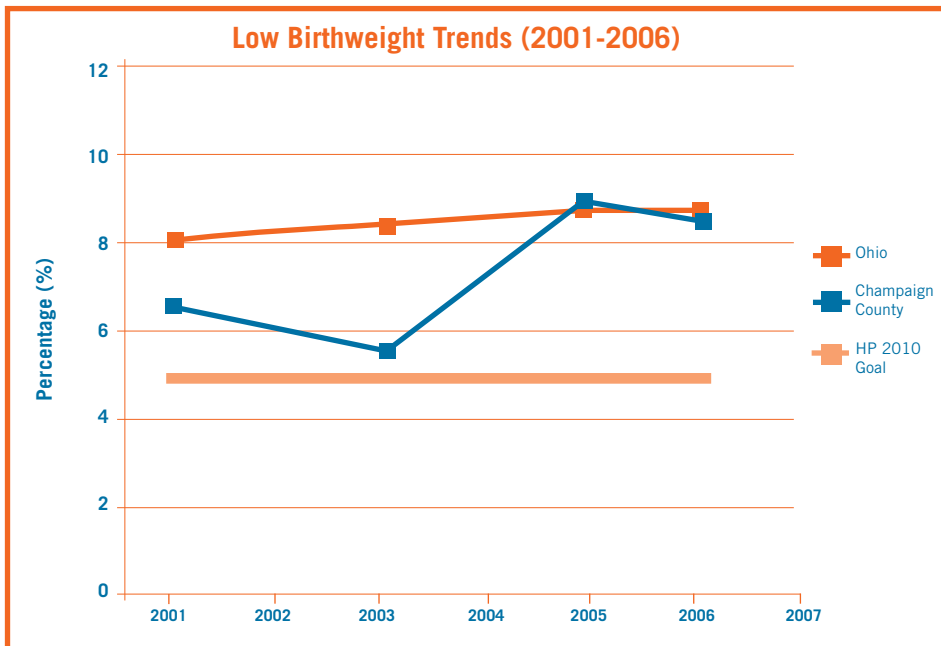
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 17.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	3
	Asthma Episode (%)	42.7
	Asthma ER Visits (%)	42.7
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.9
	% Never Visited a Dentist	12.3
	% Uninsured for Dental Care	22.5
2006	% Who Could Not Receive Needed Dental Care	7
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	514
	Total EBLs	3
	Rate/1000	5.8

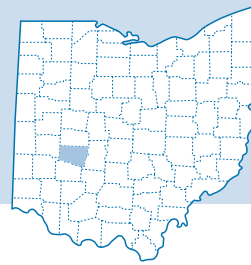
HP2010 Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	5	9.8	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	9.9	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	7.9	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	2	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
3	40.7	• 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)	

Clark



County Seat: Springfield
 County Type: Suburban
 Total Population: 141,239
 Child Population: 33,652

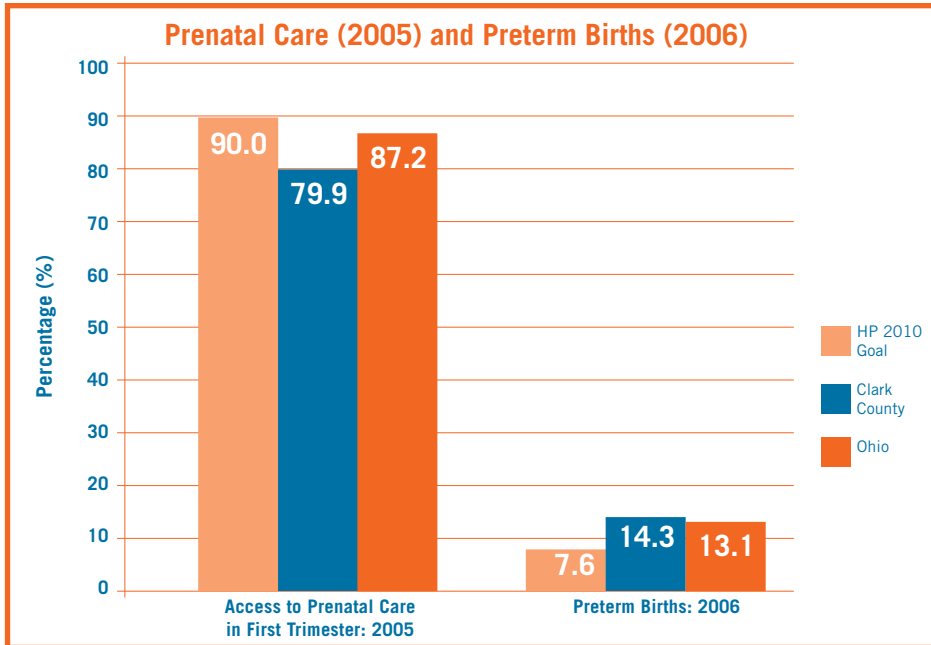


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	16	15
	2006*	23	19
Children receiving free/reduced price lunch	2001	21	22
	2007	30	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	16	12
	2006*	25	20
Children in child care assistance programs (Rate/1000)	2001	33	47
	2006	35	49
Births to adolescents (Rate/1000)	2001	32	22
	2006	30	20
Infants born at low birthweight	2001	8	8
	2006	9	9
Children in public health care programs	2001	33	27
	2005	48	41
4th graders less than proficient in math	2001	48	43
	2007	32	24
4th graders less than proficient in reading	2001	53	46
	2007	27	20
Students not graduating from high school	2001	24	19
	2006*	18	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	9	10
Children in foster care (Rate/1000)	2001	12	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	25	15
	2006	23	14

*Refer to page 225 for details.

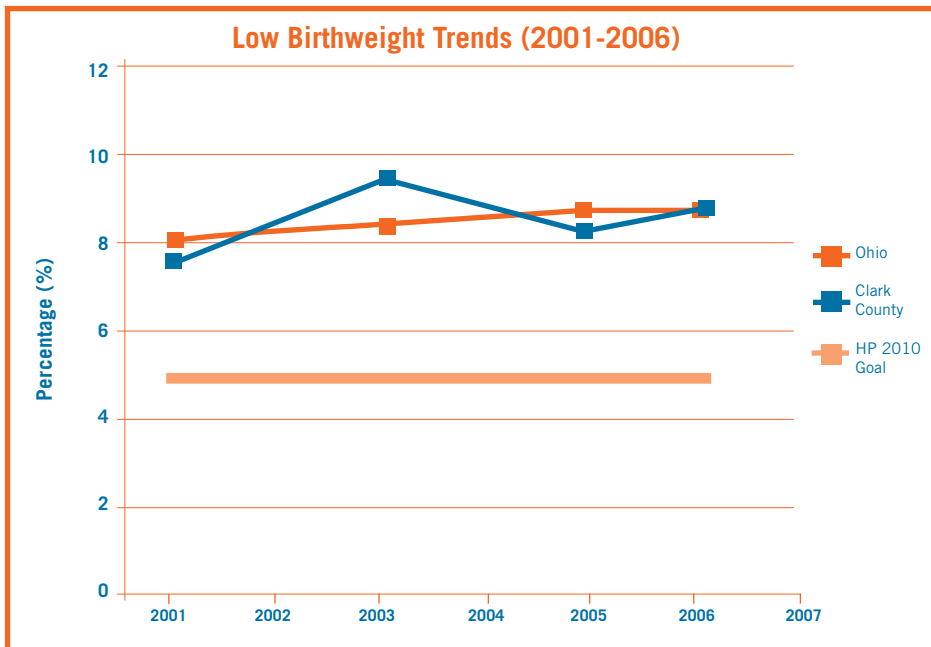


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.1	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	10.1
	Asthma Episode (%)	50.3
	Asthma ER Visits (%)	21.5
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	65.7
	% Never Visited a Dentist	17.4
	% Uninsured for Dental Care	19.4
	% Who Could Not Receive Needed Dental Care	2.9
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	3,222
	Total EBLs	83
	Rate/1000	25.8

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



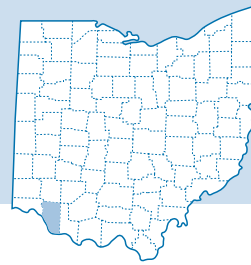
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	12	6.7
2005	#	Rate (per 1000 live births + late fetal deaths)
	14	7.9
2005	#	Rate (per 1000 live births)
	8	4.5
2005	#	Rate (per 1000 live births)
	6	3.4
2005	#	Rate (per 100,000 children ages 1-14)
	7	26.8

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14): 20.0 (1-4 yrs), 13.0 (5-9 yrs), 16.5 (10-14 yrs)

Clermont



County Seat: Batavia
 County Type: Appalachian
 Total Population: 191,410
 Child Population: 50,022

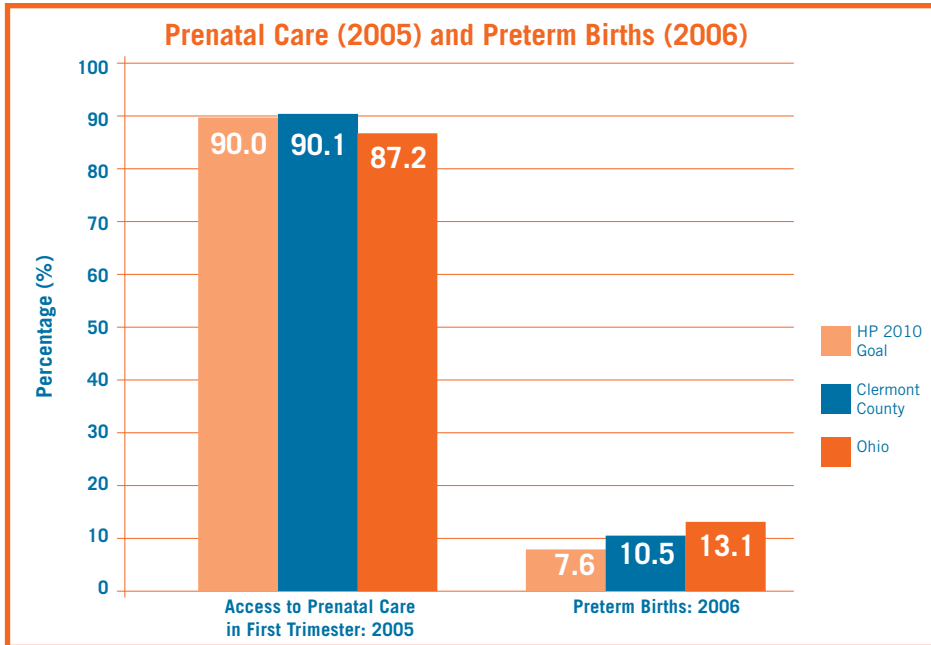


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2006*	11	19
Children receiving free/reduced price lunch	2001	12	22
	2007	18	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	5	12
	2006*	11	20
Children in child care assistance programs (Rate/1000)	2001	17	47
	2006	23	49
Births to adolescents (Rate/1000)	2001	18	22
	2006	17	20
Infants born at low birthweight	2001	6	8
	2006	7	9
Children in public health care programs	2001	17	27
	2005	31	41
4th graders less than proficient in math	2001	34	43
	2007	15	24
4th graders less than proficient in reading	2001	38	46
	2007	13	20
Students not graduating from high school	2001	19	19
	2006*	10	14
Children abused or neglected (Rate/1000)	2001	7	11
	2006	7	10
Children in foster care (Rate/1000)	2001	7	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	20	15
	2006	15	14

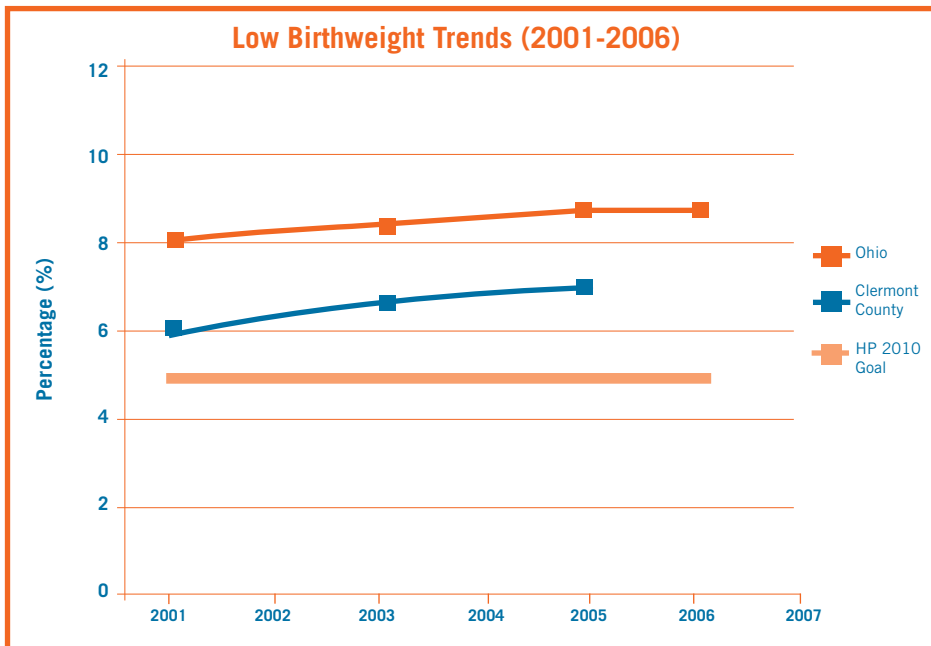
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 17.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	9.6
	Asthma Episode (%)	46.4
	Asthma ER Visits (%)	13.4
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	68.2
	% Never Visited a Dentist	12.2
	% Uninsured for Dental Care	22.2
	% Who Could Not Receive Needed Dental Care	6.4
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	1,185
	Total EBLs	4
	Rate/1000	3.4

HP2010 Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	24	8.8	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	18	6.6	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	17	6.3	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	0.4	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
4	10.5	• 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)	

Clinton



County Seat: Wilmington
 County Type: Rural Non-Appalachian
 Total Population: 42,866
 Child Population: 10,716



Children's Defense Fund-Ohio

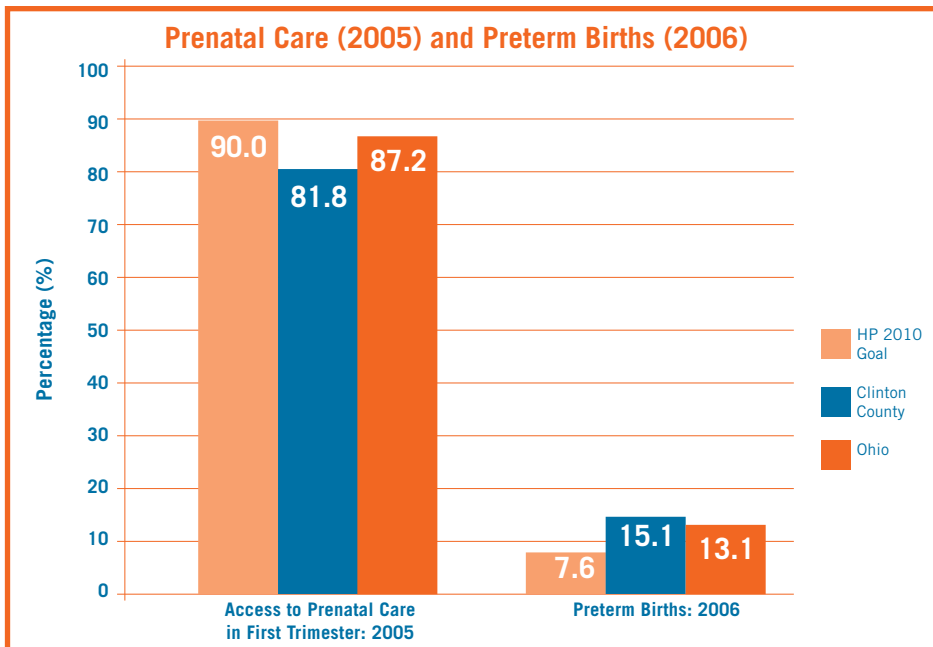


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	13	15
	2005*	15	19
Children receiving free/reduced price lunch	2001	13	22
	2007	22	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	7	12
	2006*	15	20
Children in child care assistance programs (Rate/1000)	2001	26	47
	2006	34	49
Births to adolescents (Rate/1000)	2001	24	22
	2006	27	20
Infants born at low birthweight	2001	6	8
	2006	11	9
Children in public health care programs	2001	20	27
	2005	44	41
4th graders less than proficient in math	2001	35	43
	2007	20	24
4th graders less than proficient in reading	2001	46	46
	2007	16	20
Students not graduating from high school	2001	11	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	24	11
	2006	23	10
Children in foster care (Rate/1000)	2001	6	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	9	15
	2006	18	14

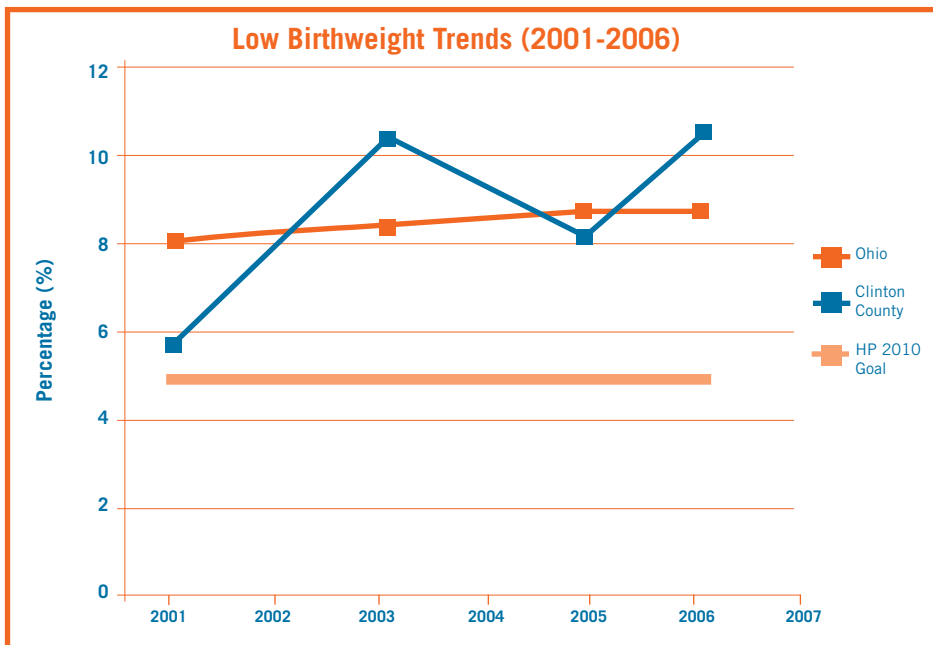
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 23.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	33
	Asthma Episode (%)	43.9
	Asthma ER Visits (%)	38.2
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	65.9
	% Never Visited a Dentist	16.1
	% Uninsured for Dental Care	24.7
2006	% Who Could Not Receive Needed Dental Care	4.9
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	311
	Total EBLs	5
	Rate/1000	16.1

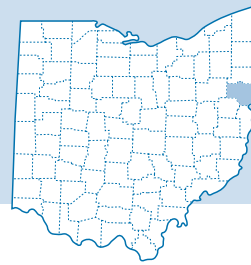
Goals:
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	5	8.4
		Rate (per 1000 live births + late fetal deaths)
		4.5
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	7	11.8
	Rate (per 1000 live births)	
	4.5	
Neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
3	5.1	
	Rate (per 1000 live births)	
	2.9	
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
4	6.7	
	Rate (per 1000 live births)	
	1.2	
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	
0	0	
	Rate (per 100,000 children ages 1-14)	
	• 20.0 (1-4 yrs)	
	• 13.0 (5-9 yrs)	
	• 16.5 (10-14 yrs)	

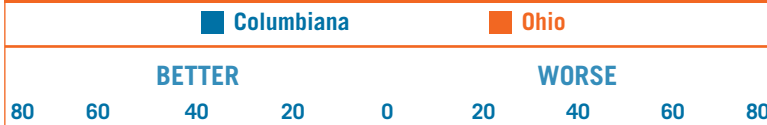
Columbiana



County Seat: Lisbon
 County Type: Appalachian
 Total Population: 109,274
 Child Population: 24,332

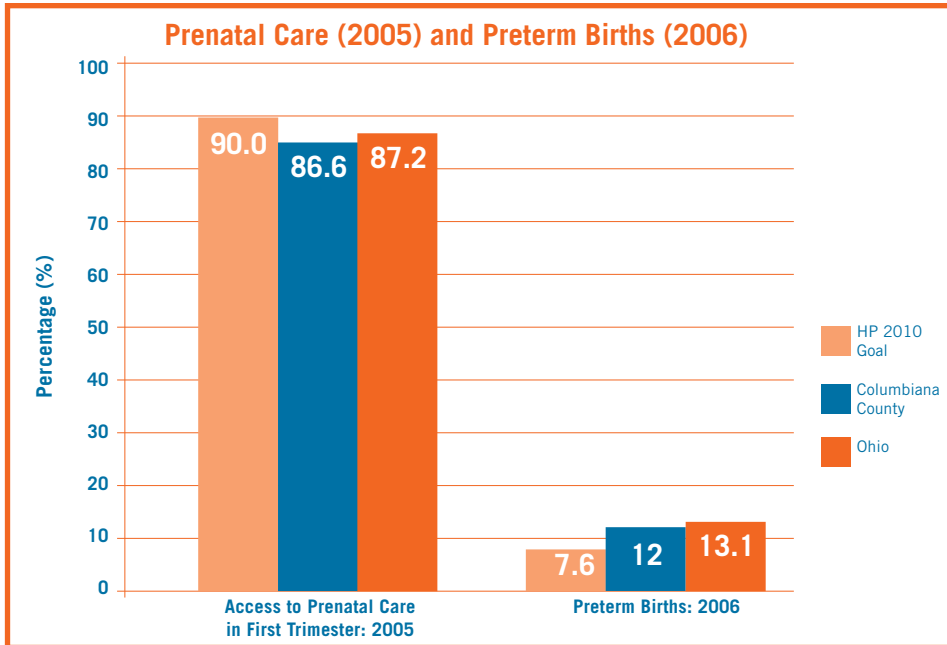


PERCENT CHANGE OVER TIME



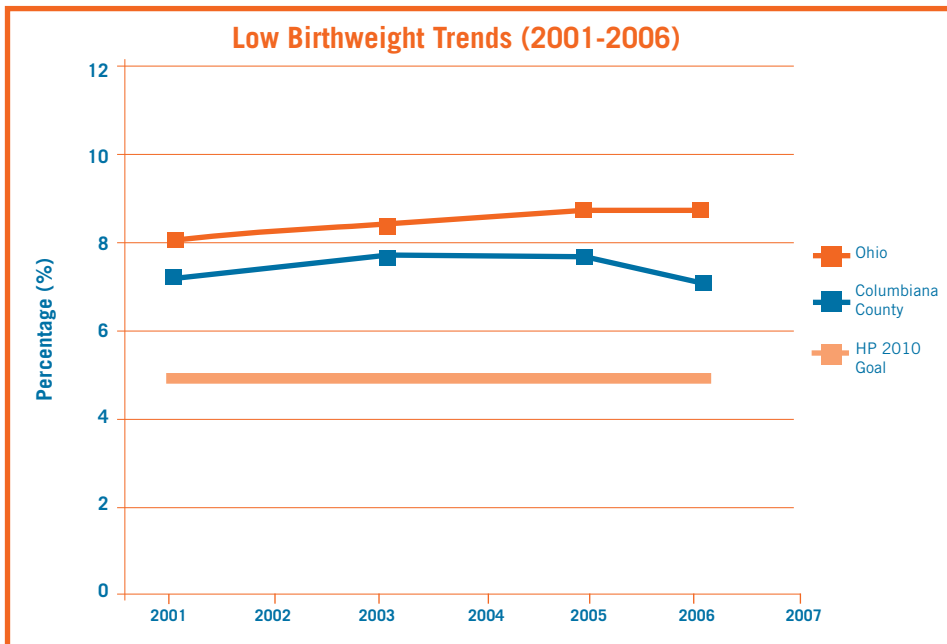
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	19	15
	2006*	31	19
Children receiving free/reduced price lunch	2001	23	22
	2007	35	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	14	12
	2006*	23	20
Children in child care assistance programs (Rate/1000)	2001	53	47
	2006	59	49
Births to adolescents (Rate/1000)	2001	15	22
	2006	18	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	33	27
	2005	52	41
4th graders less than proficient in math	2001	42	43
	2007	23	24
4th graders less than proficient in reading	2001	48	46
	2007	17	20
Students not graduating from high school	2001	13	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	12	10
Children in foster care (Rate/1000)	2001	5	13
	2006	8	11
Adolescents adjudicated for felonies (Rate/1000)	2001	9	15
	2006	8	14

*Refer to page 225 for details.



HEALTH INDICATORS

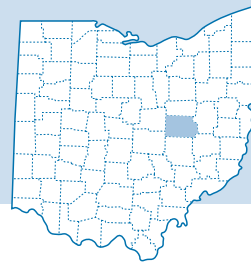
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 22.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	14.4
	Asthma Episode (%)	82.5
	Asthma ER Visits (%)	42.8
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	72.7
	% Never Visited a Dentist	14
	% Uninsured for Dental Care	24.5
% Who Could Not Receive Needed Dental Care	4.1	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	760
	Total EBLs	8
	Rate/1000	10.5
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	3.3
	Rate (per 1000 live births + late fetal deaths): 4.5	
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	3	2.5
Rate (per 1000 live births): 4.5		
Neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
0	0	
Rate (per 1000 live births): 2.9		
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
3	2.5	
Rate (per 1000 live births): 1.2		
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	
3	16.1	
Rate (per 100,000 children ages 1-14):		
<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 		

Coshocton



County Seat: Coshocton
 County Type: Appalachian
 Total Population: 36,551
 Child Population: 8,934

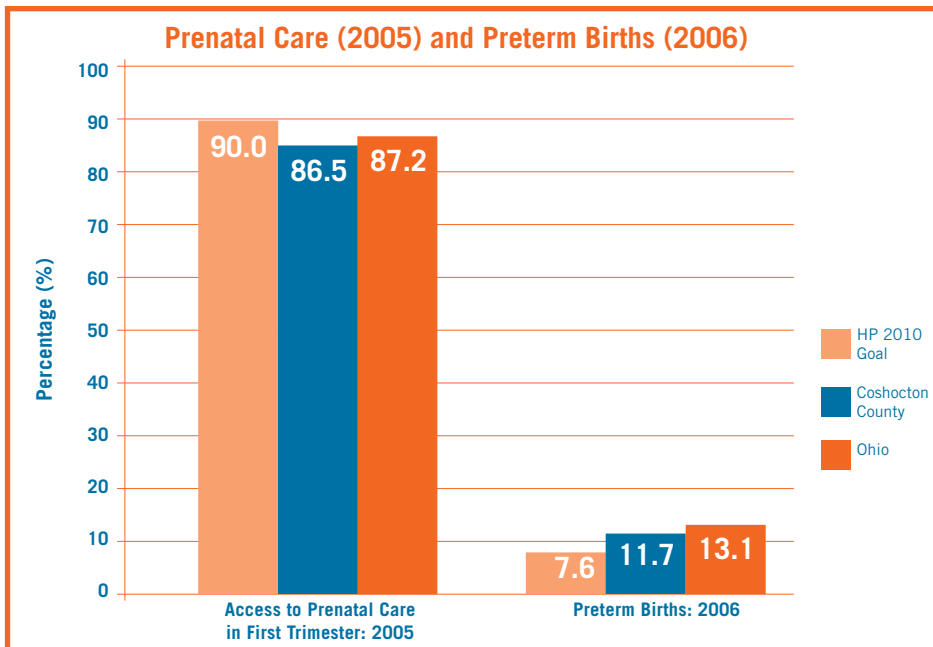


PERCENT CHANGE OVER TIME



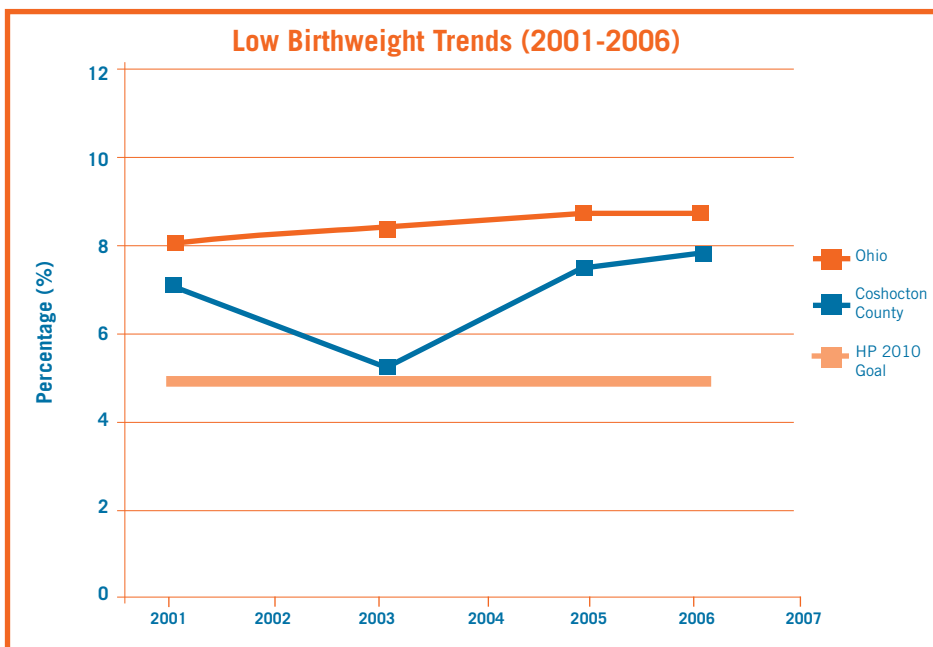
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2005*	18	19
Children receiving free/reduced price lunch	2001	22	22
	2007	35	27
Unemployment rate	2001	5	4
	2007	7	6
Children receiving food stamps	2001	12	12
	2006*	21	20
Children in child care assistance programs (Rate/1000)	2001	38	47
	2006	43	49
Births to adolescents (Rate/1000)	2001	16	22
	2006	20	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	27	27
	2005	45	41
4th graders less than proficient in math	2001	43	43
	2007	18	24
4th graders less than proficient in reading	2001	47	46
	2007	16	20
Students not graduating from high school	2001	13	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	9	11
	2006	14	10
Children in foster care (Rate/1000)	2001	6	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	16	15
	2006	4	14

*Refer to page 225 for details.



HEALTH INDICATORS

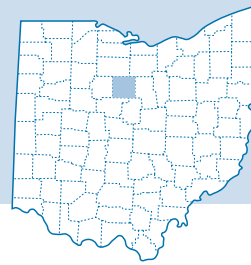
Year	Obesity	HP2010 Goal	
2004-2005	% 3rd Graders Overweight: 25.7	5.0	
Year	Asthma	HP2010 Goal	
2003-2004	Asthma Prevalence (%)	12.5	
	Asthma Episode (%)	40.1	
	Asthma ER Visits (%)	42.2	
2007	Access to Dental Care	HP2010 Goal	
	% with Dental Visit in Last Year	66.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist	17	
	% Uninsured for Dental Care	27.6	
% Who Could Not Receive Needed Dental Care	6.1		
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal	
2006	Total Children Screened (0-72 months)	526	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs	10	
	Rate/1000	19.0	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	2	4.4	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	11.1	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	4.4	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	6.7	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
0	0	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Crawford



County Seat: Bucyrus
 County Type: Rural Non-Appalachian
 Total Population: 44,535
 Child Population: 10,480



Children's Defense Fund-Ohio

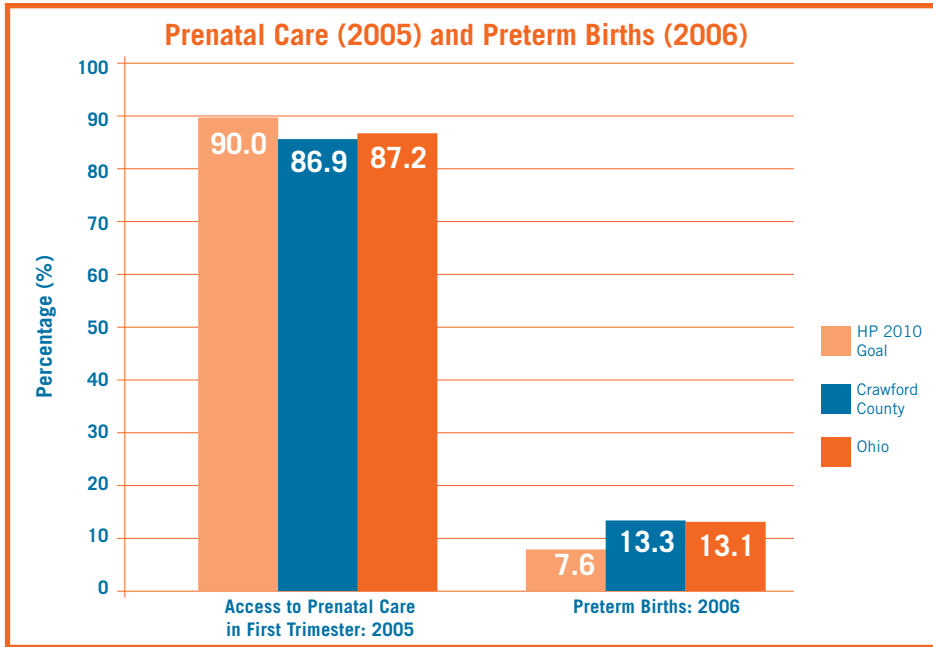


PERCENT CHANGE OVER TIME



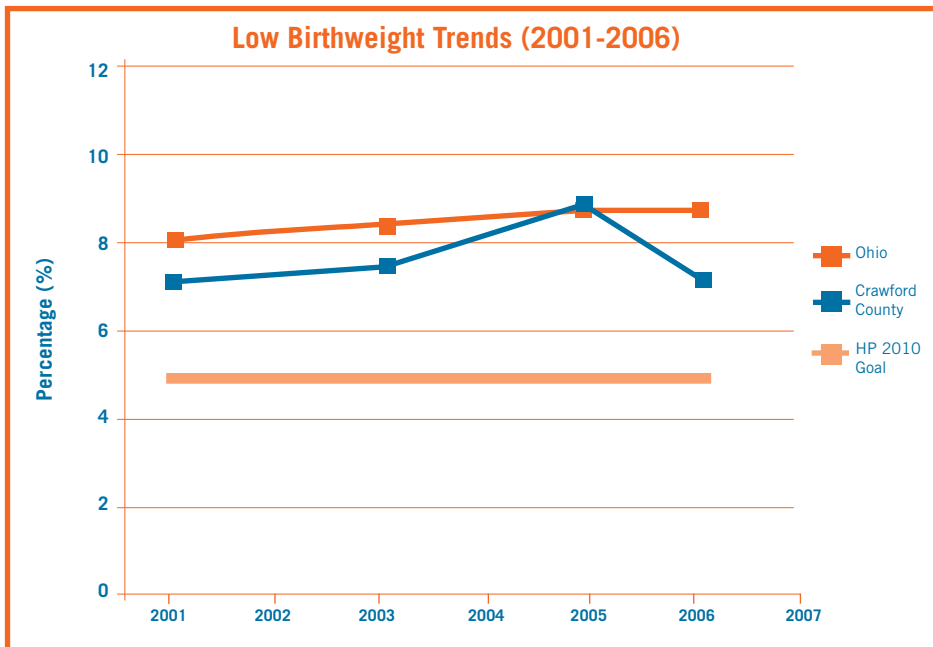
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2005*	17	19
Children receiving free/reduced price lunch	2001	19	22
	2007	30	27
Unemployment rate	2001	6	4
	2007	7	6
Children receiving food stamps	2001	12	12
	2006*	21	20
Children in child care assistance programs (Rate/1000)	2001	35	47
	2006	35	49
Births to adolescents (Rate/1000)	2001	25	22
	2006	18	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	18	27
	2005	50	41
4th graders less than proficient in math	2001	52	43
	2007	24	24
4th graders less than proficient in reading	2001	53	46
	2007	18	20
Students not graduating from high school	2001	17	19
	2006*	11	14
Children abused or neglected (Rate/1000)	2001	9	11
	2006	12	10
Children in foster care (Rate/1000)	2001	11	13
	2006	12	11
Adolescents adjudicated for felonies (Rate/1000)	2001	9	15
	2006	16	14

*Refer to page 225 for details.



HEALTH INDICATORS

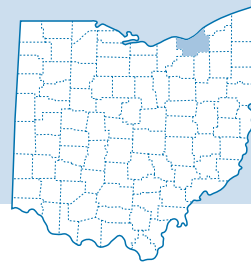
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	13.2
	Asthma Episode (%)	75.5
	Asthma ER Visits (%)	0
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.6
	% Uninsured for Dental Care	24.6
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	5.1
	Total Children Screened (0-72 months)	549
	Total EBLs Rate/1000	18
		32.8
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	3	5.2	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	5.2	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	5.2	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
6	74.2	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Cuyahoga



County Seat: Cleveland
 County Type: Metropolitan
 Total Population: 1,309,262
 Child Population: 320,716

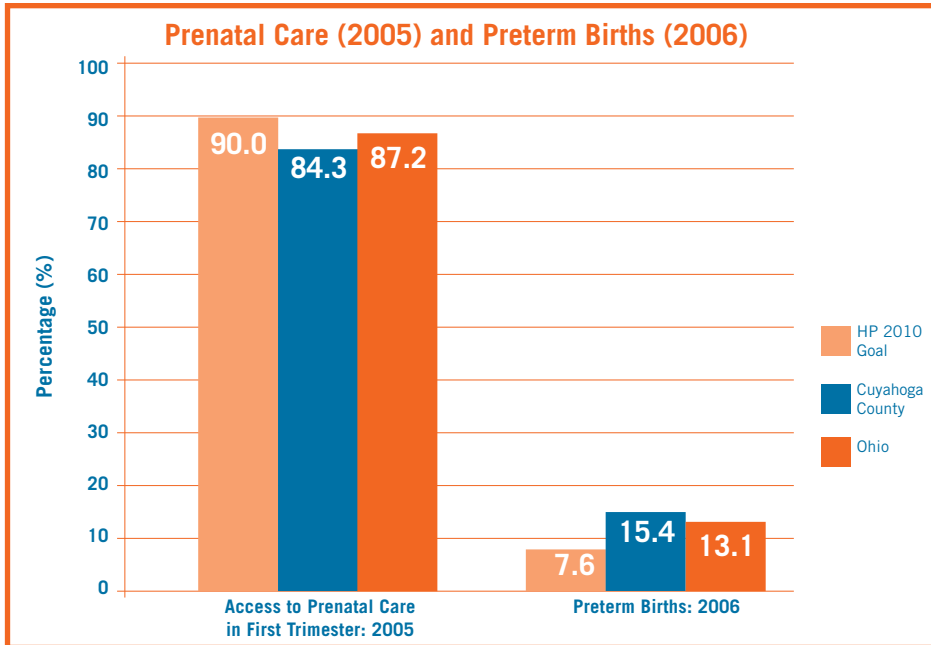


PERCENT CHANGE OVER TIME



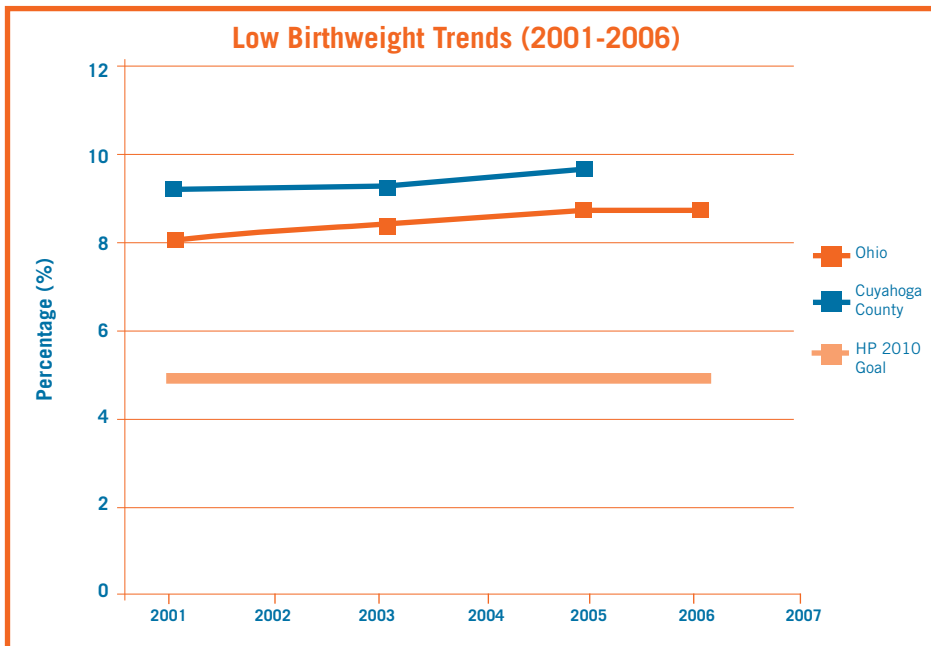
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	19	15
	2006*	23	19
Children receiving free/reduced price lunch	2001	31	22
	2007	32	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	19	12
	2006*	27	20
Children in child care assistance programs (Rate/1000)	2001	100	47
	2006	100	49
Births to adolescents (Rate/1000)	2001	28	22
	2006	24	20
Infants born at low birthweight	2001	9	8
	2006	11	9
Children in public health care programs	2001	38	27
	2005	50	41
4th graders less than proficient in math	2001	45	43
	2007	29	24
4th graders less than proficient in reading	2001	48	46
	2007	23	20
Students not graduating from high school	2001	31	19
	2006*	23	14
Children abused or neglected (Rate/1000)	2001	20	11
	2006	8	10
Children in foster care (Rate/1000)	2001	27	13
	2006	13	11
Adolescents adjudicated for felonies (Rate/1000)	2001	18	15
	2006	16	14

*Refer to page 225 for details.



HEALTH INDICATORS

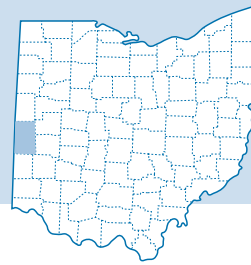
Year	Obesity	HP2010 Goal	
2004-2005	% 3rd Graders Overweight: 19.2	5.0	
Year	Asthma	HP2010 Goal	
2003-2004	Asthma Prevalence (%)	13.9	
	Asthma Episode (%)	50.7	
	Asthma ER Visits (%)	30.8	
2007	Access to Dental Care	HP2010 Goal	
	% with Dental Visit in Last Year	68	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist	15.9	
	% Uninsured for Dental Care	21.2	
% Who Could Not Receive Needed Dental Care	4.2		
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal	
2006	Total Children Screened (0-72 months)	22,312	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs	1,318	
	Rate/1000	59.1	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	163	9.9	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	165	10.1	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	129	7.9	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	36	2.2	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
51	20.6	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Darke



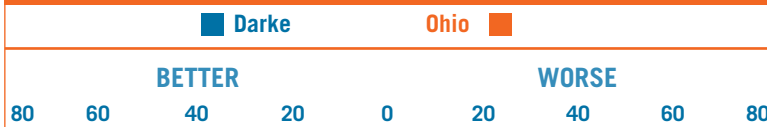
County Seat: Greenville
 County Type: Rural Non-Appalachian
 Total Population: 52,315
 Child Population: 12,835



Children's Defense Fund-Ohio

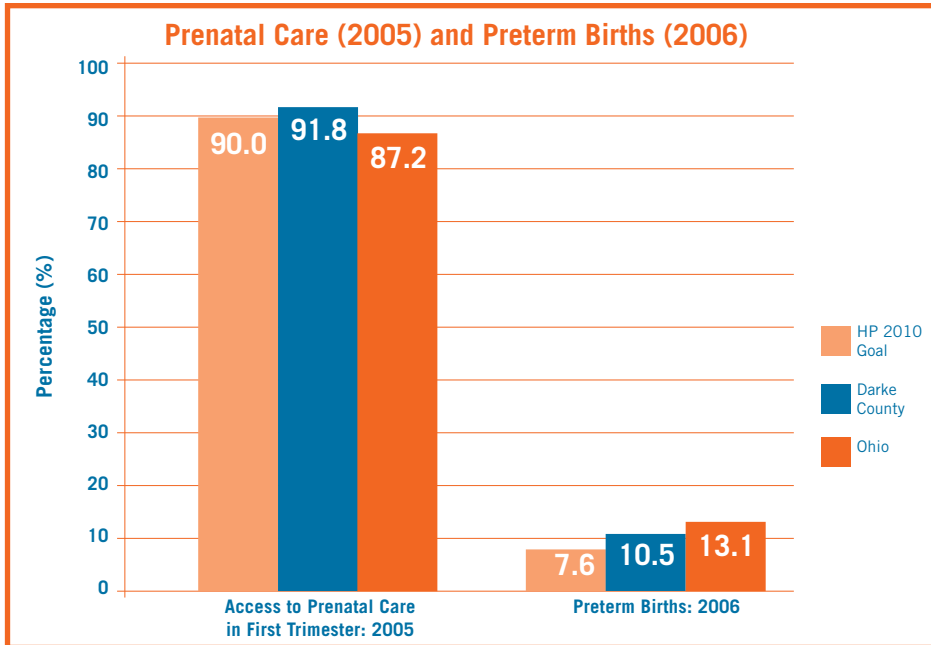


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	11	15
	2005*	12	19
Children receiving free/reduced price lunch	2001	14	22
	2007	19	27
Unemployment rate	2001	4	4
	2007	6	6
Children receiving food stamps	2001	4	12
	2006*	9	20
Children in child care assistance programs (Rate/1000)	2001	15	47
	2006	19	49
Births to adolescents (Rate/1000)	2001	11	22
	2006	15	20
Infants born at low birthweight	2001	5	8
	2006	7	9
Children in public health care programs	2001	18	27
	2005	29	41
4th graders less than proficient in math	2001	40	43
	2007	22	24
4th graders less than proficient in reading	2001	43	46
	2007	20	20
Students not graduating from high school	2001	6	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	8	11
	2006	6	10
Children in foster care (Rate/1000)	2001	6	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	5	15
	2006	18	14

*Refer to page 225 for details.

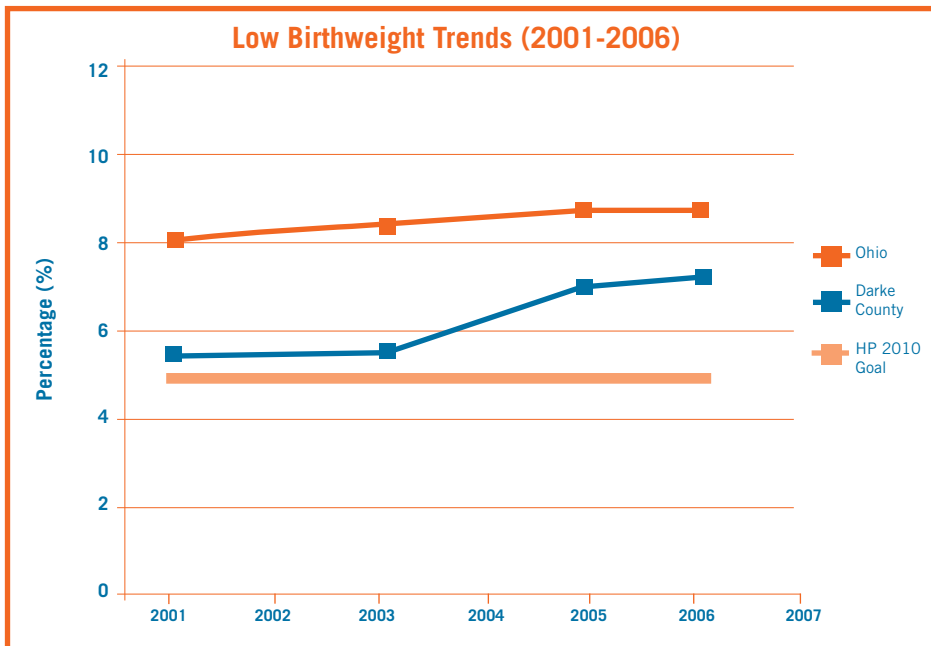


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 16.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	9.2
	Asthma Episode (%)	35.2
	Asthma ER Visits (%)	0
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	66.8
	% Never Visited a Dentist	12.4
	% Uninsured for Dental Care	27.1
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	5.4
	Total Children Screened (0-72 months)	389
	Total EBLs Rate/1000	2

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



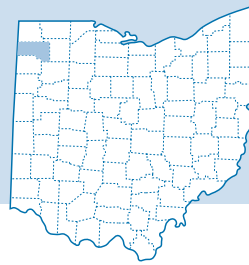
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	8	12.2
	#	Rate (per 1000 live births + late fetal deaths)
	8	4.5
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	3	4.6
	#	Rate (per 1000 live births)
	3	4.6
	Neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	3	4.6
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
0	0	
#	Rate (per 1000 live births)	
0	0	
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	
2	20.6	

HP2010 Goals for Child Death (1-14 yrs):

- 20.0 (1-4 yrs)
- 13.0 (5-9 yrs)
- 16.5 (10-14 yrs)

Defiance



County Seat: Defiance
 County Type: Rural Non-Appalachian
 Total Population: 38,659
 Child Population: 9,432



Children's Defense Fund-Ohio

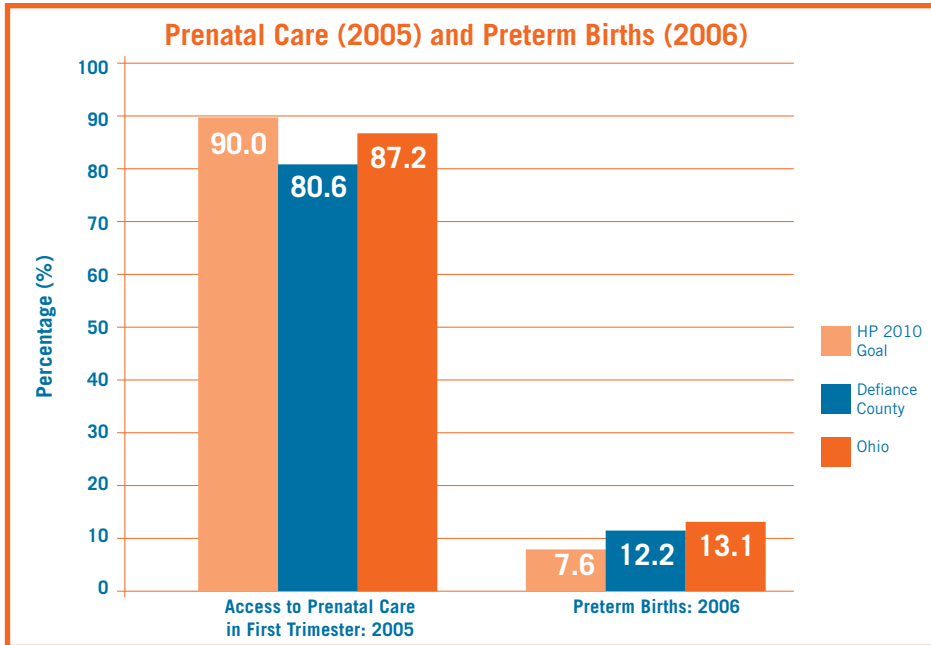


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2005*	12	19
Children receiving free/reduced price lunch	2001	11	22
	2007	21	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	7	12
	2006*	14	20
Children in child care assistance programs (Rate/1000)	2001	26	47
	2006	34	49
Births to adolescents (Rate/1000)	2001	17	22
	2006	17	20
Infants born at low birthweight	2001	6	8
	2006	7	9
Children in public health care programs	2001	19	27
	2005	39	41
4th graders less than proficient in math	2001	34	43
	2007	15	24
4th graders less than proficient in reading	2001	38	46
	2007	13	20
Students not graduating from high school	2001	16	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	9	11
	2006	23	10
Children in foster care (Rate/1000)	2001	5	13
	2006	6	11
Adolescents adjudicated for felonies (Rate/1000)	2001	23	15
	2006	20	14

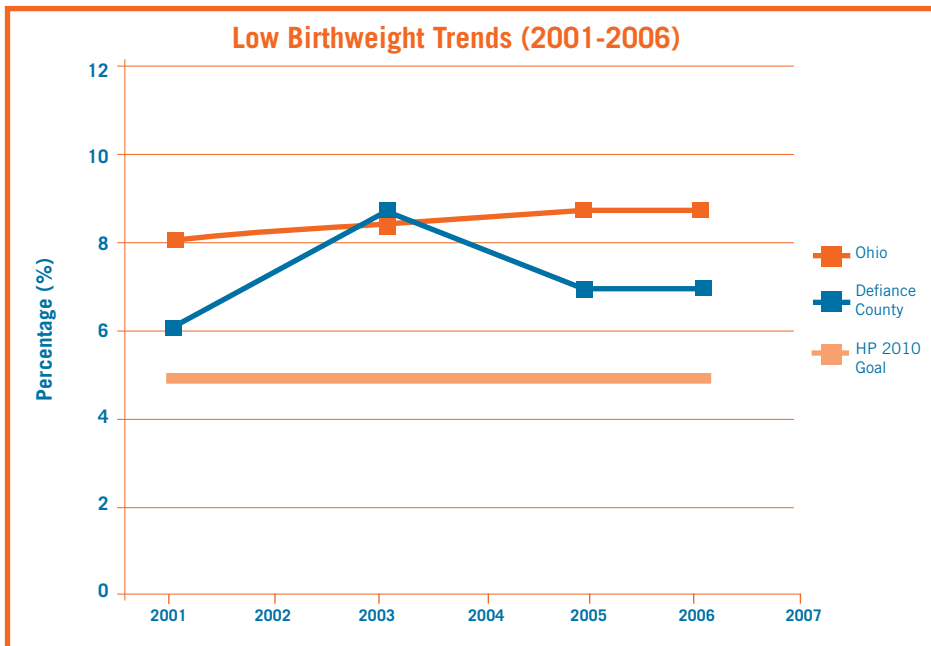
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 26.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	26.3
	Asthma Episode (%)	76.9
	Asthma ER Visits (%)	50.5
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	65.7
	% Never Visited a Dentist	17.1
	% Uninsured for Dental Care	22.3
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	2.5
	Total Children Screened (0-72 months)	444
	Total EBLs	6
	Rate/1000	13.5

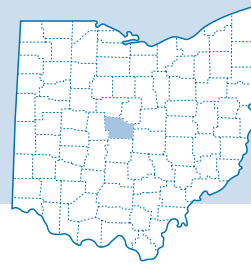
HP2010 Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	2	4	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	9.9	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	7.9	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	2	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	14	• 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)	

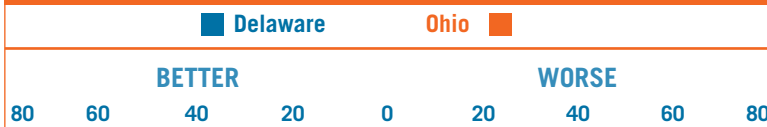
Delaware



County Seat: Delaware
 County Type: Suburban
 Total Population: 155,454
 Child Population: 40,114

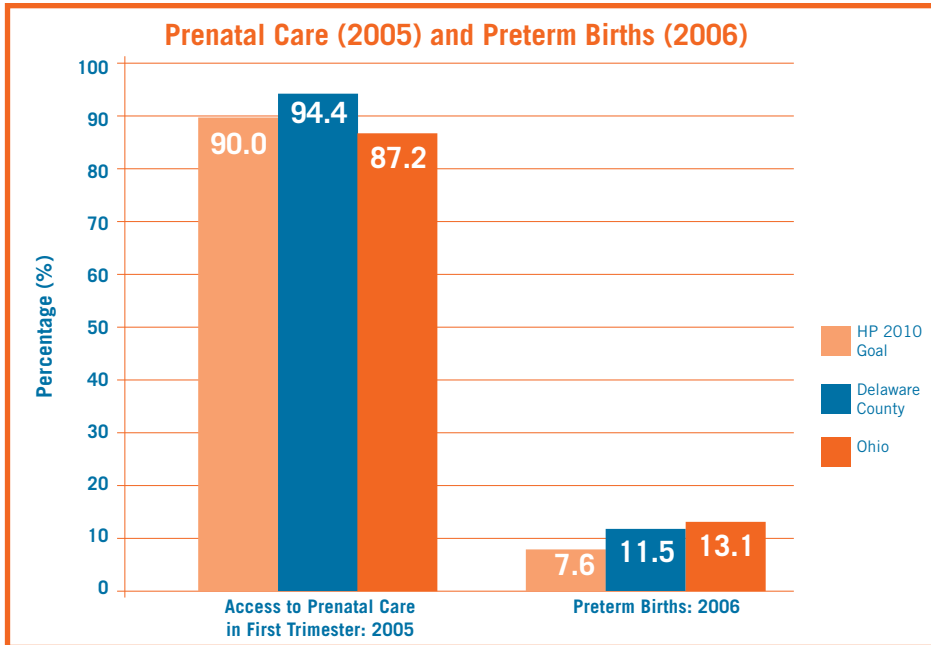


PERCENT CHANGE OVER TIME



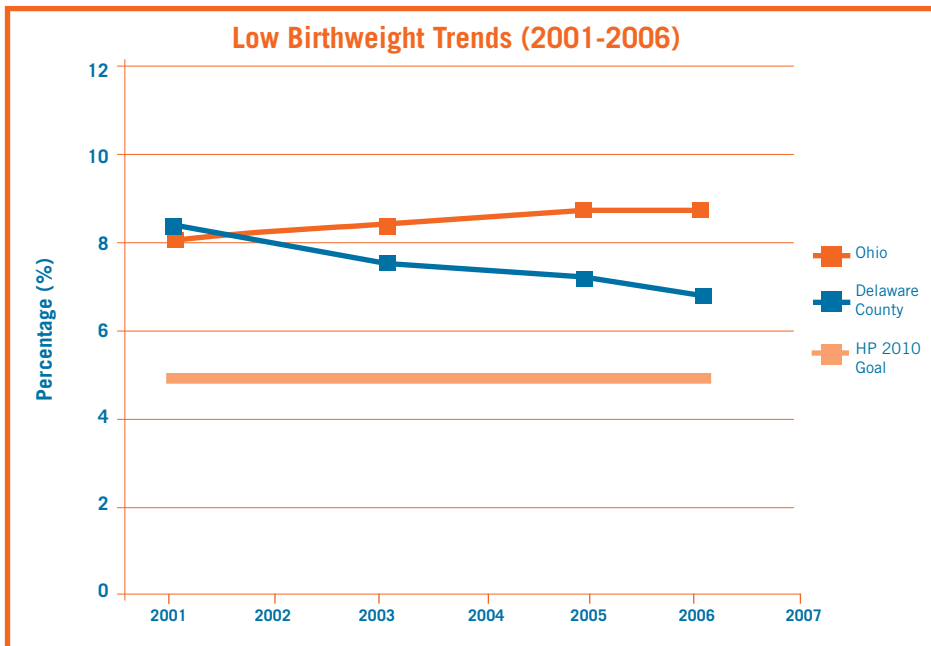
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	5	15
	2006*	3	19
Children receiving free/reduced price lunch	2001	7	22
	2007	9	27
Unemployment rate	2001	3	4
	2007	4	6
Children receiving food stamps	2001	3	12
	2006*	5	20
Children in child care assistance programs (Rate/1000)	2001	8	47
	2006	14	49
Births to adolescents (Rate/1000)	2001	15	22
	2006	8	20
Infants born at low birthweight	2001	8	8
	2006	7	9
Children in public health care programs	2001	9	27
	2005	15	41
4th graders less than proficient in math	2001	33	43
	2007	14	24
4th graders less than proficient in reading	2001	37	46
	2007	10	20
Students not graduating from high school	2001	8	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	4	11
	2006	3	10
Children in foster care (Rate/1000)	2001	3	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	7	15
	2006	6	14

*Refer to page 225 for details.



