

2020-2022

EATON COUNTY BEHAVIORAL RISK FACTOR SURVEY (BRFS) REPORT

Measures of the health status, risk behaviors, screening rates, and chronic diseases of adults in Eaton County.

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Barry-Eaton District
Health Department

Be Active • Be Safe • Be Healthy

ACKNOWLEDGEMENTS

The Barry-Eaton District Health Department wishes to thank the members of the community who graciously participated in this survey.

Additional thanks go to Public Sector Consultants, the Ingham County Health Department, and the Mid-Michigan District Health Department for technical consultation on survey design, data analysis, and interpretation. Other collaborative partners include the Eaton County Substance Abuse Advisory Group (ECSAAG), the Capital Area United Way, the Ingham County Health Department, and the Mid-Michigan District Health Department.

We are grateful for their ongoing support of local data collection efforts.

FOR MORE INFORMATION

Please contact Sydney Nicholl, Community Health Promotion Specialist at (517) 541-2623 or email SNicholl@bedhd.org.
Visit: www.barryeatonhealth.org/community-health-statistics for links to other local data and data sources.

The data presented here represents the highlights of the dataset but is not comprehensive of all of the available data or question items. Please contact Sydney for more information about the extent of other data available from this survey, as well as to request customized data extractions or raw data files.

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LETTER TO RESIDENTS



**Barry-Eaton District
Health Department**

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November 30, 2023

Dear Residents:

On behalf of the Barry-Eaton District Health Department (BEDHD) and a group of community partners, I am pleased to share the 2020-2022 Barry-Eaton Behavioral Risk Factor Survey for Barry and Eaton counties. As a public health agency, BEDHD is responsible for monitoring the health status of our counties to identify and solve community health problems. This survey measures the health status, risk behaviors, clinical preventive care practices, and chronic disease outcomes of Barry and Eaton county residents.

This undertaking is an important local tool that provides crucial data to identify priority health issues in the community – and in our populations at greatest risk for health problems. Our local Barry-Eaton Behavioral Risk Factor Survey contributes to multiple strategic planning efforts and the effective targeting of resources towards key health problems. The survey assists in monitoring the effectiveness of current initiatives and collaborative efforts. Further, the data supports the development of health policy changes to improve community health across the population.

BEDHD would like to thank the collaborative partners that made this survey and its analysis possible – including Public Sector Consultants, Eaton County Substance Awareness Advisory Group (ECSAAG), Capital Area United Way, Ingham County Health Department, and Mid-Michigan District Health Department.

We welcome the utilization of this data by the community and community organizations and invite inquiries for more detailed analysis and breakouts of the data. Please contact Sydney Nicholl, BEDHD Community Health Promotion Specialist, at SNicholl@bedhd.org for more information on this opportunity. Please visit <https://barryeatonhealth.org/health-data-reports/> to view other sources of data about the community's health and the collaborative efforts to improve health.

We would like to thank again the citizens of Barry and Eaton counties who agreed to participate in the survey – understanding the health of the community depends on reliable, consistent measurement of many people over time.



Colette Scrimger
Health Officer, Barry-Eaton District Health Department

INTRODUCTION

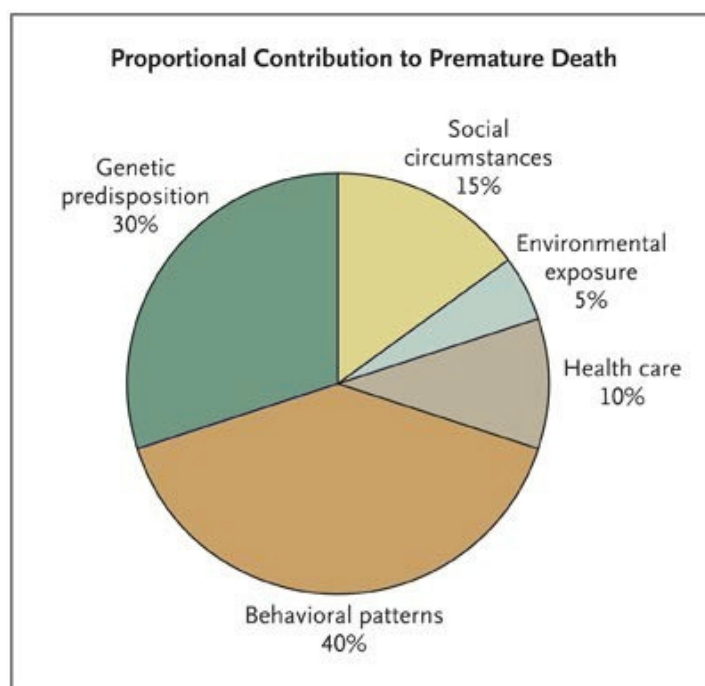
Background

Health is influenced by factors in five domains—behavioral patterns, social circumstances, environmental exposures, genetics, and health care. Behavioral patterns are the single greatest cause of premature death in the United States, accounting for nearly 40% of all deaths. Smoking, obesity, and inactivity are the top behavioral causes of premature death.¹

In 2020, Capital Area United Way, Barry-Eaton District Health Department, Ingham County Health Department, and Mid-Michigan District Health Department contracted for a survey of the adult population in their jurisdictions (Barry, Eaton, Ingham, Clinton, Gratiot, and Montcalm counties) on various health related behaviors, medical conditions, and preventative health care practices.

The survey was conducted using the Capital Area Behavioral Risk Factor Survey (BRFS) instrument, using questions from the Centers for Disease Control and Prevention’s (CDC) Behavioral Risk Factor Surveillance System questionnaire, as well as specific questions developed by the health departments to collect information of interest to the communities. Adults must be 18 years of age or older to participate in the survey. This survey continues a long tradition at the Barry-Eaton District Health Department of locally collected data on behavioral health factors.

Figure 1. Determinants of Health and Their Contribution to Premature Death¹



INTRODUCTION CONT.

Survey Design

The Barry-Eaton Behavioral Risk Factor Survey (Barry-Eaton BRFS), part of the Capital Area Behavioral Risk Factor Survey, utilizes a disproportionate stratified random sample methodology. This approach was used to ensure a sufficient sample size in each county. Households were contacted through random-digit-dialed methodology (RDD) to ensure that all possible telephone numbers in a working block with at least one directory-listed number have an equal probability of selection. Telephone numbers where no contact was made were called up to 10 times before being taken out of the calling rotation. When this occurred, the telephone number was replaced by a replicate telephone number (i.e., one within the same working block as the one that was removed) to ensure parity.

Over the past decade, the proportion of U.S. adults who live in cell phone-only households has increased dramatically. As a result of this increase in cell phone-only households, it has become necessary to add cell phones to telephone survey samples, including the Barry-Eaton BRFS. Adding cell phones to the survey sample is important because research shows that adults from cell phone-only households are different from adults who live within landline-only households. Cell phone-only adults tend to be younger, unmarried, have lower household incomes, and are more frequently Hispanic or African American. Adults from cell phone-only households also tend to have different health-related attitudes and behaviors, so, in previous survey years, the Barry-Eaton BRFS landline-only telephone survey was not able to obtain a truly representative sample of the adult population in Barry and Eaton counties. For the 2020-2022 Barry-Eaton BRFS, using the industry standard of the time, a minimum of 70% of the samples in each county were collected through calls to cell phones.

A total of 3,690 adults in all six counties responded to the telephone survey, and the overall survey response rate was 10.49% across all six counties. This rate is computed using the American Association for Public Opinion Research definitions, which compute the number of completed interviews as a proportion of the total number of eligible households contacted. In the Barry-Eaton District, 711 interviews were completed—393 in Eaton County and 318 in Barry County. The survey utilized a rolling sample survey design, which allows for reliable multi-year estimates for small areas. The rolling sample design called for collection of approximately one-third of the survey sample in each of three years—2020, 2021, and 2022.

Survey Analysis

The Barry-Eaton BRFS data were analyzed using SPSS 24 for Windows, Release 24.0.0.0 (2016), Copyright SPSS, Inc.

INTRODUCTION CONT.

Weighting

Since random sampling assumes an equal probability of selection into the final sample, it is important to adjust sample estimates when this assumption is not met to allow for subgroup analysis. No matter how carefully a population is sampled, bias can be introduced into a sample due to non-response and non-coverage of particular subgroups (e.g., age, education, race, and Hispanic origin). Therefore, weighting is employed to adjust for the known differences between fixed characteristics of the sample and the population. Cases in the 2020–2022 BRFSS data set were weighted based on the population distribution in the county.

For 2020-2022, a weighting procedure called iterative proportional fitting, or “raking,” was used to decrease the potential for bias, increase the representativeness of Barry-Eaton BRFSS data, and align with Michigan’s BRFSS process. A description of this methodology and differences from the previous post-stratification method can be found at <https://goo.gl/RtMNPz>. Michigan’s BRFSS raking methodology adjusts data based on these variables: telephone source (landline vs. cell phone), detailed race/ethnicity, education level, marital status, age by gender, gender by race/ethnicity, age by race/ethnicity, and home renter/owner status.

Barry-Eaton’s BRFSS raking methodology does not exactly follow Michigan’s BRFSS methodology due to the smaller sample size of the population; data were unable to be weighted by the gender by race/ethnicity or age by race/ethnicity variables, and race/ethnicity had to be aggregated to make a sufficient sample size. In addition, home renter/owner status was not asked of Barry-Eaton BRFSS respondents, and telephone source could not be used, as county-level estimates of cell phone prevalence are not available.

INTRODUCTION CONT.

Data Interpretation Notes

The data presented in the following charts are weighted as described above including prevalence estimate percentages and the N values. The N value is a weighted number of participants reporting that response. When the weighted number (N) is five or fewer responses, the N value and the percentage are suppressed (or not reported). Readers should examine the N values when looking at subgroups such as age, education, and income. The smaller the N value, the greater the chance that the prevalence estimate does not have a statistically significant difference from the other groups.

Note that due to missing values, question refusal, and data weighting, the sum of the N values of all responses in a particular measure, or the sum of the N values of respondents in a particular subgroup, will not typically equal the total number of interviews conducted. The prevalence estimates exclude missing data from the percentages reported.

In the summary table, “N/A” indicates that the data are insufficient to make either a comparison to the state or to determine a trend pattern. For individual indicators, the use of ** means that the number of responses or the percentage for specific subgroups were too small to be shared, and the data were suppressed (not reported).

Results and Comparisons to Other Data

This report presents estimates from the 2020-2022 Barry-Eaton BRFs. It is the only source of county-specific, population-based estimates of the prevalence of various health behaviors, medical conditions, and preventive health care practices among Eaton County adults. Results presented in this report can be interpreted as prevalence estimates among Eaton County’s adult population.

Due to differences in the weighting methodologies used in the 2011-2013 and 2017-2019 Barry-Eaton BRFs surveys, caution should be exercised when comparing Eaton County BRFs data from 2011-2013 and earlier to 2017-2019 data. Also, while every effort was made to match the Michigan BRFs methodology, an exact replication was not possible due to differences in population size (differences described above) and the percentage of cell phone samples collected. Therefore, while data from both surveys is presented within this report, comparisons of Eaton County BRFs data and Michigan BRFs data should be interpreted with caution.

Due to Michigan BRFs (MiBRFS) methodology changes in 2011, any MiBRFS data from 2011 and later should not be compared to prior data (indicated on graphs by a dashed grey line). More information on the MiBRFS is available at <https://goo.gl/EYshRF>.

INTRODUCTION CONT.

Understanding the Data Display

Each topic has data points highlighted in a box that looks like this:

| Topic Name | Current Smoker | % | N |
|-----------------|----------------|------|----|
| Total | | 15.5 | 61 |
| Male | | 19.4 | 38 |
| Female | | 11.7 | 23 |
| 18-34 | | 14 | 15 |
| 35-54 | | 19 | 23 |
| 55+ | | 13 | 21 |
| Less than HS | | 41.7 | 10 |
| HS Grad | | 19.8 | 21 |
| Some College | | 15.4 | 24 |
| College Grad | | 5.6 | 6 |
| ≤\$24,999 | | 32.4 | 12 |
| \$25,000-49,999 | | 14.4 | 17 |
| \$50,000-74,999 | | 18.9 | 14 |
| \$75,000+ | | 11.1 | 12 |

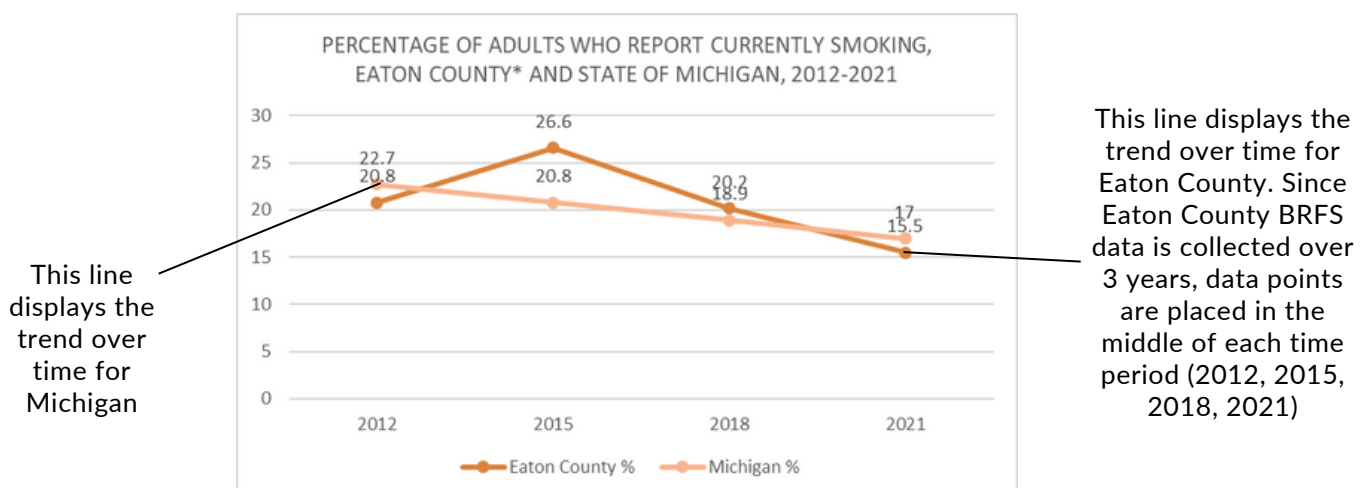
Percentages for that specific indicator are presented in this column. Also called a point estimate or prevalence estimate

This column displays subgroups based on gender, age, education, and income

This column displays the weighted number of participants (N) reporting that response

** Indicates suppressed data

Many topics also have graphs demonstrating trends over time:



SUMMARY

Background

A number of trends are noted in the 2020-2022 Eaton County BRFSS that impact important public health topics.

Prevalence of cigarette smoking and vaping use decreased.

The prevalence of Eaton County adults who were current cigarette smokers decreased from 20.2% in 2017-2019 to 15.5% in 2020-2022 and was slightly less than Michigan (17% in 2021). Significant disparities continue to exist, as the prevalence was notably higher for adults with a high school degree (19.8%) or less (41.7%), and adults with an annual income of less than \$25,000 (32.4%). In addition, Eaton County adults reporting ever using electronic cigarettes decreased from 31.5% in 2017-2019 to 11.5% in 2020-2022. Nearly 70% of electronic cigarette users stated that the main reason they started using was to quit smoking. Additional resources are needed to decrease smoking in Eaton County's population.

Access to health care varied while health care coverage improved.

In Eaton County, 10.4% of adults reported being unable to see a doctor due to cost during the past year, which was lower than the 17% reported in 2017-2019 and 13.6% in the 2014-2016 cycle. For adults who reported being unable to see a dentist, the trend has increased to 14.7% in 2020-2022 compared to 12.7% in 2017-2019 and 2014-2016. The percentage of Eaton County adults who reported not having health insurance coverage improved from 13.1% in 2014-2016, to 10.9% in 2017-2019, to 4.4% in 2020-2022, and was similar to Michigan data (6.2% in 2021). These decreases may have reflected increases in coverage due to the Affordable Care Act and the Healthy Michigan Plan and may be affected by the Medicaid work requirements heading in to the next survey cycle.

Low levels of nutrition and physical activity continue to result in obesity.

Only about one-quarter of Eaton County adults (26%) routinely ate the recommended five or more servings of fruit and vegetables per day, which was a decrease from 26.5% in 2017-2019 and 35.8% in 2014-2016. In addition, 35.8% of Eaton County adults reported no leisure-time physical activity, which was a substantial increase from 21.5% in 2017-2019. Low levels of daily fruit and vegetable consumption and physical activity are potential contributing factors to the continuing high prevalence of obesity among Eaton County adults.

Between 2020 and 2022, more Eaton County adults were considered overweight (39.8%) than during 2017-2019 (36.9%). Furthermore, the prevalence of obesity increased steadily over the last four BRFSS cycles, from 33.7% in 2011-2013 to 37.3% in 2020-2022. Eaton County adults (37.3%) were more likely to be obese than adults in Michigan (34.4%). Being overweight or obese can contribute to other chronic diseases and poor health outcomes. Less than one in four adults (22.8%) in Eaton County was considered to be a healthy weight.

SUMMARY CONT.

Background

For many indicators, educational and financial disparities exist.

Household income and level of education are social determinants of health, meaning that disparities in these areas can lead to short- and long-term differences in health outcomes for individuals. Less educational attainment or income resulted in worse results for the following indicators and outcomes:

Education:

- Worried about paying rent/mortgage
- Worried about paying for nutritious food
- Current smoker
- Have ever used e-cigarettes
- Fruit and vegetable consumption
- Physical inactivity
- Any kind of health care coverage
- Couldn't see a doctor or dentist because of cost
- Having a colorectal cancer screening
- Disability
- Obese
- Overweight

Income:

- Worried about paying for nutritious food
- Used Marijuana everyday for the past 30 days
- Current smoker
- Have ever used e-cigarettes
- Fruit and vegetable consumption
- Physical inactivity
- Any kind of health care coverage
- Couldn't see a doctor or dentist because of cost
- Receiving a mammogram
- Poor physical health
- Obese
- High blood pressure
- High cholesterol

SUMMARY TABLE

| EATON COUNTY BEHAVIORAL RISK FACTOR SURVEY 2020-2022 | | | | |
|---|----------------------|--|--------------|----------|
| INDICATORS AND MEASURES | | | Eaton County | Michigan |
| ECONOMIC INDICATORS | Financial Stability | Worried about Paying Mortgage/Rent | 27.8% | N/A |
| | | Worried about Paying for Nutritious Food | 21.3% | N/A |
| RISK BEHAVIOR INDICATORS | Substance Use | Binge Drinking in the Past Month | 9.7% | 16.1%* |
| | | Marijuana Use in the Past Month | 3.7% | N/A |
| | Tobacco Use | Current Smoker | 15.5% | 17%* |
| | | Ever Used Electronic Cigarettes | 11.5% | N/A |
| | Nutrition | Five or More Daily Fruit or Vegetable Servings | 26.0% | N/A |
| | Physical Activity | No Physical Activity in the Past Month | 35.8% | 23.1%* |
| CLINICAL PREVENTION INDICATORS | Access to Healthcare | No Personal Health Care Provider | 8.5% | 10.9%* |
| | | No Health Care Coverage | 4.7% | 6.2%* |
| | | Could Not See Doctor due to Cost | 10.4% | 7.9%* |
| | | Could Not See Dentist due to Cost | 14.7% | N/A |
| | Cancer Screening | Ever Had a Mammogram (Women 40+) | 91.3% | 92.8%** |
| | | Ever Had Colon Cancer Screening (Adults 50+) | 81.5% | 79.4%** |
| HEALTH STATUS INDICATORS | Disability | Limited in Any Activity | 11.7% | 28.7%* |
| | Health Status | Poor Physical Health | 10.9% | 11.9%* |
| | | Poor Mental Health | 12.2% | 15.5%* |
| | Weight Status | Obese | 37.3% | 34.4%* |
| | | Overweight | 39.8% | 34.2%* |
| CHRONIC DISEASE OUTCOMES | Chronic Disease | Ever Had High Blood Pressure | 36.6% | 35.3%* |
| | | Ever Had Diabetes | 14.0% | 10.8%* |
| | | Ever Had Asthma | 17.0% | 16.3%* |
| | | Ever Had High Cholesterol | 32.8% | 36.8%* |

*Note: Based on 2021 BRFSS of Michigan Residents

**Note: Based on 2020 BRFSS of Michigan Residents

Items marked in red fall below the statewide figures and may require the County's attention.
Items marked in green indicate areas where the County is outperforming the state.

FINANCIAL STABILITY

Financial stability is a key social determinant of health, which means it can affect a wide range of health, functioning, and quality-of-life outcomes and risks.¹ Financial stability contributes to physical health; for example, more disposable income could allow one to buy higher quality food or a gym membership. Also, financial stability can contribute to mental health via the presence or absence of chronic stress.

71.6% of Eaton County adults reported being “never” worried about paying their rent or mortgage during the past year. A small gender difference was noted with males worrying less about paying rent or a mortgage. Adults aged 55+ years were most likely to report never being worried about paying their rent or mortgage (82.2%). Adults with a college graduate education were more likely to report never worrying than adults in other education brackets. The highest prevalence of never worrying about paying rent or mortgage was seen in adults with an annual income of \$75,000.

In Eaton County, 78.4% of adults reported being “never” worried about paying for nutritious food during the past year. The prevalence for males was higher than females. Adults with less than a high school education were more likely to report never worrying than adults in other education brackets. Adults with annual incomes over \$75,000 had a higher prevalence of never worrying about paying for nutritious food than adults with lower incomes.

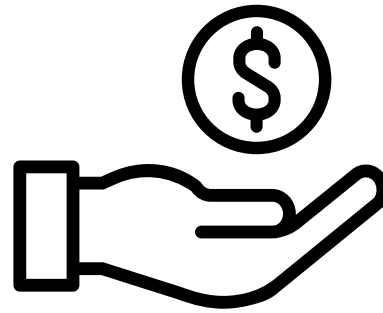
Due to differences in survey methodology, no comparison to state-level data is available.

Data by Demographics

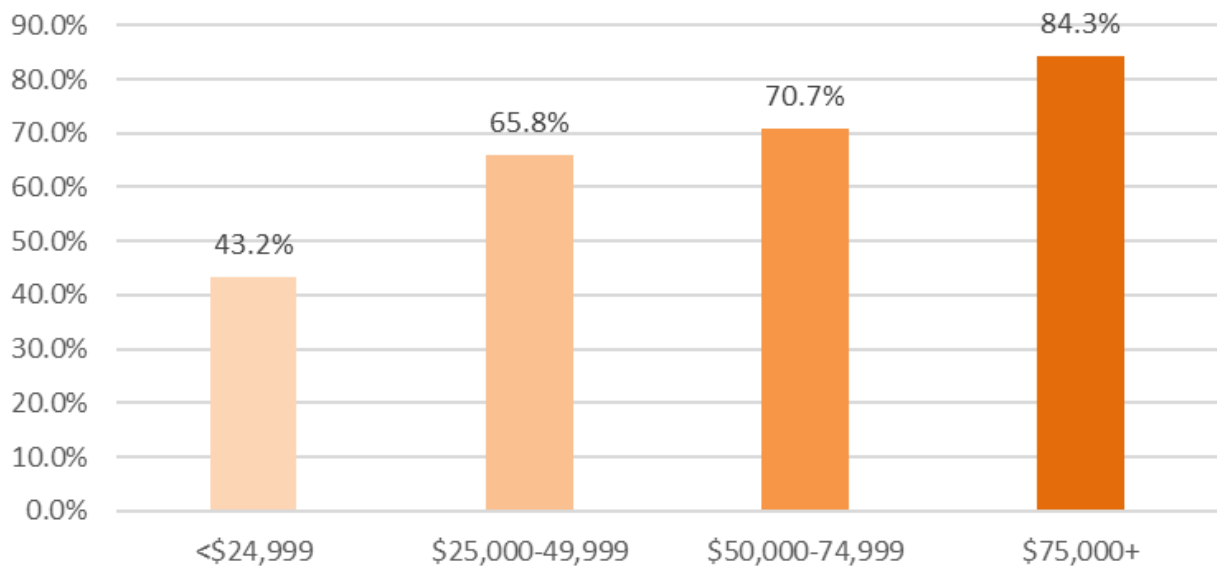
| Never worried about paying rent/mortgage | % | N |
|--|------|-----|
| Total | 71.6 | 281 |
| Male | 68.5 | 135 |
| Female | 75 | 147 |
| 18-34 | 53.3 | 57 |
| 35-54 | 73.2 | 90 |
| 55+ | 82.2 | 134 |
| Less than HS | 62.5 | 15 |
| HS Grad | 63.8 | 67 |
| Some College | 68.8 | 106 |
| College Grad | 86.9 | 93 |
| ≤\$24,999 | 43.2 | 16 |
| \$25,000-49,999 | 65.8 | 79 |
| \$50,000-74,999 | 70.7 | 53 |
| \$75,000+ | 84.3 | 91 |

| Never worried about paying for nutritious food | % | N |
|--|------|-----|
| Total | 78.4 | 308 |
| Male | 81.7 | 161 |
| Female | 74.7 | 148 |
| 18-34 | 68.2 | 73 |
| 35-54 | 75.6 | 93 |
| 55+ | 86.6 | 142 |
| Less than HS | 91.7 | 22 |
| HS Grad | 72.6 | 77 |
| Some College | 73.7 | 115 |
| College Grad | 88.7 | 94 |
| ≤\$24,999 | 47.4 | 18 |
| \$25,000-49,999 | 67.8 | 80 |
| \$50,000-74,999 | 85.1 | 63 |
| \$75,000+ | 91.6 | 98 |

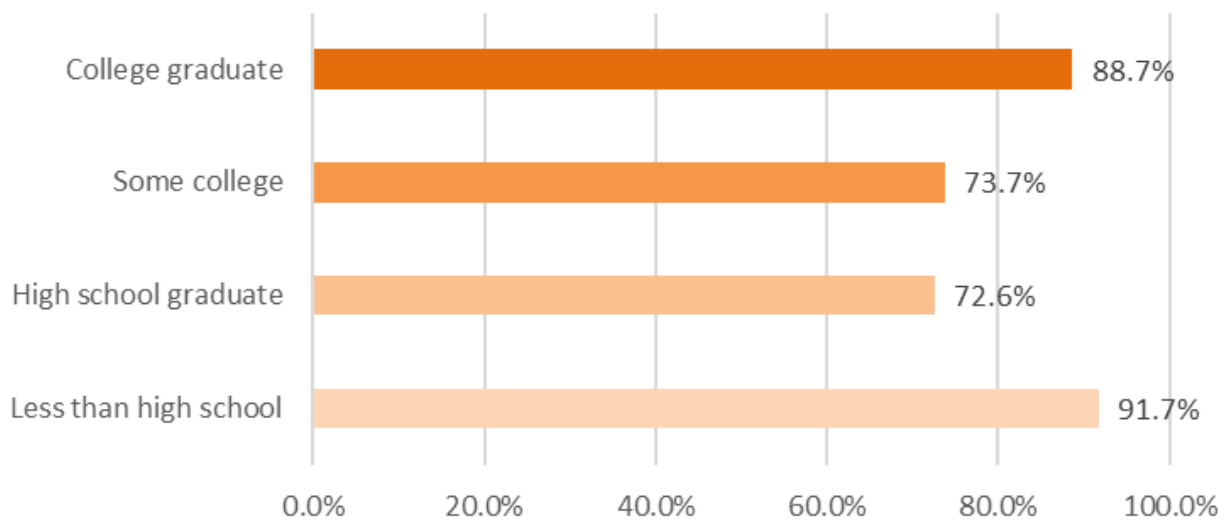
FINANCIAL STABILITY CONT.



PERCENTAGE OF EATON COUNTY ADULTS REPORTING "NEVER" WORRIED ABOUT HAVING MONEY FOR MORTGAGE OR RENT DURING THE PAST YEAR, BY INCOME LEVEL, 2020-2022



PERCENTAGE OF EATON COUNTY ADULTS REPORTING "NEVER" WORRIED ABOUT HAVING MONEY FOR NUTRITIOUS FOOD DURING THE PAST YEAR, BY EDUCATION LEVEL, 2020-2022



ALCOHOL CONSUMPTION

Excessive alcohol use, including underage drinking and binge drinking (drinking five or more drinks on an occasion for men or four or more drinks on an occasion for women) has been associated with serious health problems, such as cirrhosis of the liver, high blood pressure, stroke, and some types of cancer, and can increase the risk for motor vehicle accidents, injuries, violence, and suicide.²

Less than half (37.2%) of the surveyed adults in Eaton County reported having at least one alcoholic drink in the past 30 days, and 9.7% reported binge drinking at least once in the past 30 days. Males were more likely than females to have reported any recent drinking and recent binge drinking. A higher percentage of the population aged 35-54 reported binge drinking than the population aged over 55 and under 35. Binge drinking prevalence was highest among college graduates and was highest among income levels higher than \$75,000. The prevalence of having a drink in the past 30 days was highest among those with an income higher than \$75,000.

In 2021, Eaton County (9.7%) has a lower prevalence of binge drinking than the state of Michigan (16.1%).