HEALTH INDICATORS

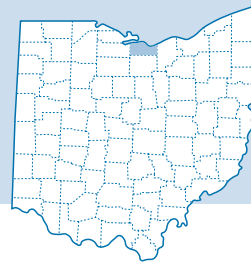
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 11.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 12.2	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 55.1	
	Asthma ER Visits (%): 2	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 69.2	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 14.6	
	% Uninsured for Dental Care: 22	
	% Who Could Not Receive Needed Dental Care: 2.4	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 627	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 0	
	Rate/1000: 0.0	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 6	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 2.5	
Year	Infant Mortality	HP2010 Goal
2005	#: 9	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 3.8	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 5	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 2.1	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 4	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 1.7	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 5	Rate (per 100,000 children ages 1-14): 16.5
	Rate (per 100,000 children ages 1-14): 16.8	
		<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Erie



County Seat: Sandusky
 County Type: Rural Non-Appalachian
 Total Population: 77,536
 Child Population: 17,503



Children's Defense Fund-Ohio

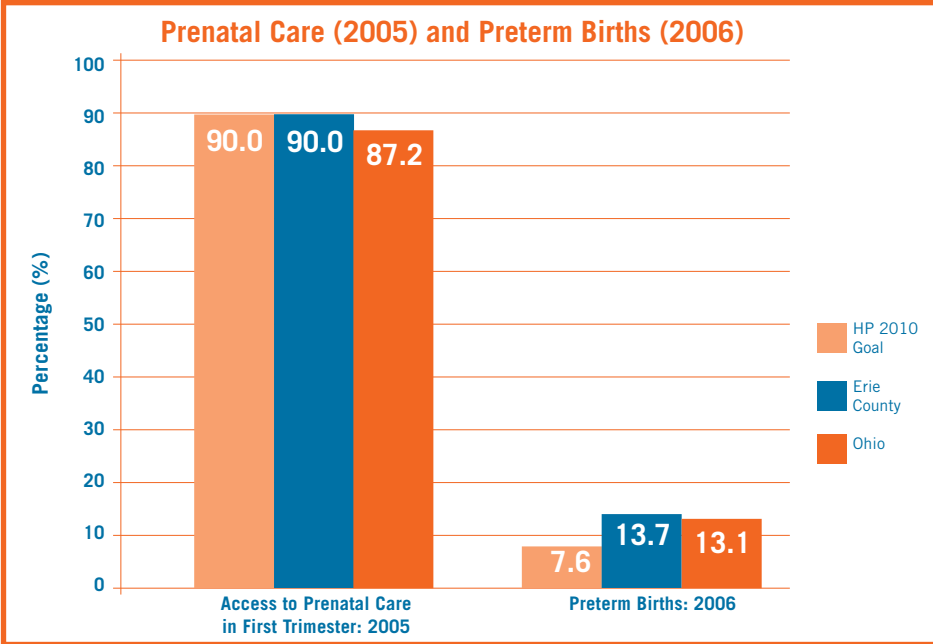


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	14	15
	2006*	12	19
Children receiving free/reduced price lunch	2001	9	22
	2007	25	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	7	12
	2006*	17	20
Children in child care assistance programs (Rate/1000)	2001	64	47
	2006	52	49
Births to adolescents (Rate/1000)	2001	19	22
	2006	18	20
Infants born at low birthweight	2001	9	8
	2006	7	9
Children in public health care programs	2001	23	27
	2005	37	41
4th graders less than proficient in math	2001	42	43
	2007	23	24
4th graders less than proficient in reading	2001	43	46
	2007	18	20
Students not graduating from high school	2001	10	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	9	10
Children in foster care (Rate/1000)	2001	17	13
	2006	10	11
Adolescents adjudicated for felonies (Rate/1000)	2001	21	15
	2006	13	14

*Refer to page 225 for details.

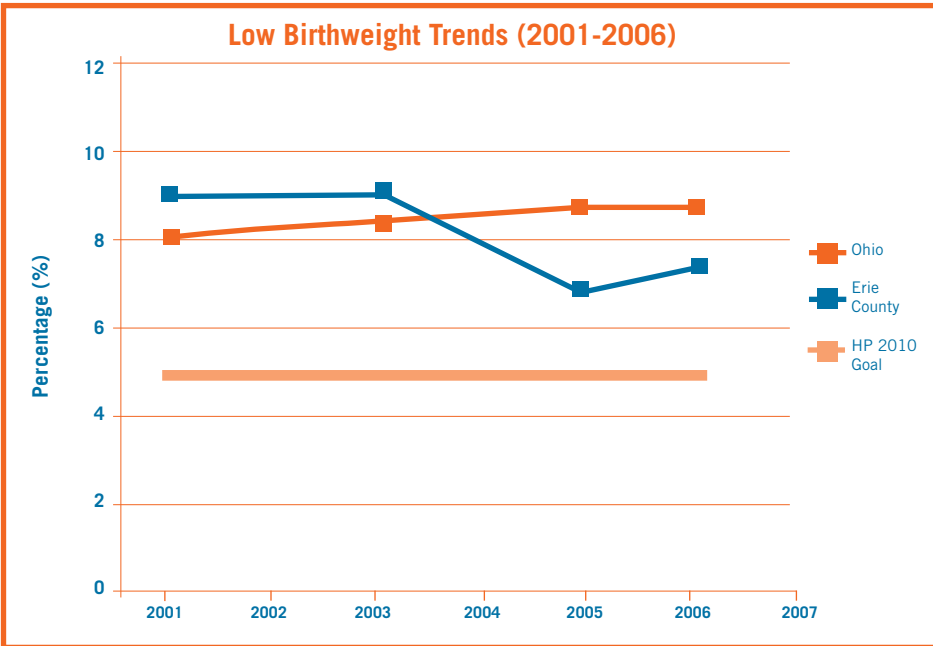


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	12.6
	Asthma Episode (%)	20.1
	Asthma ER Visits (%)	16.6
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	70.1
	% Never Visited a Dentist	15.2
	% Uninsured for Dental Care	29.1
	% Who Could Not Receive Needed Dental Care	2.4
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	396
	Total EBLs	8
	Rate/1000	20.2

HP2010 Goals:

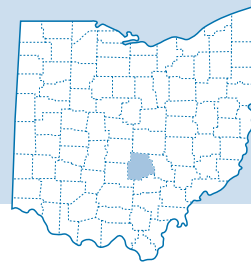
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	3	3.6
	4.5	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	5	5.9
	4.5	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	2.4
	2.9	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	3.6
	1.2	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	4	29.3
	20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)	

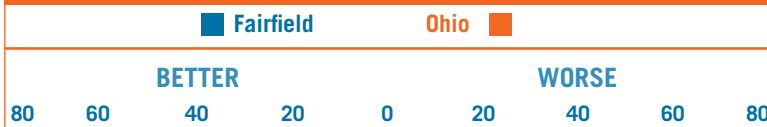
Fairfield



County Seat: Lancaster
 County Type: Suburban
 Total Population: 139,635
 Child Population: 34,072

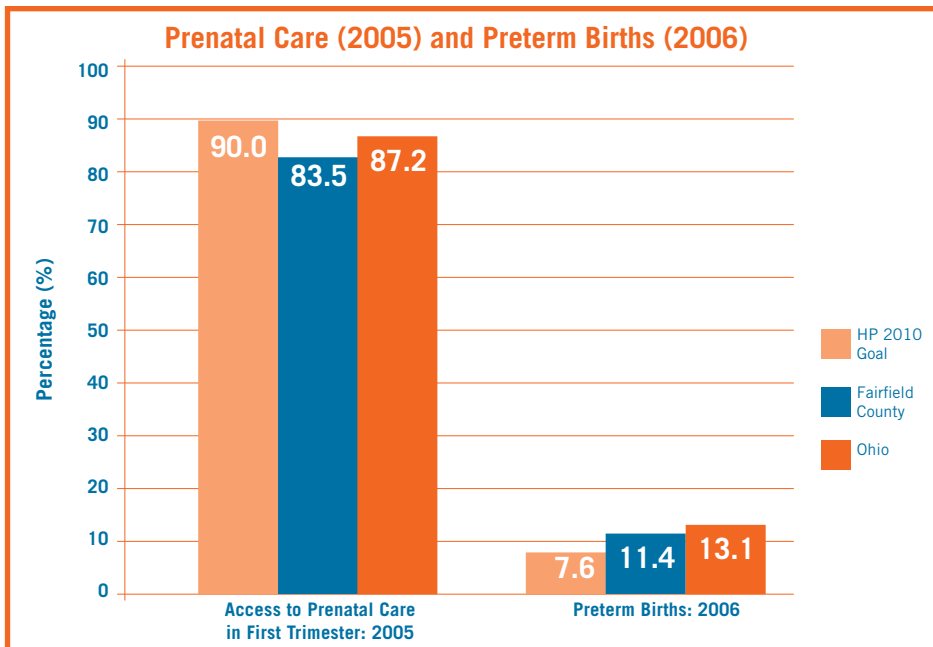


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	9	15
	2006*	10	19
Children receiving free/reduced price lunch	2001	11	22
	2007	17	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	6	12
	2006*	13	20
Children in child care assistance programs (Rate/1000)	2001	25	47
	2006	29	49
Births to adolescents (Rate/1000)	2001	13	22
	2006	15	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	14	27
	2005	33	41
4th graders less than proficient in math	2001	33	43
	2007	17	24
4th graders less than proficient in reading	2001	38	46
	2007	14	20
Students not graduating from high school	2001	11	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	3	11
	2006	5	10
Children in foster care (Rate/1000)	2001	7	13
	2006	8	11
Adolescents adjudicated for felonies (Rate/1000)	2001	11	15
	2006	8	14

*Refer to page 225 for details.



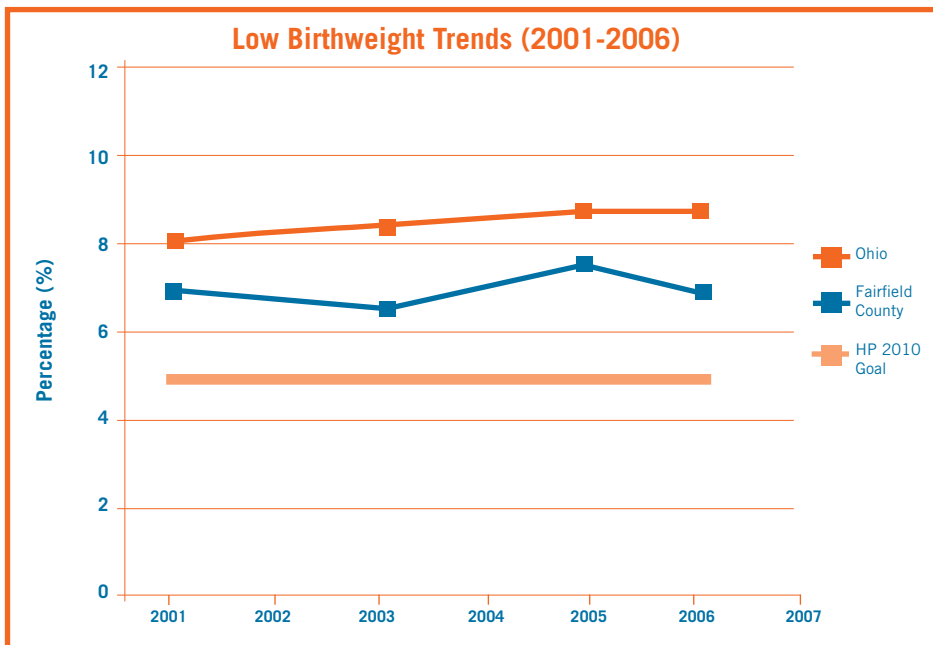
HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.2	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	8.9
	Asthma Episode (%)	35.7
	Asthma ER Visits (%)	4.3
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	67.4
	% Never Visited a Dentist	12.8
	% Uninsured for Dental Care	27.3
	% Who Could Not Receive Needed Dental Care	5
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	1110
	Total EBLs	8
	Rate/1000	7.2

HP2010 Goals for Dental Care:

- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year

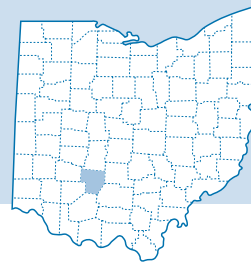
HP2010 Goal for Lead Exposure: Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	13	7.2
HP2010 Goal	#	Rate (per 1000 live births + late fetal deaths)
	4.5	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	12	6.7
HP2010 Goal	#	Rate (per 1000 live births)
	4.5	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	8	4.5
HP2010 Goal	#	Rate (per 1000 live births)
	2.9	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	4	2.2
HP2010 Goal	#	Rate (per 1000 live births)
	1.2	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	2	7.8
HP2010 Goal	#	Rate (per 100,000 children ages 1-14)
	20.0	(1-4 yrs)
	13.0	(5-9 yrs)
	16.5	(10-14 yrs)

Fayette



County Seat: Washington Court House
 County Type: Rural Non-Appalachian
 Total Population: 28,233
 Child Population: 6,825



Children's Defense Fund-Ohio

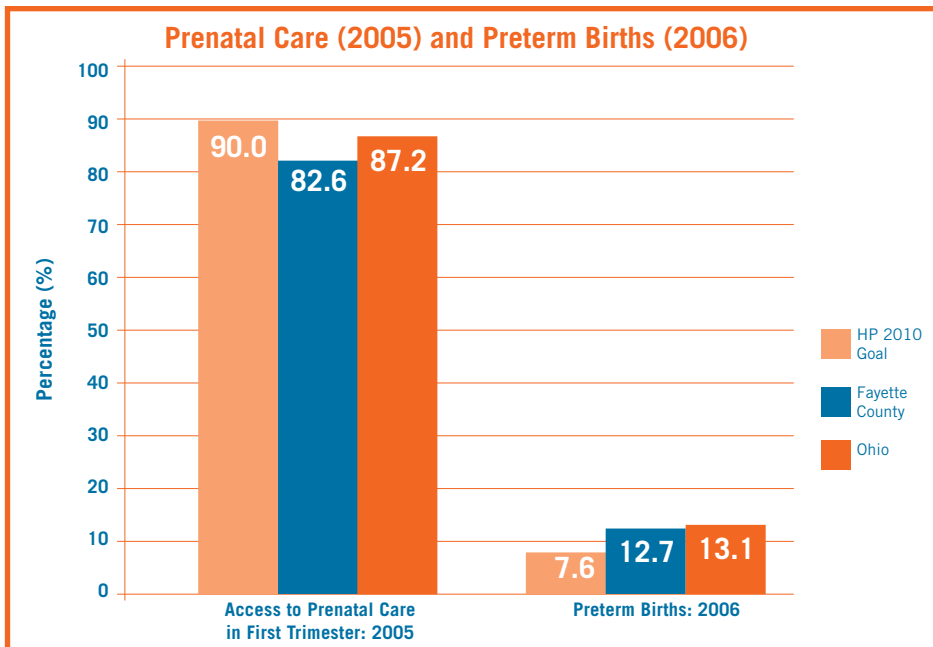


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2005*	20	19
Children receiving free/reduced price lunch	2001	19	22
	2007	26	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	11	12
	2006*	19	20
Children in child care assistance programs (Rate/1000)	2001	49	47
	2006	62	49
Births to adolescents (Rate/1000)	2001	26	22
	2006	19	20
Infants born at low birthweight	2001	5	8
	2006	6	9
Children in public health care programs	2001	31	27
	2005	49	41
4th graders less than proficient in math	2001	41	43
	2007	22	24
4th graders less than proficient in reading	2001	50	46
	2007	20	20
Students not graduating from high school	2001	14	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	1	11
	2006	7	10
Children in foster care (Rate/1000)	2001	4	13
	2006	10	11
Adolescents adjudicated for felonies (Rate/1000)	2001	16	15
	2006	4	14

*Refer to page 225 for details.

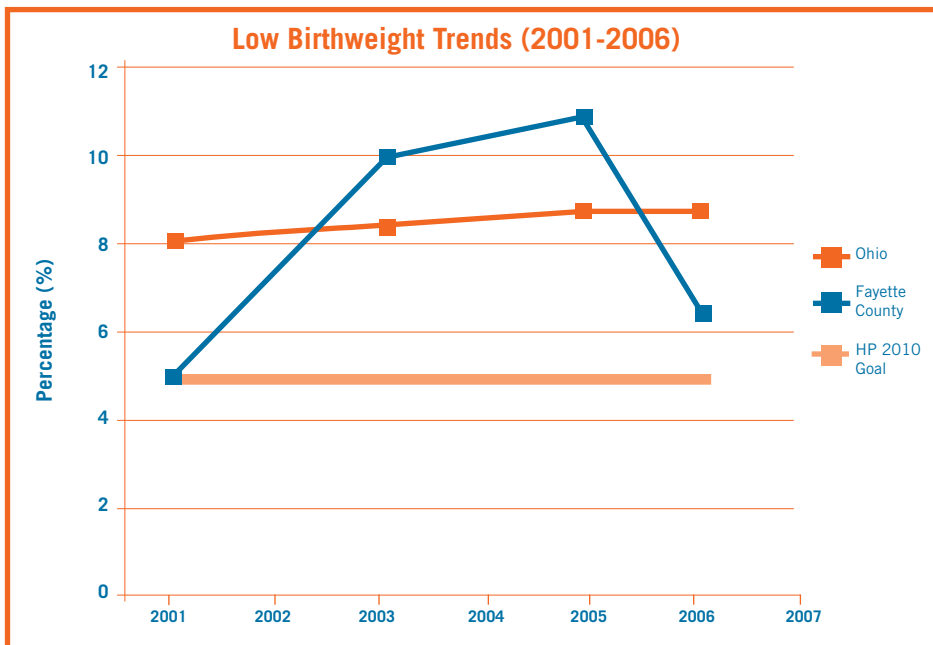


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 24	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	16.3
	Asthma Episode (%)	43.3
	Asthma ER Visits (%)	10.5
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	65.9
	% Never Visited a Dentist	16.1
	% Uninsured for Dental Care	24.7
	% Who Could Not Receive Needed Dental Care	4.9
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	294
	Total EBLs	4
	Rate/1000	13.6

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



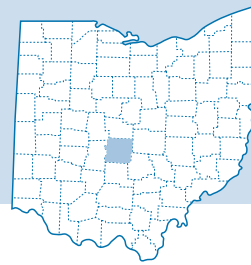
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	1	2.4
2005	#	Rate (per 1000 live births)
	4	9.7
2005	#	Rate (per 1000 live births)
	2	4.8
2005	#	Rate (per 1000 live births)
	2	4.8
2005	#	Rate (per 100,000 children ages 1-14)
	1	19.1

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Franklin



County Seat: Columbus
 County Type: Metropolitan
 Total Population: 1,109,067
 Child Population: 280,543



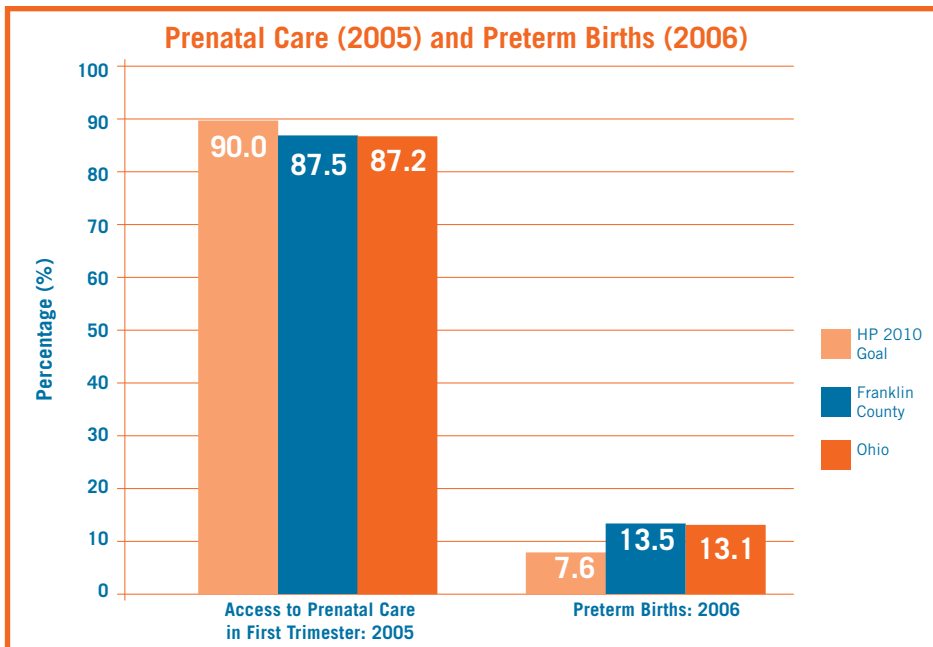
PERCENT CHANGE OVER TIME

■ Franklin ■ Ohio



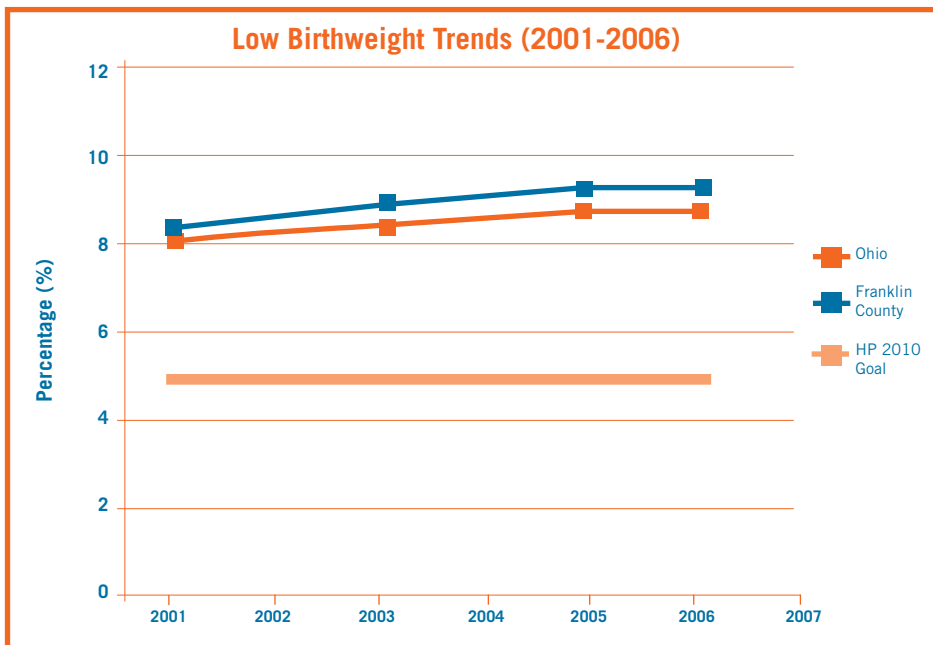
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2006*	20	19
Children receiving free/reduced price lunch	2001	27	22
	2007	29	27
Unemployment rate	2001	3	4
	2007	5	6
Children receiving food stamps	2001	14	12
	2006*	24	20
Children in child care assistance programs (Rate/1000)	2001	56	47
	2006	58	49
Births to adolescents (Rate/1000)	2001	27	22
	2006	28	20
Infants born at low birthweight	2001	8	8
	2006	9	9
Children in public health care programs	2001	29	27
	2005	44	41
4th graders less than proficient in math	2001	44	43
	2007	27	24
4th graders less than proficient in reading	2001	47	46
	2007	24	20
Students not graduating from high school	2001	25	19
	2006*	13	14
Children abused or neglected (Rate/1000)	2001	12	11
	2006	9	10
Children in foster care (Rate/1000)	2001	22	13
	2006	21	11
Adolescents adjudicated for felonies (Rate/1000)	2001	14	15
	2006	15	14

*Refer to page 225 for details.



HEALTH INDICATORS

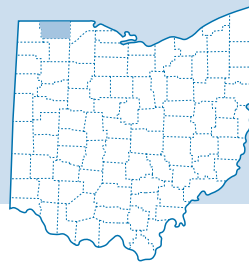
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 16.9	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 14.1	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 57	
	Asthma ER Visits (%): 26.7	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 69.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 14.5	
	% Uninsured for Dental Care: 21.3	
	% Who Could Not Receive Needed Dental Care: 3.6	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 13,606	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 82	
	Rate/1000: 6.0	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 129	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 7.3	
	Infant Mortality	HP2010 Goal
	#: 148	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 8.4	
	Neonatal Mortality	HP2010 Goal
	#: 102	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 5.8	
	Post-neonatal Mortality	HP2010 Goal
	#: 46	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 2.6	
	Child Death (1-14 yrs)	HP2010 Goal
#: 32	Rate (per 100,000 children ages 1-14): 14.9	
	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Fulton



County Seat: Wauseon
 County Type: Suburban
 Total Population: 42,566
 Child Population: 10,710

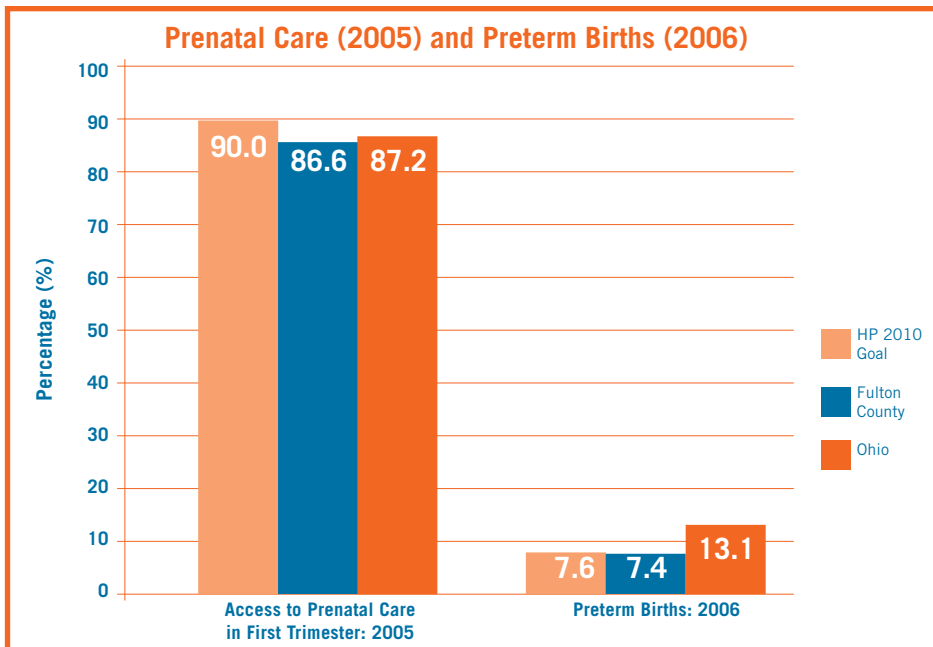


PERCENT CHANGE OVER TIME



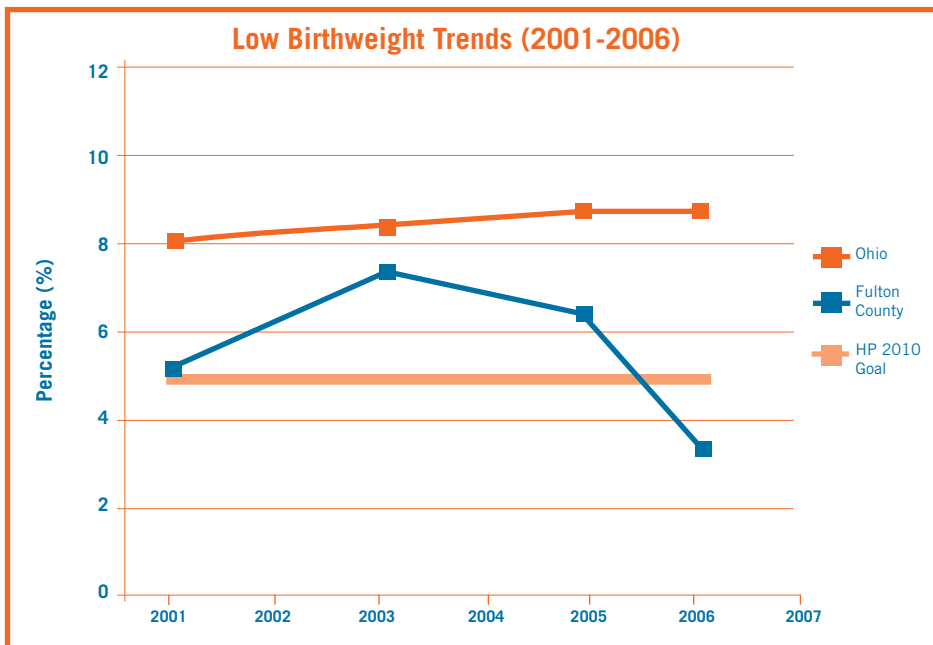
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	8	15
	2005*	9	19
Children receiving free/reduced price lunch	2001	13	22
	2007	20	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	5	12
	2006*	9	20
Children in child care assistance programs (Rate/1000)	2001	23	47
	2006	29	49
Births to adolescents (Rate/1000)	2001	10	22
	2006	11	20
Infants born at low birthweight	2001	5	8
	2006	4	9
Children in public health care programs	2001	14	27
	2005	29	41
4th graders less than proficient in math	2001	38	43
	2007	15	24
4th graders less than proficient in reading	2001	36	46
	2007	13	20
Students not graduating from high school	2001	14	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	18	10
Children in foster care (Rate/1000)	2001	3	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	8	15
	2006	10	14

*Refer to page 225 for details.



HEALTH INDICATORS

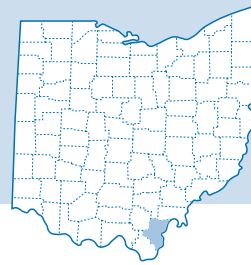
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 14.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 17.1	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 39.2	
	Asthma ER Visits (%): 21.6	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 77.3	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 11.4	
	% Uninsured for Dental Care: 19.6	
	% Who Could Not Receive Needed Dental Care: 5	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 443	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 2	
	Rate/1000: 4.5	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	7.1
	Rate (per 1000 live births + late fetal deaths)	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	7	12.4
	Rate (per 1000 live births)	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	5	8.8
	Rate (per 1000 live births)	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	3.5
	Rate (per 1000 live births)	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	4	48.3
	Rate (per 100,000 children ages 1-14)	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Gallia



County Seat: Gallipolis
 County Type: Appalachian
 Total Population: 30,857
 Child Population: 7,214

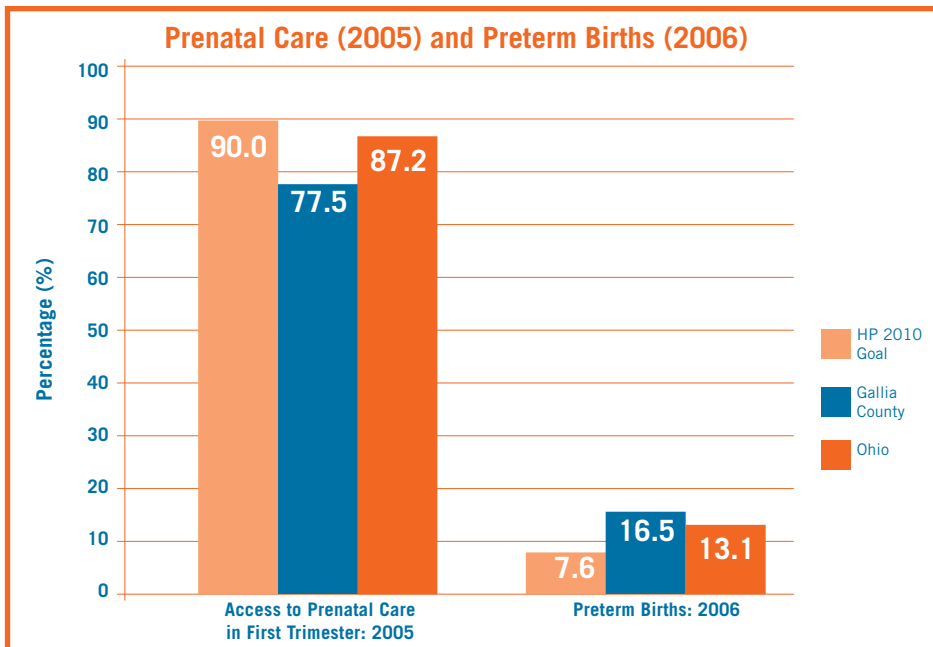


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	25	15
	2005*	33	19
Children receiving free/reduced price lunch	2001	26	22
	2007	39	27
Unemployment rate	2001	6	4
	2007	6	6
Children receiving food stamps	2001	24	12
	2006*	31	20
Children in child care assistance programs (Rate/1000)	2001	49	47
	2006	46	49
Births to adolescents (Rate/1000)	2001	21	22
	2006	13	20
Infants born at low birthweight	2001	12	8
	2006	9	9
Children in public health care programs	2001	33	27
	2005	64	41
4th graders less than proficient in math	2001	55	43
	2007	25	24
4th graders less than proficient in reading	2001	53	46
	2007	22	20
Students not graduating from high school	2001	18	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	8	11
	2006	8	10
Children in foster care (Rate/1000)	2001	14	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	12	15
	2006	11	14

*Refer to page 225 for details.

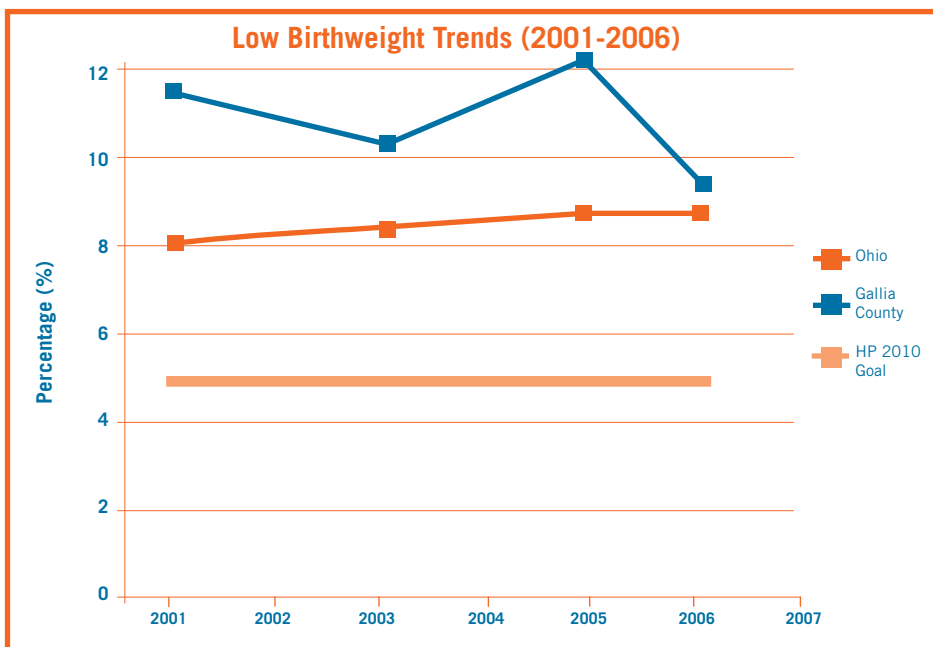


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 22	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	24.6
	Asthma Episode (%)	44.9
	Asthma ER Visits (%)	24
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	65
	% Never Visited a Dentist	15.7
	% Uninsured for Dental Care	21.9
	% Who Could Not Receive Needed Dental Care	7
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	487
	Total EBLs	1
	Rate/1000	2.1

HP2010 Goals:

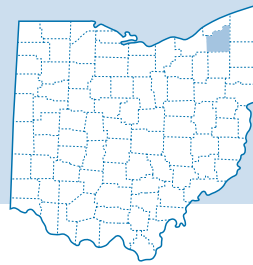
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



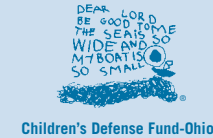
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	5	12.4
	Rate (per 1000 live births + late fetal deaths)	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	4	10
	Rate (per 1000 live births)	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	7.5
	Rate (per 1000 live births)	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	2.5
	Rate (per 1000 live births)	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	0	0
	Rate (per 100,000 children ages 1-14)	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Geauga



County Seat: Chardon
 County Type: Suburban
 Total Population: 94,733
 Child Population: 23,714

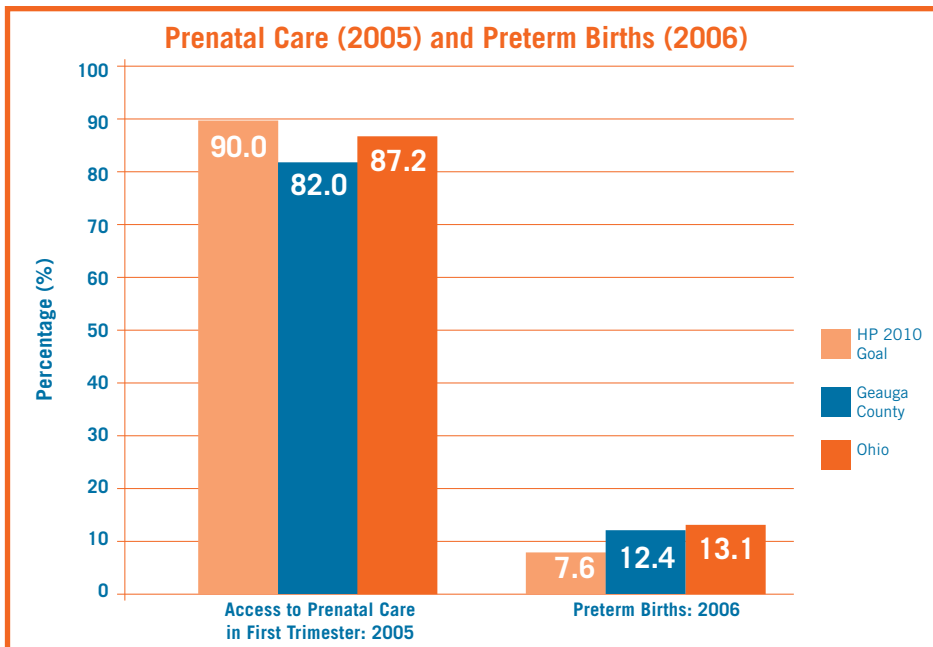


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	9	15
	2006*	6	19
Children receiving free/reduced price lunch	2001	6	22
	2007	9	27
Unemployment rate	2001	3	4
	2007	5	6
Children receiving food stamps	2001	2	12
	2006*	4	20
Children in child care assistance programs (Rate/1000)	2001	15	47
	2006	14	49
Births to adolescents (Rate/1000)	2001	3	22
	2006	3	20
Infants born at low birthweight	2001	6	8
	2006	8	9
Children in public health care programs	2001	6	27
	2005	13	41
4th graders less than proficient in math	2001	22	43
	2007	12	24
4th graders less than proficient in reading	2001	24	46
	2007	8	20
Students not graduating from high school	2001	6	19
	2006*	3	14
Children abused or neglected (Rate/1000)	2001	2	11
	2006	5	10
Children in foster care (Rate/1000)	2001	3	13
	2006	2	11
Adolescents adjudicated for felonies (Rate/1000)	2001	4	15
	2006	4	14

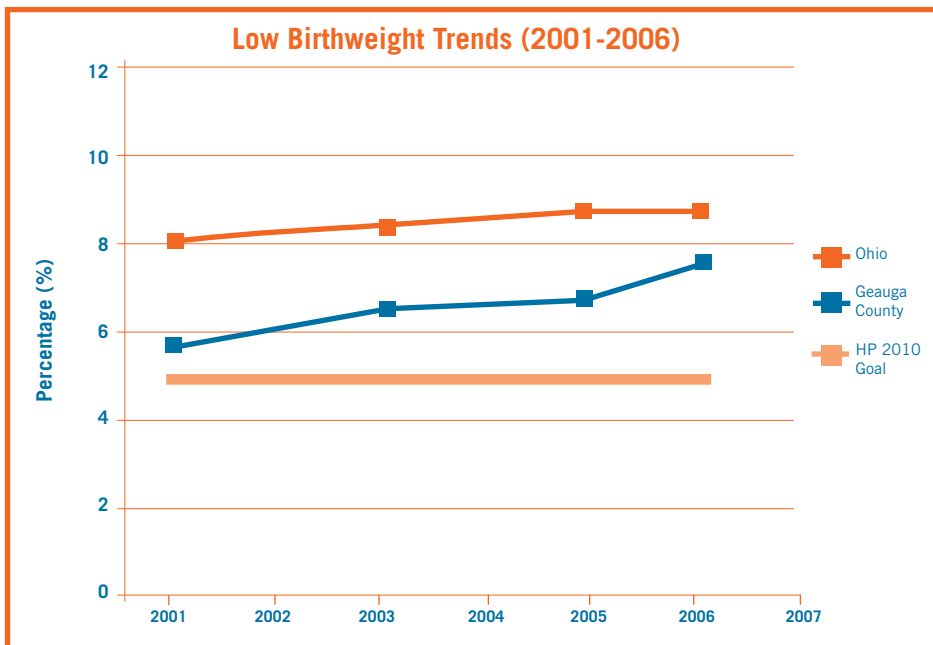
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 20.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	11.9
	Asthma Episode (%)	47.5
	Asthma ER Visits (%)	23.8
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	75.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	22.2
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	6.1
	Total Children Screened (0-72 months)	326
	Total EBLs	3
	Rate/1000	9.2

Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	4	3.7	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	6	5.6	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	3.7	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	1.9	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
5	28	• 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)	

Greene



County Seat: Xenia
 County Type: Suburban
 Total Population: 154,006
 Child Population: 33,166

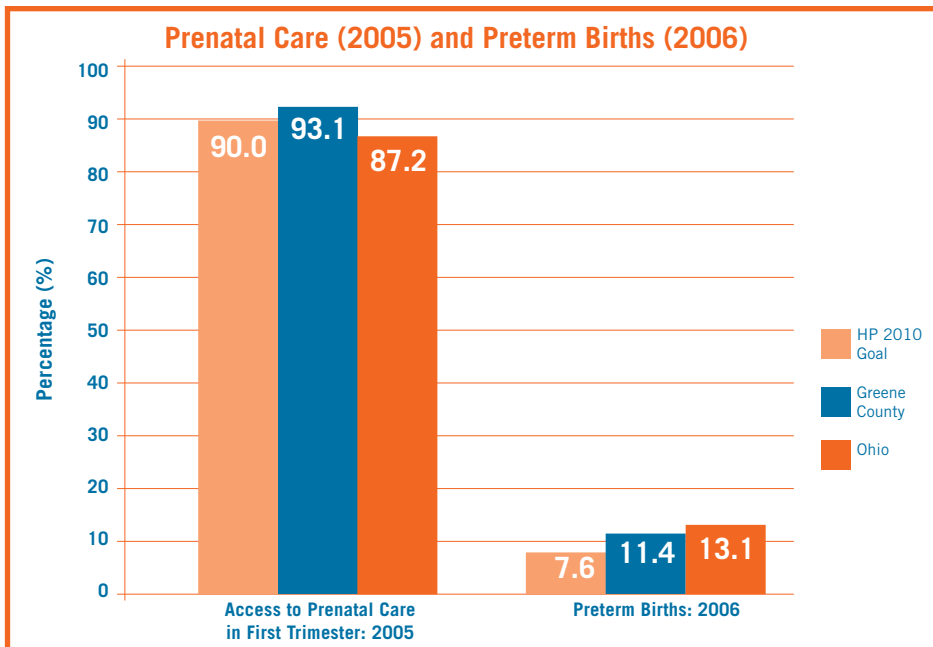


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	9	15
	2006*	16	19
Children receiving free/reduced price lunch	2001	13	22
	2007	17	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	8	12
	2006*	13	20
Children in child care assistance programs (Rate/1000)	2001	34	47
	2006	38	49
Births to adolescents (Rate/1000)	2001	18	22
	2006	12	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	19	27
	2005	31	41
4th graders less than proficient in math	2001	43	43
	2007	18	24
4th graders less than proficient in reading	2001	44	46
	2007	13	20
Students not graduating from high school	2001	22	19
	2006*	9	14
Children abused or neglected (Rate/1000)	2001	12	11
	2006	9	10
Children in foster care (Rate/1000)	2001	6	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	9	14

*Refer to page 225 for details.

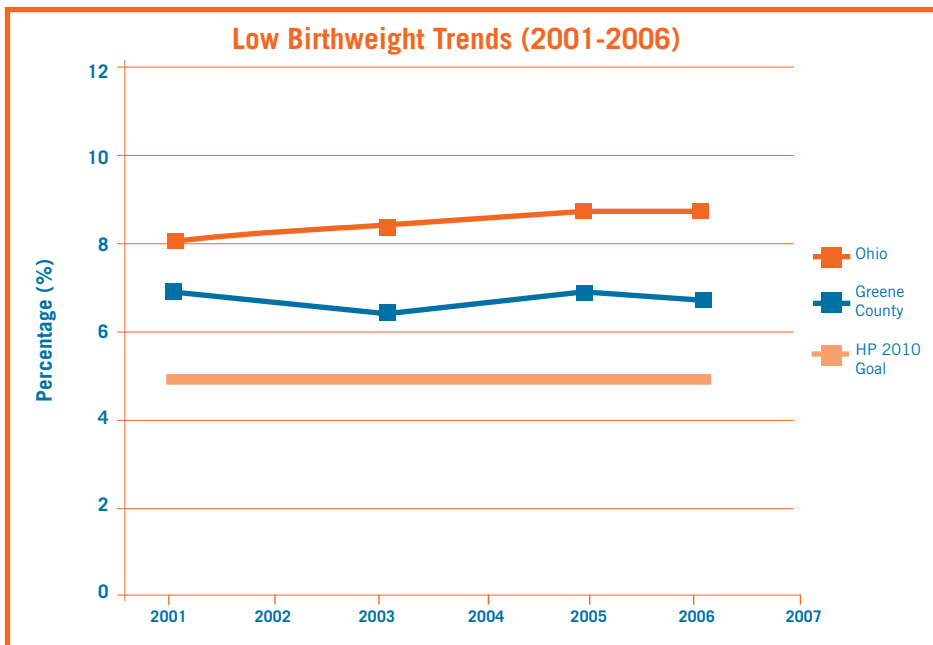


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 20.2	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	13.5
	Asthma Episode (%)	32.3
	Asthma ER Visits (%)	7.8
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	67.4
	% Never Visited a Dentist	12.8
	% Uninsured for Dental Care	27.3
	% Who Could Not Receive Needed Dental Care	5
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	872
	Total EBLs	4
	Rate/1000	4.6

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	8	4.4
2005	#	Rate (per 1000 live births + late fetal deaths)
	8	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	1.7
2005	#	Rate (per 1000 live births)
	5	2.8
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	1.7
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	5	2.8
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	3	11.8

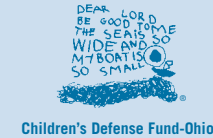
HP2010 Goals for Child Death (1-14 yrs):

- 20.0 (1-4 yrs)
- 13.0 (5-9 yrs)
- 16.5 (10-14 yrs)

Guernsey



County Seat: Cambridge
 County Type: Appalachian
 Total Population: 40,460
 Child Population: 9,796

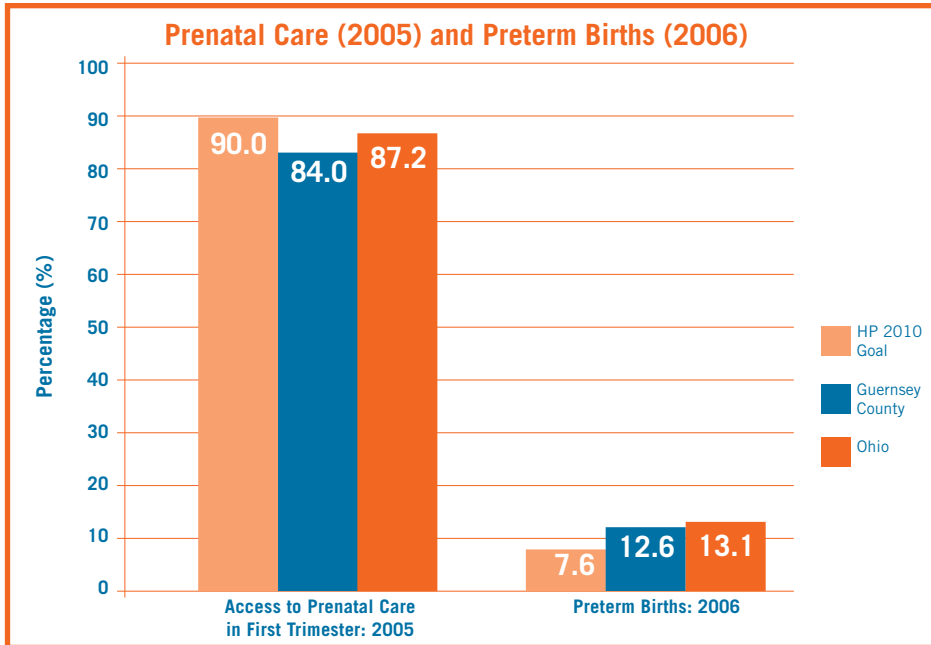


PERCENT CHANGE OVER TIME



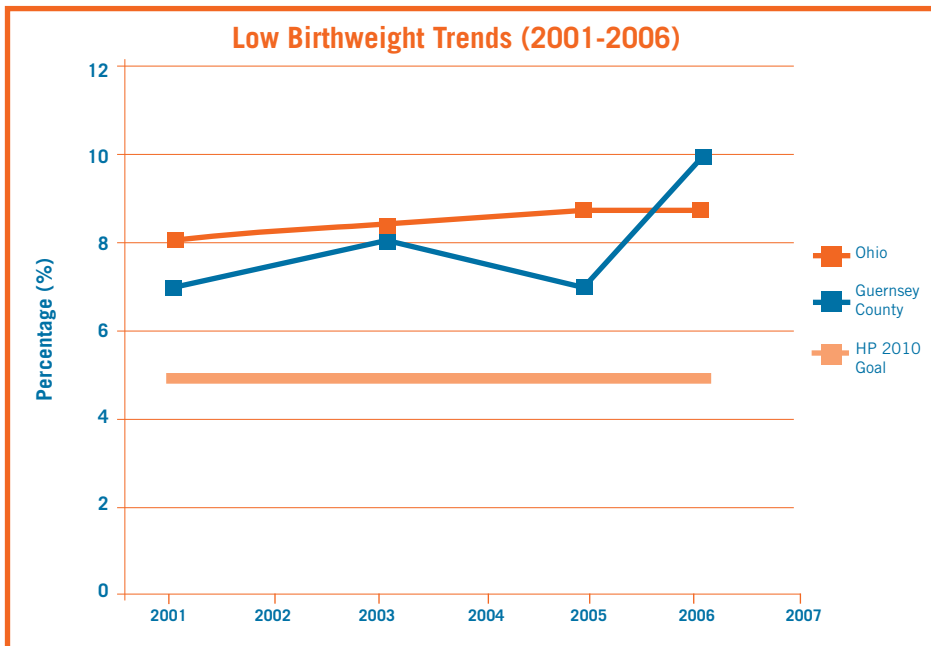
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	22	15
	2005*	27	19
Children receiving free/reduced price lunch	2001	27	22
	2007	43	27
Unemployment rate	2001	6	4
	2007	7	6
Children receiving food stamps	2001	15	12
	2006*	28	20
Children in child care assistance programs (Rate/1000)	2001	48	47
	2006	54	49
Births to adolescents (Rate/1000)	2001	18	22
	2006	17	20
Infants born at low birthweight	2001	7	8
	2006	10	9
Children in public health care programs	2001	43	27
	2005	61	41
4th graders less than proficient in math	2001	43	43
	2007	27	24
4th graders less than proficient in reading	2001	54	46
	2007	19	20
Students not graduating from high school	2001	19	19
	2006*	17	14
Children abused or neglected (Rate/1000)	2001	15	11
	2006	14	10
Children in foster care (Rate/1000)	2001	12	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	17	15
	2006	11	14

*Refer to page 225 for details.



HEALTH INDICATORS

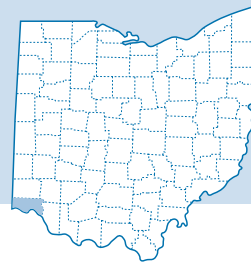
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 24.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	13.8
	Asthma Episode (%)	37.1
	Asthma ER Visits (%)	1
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	72.7
	% Never Visited a Dentist	14
	% Uninsured for Dental Care	24.5
% Who Could Not Receive Needed Dental Care	4.1	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	527
	Total EBLs	2
	Rate/1000	3.8
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	5	10.2
		4.5
Infant Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	Rate (per 1000 live births)
3	6.1	4.5
Neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	Rate (per 1000 live births)
3	6.1	2.9
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	Rate (per 1000 live births)
0	0	1.2
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)
2	26.3	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Hamilton



County Seat: Cincinnati
 County Type: Metropolitan
 Total Population: 847,368
 Child Population: 206,309

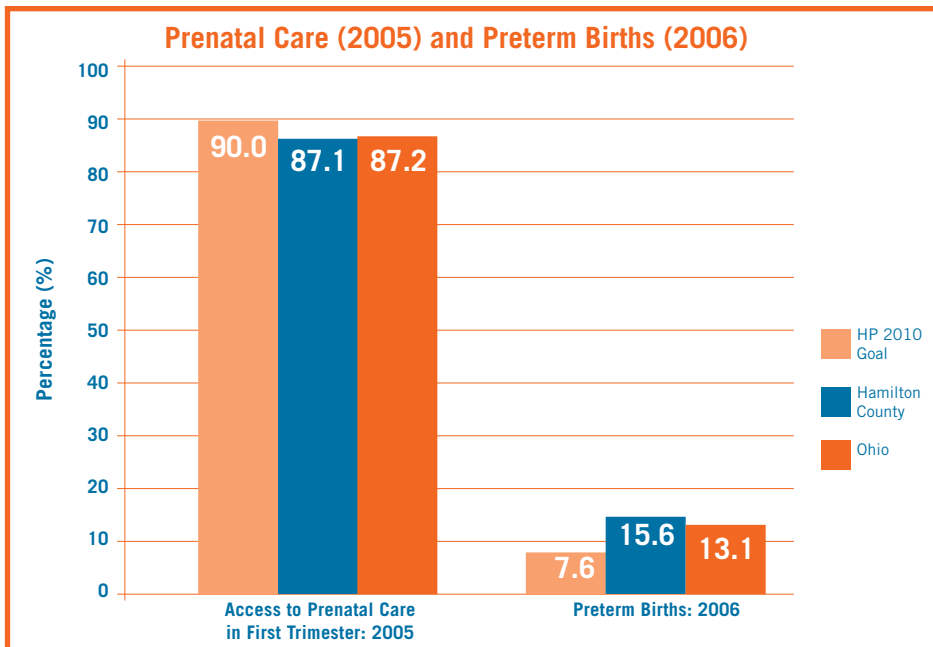


PERCENT CHANGE OVER TIME



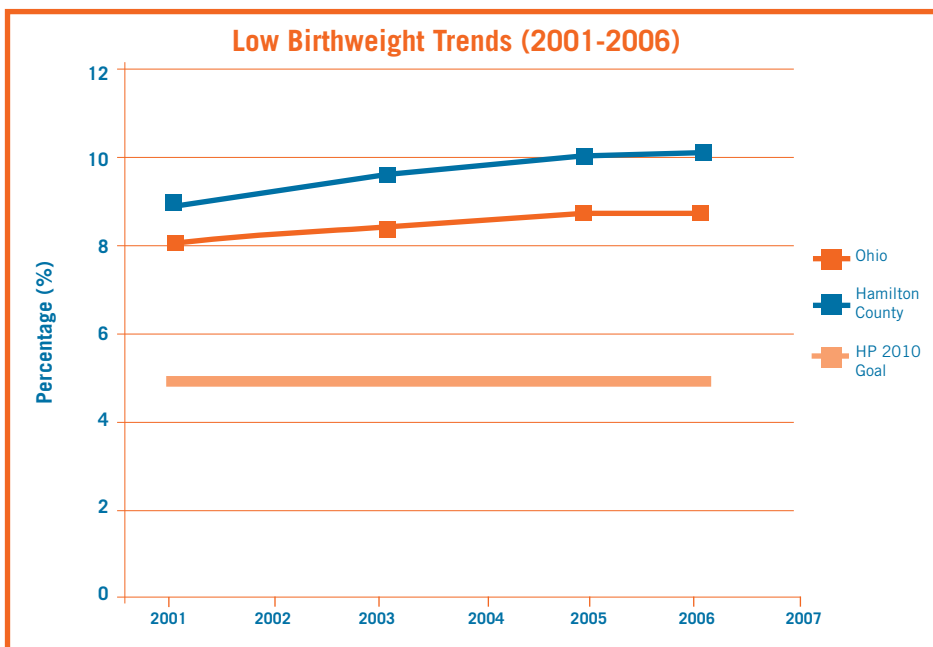
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	16	15
	2006*	21	19
Children receiving free/reduced price lunch	2001	22	22
	2007	29	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	13	12
	2006*	20	20
Children in child care assistance programs (Rate/1000)	2001	79	47
	2006	96	49
Births to adolescents (Rate/1000)	2001	29	22
	2006	27	20
Infants born at low birthweight	2001	9	8
	2006	10	9
Children in public health care programs	2001	30	27
	2005	40	41
4th graders less than proficient in math	2001	50	43
	2007	26	24
4th graders less than proficient in reading	2001	50	46
	2007	24	20
Students not graduating from high school	2001	23	19
	2006*	13	14
Children abused or neglected (Rate/1000)	2001	11	11
	2006	13	10
Children in foster care (Rate/1000)	2001	16	13
	2006	12	11
Adolescents adjudicated for felonies (Rate/1000)	2001	17	15
	2006	17	14

*Refer to page 225 for details.