Data by Demographics

| Drank in Past 30 Days | % | N |
|-----------------------|------|-----|
| Total | 37.2 | 146 |
| Male | 39.3 | 77 |
| Female | 35 | 69 |
| 18-34 | 31.8 | 34 |
| 35-54 | 43.1 | 53 |
| 55+ | 36.4 | 60 |
| Less than HS | 8 | 2 |
| HS Grad | 33 | 35 |
| Some College | 38.3 | 59 |
| College Grad | 46.7 | 50 |
| ≤\$24,999 | 27.8 | 10 |
| \$25,000-49,999 | 30.3 | 36 |
| \$50,000-74,999 | 32.9 | 24 |
| \$75,000+ | 51.4 | 55 |

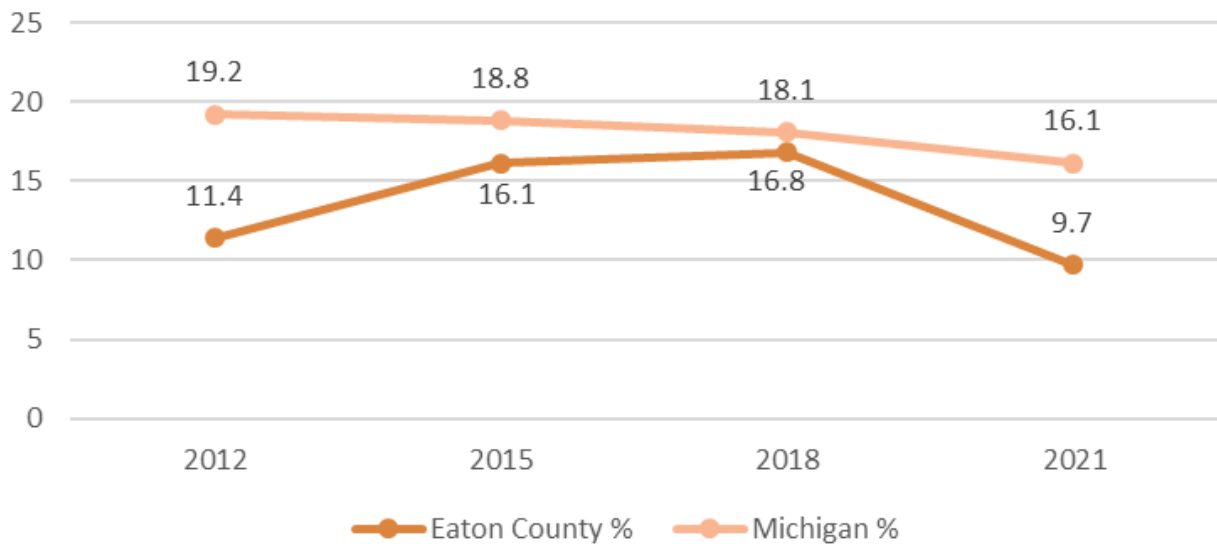
| Binge Drinking Past 30 Days | % | N |
|-----------------------------|------|----|
| Total | 9.7 | 38 |
| Male | 11.2 | 22 |
| Female | 8.1 | 16 |
| 18-34 | 7.5 | 8 |
| 35-54 | 13.8 | 17 |
| 55+ | 7.9 | 13 |
| Less than HS | 8 | 2 |
| HS Grad | 5.7 | 6 |
| Some College | 10.4 | 16 |
| College Grad | 13.2 | 14 |
| ≤\$24,999 | 8.3 | 3 |
| \$25,000-49,999 | 7.6 | 9 |
| \$50,000-74,999 | 6.8 | 5 |
| \$75,000+ | 15.9 | 17 |



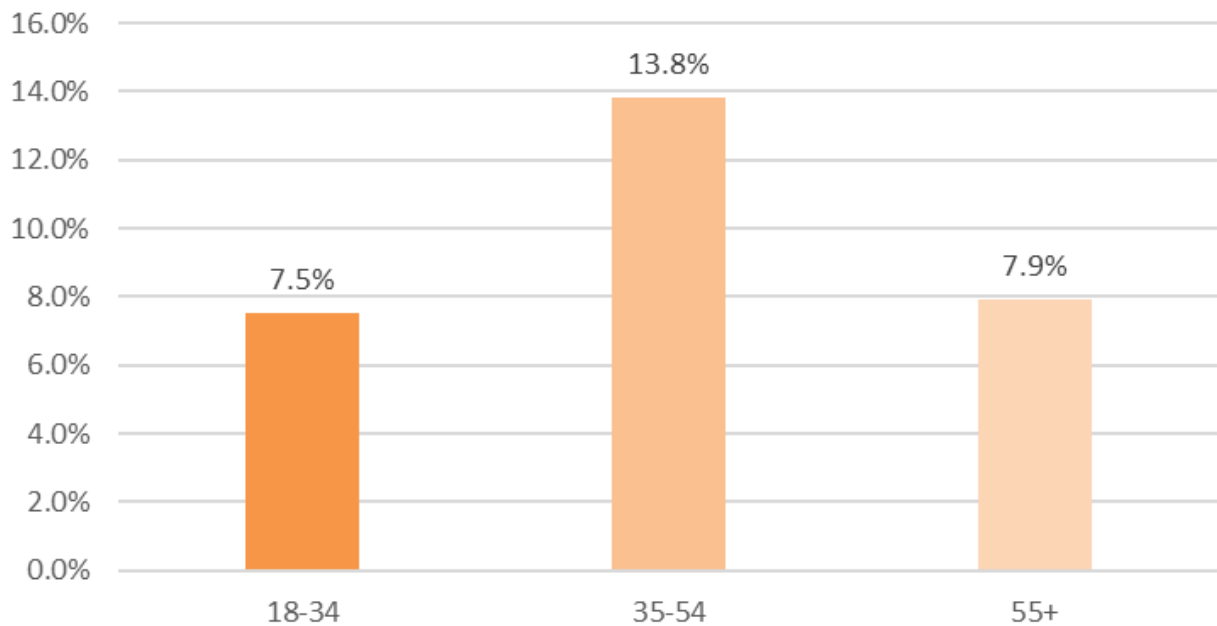
ALCOHOL CONSUMPTION CONT.



PERCENTAGE OF ADULTS REPORTING BINGE DRINKING IN PAST 30 DAYS, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING BINGE DRINKING IN PAST 30 DAYS, BY AGE GROUP, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

MARIJUANA

Marijuana is the most commonly used federally illegal drug in the United States, with an estimated 48.2 million people using it in 2019.³ Marijuana use may have a wide range of health effects on the body and brain. There is strong evidence that marijuana use may lead to addiction, breathing problems, short-term declines in memory, attention, and learning, increased risk of poisoning among children, increased risk for low birth weight in babies when a mother uses during her pregnancy, and increased risk for psychosis or schizophrenia.³

The percentage of Eaton County adults who reported using marijuana everyday, for any reason, during the past month was 3.7%. More males reported using marijuana (5.3%) than females (2.6%).

Few adults aged 55 years and older reported using marijuana (0.6%) compared with younger age groups (4.9% for ages 18-34 and 7.3% for ages 35-54). Adults with some college education were more likely to have used marijuana everyday for the past month than adults in other education categories. 5.3% of adults with an income level ≤\$24,999 reported using marijuana everyday, for any reason, during the past month.

During 2020-2022, the percentage of Eaton County adults who reported using marijuana everyday for the past 30 days (3.7%) decreased from 2017-2019 (14.5%) (data not shown). Due to differences in survey methodology, no comparison to state level data is available.

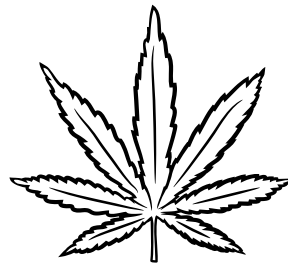
The majority of recent adult marijuana users (66.4%) in Eaton County reported that they used marijuana for only recreational reasons, compared to both recreational and medicinal (26.1%) or only medicinal (7.5%) reasons.

Data by Demographics

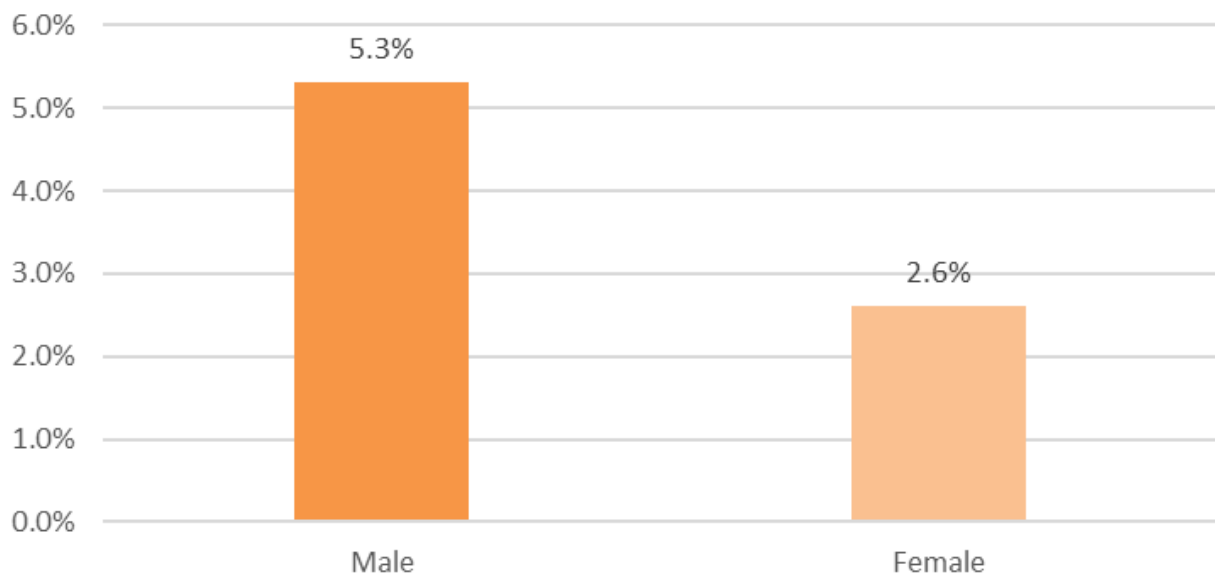
| Used Marijuana Everyday Past 30 Days | % | N |
|--------------------------------------|-----|----|
| Total | 3.7 | 14 |
| Male | 5.3 | 10 |
| Female | 2.6 | 5 |
| 18-34 | 4.9 | 5 |
| 35-54 | 7.3 | 9 |
| 55+ | 0.6 | 1 |
| Less than HS | 0 | 0 |
| HS Grad | 1.9 | 2 |
| Some College | 7.3 | 11 |
| College Grad | 0.9 | 1 |
| ≤\$24,999 | 5.3 | 2 |
| \$25,000-49,999 | 5.2 | 6 |
| \$50,000-74,999 | 1.4 | 1 |
| \$75,000+ | 2.8 | 3 |



MARIJUANA CONT.

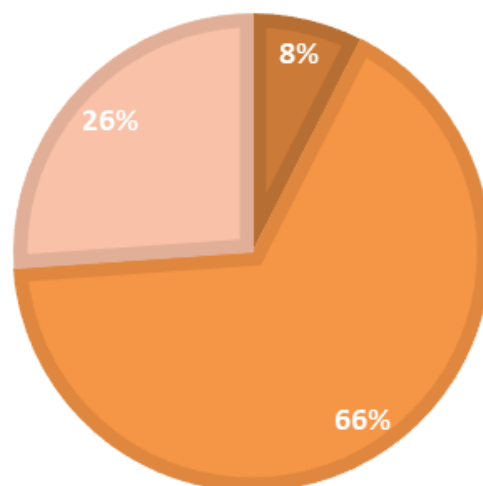


PERCENTAGE OF EATON COUNTY ADULTS REPORTING MARIJUANA USE EVERYDAY DURING PAST 30 DAYS, BY GENDER, 2020-2022



REASONS FOR USING MARIJUANA DURING PAST 30 DAYS, EATON COUNTY ADULTS, 2020-2022

■ Medicinal ■ Recreational ■ Both medicinal and recreational



SMOKING

Cigarette smoking remains the leading cause of preventable disease, disability, and death in the United States.⁴ Smoking is harmful to almost every organ in the body, and causes disease and disability.⁴ For the purposes of this report, smoking is defined as cigarette smoking.

The proportion of Eaton County adults who reported being a current smoker was 15.5%. Males were more likely to report being a current smoker (19.4%) compared to females (11.7%). Adults in middle age groups had a higher prevalence of current smoking (19% in adults aged 35-54) than younger adults (14% in adults aged 18-34) and older adults (13% in adults aged 55+). The percentage of adults who currently smoke was highest among those with less than a high school education (41.7%). The percentage of adults who currently smoke was highest among those with an income ≤\$24,999 (32.4%).

Compared to Michigan (17% for 2021), Eaton County has a slightly lower prevalence of adults who reported being a current smoker (15.5% for 2020-2022). The percentage of the adult population who reported being a current smoker has decreased in Eaton County since 2017-2019.

Data by Demographics

| Current Smoker | % | N |
|-----------------|------|----|
| Total | 15.5 | 61 |
| Male | 19.4 | 38 |
| Female | 11.7 | 23 |
| 18-34 | 14 | 15 |
| 35-54 | 19 | 23 |
| 55+ | 13 | 21 |
| Less than HS | 41.7 | 10 |
| HS Grad | 19.8 | 21 |
| Some College | 15.4 | 24 |
| College Grad | 5.6 | 6 |
| ≤\$24,999 | 32.4 | 12 |
| \$25,000-49,999 | 14.4 | 17 |
| \$50,000-74,999 | 18.9 | 14 |
| \$75,000+ | 11.1 | 12 |

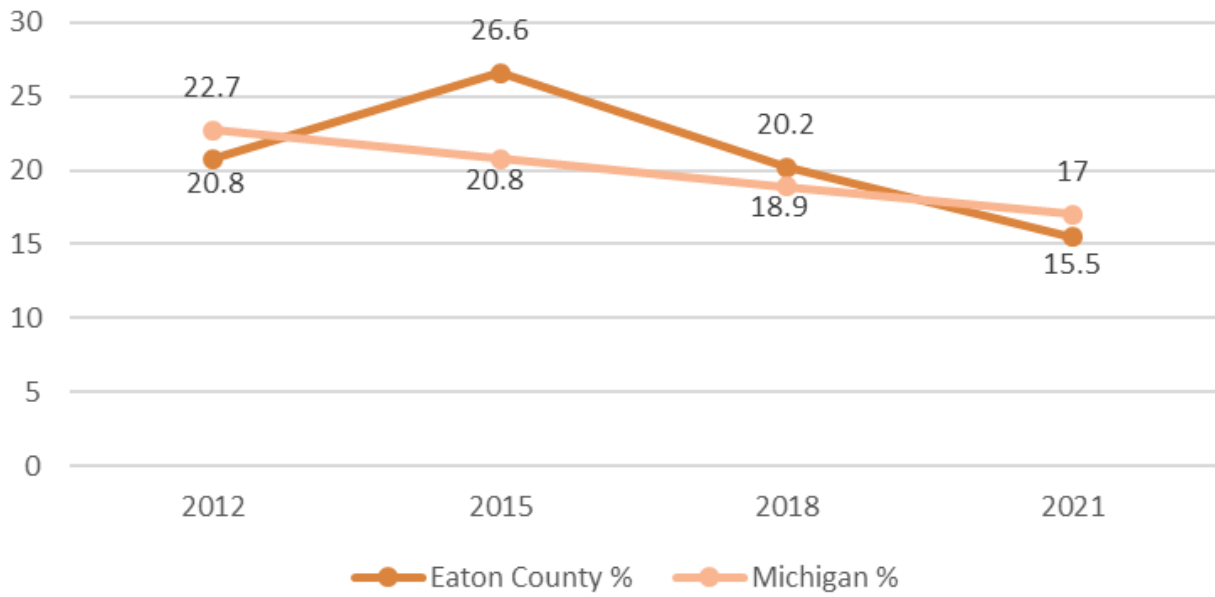
†PLEASE SEE PAGE 5 FOR MIBRFS DATA LIMITATIONS.