HEALTH INDICATORS

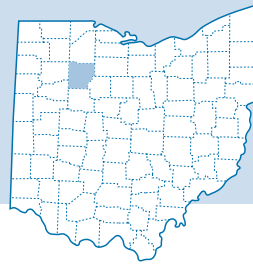
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 21.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 16.6	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 52.6	
	Asthma ER Visits (%): 28.6	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 72	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 12.4	
	% Uninsured for Dental Care: 21.9	
	% Who Could Not Receive Needed Dental Care: 5.1	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 11,860	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 218	
	Rate/1000: 18.4	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 123	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 10.7	
	Infant Mortality	HP2010 Goal
	#: 159	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 13.9	
	Neonatal Mortality	HP2010 Goal
	#: 111	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 9.7	
	Post-neonatal Mortality	HP2010 Goal
	#: 48	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 4.2	
	Child Death (1-14 yrs)	HP2010 Goal
#: 31	Rate (per 100,000 children ages 1-14): 20.3	
Rate (per 100,000 children ages 1-14): 20.3		
• 20.0 (1-4 yrs)		
• 13.0 (5-9 yrs)		
• 16.5 (10-14 yrs)		

Hancock



County Seat: Findlay
 County Type: Rural Non-Appalachian
 Total Population: 73,740
 Child Population: 17,595



Children's Defense Fund-Ohio

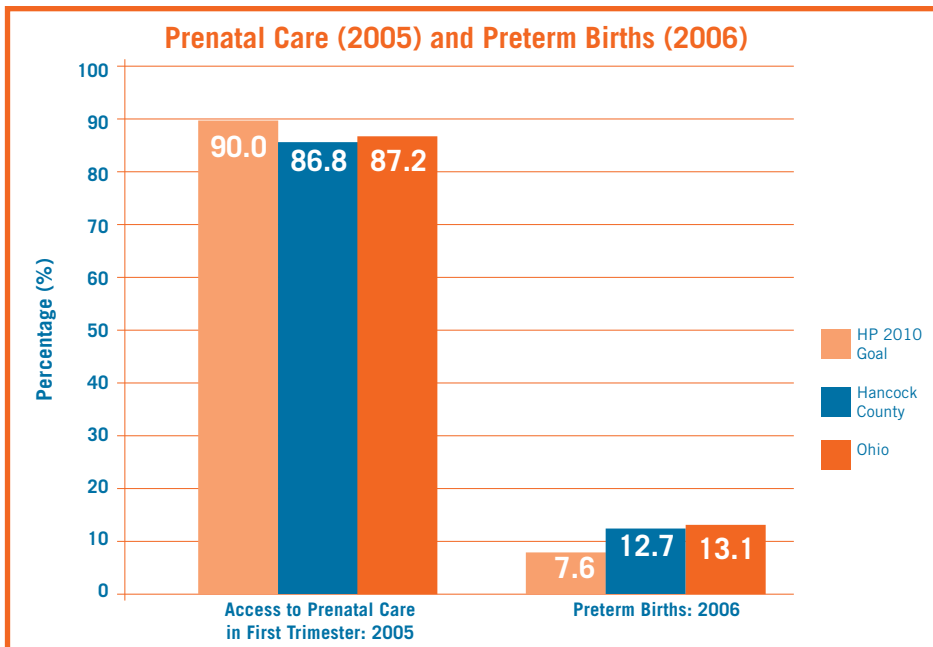


PERCENT CHANGE OVER TIME



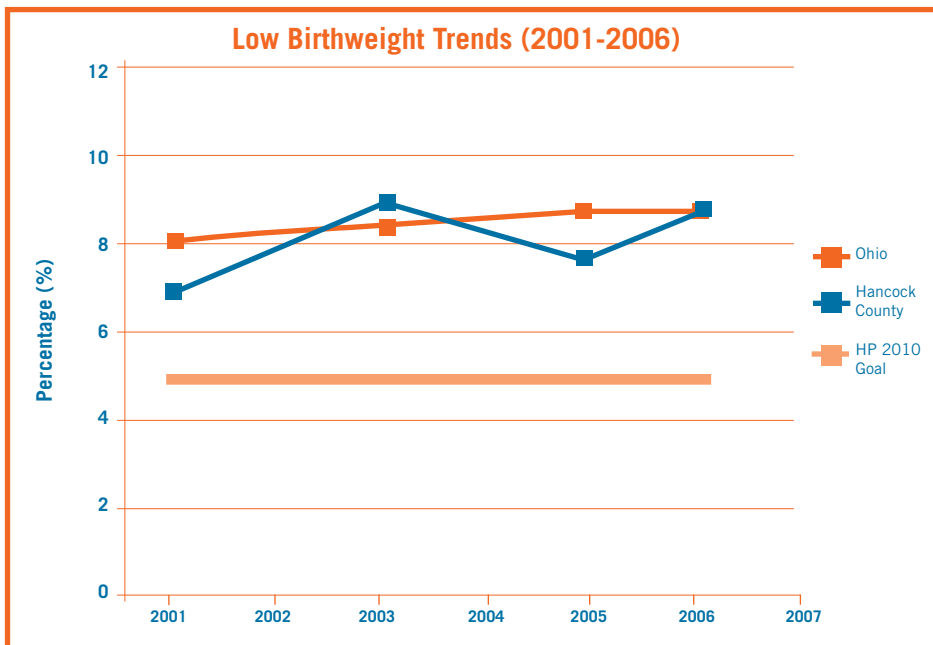
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2006*	22	19
Children receiving free/reduced price lunch	2001	12	22
	2007	17	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	5	12
	2006*	12	20
Children in child care assistance programs (Rate/1000)	2001	35	47
	2006	41	49
Births to adolescents (Rate/1000)	2001	18	22
	2006	13	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	17	27
	2005	29	41
4th graders less than proficient in math	2001	39	43
	2007	19	24
4th graders less than proficient in reading	2001	41	46
	2007	13	20
Students not graduating from high school	2001	11	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	8	10
Children in foster care (Rate/1000)	2001	3	13
	2006	5	11
Adolescents adjudicated for felonies (Rate/1000)	2001	15	15
	2006	16	14

*Refer to page 225 for details.



HEALTH INDICATORS

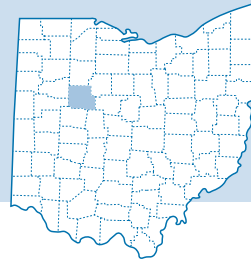
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 10	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 47.3	
	Asthma ER Visits (%): 47.3	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 67.2	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17.3	
	% Uninsured for Dental Care: 27	
	% Who Could Not Receive Needed Dental Care: 2.7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 239	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 2	
	Rate/1000: 8.4	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 6	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 6.3	
Year	Infant Mortality	HP2010 Goal
2005	#: 7	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 7.3	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 7	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 7.3	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 0	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 0	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 3	Rate (per 100,000 children ages 1-14): 22.4
	Rate (per 100,000 children ages 1-14): 22.4	
		<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Hardin



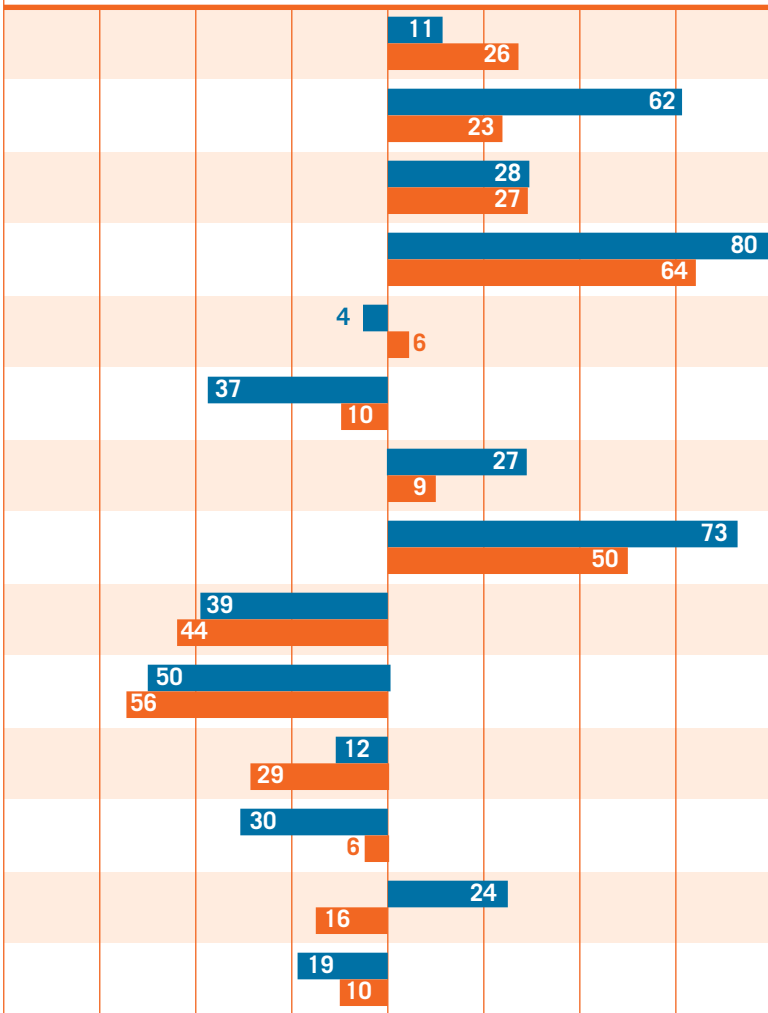
County Seat: Kenton
 County Type: Rural Non-Appalachian
 Total Population: 31,697
 Child Population: 7,212



PERCENT CHANGE OVER TIME

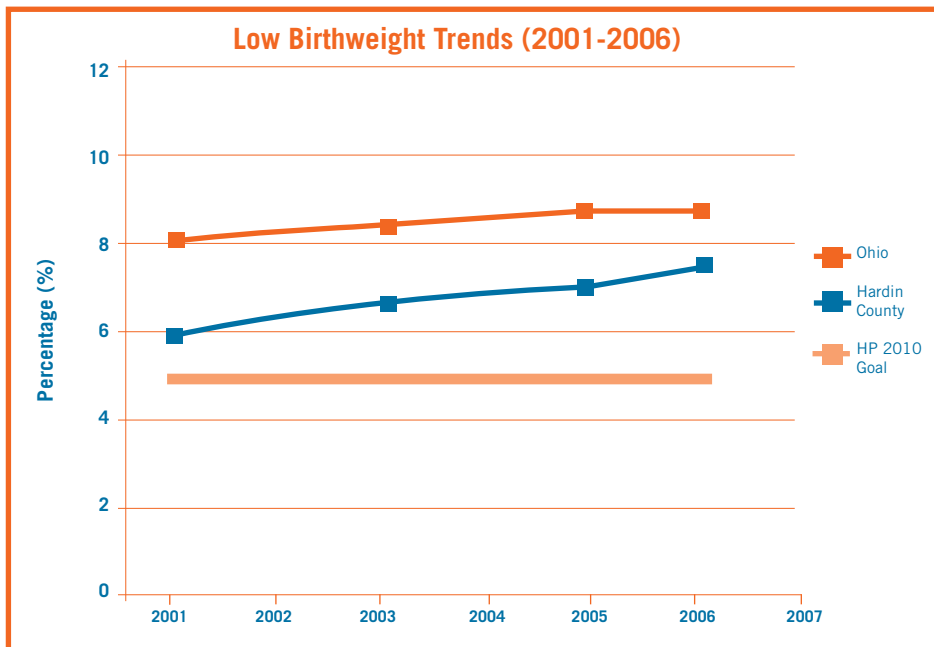
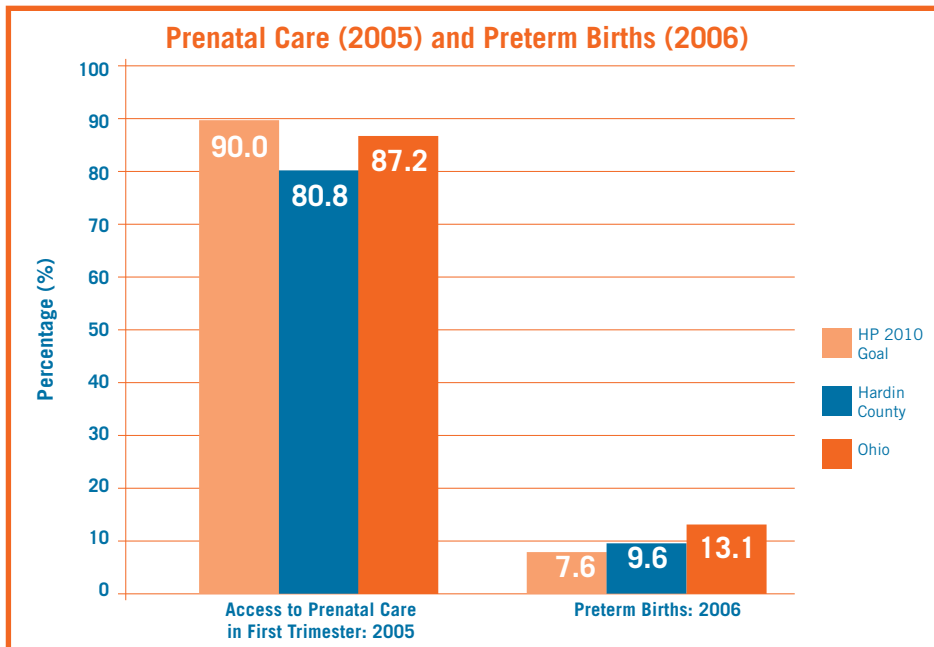
■ Hardin County ■ Ohio

BETTER 80 60 40 20 0 20 40 60 80 WORSE



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2005*	17	19
Children receiving free/reduced price lunch	2001	16	22
	2007	25	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	8	12
	2006*	14	20
Children in child care assistance programs (Rate/1000)	2001	15	47
	2006	15	49
Births to adolescents (Rate/1000)	2001	26	22
	2006	17	20
Infants born at low birthweight	2001	6	8
	2006	8	9
Children in public health care programs	2001	24	27
	2005	41	41
4th graders less than proficient in math	2001	35	43
	2007	22	24
4th graders less than proficient in reading	2001	46	46
	2007	23	20
Students not graduating from high school	2001	12	19
	2006*	11	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	7	10
Children in foster care (Rate/1000)	2001	9	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	10	14

*Refer to page 225 for details.



HEALTH INDICATORS

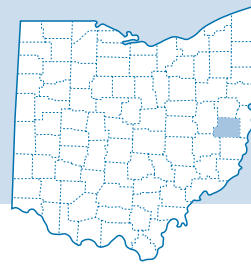
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 20.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	4.6
	• Asthma Episode (%)	0
	• Asthma ER Visits (%)	0
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	71.9
	% Never Visited a Dentist	12.3
	% Uninsured for Dental Care	22.5
	% Who Could Not Receive Needed Dental Care	7
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	353
	Total EBLs	0
	Rate/1000	0.0

HP2010 Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children

MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	0	0
	HP2010 Goal	
	#	Rate (per 1000 live births)
	3	8.3
	HP2010 Goal	
	#	Rate (per 1000 live births)
0	0	
HP2010 Goal		
#	Rate (per 1000 live births)	
3	8.3	
HP2010 Goal		
#	Rate (per 100,000 children ages 1-14)	
0	0	
HP2010 Goal		
Rate (per 100,000 children ages 1-14)		
• 20.0 (1-4 yrs)		
• 13.0 (5-9 yrs)		
• 16.5 (10-14 yrs)		

Harrison



County Seat: Cadiz
 County Type: Appalachian
 Total Population: 15,516
 Child Population: 3,393

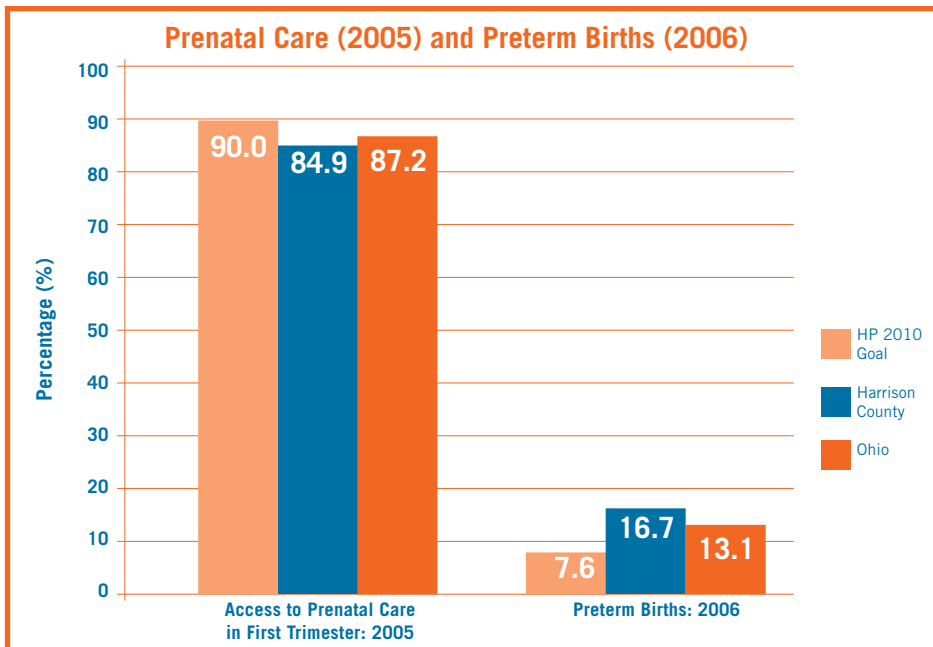


PERCENT CHANGE OVER TIME



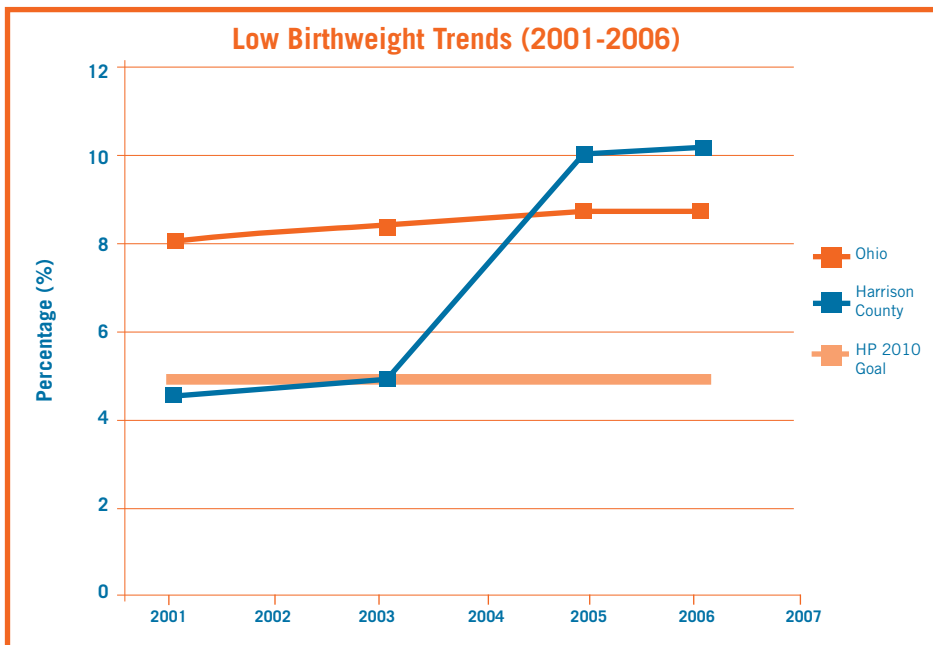
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	18	15
	2005*	22	19
Children receiving free/reduced price lunch	2001	31	22
	2007	38	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	12	12
	2006*	24	20
Children in child care assistance programs (Rate/1000)	2001	30	47
	2006	30	49
Births to adolescents (Rate/1000)	2001	6	22
	2006	17	20
Infants born at low birthweight	2001	4	8
	2006	10	9
Children in public health care programs	2001	36	27
	2005	56	41
4th graders less than proficient in math	2001	59	43
	2007	36	24
4th graders less than proficient in reading	2001	47	46
	2007	20	20
Students not graduating from high school	2001	10	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	14	10
Children in foster care (Rate/1000)	2001	5	13
	2006	8	11
Adolescents adjudicated for felonies (Rate/1000)	2001	2	15
	2006	15	14

*Refer to page 225 for details.



HEALTH INDICATORS

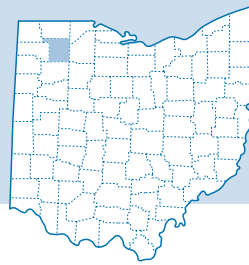
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 25.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 24.2	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 58.4	
	Asthma ER Visits (%): 52	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 72.7	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 14	
	% Uninsured for Dental Care: 24.5	
	% Who Could Not Receive Needed Dental Care: 4.1	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 173	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 6	
	Rate/1000: 34.7	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 3	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 16.6	
	Rate (per 1000 live births): 11.1	
Year	Infant Mortality	HP2010 Goal
2005	#: 2	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 11.1	
	Rate (per 1000 live births): 2.9	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 2	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 11.1	
	Rate (per 1000 live births): 0	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 0	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 0	
	Rate (per 1000 live births): 0	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 0	Rate (per 100,000 children ages 1-14): 16.5 (10-14 yrs)
	Rate (per 100,000 children ages 1-14): 0	
	Rate (per 100,000 children ages 1-14): 0	

Henry



County Seat: Napoleon
 County Type: Rural Non-Appalachian
 Total Population: 29,246
 Child Population: 7,414



Children's Defense Fund-Ohio

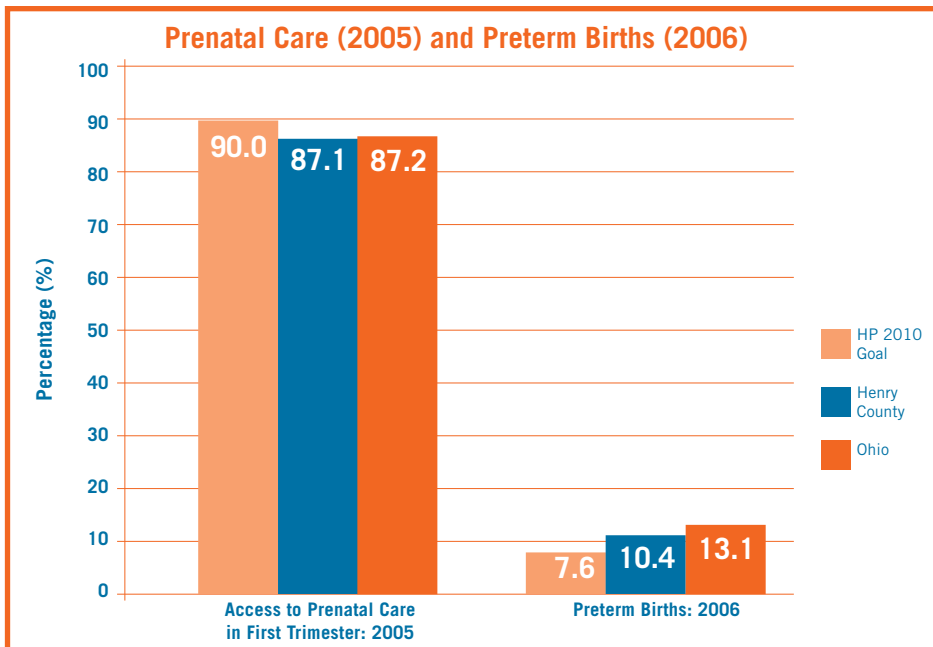


PERCENT CHANGE OVER TIME



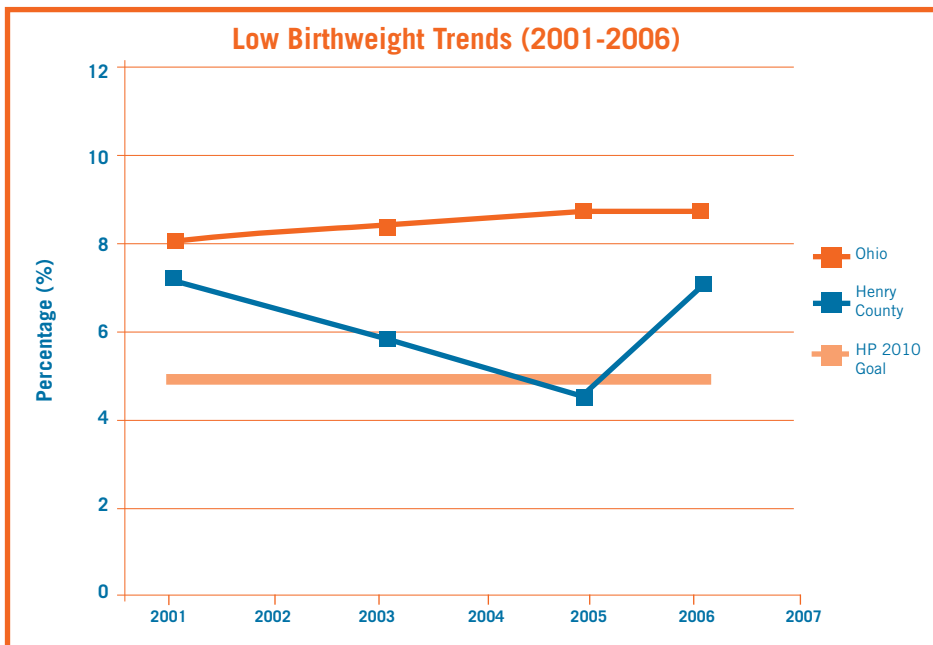
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2005*	10	19
Children receiving free/reduced price lunch	2001	11	22
	2007	20	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	5	12
	2006*	9	20
Children in child care assistance programs (Rate/1000)	2001	27	47
	2006	28	49
Births to adolescents (Rate/1000)	2001	12	22
	2006	22	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	16	27
	2005	31	41
4th graders less than proficient in math	2001	33	43
	2007	21	24
4th graders less than proficient in reading	2001	36	46
	2007	19	20
Students not graduating from high school	2001	17	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	7	11
	2006	12	10
Children in foster care (Rate/1000)	2001	6	13
	2006	6	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	15	14

*Refer to page 225 for details.



HEALTH INDICATORS

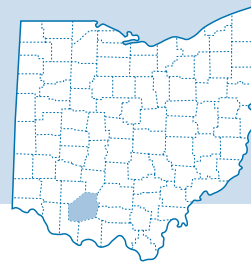
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 14.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 17.1	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 39.5	
	Asthma ER Visits (%): 19.9	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 65.7	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17.1	
	% Uninsured for Dental Care: 22.3	
	% Who Could Not Receive Needed Dental Care: 2.5	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 256	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 4	
	Rate/1000: 15.6	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	1	2.8
	Rate (per 1000 live births + late fetal deaths)	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	2.8
	Rate (per 1000 live births)	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	2.8
	Rate (per 1000 live births)	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	0	0
	Rate (per 1000 live births)	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	2	36.1
	Rate (per 100,000 children ages 1-14)	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Highland



County Seat: Hillsboro
 County Type: Appalachian
 Total Population: 42,553
 Child Population: 10,860

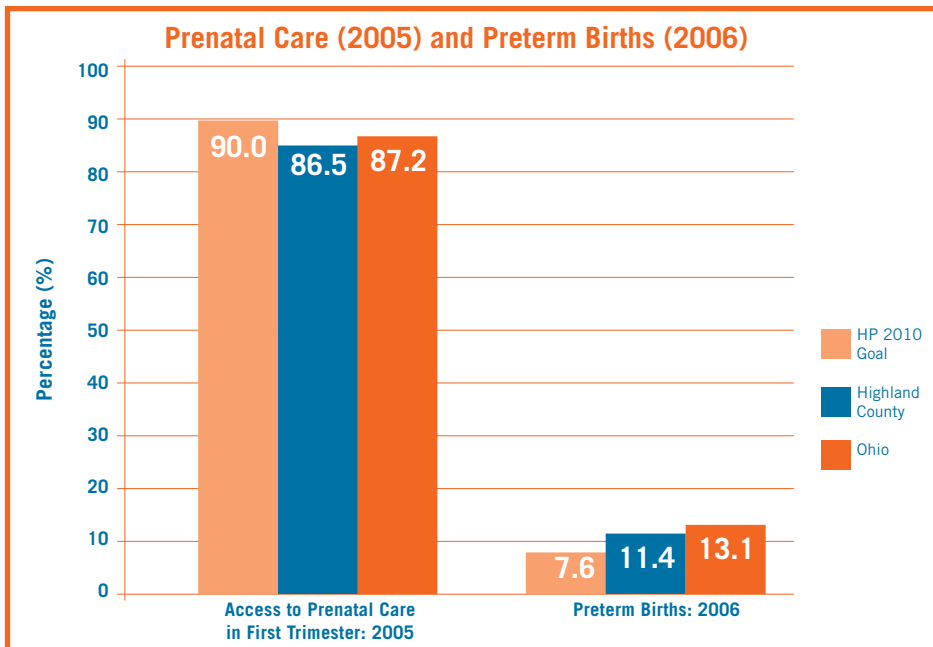


PERCENT CHANGE OVER TIME



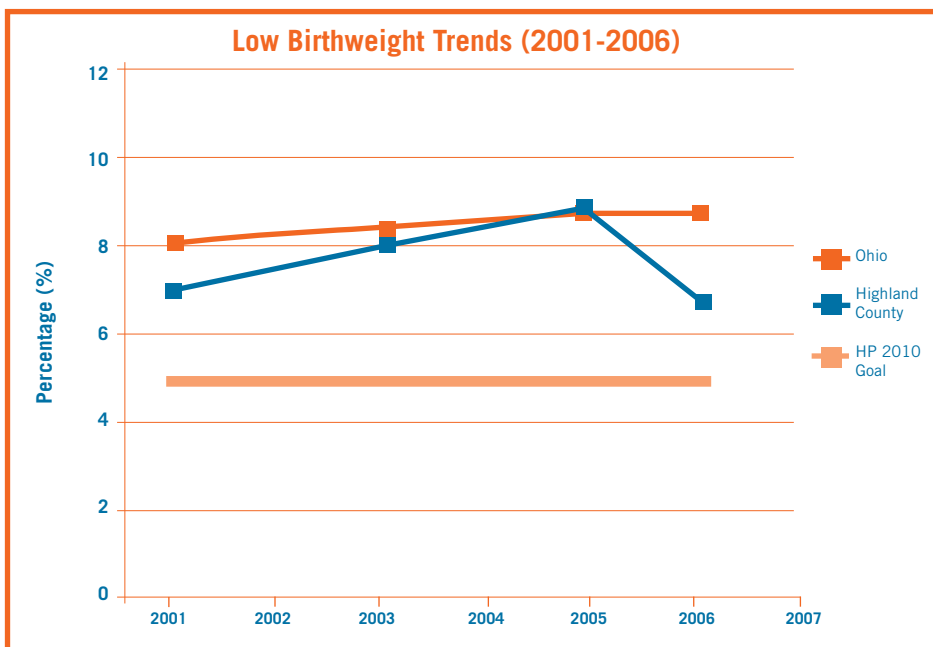
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	17	15
	2005*	18	19
Children receiving free/reduced price lunch	2001	18	22
	2007	29	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	10	12
	2006*	19	20
Children in child care assistance programs (Rate/1000)	2001	33	47
	2006	27	49
Births to adolescents (Rate/1000)	2001	20	22
	2006	23	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	28	27
	2005	53	41
4th graders less than proficient in math	2001	38	43
	2007	24	24
4th graders less than proficient in reading	2001	46	46
	2007	22	20
Students not graduating from high school	2001	14	19
	2006*	11	14
Children abused or neglected (Rate/1000)	2001	21	11
	2006	18	10
Children in foster care (Rate/1000)	2001	8	13
	2006	10	11
Adolescents adjudicated for felonies (Rate/1000)	2001	15	15
	2006	17	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 32.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	14.3
	Asthma Episode (%)	31.5
	Asthma ER Visits (%)	11.6
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	67.2
	% Never Visited a Dentist	10.8
	% Uninsured for Dental Care	25
% Who Could Not Receive Needed Dental Care	3.7	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	612
	Total EBLs	3
	Rate/1000	4.9
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	4	6.7	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	8	13.5	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	6.8	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	6.8	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
2	24	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Hocking



County Seat: Logan
 County Type: Appalachian
 Total Population: 28,708
 Child Population: 6,800

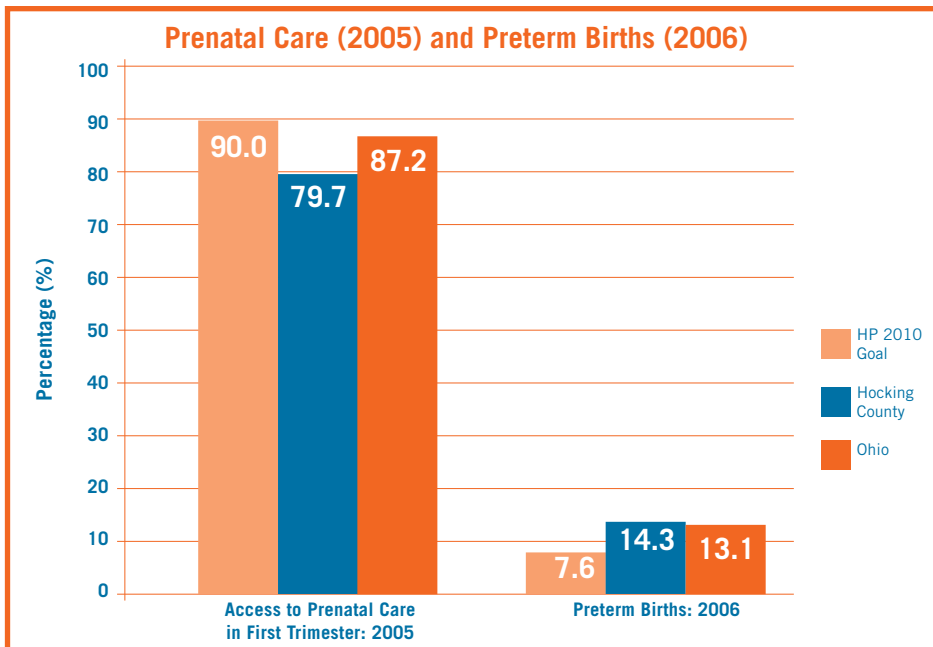


PERCENT CHANGE OVER TIME



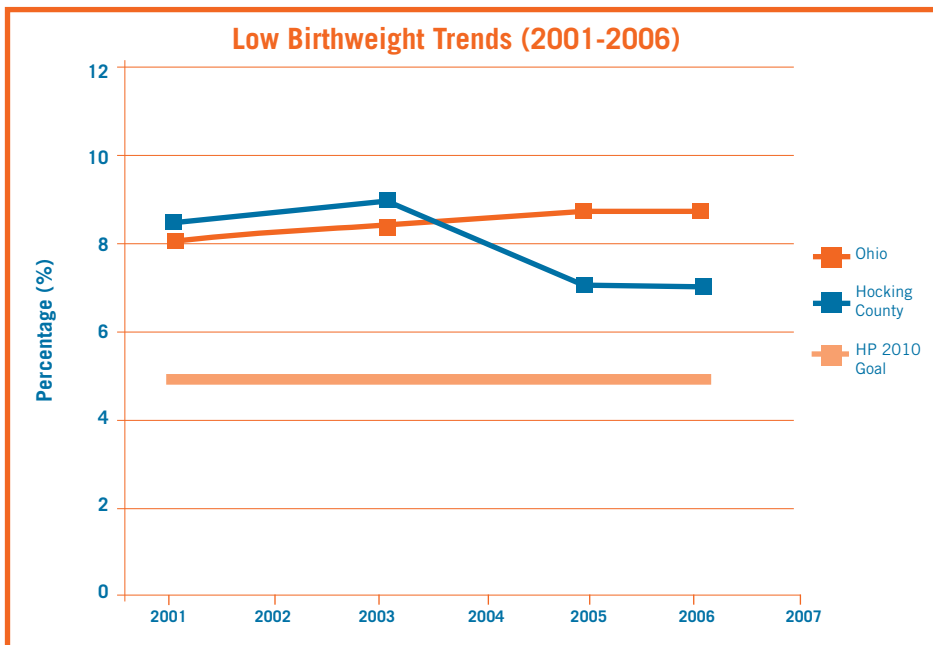
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	18	15
	2005*	23	19
Children receiving free/reduced price lunch	2001	24	22
	2007	37	27
Unemployment rate	2001	6	4
	2007	6	6
Children receiving food stamps	2001	13	12
	2006*	24	20
Children in child care assistance programs (Rate/1000)	2001	31	47
	2006	33	49
Births to adolescents (Rate/1000)	2001	30	22
	2006	29	20
Infants born at low birthweight	2001	9	8
	2006	7	9
Children in public health care programs	2001	36	27
	2005	59	41
4th graders less than proficient in math	2001	46	43
	2007	15	24
4th graders less than proficient in reading	2001	47	46
	2007	13	20
Students not graduating from high school	2001	19	19
	2006*	2	14
Children abused or neglected (Rate/1000)	2001	16	11
	2006	12	10
Children in foster care (Rate/1000)	2001	13	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	20	15
	2006	17	14

*Refer to page 225 for details.



HEALTH INDICATORS

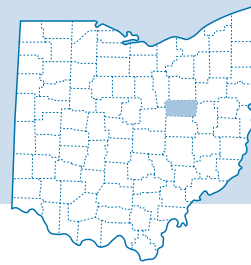
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 15.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	8.3
	Asthma Episode (%)	100
	Asthma ER Visits (%)	59.4
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	21.7
2006	% Who Could Not Receive Needed Dental Care	5.6
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	341
	Total EBLs	1
	Rate/1000	2.9
		Eliminate Elevated Blood Lead Levels in Children



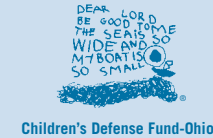
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	2	5.7
	Rate (per 1000 live births + late fetal deaths)	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	5.8
	Rate (per 1000 live births)	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	2.9
	Rate (per 1000 live births)	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	2.9
	Rate (per 1000 live births)	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	1	19.2
	Rate (per 100,000 children ages 1-14)	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Holmes



County Seat: Millersburg
 County Type: Appalachian
 Total Population: 41,408
 Child Population: 14,054

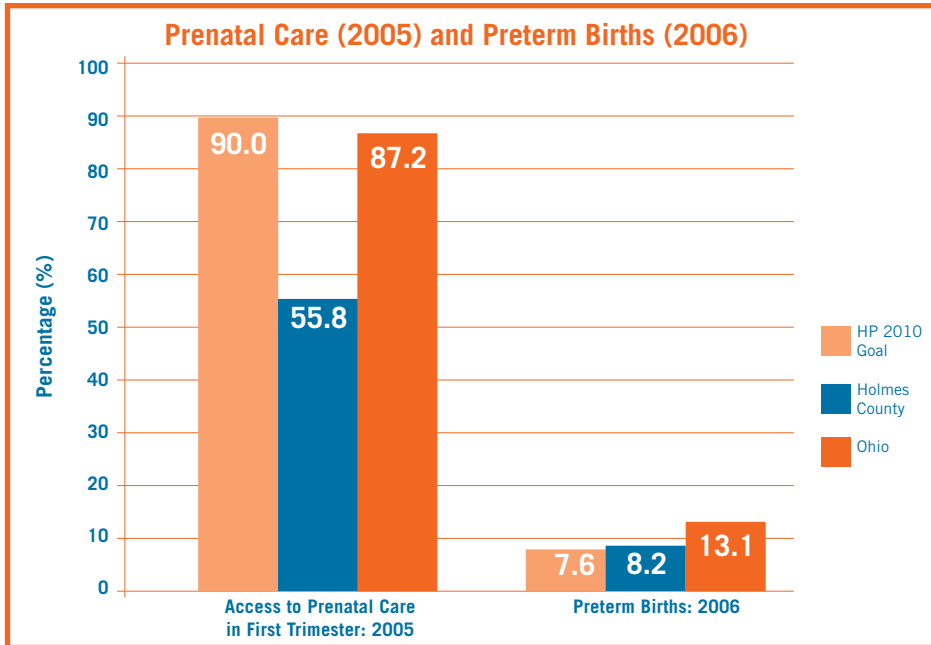


PERCENT CHANGE OVER TIME



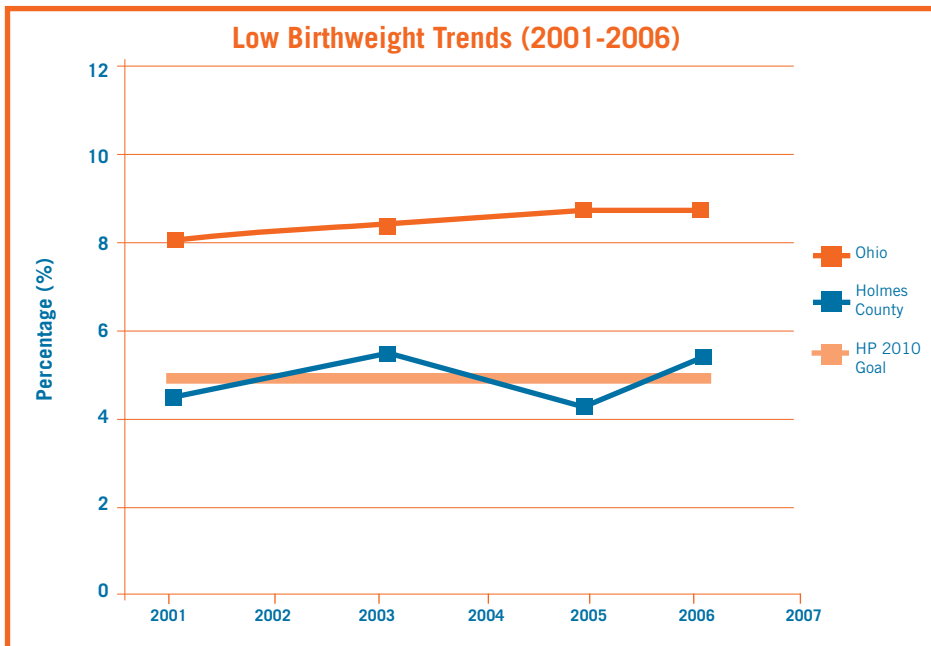
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	21	15
	2005*	17	19
Children receiving free/reduced price lunch	2001	22	22
	2007	28	27
Unemployment rate	2001	3	4
	2007	4	6
Children receiving food stamps	2001	3	12
	2006*	4	20
Children in child care assistance programs (Rate/1000)	2001	7	47
	2006	14	49
Births to adolescents (Rate/1000)	2001	3	22
	2006	2	20
Infants born at low birthweight	2001	5	8
	2006	6	9
Children in public health care programs	2001	9	27
	2005	16	41
4th graders less than proficient in math	2001	32	43
	2007	16	24
4th graders less than proficient in reading	2001	42	46
	2007	12	20
Students not graduating from high school	2001	8	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	1	11
	2006	6	10
Children in foster care (Rate/1000)	2001	1	13
	2006	2	11
Adolescents adjudicated for felonies (Rate/1000)	2001	5	15
	2006	3	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 15.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 8.8	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 52.9	
	Asthma ER Visits (%): 24.9	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 57.7	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 24.9	
	% Uninsured for Dental Care: 43.6	
	% Who Could Not Receive Needed Dental Care: 7.1	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 225	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 1	
	Rate/1000: 4.4	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	2	2.7	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	6.8	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	2.7	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	4.1	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
4	36.5	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Huron



County Seat: Norwalk
 County Type: Rural Non-Appalachian
 Total Population: 59,865
 Child Population: 15,957



Children's Defense Fund-Ohio

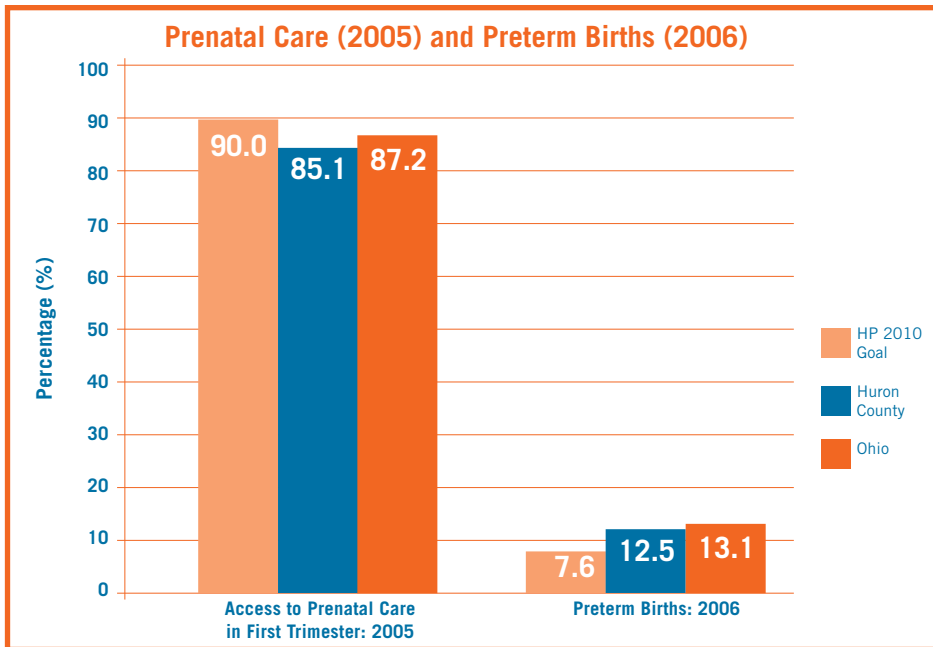


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	13	15
	2005*	16	19
Children receiving free/reduced price lunch	2001	18	22
	2007	25	27
Unemployment rate	2001	6	4
	2007	8	6
Children receiving food stamps	2001	7	12
	2006*	14	20
Children in child care assistance programs (Rate/1000)	2001	51	47
	2006	39	49
Births to adolescents (Rate/1000)	2001	25	22
	2006	18	20
Infants born at low birthweight	2001	7	8
	2006	9	9
Children in public health care programs	2001	24	27
	2005	41	41
4th graders less than proficient in math	2001	38	43
	2007	15	24
4th graders less than proficient in reading	2001	43	46
	2007	12	20
Students not graduating from high school	2001	12	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	7	11
	2006	8	10
Children in foster care (Rate/1000)	2001	7	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	7	15
	2006	9	14

*Refer to page 225 for details.

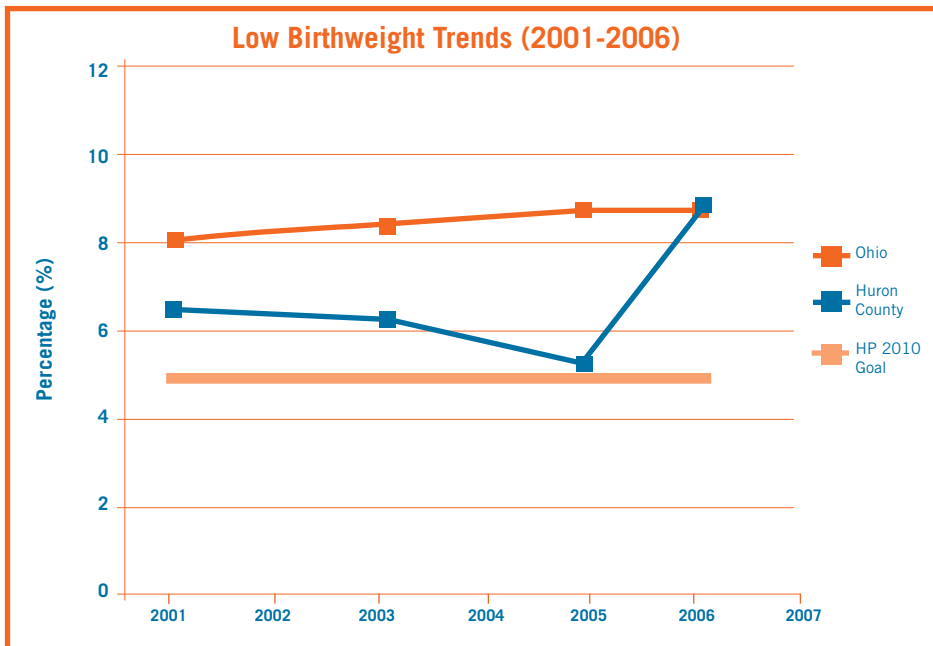


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 23	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	19.8
	Asthma Episode (%)	51.2
	Asthma ER Visits (%)	37.3
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	67.4
	% Never Visited a Dentist	12.7
	% Uninsured for Dental Care	23
	% Who Could Not Receive Needed Dental Care	4.1
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	909
	Total EBLs	4
	Rate/1000	4.4

HP2010 Goals:

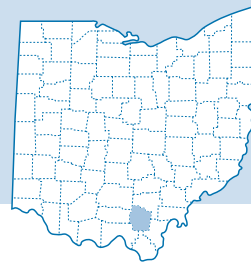
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	3	3.6
		4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	5	5.9
	4.5	
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	3.6
	2.9	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	2.4
	1.2	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	0	0
		<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

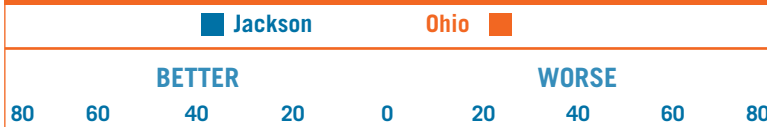
Jackson



County Seat: Jackson
 County Type: Appalachian
 Total Population: 33,230
 Child Population: 8,059

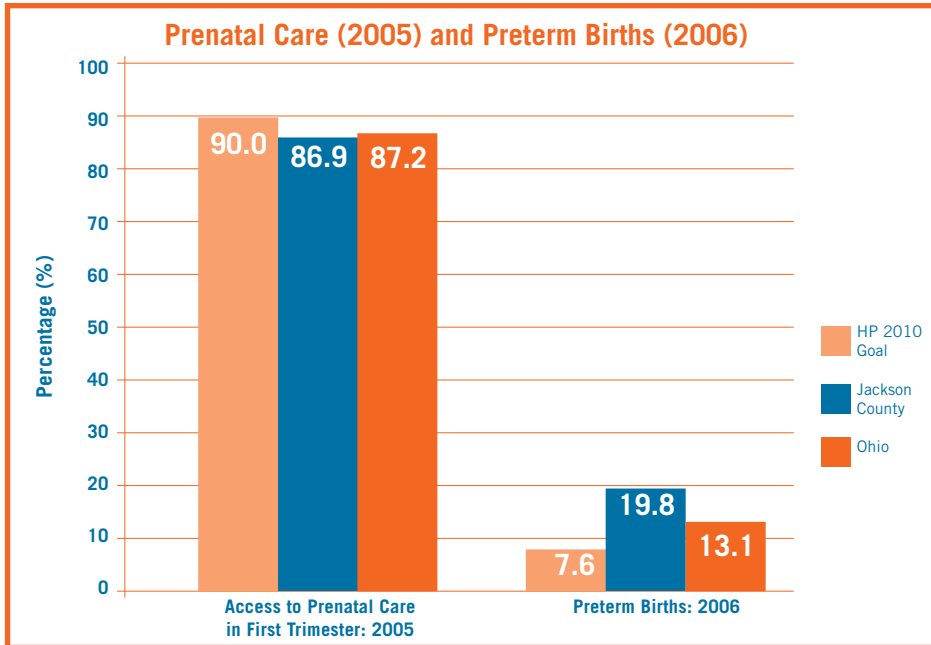


PERCENT CHANGE OVER TIME



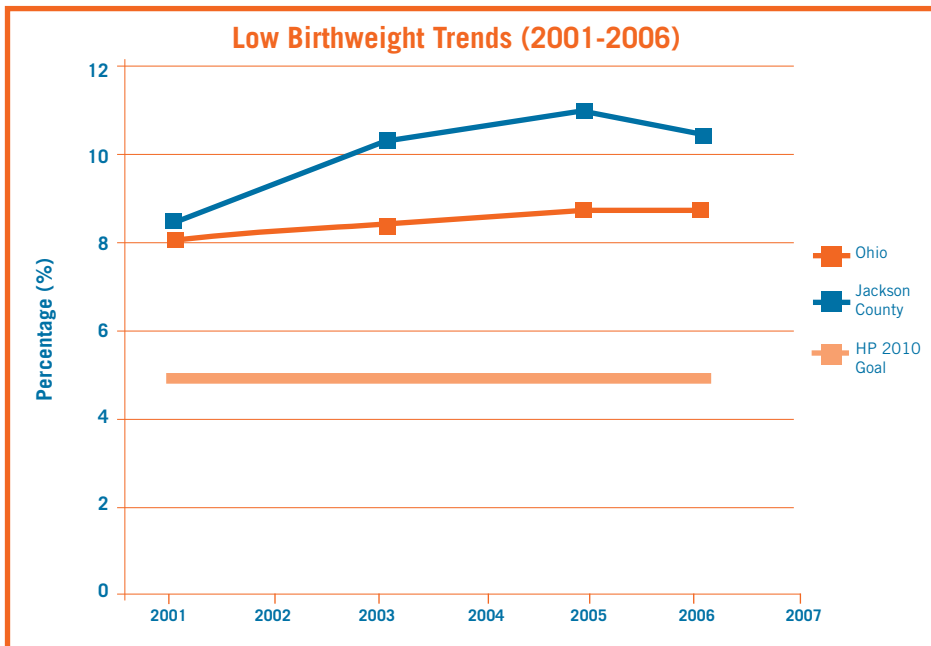
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	21	15
	2005*	24	19
Children receiving free/reduced price lunch	2001	30	22
	2007	38	27
Unemployment rate	2001	7	4
	2007	8	6
Children receiving food stamps	2001	18	12
	2006*	30	20
Children in child care assistance programs (Rate/1000)	2001	34	47
	2006	35	49
Births to adolescents (Rate/1000)	2001	27	22
	2006	22	20
Infants born at low birthweight	2001	9	8
	2006	10	9
Children in public health care programs	2001	41	27
	2005	64	41
4th graders less than proficient in math	2001	55	43
	2007	28	24
4th graders less than proficient in reading	2001	55	46
	2007	19	20
Students not graduating from high school	2001	15	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	14	11
	2006	11	10
Children in foster care (Rate/1000)	2001	6	13
	2006	6	11
Adolescents adjudicated for felonies (Rate/1000)	2001	5	15
	2006	5	14

*Refer to page 225 for details.



HEALTH INDICATORS

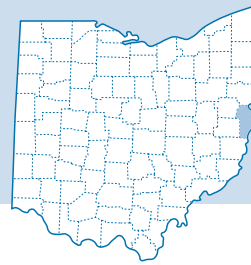
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 29.9	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 20.4	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 77.6	
	Asthma ER Visits (%): 36.8	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 65	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 15.7	
	% Uninsured for Dental Care: 21.9	
	% Who Could Not Receive Needed Dental Care: 7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 417	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 4	
	Rate/1000: 9.6	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	1	2	4.5
	Infant Mortality		HP2010 Goal
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	2	4.5
	Neonatal Mortality		HP2010 Goal
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	2	2.9
	Post-neonatal Mortality		HP2010 Goal
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	1.2
	Child Death (1-14 yrs)		HP2010 Goal
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
2	33.2	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

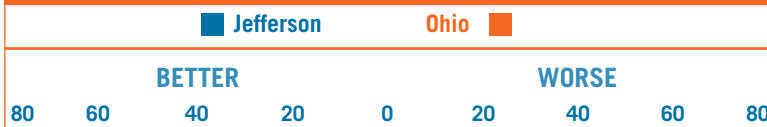
Jefferson



County Seat: Steubenville
 County Type: Appalachian
 Total Population: 69,409
 Child Population: 14,124

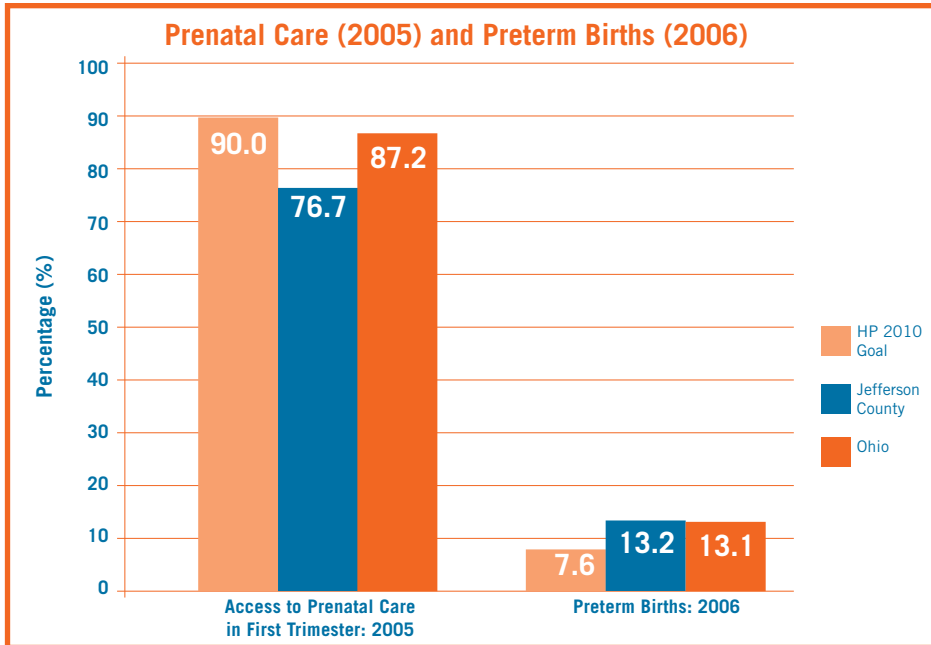


PERCENT CHANGE OVER TIME



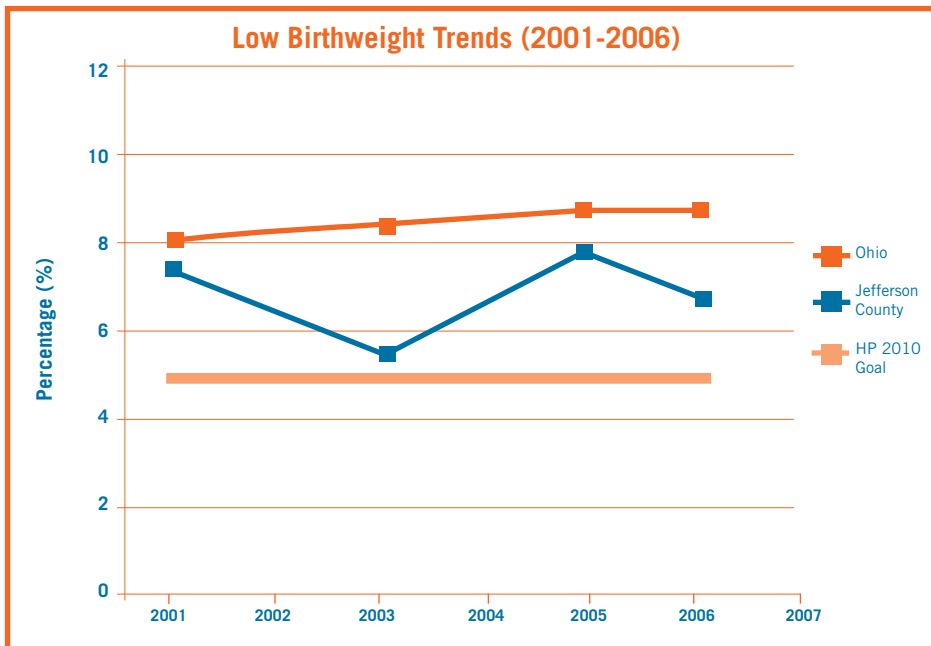
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	20	15
	2006*	28	19
Children receiving free/reduced price lunch	2001	29	22
	2007	37	27
Unemployment rate	2001	6	4
	2007	7	6
Children receiving food stamps	2001	21	12
	2006*	29	20
Children in child care assistance programs (Rate/1000)	2001	47	47
	2006	41	49
Births to adolescents (Rate/1000)	2001	17	22
	2006	19	20
Infants born at low birthweight	2001	8	8
	2006	7	9
Children in public health care programs	2001	40	27
	2005	54	41
4th graders less than proficient in math	2001	37	43
	2007	23	24
4th graders less than proficient in reading	2001	40	46
	2007	17	20
Students not graduating from high school	2001	12	19
	2006*	9	14
Children abused or neglected (Rate/1000)	2001	11	11
	2006	6	10
Children in foster care (Rate/1000)	2001	13	13
	2006	12	11
Adolescents adjudicated for felonies (Rate/1000)	2001	21	15
	2006	17	14

*Refer to page 225 for details.



HEALTH INDICATORS

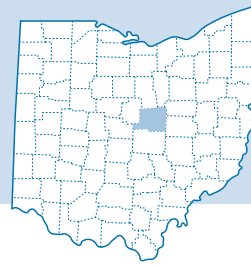
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 25.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	15.9
	Asthma Episode (%)	43.6
	Asthma ER Visits (%)	35.7
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	72.7
	% Never Visited a Dentist	14
	% Uninsured for Dental Care	24.5
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	4.1
	Total Children Screened (0-72 months)	476
	Total EBLs Rate/1000	15
		31.5
		Eliminate Elevated Blood Lead Levels in Children



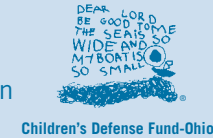
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	5	6.8	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	6.8	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	4.1	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	2.7	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
7	65	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Knox



County Seat: Mount Vernon
 County Type: Rural Non-Appalachian
 Total Population: 58,457
 Child Population: 13,355

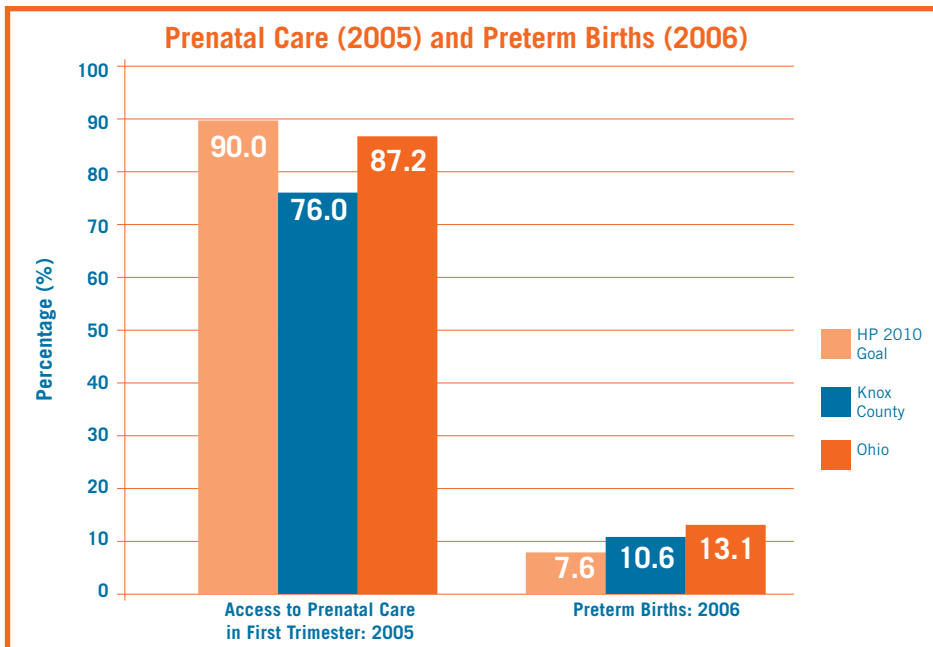


PERCENT CHANGE OVER TIME



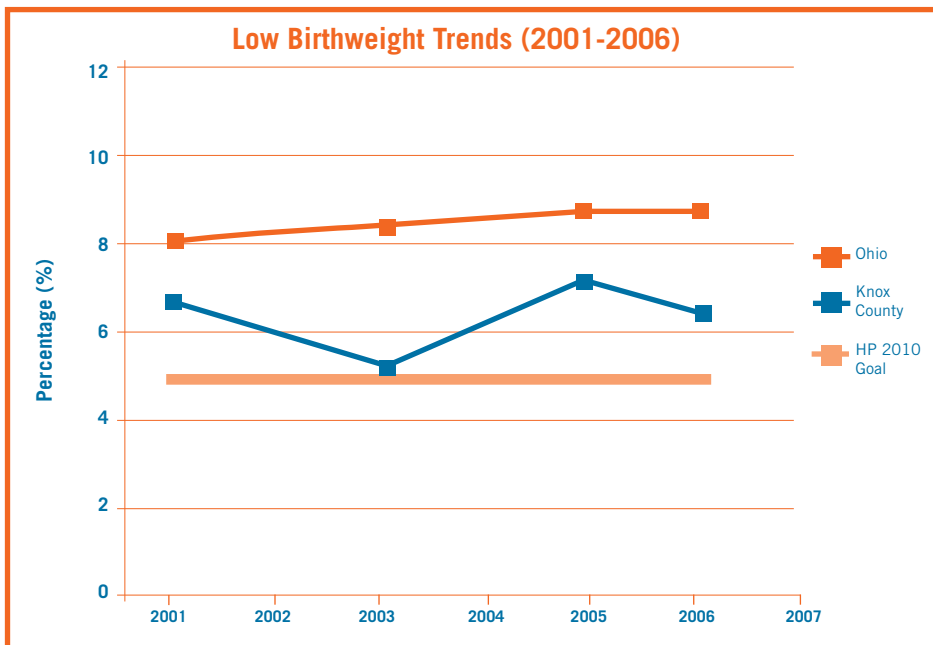
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2005*	17	19
Children receiving free/reduced price lunch	2001	16	22
	2007	22	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	8	12
	2006*	16	20
Children in child care assistance programs (Rate/1000)	2001	39	47
	2006	36	49
Births to adolescents (Rate/1000)	2001	16	22
	2006	17	20
Infants born at low birthweight	2001	7	8
	2006	6	9
Children in public health care programs	2001	24	27
	2005	40	41
4th graders less than proficient in math	2001	47	43
	2007	21	24
4th graders less than proficient in reading	2001	43	46
	2007	13	20
Students not graduating from high school	2001	9	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	9	11
	2006	11	10
Children in foster care (Rate/1000)	2001	4	13
	2006	2	11
Adolescents adjudicated for felonies (Rate/1000)	2001	3	15
	2006	16	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 20	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	9.7
	Asthma Episode (%)	11.1
	Asthma ER Visits (%)	19.5
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.9
	% Never Visited a Dentist	12.3
	% Uninsured for Dental Care	22.5
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	7
	Total Children Screened (0-72 months)	521
	Total EBLs Rate/1000	1
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	3	3.9
		4.5
2005	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	3	3.9
2005	Neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	2	2.6
2005	Post-neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	1	1.3
2005	Child Death (1-14 yrs)	HP2010 Goal
	#	Rate (per 100,000 children ages 1-14)
	1	9.8
		Rate (per 100,000 children ages 1-14) <ul style="list-style-type: none"> • 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)

Lake



County Seat: Painesville
 County Type: Suburban
 Total Population: 232,563
 Child Population: 52,333

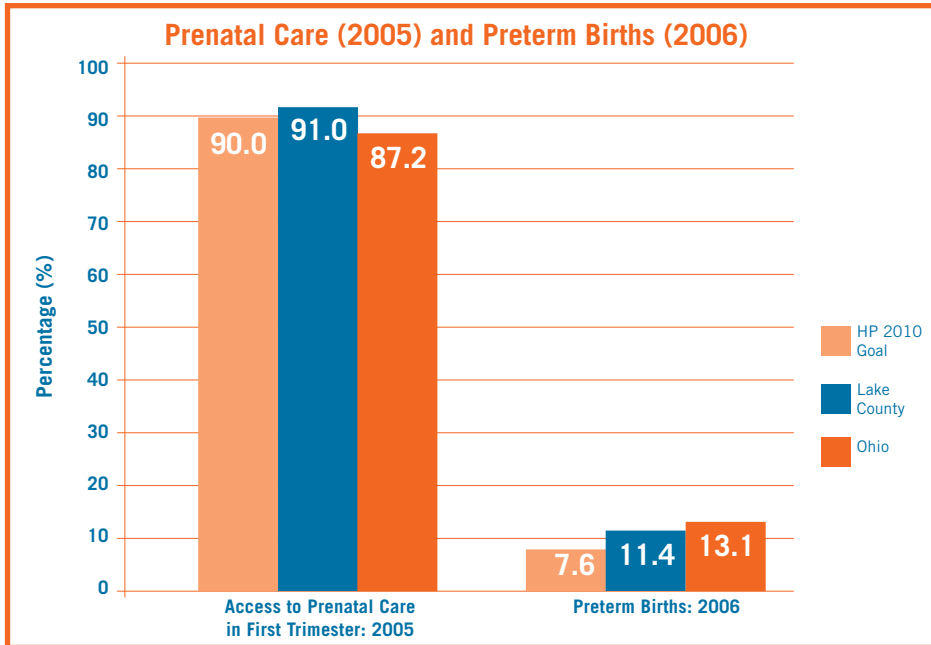


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	9	15
	2006*	10	19
Children receiving free/reduced price lunch	2001	13	22
	2007	19	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	5	12
	2006*	10	20
Children in child care assistance programs (Rate/1000)	2001	24	47
	2006	31	49
Births to adolescents (Rate/1000)	2001	10	22
	2006	10	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	13	27
	2005	24	41
4th graders less than proficient in math	2001	28	43
	2007	15	24
4th graders less than proficient in reading	2001	35	46
	2007	12	20
Students not graduating from high school	2001	11	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	3	11
	2006	6	10
Children in foster care (Rate/1000)	2001	3	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	11	15
	2006	8	14

*Refer to page 225 for details.

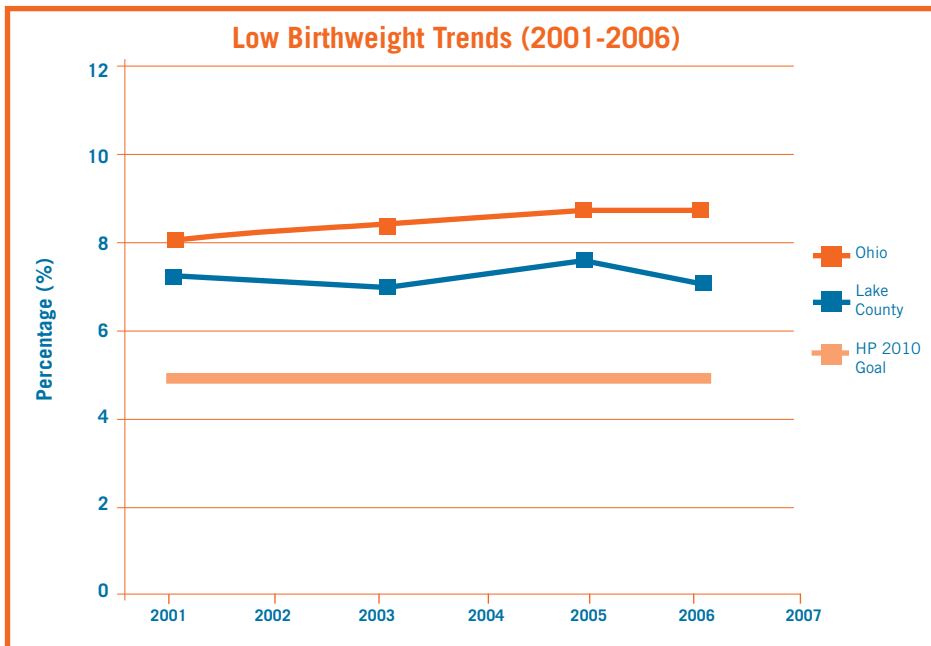


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 10.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	12.1
	Asthma Episode (%)	56.6
	Asthma ER Visits (%)	26.4
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	75.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	22.2
	% Who Could Not Receive Needed Dental Care	6.1
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	1,361
	Total EBLs	12
	Rate/1000	8.8

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	9	3.5
2005	#	Rate (per 1000 live births + late fetal deaths)
	15	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	8	3.2
2005	#	Rate (per 1000 live births)
	15	5.9
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	8	3.2
2005	#	Rate (per 1000 live births)
	7	2.8
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	7	2.8
2005	#	Rate (per 1000 live births)
	6	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	6	15

HP2010 Goals for Child Death (1-14 yrs):

- 20.0 (1-4 yrs)
- 13.0 (5-9 yrs)
- 16.5 (10-14 yrs)

Lawrence



County Seat: Ironton
 County Type: Appalachian
 Total Population: 62,666
 Child Population: 14,457

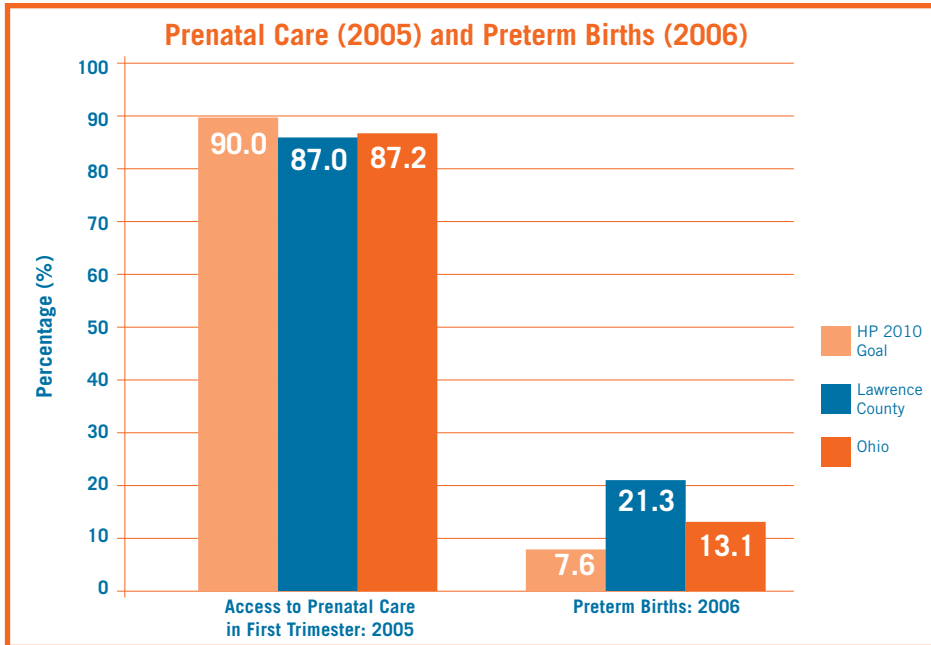


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	26	15
	2005*	30	19
Children receiving free/reduced price lunch	2001	29	22
	2007	39	27
Unemployment rate	2001	6	4
	2007	5	6
Children receiving food stamps	2001	27	12
	2006*	33	20
Children in child care assistance programs (Rate/1000)	2001	44	47
	2006	57	49
Births to adolescents (Rate/1000)	2001	22	22
	2006	20	20
Infants born at low birthweight	2001	9	8
	2006	13	9
Children in public health care programs	2001	55	27
	2005	66	41
4th graders less than proficient in math	2001	39	43
	2007	15	24
4th graders less than proficient in reading	2001	42	46
	2007	14	20
Students not graduating from high school	2001	17	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	11	11
	2006	11	10
Children in foster care (Rate/1000)	2001	10	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	9	15
	2006	10	14

*Refer to page 225 for details.

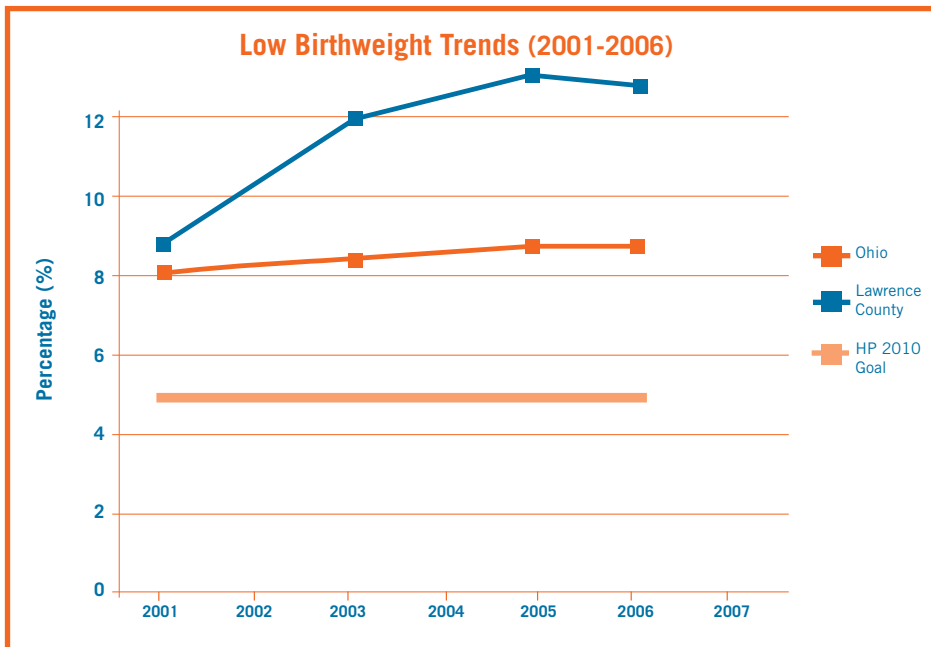


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 27.2	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	28.3
	Asthma Episode (%)	32.3
	Asthma ER Visits (%)	18.5
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	65
	% Never Visited a Dentist	15.7
	% Uninsured for Dental Care	21.9
	% Who Could Not Receive Needed Dental Care	7
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	763
	Total EBLs	3
	Rate/1000	3.9

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	6	7.9
		4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	9	11.9
		4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	6	7.9
		2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	4
		1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	0	0
		<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Licking



County Seat: Newark
 County Type: Suburban
 Total Population: 155,422
 Child Population: 37,953

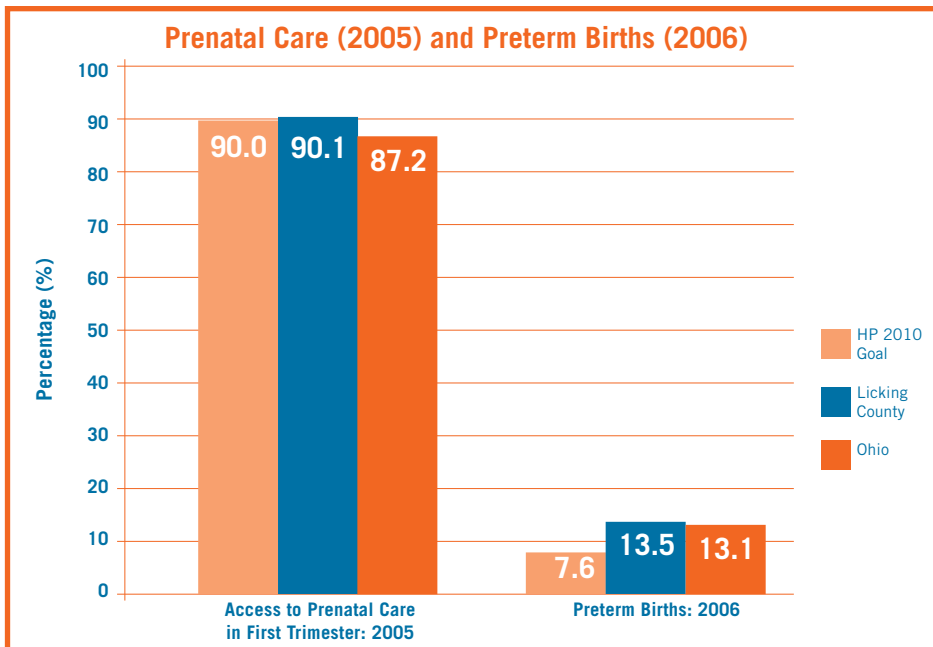


PERCENT CHANGE OVER TIME



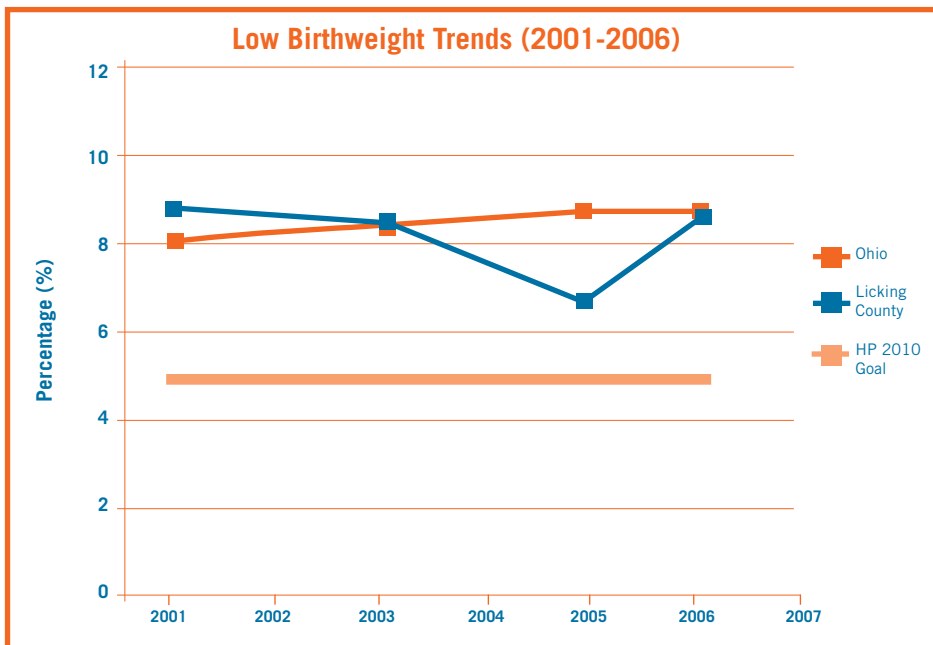
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	11	15
	2006*	18	19
Children receiving free/reduced price lunch	2001	15	22
	2007	21	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	8	12
	2006*	16	20
Children in child care assistance programs (Rate/1000)	2001	37	47
	2006	44	49
Births to adolescents (Rate/1000)	2001	21	22
	2006	15	20
Infants born at low birthweight	2001	9	8
	2006	9	9
Children in public health care programs	2001	22	27
	2005	37	41
4th graders less than proficient in math	2001	38	43
	2007	15	24
4th graders less than proficient in reading	2001	43	46
	2007	13	20
Students not graduating from high school	2001	14	19
	2006*	10	14
Children abused or neglected (Rate/1000)	2001	8	11
	2006	9	10
Children in foster care (Rate/1000)	2001	10	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	10	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 16.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 23.7	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 55	
	Asthma ER Visits (%): 10.9	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 67.4	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 12.8	
	% Uninsured for Dental Care: 27.3	
	% Who Could Not Receive Needed Dental Care: 5	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 1,879	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 14	
	Rate/1000: 7.5	



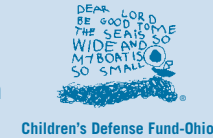
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	12	6	4.5
	Infant Mortality		HP2010 Goal
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	12	6	4.5
	Neonatal Mortality		HP2010 Goal
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	8	4	2.9
	Post-neonatal Mortality		HP2010 Goal
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	2	1.2
	Child Death (1-14 yrs)		HP2010 Goal
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
2	6.9	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Logan



County Seat: Bellfontaine
 County Type: Rural Non-Appalachian
 Total Population: 46,104
 Child Population: 11,539

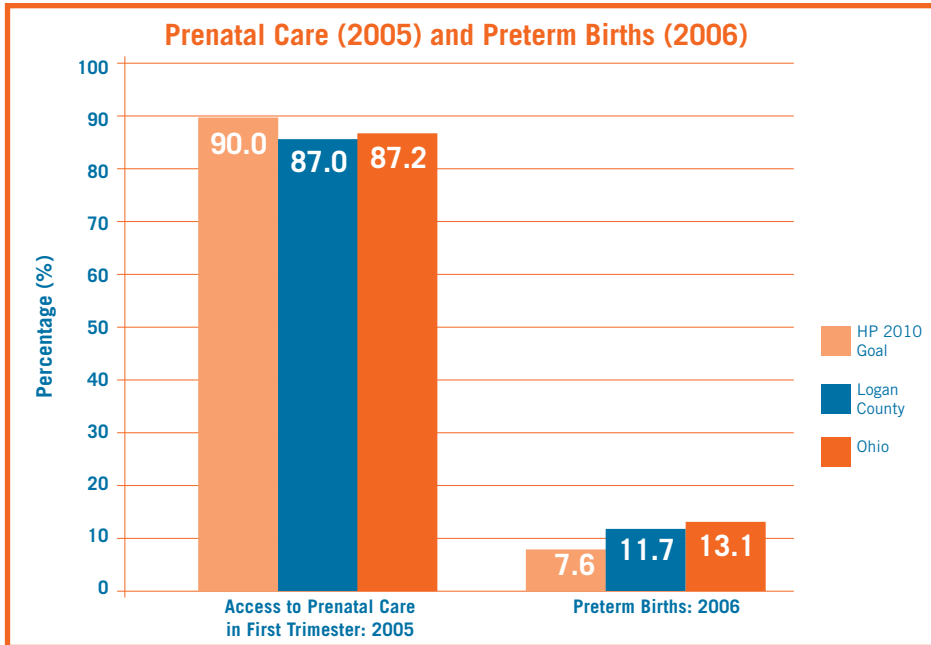


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	13	15
	2005*	18	19
Children receiving free/reduced price lunch	2001	13	22
	2007	27	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	8	12
	2006*	15	20
Children in child care assistance programs (Rate/1000)	2001	11	47
	2006	13	49
Births to adolescents (Rate/1000)	2001	14	22
	2006	12	20
Infants born at low birthweight	2001	7	8
	2006	6	9
Children in public health care programs	2001	21	27
	2005	38	41
4th graders less than proficient in math	2001	42	43
	2007	21	24
4th graders less than proficient in reading	2001	48	46
	2007	20	20
Students not graduating from high school	2001	15	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	11	11
	2006	10	10
Children in foster care (Rate/1000)	2001	4	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	20	15
	2006	7	14

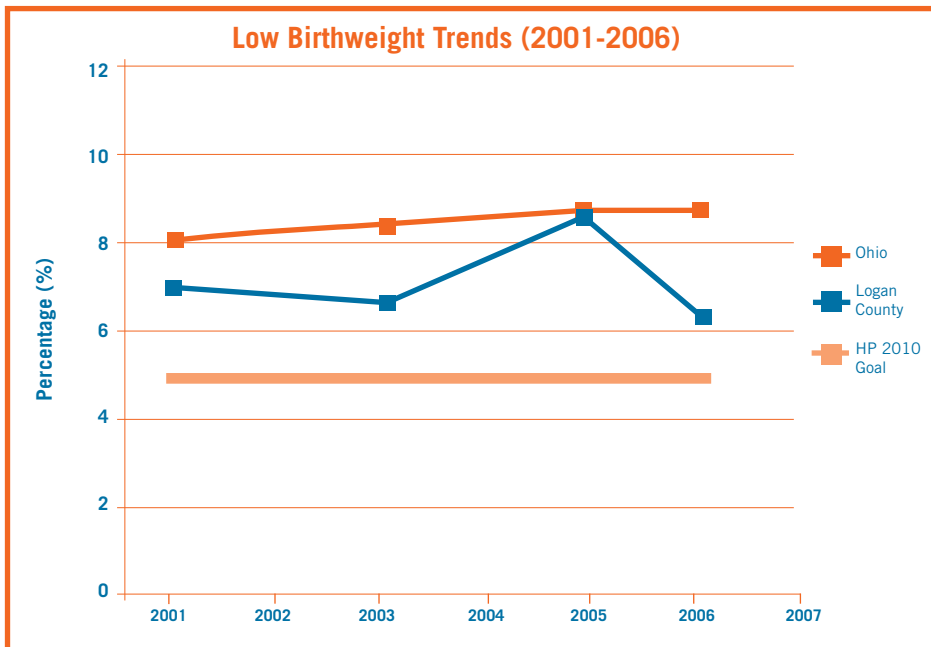
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 31.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	3.3
	Asthma Episode (%)	37.8
	Asthma ER Visits (%)	0
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.9
	% Never Visited a Dentist	12.3
	% Uninsured for Dental Care	22.5
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	7
	Total Children Screened (0-72 months)	406
	Total EBLs Rate/1000	4
		9.9

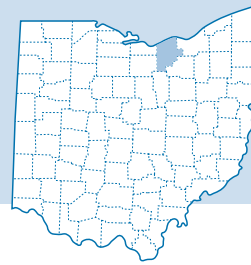
HP2010 Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	4	6.8	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	6.8	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	6.8	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	11.2	• 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)	

Lorain



County Seat: Elyria
 County Type: Metropolitan
 Total Population: 300,727
 Child Population: 73,244

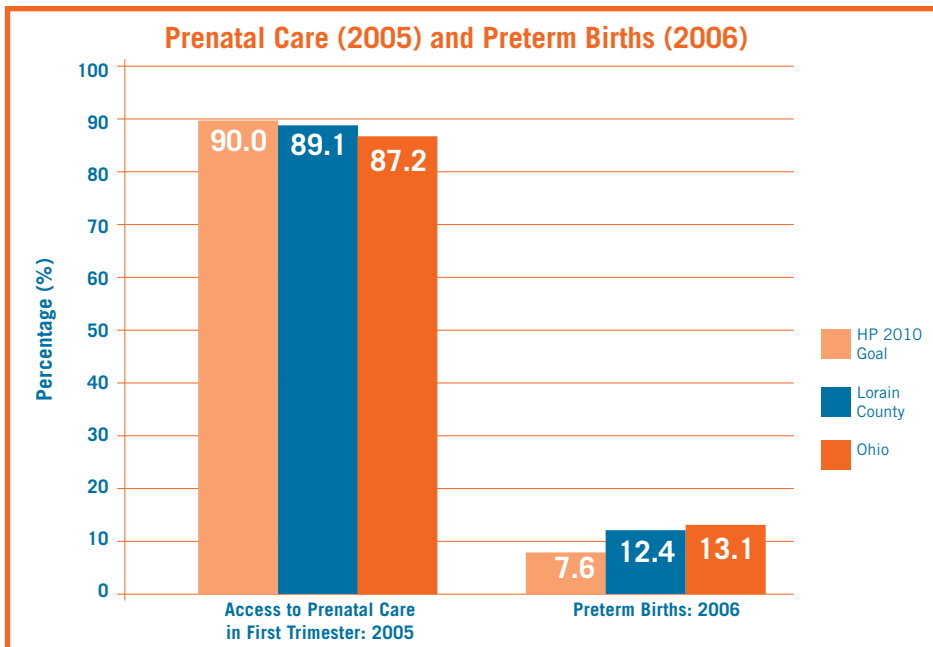


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	13	15
	2006*	21	19
Children receiving free/reduced price lunch	2001	23	22
	2007	29	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	13	12
	2006*	20	20
Children in child care assistance programs (Rate/1000)	2001	40	47
	2006	45	49
Births to adolescents (Rate/1000)	2001	21	22
	2006	19	20
Infants born at low birthweight	2001	8	8
	2006	8	9
Children in public health care programs	2001	25	27
	2005	38	41
4th graders less than proficient in math	2001	46	43
	2007	24	24
4th graders less than proficient in reading	2001	46	46
	2007	20	20
Students not graduating from high school	2001	9	19
	2006*	13	14
Children abused or neglected (Rate/1000)	2001	5	11
	2006	10	10
Children in foster care (Rate/1000)	2001	7	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	24	15
	2006	20	14

*Refer to page 225 for details.

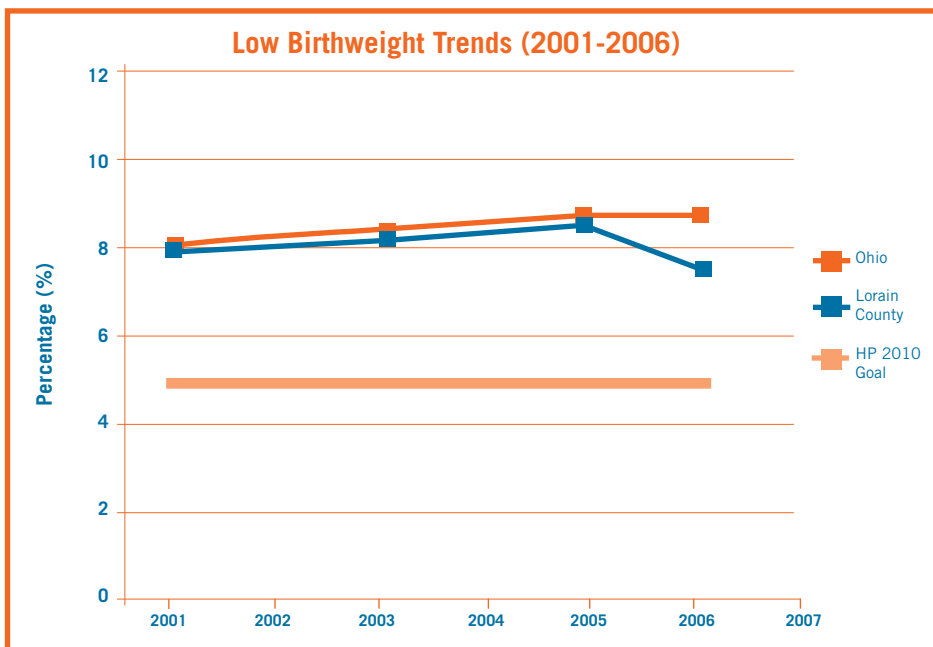


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 21.9	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	14.5
	Asthma Episode (%)	42.1
	Asthma ER Visits (%)	19.6
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	69.5
	% Never Visited a Dentist	12.4
	% Uninsured for Dental Care	25.3
	% Who Could Not Receive Needed Dental Care	4.1
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	3,099
	Total EBLs	36
	Rate/1000	11.6

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	24	6.6
2005	#	Rate (per 1000 live births + late fetal deaths)
	31	8.6
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	24	6.6
2005	#	Rate (per 1000 live births)
	7	1.9
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	6	10.7

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14): 20.0 (1-4 yrs), 13.0 (5-9 yrs), 16.5 (10-14 yrs)

Lucas



County Seat: Toledo
 County Type: Metropolitan
 Total Population: 444,230
 Child Population: 113,325

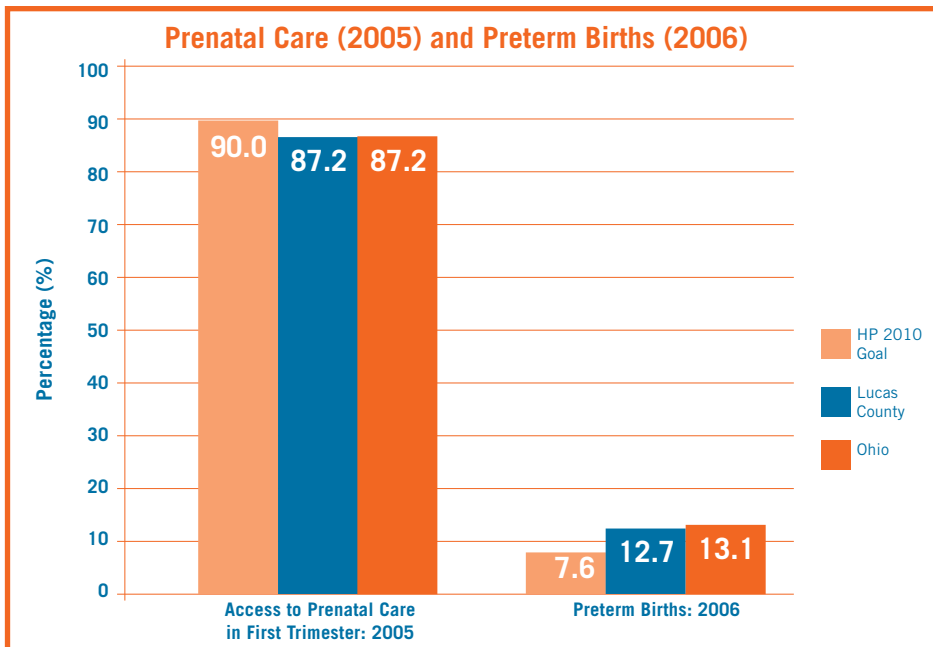


PERCENT CHANGE OVER TIME



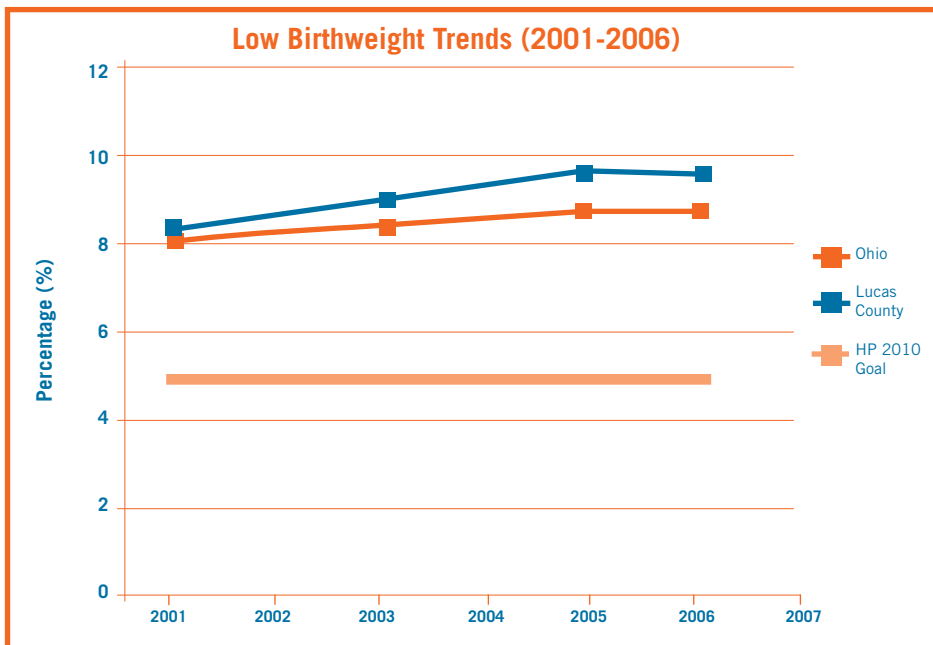
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	19	15
	2006*	21	19
Children receiving free/reduced price lunch	2001	25	22
	2007	30	27
Unemployment rate	2001	5	4
	2007	7	6
Children receiving food stamps	2001	18	12
	2006*	28	20
Children in child care assistance programs (Rate/1000)	2001	37	47
	2006	60	49
Births to adolescents (Rate/1000)	2001	27	22
	2006	27	20
Infants born at low birthweight	2001	8	8
	2006	10	9
Children in public health care programs	2001	35	27
	2005	47	41
4th graders less than proficient in math	2001	54	43
	2007	31	24
4th graders less than proficient in reading	2001	58	46
	2007	25	20
Students not graduating from high school	2001	24	19
	2006*	16	14
Children abused or neglected (Rate/1000)	2001	15	11
	2006	18	10
Children in foster care (Rate/1000)	2001	11	13
	2006	14	11
Adolescents adjudicated for felonies (Rate/1000)	2001	16	15
	2006	19	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 14.9	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 44	
	Asthma ER Visits (%): 18.2	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 71.7	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 14.3	
	% Uninsured for Dental Care: 20	
	% Who Could Not Receive Needed Dental Care: 4.6	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 6,170	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 240	
	Rate/1000: 38.9	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 48	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 7.7	
2005	#: 50	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 8.1	
2005	#: 30	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 4.9	
2005	#: 20	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 3.2	
2005	#: 21	Rate (per 100,000 children ages 1-14): 16.5
	Rate (per 100,000 children ages 1-14): 24.1	

Madison



County Seat: London
 County Type: Suburban
 Total Population: 41,052
 Child Population: 9,422

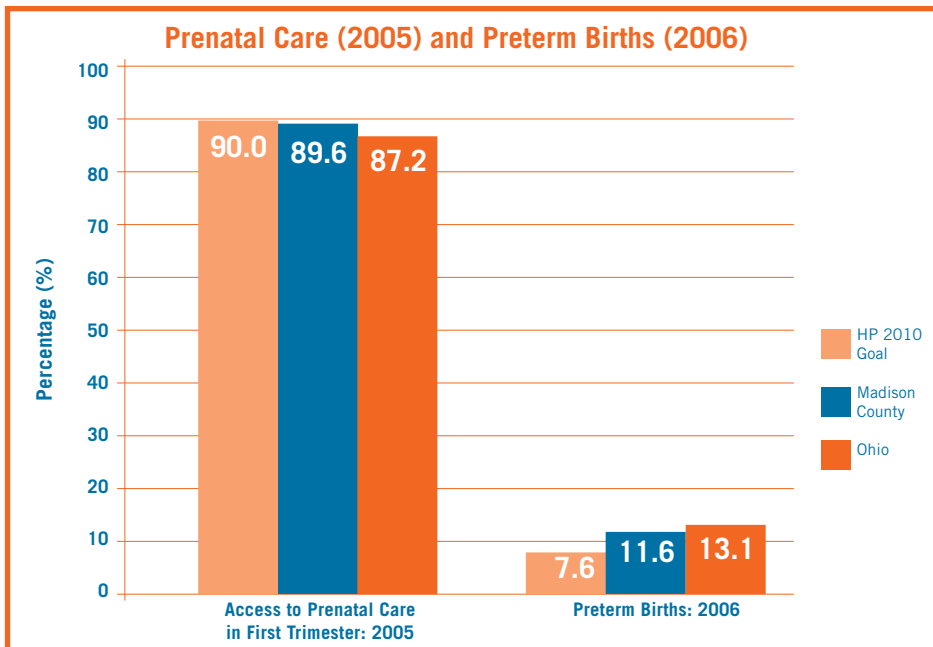


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	12	15
	2005*	13	19
Children receiving free/reduced price lunch	2001	13	22
	2007	18	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	7	12
	2006*	15	20
Children in child care assistance programs (Rate/1000)	2001	16	47
	2006	20	49
Births to adolescents (Rate/1000)	2001	20	22
	2006	10	20
Infants born at low birthweight	2001	5	8
	2006	8	9
Children in public health care programs	2001	19	27
	2005	33	41
4th graders less than proficient in math	2001	46	43
	2007	20	24
4th graders less than proficient in reading	2001	49	46
	2007	19	20
Students not graduating from high school	2001	17	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	13	10
Children in foster care (Rate/1000)	2001	5	13
	2006	5	11
Adolescents adjudicated for felonies (Rate/1000)	2001	7	15
	2006	6	14

*Refer to page 225 for details.

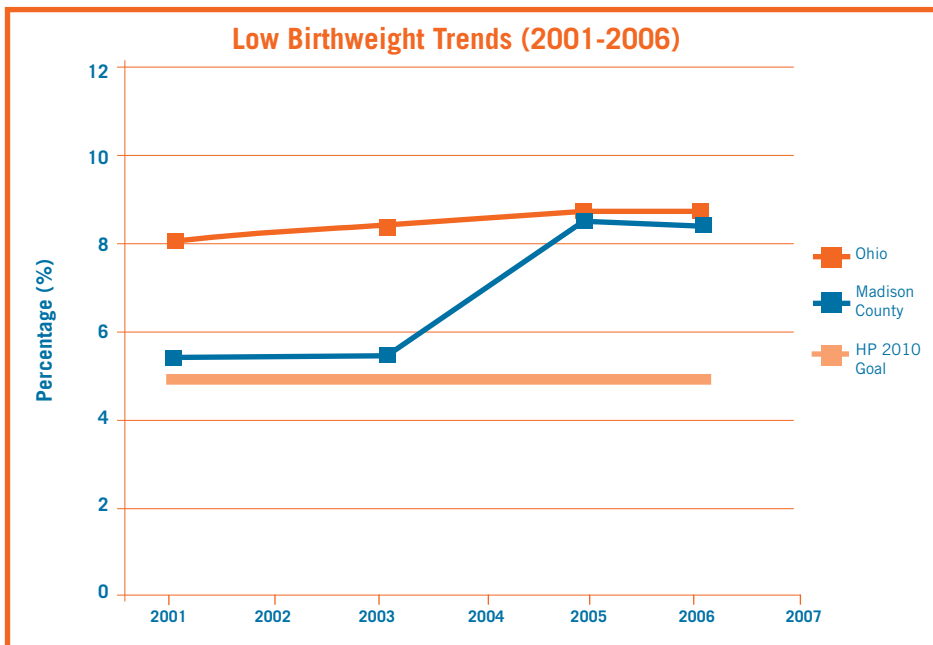


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	2.1
	Asthma Episode (%)	0
	Asthma ER Visits (%)	0
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	69.2
	% Never Visited a Dentist	14.6
	% Uninsured for Dental Care	22
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	2.4
	Total Children Screened (0-72 months)	477
	Total EBLs Rate/1000	4

HP2010 Goals:

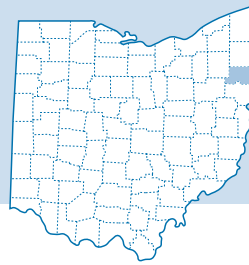
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	2	4.4	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	6.6	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	4.4	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	2.2	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
2	27.6	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Mahoning



County Seat: Youngstown
 County Type: Metropolitan
 Total Population: 243,612
 Child Population: 54,449



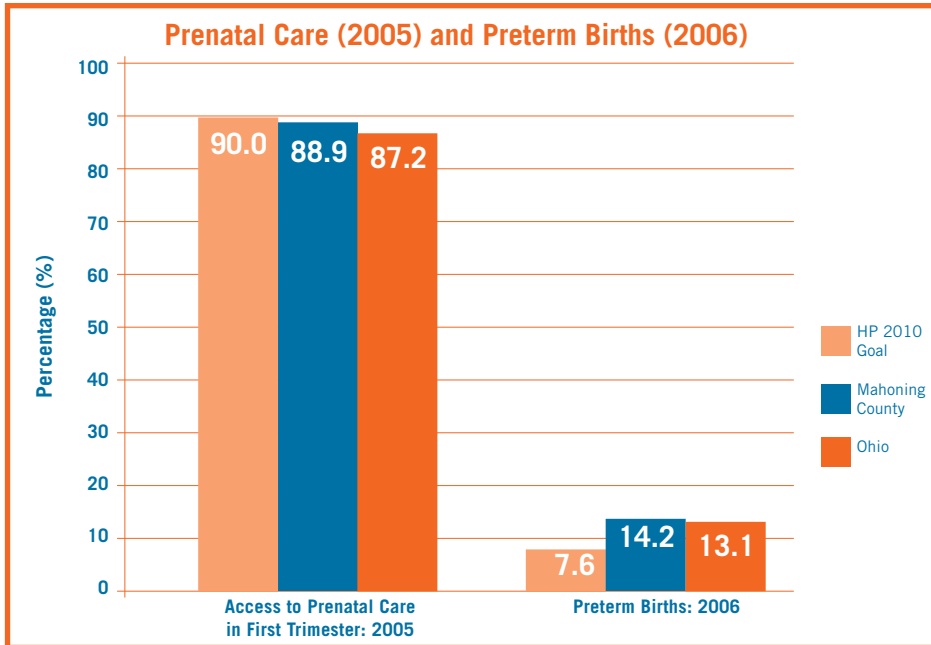
PERCENT CHANGE OVER TIME

■ Mahoning ■ Ohio



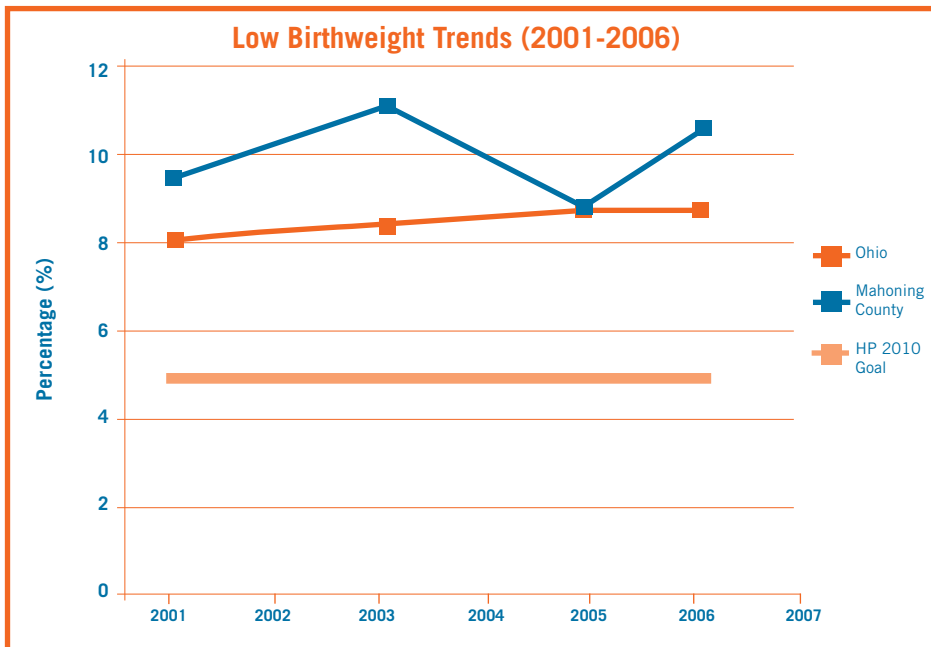
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	19	15
	2006*	26	19
Children receiving free/reduced price lunch	2001	29	22
	2007	33	27
Unemployment rate	2001	6	4
	2007	6	6
Children receiving food stamps	2001	19	12
	2006*	28	20
Children in child care assistance programs (Rate/1000)	2001	52	47
	2006	63	49
Births to adolescents (Rate/1000)	2001	22	22
	2006	27	20
Infants born at low birthweight	2001	10	8
	2006	11	9
Children in public health care programs	2001	37	27
	2005	51	41
4th graders less than proficient in math	2001	45	43
	2007	22	24
4th graders less than proficient in reading	2001	47	46
	2007	19	20
Students not graduating from high school	2001	18	19
	2006*	11	14
Children abused or neglected (Rate/1000)	2001	5	11
	2006	6	10
Children in foster care (Rate/1000)	2001	5	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	14	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 24.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	12.3
	Asthma Episode (%)	45.9
	Asthma ER Visits (%)	20.9
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	73.7
	% Never Visited a Dentist	10.5
	% Uninsured for Dental Care	23.9
2006	% Who Could Not Receive Needed Dental Care	5.3
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	2,470
	Total EBLs	98
	Rate/1000	39.7
		Eliminate Elevated Blood Lead Levels in Children



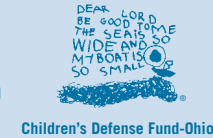
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	23	8.3	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	26	9.5	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	19	6.9	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	7	2.5	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
12	28.5	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Marion



County Seat: Marion
 County Type: Rural Non-Appalachian
 Total Population: 65,486
 Child Population: 14,988

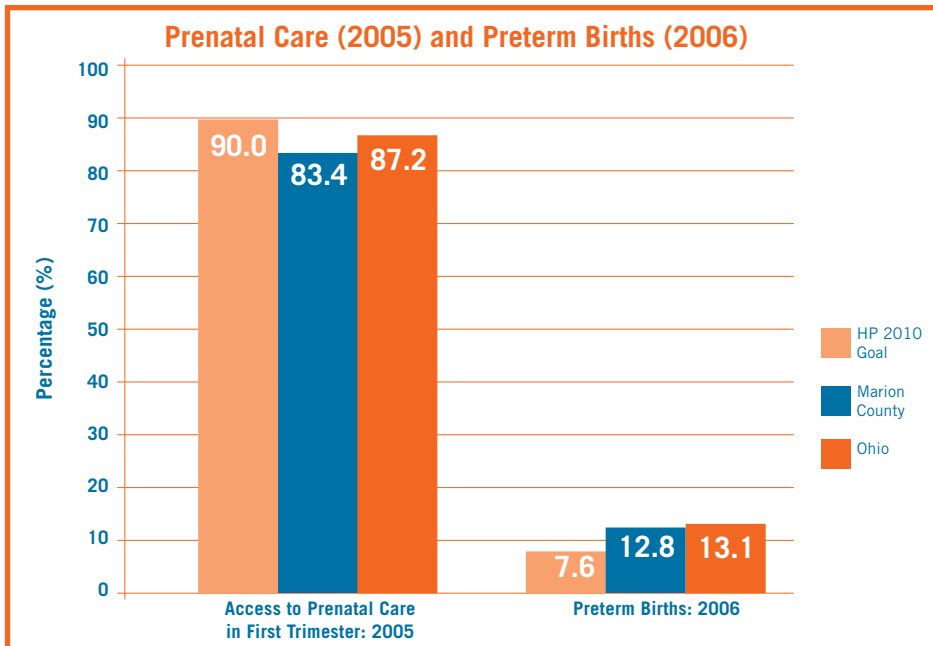


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2006*	15	19
Children receiving free/reduced price lunch	2001	21	22
	2007	30	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	12	12
	2006*	23	20
Children in child care assistance programs (Rate/1000)	2001	35	47
	2006	40	49
Births to adolescents (Rate/1000)	2001	25	22
	2006	28	20
Infants born at low birthweight	2001	9	8
	2006	11	9
Children in public health care programs	2001	29	27
	2005	47	41
4th graders less than proficient in math	2001	51	43
	2007	38	24
4th graders less than proficient in reading	2001	56	46
	2007	31	20
Students not graduating from high school	2001	13	19
	2006*	13	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	12	10
Children in foster care (Rate/1000)	2001	7	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	29	15
	2006	33	14

*Refer to page 225 for details.

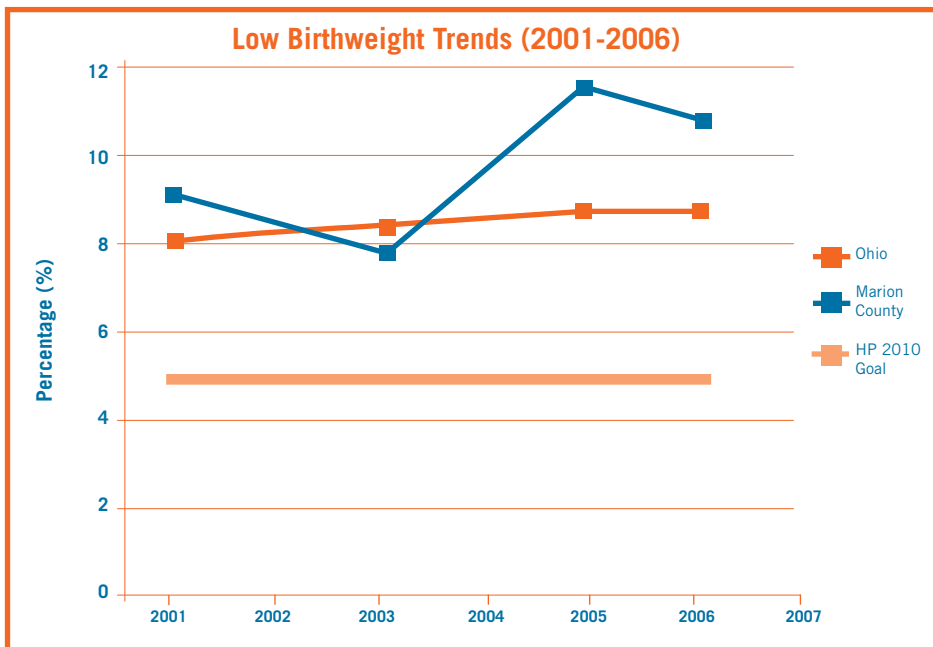


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.1	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	7.6
	Asthma Episode (%)	27.7
	Asthma ER Visits (%)	6
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.6
	% Uninsured for Dental Care	24.6
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	5.1
	Total Children Screened (0-72 months)	767
	Total EBLs	3
	Rate/1000	3.9

HP2010 Goals:

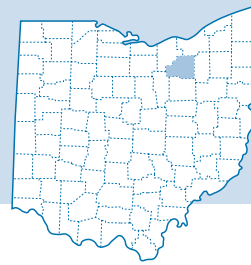
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	5	6.4	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	6.4	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	6.4	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	8.8	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

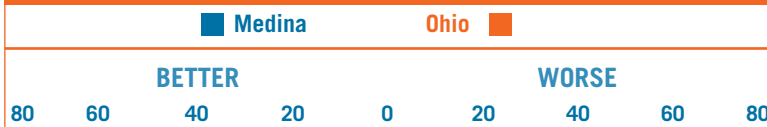
Medina



County Seat: Medina
 County Type: Suburban
 Total Population: 168,034
 Child Population: 41,618

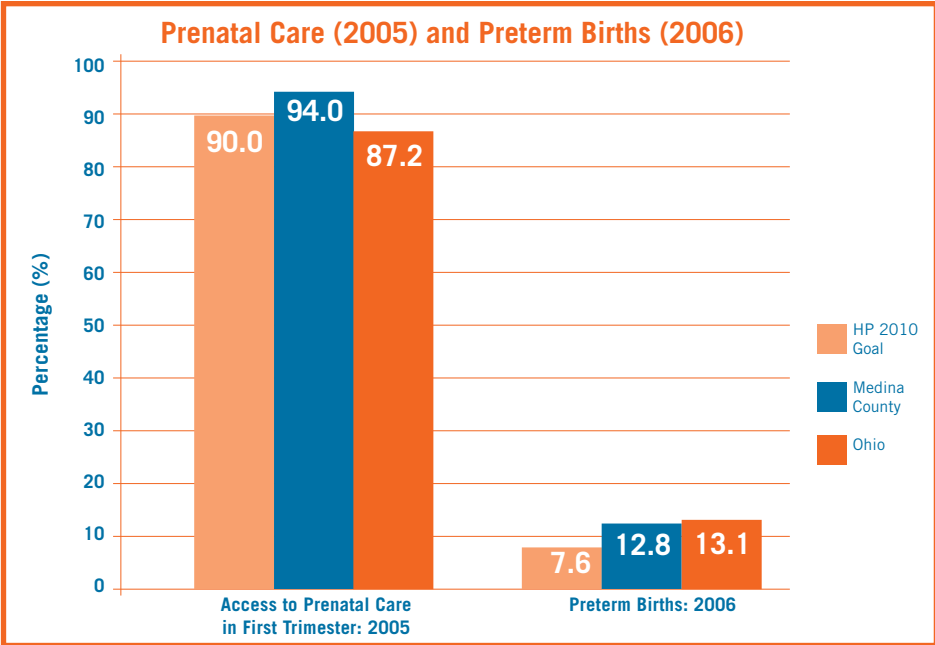


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	6	15
	2006*	7	19
Children receiving free/reduced price lunch	2001	8	22
	2007	11	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	3	12
	2006*	6	20
Children in child care assistance programs (Rate/1000)	2001	18	47
	2006	24	49
Births to adolescents (Rate/1000)	2001	8	22
	2006	6	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	10	27
	2005	19	41
4th graders less than proficient in math	2001	29	43
	2007	12	24
4th graders less than proficient in reading	2001	34	46
	2007	9	20
Students not graduating from high school	2001	7	19
	2006*	3	14
Children abused or neglected (Rate/1000)	2001	4	11
	2006	4	10
Children in foster care (Rate/1000)	2001	3	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	10	15
	2006	9	14

*Refer to page 225 for details.