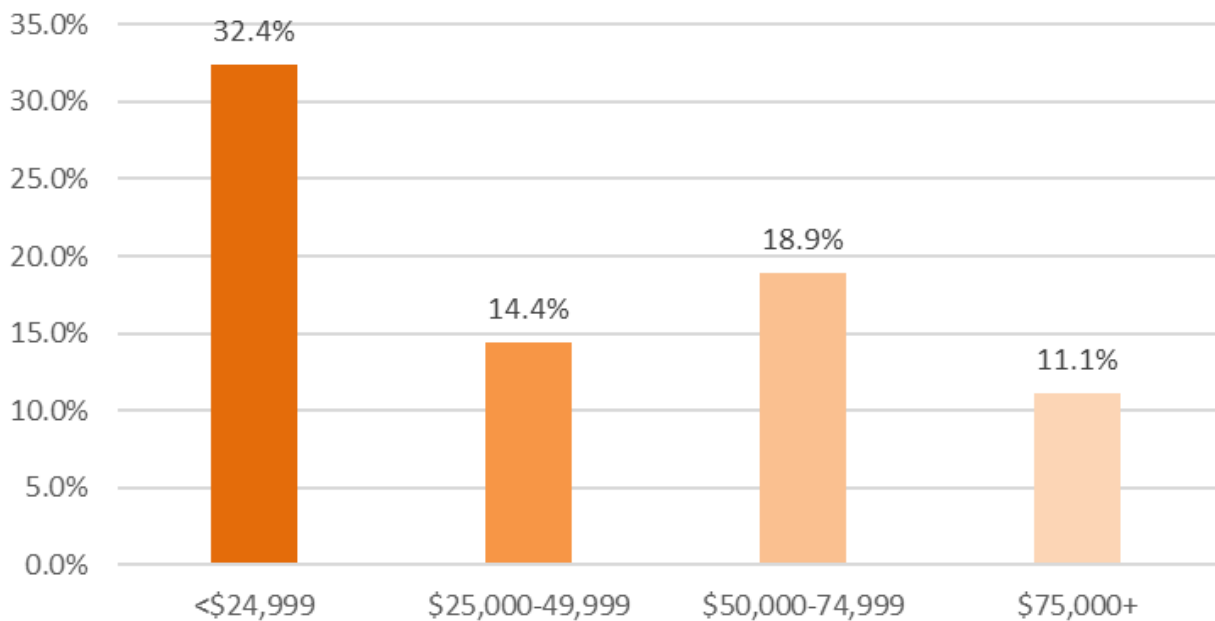
SMOKING CONT.



PERCENTAGE OF ADULTS WHO REPORT CURRENTLY SMOKING, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS WHO REPORT CURRENTLY SMOKING, BY INCOME, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

ELECTRONIC CIGARETTES

Electronic cigarettes, or e-cigarettes, are a new and popular method of smoking, especially among young smokers. While e-cigarettes do not contain tobacco, they still provide the user with nicotine. E-cigarettes claim to be a healthier alternative to tobacco, however, the contents of an e-cigarette can include cancer-causing chemicals, heavy metals such as nickel and lead, diacetyl in the flavoring compounds, and ultrafine particles that can enter the lungs.⁵

In Eaton County, 11.5% of adults reported ever using e-cigarettes or other electronic "vaping" products in their lifetime. Current use among Michigan adults was at 7.6% of the 2021 population (data not shown).

Adult males in Eaton County reported using e-cigarettes more often than females. Those aged 18-34 were much more likely to have ever used e-cigarettes (29%) than older adults. Those with less than a high school education had the highest prevalence of ever using e-cigarettes (37.5%) among education levels. Prevalence of ever using e-cigarettes was highest with an income level ≤\$24,999 (27%).

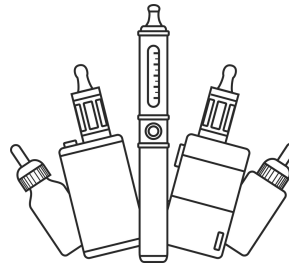
While there were a variety of reasons why Eaton County adults start using e-cigarettes, the most common reason was to quit smoking (69.6%) in 2017-2019.

Data by Demographics

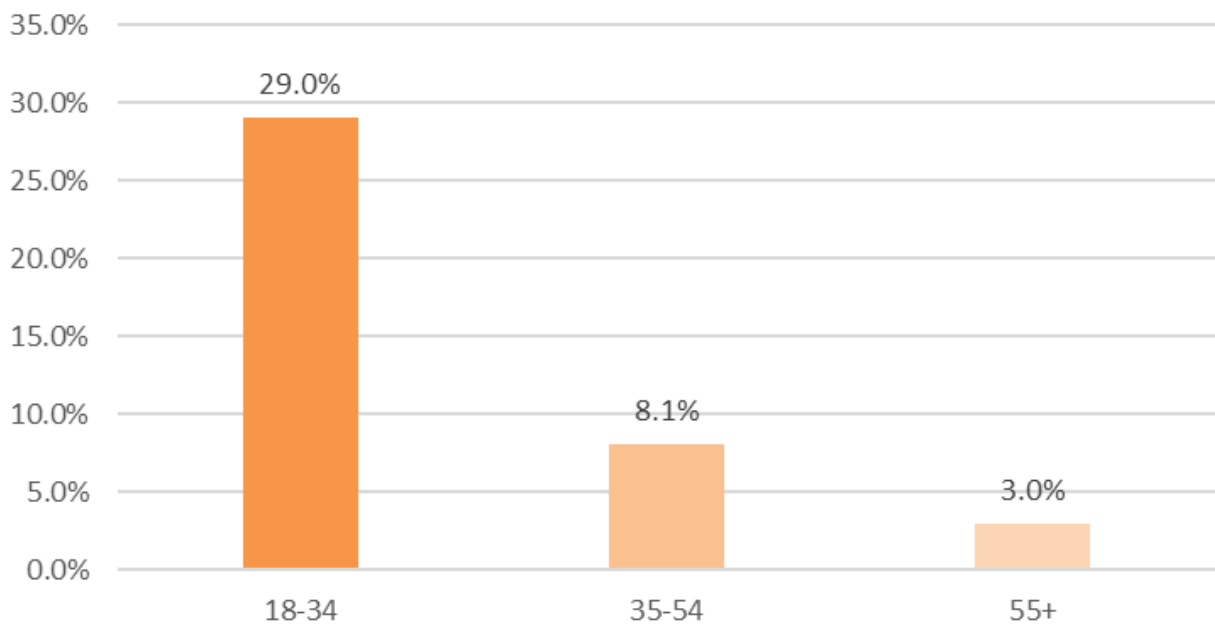
| Have Ever Used E-Cigarettes | % | N |
|-----------------------------|------|----|
| Total | 11.5 | 45 |
| Male | 15.7 | 31 |
| Female | 7.6 | 15 |
| 18-34 | 29 | 31 |
| 35-54 | 8.1 | 10 |
| 55+ | 3 | 5 |
| Less than HS | 37.5 | 9 |
| HS Grad | 14 | 15 |
| Some College | 8.4 | 13 |
| College Grad | 7.5 | 8 |
| ≤\$24,999 | 27 | 10 |
| \$25,000-49,999 | 10.9 | 13 |
| \$50,000-74,999 | 16.2 | 12 |
| \$75,000+ | 7.5 | 8 |



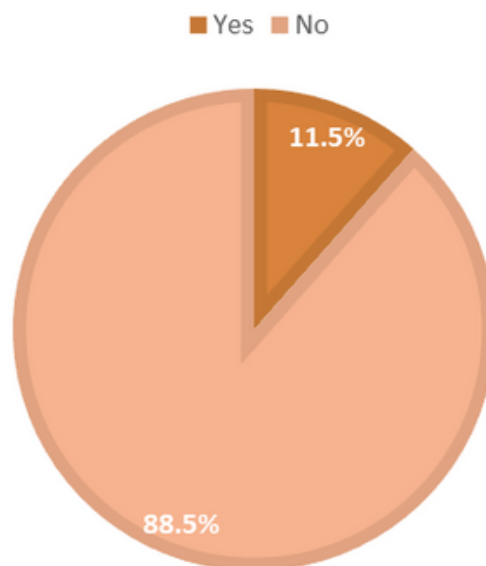
ELECTRONIC CIGARETTES CONT.



PERCENTAGE OF EATON COUNTY ADULTS REPORTING ANY LIFETIME USE OF E-CIGARETTES, BY AGE GROUP, 2020-2022



PERCENTAGE OF EATON COUNTY ADULTS REPORTING EVER USING AN E-CIGARETTE OR OTHER ELECTRONIC 'VAPING' PRODUCT IN THEIR LIFETIME, 2020-2022



FRUITS & VEGETABLES

Consuming fruits and vegetables regularly can reduce the risk of some chronic diseases and types of cancer, and can help with weight management.⁶ The U.S. Department of Agriculture recommends that fruits and vegetables fill half of your plate during a meal.⁷

In Eaton County, 37.2% of adults had two or less servings of fruits or vegetables per day. Males had two or less fruit or vegetable servings per day more frequently (39.6%) than females (35.1%). The 18-34 age group had the lowest consumption of fruits or vegetables. College graduates were less likely to report consuming two or less servings of fruits or vegetables per day than adults with lower education levels.

26% of adults in Eaton County had five or more servings of fruits or vegetables per day. The proportion of adults consuming five or more servings of fruits or vegetables per day decreased as age increased. Females were more likely to report five or more servings of fruits or vegetables per day (27.8%) than males (24.4%).

Due to differences in survey methodology, no comparison to state level data is available.

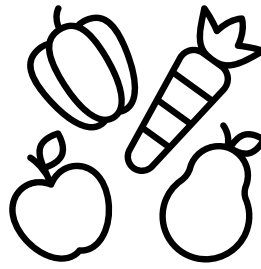


Data by Demographics

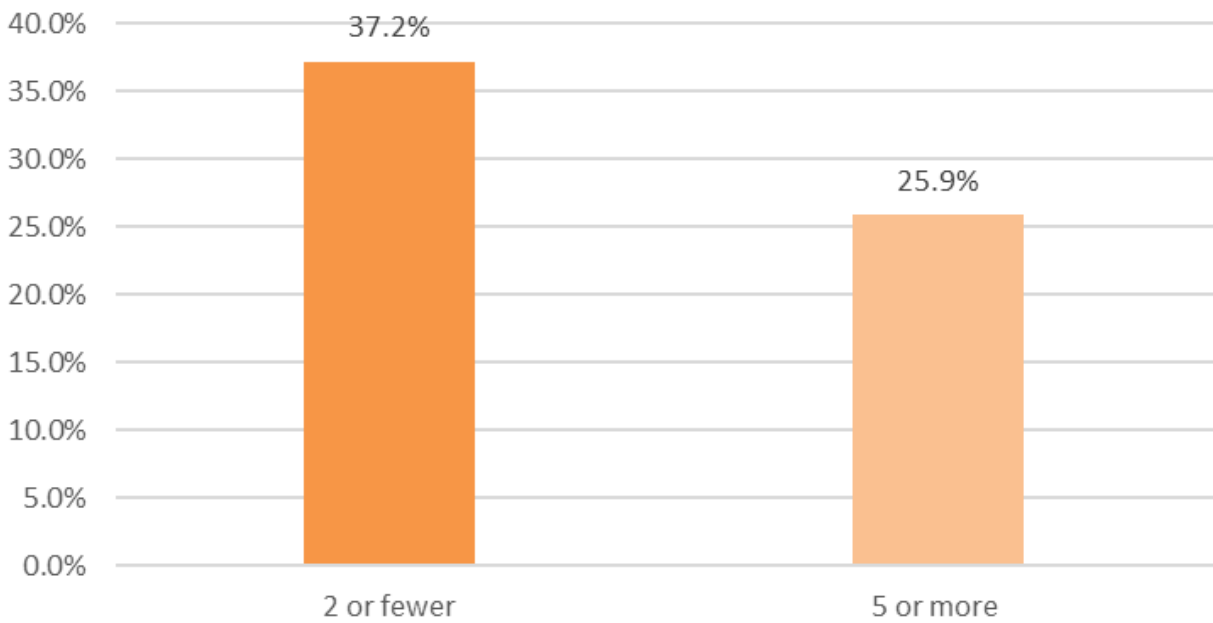
| ≤2 Servings of Fruits or Vegetables/Day | % | N |
|---|------|-----|
| Total | 37.2 | 145 |
| Male | 39.6 | 78 |
| Female | 35.1 | 68 |
| 18-34 | 25.2 | 27 |
| 35-54 | 43.3 | 52 |
| 55+ | 40.5 | 66 |
| Less than HS | 41.7 | 10 |
| HS Grad | 49.1 | 52 |
| Some College | 34.6 | 53 |
| College Grad | 27.6 | 29 |
| ≤\$24,999 | 54.1 | 20 |
| \$25,000-49,999 | 70.5 | 55 |
| \$50,000-74,999 | 17.6 | 13 |
| \$75,000+ | 38.1 | 40 |

| ≥5 Servings of Fruits or Vegetables/Day | % | N |
|---|------|-----|
| Total | 26 | 101 |
| Male | 24.4 | 48 |
| Female | 27.8 | 54 |
| 18-34 | 34.6 | 37 |
| 35-54 | 23.3 | 28 |
| 55+ | 22.7 | 37 |
| Less than HS | 37.5 | 9 |
| HS Grad | 15.1 | 16 |
| Some College | 23.5 | 36 |
| College Grad | 38.1 | 40 |
| ≤\$24,999 | 5.4 | 2 |
| \$25,000-49,999 | 23.7 | 28 |
| \$50,000-74,999 | 33.8 | 25 |
| \$75,000+ | 21.9 | 23 |

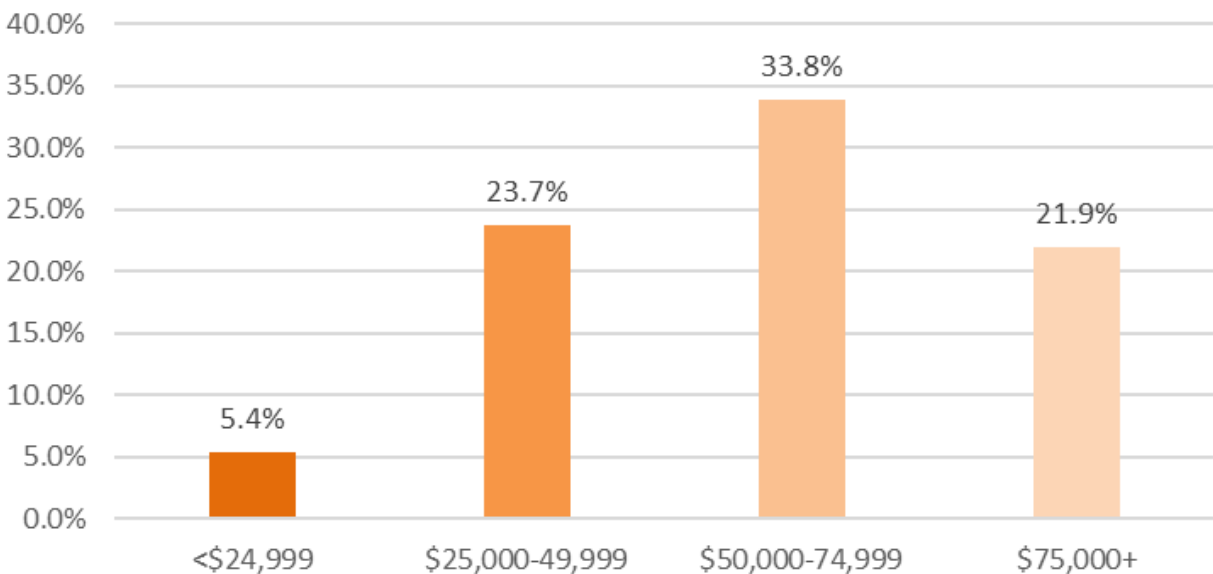
FRUITS & VEGETABLES CONT.