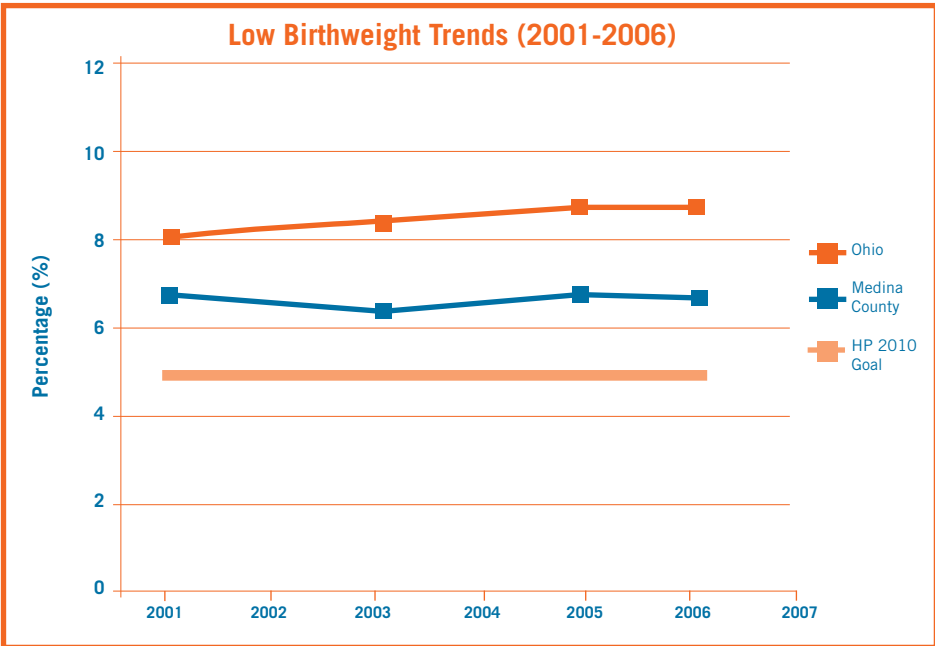


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 13.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	6.1
	Asthma Episode (%)	43
	Asthma ER Visits (%)	0
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	75.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	22.2
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	6.1
	Total Children Screened (0-72 months)	966
	Total EBLs	2
	Rate/1000	2.1

HP2010 Goals:

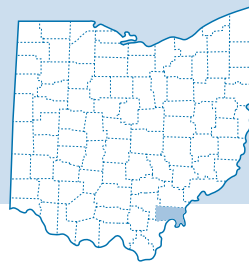
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	14	6.8
		Rate (per 1000 live births + late fetal deaths)
		4.5
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	15	7.2
		Rate (per 1000 live births)
		4.5
	Neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	11	5.3
	Rate (per 1000 live births)	
	2.9	
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
4	1.9	
	Rate (per 1000 live births)	
	1.2	
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	
5	15.8	
	Rate (per 100,000 children ages 1-14)	
	20.0 (1-4 yrs)	
	13.0 (5-9 yrs)	
	16.5 (10-14 yrs)	

Meigs



County Seat: Pomeroy
 County Type: Appalachian
 Total Population: 22,940
 Child Population: 5,142

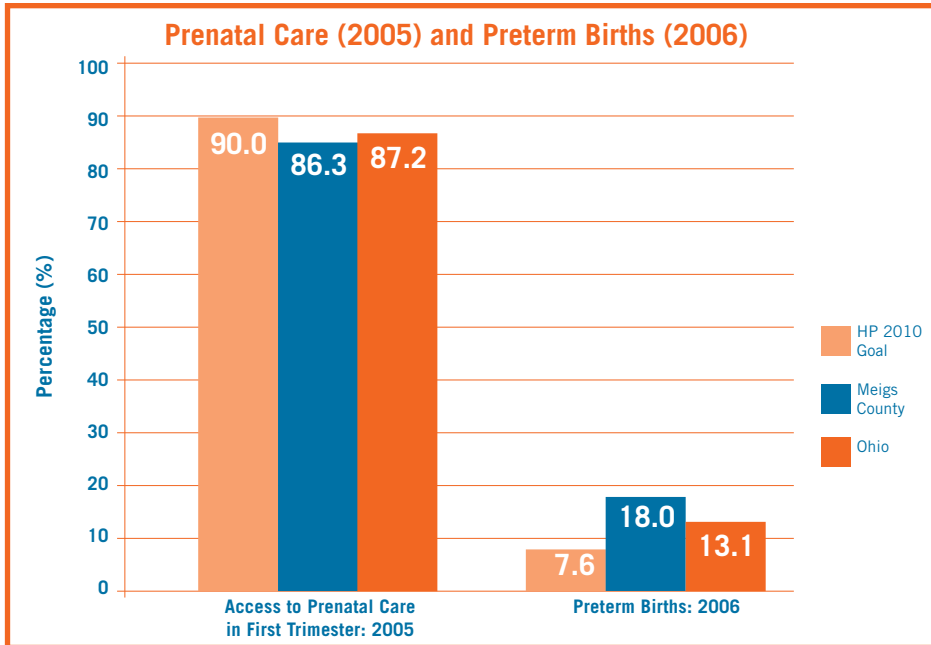


PERCENT CHANGE OVER TIME



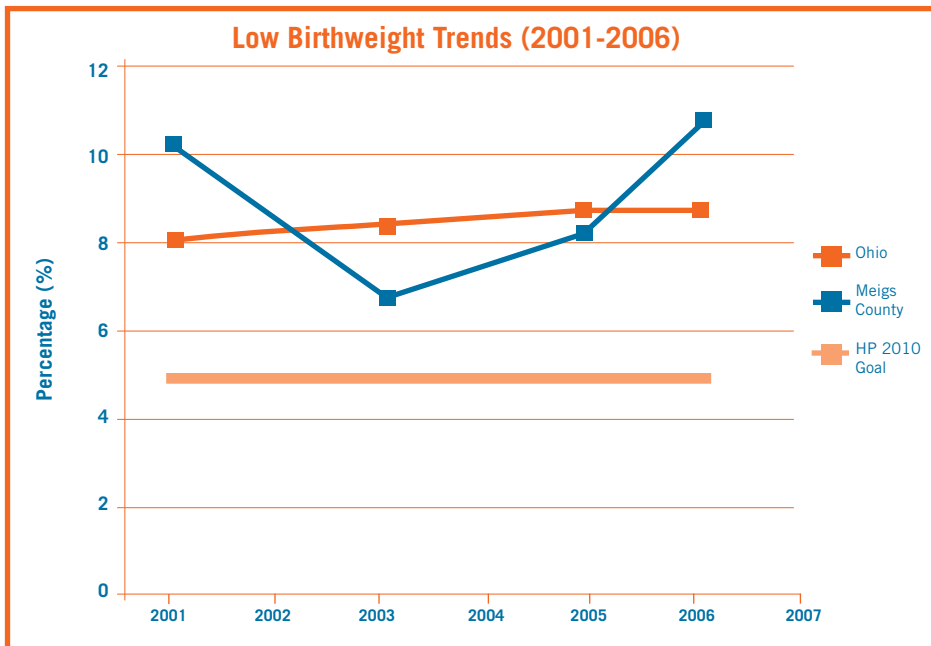
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	26	15
	2005*	31	19
Children receiving free/reduced price lunch	2001	38	22
	2007	46	27
Unemployment rate	2001	7	4
	2007	9	6
Children receiving food stamps	2001	27	12
	2006*	33	20
Children in child care assistance programs (Rate/1000)	2001	73	47
	2006	52	49
Births to adolescents (Rate/1000)	2001	24	22
	2006	13	20
Infants born at low birthweight	2001	10	8
	2006	11	9
Children in public health care programs	2001	55	27
	2005	69	41
4th graders less than proficient in math	2001	54	43
	2007	28	24
4th graders less than proficient in reading	2001	56	46
	2007	22	20
Students not graduating from high school	2001	15	19
	2006*	21	14
Children abused or neglected (Rate/1000)	2001	22	11
	2006	19	10
Children in foster care (Rate/1000)	2001	7	13
	2006	5	11
Adolescents adjudicated for felonies (Rate/1000)	2001	28	15
	2006	14	14

*Refer to page 225 for details.



HEALTH INDICATORS

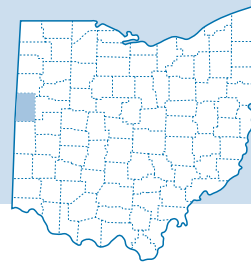
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 27.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 19.8	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 66.7	
	Asthma ER Visits (%): 58.3	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 70.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17.7	
	% Uninsured for Dental Care: 25.2	
	% Who Could Not Receive Needed Dental Care: 7.7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 288	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 5	
	Rate/1000: 17.4	



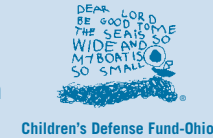
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	2	6.8
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	13.7
2005	#	Rate (per 1000 live births)
	4	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	10.2
2005	#	Rate (per 1000 live births)
	1	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	3.4
2005	#	Rate (per 1000 live births)
	1	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	0	0
2005	#	Rate (per 100,000 children ages 1-14)
	0	20.0 (1-4 yrs)
	0	13.0 (5-9 yrs)
	0	16.5 (10-14 yrs)

Mercer



County Seat: Celina
 County Type: Rural Non-Appalachian
 Total Population: 40,830
 Child Population: 11,037

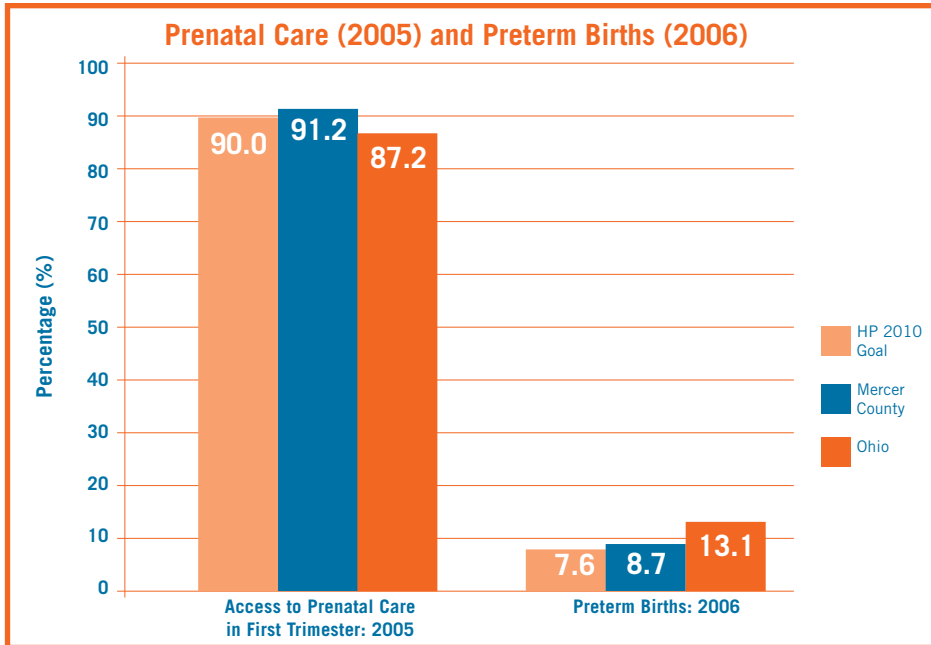


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	9	15
	2005*	9	19
Children receiving free/reduced price lunch	2001	10	22
	2007	15	27
Unemployment rate	2001	5	4
	2007	4	6
Children receiving food stamps	2001	4	12
	2006*	7	20
Children in child care assistance programs (Rate/1000)	2001	19	47
	2006	18	49
Births to adolescents (Rate/1000)	2001	16	22
	2006	6	20
Infants born at low birthweight	2001	5	8
	2006	6	9
Children in public health care programs	2001	14	27
	2005	20	41
4th graders less than proficient in math	2001	19	43
	2007	17	24
4th graders less than proficient in reading	2001	33	46
	2007	12	20
Students not graduating from high school	2001	8	19
	2006*	3	14
Children abused or neglected (Rate/1000)	2001	7	11
	2006	8	10
Children in foster care (Rate/1000)	2001	3	13
	2006	5	11
Adolescents adjudicated for felonies (Rate/1000)	2001	10	15
	2006	9	14

*Refer to page 225 for details.

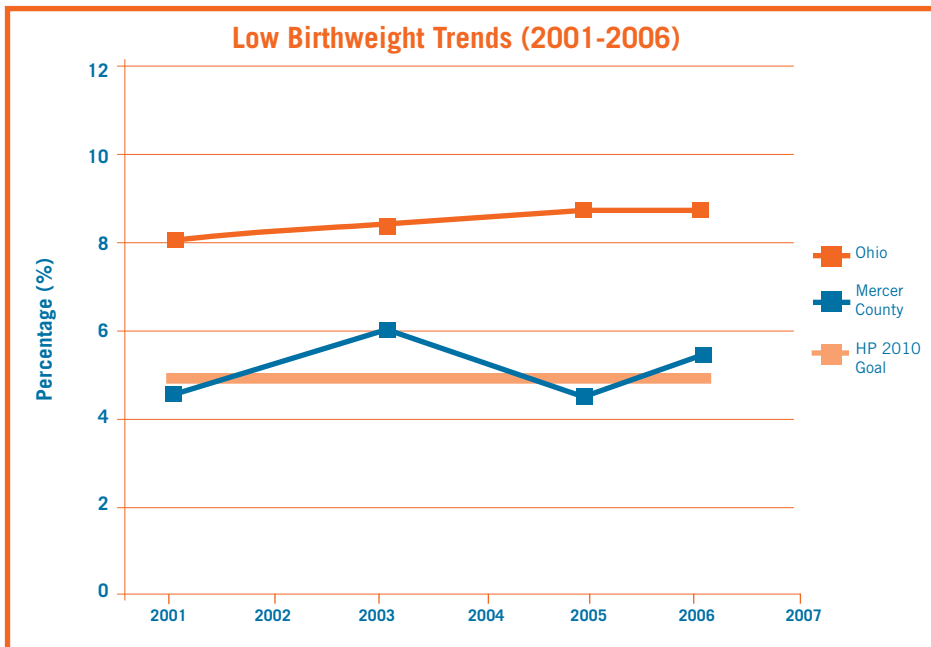


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 17.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	3.4
	Asthma Episode (%)	73.6
	Asthma ER Visits (%)	20.9
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	66.8
	% Never Visited a Dentist	12.4
	% Uninsured for Dental Care	27.1
	% Who Could Not Receive Needed Dental Care	5.4
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	236
	Total EBLs	2
	Rate/1000	8.5

HP2010 Goals:

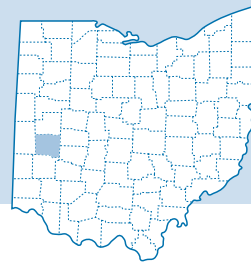
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



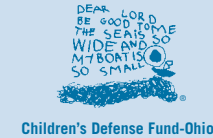
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	4	7	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	7	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	5.3	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	1.8	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	12	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Miami



County Seat: Troy
 County Type: Suburban
 Total Population: 100,955
 Child Population: 23,988

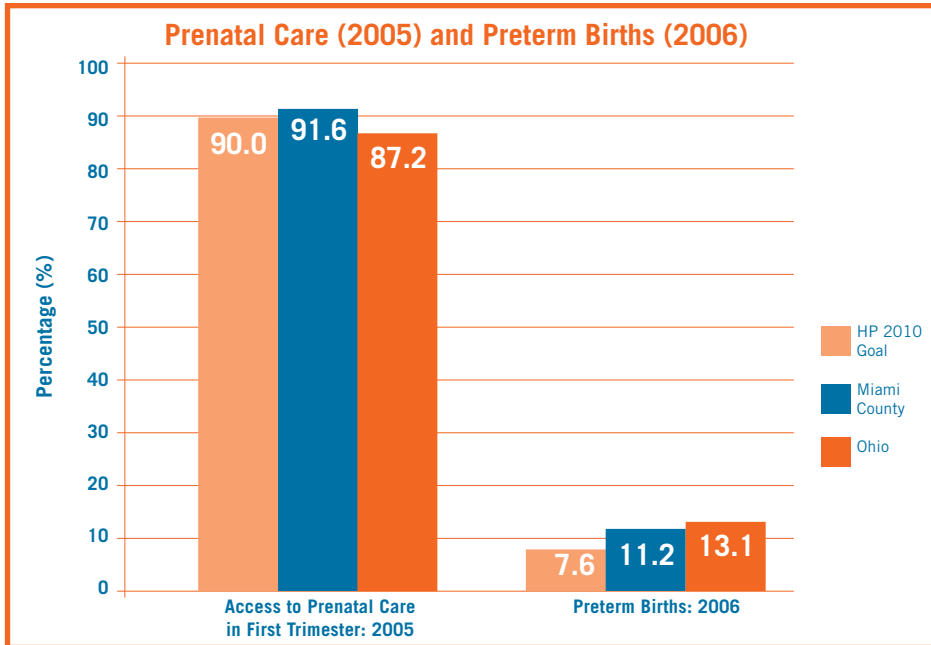


PERCENT CHANGE OVER TIME



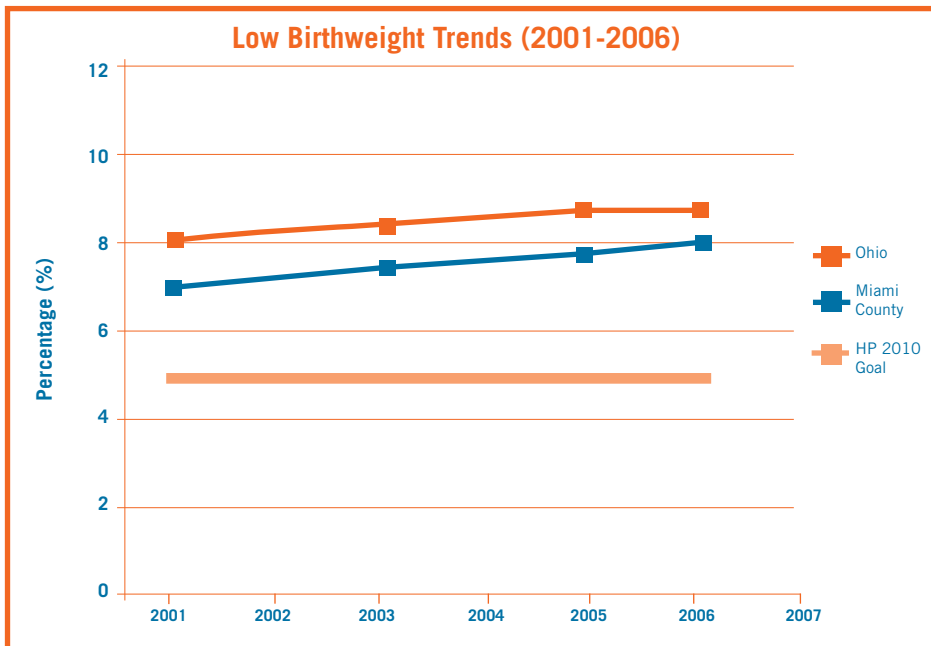
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	11	15
	2006*	11	19
Children receiving free/reduced price lunch	2001	13	22
	2007	18	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	5	12
	2006*	10	20
Children in child care assistance programs (Rate/1000)	2001	19	47
	2006	26	49
Births to adolescents (Rate/1000)	2001	12	22
	2006	14	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	16	27
	2005	30	41
4th graders less than proficient in math	2001	40	43
	2007	16	24
4th graders less than proficient in reading	2001	45	46
	2007	12	20
Students not graduating from high school	2001	15	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	7	11
	2006	8	10
Children in foster care (Rate/1000)	2001	9	13
	2006	6	11
Adolescents adjudicated for felonies (Rate/1000)	2001	12	15
	2006	7	14

*Refer to page 225 for details.



HEALTH INDICATORS

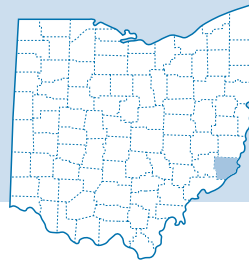
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 16	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 63.8	
	Asthma ER Visits (%): 19.6	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 69.2	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 14.6	
	% Uninsured for Dental Care: 22	
	% Who Could Not Receive Needed Dental Care: 2.4	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 788	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 9	
	Rate/1000: 11.4	



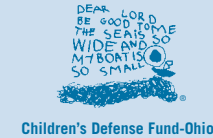
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 8	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 6.5	
Year	Infant Mortality	HP2010 Goal
2005	#: 12	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 9.8	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 7	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 5.7	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 5	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 4.1	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 2	Rate (per 100,000 children ages 1-14): 10.9
	Rate (per 100,000 children ages 1-14): 20.0 (1-4 yrs), 13.0 (5-9 yrs), 16.5 (10-14 yrs)	

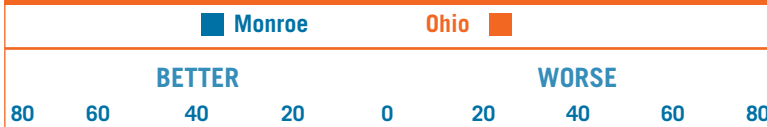
Monroe



County Seat: Woodsfield
 County Type: Appalachian
 Total Population: 14,368
 Child Population: 3,095

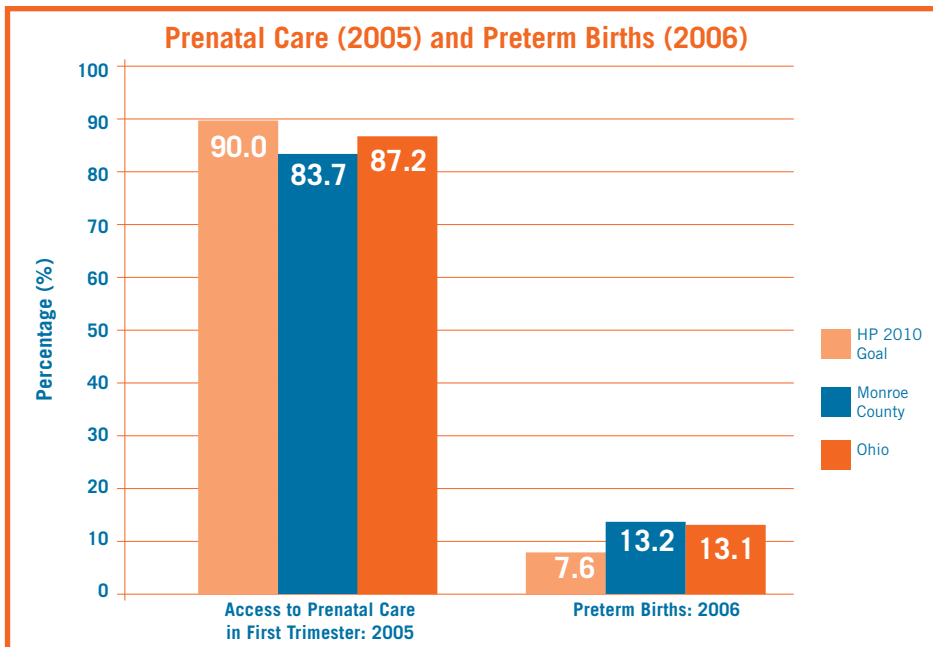


PERCENT CHANGE OVER TIME



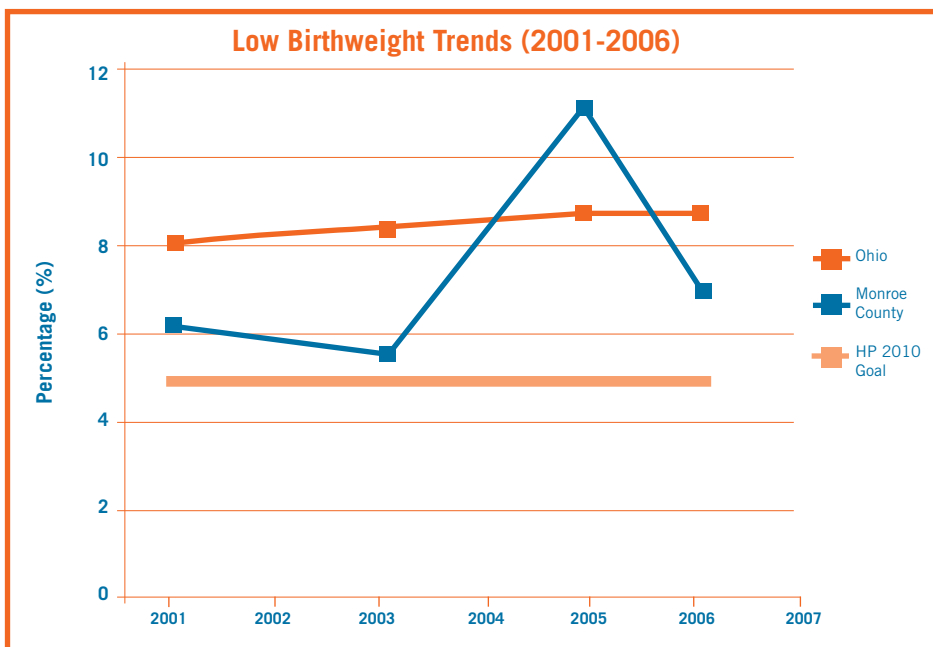
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	22	15
	2005*	26	19
Children receiving free/reduced price lunch	2001	34	22
	2007	35	27
Unemployment rate	2001	6	4
	2007	8	6
Children receiving food stamps	2001	15	12
	2006*	20	20
Children in child care assistance programs (Rate/1000)	2001	23	47
	2006	44	49
Births to adolescents (Rate/1000)	2001	11	22
	2006	6	20
Infants born at low birthweight	2001	6	8
	2006	7	9
Children in public health care programs	2001	39	27
	2005	57	41
4th graders less than proficient in math	2001	48	43
	2007	23	24
4th graders less than proficient in reading	2001	46	46
	2007	22	20
Students not graduating from high school	2001	10	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	5	11
	2006	9	10
Children in foster care (Rate/1000)	2001	8	13
	2006	13	11
Adolescents adjudicated for felonies (Rate/1000)	2001	8	15
	2006	15	14

*Refer to page 225 for details.



HEALTH INDICATORS

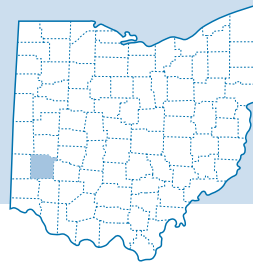
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 14.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 15.1	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 40	
	Asthma ER Visits (%): 29.8	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 66.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17	
	% Uninsured for Dental Care: 27.6	
	% Who Could Not Receive Needed Dental Care: 6.1	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 71	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 1	
	Rate/1000: 14.1	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	1	7.1	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	7.1	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	7.1	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	43.7	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

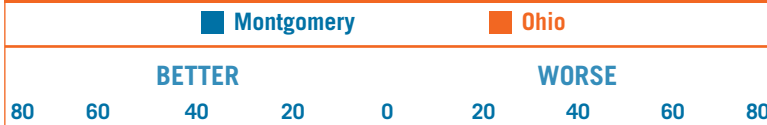
Montgomery



County Seat: Dayton
 County Type: Metropolitan
 Total Population: 541,320
 Child Population: 130,237

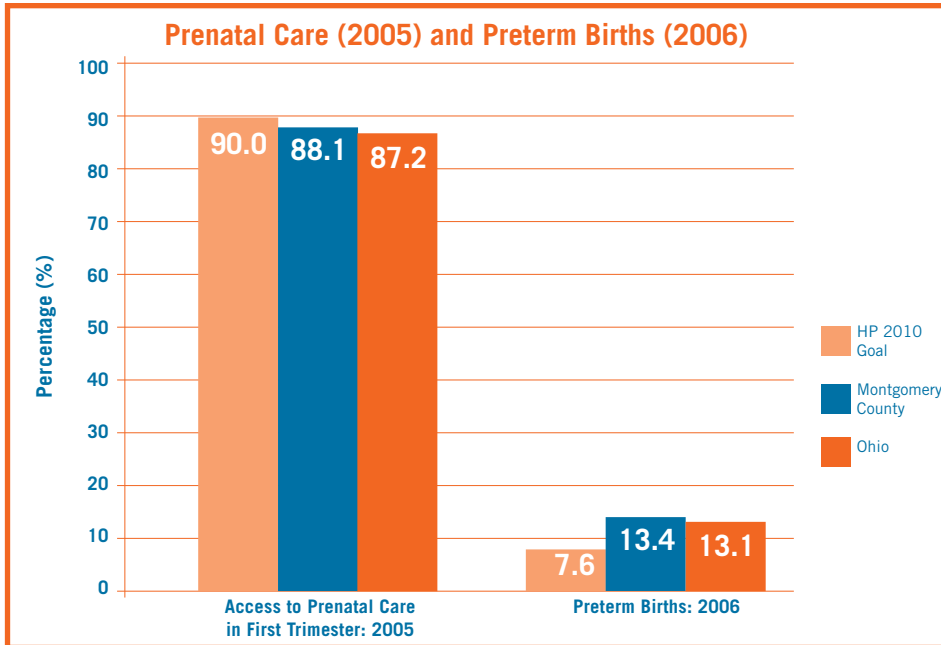


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	16	15
	2006*	21	19
Children receiving free/reduced price lunch	2001	26	22
	2007	25	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	13	12
	2006*	21	20
Children in child care assistance programs (Rate/1000)	2001	51	47
	2006	65	49
Births to adolescents (Rate/1000)	2001	26	22
	2006	23	20
Infants born at low birthweight	2001	9	8
	2006	9	9
Children in public health care programs	2001	28	27
	2005	41	41
4th graders less than proficient in math	2001	49	43
	2007	27	24
4th graders less than proficient in reading	2001	49	46
	2007	23	20
Students not graduating from high school	2001	23	19
	2006*	13	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	13	10
Children in foster care (Rate/1000)	2001	15	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	24	15
	2006	18	14

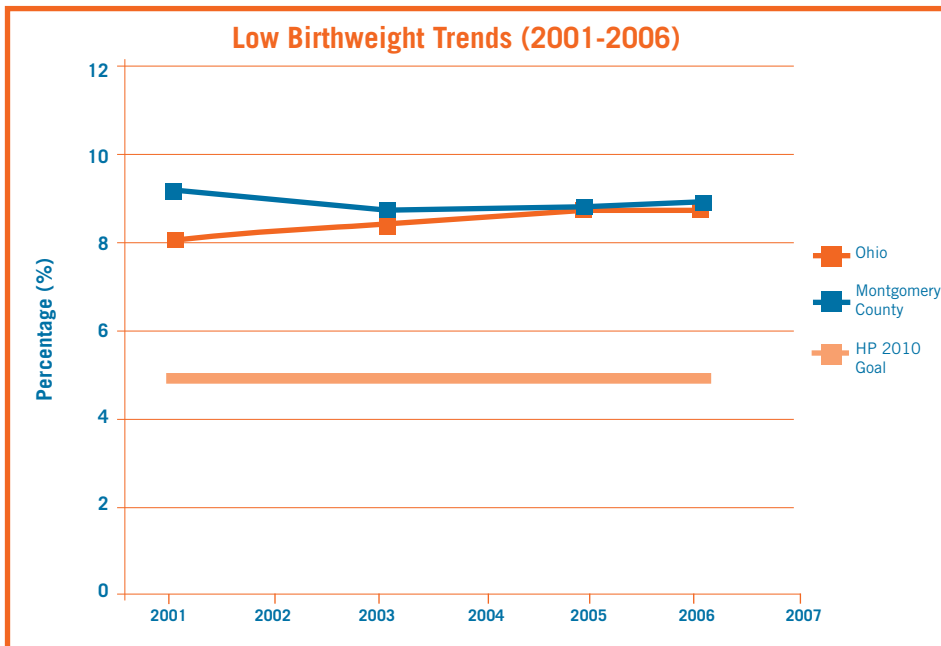
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 25.1	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	14.8
	Asthma Episode (%)	81.2
	Asthma ER Visits (%)	3.9
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	69.2
	% Never Visited a Dentist	15.3
	% Uninsured for Dental Care	21.2
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	5.5
	Total Children Screened (0-72 months)	5,167
	Total EBLs Rate/1000	51 9.9

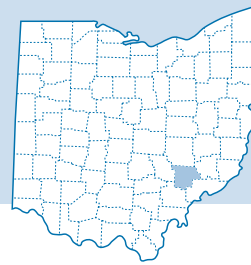
HP2010 Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



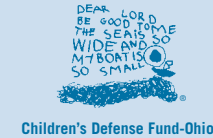
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	43	6	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	53	7.5	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	32	4.5	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	21	3	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
17	16.9	• 20.0 (1-4 yrs) • 13.0 (5-9 yrs) • 16.5 (10-14 yrs)	

Morgan



County Seat: McConnellsville
 County Type: Appalachian
 Total Population: 14,649
 Child Population: 3,371

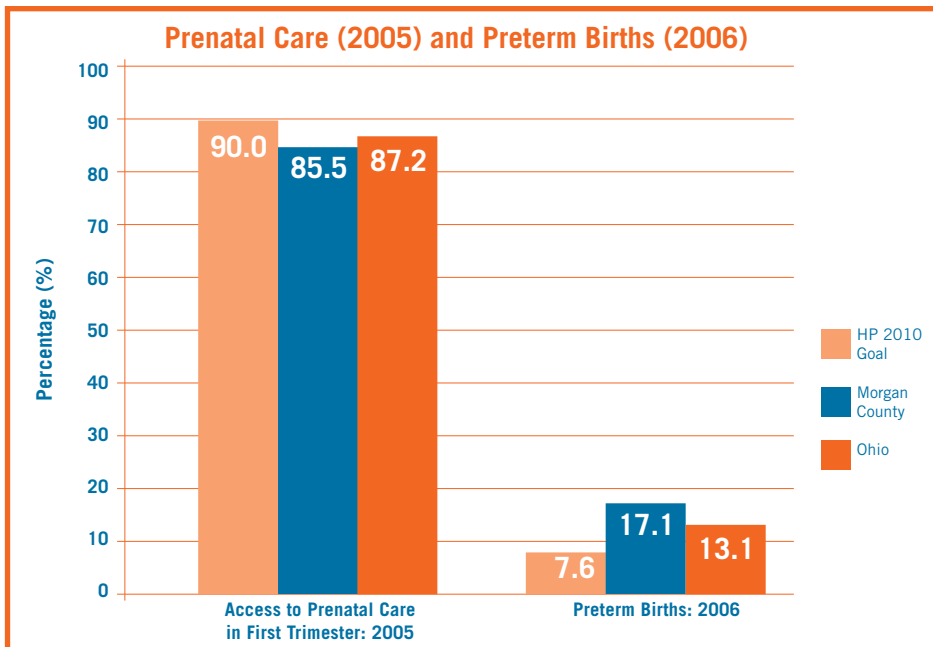


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	24	15
	2005*	27	19
Children receiving free/reduced price lunch	2001	28	22
	2007	40	27
Unemployment rate	2001	8	4
	2007	9	6
Children receiving food stamps	2001	20	12
	2006*	27	20
Children in child care assistance programs (Rate/1000)	2001	45	47
	2006	43	49
Births to adolescents (Rate/1000)	2001	25	22
	2006	6	20
Infants born at low birthweight	2001	9	8
	2006	11	9
Children in public health care programs	2001	45	27
	2005	65	41
4th graders less than proficient in math	2001	45	43
	2007	24	24
4th graders less than proficient in reading	2001	55	46
	2007	20	20
Students not graduating from high school	2001	20	19
	2006*	11	14
Children abused or neglected (Rate/1000)	2001	2	11
	2006	3	10
Children in foster care (Rate/1000)	2001	6	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	1	15
	2006	6	14

*Refer to page 225 for details.

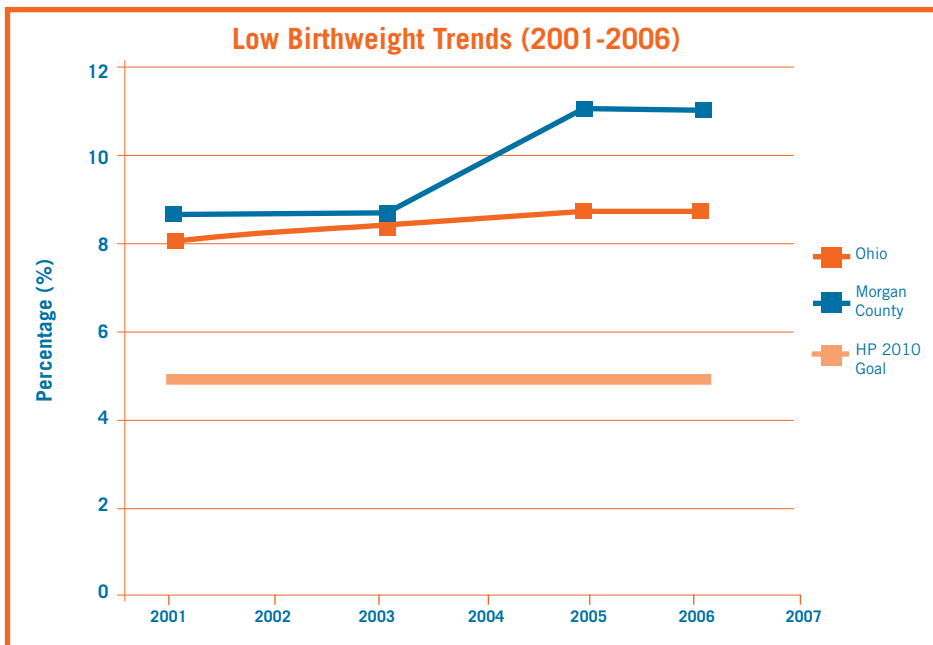


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 23	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	8.6
	Asthma Episode (%)	27.9
	Asthma ER Visits (%)	12.6
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	70.9
	% Never Visited a Dentist	17.7
	% Uninsured for Dental Care	25.2
	% Who Could Not Receive Needed Dental Care	7.7
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	171
	Total EBLs	1
	Rate/1000	5.8

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



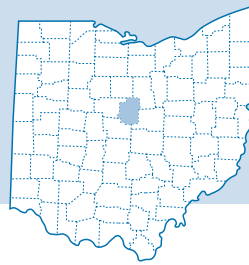
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	1	5.6
2005	#	Rate (per 1000 live births)
	1	5.6
2005	#	Rate (per 1000 live births)
	1	5.6
2005	#	Rate (per 1000 live births)
	0	0
2005	#	Rate (per 100,000 children ages 1-14)
	0	0

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Morrow



County Seat: Mt. Gilead
 County Type: Rural Non-Appalachian
 Total Population: 34,214
 Child Population: 8,429



Children's Defense Fund-Ohio

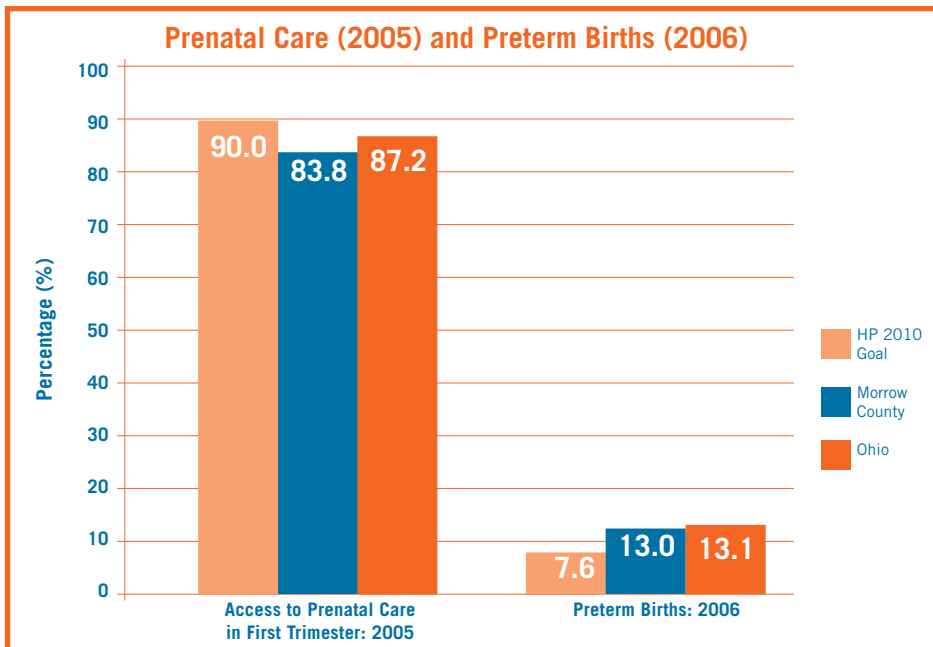


PERCENT CHANGE OVER TIME



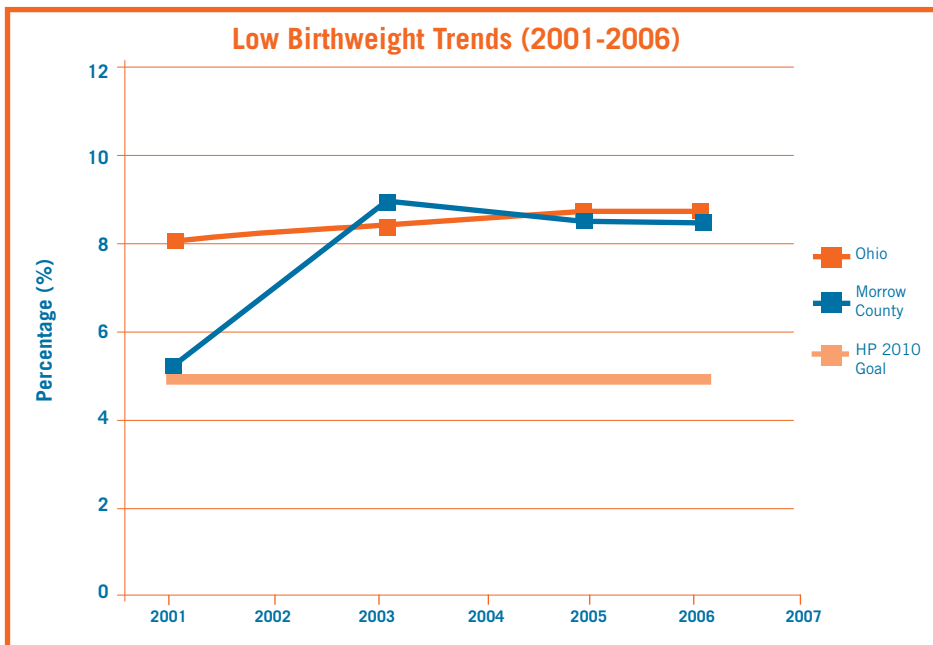
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2005*	15	19
Children receiving free/reduced price lunch	2001	16	22
	2007	24	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	9	12
	2006*	16	20
Children in child care assistance programs (Rate/1000)	2001	41	47
	2006	29	49
Births to adolescents (Rate/1000)	2001	19	22
	2006	29	20
Infants born at low birthweight	2001	5	8
	2006	8	9
Children in public health care programs	2001	23	27
	2005	41	41
4th graders less than proficient in math	2001	48	43
	2007	22	24
4th graders less than proficient in reading	2001	52	46
	2007	15	20
Students not graduating from high school	2001	10	19
	2006*	11	14
Children abused or neglected (Rate/1000)	2001	25	11
	2006	14	10
Children in foster care (Rate/1000)	2001	7	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	2	15
	2006	6	14

*Refer to page 225 for details.



HEALTH INDICATORS

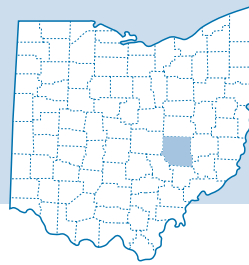
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 15.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 5.3	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 59.5	
	Asthma ER Visits (%): 19.8	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 71.4	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 14.6	
	% Uninsured for Dental Care: 24.6	
	% Who Could Not Receive Needed Dental Care: 5.1	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 228	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 2	
	Rate/1000: 8.8	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 3	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 7.3	
	#: 7	
Infant Mortality		HP2010 Goal
2005	#: 7	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 17.1	
	#: 5	
Neonatal Mortality		HP2010 Goal
2005	#: 5	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 12.2	
	#: 2	
Post-neonatal Mortality		HP2010 Goal
2005	#: 2	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 4.9	
	#: 5	
Child Death (1-14 yrs)		HP2010 Goal
2005	#: 5	Rate (per 100,000 children ages 1-14): 79
	Rate (per 100,000 children ages 1-14): 79	
	Rate (per 100,000 children ages 1-14): 79	

Muskingum



County Seat: Zanesville
 County Type: Appalachian
 Total Population: 85,500
 Child Population: 20,594



PERCENT CHANGE OVER TIME

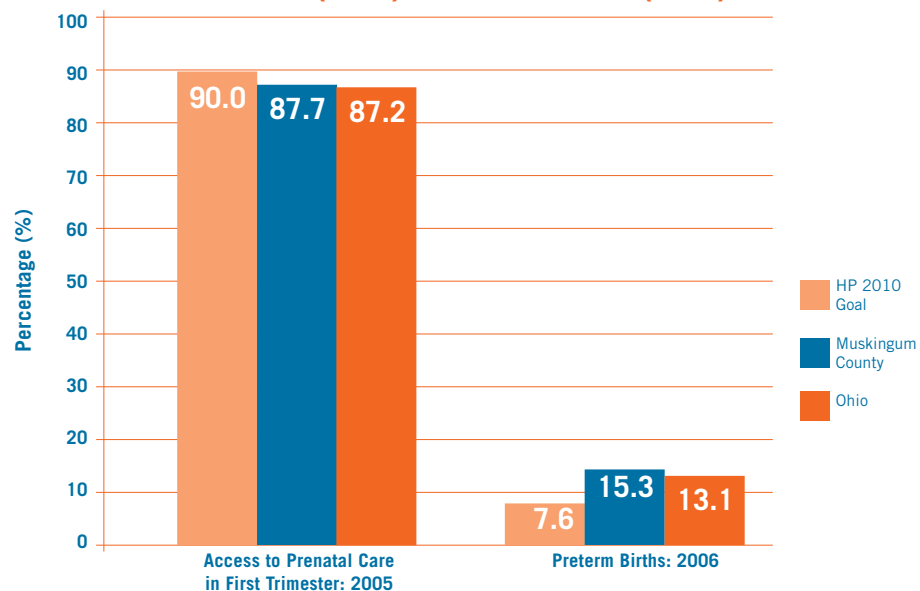
■ Muskingum ■ Ohio



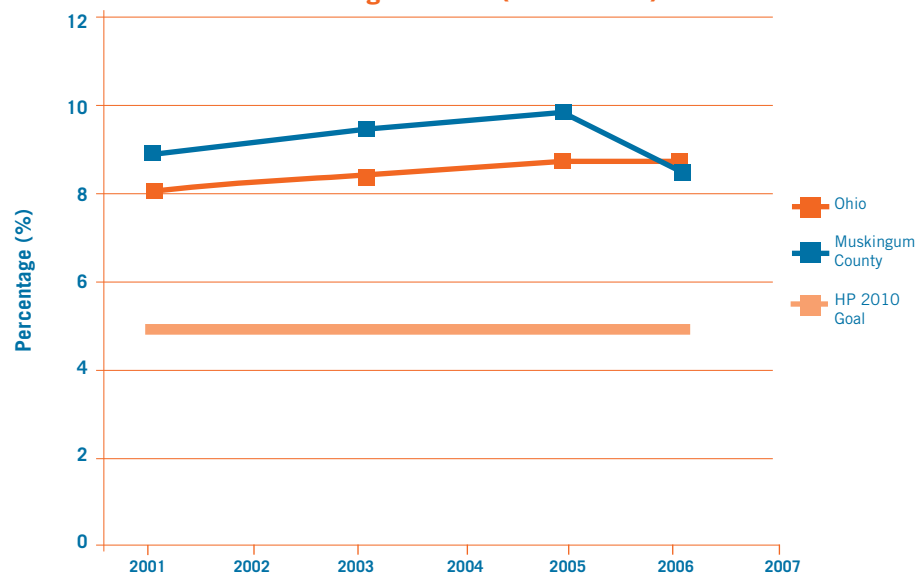
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	20	15
	2006*	20	19
Children receiving free/reduced price lunch	2001	23	22
	2007	32	27
Unemployment rate	2001	6	4
	2007	8	6
Children receiving food stamps	2001	20	12
	2006*	31	20
Children in child care assistance programs (Rate/1000)	2001	70	47
	2006	69	49
Births to adolescents (Rate/1000)	2001	22	22
	2006	22	20
Infants born at low birthweight	2001	9	8
	2006	8	9
Children in public health care programs	2001	39	27
	2005	54	41
4th graders less than proficient in math	2001	45	43
	2007	22	24
4th graders less than proficient in reading	2001	52	46
	2007	19	20
Students not graduating from high school	2001	14	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	9	11
	2006	7	10
Children in foster care (Rate/1000)	2001	8	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	24	15
	2006	13	14

*Refer to page 225 for details.

Prenatal Care (2005) and Preterm Births (2006)



Low Birthweight Trends (2001-2006)



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 23.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	12.3
	Asthma Episode (%)	57.7
	Asthma ER Visits (%)	21.5
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	21.7
2006	% Who Could Not Receive Needed Dental Care	5.6
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	1,742
	Total EBLs	28
	Rate/1000	16.1

• Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 Eliminate Elevated Blood Lead Levels in Children

MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	7	6.7
		Rate (per 1000 live births + late fetal deaths)
		4.5
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	12	11.6
		Rate (per 1000 live births)
		4.5
	Neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	6	5.8
	Rate (per 1000 live births)	
	2.9	
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
6	5.8	
	Rate (per 1000 live births)	
	1.2	
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	
5	31.5	
	Rate (per 100,000 children ages 1-14)	
	• 20.0 (1-4 yrs)	
	• 13.0 (5-9 yrs)	
	• 16.5 (10-14 yrs)	

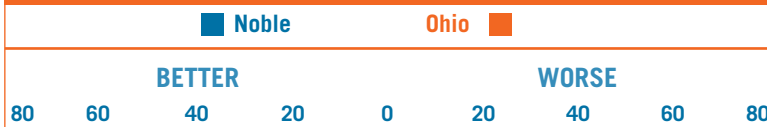
Noble



County Seat: Caldwell
 County Type: Appalachian
 Total Population: 14,144
 Child Population: 2,672

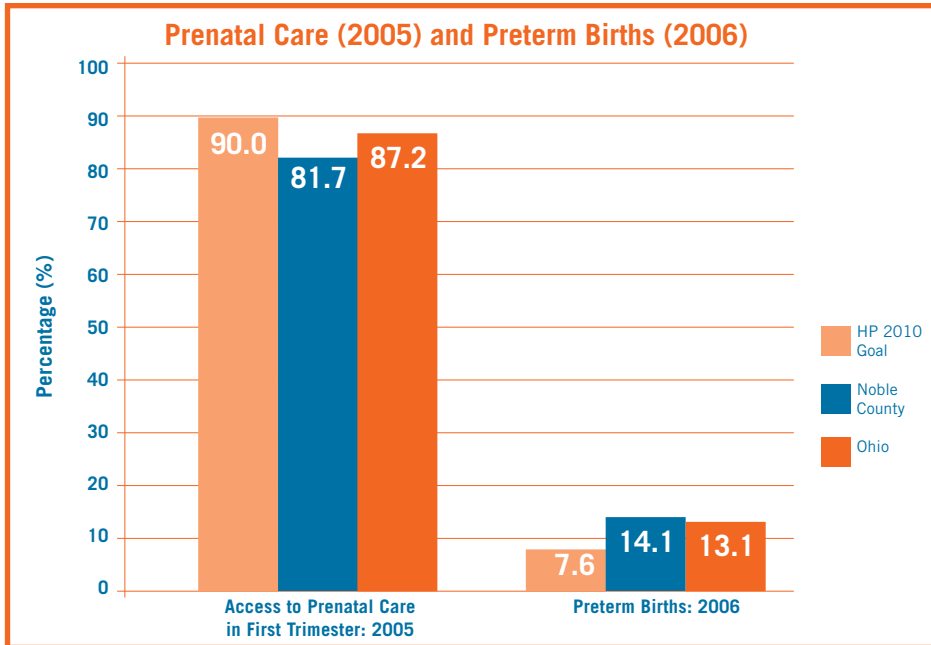


PERCENT CHANGE OVER TIME



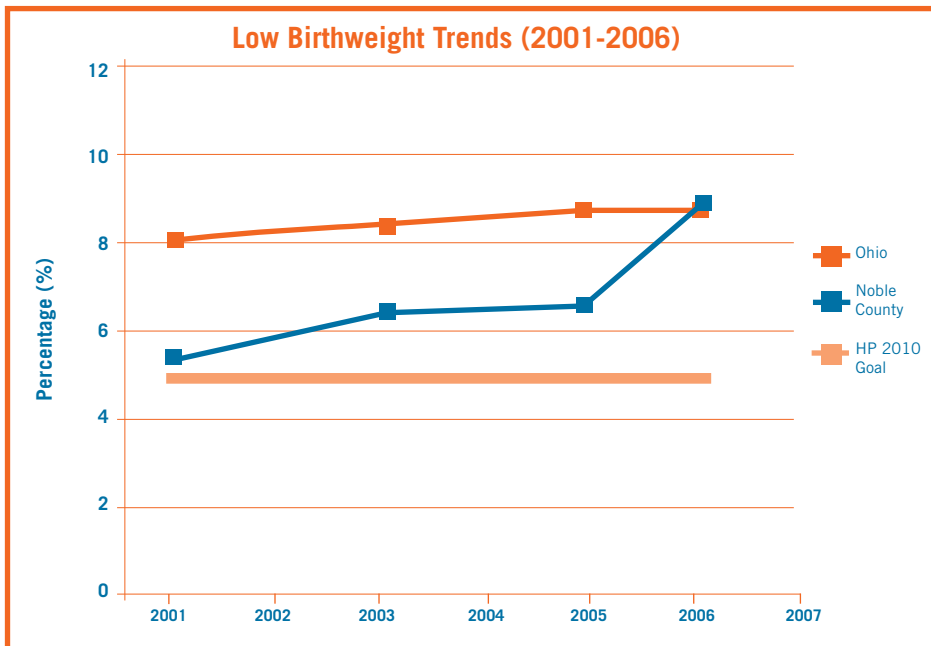
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	17	15
	2005*	19	19
Children receiving free/reduced price lunch	2001	19	22
	2007	28	27
Unemployment rate	2001	6	4
	2007	7	6
Children receiving food stamps	2001	13	12
	2006*	21	20
Children in child care assistance programs (Rate/1000)	2001	45	47
	2006	69	49
Births to adolescents (Rate/1000)	2001	6	22
	2006	15	20
Infants born at low birthweight	2001	5	8
	2006	9	9
Children in public health care programs	2001	34	27
	2005	55	41
4th graders less than proficient in math	2001	35	43
	2007	23	24
4th graders less than proficient in reading	2001	47	46
	2007	14	20
Students not graduating from high school	2001	7	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	8	11
	2006	13	10
Children in foster care (Rate/1000)	2001	2	13
	2006	1	11
Adolescents adjudicated for felonies (Rate/1000)	2001	6	15
	2006	3	14

*Refer to page 225 for details.



HEALTH INDICATORS

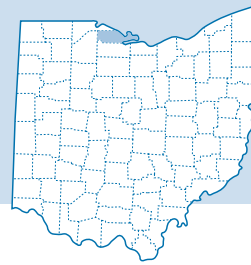
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 15.9	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 0	
	Asthma ER Visits (%): 0	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 66.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17	
	% Uninsured for Dental Care: 27.6	
	% Who Could Not Receive Needed Dental Care: 6.1	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 135	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 3	
	Rate/1000: 22.2	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 0	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 0	
	Rate (per 1000 live births): 0	
Year	Infant Mortality	HP2010 Goal
2005	#: 1	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 6.5	
	Rate (per 1000 live births): 0	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 0	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 0	
	Rate (per 1000 live births): 0	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 1	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 6.5	
	Rate (per 1000 live births): 0	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 1	Rate (per 100,000 children ages 1-14): 48.3
	Rate (per 100,000 children ages 1-14): 48.3	
	Rate (per 100,000 children ages 1-14): 48.3	

Ottawa



County Seat: Port Clinton
 County Type: Rural Non-Appalachian
 Total Population: 41,203
 Child Population: 8,544



Children's Defense Fund-Ohio

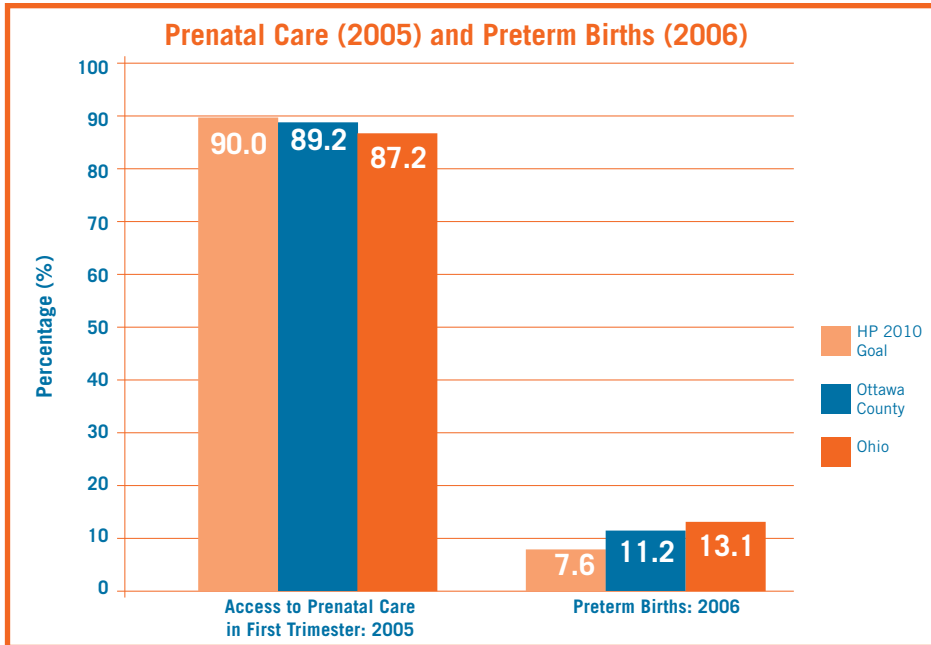


PERCENT CHANGE OVER TIME



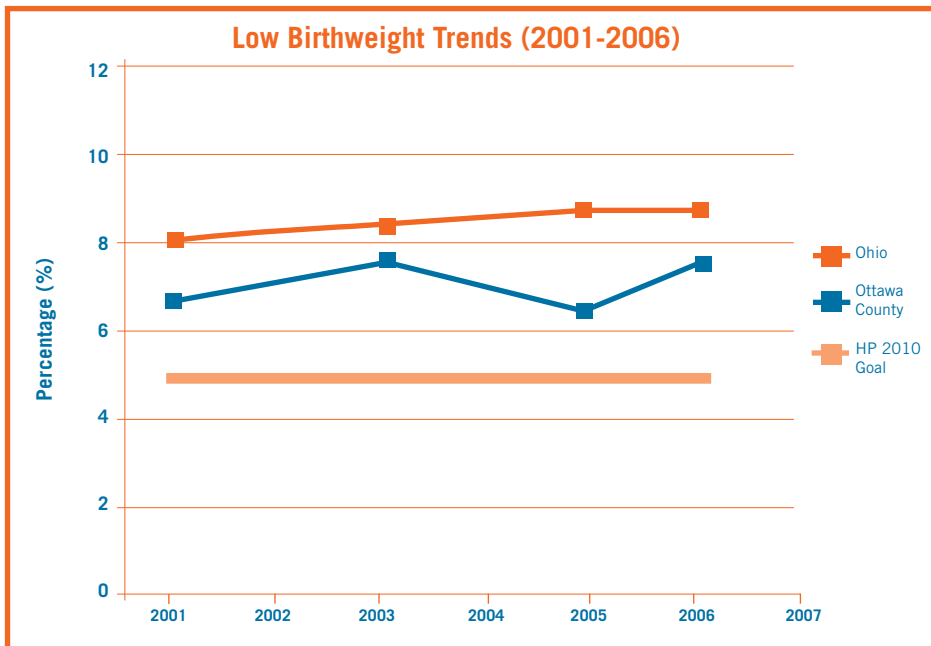
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	9	15
	2005*	10	19
Children receiving free/reduced price lunch	2001	6	22
	2007	22	27
Unemployment rate	2001	6	4
	2007	7	6
Children receiving food stamps	2001	7	12
	2006*	13	20
Children in child care assistance programs (Rate/1000)	2001	18	47
	2006	32	49
Births to adolescents (Rate/1000)	2001	10	22
	2006	13	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	20	27
	2005	36	41
4th graders less than proficient in math	2001	36	43
	2007	20	24
4th graders less than proficient in reading	2001	43	46
	2007	19	20
Students not graduating from high school	2001	8	19
	2006*	3	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	10	10
Children in foster care (Rate/1000)	2001	2	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	9	15
	2006	11	14

*Refer to page 225 for details.