PERCENTAGE OF ADULTS REPORTING ≥ 5 OR ≤ 2 SERVINGS OF FRUITS OR VEGETABLES PER DAY, EATON COUNTY, 2020-2022



PERCENTAGE OF ADULTS REPORTING FIVE OR MORE SERVINGS OF FRUITS OR VEGETABLES PER DAY, BY INCOME, EATON COUNTY, 2020-2022



PHYSICAL ACTIVITY

Regular physical activity can help to improve health and reduce the risk of many chronic diseases. Adults should be physically active for at least 30 minutes a day. Keeping physically active also helps to control weight, maintain healthy bones, muscles, and joints, and can relieve symptoms of depression.⁸ No leisure time physical activity was defined as other than their regular job, no participation in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise in the past month.

In Eaton County, 35.8% of surveyed adults reported no leisure time physical activity during the past month. 35% of females and 36.7% of males reported no leisure time physical activity during the past month. Adults in younger age groups were more likely to report no leisure time physical activity during the past month (37.4% for 18-34 years of age) than older adults (33.5% for those aged 55+). Adults with lower education and income levels had a higher prevalence of reporting no leisure time physical activity during the past month than those with higher education and income levels. College grads and income levels of \$75,000+ reported a lower percentage of no leisure time physical activity during the past month.

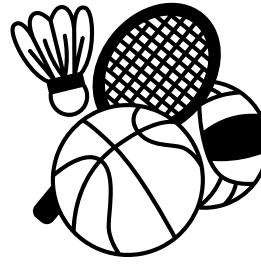
Due to changes in survey questions between BRFSS cycles, no data were available to assess physical activity trends in Eaton County prior to 2014-2016.

Data by Demographics

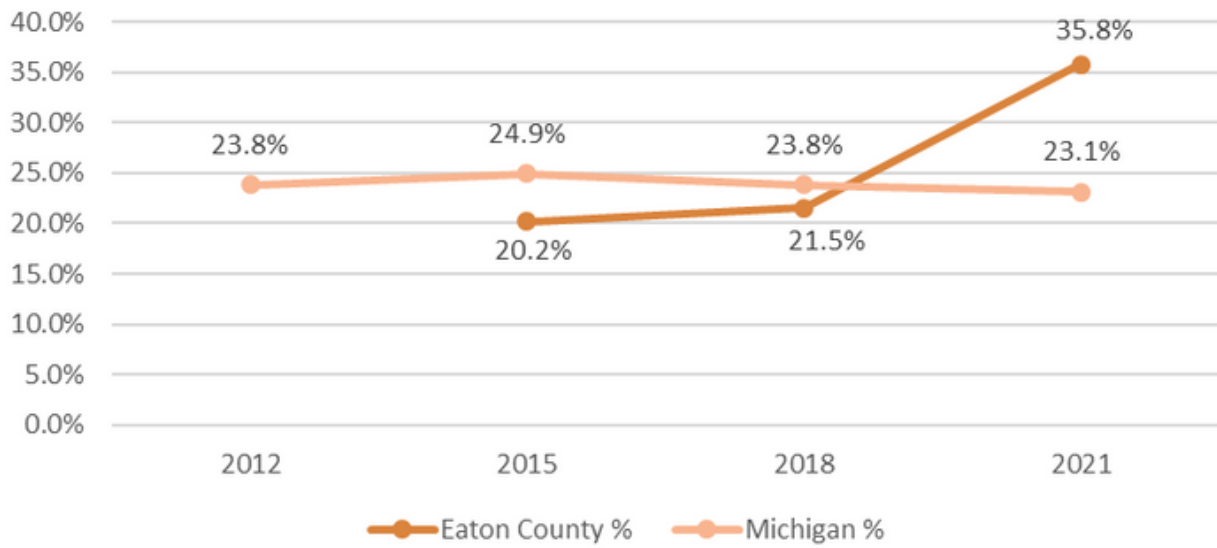
| No leisure time physical activity in the past month | % | N |
|---|------|-----|
| Total | 35.8 | 141 |
| Male | 36.7 | 72 |
| Female | 35 | 69 |
| 18-34 | 37.4 | 40 |
| 35-54 | 35.3 | 47 |
| 55+ | 33.5 | 55 |
| Less than HS | 56 | 14 |
| HS Grad | 37.7 | 40 |
| Some College | 34.8 | 54 |
| College Grad | 30.8 | 33 |
| ≤\$24,999 | 56.8 | 21 |
| \$25,000-49,999 | 35.6 | 42 |
| \$50,000-74,999 | 36.5 | 27 |
| \$75,000+ | 25.2 | 27 |



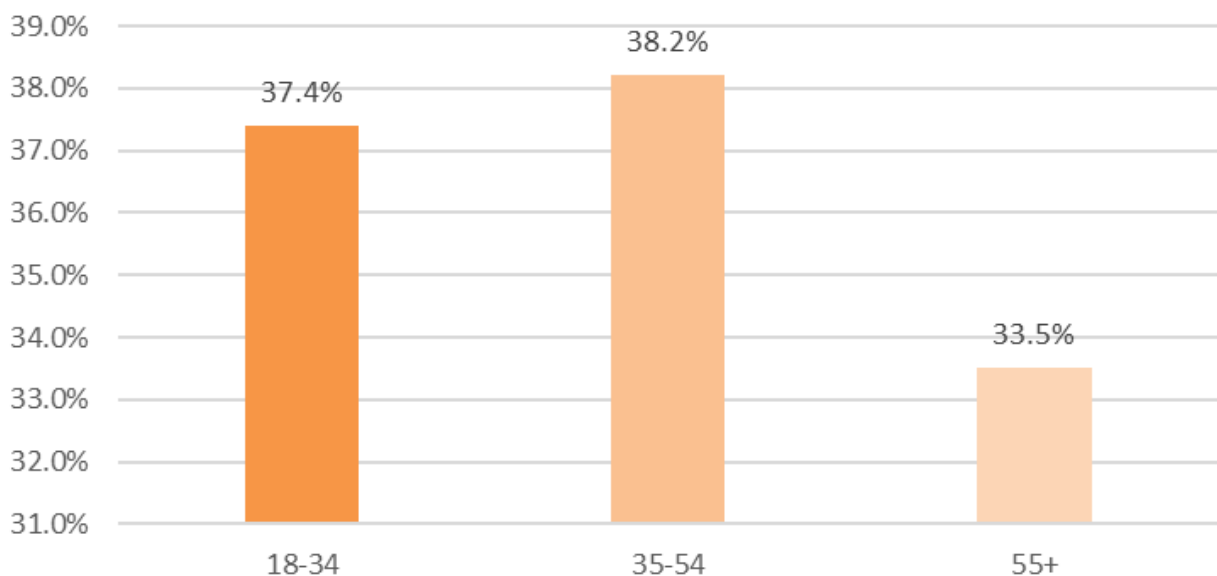
PHYSICAL ACTIVITY CONT.



PERCENTAGE OF ADULTS REPORTING NO LEISURE TIME PHYSICAL ACTIVITY IN PAST MONTH, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING NO LEISURE TIME PHYSICAL ACTIVITY IN PAST MONTH, BY AGE GROUP, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

HEALTH CARE COVERAGE

Adults who do not have health care coverage are less likely to access health care services and more likely to delay needed medical attention. The uninsured are less likely to get routine preventive care and therefore more likely to be hospitalized for avoidable conditions.⁹ Many uninsured Americans gained health care coverage between 2013 and 2014 due to the Affordable Care Act. Still, many people are uninsured or cannot access health care due to cost concerns. About 1 in 10 people in the United States don't have health insurance.¹⁰

A great amount (95.1%) of Eaton County adults reported having any kind of health care coverage, including health insurance, or prepaid plans (such as HMOs, or government plans such as Medicare, Medicaid, or a County Health Plan). Adults 55 years and older reported having the highest prevalence of health care coverage (98.2%), most likely via Medicare. Those with a college graduate education had the highest prevalence of having health care coverage (98.1%), as were persons earning \$75,000+ per year (96.3%).

Data by Demographics

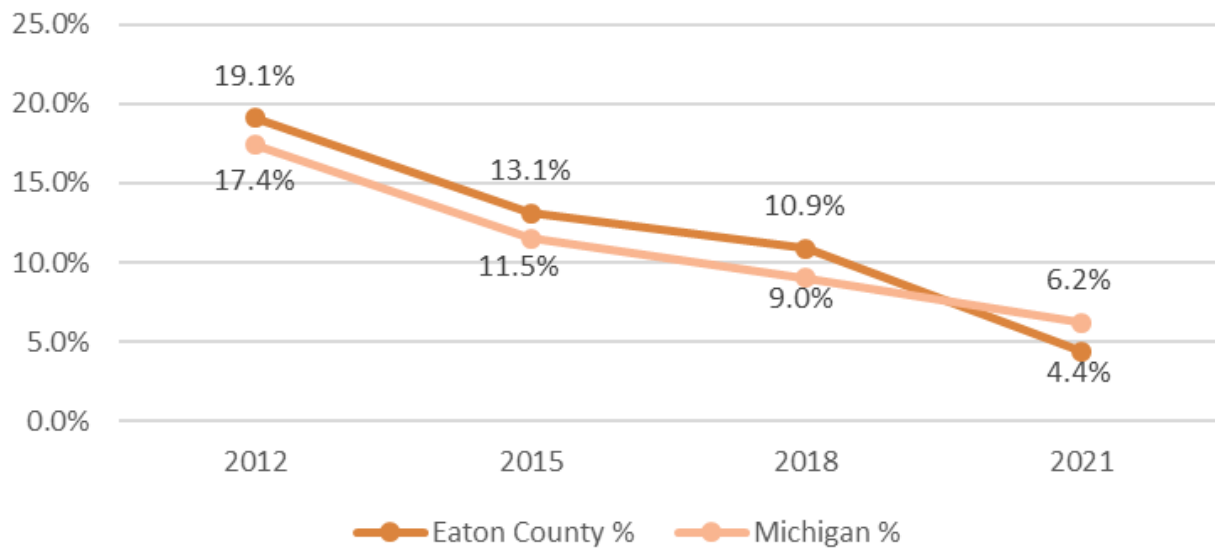
| Any Kind of Health Care Coverage | % | N |
|----------------------------------|------|-----|
| Total | 95.1 | 374 |
| Male | 93.9 | 185 |
| Female | 96.4 | 189 |
| 18-34 | 92.5 | 99 |
| 35-54 | 93.5 | 115 |
| 55+ | 98.2 | 160 |
| Less than HS | 87.5 | 21 |
| HS Grad | 95.3 | 102 |
| Some College | 94.2 | 145 |
| College Grad | 98.1 | 105 |
| ≤\$24,999 | 91.7 | 33 |
| \$25,000-49,999 | 95.8 | 114 |
| \$50,000-74,999 | 95.9 | 70 |
| \$75,000+ | 96.3 | 103 |



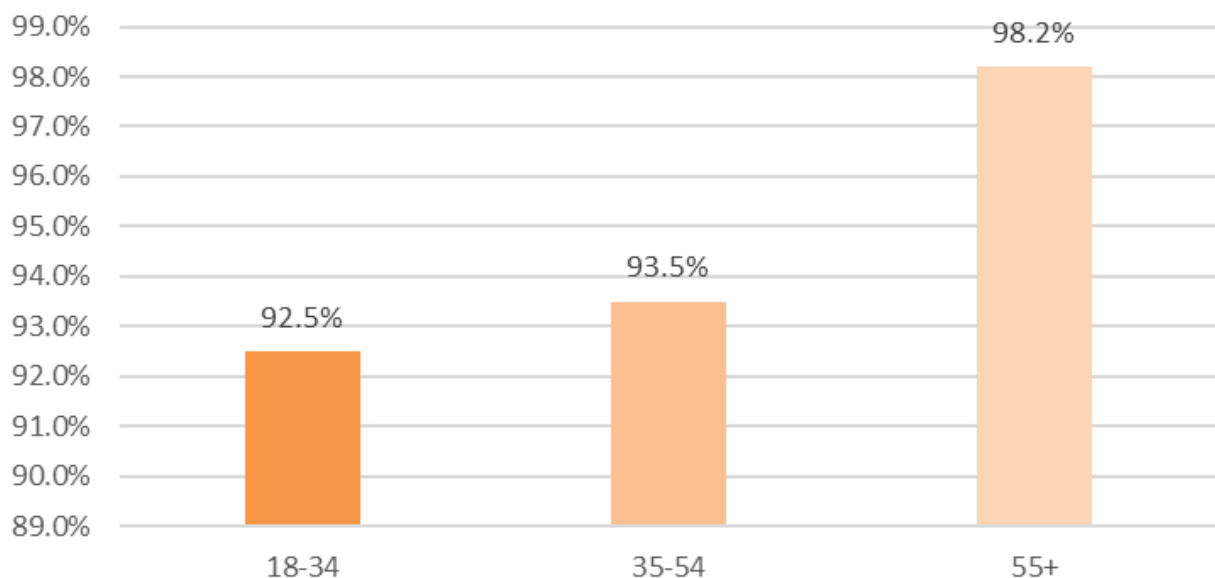
HEALTH CARE COVERAGE CONT.



PERCENTAGE OF ADULTS 18-64 YEARS OF AGE REPORTING NO HEALTH CARE COVERAGE, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING HAVING ANY KIND OF HEALTH CARE COVERAGE, BY AGE GROUP, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

ACCESS TO CARE

Access to health care services is important to maintaining good health. Many people in the United States lack access to quality and affordable health care due to the high cost of care, inadequate or no insurance coverage, limited or no availability of services, and absence of culturally competent care. Not having access to health care services can lead to unmet health needs, delays in care, inability to get preventive services, financial burdens, and preventable hospitalizations.¹⁰

In Eaton County, 10.4% of adults were unable to see a doctor or other health professional in the past year, because of cost. In addition, 14.7% of adults were unable to see a dentist in the past year, because of cost. Males reported not being able to see a doctor or dentist more often than females. Those aged 18-34 years reported not being able to see a dentist more often than other age groups. There was a trend between higher education level and being able to access both a doctor and a dentist. Adults with an annual income of less than \$75,000 were more likely to not have been able to see a doctor or a dentist than those with higher incomes.

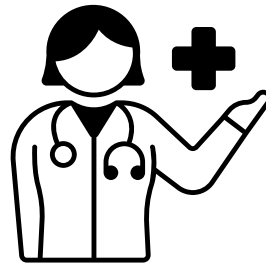
The percentage of Eaton County adults who were unable to see a doctor within the past year has decreased since 2017-2019, but the percentage of adults unable to see a dentist has slightly increased since 2017-2019. Due to differences in survey methodology, no comparison to state-level data is available. However, 7.9% of Michigan adults reported no healthcare access during the past 12 months due to cost in 2021.

Data by Demographics

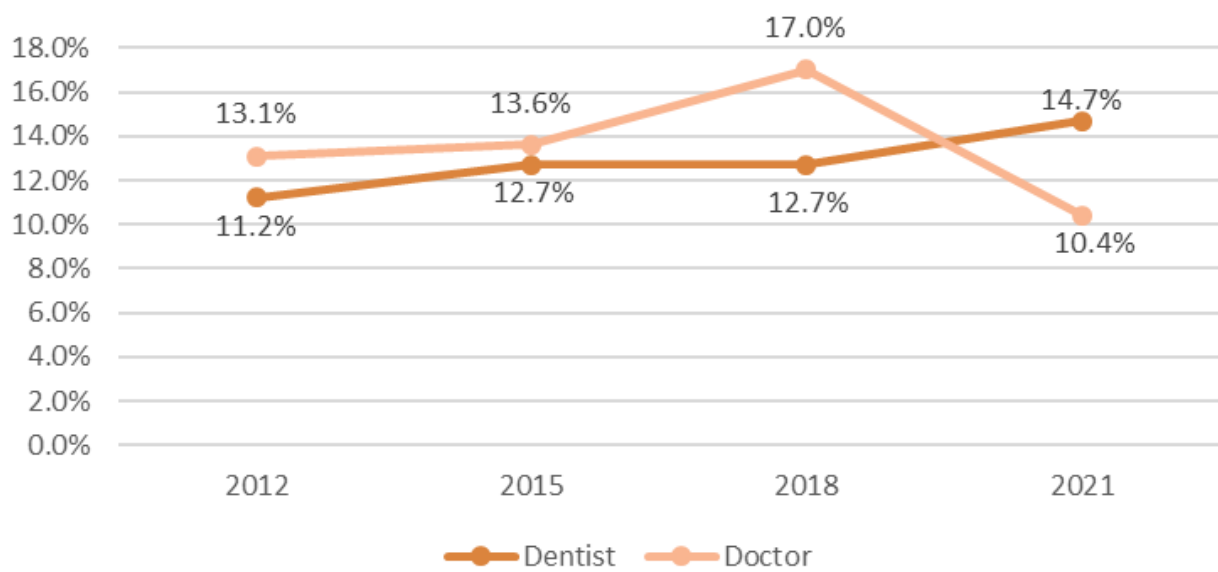
| Couldn't see a Doctor | % | N |
|-----------------------|------|----|
| Total | 10.4 | 41 |
| Male | 12.2 | 24 |
| Female | 8.7 | 17 |
| 18-34 | 11.2 | 12 |
| 35-54 | 11.5 | 14 |
| 55+ | 9.1 | 15 |
| Less than HS | 20.8 | 5 |
| HS Grad | 19.6 | 21 |
| Some College | 7.7 | 12 |
| College Grad | 2.8 | 3 |
| ≤\$24,999 | 27 | 10 |
| \$25,000-49,999 | 11.8 | 14 |
| \$50,000-74,999 | 11 | 8 |
| \$75,000+ | 3.7 | 4 |

| Couldn't see a Dentist | % | N |
|------------------------|------|----|
| Total | 14.7 | 58 |
| Male | 17.3 | 34 |
| Female | 11.7 | 23 |
| 18-34 | 25.5 | 27 |
| 35-54 | 15.7 | 19 |
| 55+ | 6.7 | 11 |
| Less than HS | 29.2 | 7 |
| HS Grad | 24.3 | 26 |
| Some College | 15.5 | 24 |
| College Grad | 0.9 | 1 |
| ≤\$24,999 | 29.7 | 11 |
| \$25,000-49,999 | 17.6 | 21 |
| \$50,000-74,999 | 15.1 | 11 |
| \$75,000+ | 3.7 | 4 |

ACCESS TO CARE CONT.



PERCENTAGE OF ADULTS REPORTING THAT THEY COULD NOT SEE A DENTIST OR A DOCTOR DURING THE PAST YEAR, BECAUSE OF COST, EATON COUNTY, 2012-2021*



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).



CANCER SCREENING

Regular cancer screenings can lead to early detection and treatment of cancers, increasing one's chances of survival. Adults aged 45 and older should be screened regularly for colorectal cancer.¹¹ Women who are aged 50-74 and are at average risk for breast cancer should get a mammogram every 2 years; women who are 40 to 49 years old should talk to their doctor about when to start and how often to get a mammogram.¹²

In Eaton County, 81.5% of adults 50 years and older reported ever having a colorectal cancer screening. Females were much more likely to have been screened (80.0%) than males (83.2%). The proportion of adults who have been screened was higher for adults 55 years and older. Adults with a high school education or higher were more likely to have been screened than adults with less than a high school education. Lifetime colorectal cancer screening increased with increasing income.

Over nine in 10 women (91.3%) 40 years of age and older in Eaton County reported ever having a mammogram. Overall prevalence was high among all education levels but was lowest among college graduates. Women earning less than \$25,000 were less likely to have ever had a mammogram (72.7%).

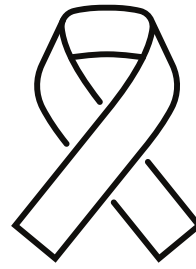
Eaton County adults 50 and older were slightly more likely to have been screened for colorectal cancer (81.5%) than Michigan adults (79.4% in 2020). The percentage of Eaton County women 40 and older who have gotten a mammogram rose from 2014-2016 to 2017-2019 and then decreased in the 2020-2022 survey cycle.

Data by Demographics

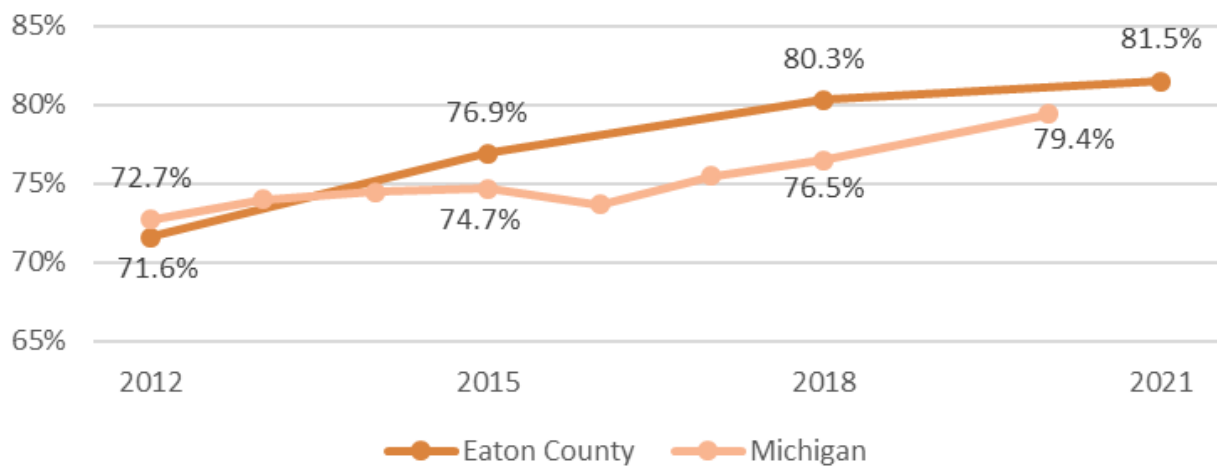
| Adults > 50 Years Old Who Have Had a Colorectal Cancer Screening | % | N |
|--|------|-----|
| Total | 81.5 | 159 |
| Male | 83.2 | 79 |
| Female | 80.0 | 80 |
| 50-54 | 77.4 | 24 |
| 55-64 | 77.8 | 56 |
| 65+ | 85.9 | 79 |
| Less than HS | 54.5 | 6 |
| HS Grad | 86.8 | 66 |
| Some College | 86.2 | 50 |
| College Grad | 73.5 | 36 |
| ≤\$24,999 | 58.8 | 10 |
| \$25,000-49,999 | 85.0 | 51 |
| \$50,000-74,999 | 92.0 | 23 |
| \$75,000 + | 81.5 | 44 |

| Women > 40 Years of Age Who Have Received a Mammogram | % | N |
|---|------|-----|
| Total | 91.3 | 116 |
| 40-54 | 78.3 | 36 |
| 55-64 | 97.0 | 32 |
| 65+ | 100 | 48 |
| Less than HS | 100 | 6 |
| HS Grad | 94.7 | 36 |
| Some College | 92.2 | 47 |
| College Grad | 84.4 | 27 |
| ≤\$24,999 | 72.7 | 8 |
| \$25,000-49,999 | 91.4 | 32 |
| \$50,000-74,999 | 86.4 | 19 |
| \$75,000 + | 91.4 | 32 |

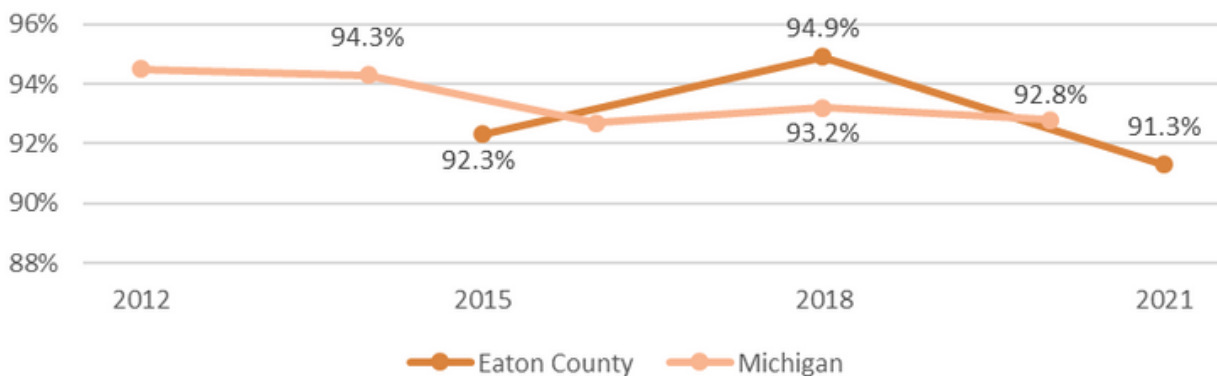
CANCER SCREENING CONT.



PERCENTAGE OF ADULTS ≥50 YEARS OF AGE REPORTING ANY COLORECTAL SCREENING, EATON COUNTY* AND MICHIGAN, 2012-2021



PERCENTAGE OF WOMEN ≥40 YEARS OF AGE REPORTING ANY MAMMOGRAM, EATON COUNTY* AND MICHIGAN, 2012-2021



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

DISABILITY

There are many ways a disability could affect a person, including movement, vision, learning, and mental health. About 26% of U.S. adults have some type of disability.¹³ People with disabilities are diverse, with a wide range of abilities and needs. A disability can be described as any condition of the mind or body that causes difficulty for the person with that condition to do certain activities and interact in their environment. Disabilities can be caused by genetics, injuries, or other chronic diseases.¹³

In Eaton County, 11.7% of adults reported limitations in any activity due to physical, mental, or emotional problems. The proportion of adults who reported limitation due to a disability was higher for males (15.2%) compared to females (8.1%). Disability prevalence increased with older age groups. The percentage of adults who reported limitations due to a disability decreased with higher educational attainment level. There was no clear trend among income and reported disability in Eaton County; adults earning \$50,000-74,999 had the lowest prevalence at 6.8%.

Eaton County had a lower percentage of reported disability (11.7%) than Michigan (28.7% in 2021). The 2020-2022 Eaton County disability prevalence decreased from 2014-2016 (21.9%) and 2017-2019 (25.5%) survey cycles.

Data by Demographics

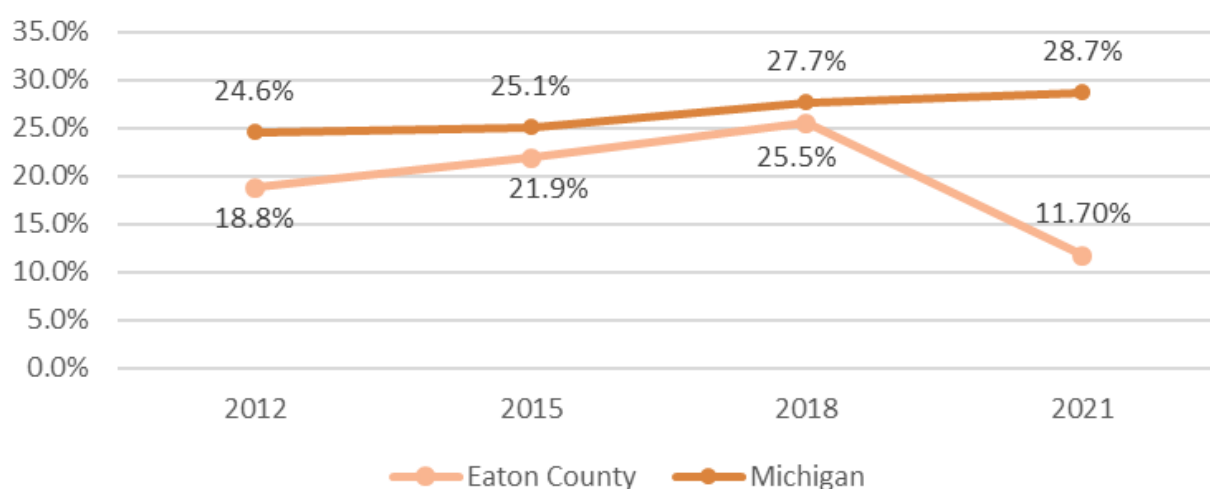
| Limited in Any Activity | % | N |
|-------------------------|------|----|
| Total | 11.7 | 46 |
| Male | 15.2 | 30 |
| Female | 8.1 | 16 |
| 18-34 | 4.7 | 5 |
| 35-54 | 9.8 | 12 |
| 55 + | 17.2 | 28 |
| Less than HS | 24.0 | 6 |
| HS Grad | 16.0 | 17 |
| Some College | 10.3 | 16 |
| College Grad | 5.6 | 6 |
| ≤\$24,999 | 27.8 | 10 |
| \$25,000-49,999 | 13.4 | 16 |
| \$50,000-74,999 | 6.8 | 5 |
| \$75,000 + | 12.0 | 13 |



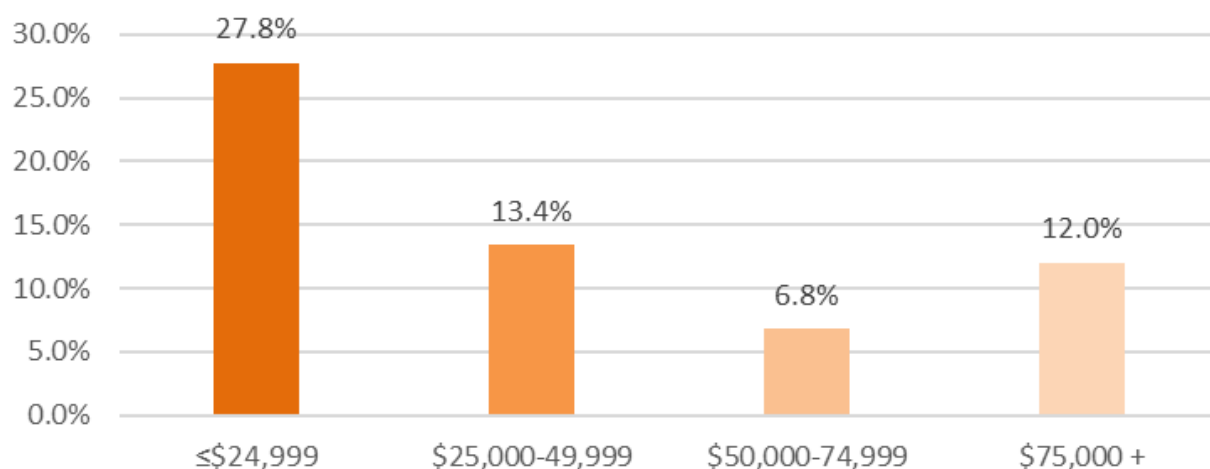
DISABILITY CONT.