HEALTH INDICATORS

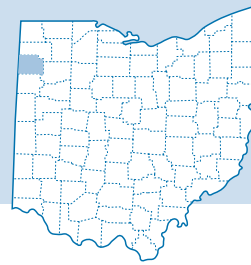
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 14.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 11.8	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 80	
	Asthma ER Visits (%): 41.4	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 71.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 12.3	
	% Uninsured for Dental Care: 22.5	
	% Who Could Not Receive Needed Dental Care: 7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 321	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 5	
	Rate/1000: 15.6	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	1	2.5
2005	#	Rate (per 1000 live births + late fetal deaths)
	1	2.5
Infant Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	7.5
2005	#	Rate (per 1000 live births)
	1	2.5
Neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	1	2.5
Post-neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	5
2005	#	Rate (per 1000 live births)
	2	5
Child Death (1-14 yrs)		HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	0	0
		<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Paulding



County Seat: Paulding
 County Type: Rural Non-Appalachian
 Total Population: 19,280
 Child Population: 4,709



Children's Defense Fund-Ohio



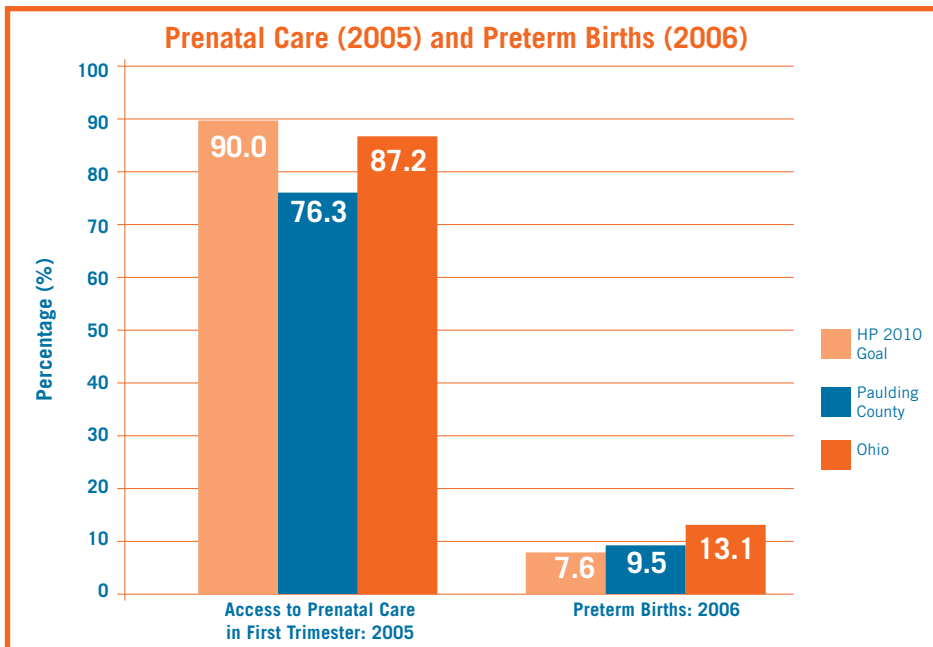
PERCENT CHANGE OVER TIME

■ Paulding ■ Ohio

BETTER 80 60 40 20 0 20 40 60 80 WORSE

Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	11	15
	2005*	13	19
Children receiving free/reduced price lunch	2001	14	22
	2007	19	27
Unemployment rate	2001	5	4
	2007	5	6
Children receiving food stamps	2001	7	12
	2006*	14	20
Children in child care assistance programs (Rate/1000)	2001	7	47
	2006	10	49
Births to adolescents (Rate/1000)	2001	10	22
	2006	7	20
Infants born at low birthweight	2001	6	8
	2006	7	9
Children in public health care programs	2001	17	27
	2005	36	41
4th graders less than proficient in math	2001	37	43
	2007	24	24
4th graders less than proficient in reading	2001	44	46
	2007	20	20
Students not graduating from high school	2001	7	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	17	11
	2006	13	10
Children in foster care (Rate/1000)	2001	8	13
	2006	5	11
Adolescents adjudicated for felonies (Rate/1000)	2001	29	15
	2006	15	14

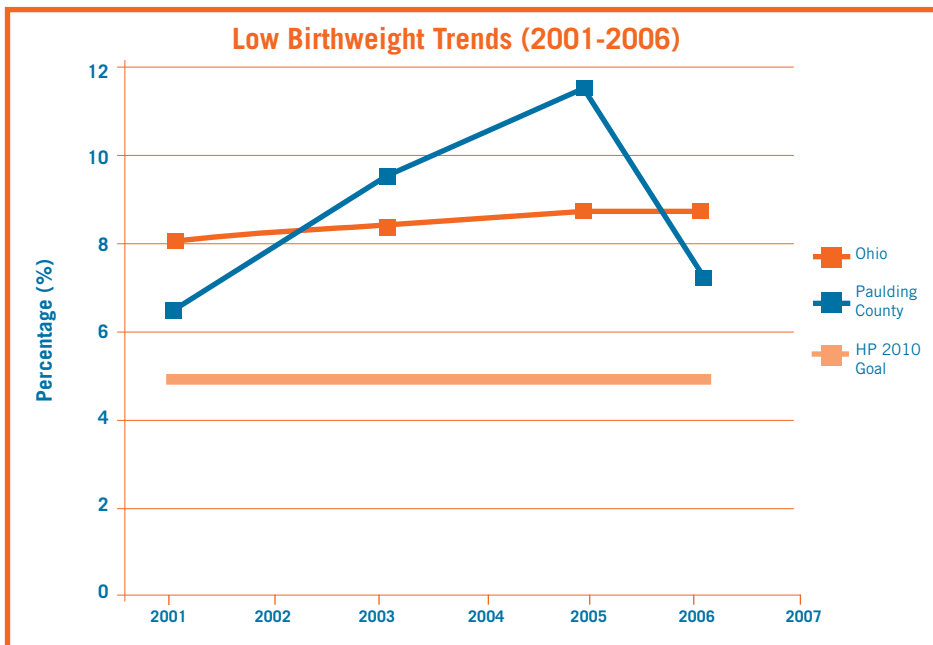
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 15.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	19.6
	Asthma Episode (%)	5.8
	Asthma ER Visits (%)	54.7
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	65.7
	% Never Visited a Dentist	17.1
	% Uninsured for Dental Care	22.3
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	2.5
	Total Children Screened (0-72 months)	58
	Total EBLs	0
	Rate/1000	0

HP2010 Goals:
 • Reduce Deaths, Hospitalizations, and ER Visits from Asthma
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	3	11.8
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	1	4
	Neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	1	4
	Post-neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	0	0
	Child Death (1-14 yrs)	HP2010 Goal
#	Rate (per 100,000 children ages 1-14)	
1	28.3	

HP2010 Goals:
 • Rate (per 1000 live births + late fetal deaths): 4.5
 • Rate (per 1000 live births): 4.5
 • Rate (per 1000 live births): 2.9
 • Rate (per 1000 live births): 1.2
 • Rate (per 100,000 children ages 1-14):
 • 20.0 (1-4 yrs)
 • 13.0 (5-9 yrs)
 • 16.5 (10-14 yrs)

Perry



County Seat: New Lexington
 County Type: Appalachian
 Total Population: 34,837
 Child Population: 9,111

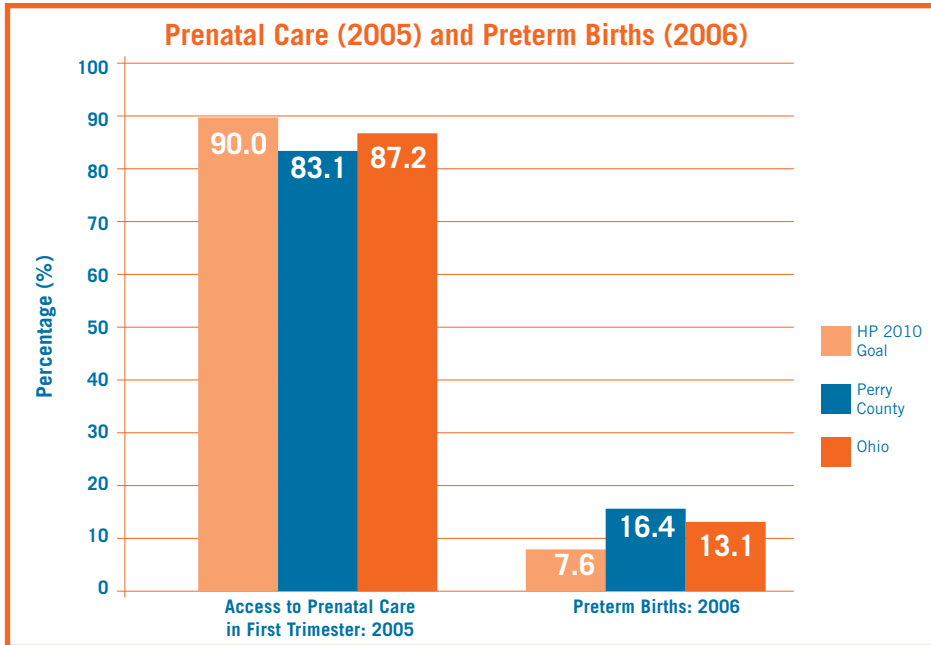


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	19	15
	2005*	23	19
Children receiving free/reduced price lunch	2001	25	22
	2007	35	27
Unemployment rate	2001	6	4
	2007	7	6
Children receiving food stamps	2001	15	12
	2006*	26	20
Children in child care assistance programs (Rate/1000)	2001	40	47
	2006	48	49
Births to adolescents (Rate/1000)	2001	34	22
	2006	17	20
Infants born at low birthweight	2001	8	8
	2006	10	9
Children in public health care programs	2001	35	27
	2005	60	41
4th graders less than proficient in math	2001	48	43
	2007	24	24
4th graders less than proficient in reading	2001	54	46
	2007	20	20
Students not graduating from high school	2001	15	19
	2006*	13	14
Children abused or neglected (Rate/1000)	2001	7	11
	2006	7	10
Children in foster care (Rate/1000)	2001	10	13
	2006	13	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	11	14

*Refer to page 225 for details.

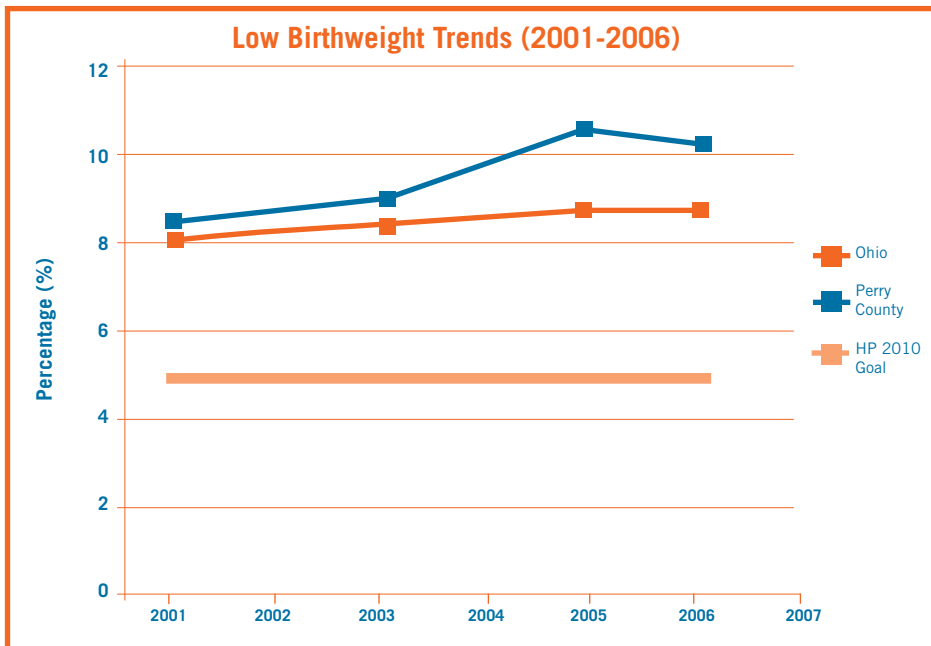


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	7.6
	Asthma Episode (%)	51.9
	Asthma ER Visits (%)	17
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	21.7
	% Who Could Not Receive Needed Dental Care	5.6
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	514
	Total EBLs	5
	Rate/1000	9.7

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



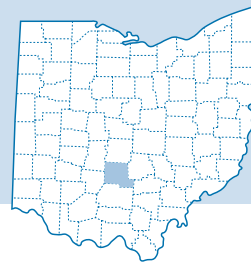
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	2	4.4
2005	#	Rate (per 1000 live births)
	3	6.6
2005	#	Rate (per 1000 live births)
	2	4.4
2005	#	Rate (per 1000 live births)
	1	2.2
2005	#	Rate (per 100,000 children ages 1-14)
	3	42.7

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Pickaway



County Seat: Circleville
 County Type: Suburban
 Total Population: 53,202
 Child Population: 12,239

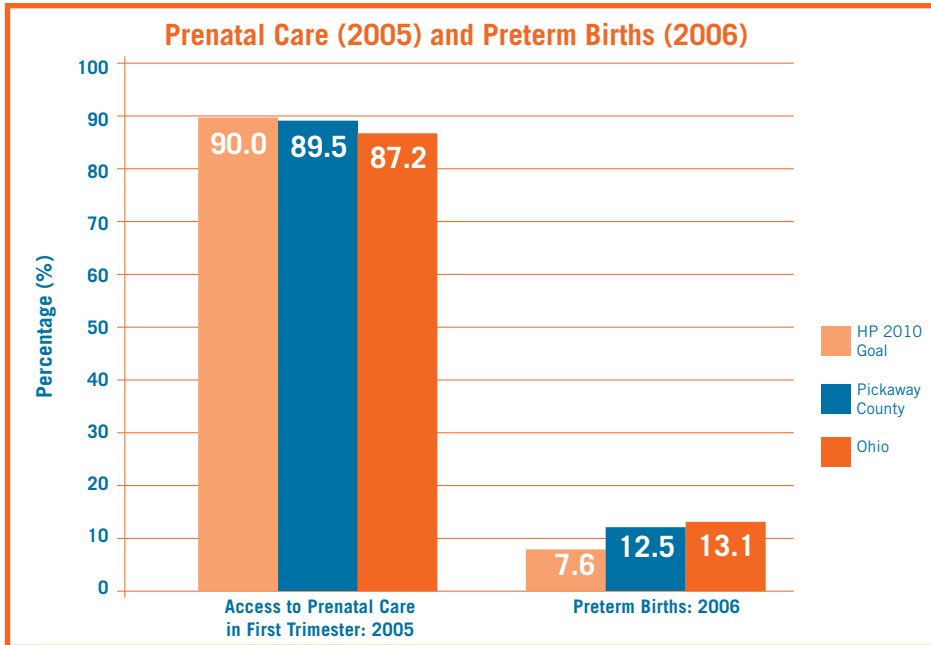


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	13	15
	2005*	17	19
Children receiving free/reduced price lunch	2001	15	22
	2007	21	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	11	12
	2006*	19	20
Children in child care assistance programs (Rate/1000)	2001	26	47
	2006	26	49
Births to adolescents (Rate/1000)	2001	19	22
	2006	18	20
Infants born at low birthweight	2001	10	8
	2006	8	9
Children in public health care programs	2001	24	27
	2005	42	41
4th graders less than proficient in math	2001	46	43
	2007	19	24
4th graders less than proficient in reading	2001	50	46
	2007	20	20
Students not graduating from high school	2001	12	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	4	11
	2006	3	10
Children in foster care (Rate/1000)	2001	3	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	17	15
	2006	7	14

*Refer to page 225 for details.

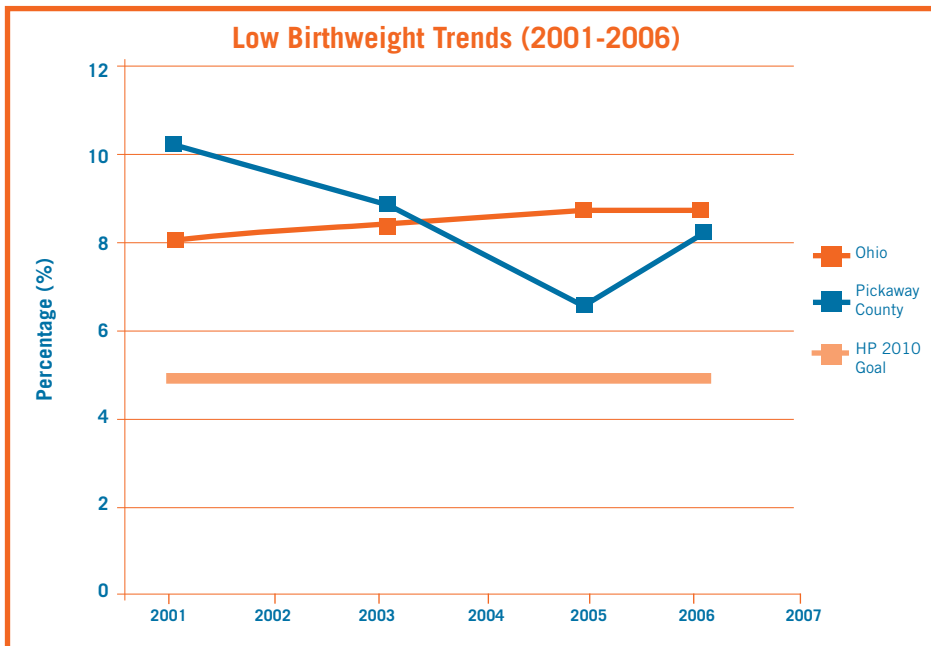


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 25.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	6.5
	Asthma Episode (%)	0
	Asthma ER Visits (%)	0
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	67.4
	% Never Visited a Dentist	12.8
	% Uninsured for Dental Care	27.3
	% Who Could Not Receive Needed Dental Care	5
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	533
	Total EBLs	2
	Rate/1000	3.8

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



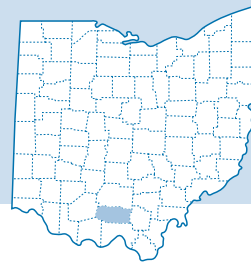
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	6.3
2005	#	Rate (per 1000 live births)
	4	6.3
2005	#	Rate (per 1000 live births)
	3	4.7
2005	#	Rate (per 1000 live births)
	1	1.6
2005	#	Rate (per 100,000 children ages 1-14)
	5	55.4

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Pike



County Seat: Waverly
 County Type: Appalachian
 Total Population: 27,981
 Child Population: 7,068

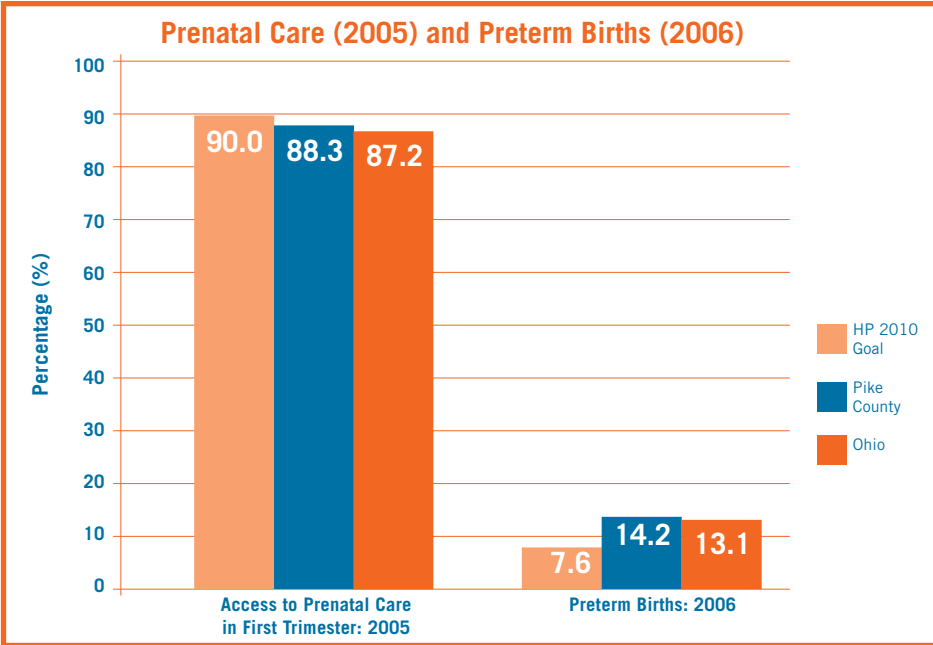


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	27	15
	2005*	31	19
Children receiving free/reduced price lunch	2001	32	22
	2007	39	27
Unemployment rate	2001	8	4
	2007	10	6
Children receiving food stamps	2001	24	12
	2006*	35	20
Children in child care assistance programs (Rate/1000)	2001	26	47
	2006	28	49
Births to adolescents (Rate/1000)	2001	31	22
	2006	24	20
Infants born at low birthweight	2001	5	8
	2006	8	9
Children in public health care programs	2001	47	27
	2005	75	41
4th graders less than proficient in math	2001	56	43
	2007	29	24
4th graders less than proficient in reading	2001	59	46
	2007	20	20
Students not graduating from high school	2001	22	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	11	11
	2006	2	10
Children in foster care (Rate/1000)	2001	6	13
	2006	10	11
Adolescents adjudicated for felonies (Rate/1000)	2001	5	15
	2006	2	14

*Refer to page 225 for details.

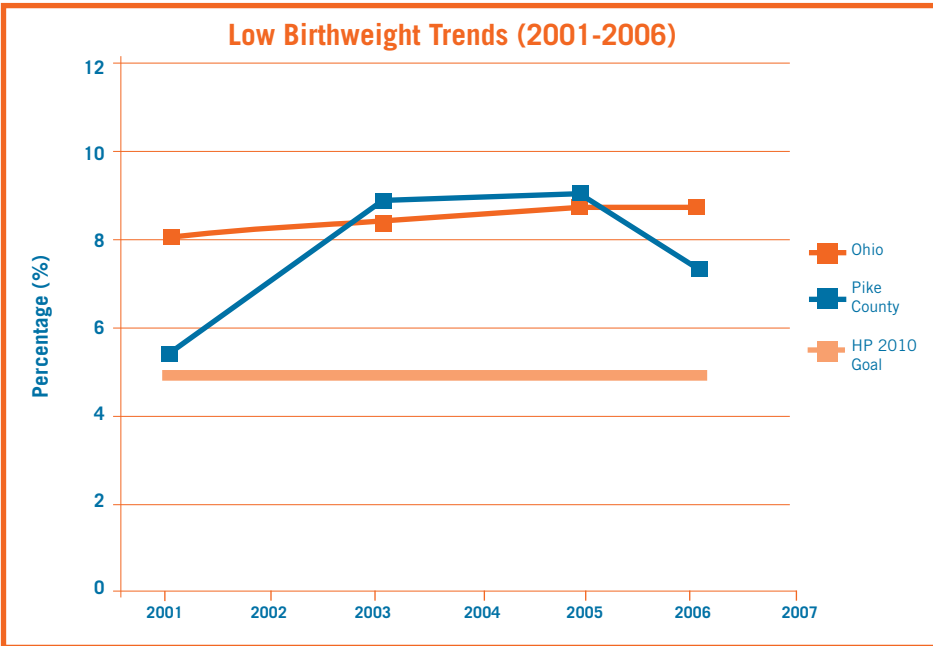


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 28.2	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	15.6
	Asthma Episode (%)	90.2
	Asthma ER Visits (%)	67.4
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	65.9
	% Never Visited a Dentist	15.7
	% Uninsured for Dental Care	21.9
	% Who Could Not Receive Needed Dental Care	7
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	412
	Total EBLs	1
	Rate/1000	2.4

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



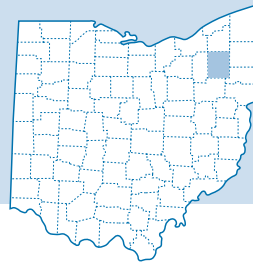
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	2	5
2005	#	Rate (per 1000 live births)
	3	7.6
2005	#	Rate (per 1000 live births)
	1	2.5
2005	#	Rate (per 1000 live births)
	2	5
2005	#	Rate (per 100,000 children ages 1-14)
	2	37.4

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Portage



County Seat: Ravenna
 County Type: Suburban
 Total Population: 155,044
 Child Population: 33,210

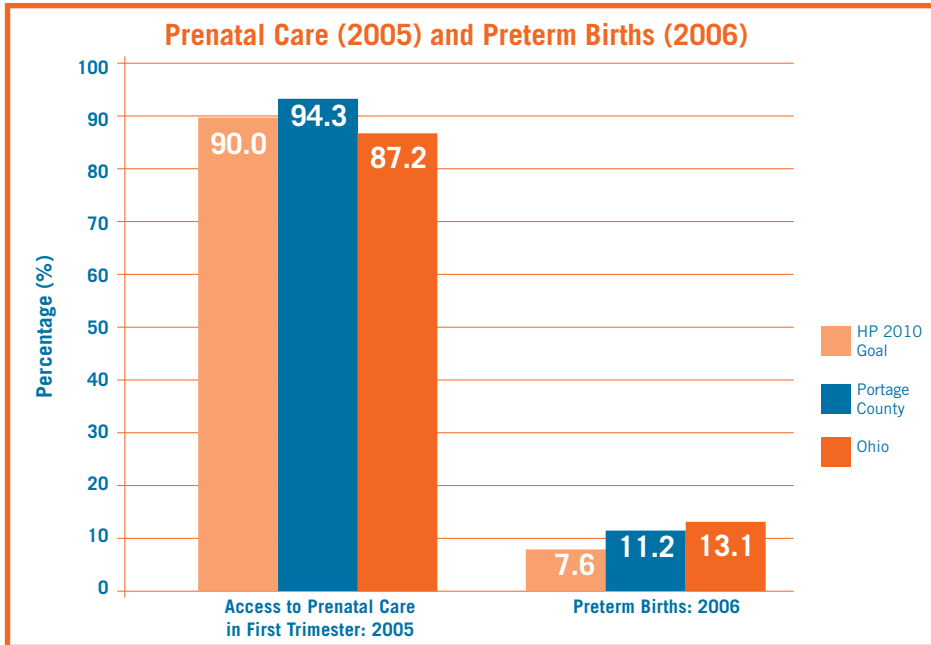


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	11	15
	2006*	14	19
Children receiving free/reduced price lunch	2001	15	22
	2007	20	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	6	12
	2006*	13	20
Children in child care assistance programs (Rate/1000)	2001	30	47
	2006	32	49
Births to adolescents (Rate/1000)	2001	14	22
	2006	14	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	19	27
	2005	32	41
4th graders less than proficient in math	2001	33	43
	2007	17	24
4th graders less than proficient in reading	2001	38	46
	2007	14	20
Students not graduating from high school	2001	13	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	9	11
	2006	11	10
Children in foster care (Rate/1000)	2001	8	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	7	15
	2006	8	14

*Refer to page 225 for details.

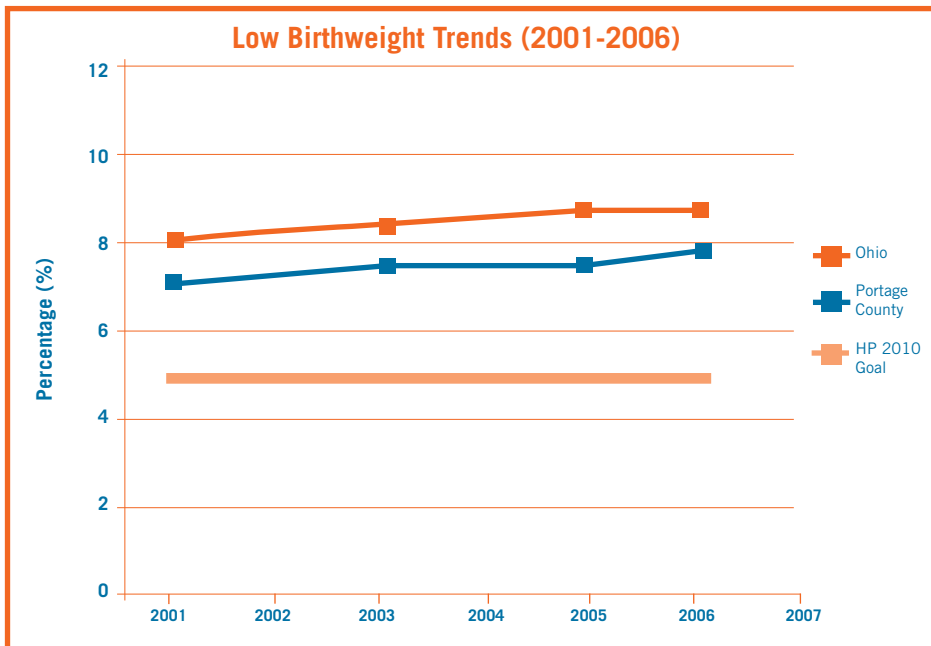


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 17	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	12.6
	Asthma Episode (%)	44
	Asthma ER Visits (%)	50.5
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	75.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	22.2
	% Who Could Not Receive Needed Dental Care	6.1
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	905
	Total EBLs	6
	Rate/1000	6.6

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	3	1.8
2005	#	Rate (per 1000 live births)
	8	4.9
2005	#	Rate (per 1000 live births)
	5	3.1
2005	#	Rate (per 1000 live births)
	3	1.8
2005	#	Rate (per 100,000 children ages 1-14)
	6	23.6

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Preble



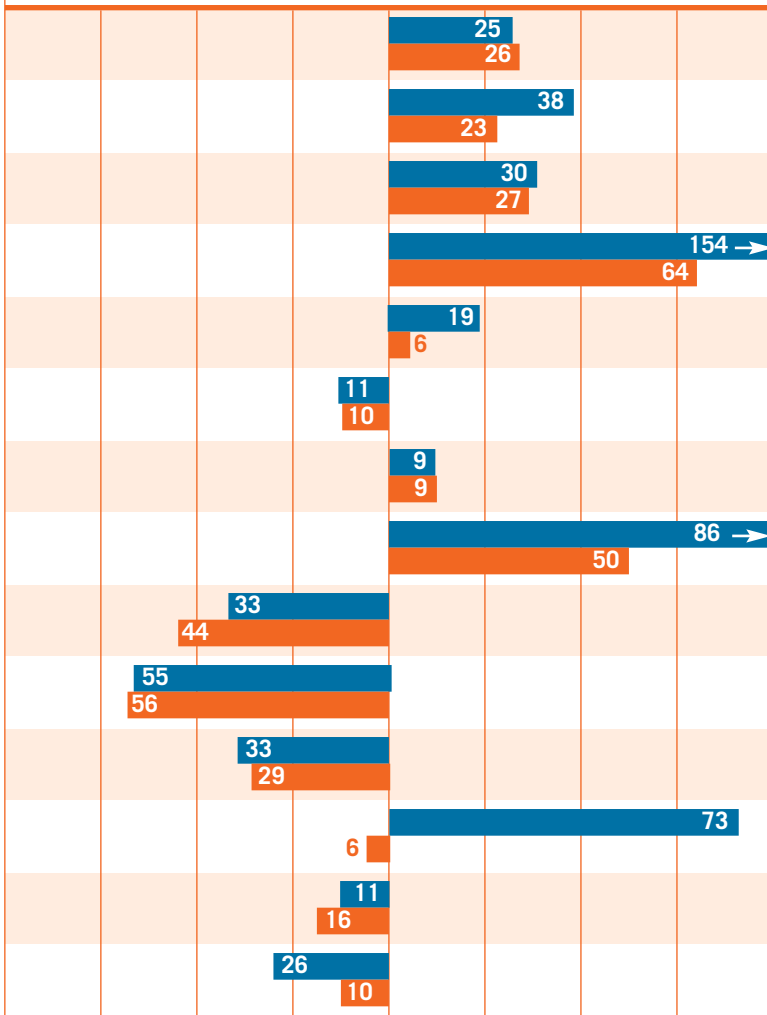
County Seat: Eaton
 County Type: Rural Non-Appalachian
 Total Population: 41,908
 Child Population: 9,869



Children's Defense Fund-Ohio

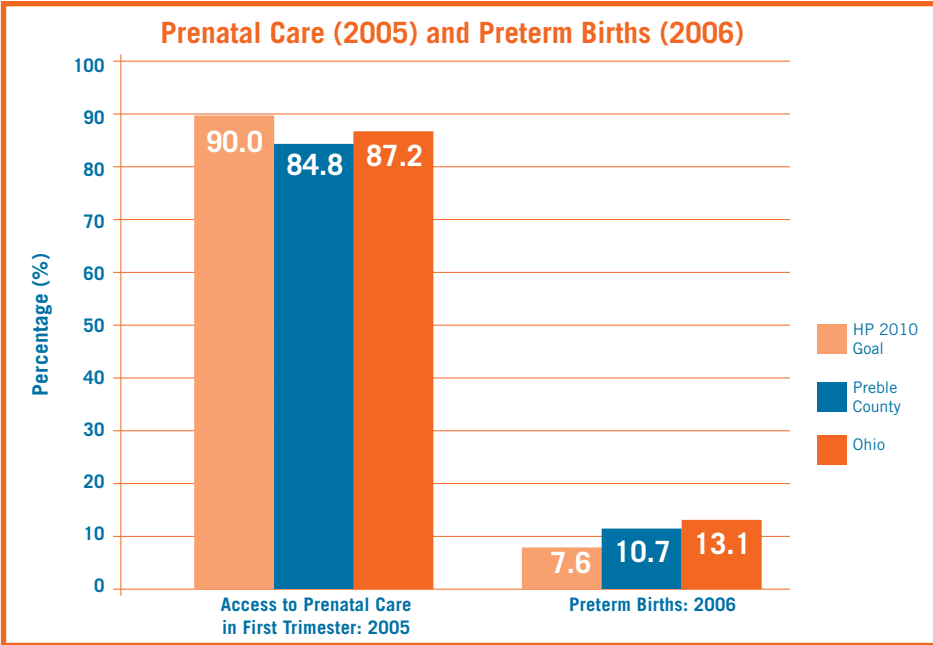


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2005*	13	19
Children receiving free/reduced price lunch	2001	15	22
	2007	21	27
Unemployment rate	2001	4	4
	2007	6	6
Children receiving food stamps	2001	5	12
	2006*	14	20
Children in child care assistance programs (Rate/1000)	2001	23	47
	2006	27	49
Births to adolescents (Rate/1000)	2001	20	22
	2006	17	20
Infants born at low birthweight	2001	7	8
	2006	7	9
Children in public health care programs	2001	18	27
	2005	34	41
4th graders less than proficient in math	2001	44	43
	2007	29	24
4th graders less than proficient in reading	2001	49	46
	2007	22	20
Students not graduating from high school	2001	15	19
	2006*	10	14
Children abused or neglected (Rate/1000)	2001	8	11
	2006	14	10
Children in foster care (Rate/1000)	2001	16	13
	2006	14	11
Adolescents adjudicated for felonies (Rate/1000)	2001	17	15
	2006	13	14

*Refer to page 225 for details.

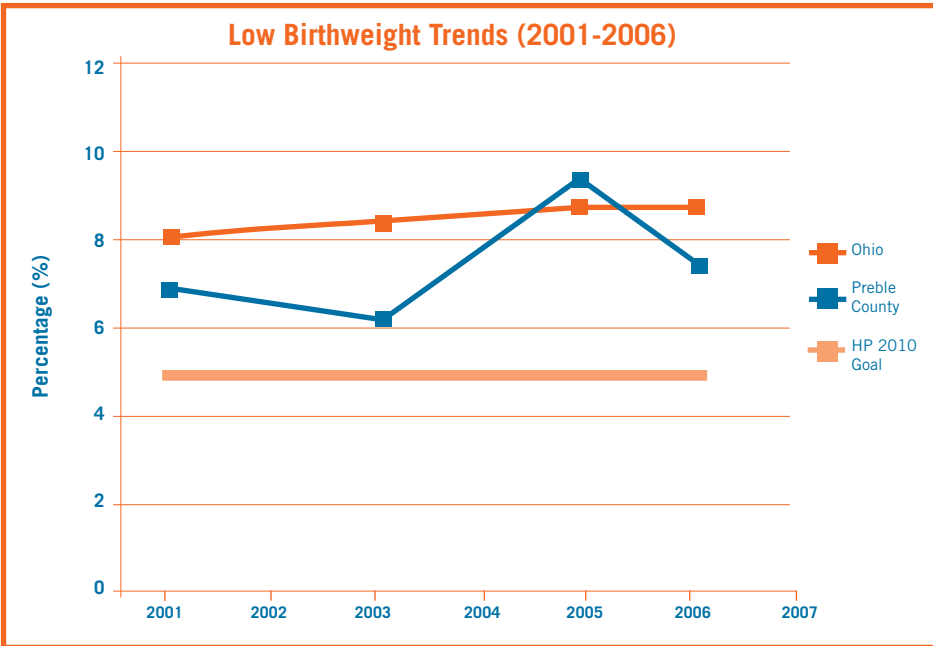


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 21.2	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	7.2
	Asthma Episode (%)	26.9
	Asthma ER Visits (%)	0
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	66.8
	% Never Visited a Dentist	12.4
	% Uninsured for Dental Care	27.1
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	5.4
	Total Children Screened (0-72 months)	236
	Total EBLs	1
	Rate/1000	4.2

Additional Goals:

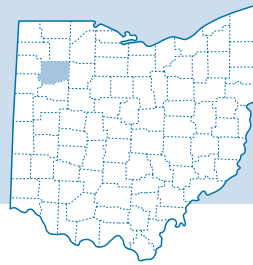
- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	1	1.9	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	7.7	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	3.9	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	3.9	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
2	26.7	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Putnam



County Seat: Ottawa
 County Type: Rural Non-Appalachian
 Total Population: 34,649
 Child Population: 9,225



Children's Defense Fund-Ohio

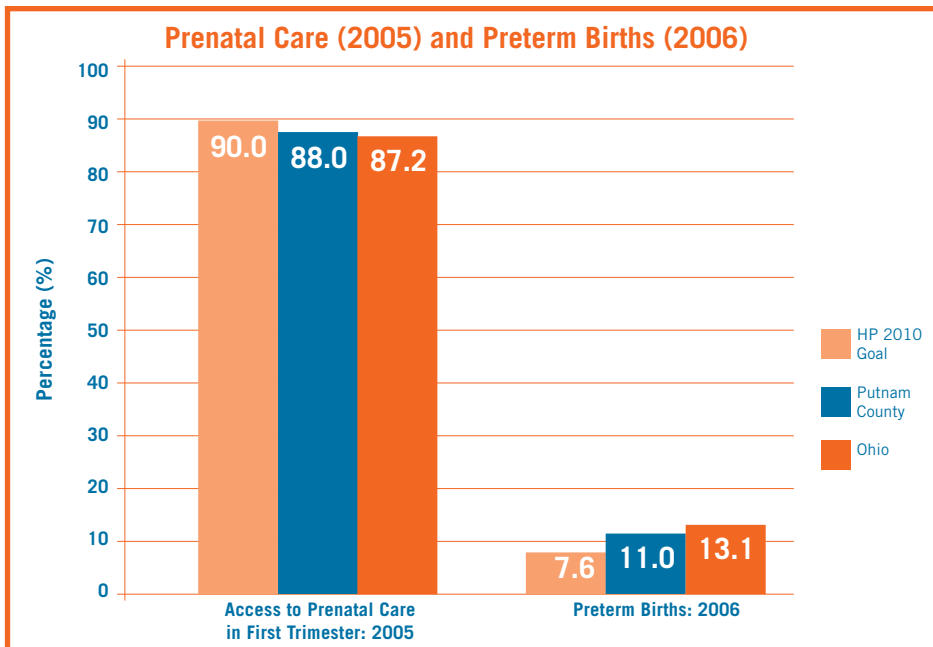


PERCENT CHANGE OVER TIME



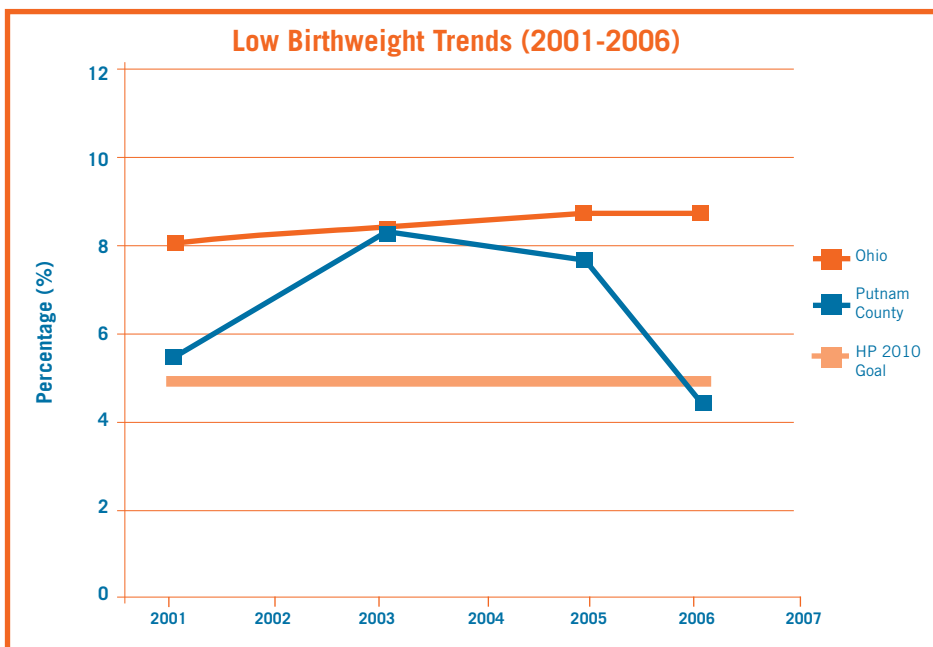
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	6	15
	2005*	7	19
Children receiving free/reduced price lunch	2001	7	22
	2007	13	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	5	12
	2006*	8	20
Children in child care assistance programs (Rate/1000)	2001	12	47
	2006	17	49
Births to adolescents (Rate/1000)	2001	11	22
	2006	8	20
Infants born at low birthweight	2001	6	8
	2006	4	9
Children in public health care programs	2001	11	27
	2005	22	41
4th graders less than proficient in math	2001	29	43
	2007	11	24
4th graders less than proficient in reading	2001	34	46
	2007	9	20
Students not graduating from high school	2001	4	19
	2006*	2	14
Children abused or neglected (Rate/1000)	2001	5	11
	2006	7	10
Children in foster care (Rate/1000)	2001	2	13
	2006	1	11
Adolescents adjudicated for felonies (Rate/1000)	2001	6	15
	2006	6	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 14.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 4.6	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 0	
	Asthma ER Visits (%): 0	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 67.2	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17.3	
	% Uninsured for Dental Care: 27	
	% Who Could Not Receive Needed Dental Care: 2.7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 213	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 0	
	Rate/1000: 0	



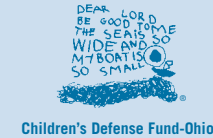
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	2	3.9
2005	#	Rate (per 1000 live births + late fetal deaths)
	2	4.5
2005	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
3	5.8	4.5
2005	Neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
2	3.9	2.9
2005	Post-neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
1	1.9	1.2
2005	Child Death (1-14 yrs)	HP2010 Goal
	#	Rate (per 100,000 children ages 1-14)
3	42.8	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Richland



County Seat: Mansfield
 County Type: Metropolitan
 Total Population: 126,390
 Child Population: 29,602

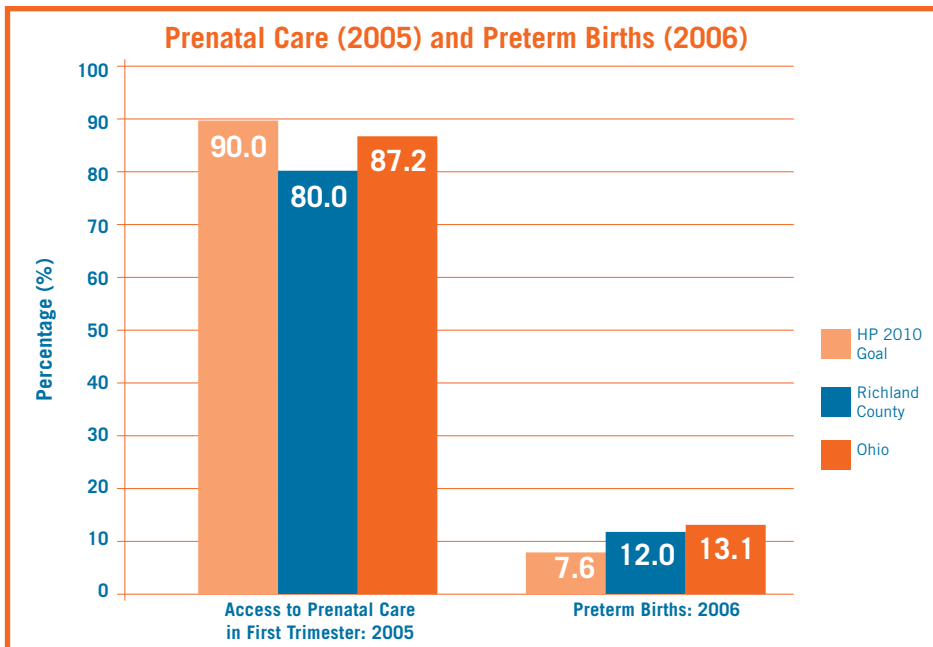


PERCENT CHANGE OVER TIME



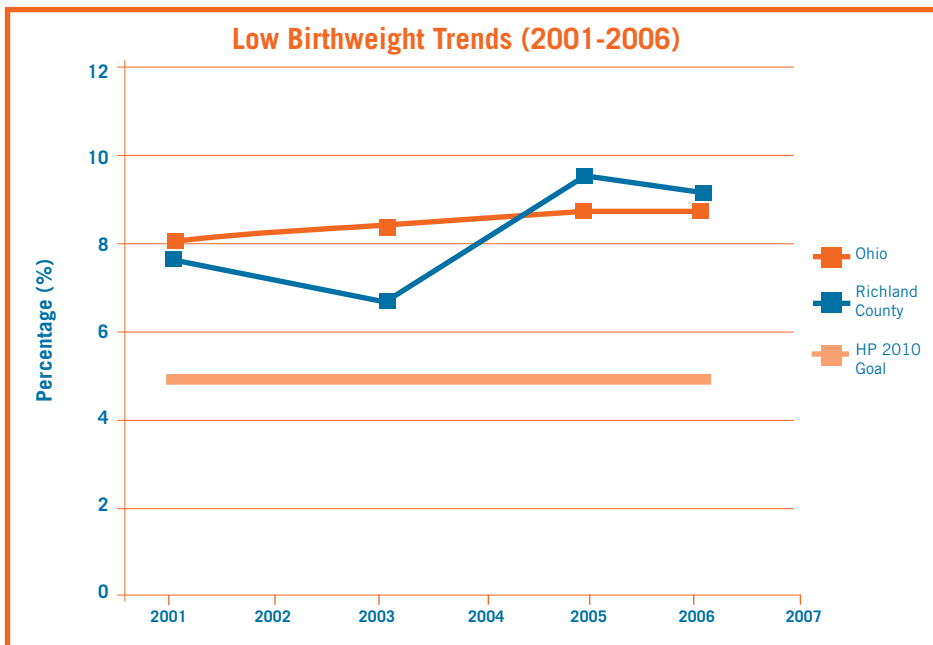
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	16	15
	2006*	23	19
Children receiving free/reduced price lunch	2001	23	22
	2007	32	27
Unemployment rate	2001	5	4
	2007	7	6
Children receiving food stamps	2001	12	12
	2006*	21	20
Children in child care assistance programs (Rate/1000)	2001	54	47
	2006	50	49
Births to adolescents (Rate/1000)	2001	29	22
	2006	28	20
Infants born at low birthweight	2001	8	8
	2006	9	9
Children in public health care programs	2001	29	27
	2005	45	41
4th graders less than proficient in math	2001	49	43
	2007	26	24
4th graders less than proficient in reading	2001	50	46
	2007	18	20
Students not graduating from high school	2001	11	19
	2006*	9	14
Children abused or neglected (Rate/1000)	2001	16	11
	2006	28	10
Children in foster care (Rate/1000)	2001	14	13
	2006	5	11
Adolescents adjudicated for felonies (Rate/1000)	2001	19	15
	2006	17	14

*Refer to page 225 for details.



HEALTH INDICATORS

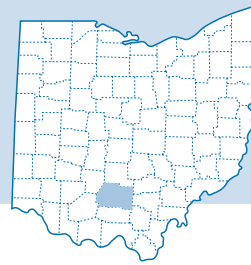
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 20.1	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	13
	Asthma Episode (%)	31.5
	Asthma ER Visits (%)	12.2
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	63.3
	% Never Visited a Dentist	18.9
	% Uninsured for Dental Care	21.5
		<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	2,032
	Total EBLs	24
	Rate/1000	11.8
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	18	11.3
	Rate (per 1000 live births + late fetal deaths): 4.5	
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	16	10.1
	Rate (per 1000 live births): 4.5	
Neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
9	5.7	
Rate (per 1000 live births): 2.9		
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
7	4.4	
Rate (per 1000 live births): 1.2		
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	
5	22	
Rate (per 100,000 children ages 1-14):		
<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 		

Ross



County Seat: Chillicothe
 County Type: Appalachian
 Total Population: 75,155
 Child Population: 16,784

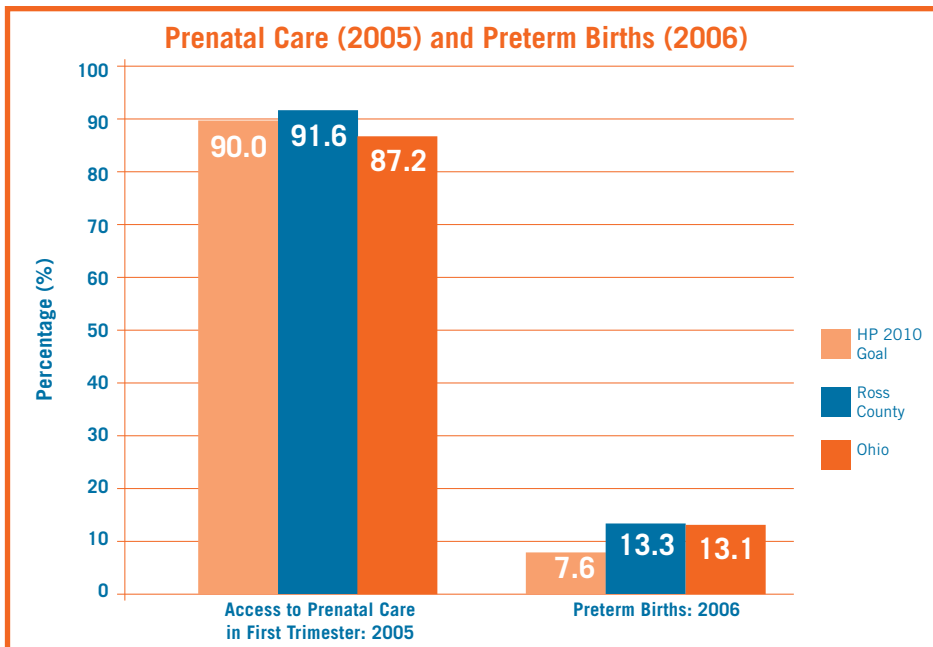


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	18	15
	2006*	23	19
Children receiving free/reduced price lunch	2001	20	22
	2007	29	27
Unemployment rate	2001	5	4
	2007	7	6
Children receiving food stamps	2001	17	12
	2006*	36	20
Children in child care assistance programs (Rate/1000)	2001	35	47
	2006	32	49
Births to adolescents (Rate/1000)	2001	25	22
	2006	28	20
Infants born at low birthweight	2001	9	8
	2006	10	9
Children in public health care programs	2001	35	27
	2005	57	41
4th graders less than proficient in math	2001	45	43
	2007	24	24
4th graders less than proficient in reading	2001	49	46
	2007	21	20
Students not graduating from high school	2001	16	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	15	11
	2006	17	10
Children in foster care (Rate/1000)	2001	15	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	6	15
	2006	8	14

*Refer to page 225 for details.

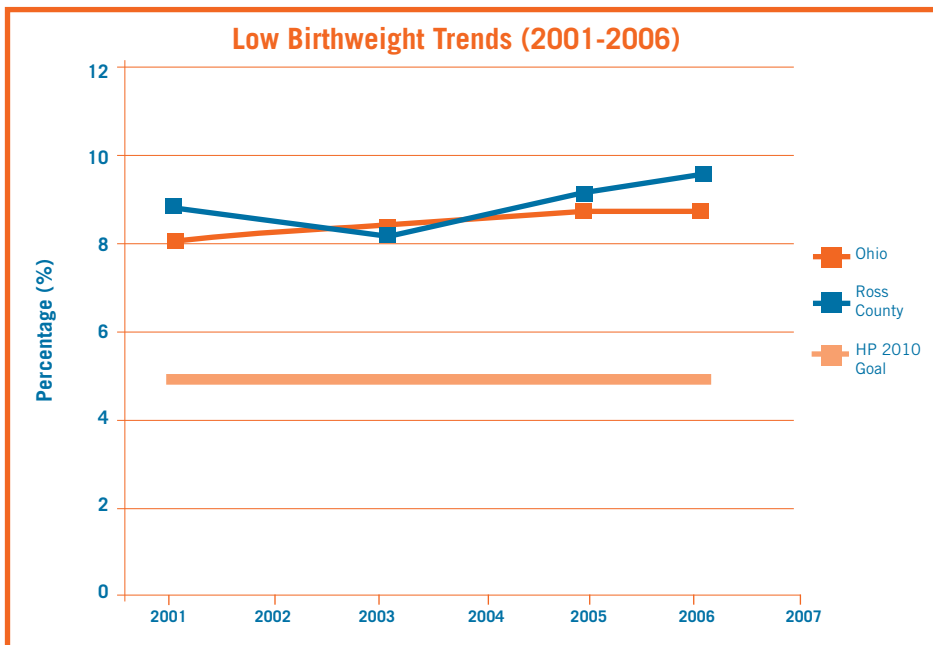


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 26.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	22.3
	Asthma Episode (%)	61.6
	Asthma ER Visits (%)	14.2
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	21.7
	% Who Could Not Receive Needed Dental Care	5.6
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	1,277
	Total EBLs	8
	Rate/1000	6.3

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



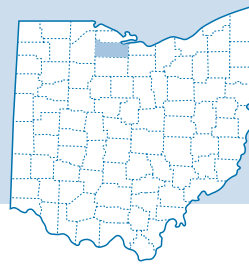
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	5	5.3
2005	#	Rate (per 1000 live births)
	9	9.6
2005	#	Rate (per 1000 live births)
	6	6.4
2005	#	Rate (per 1000 live births)
	3	3.2
2005	#	Rate (per 100,000 children ages 1-14)
	5	38.9

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

Sandusky



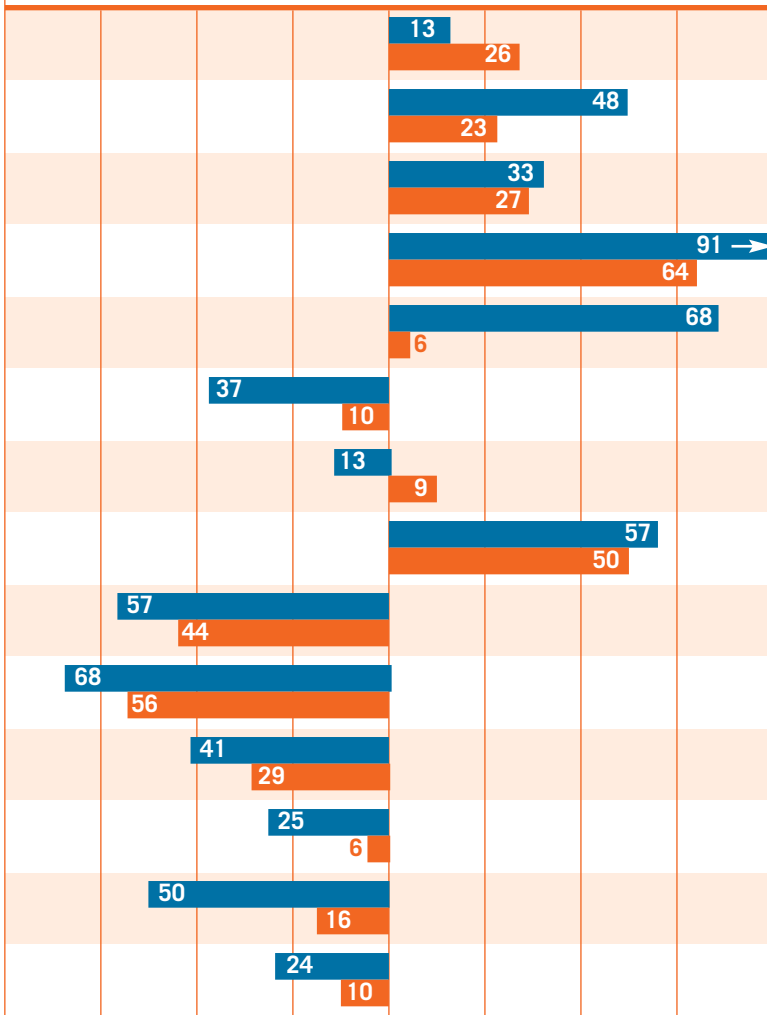
County Seat: Fremont
 County Type: Rural Non-Appalachian
 Total Population: 61,167
 Child Population: 14,944



Children's Defense Fund-Ohio

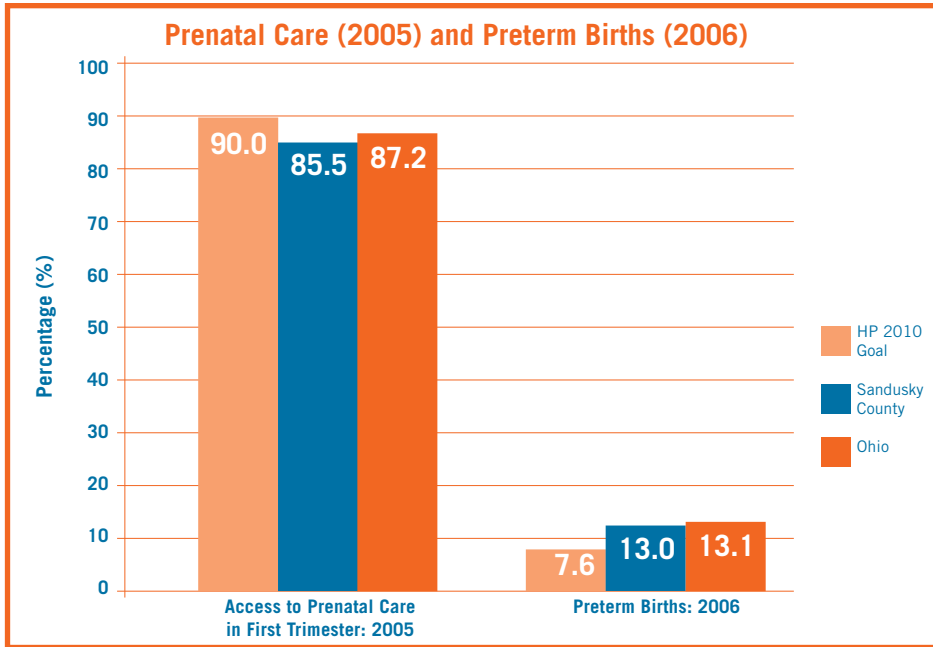


PERCENT CHANGE OVER TIME



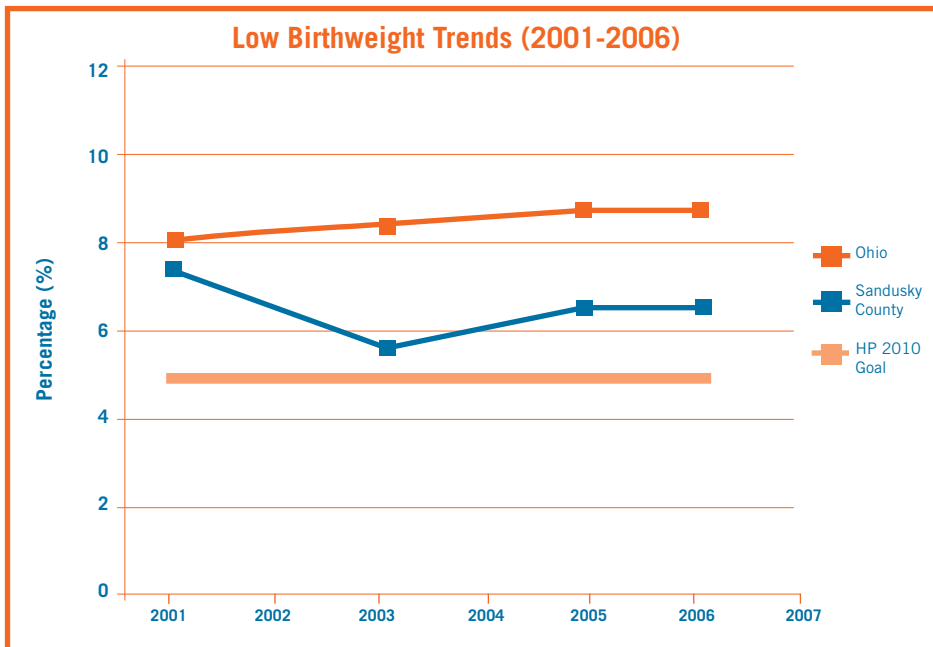
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	11	15
	2005*	13	19
Children receiving free/reduced price lunch	2001	18	22
	2007	26	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	8	12
	2006*	16	20
Children in child care assistance programs (Rate/1000)	2001	32	47
	2006	53	49
Births to adolescents (Rate/1000)	2001	30	22
	2006	19	20
Infants born at low birthweight	2001	8	8
	2006	7	9
Children in public health care programs	2001	25	27
	2005	39	41
4th graders less than proficient in math	2001	44	43
	2007	19	24
4th graders less than proficient in reading	2001	46	46
	2007	15	20
Students not graduating from high school	2001	10	19
	2006*	6	14
Children abused or neglected (Rate/1000)	2001	18	11
	2006	13	10
Children in foster care (Rate/1000)	2001	9	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	10	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 27.1	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	8.1
	Asthma Episode (%)	44.2
	Asthma ER Visits (%)	30.7
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	67.4
	% Never Visited a Dentist	12.7
	% Uninsured for Dental Care	23
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	4.1
	Total Children Screened (0-72 months)	611
	Total EBLs Rate/1000	11
		18.0
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	6	7.5	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	5	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	5	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
3	26	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

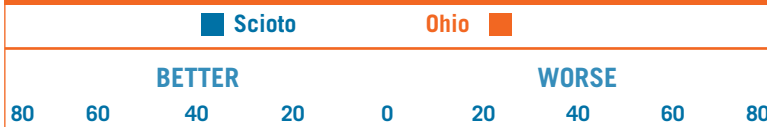
Scioto



County Seat: Portsmouth
 County Type: Appalachian
 Total Population: 76,068
 Child Population: 17,837

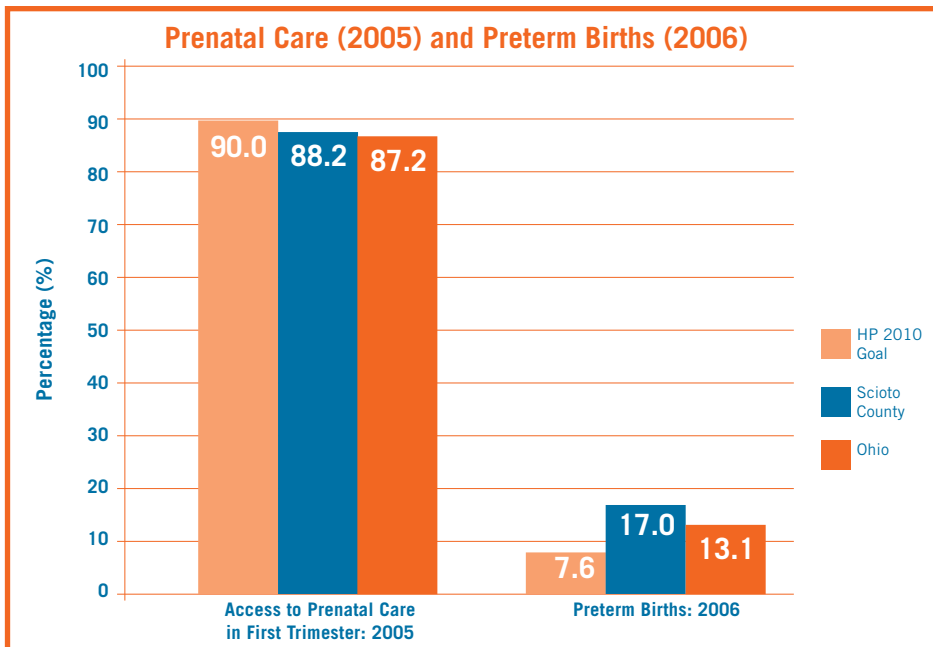


PERCENT CHANGE OVER TIME



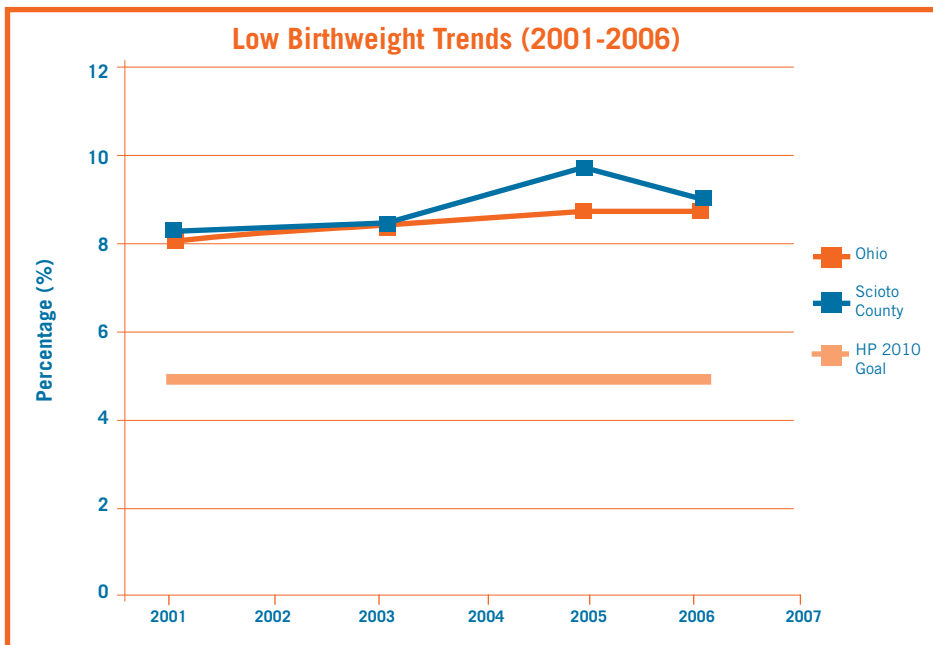
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	26	15
	2006*	30	19
Children receiving free/reduced price lunch	2001	32	23
	2007	38	27
Unemployment rate	2001	7	9
	2007	7	27
Children receiving food stamps	2001	27	30
	2006*	35	64
Children in child care assistance programs (Rate/1000)	2001	48	11
	2006	53	6
Births to adolescents (Rate/1000)	2001	25	27
	2006	32	10
Infants born at low birthweight	2001	8	11
	2006	9	9
Children in public health care programs	2001	53	22
	2005	65	50
4th graders less than proficient in math	2001	46	38
	2007	29	44
4th graders less than proficient in reading	2001	49	49
	2007	25	56
Students not graduating from high school	2001	17	72
	2006*	5	29
Children abused or neglected (Rate/1000)	2001	4	78
	2006	7	6
Children in foster care (Rate/1000)	2001	7	78
	2006	13	16
Adolescents adjudicated for felonies (Rate/1000)	2001	23	68
	2006	7	10

*Refer to page 225 for details.



HEALTH INDICATORS

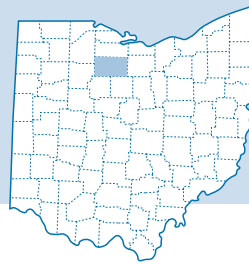
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 29	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 18.8	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 45.9	
	Asthma ER Visits (%): 17.8	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 65	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 15.7	
	% Uninsured for Dental Care: 21.9	
	% Who Could Not Receive Needed Dental Care: 7	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 568	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 11	
	Rate/1000: 19.4	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 8	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 8.3	
Year	Infant Mortality	HP2010 Goal
2005	#: 6	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 6.2	
Year	Neonatal Mortality	HP2010 Goal
2005	#: 4	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 4.2	
Year	Post-neonatal Mortality	HP2010 Goal
2005	#: 2	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 2.1	
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#: 3	Rate (per 100,000 children ages 1-14): 16.5 (10-14 yrs)
	Rate (per 100,000 children ages 1-14): 22.3	

Seneca



County Seat: Tiffin
 County Type: Rural Non-Appalachian
 Total Population: 56,869
 Child Population: 13,741



Children's Defense Fund-Ohio

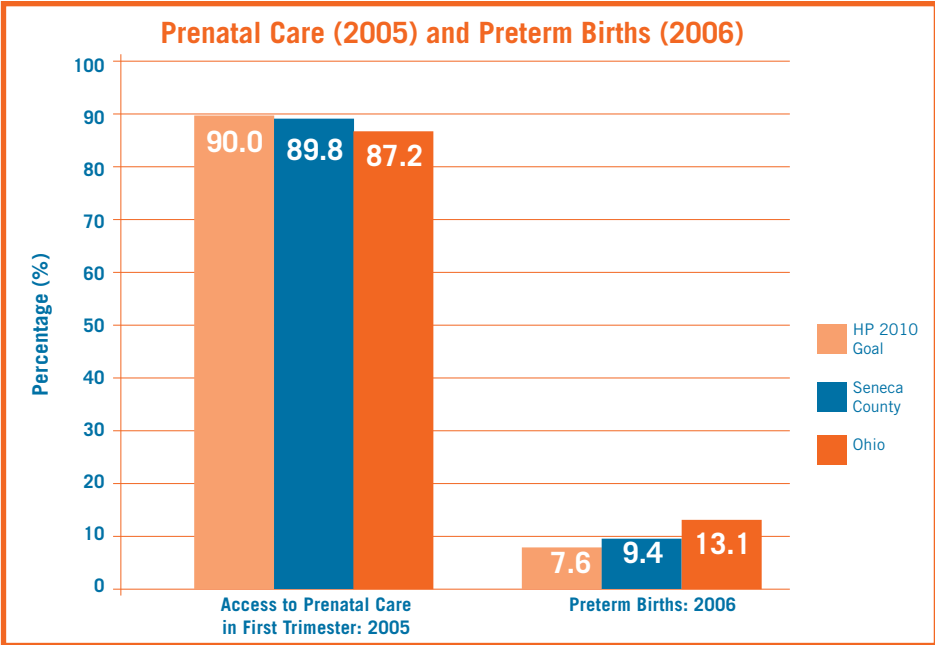


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	12	15
	2005*	14	19
Children receiving free/reduced price lunch	2001	18	22
	2007	25	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	8	12
	2006*	16	20
Children in child care assistance programs (Rate/1000)	2001	33	47
	2006	29	49
Births to adolescents (Rate/1000)	2001	22	22
	2006	17	20
Infants born at low birthweight	2001	10	8
	2006	7	9
Children in public health care programs	2001	16	27
	2005	39	41
4th graders less than proficient in math	2001	39	43
	2007	15	24
4th graders less than proficient in reading	2001	43	46
	2007	13	20
Students not graduating from high school	2001	20	19
	2006*	12	14
Children abused or neglected (Rate/1000)	2001	12	11
	2006	14	10
Children in foster care (Rate/1000)	2001	6	13
	2006	8	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	13	14

*Refer to page 225 for details.

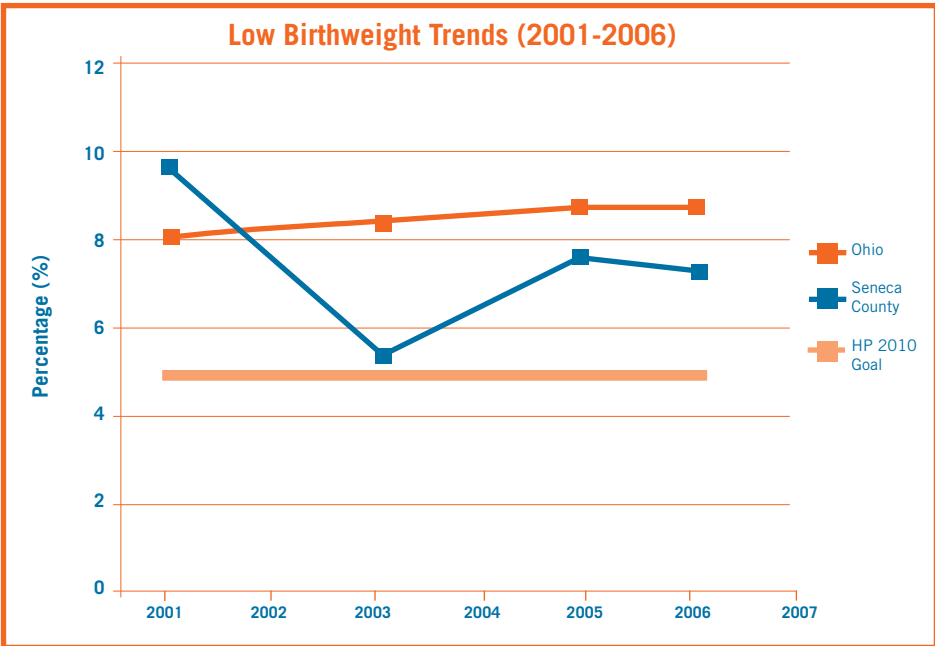


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 21.7	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	6.8
	Asthma Episode (%)	38.7
	Asthma ER Visits (%)	7.4
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	67.4
	% Never Visited a Dentist	12.7
	% Uninsured for Dental Care	23
2006	% Who Could Not Receive Needed Dental Care	4.1
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	597
	Total EBLs Rate/1000	11
		18.4
		Eliminate Elevated Blood Lead Levels in Children

Additional Goals:

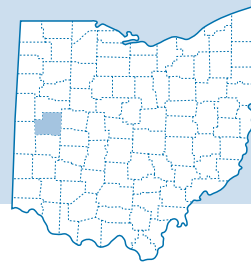
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	1	1.5	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	4.4	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	1.5	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	2	2.9	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
6	57.8	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Shelby



County Seat: Sidney
 County Type: Rural Non-Appalachian
 Total Population: 48,579
 Child Population: 13,300



Children's Defense Fund-Ohio

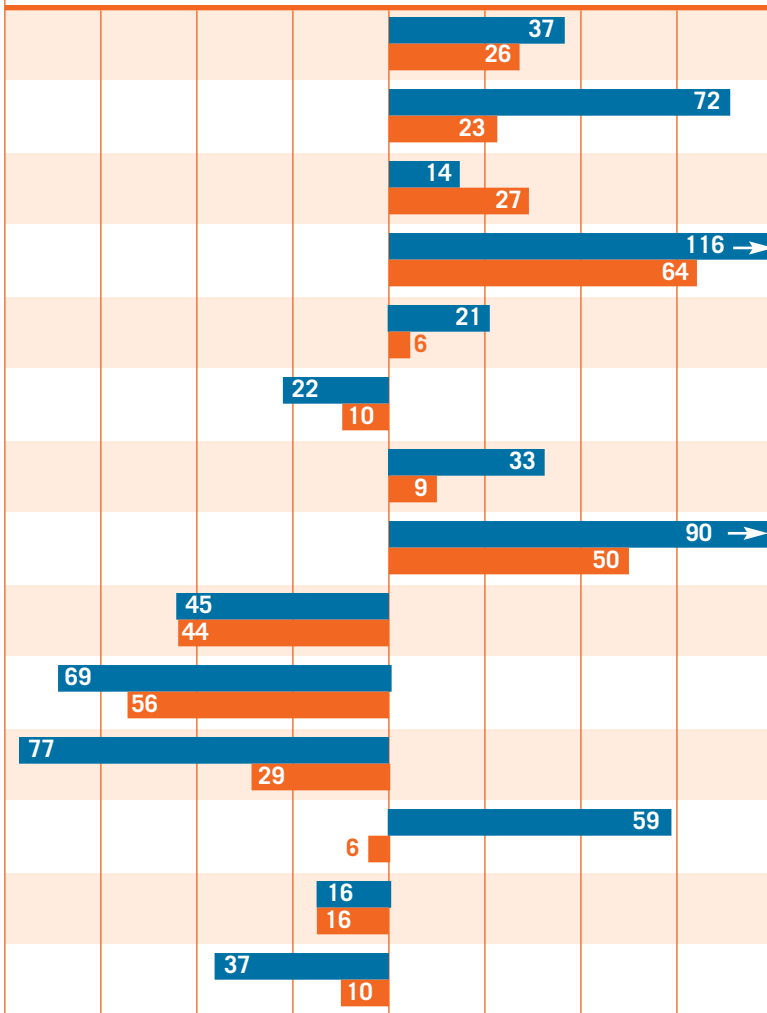


PERCENT CHANGE OVER TIME

Shelby Ohio

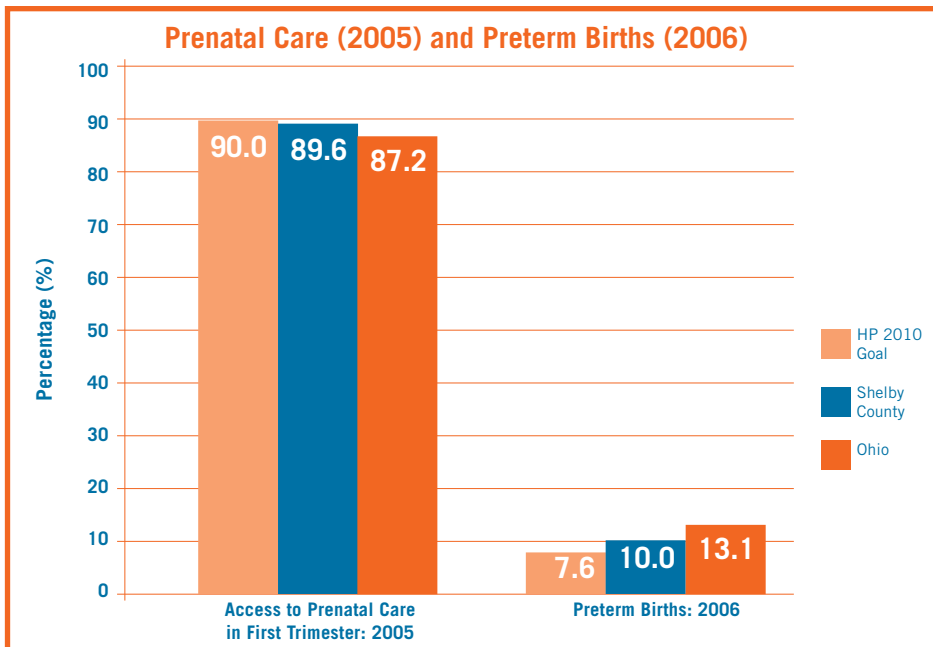
BETTER WORSE

80 60 40 20 0 20 40 60 80



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2005*	14	19
Children receiving free/reduced price lunch	2001	12	22
	2007	21	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	5	12
	2006*	11	20
Children in child care assistance programs (Rate/1000)	2001	29	47
	2006	35	49
Births to adolescents (Rate/1000)	2001	26	22
	2006	20	20
Infants born at low birthweight	2001	5	8
	2006	7	9
Children in public health care programs	2001	16	27
	2005	31	41
4th graders less than proficient in math	2001	33	43
	2007	18	24
4th graders less than proficient in reading	2001	41	46
	2007	13	20
Students not graduating from high school	2001	14	19
	2006*	3	14
Children abused or neglected (Rate/1000)	2001	5	11
	2006	8	10
Children in foster care (Rate/1000)	2001	4	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	15	15
	2006	10	14

*Refer to page 225 for details.

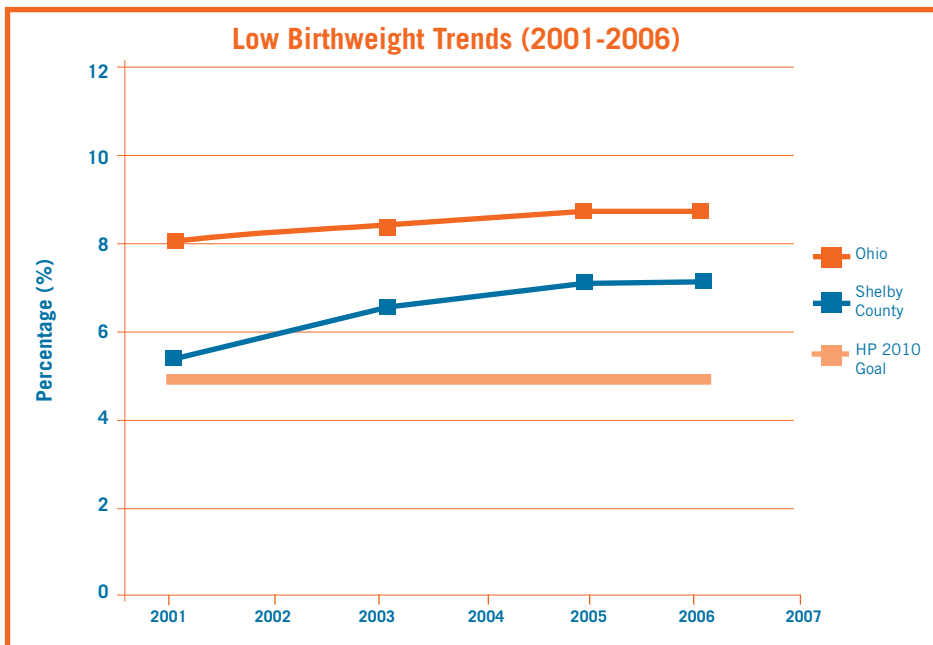


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 22.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	4.9
	Asthma Episode (%)	67.9
	Asthma ER Visits (%)	13.2
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	67.2
	% Never Visited a Dentist	17.3
	% Uninsured for Dental Care	27
	% Who Could Not Receive Needed Dental Care	2.7
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	526
	Total EBLs	6
	Rate/1000	11.4

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



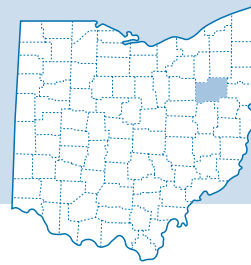
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	3	4.2
2005	#	Rate (per 1000 live births)
	6	8.4
2005	#	Rate (per 1000 live births)
	4	5.6
2005	#	Rate (per 1000 live births)
	2	2.8
2005	#	Rate (per 100,000 children ages 1-14)
	2	19.5

HP2010 Goals:

- Rate (per 1000 live births + late fetal deaths): 4.5
- Rate (per 1000 live births): 4.5
- Rate (per 1000 live births): 2.9
- Rate (per 1000 live births): 1.2
- Rate (per 100,000 children ages 1-14):
 - 20.0 (1-4 yrs)
 - 13.0 (5-9 yrs)
 - 16.5 (10-14 yrs)

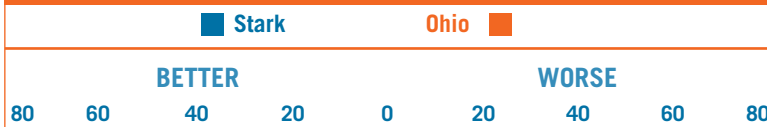
Stark



County Seat: Canton
 County Type: Metropolitan
 Total Population: 378,589
 Child Population: 88,386

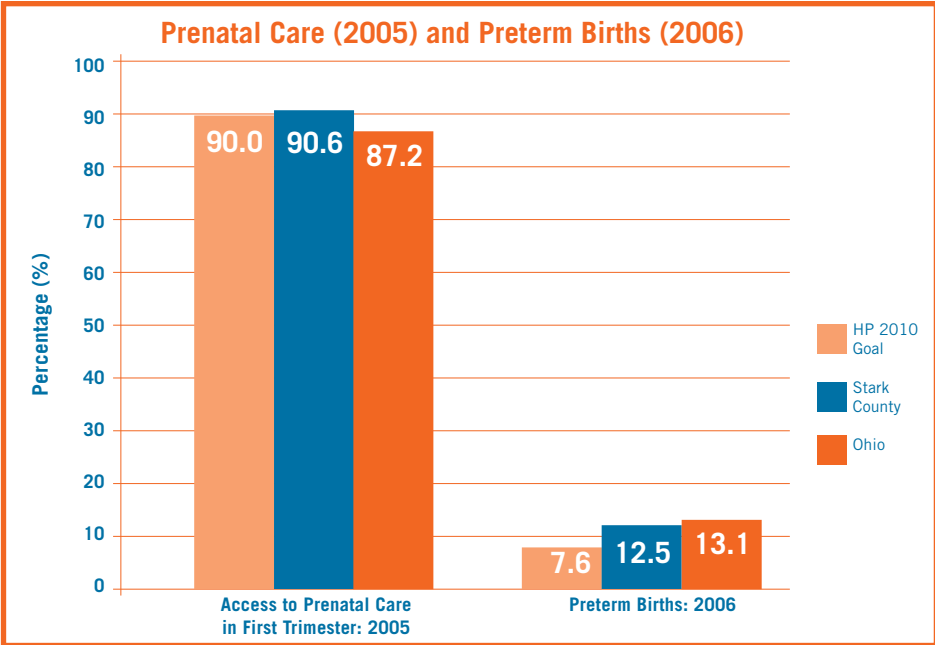


PERCENT CHANGE OVER TIME



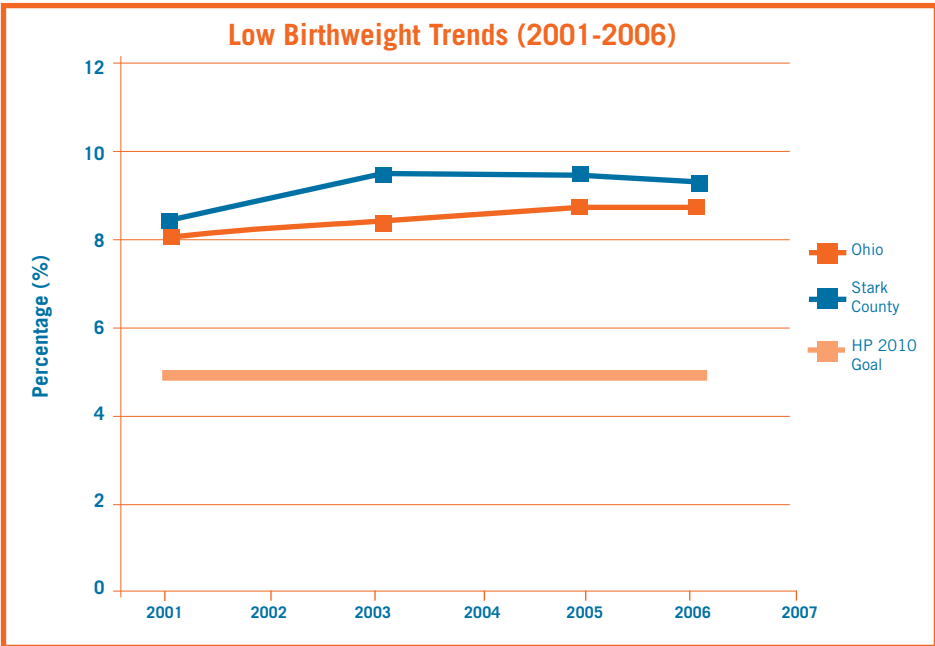
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	15	15
	2006*	18	19
Children receiving free/reduced price lunch	2001	23	22
	2007	27	27
Unemployment rate	2001	4	4
	2007	6	6
Children receiving food stamps	2001	11	12
	2006*	18	20
Children in child care assistance programs (Rate/1000)	2001	38	47
	2006	46	49
Births to adolescents (Rate/1000)	2001	23	22
	2006	15	20
Infants born at low birthweight	2001	8	8
	2006	9	9
Children in public health care programs	2001	26	27
	2005	39	41
4th graders less than proficient in math	2001	41	43
	2007	20	24
4th graders less than proficient in reading	2001	45	46
	2007	27	20
Students not graduating from high school	2001	16	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	20	11
	2006	12	10
Children in foster care (Rate/1000)	2001	15	13
	2006	14	11
Adolescents adjudicated for felonies (Rate/1000)	2001	14	15
	2006	14	14

*Refer to page 225 for details.



HEALTH INDICATORS

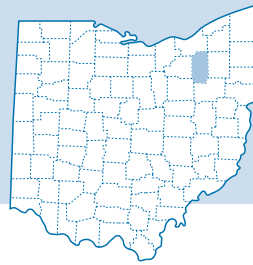
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 14.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 11.9	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 58.8	
	Asthma ER Visits (%): 23.9	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 63.3	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 18.9	
	% Uninsured for Dental Care: 21.5	
	% Who Could Not Receive Needed Dental Care: 3.8	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 4,669	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 44	
	Rate/1000: 9.4	



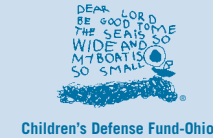
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 23	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 5.2	
	Rate (per 1000 live births): 8.8	
Infant Mortality		HP2010 Goal
2005	#: 39	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 8.8	
	Rate (per 1000 live births): 4.3	
Neonatal Mortality		HP2010 Goal
2005	#: 20	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 4.5	
	Rate (per 1000 live births): 4.3	
Post-neonatal Mortality		HP2010 Goal
2005	#: 19	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 4.3	
	Rate (per 1000 live births): 4.3	
Child Death (1-14 yrs)		HP2010 Goal
2005	#: 12	Rate (per 100,000 children ages 1-14): 17.7
	Rate (per 100,000 children ages 1-14): 17.7	
	Rate (per 100,000 children ages 1-14): 17.7	

Summit



County Seat: Akron
 County Type: Metropolitan
 Total Population: 545,051
 Child Population: 130,575

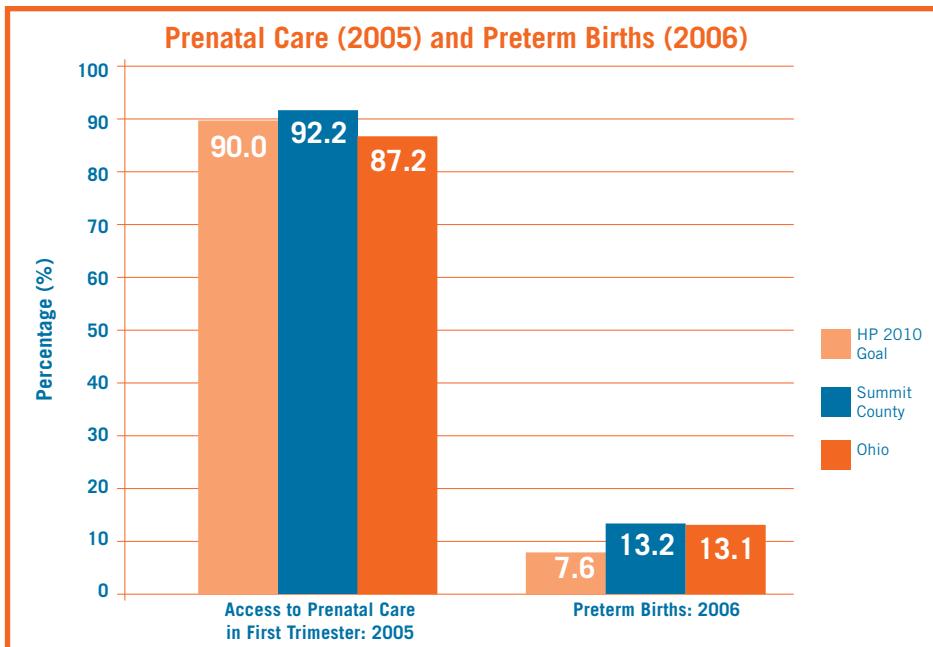


PERCENT CHANGE OVER TIME



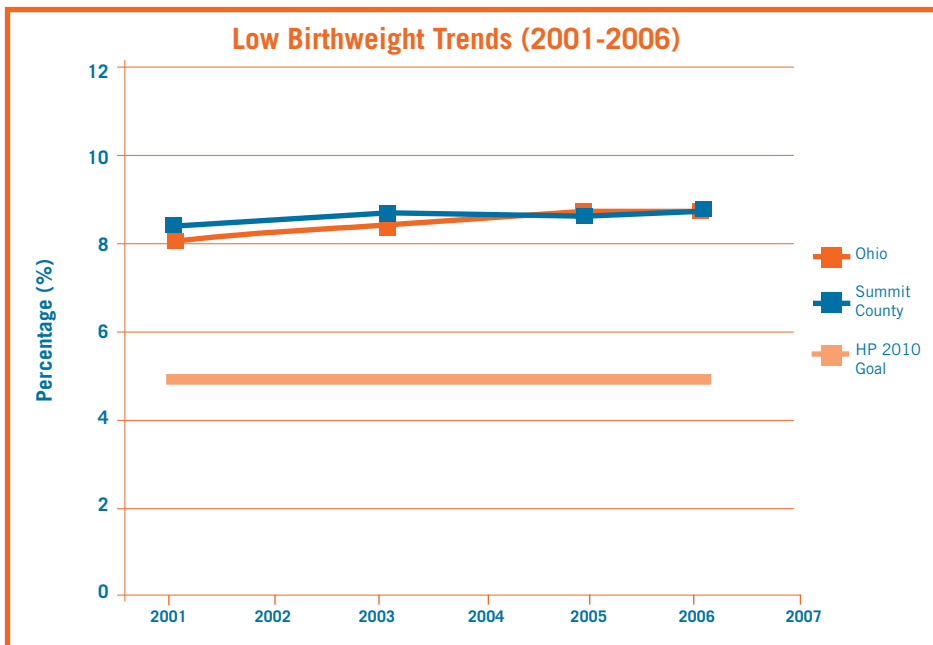
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	14	15
	2006*	16	19
Children receiving free/reduced price lunch	2001	22	22
	2007	28	27
Unemployment rate	2001	5	4
	2007	5	6
Children receiving food stamps	2001	14	12
	2006*	19	20
Children in child care assistance programs (Rate/1000)	2001	33	47
	2006	48	49
Births to adolescents (Rate/1000)	2001	23	22
	2006	18	20
Infants born at low birthweight	2001	8	8
	2006	9	9
Children in public health care programs	2001	28	27
	2005	38	41
4th graders less than proficient in math	2001	43	43
	2007	23	24
4th graders less than proficient in reading	2001	46	46
	2007	18	20
Students not graduating from high school	2001	17	19
	2006*	15	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	10	10
Children in foster care (Rate/1000)	2001	18	13
	2006	18	11
Adolescents adjudicated for felonies (Rate/1000)	2001	24	15
	2006	19	14

*Refer to page 225 for details.



HEALTH INDICATORS

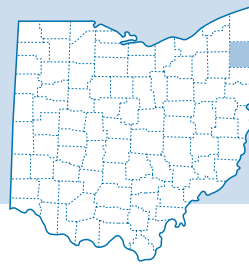
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 13.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 10.5	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 53.2	
	Asthma ER Visits (%): 25.8	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 69.4	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 15.7	
	% Uninsured for Dental Care: 24	
	% Who Could Not Receive Needed Dental Care: 5.1	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 7,272	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 100	
	Rate/1000: 13.8	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#: 43	Rate (per 1000 live births + late fetal deaths): 4.5
	Rate (per 1000 live births + late fetal deaths): 6.5	
	#: 49	
Infant Mortality		HP2010 Goal
2005	#: 49	Rate (per 1000 live births): 4.5
	Rate (per 1000 live births): 7.5	
	#: 34	
Neonatal Mortality		HP2010 Goal
2005	#: 34	Rate (per 1000 live births): 2.9
	Rate (per 1000 live births): 5.2	
	#: 15	
Post-neonatal Mortality		HP2010 Goal
2005	#: 15	Rate (per 1000 live births): 1.2
	Rate (per 1000 live births): 2.3	
	#: 13	
Child Death (1-14 yrs)		HP2010 Goal
2005	#: 13	Rate (per 100,000 children ages 1-14): 12.9
	Rate (per 100,000 children ages 1-14): 20.0 (1-4 yrs)	
	Rate (per 100,000 children ages 1-14): 13.0 (5-9 yrs)	
		Rate (per 100,000 children ages 1-14): 16.5 (10-14 yrs)

Trumbull



County Seat: Warren
 County Type: Suburban
 Total Population: 215,432
 Child Population: 48,843

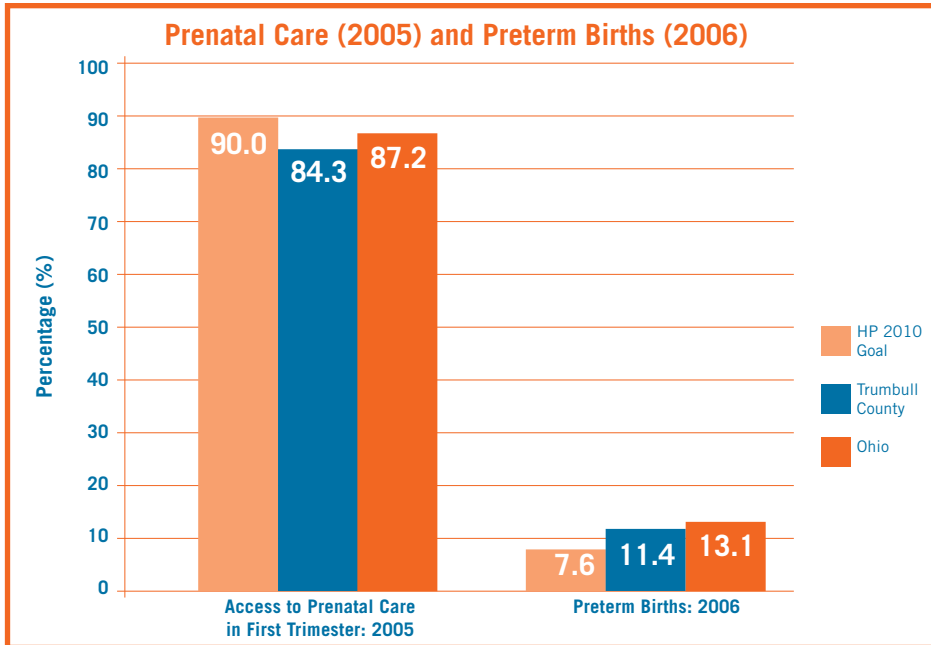


PERCENT CHANGE OVER TIME



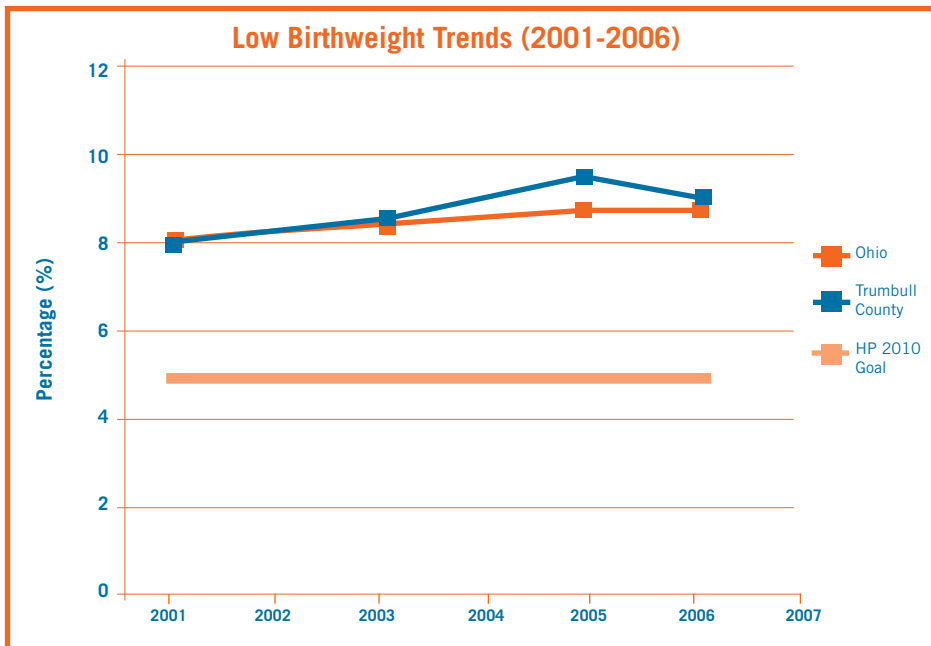
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	17	15
	2006*	17	19
Children receiving free/reduced price lunch	2001	21	22
	2007	29	27
Unemployment rate	2001	6	4
	2007	6	6
Children receiving food stamps	2001	13	12
	2006*	20	20
Children in child care assistance programs (Rate/1000)	2001	59	47
	2006	53	49
Births to adolescents (Rate/1000)	2001	20	22
	2006	17	20
Infants born at low birthweight	2001	8	8
	2006	9	9
Children in public health care programs	2001	29	27
	2005	46	41
4th graders less than proficient in math	2001	40	43
	2007	20	24
4th graders less than proficient in reading	2001	42	46
	2007	17	20
Students not graduating from high school	2001	16	19
	2006*	10	14
Children abused or neglected (Rate/1000)	2001	1	11
	2006	4	10
Children in foster care (Rate/1000)	2001	5	13
	2006	6	11
Adolescents adjudicated for felonies (Rate/1000)	2001	11	15
	2006	10	14

*Refer to page 225 for details.



HEALTH INDICATORS

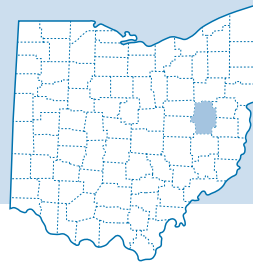
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	22
	Asthma Episode (%)	41.8
	Asthma ER Visits (%)	26.3
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	65.7
	% Never Visited a Dentist	17.4
	% Uninsured for Dental Care	19.4
% Who Could Not Receive Needed Dental Care	2.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	1,790
	Total EBLs	16
	Rate/1000	8.9
		Eliminate Elevated Blood Lead Levels in Children



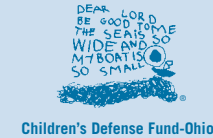
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	17	7.2	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	19	8	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	14	5.9	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	5	2.1	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
10	26.5	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Tuscarawas



County Seat: New Philadelphia
 County Type: Appalachian
 Total Population: 91,209
 Child Population: 21,609



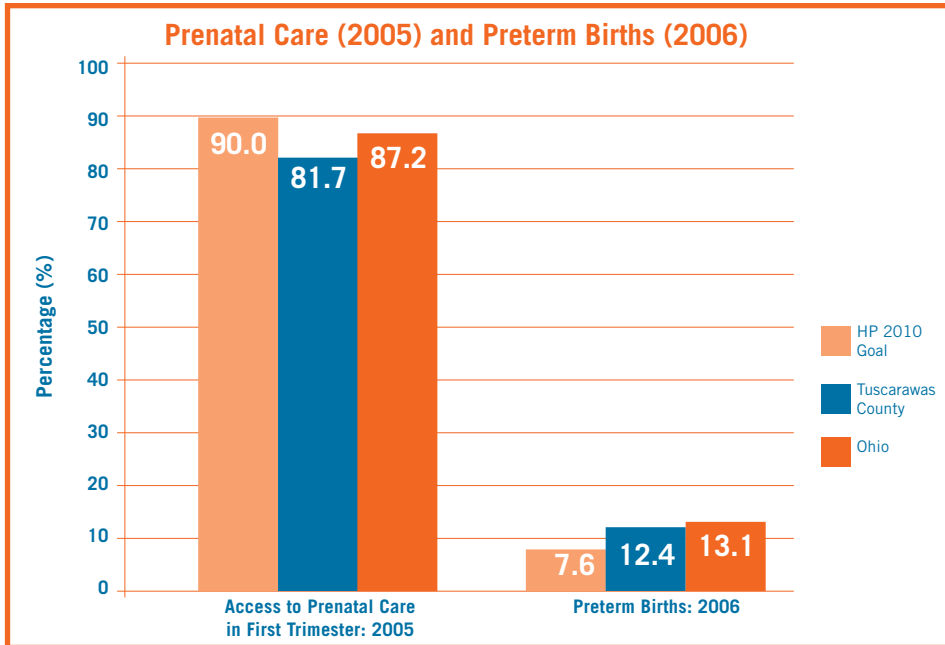
PERCENT CHANGE OVER TIME

■ Tuscarawas ■ Ohio



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	14	15
	2006*	17	19
Children receiving free/reduced price lunch	2001	17	22
	2007	26	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	9	12
	2006*	16	20
Children in child care assistance programs (Rate/1000)	2001	32	47
	2006	29	49
Births to adolescents (Rate/1000)	2001	12	22
	2006	12	20
Infants born at low birthweight	2001	6	8
	2006	8	9
Children in public health care programs	2001	24	27
	2005	39	41
4th graders less than proficient in math	2001	34	43
	2007	17	24
4th graders less than proficient in reading	2001	40	46
	2007	15	20
Students not graduating from high school	2001	11	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	10	11
	2006	11	10
Children in foster care (Rate/1000)	2001	5	13
	2006	11	11
Adolescents adjudicated for felonies (Rate/1000)	2001	6	15
	2006	5	14

*Refer to page 225 for details.



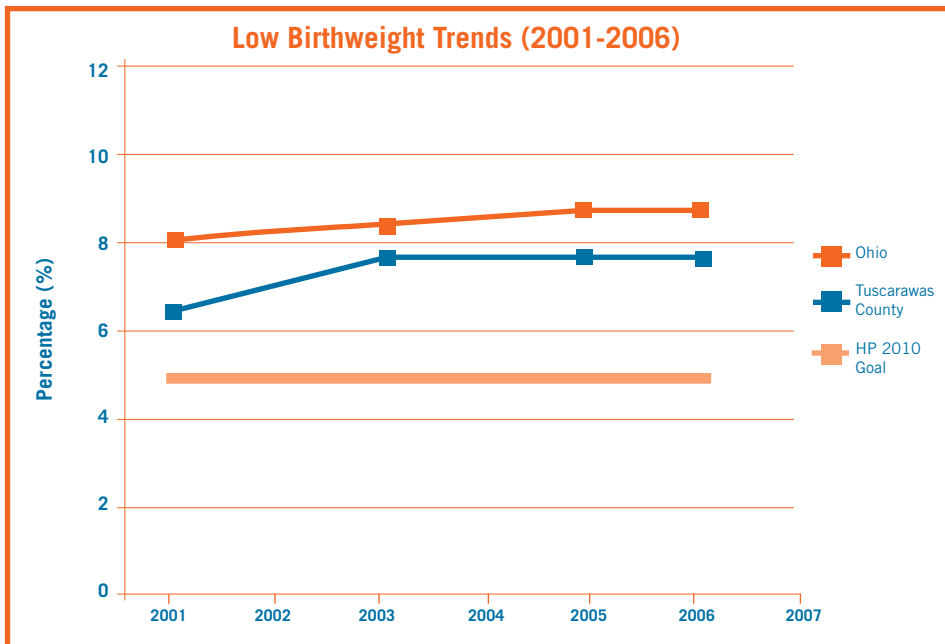
HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 15.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	6.7
	Asthma Episode (%)	74.6
	Asthma ER Visits (%)	30.4
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	66.9
	% Never Visited a Dentist	17
	% Uninsured for Dental Care	27.6
	% Who Could Not Receive Needed Dental Care	6.1
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	771
	Total EBLs	12
	Rate/1000	15.6

HP2010 Goals for Dental Care:

- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year

HP2010 Goal for Lead Exposure: Eliminate Elevated Blood Lead Levels in Children



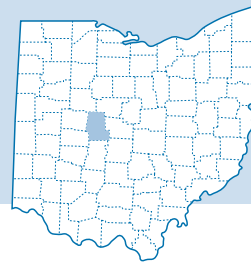
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	10	8.3
2005	#	Rate (per 1000 live births + late fetal deaths)
	6	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	2.5
2005	#	Rate (per 1000 live births)
	3	2.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	2.5
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	3	2.5
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	3	18.1

HP2010 Goals for Child Death (1-14 yrs):

- 20.0 (1-4 yrs)
- 13.0 (5-9 yrs)
- 16.5 (10-14 yrs)

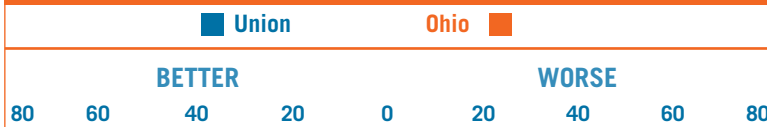
Union



County Seat: Marysville
 County Type: Suburban
 Total Population: 46,517
 Child Population: 12,197

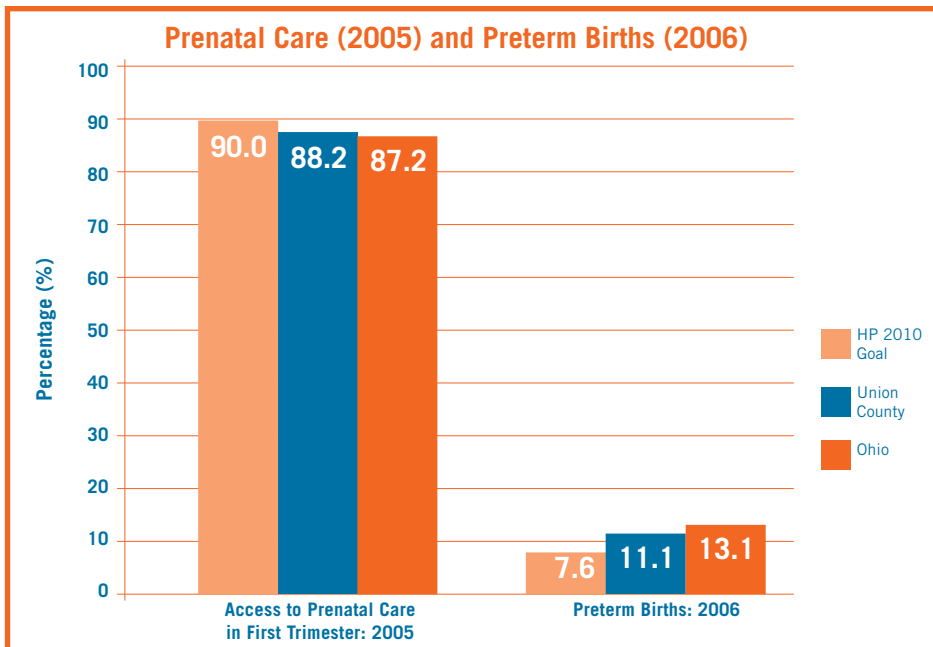


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	7	15
	2005*	8	19
Children receiving free/reduced price lunch	2001	9	22
	2007	15	27
Unemployment rate	2001	3	4
	2007	4	6
Children receiving food stamps	2001	3	12
	2006*	10	20
Children in child care assistance programs (Rate/1000)	2001	22	47
	2006	30	49
Births to adolescents (Rate/1000)	2001	15	22
	2006	14	20
Infants born at low birthweight	2001	8	8
	2006	7	9
Children in public health care programs	2001	15	27
	2005	26	41
4th graders less than proficient in math	2001	41	43
	2007	14	24
4th graders less than proficient in reading	2001	44	46
	2007	13	20
Students not graduating from high school	2001	12	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	1	11
	2006	9	10
Children in foster care (Rate/1000)	2001	8	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	13	15
	2006	7	14

*Refer to page 225 for details.

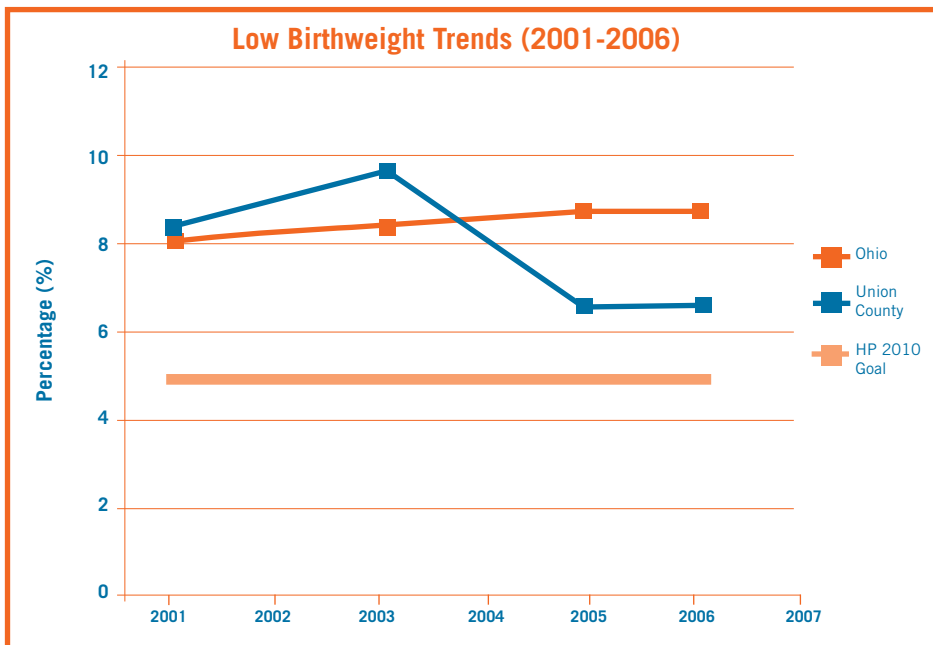


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight —	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	12.8
	Asthma Episode (%)	16.4
	Asthma ER Visits (%)	7.4
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	69.2
	% Never Visited a Dentist	14.6
	% Uninsured for Dental Care	22
	% Who Could Not Receive Needed Dental Care	2.4
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	139
	Total EBLs	1
	Rate/1000	7.2

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



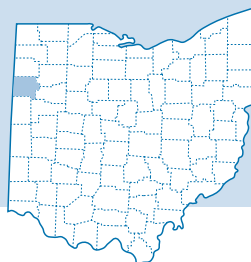
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	5	6.8
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	4	5.5
2005	#	Rate (per 1000 live births)
	4	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	0	0
2005	#	Rate (per 1000 live births)
	0	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	1	10.9

HP2010 Goals for Child Death (1-14 yrs):

- 20.0 (1-4 yrs)
- 13.0 (5-9 yrs)
- 16.5 (10-14 yrs)

Van Wert



County Seat: Van Wert
 County Type: Rural Non-Appalachian
 Total Population: 29,073
 Child Population: 5,289



Children's Defense Fund-Ohio

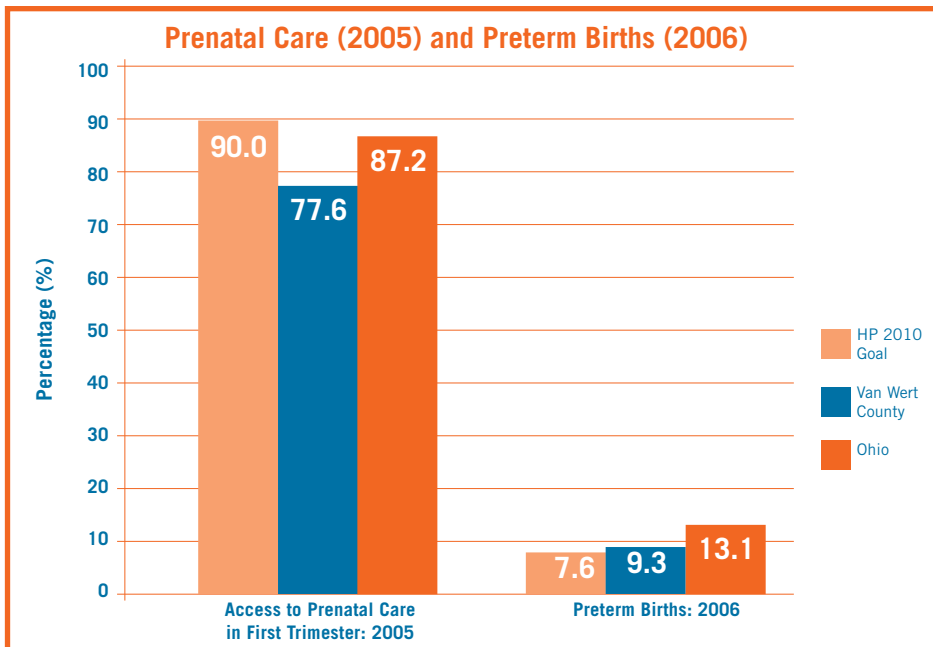


PERCENT CHANGE OVER TIME



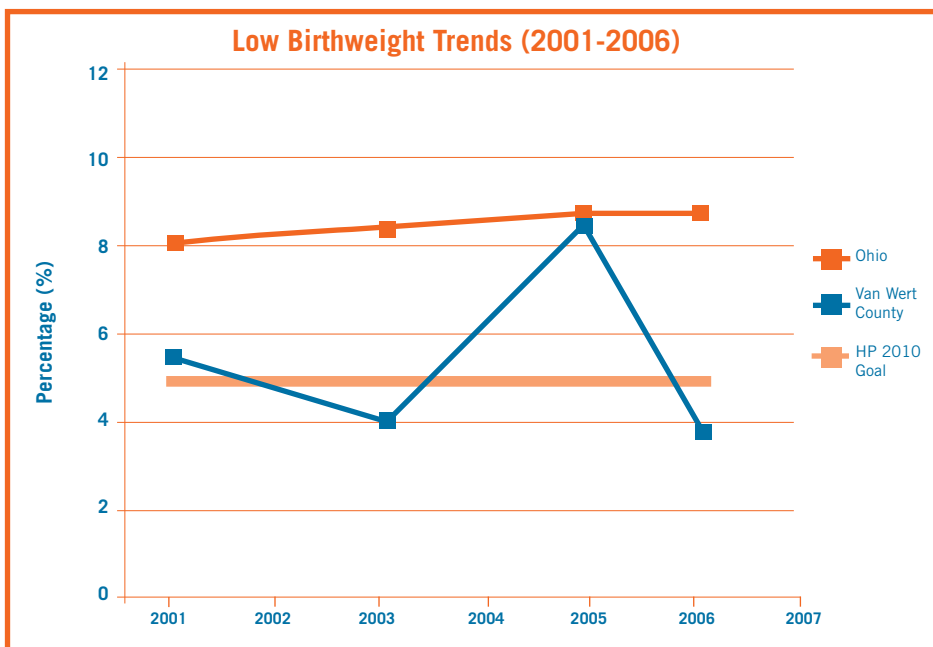
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	9	15
	2005*	10	19
Children receiving free/reduced price lunch	2001	14	22
	2007	21	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	4	12
	2006*	8	20
Children in child care assistance programs (Rate/1000)	2001	10	47
	2006	13	49
Births to adolescents (Rate/1000)	2001	12	22
	2006	12	20
Infants born at low birthweight	2001	6	8
	2006	4	9
Children in public health care programs	2001	16	27
	2005	35	41
4th graders less than proficient in math	2001	37	43
	2007	18	24
4th graders less than proficient in reading	2001	47	46
	2007	13	20
Students not graduating from high school	2001	12	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	7	11
	2006	10	10
Children in foster care (Rate/1000)	2001	2	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	16	15
	2006	12	14

*Refer to page 225 for details.