PERCENTAGE OF ADULTS REPORTING ANY LIMITATION IN ACTIVITY, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING ANY LIMITATION IN ACTIVITY, BY INCOME, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

HEALTH STATUS

The concept of health-related quality of life refers to perceived physical or mental health. For this report, poor physical health is defined as the proportion of adults who reported two weeks or more (at least 14 days) of poor physical health within the past month (30 days)—including physical illness and/or injury. Limitation due to poor mental health is defined as the proportion of adults who reported two weeks or more (at least 14 days) of being unable to do work or other usual activities due to a mental health condition or emotional problem within the past month (30 days).

10.9% Eaton County adults reported having poor physical health during the past month, which was lower than the reported prevalence for 2017-2019 survey cycle. The percentage of adults who reported poor mental health within the past month was 12.2% in Eaton County, which was slightly lower than the reported prevalence for 2017-2019 survey cycle.

Males (11.7%) were more likely than females (10.5%) to report poor physical health. A slight difference between females (12.8%) and males (11.7%) was also noted for poor mental health. Older age groups reported worse physical health, but for mental health, younger-aged adults more often reported poor mental health (18.7% for 18-34 year old's) than older-aged adults (8.6% for adults 55 years and older).

Adults with a high school education had a higher percentage of poor physical health (17.8%) than those with more education (3.7% for college graduates). Adults who had some college education had the highest prevalence of poor mental health (14.9%). Adults with lower incomes more often reported poor physical health and poor mental health than adults with higher annual incomes in Eaton County. A notable trend was seen between increasing income and decreasing prevalence of poor physical health.

Compared to Michigan (11.9% in 2021), Eaton County had a slightly lower prevalence of adults with poor physical health (10.9%). Eaton County also had a slightly lower rate of adults with poor mental health (12.2%) compared to Michigan (15.5% in 2021).

Data by Demographics

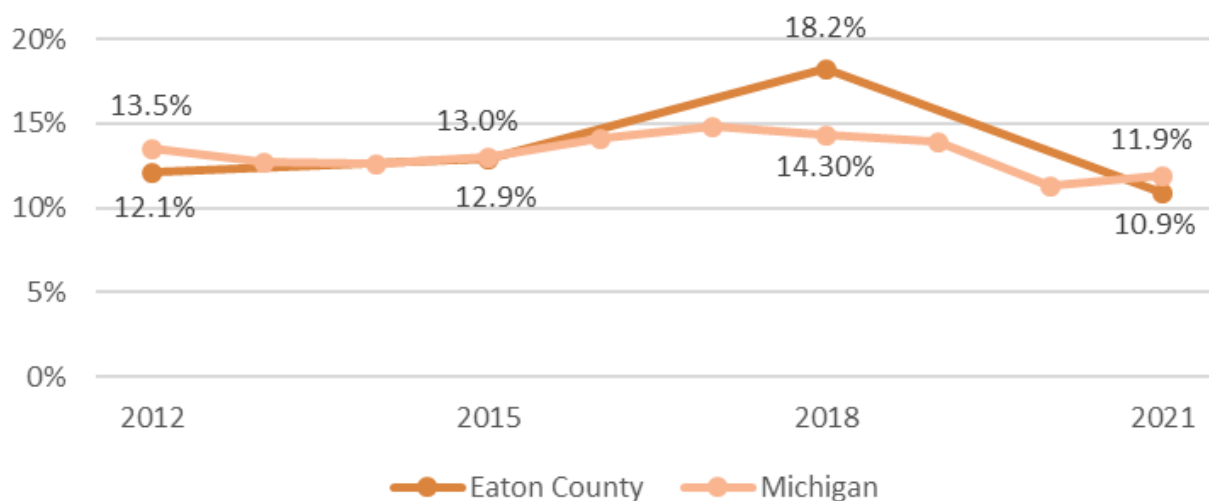
| Poor Physical Health | % | N |
|----------------------|------|----|
| Total | 10.9 | 43 |
| Male | 11.7 | 23 |
| Female | 10.5 | 20 |
| 18-34 | 6.7 | 7 |
| 35-54 | 10.6 | 13 |
| 55 + | 14.4 | 23 |
| Less than HS | 9.1 | 2 |
| HS Grad | 17.8 | 19 |
| Some College | 11.8 | 18 |
| College Grad | 3.7 | 4 |
| ≤\$24,999 | 20.6 | 7 |
| \$25,000-49,999 | 18.6 | 22 |
| \$50,000-74,999 | 2.7 | 2 |
| \$75,000 + | 7.5 | 8 |

| Poor Mental Health | % | N |
|--------------------|------|----|
| Total | 12.2 | 48 |
| Male | 11.7 | 23 |
| Female | 12.8 | 25 |
| 18-34 | 18.7 | 20 |
| 35-54 | 11.5 | 14 |
| 55 + | 8.6 | 14 |
| Less than HS | 8.3 | 2 |
| HS Grad | 11.3 | 12 |
| Some College | 14.9 | 23 |
| College Grad | 10.3 | 11 |
| ≤\$24,999 | 19.4 | 7 |
| \$25,000-49,999 | 6.8 | 8 |
| \$50,000-74,999 | 4.1 | 3 |
| \$75,000 + | 15.1 | 16 |

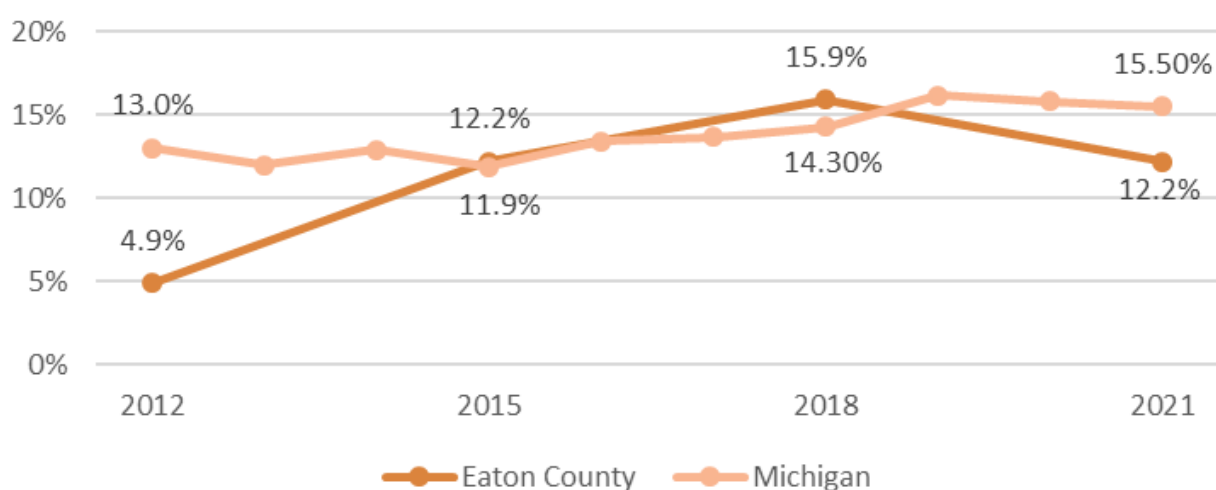
HEALTH STATUS CONT.



PERCENTAGE OF ADULTS REPORTING POOR PHYSICAL HEALTH, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING POOR MENTAL HEALTH, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021

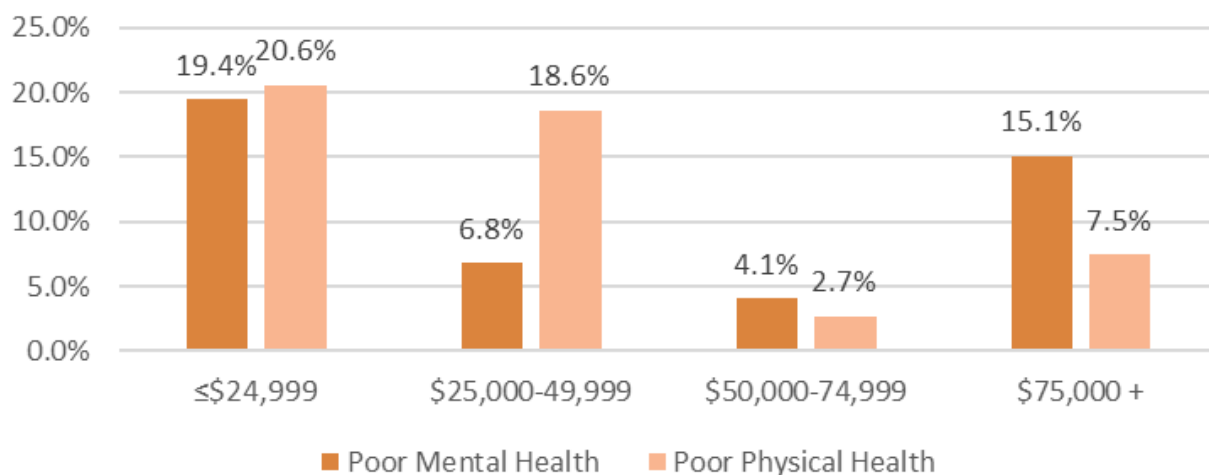


*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

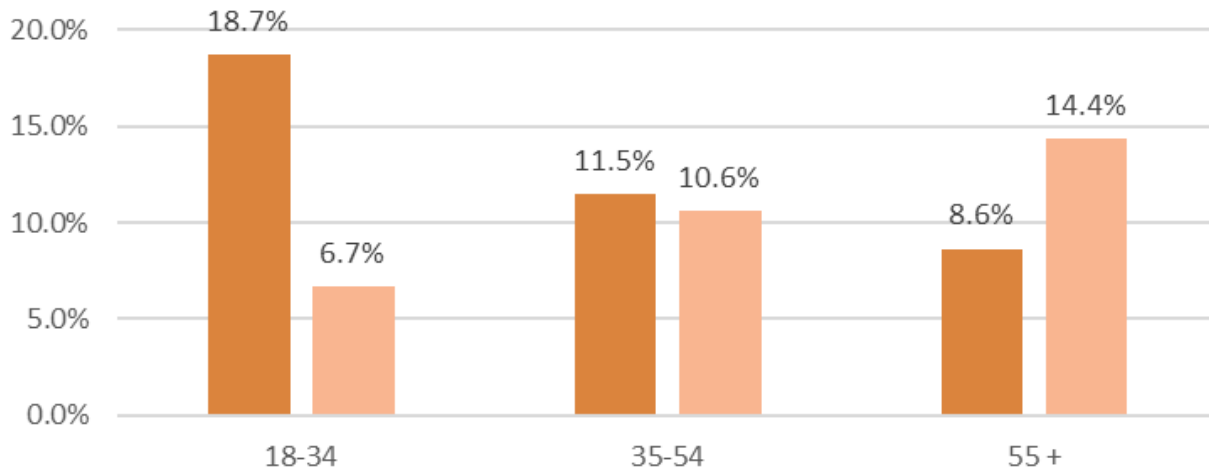
HEALTH STATUS CONT.



PERCENTAGE OF ADULTS REPORTING POOR PHYSICAL OR MENTAL HEALTH, BY INCOME, EATON COUNTY, 2020-2022



PERCENTAGE OF ADULTS REPORTING POOR PHYSICAL OR MENTAL HEALTH, BY AGE, EATON COUNTY, 2020-2022



WEIGHT STATUS

Overweight and obese are labels for ranges of weight that are greater than what is considered healthy for a given height. Obesity increases the risk of many diseases and health conditions, such as high blood pressure, diabetes, coronary heart disease, stroke, sleep apnea, arthritis, high cholesterol, and some cancers.¹⁴ Behavior, environment, and genetic factors can affect a person's weight status.¹⁴

Overweight and obese status are found by using self-reported weight and height to calculate a body mass index (BMI). An adult with a BMI between 25 and 29.9 is considered overweight, while BMI of 30 or higher is considered obese.¹⁴ Some people tend to underestimate their weight when self-reporting in a phone survey.¹⁴ Over one-third of Eaton County adults were overweight (39.8%), and nearly many were obese (37.3%). Together, almost three-quarters of Eaton County residents were Overweight or Obese.

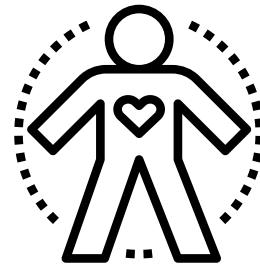
Females in Eaton County were more likely to be obese than males. The prevalence of overweight adults increased with age, while adults aged 35-54 had the highest prevalence of obesity. Prevalence of being overweight was highest among adults without a high school diploma, while high school graduates had the highest obesity prevalence. Adults with incomes of over \$75,000 annually were most likely to be overweight, while those earning less than \$24,999 were most likely to be obese.