HEALTH INDICATORS

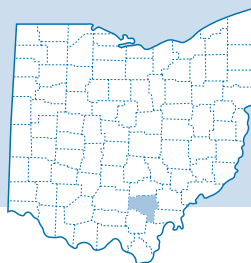
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.3	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	12.9
	Asthma Episode (%)	42.5
	Asthma ER Visits (%)	0
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	67.2
	% Never Visited a Dentist	17.3
	% Uninsured for Dental Care	27
% Who Could Not Receive Needed Dental Care	2.7	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	190
	Total EBLs	1
	Rate/1000	5.3
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	1	2.6	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	4	10.3	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	1	2.6	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	3	7.8	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	18.7	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Vinton



County Seat: McArthur
 County Type: Appalachian
 Total Population: 13,364
 Child Population: 3,359



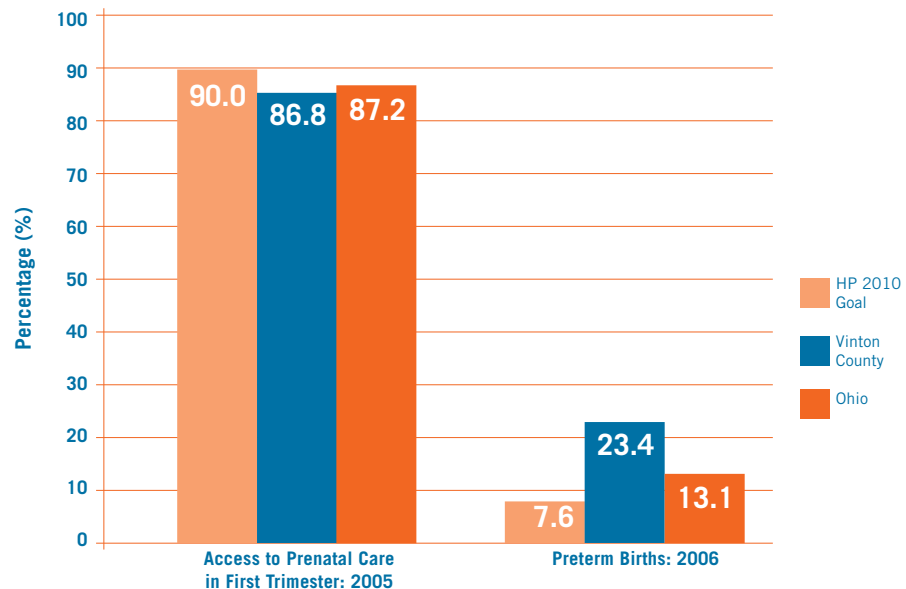
PERCENT CHANGE OVER TIME



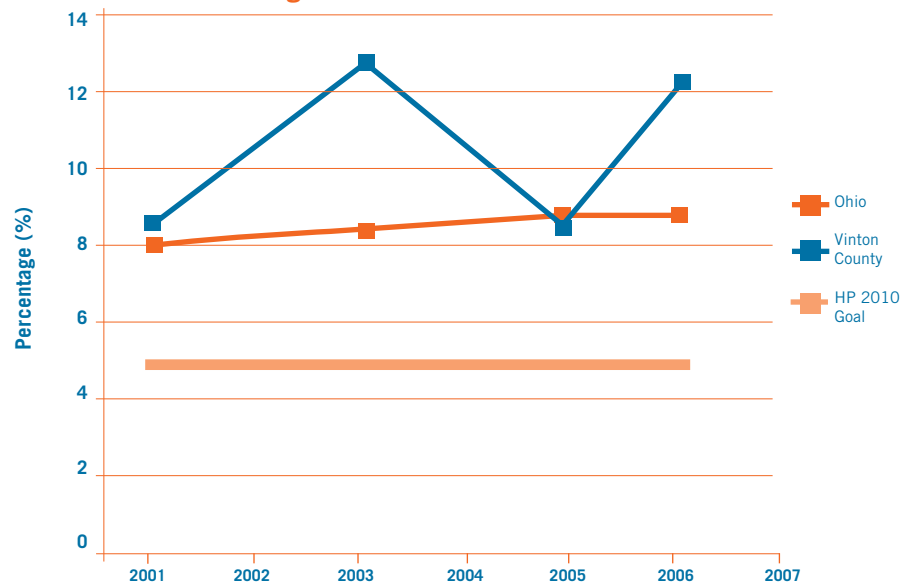
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	25	15
	2005*	30	19
Children receiving free/reduced price lunch	2001	36	22
	2007	40	27
Unemployment rate	2001	8	4
	2007	8	6
Children receiving food stamps	2001	24	12
	2006*	34	20
Children in child care assistance programs (Rate/1000)	2001	57	47
	2006	40	49
Births to adolescents (Rate/1000)	2001	31	22
	2006	38	20
Infants born at low birthweight	2001	9	8
	2006	12	9
Children in public health care programs	2001	51	27
	2005	72	41
4th graders less than proficient in math	2001	69	43
	2007	28	24
4th graders less than proficient in reading	2001	69	46
	2007	29	20
Students not graduating from high school	2001	32	19
	2006*	9	14
Children abused or neglected (Rate/1000)	2001	15	11
	2006	22	10
Children in foster care (Rate/1000)	2001	11	13
	2006	17	11
Adolescents adjudicated for felonies (Rate/1000)	2001	15	15
	2006	10	14

*Refer to page 225 for details.

Prenatal Care (2005) and Preterm Births (2006)



Low Birthweight Trends (2001-2006)



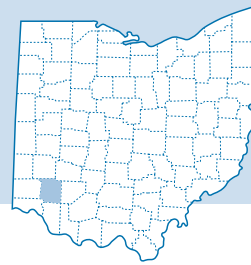
HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.4	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	24.5
	Asthma Episode (%)	59.1
	Asthma ER Visits (%)	45.7
Reduce Deaths, Hospitalizations, and ER Visits from Asthma		
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	65
	% Never Visited a Dentist	15.7
	% Uninsured for Dental Care	21.9
	% Who Could Not Receive Needed Dental Care	7
Reduce the Proportion of Children with Untreated Dental Decay		
Increase the Proportion of Children who Use the Oral Health Care System Each Year		
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	222
	Total EBLs	3
	Rate/1000	13.5
Eliminate Elevated Blood Lead Levels in Children		

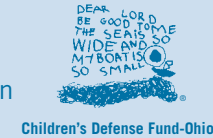
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	0
	Rate (per 1000 live births + late fetal deaths)	0
	Rate (per 1000 live births + late fetal deaths)	4.5
	Infant Mortality	HP2010 Goal
	#	0
	Rate (per 1000 live births)	0
	Rate (per 1000 live births)	4.5
	Neonatal Mortality	HP2010 Goal
	#	0
	Rate (per 1000 live births)	0
	Rate (per 1000 live births)	2.9
	Post-neonatal Mortality	HP2010 Goal
#	0	
Rate (per 1000 live births)	0	
Rate (per 1000 live births)	1.2	
Child Death (1-14 yrs)	HP2010 Goal	
#	3	
Rate (per 100,000 children ages 1-14)	117.3	
Rate (per 100,000 children ages 1-14)	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Warren



County Seat: Lebanon
 County Type: Rural Non-Appalachian
 Total Population: 199,577
 Child Population: 51,561

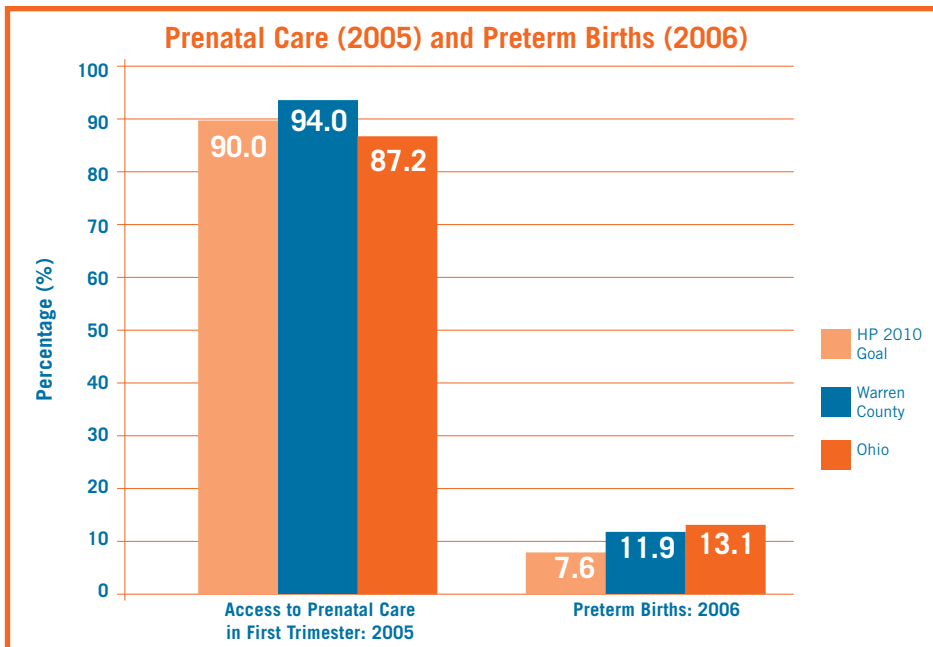


PERCENT CHANGE OVER TIME



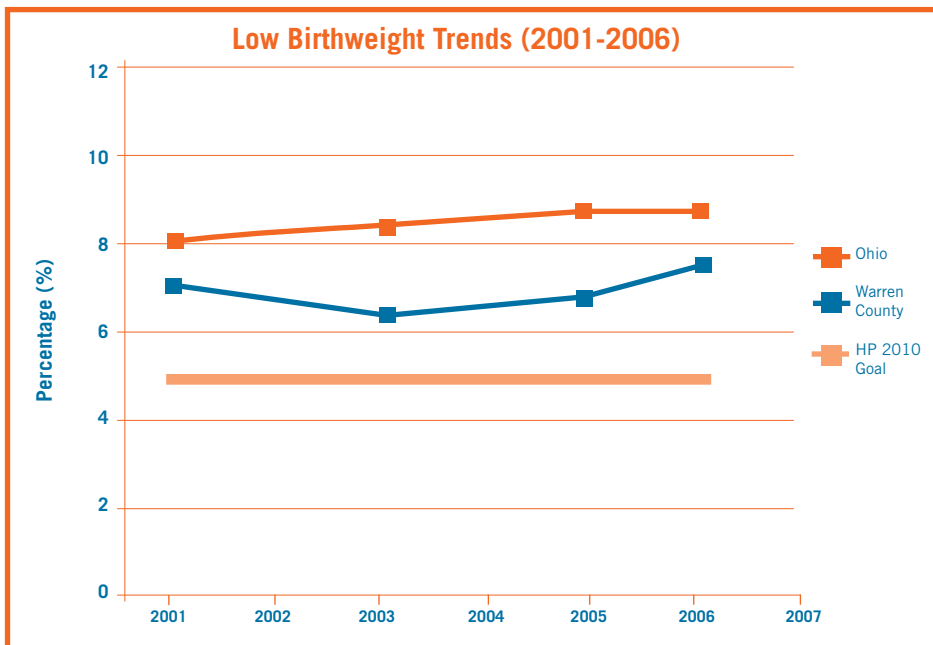
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	6	15
	2006*	8	19
Children receiving free/reduced price lunch	2001	7	22
	2007	9	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	2	12
	2006*	4	20
Children in child care assistance programs (Rate/1000)	2001	12	47
	2006	16	49
Births to adolescents (Rate/1000)	2001	12	22
	2006	7	20
Infants born at low birthweight	2001	7	8
	2006	8	9
Children in public health care programs	2001	8	27
	2005	16	41
4th graders less than proficient in math	2001	26	43
	2007	9	24
4th graders less than proficient in reading	2001	29	46
	2007	7	20
Students not graduating from high school	2001	11	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	2	11
	2006	3	10
Children in foster care (Rate/1000)	2001	4	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	14	15
	2006	10	14

*Refer to page 225 for details.



HEALTH INDICATORS

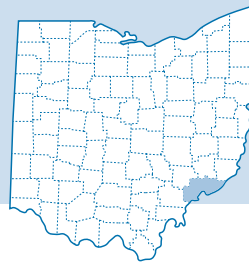
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 13.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 11.2	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 43.9	
	Asthma ER Visits (%): 16.1	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 65.9	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 16.1	
	% Uninsured for Dental Care: 24.7	
	% Who Could Not Receive Needed Dental Care: 4.9	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 968	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 5	
	Rate/1000: 5.2	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	15	5.4
	HP2010 Goal	
	#	Rate (per 1000 live births)
	14	5
	HP2010 Goal	
Neonatal Mortality		HP2010 Goal
#	Rate (per 1000 live births)	Rate (per 1000 live births)
9	3.2	2.9
Post-neonatal Mortality		HP2010 Goal
#	Rate (per 1000 live births)	Rate (per 1000 live births)
5	1.8	1.2
Child Death (1-14 yrs)		HP2010 Goal
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)
6	15.4	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs)

Washington



County Seat: Marietta
 County Type: Appalachian
 Total Population: 61,754
 Child Population: 13,382

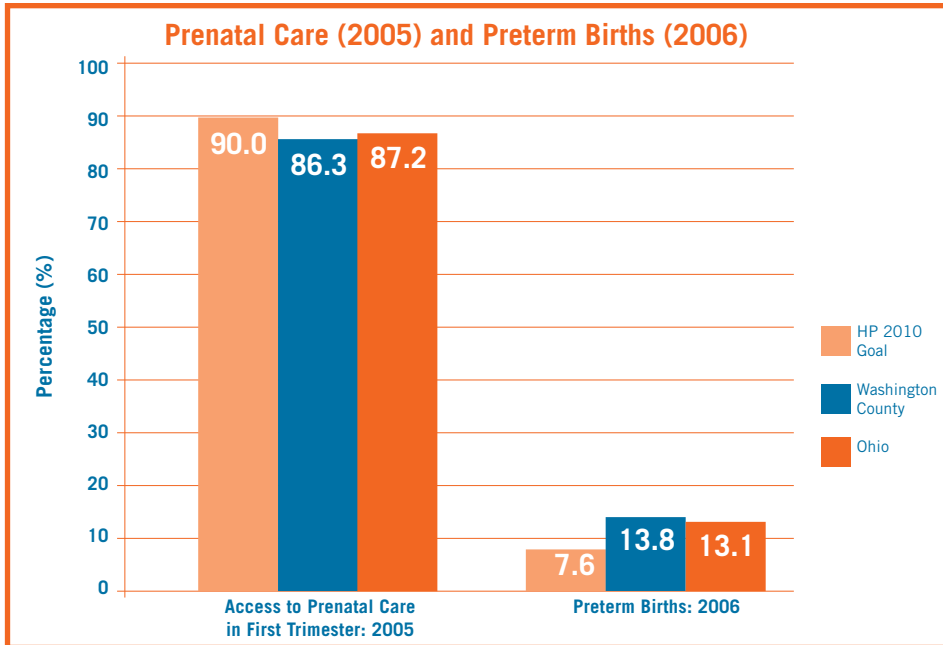


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	17	15
	2005*	18	19
Children receiving free/reduced price lunch	2001	19	22
	2007	26	27
Unemployment rate	2001	5	4
	2007	5	6
Children receiving food stamps	2001	11	12
	2006*	19	20
Children in child care assistance programs (Rate/1000)	2001	47	47
	2006	38	49
Births to adolescents (Rate/1000)	2001	18	22
	2006	12	20
Infants born at low birthweight	2001	8	8
	2006	8	9
Children in public health care programs	2001	33	27
	2005	48	41
4th graders less than proficient in math	2001	42	43
	2007	30	24
4th graders less than proficient in reading	2001	43	46
	2007	20	20
Students not graduating from high school	2001	7	19
	2006*	8	14
Children abused or neglected (Rate/1000)	2001	5	11
	2006	10	10
Children in foster care (Rate/1000)	2001	4	13
	2006	4	11
Adolescents adjudicated for felonies (Rate/1000)	2001	6	15
	2006	10	14

*Refer to page 225 for details.

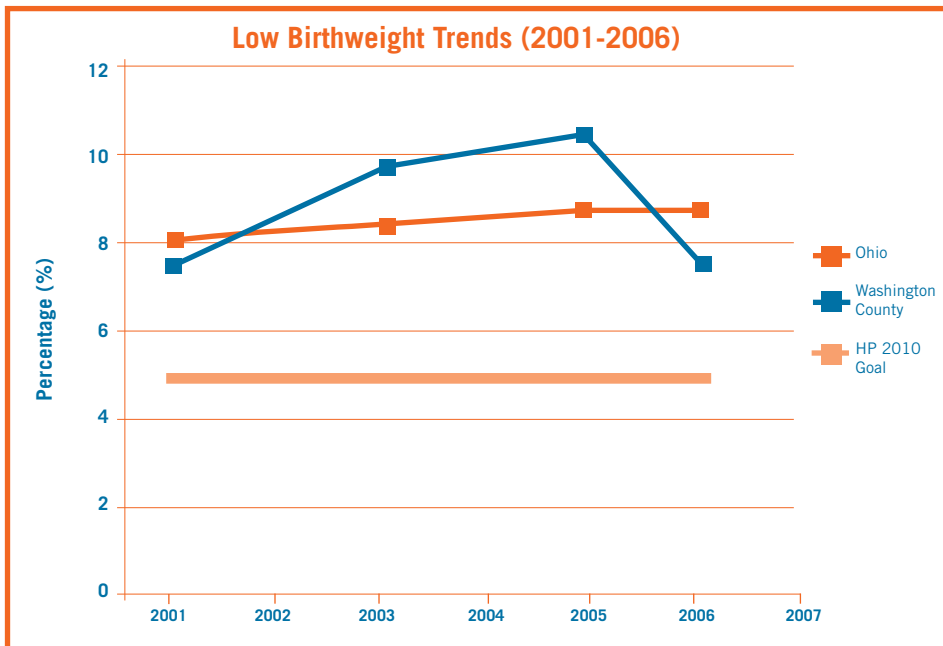


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.6	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	17.5
	Asthma Episode (%)	70.8
	Asthma ER Visits (%)	0
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	71.4
	% Never Visited a Dentist	14.3
	% Uninsured for Dental Care	21.7
	% Who Could Not Receive Needed Dental Care	5.6
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	497
	Total EBLs	5
	Rate/1000	10.1

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



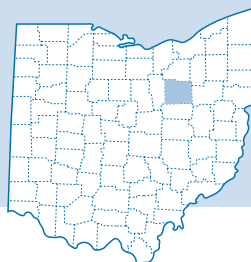
MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	5	7.1
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	4.5
Infant Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	4	5.7
2005	#	Rate (per 1000 live births)
	2	2.9
Neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	2.9
Post-neonatal Mortality		HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	2.9
Child Death (1-14 yrs)		HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	5	48.8

HP2010 Goals for Child Death (1-14 yrs):

- 20.0 (1-4 yrs)
- 13.0 (5-9 yrs)
- 16.5 (10-14 yrs)

Wayne



County Seat: Wooster
 County Type: Rural Non-Appalachian
 Total Population: 113,614
 Child Population: 28,851



Children's Defense Fund-Ohio

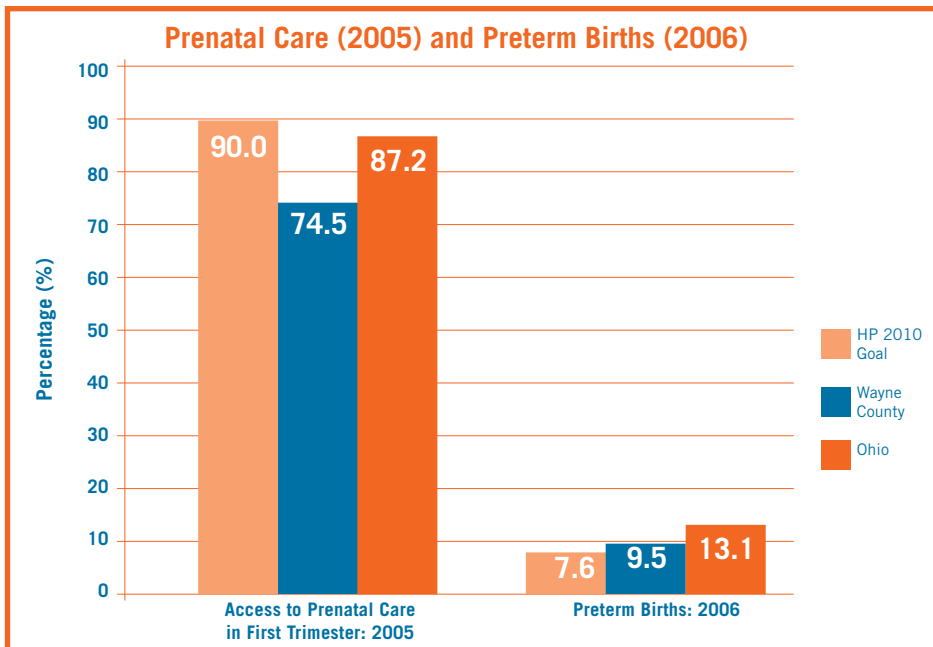


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	12	15
	2006*	15	19
Children receiving free/reduced price lunch	2001	17	22
	2007	25	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	6	12
	2006*	11	20
Children in child care assistance programs (Rate/1000)	2001	21	47
	2006	27	49
Births to adolescents (Rate/1000)	2001	7	22
	2006	12	20
Infants born at low birthweight	2001	5	8
	2006	7	9
Children in public health care programs	2001	17	27
	2005	29	41
4th graders less than proficient in math	2001	34	43
	2007	16	24
4th graders less than proficient in reading	2001	39	46
	2007	14	20
Students not graduating from high school	2001	13	19
	2006*	5	14
Children abused or neglected (Rate/1000)	2001	15	11
	2006	15	10
Children in foster care (Rate/1000)	2001	7	13
	2006	7	11
Adolescents adjudicated for felonies (Rate/1000)	2001	9	15
	2006	10	14

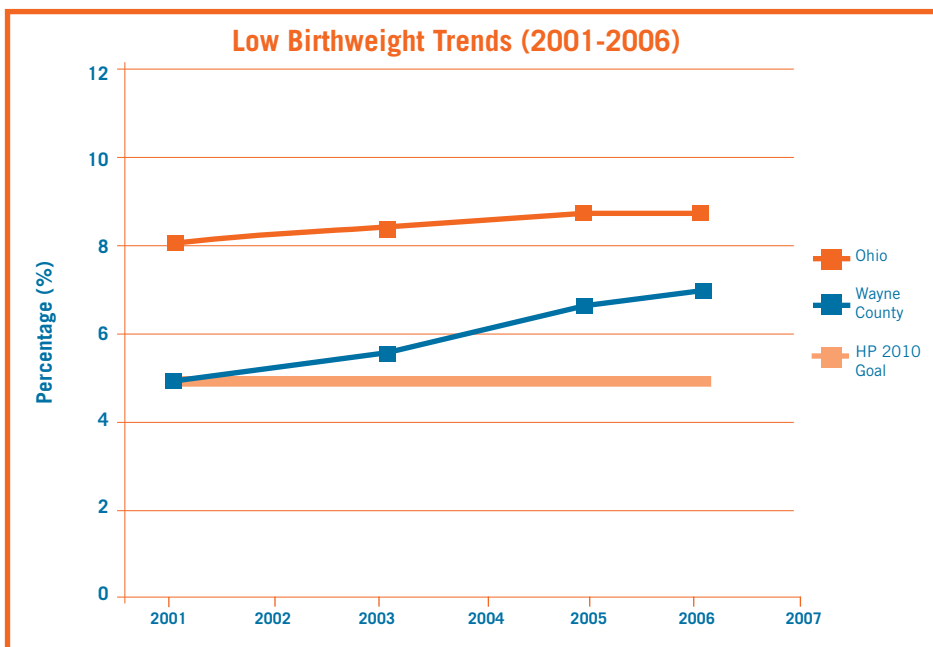
*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 15	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	9
	Asthma Episode (%)	47.9
	Asthma ER Visits (%)	13.3
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	70.1
	% Never Visited a Dentist	15.2
	% Uninsured for Dental Care	29.1
2006	% Who Could Not Receive Needed Dental Care	2.4
	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	Total Children Screened (0-72 months)	1,010
	Total EBLs	9
	Rate/1000	8.9

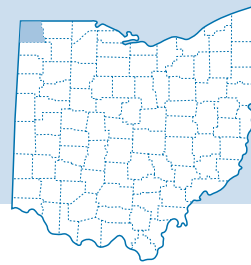
Goals:
 • Reduce the Proportion of Children with Untreated Dental Decay
 • Increase the Proportion of Children who Use the Oral Health Care System Each Year
 • Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	6	3.7
		Rate (per 1000 live births + late fetal deaths)
		4.5
	Infant Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	9	5.5
		Rate (per 1000 live births)
		4.5
	Neonatal Mortality	HP2010 Goal
	#	Rate (per 1000 live births)
	2	1.2
	Rate (per 1000 live births)	
	2.9	
Post-neonatal Mortality	HP2010 Goal	
#	Rate (per 1000 live births)	
7	4.3	
	Rate (per 1000 live births)	
	1.2	
Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	
7	31.8	
	Rate (per 100,000 children ages 1-14)	
	• 20.0 (1-4 yrs)	
	• 13.0 (5-9 yrs)	
	• 16.5 (10-14 yrs)	

Williams



County Seat: Bryan
 County Type: Rural Non-Appalachian
 Total Population: 38,339
 Child Population: 9,153



Children's Defense Fund-Ohio

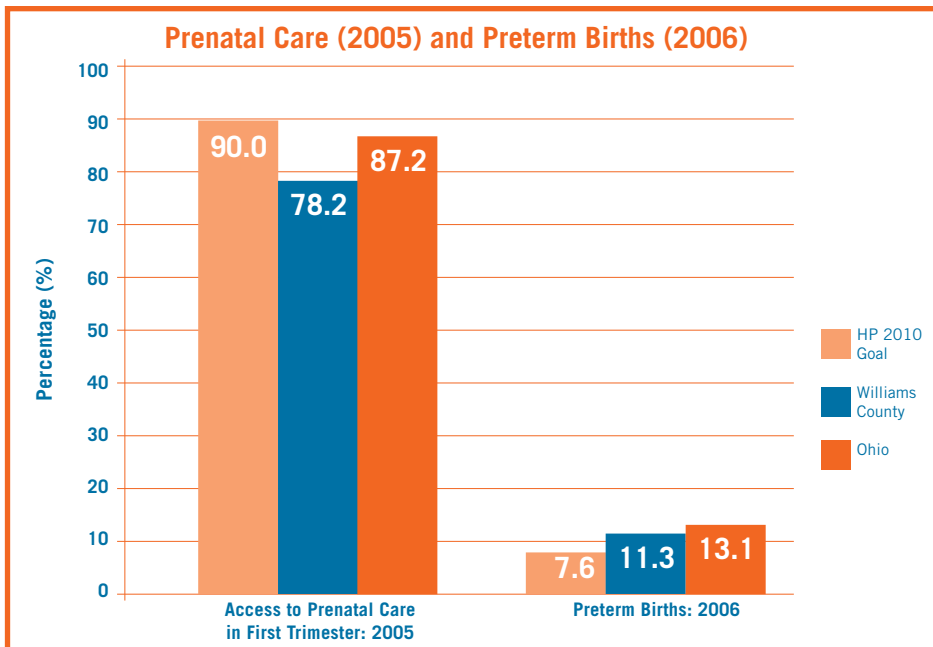


PERCENT CHANGE OVER TIME



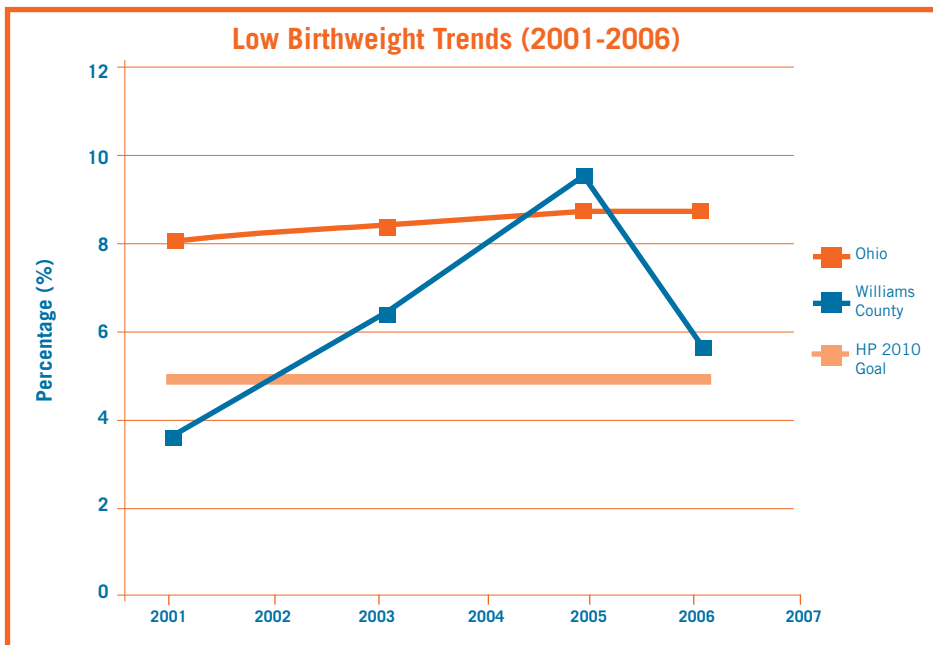
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	10	15
	2005*	13	19
Children receiving free/reduced price lunch	2001	13	22
	2007	21	27
Unemployment rate	2001	5	4
	2007	6	6
Children receiving food stamps	2001	7	12
	2006*	15	20
Children in child care assistance programs (Rate/1000)	2001	18	47
	2006	21	49
Births to adolescents (Rate/1000)	2001	26	22
	2006	10	20
Infants born at low birthweight	2001	4	8
	2006	6	9
Children in public health care programs	2001	20	27
	2005	38	41
4th graders less than proficient in math	2001	38	43
	2007	17	24
4th graders less than proficient in reading	2001	45	46
	2007	16	20
Students not graduating from high school	2001	12	19
	2006*	7	14
Children abused or neglected (Rate/1000)	2001	12	11
	2006	13	10
Children in foster care (Rate/1000)	2001	5	13
	2006	9	11
Adolescents adjudicated for felonies (Rate/1000)	2001	16	15
	2006	13	14

*Refer to page 225 for details.



HEALTH INDICATORS

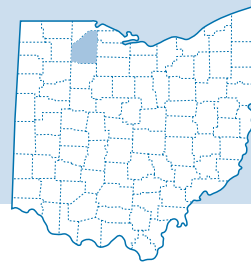
Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 18.8	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%): 6.6	Reduce Deaths, Hospitalizations, and ER Visits from Asthma
	Asthma Episode (%): 66	
	Asthma ER Visits (%): 0	
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year: 65.7	<ul style="list-style-type: none"> Reduce the Proportion of Children with Untreated Dental Decay Increase the Proportion of Children who Use the Oral Health Care System Each Year
	% Never Visited a Dentist: 17.1	
	% Uninsured for Dental Care: 22.3	
	% Who Could Not Receive Needed Dental Care: 2.5	
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months): 537	Eliminate Elevated Blood Lead Levels in Children
	Total EBLs: 7	
	Rate/1000: 13.0	



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	1	2.3
2005	#	Rate (per 1000 live births + late fetal deaths)
	1	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	4.7
2005	#	Rate (per 1000 live births)
	2	4.5
Year	Neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	2	4.7
2005	#	Rate (per 1000 live births)
	2	2.9
Year	Post-neonatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	0	0
2005	#	Rate (per 1000 live births)
	0	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	1	14.5
2005	#	Rate (per 100,000 children ages 1-14)
	1	20.0 (1-4 yrs)
	1	13.0 (5-9 yrs)
	1	16.5 (10-14 yrs)

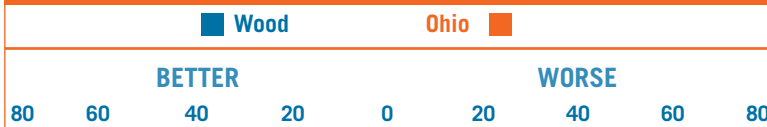
Wood



County Seat: Bowling Green
 County Type: Suburban
 Total Population: 124,641
 Child Population: 26,421

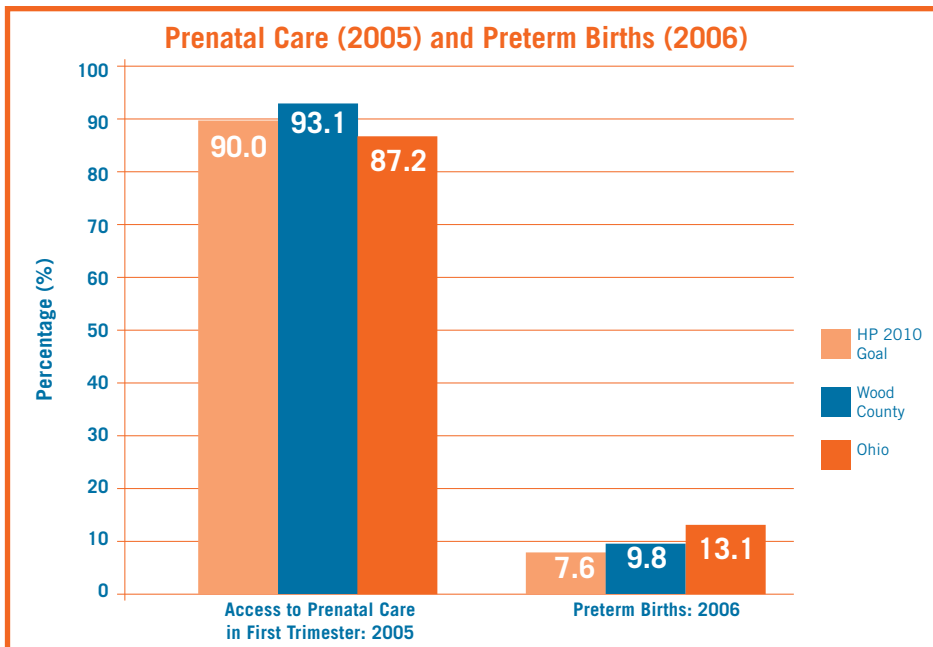


PERCENT CHANGE OVER TIME



Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	8	15
	2006*	8	19
Children receiving free/reduced price lunch	2001	11	22
	2007	15	27
Unemployment rate	2001	4	4
	2007	5	6
Children receiving food stamps	2001	4	12
	2006*	9	20
Children in child care assistance programs (Rate/1000)	2001	18	47
	2006	21	49
Births to adolescents (Rate/1000)	2001	14	22
	2006	10	20
Infants born at low birthweight	2001	8	8
	2006	7	9
Children in public health care programs	2001	14	27
	2005	27	41
4th graders less than proficient in math	2001	36	43
	2007	14	24
4th graders less than proficient in reading	2001	41	46
	2007	11	20
Students not graduating from high school	2001	12	19
	2006*	4	14
Children abused or neglected (Rate/1000)	2001	6	11
	2006	14	10
Children in foster care (Rate/1000)	2001	3	13
	2006	3	11
Adolescents adjudicated for felonies (Rate/1000)	2001	4	15
	2006	7	14

*Refer to page 225 for details.

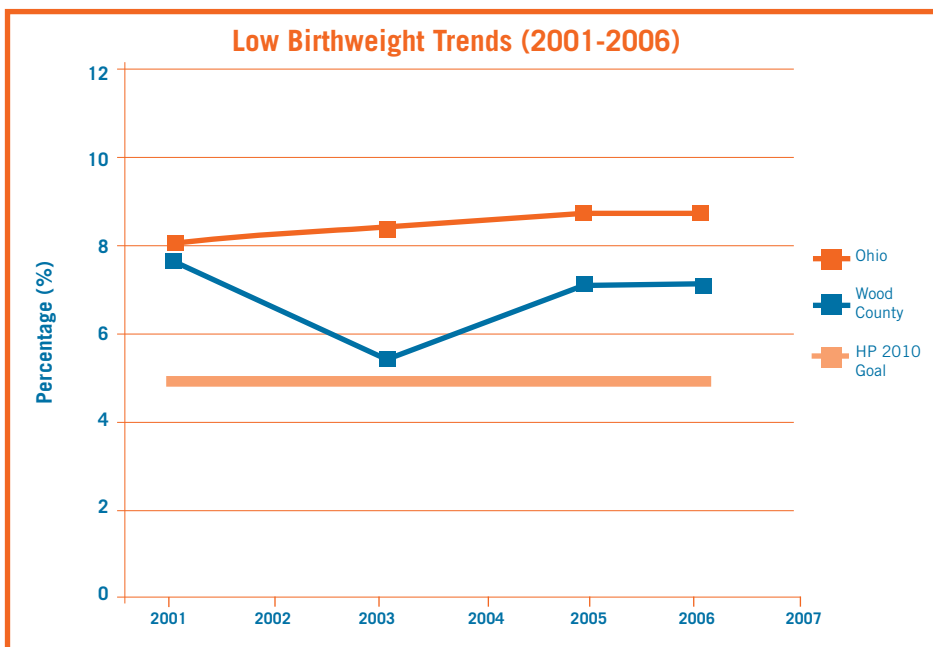


HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 19.5	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	13
	Asthma Episode (%)	62.2
	Asthma ER Visits (%)	49.5
Year	Access to Dental Care	HP2010 Goal
2007	% with Dental Visit in Last Year	77.3
	% Never Visited a Dentist	11.4
	% Uninsured for Dental Care	19.6
	% Who Could Not Receive Needed Dental Care	5
Year	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
2006	Total Children Screened (0-72 months)	1,273
	Total EBLs	9
	Rate/1000	7.1

HP2010 Goals:

- Reduce Deaths, Hospitalizations, and ER Visits from Asthma
- Reduce the Proportion of Children with Untreated Dental Decay
- Increase the Proportion of Children who Use the Oral Health Care System Each Year
- Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	2.9
2005	#	Rate (per 1000 live births + late fetal deaths)
	4	4.5
Year	Infant Mortality	HP2010 Goal
2005	#	Rate (per 1000 live births)
	4	2.9
2005	#	Rate (per 1000 live births)
	3	2.2
2005	#	Rate (per 1000 live births)
	1	0.7
2005	#	Rate (per 1000 live births)
	4	1.2
Year	Child Death (1-14 yrs)	HP2010 Goal
2005	#	Rate (per 100,000 children ages 1-14)
	4	20.5

HP2010 Goals for Child Death (1-14 yrs):

- 20.0 (1-4 yrs)
- 13.0 (5-9 yrs)
- 16.5 (10-14 yrs)

Wyandot



County Seat: Upper Sandusky
 County Type: Rural Non-Appalachian
 Total Population: 22,552
 Child Population: 5,297



Children's Defense Fund-Ohio

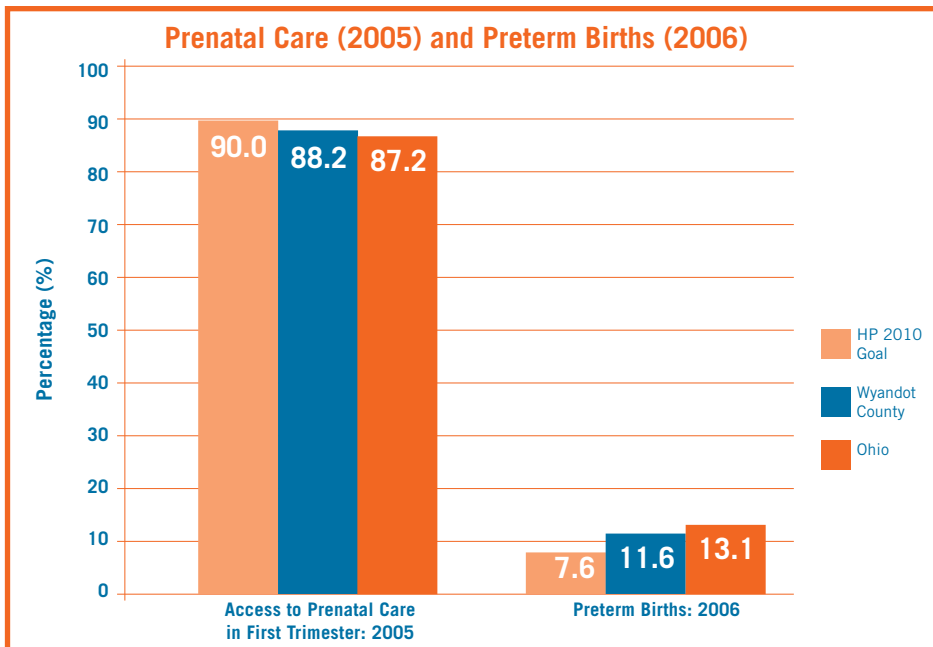


PERCENT CHANGE OVER TIME



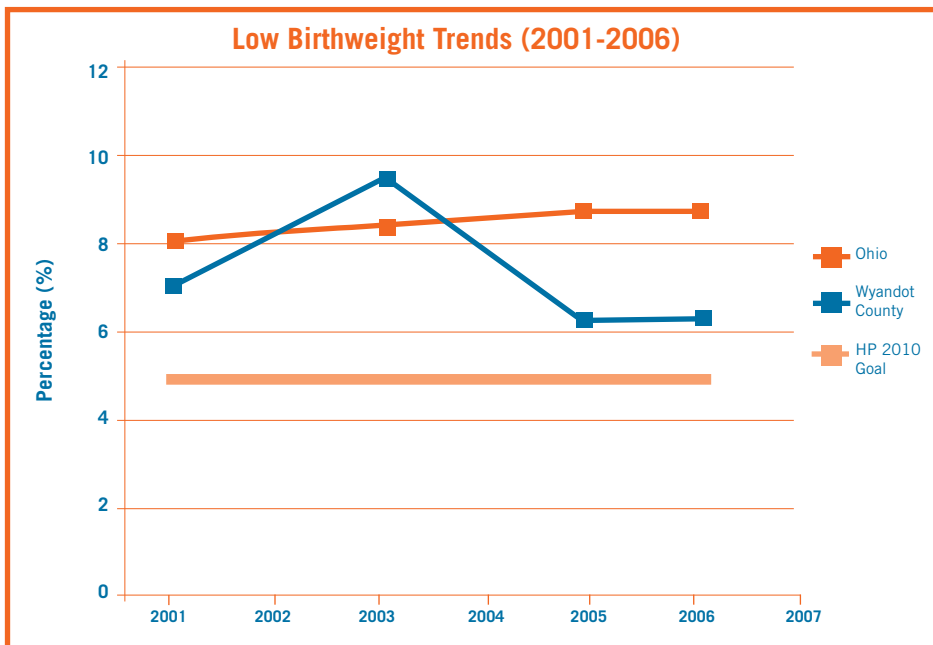
Indicator	Year	County % or Rate	Ohio % or Rate
Children living in poverty	2001	8	15
	2005*	9	19
Children receiving free/reduced price lunch	2001	12	22
	2007	18	27
Unemployment rate	2001	4	4
	2007	7	6
Children receiving food stamps	2001	3	12
	2006*	8	20
Children in child care assistance programs (Rate/1000)	2001	9	47
	2006	12	49
Births to adolescents (Rate/1000)	2001	16	22
	2006	23	20
Infants born at low birthweight	2001	7	8
	2006	6	9
Children in public health care programs	2001	14	27
	2005	29	41
4th graders less than proficient in math	2001	31	43
	2007	18	24
4th graders less than proficient in reading	2001	49	46
	2007	14	20
Students not graduating from high school	2001	12	19
	2006*	3	14
Children abused or neglected (Rate/1000)	2001	15	11
	2006	18	10
Children in foster care (Rate/1000)	2001	6	13
	2006	5	11
Adolescents adjudicated for felonies (Rate/1000)	2001	6	15
	2006	5	14

*Refer to page 225 for details.



HEALTH INDICATORS

Year	Obesity	HP2010 Goal
2004-2005	% 3rd Graders Overweight: 21.2	5.0
Year	Asthma	HP2010 Goal
2003-2004	Asthma Prevalence (%)	2.7
	Asthma Episode (%)	100
	Asthma ER Visits (%)	100
2007	Access to Dental Care	HP2010 Goal
	% with Dental Visit in Last Year	67.2
	% Never Visited a Dentist	17.3
	% Uninsured for Dental Care	27
2006	Lead Exposure (Elevated Blood Levels)	HP2010 Goal
	% Who Could Not Receive Needed Dental Care	2.7
	Total Children Screened (0-72 months)	186
	Total EBLs Rate/1000	1
		5.4
		Eliminate Elevated Blood Lead Levels in Children



MORTALITY RATES

Year	Perinatal Mortality	HP2010 Goal	
2005	#	Rate (per 1000 live births + late fetal deaths)	Rate (per 1000 live births + late fetal deaths)
	2	6.5	4.5
	Infant Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	4.5
	Neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	2.9
	Post-neonatal Mortality	HP2010 Goal	
	#	Rate (per 1000 live births)	Rate (per 1000 live births)
	0	0	1.2
	Child Death (1-14 yrs)	HP2010 Goal	
#	Rate (per 100,000 children ages 1-14)	Rate (per 100,000 children ages 1-14)	
1	24.7	<ul style="list-style-type: none"> 20.0 (1-4 yrs) 13.0 (5-9 yrs) 16.5 (10-14 yrs) 	

Total Population

Source: U.S. Census Bureau, Population Estimates Program (PEP)

Definition(s): An estimate of the population in Ohio counties for July 1st of 2006. The Census Bureau's PEP uses existing data series such as births, deaths, Federal tax returns, Medicare enrollment, and immigration to update the decennial census base counts.

Comments: Although the figures cited for state and county populations are estimates for 2006, they are from the *2007 Population Estimates* Data Set.

Child Population

Source: U.S. Census Bureau, Population Estimates Program

Definition(s): A PEP estimate of the child population of Ohio counties for July 1st, 2006. For the purposes of this data book, children are defined as persons under the age of 18.

Comments: This data is taken from the *2006 Population Estimates* Data Set.

Ohio's Estimated Median Household Income, Poverty Rate, and Population by Race

Source: U.S. Census Bureau, 2006 American Community Survey

Definition(s): Median household income is defined as that value of income which divides the household income distribution into two equal groups of households where one has incomes above the median, and the other has incomes below the median. According to the Census Bureau, a household includes all the people who occupy a

housing unit as their usual place of residence. The poverty rate is the percentage of the population that falls below the Federal Poverty Line. This official measure of poverty was established by the Office of Management and Budget Statistical Policy Directive 14 (May 1978).¹

Comments: None.

Children Living in Poverty

Source: U.S. Census Bureau, Small Area Income and Poverty Estimates (SAIPE) Program; 2006 American Community Survey (ACS)

Definition(s): An estimate of the percentage of children living below the Federal Poverty Line each year (see above). Please note that each estimate has a margin of error above or below, which can be quite large for smaller Ohio counties.

Comments: Last year (2007) Ohio's KIDS COUNT used the Census Bureau's SAIPE data to track child poverty from 2001-2005. Since then, there has been no update for the SAIPE, as the next update is due out at the end of 2008. Therefore, in order to provide an update, the 2006 ACS was used, which provided 2006 child poverty data for counties with populations of more than 65,000 residents. It should be noted that when comparing the SAIPE and ACS, their estimates do not match exactly but are extremely close.² However, it would not be possible to report ACS child poverty estimates for every county for 2001-2005 due to the minimum population requirements. Therefore, based on the reasonable degree of similarity between SAIPE and ACS data, the decision was made to report SAIPE data again for years 2001-2005 and ACS data when available for 2006.

Children Receiving Free/Reduced Price Lunch

Source: Children's Hunger Alliance

Definition(s): The number and percentage of children that **participated** in the free or reduced-price lunch program in Ohio schools in October of each school year. Children must live in families below 185 percent of the Federal Poverty Line to qualify for the program.

Comments: Last year Ohio's KIDS COUNT reported the number and percentage of children that applied for the program for 2001, 2003, and 2005, but this year the decision was made to report the number and percentage that participated instead. Therefore, the numbers from the 2007 data book and this data book for this indicator will not correspond.

Children Receiving Food Stamps

Source: Bureau of Program Policy, Office of Family Stability, Ohio Department of Job and Family Services

Definition(s): The percentage of children receiving food stamps in July of each year.

Comments: None.

Unemployment Rate

Source: Ohio Department of Job and Family Services, Office of Work Force Development

Definition(s): Persons who were not employed, but who were actively seeking work, waiting to be called back to a job from which laid off, or waiting to report within thirty days to a new payroll job. The unemployment rate is expressed as a percentage of the civilian labor force.

Comments: Data is NOT seasonally adjusted.

Children in Child Care Assistance Program

Source: Ohio Department of Job and Family Services, Bureau of Child Care

Definition(s): The rate of children in the child care assistance program per 1,000 children ages 0 to 13. Parents who are working or in school and meet the eligibility requirements may apply to receive help with child care costs. The amount paid is based on income, family size, and the number of children in child care.

Comments: To track this indicator over time, this year Ohio's KIDS COUNT found the rate of children in the child care assistance program by taking the number of children in the program and dividing it by the population of children age thirteen and under. This was done because according to the application, "[c]hild care can be provided only for children under the age of 13, or under the age of 18 if eligible for special needs or protective child care."³ Due to age brackets being determined by the US Census Bureau Population Estimates Program, using a denominator of children under 13 was not possible. However, according to a source from ODJFS, "it would be accurate to take the rate of children from the 0-13 age group."⁴

Birth to Adolescents

Source: Ohio Department of Health, Center for Vital and Health Statistics

Definition(s): The number of births to adolescents younger than eighteen and the rate per 1,000 adolescent females ages fifteen to seventeen.

Comments: The ODH report that the 2006 data came from has the following disclaimer: “We are updating our birth statistics. At this time not all Ohio birth data that occurred out of state are incorporated. Users are cautioned that counts are not final. The counties most affected are along the Ohio River, particularly Lawrence County.”⁵ This disclaimer is not found in earlier reports.

Infants born at Low Birthweight

Source: Ohio Department of Health, Center for Vital and Health Statistics

Definition(s): The percentage of babies born weighing less than 5.5 lbs at birth.

Comments: The ODH report that the 2006 data came from has the following disclaimer: “We are updating our birth statistics. At this time not all Ohio birth data that occurred out of state are incorporated. Users are cautioned that counts are not final. The counties most affected are along the Ohio River, particularly Lawrence County.”⁶ This disclaimer is not found in earlier reports.

Children in Public Health Care Programs

Source: Ohio Department of Job and Family Services, Office of Ohio Health Plans-Medicaid Program

Definition(s): Children eligible for Healthy Start (SCHIP) are younger than age 19 and in a family with income up to 300 percent of the Federal Poverty Level; children eligible for Healthy Families coverage are younger than age 19 and in a family with income up to 90 percent of the Federal Poverty Level.

Comments: This data could not be updated for this year’s data book. Consequently, the latest data is still 2005 data.

Fourth Graders Not Proficient in Math Fourth Graders Not Proficient in Reading

Source: Ohio Department of Education

Definition(s): The average percentage of students who did *not* score proficient or better on fourth grade math and reading tests. School districts were assigned to the county where their district office is located.

Comments: The Ohio Department of Education reports the percentage of children who scored proficient or better, which is what Ohio’s KIDS COUNT has reported up until this year. In order to have all the indicators worded in such a way that “less is better” and “more is worse” (such as poverty, which becomes “worse” as the rate increases), Ohio’s KIDS COUNT calculated the percentage of fourth graders who scored less than proficient in math and reading.

Students Not Graduating from High School

Source: Ohio Department of Education

Definition(s): The percentage of high school students who did *not* graduate on time. School districts were assigned to the county where their district office is located.

Comments: As with the indicators on proficiency in math and reading, Ohio’s KIDS COUNT calculated the percentage of high school students not graduating in order to maintain the consistency of the indicators.

Children Abused or Neglected

Source: Ohio Department of Job and Family Services, Office for Children and Families

Definition(s): The rate of substantiated reports of child abuse and neglect per 1,000 children, including

emotional maltreatment, neglect, physical abuse, and sexual abuse.

Comments: None.

Children in Foster Care

Source: Ohio Department of Job and Family Services, Office for Children and Families

Definition(s): The rate of children in substitute care each year per 1,000 children. This includes children who were in care on January 1st of each year, along with children who entered care during that calendar year. This reflects children placed by public agencies only.

Comments: None.

Adolescents Adjudicated for Felonies

Source: Ohio Department of Youth Services

Definition(s): The rate of youths adjudicated for felony-level offenses per 1,000 youths ages 14 to 17 years old. The reason 14 to 17 year olds were chosen as the base population is because the vast majority of felonies are committed by youths in this age group. Youths with more than one adjudication in a calendar year are counted only once.

Comments: None.

Health Indicators:

Obesity

Source: Ohio Department of Health Division of Family and Community Health Services

Definition(s): *The percentage of third graders that are overweight* is defined as the percentage of third graders whose “body mass index (BMI)-per-age”—a ratio of weight to height compared to other children of the same age and sex—is greater than or equal to the ninety-fifth percentile (i.e. in the top five percent of the sampled population).⁷

Comments: None.

Asthma

Source: Ohio Department of Health; 2004 Ohio Family Health Survey

Definition(s): *Asthma prevalence* is defined as the percentage of children who reported being diagnosed with asthma. *Asthma episode* and *asthma ER visit* report the percentage of children *diagnosed with asthma* who reported having an asthma episode or an asthma-related emergency room visit in the past twelve months, respectively.

Comments: As is the case with any estimation (such as that mentioned in child poverty rate above), the room for error can be quite large when dealing with less-populated counties, and should be taken into account accordingly.

Access to Dental Care

Source: Ohio Department of Health; Ohio Oral Health Surveillance System, 2007.

Definition(s): The four statistics listed— *percent with dental visit in last year*; *percent never visited a dentist*; *percent uninsured for dental care*; and *percent who*

could not receive needed dental care—pertain to children under 18 years of age.

Comments: These particular statistics are listed on the Ohio Oral Health Surveillance System (2007) as taken from the 2004 Ohio Family Health Survey, meaning the data actually dates to 2004.

Lead Exposure

Source: Ohio Department of Health; Childhood Lead Poisoning Prevention Program

Definition(s): *Elevated blood level (EBL)*, according to the Center for Disease Control (CDC), is having a blood lead level higher than 10 micrograms per deciliter of blood. Ohio's KIDS COUNT reports the rate of EBLs per 1,000 children age 0-72 months (age group of the children screened).

Comments: None.

Mortality Rates

Source: Ohio Department of Health, Center for Vital and Health Statistics

Definition(s): The *perinatal mortality* rate is the number of late fetal deaths (28wks+ gestation) plus infant deaths within 7 days of birth per 1,000 live births plus late fetal deaths.

The *infant mortality* rate is the number of deaths to infants under 1 year of age per 1,000 live births.

The *neonatal mortality* rate is the number of deaths to infants under 28 days of age per 1,000 live births.

The *post-neonatal mortality* rate is the number of deaths to infants aged 28 days to 11 months per 1,000 live births.

The *child death* rate is the number of deaths among children ages 1-14 per 100,000 children ages 1-14.

Comments: None.

Prenatal Care

Source: Ohio Department of Health, Center for Vital and Health Statistics

Definition(s): The ODH defines *access to prenatal care in the first trimester* by the following: “The trimester of entry into prenatal care is derived from box 25 on the birth certificate, which requests month of pregnancy prenatal care began. This indicator shows the percentage of all births where prenatal care began in months 1-3 among those with known month of entry into prenatal care.”⁸

Comments: None.

Preterm Births

Source: Ohio Department of Health, Center for Vital and Health Statistics

Definition(s): *Preterm* births are defined by ODH as having gestational ages less than 37 completed weeks.

Comments: None.

About the Asterisks (pages 44-219)

For children living in poverty: The asterisk indicates that counties with a population of less than 65,000 have poverty data for 2005 displayed on their county page and those with a population above 65,000 have data for 2006. The state data displayed on each county page is for 2006.

For children receiving food stamps: The asterisk indicates that the county data is for 2006, but the state data is for 2007.

For students not graduating from high school: The asterisk indicates that the county data is for 2006, but the state data is for 2007.

Endnotes

¹ A copy of OMB Directive 14 and links to further information can be found on the official Census Bureau website at <http://www.census.gov/hhes/www/povmeas/ombdir14.html>

² For instance, Allen County's child poverty rate is 17.6% with a 90% CI of +/- 4.5% based on 2006 ACS data, and 18.5% with a 90% CI of +/- 6.4%, meaning their margins of error overlap. The Census Bureau's website goes into great detail about the necessary cautions when comparing different estimates based on different survey results and so forth on their *General Cautions* page at <http://www.census.gov/hhes/www/saipe/techdoc/cautions.html>.

³ ODJFS Application for Child Care Benefits. A Copy can be found online at the ODJFS website: <http://jfs.ohio.gov/cdc/Page4.stm>

⁴ Jackson, Ernest. Data Coordinator, ODJFS/OCF/BCCD. Email correspondence, Monday, July 21, 2008.

⁵ *Fertility Rates and Birth Rates by Age of Mother, County and Year, Ohio, 2006*. ODH, Center for Vital and Health Statistics. Last updated August 14, 2007. Report can be found on ODH website at <http://www.odh.ohio.gov/healthStats/vitalstats/birthstat.aspx>

⁶ *Vital Statistics Annual County Birth Summary*. ODH, Center for Vital and Health Statistics. Last updated August 14, 2007. Report can be found on ODH website at <http://www.odh.ohio.gov/healthStats/vitalstats/birthstat.aspx>

⁷ For detailed description of how "overweight" is defined, see *A Report on Body Mass Index of Ohio's Third Graders: 2004-2005*. Ohio Department of Health Division of Family and Community Health Services

⁸ Definition taken from ODH Information Warehouse, at <http://dwarehouse.odh.ohio.gov/datawarehousev2.htm>

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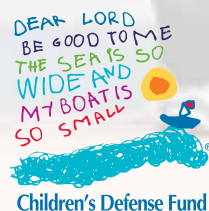
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The mission of the Children's Defense Fund is to Leave No Child Behind® and to ensure every child a Healthy Start, a Head Start, a Fair Start, a Safe Start, and a Moral Start in life and successful passage to adulthood with the help of caring families and communities.