Data by Demographics

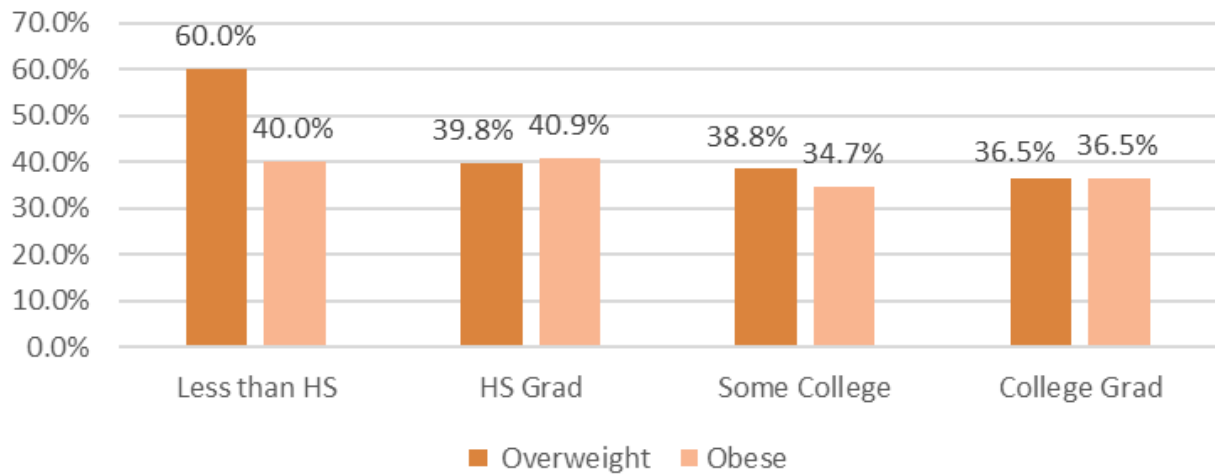
| Obese | % | N |
|-----------------|------|-----|
| Total | 37.3 | 134 |
| Male | 35.4 | 63 |
| Female | 39.0 | 71 |
| 18-34 | 34.0 | 34 |
| 35-54 | 45.5 | 51 |
| 55 + | 33.3 | 49 |
| Less than HS | 40.0 | 10 |
| HS Grad | 40.9 | 38 |
| Some College | 34.7 | 51 |
| College Grad | 36.5 | 35 |
| ≤\$24,999 | 45.7 | 16 |
| \$25,000-49,999 | 38.6 | 44 |
| \$50,000-74,999 | 37.3 | 25 |
| \$75,000 + | 37.6 | 35 |

| Overweight | % | N |
|-----------------|------|-----|
| Total | 39.8 | 143 |
| Male | 48.9 | 87 |
| Female | 30.8 | 56 |
| 18-34 | 34.0 | 34 |
| 35-54 | 39.3 | 44 |
| 55 + | 44.9 | 66 |
| Less than HS | 60.0 | 15 |
| HS Grad | 39.8 | 37 |
| Some College | 38.8 | 57 |
| College Grad | 36.5 | 35 |
| ≤\$24,999 | 40.0 | 14 |
| \$25,000-49,999 | 41.2 | 47 |
| \$50,000-74,999 | 35.8 | 24 |
| \$75,000 + | 41.9 | 39 |

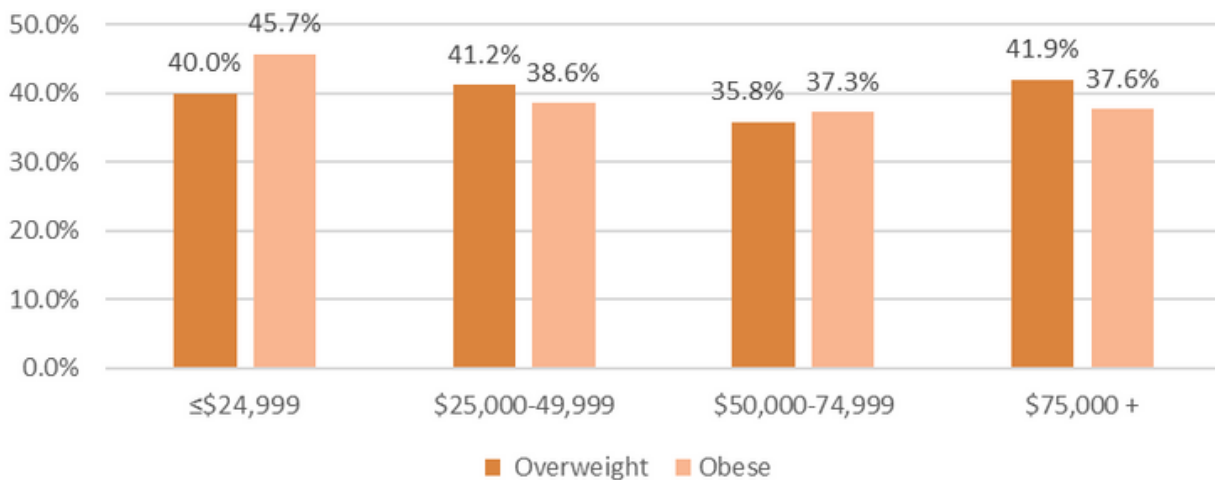
WEIGHT STATUS CONT.



PERCENTAGE OF ADULTS WITH OVERWEIGHT OR OBESE STATUS, BY EDUCATION LEVEL, EATON COUNTY, 2020-2022



PERCENTAGE OF ADULTS WITH OVERWEIGHT OR OBESE STATUS, BY INCOME, EATON COUNTY, 2020-2022



WEIGHT STATUS CONT.

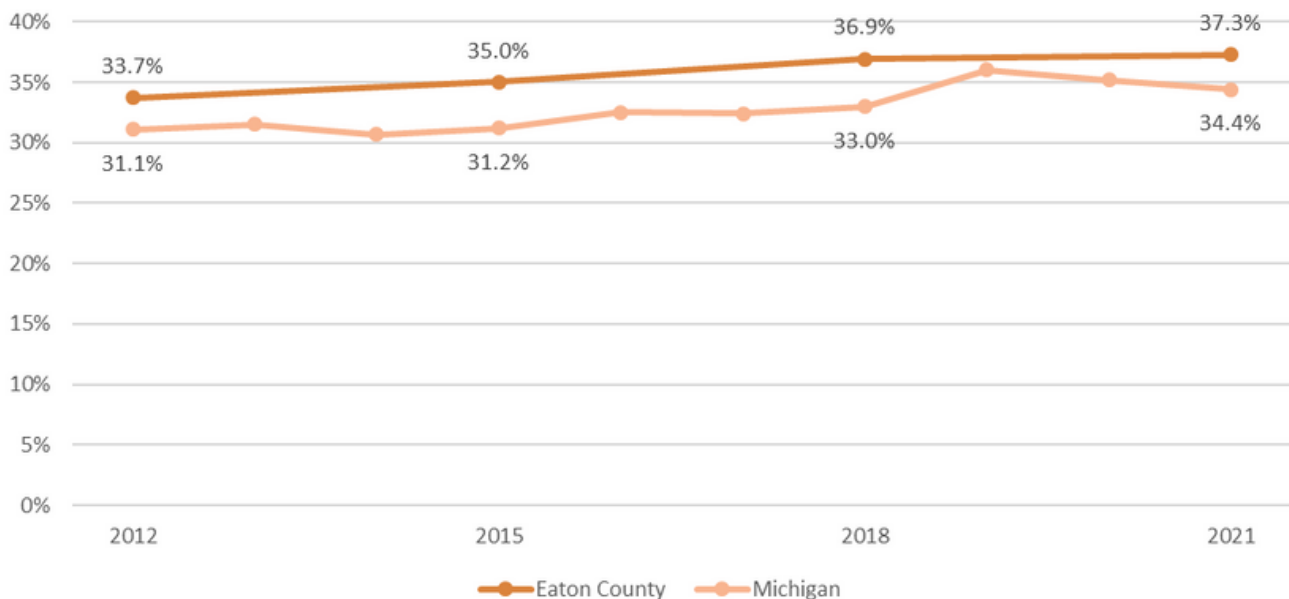
Eaton County (37.3%) adults had a slightly higher prevalence of being obese than Michigan (34.4%, in 2021). Michigan's adult obesity prevalence has been largely steady with a slight increase from 2012 to 2021, similar to Eaton County's slightly increasing from 2012-2021.

Data by Demographics

| Healthy Weight | % | N |
|-----------------|------|----|
| Total | 22.8 | 82 |
| Male | 15.7 | 28 |
| Female | 29.7 | 54 |
| 18-34 | 32.0 | 32 |
| 35-54 | 15.2 | 17 |
| 55 + | 21.1 | 31 |
| Less than HS | 0.0 | 0 |
| HS Grad | 19.4 | 18 |
| Some College | 26.5 | 39 |
| College Grad | 26.0 | 25 |
| ≤\$24,999 | 14.3 | 5 |
| \$25,000-49,999 | 19.3 | 22 |
| \$50,000-74,999 | 26.9 | 18 |
| \$75,000 + | 20.4 | 19 |



PERCENTAGE OF ADULTS WITH OBESE STATUS, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

HIGH BLOOD PRESSURE

High blood pressure, or hypertension, affects almost 120 million adults in the United States.¹⁵ Unmanaged high blood pressure can contribute to serious conditions such as stroke, heart attack, heart failure, kidney failure, and vision loss. If blood pressure is too high for too long it can damage the artery walls, increasing ones risk for more life threatening conditions. Lifestyle changes such as a low sodium diet and adding physical activity can help lower blood pressure.¹⁵

Over one third (36.6%) of Eaton County adults reported having ever been told that they have high blood pressure. Males were slightly more likely to report having high blood pressure (38.8%) than females (34.5%). The proportion of adults with high blood pressure increased with age. Blood pressure was more prevalent for those with a high school diploma and incomes under \$50,000.

Eaton County had a slightly higher proportion of adults with high blood pressure compared to Michigan (34.4% in 2021). The percentage of Eaton County adults with reported high blood pressure slightly increased further in this survey cycle after remaining consistent in 2015 and the years prior.

Data by Demographics

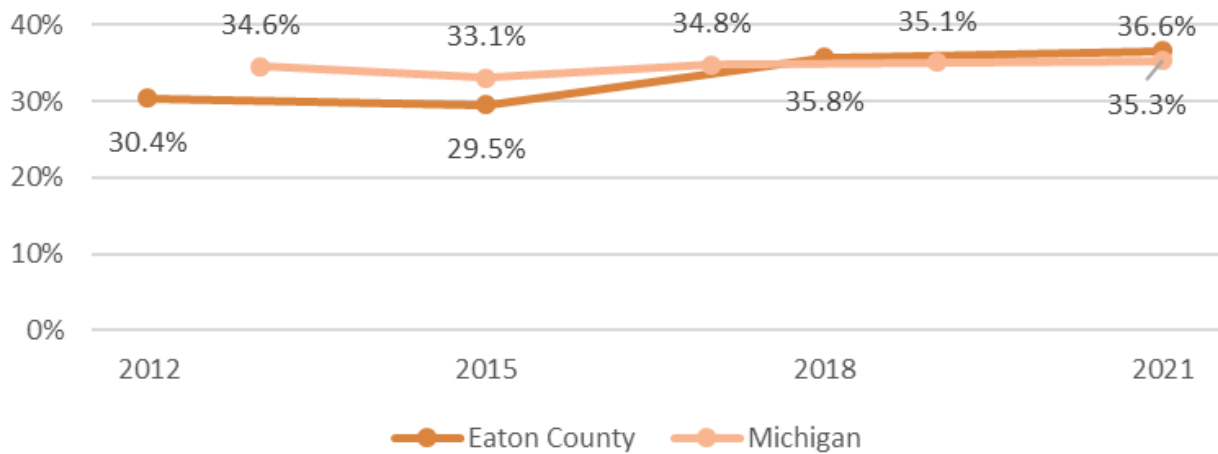
| Ever Told High Blood Pressure | % | N |
|-------------------------------|------|-----|
| Total | 36.6 | 144 |
| Male | 38.8 | 76 |
| Female | 34.5 | 68 |
| 18-34 | 12.3 | 13 |
| 35-54 | 25.2 | 31 |
| 55 + | 61.0 | 100 |
| Less than HS | 29.2 | 7 |
| HS Grad | 50.5 | 54 |
| Some College | 32.1 | 50 |
| College Grad | 31.1 | 33 |
| ≤\$24,999 | 48.6 | 18 |
| \$25,000-49,999 | 42.9 | 51 |
| \$50,000-74,999 | 23.0 | 17 |
| \$75,000 + | 28.7 | 31 |



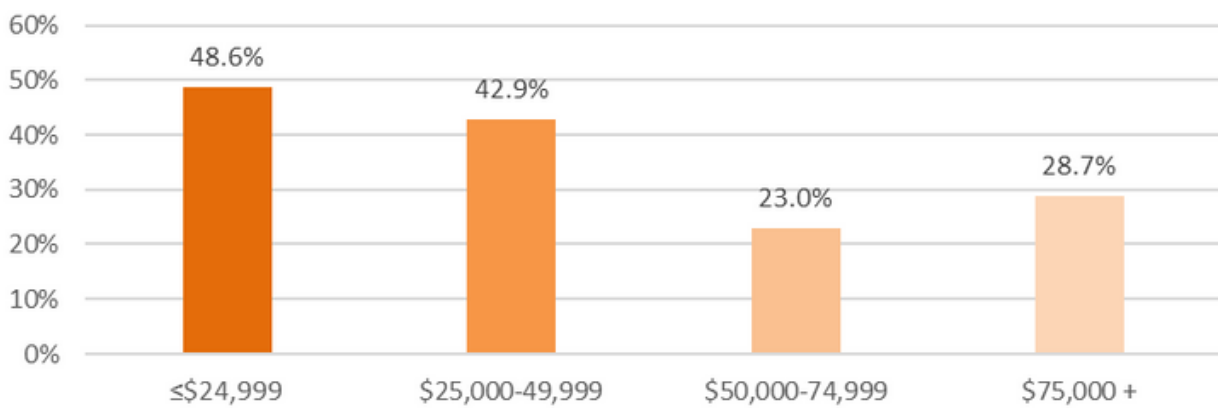
HIGH BLOOD PRESSURE CONT.



PERCENTAGE OF ADULTS REPORTING LIFETIME HIGH BLOOD PRESSURE, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING LIFETIME HIGH BLOOD PRESSURE, BY INCOME LEVEL, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

DIABETES

Type II Diabetes is the more common form of diabetes, affecting more than 37 million people in the United States.¹⁶ In this type of diabetes, the body does not use insulin properly as it has become resistant to its biological effects. The pancreas must make more insulin to keep blood sugar at a normal and safe level. Many people can maintain their blood glucose levels with proper diet and exercise, but others may need the help of diabetes medication and prescription insulin.¹⁶

14.0% of Eaton County adults reported ever being told they have diabetes. Males (13.7%) and females (14.3%) both reported having diabetes at a similar rate. Adults 55 years and older reported ever having diabetes at a much higher prevalence (23.0%) than young or middle-aged adults. Eaton County adults with a high school diploma and an income less than \$24,999 reported a higher prevalence of having diabetes than other categories.

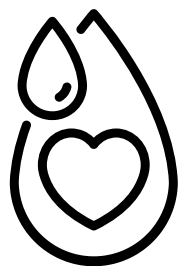
Michigan had a slightly lower percentage of adults with diabetes (10.8% in 2021) compared to Eaton County (14.0 in 2021). The 2020-2022 adult diabetes prevalence for Eaton County has increased since the 2017-2019 survey cycle (10.6%).

Data by Demographics

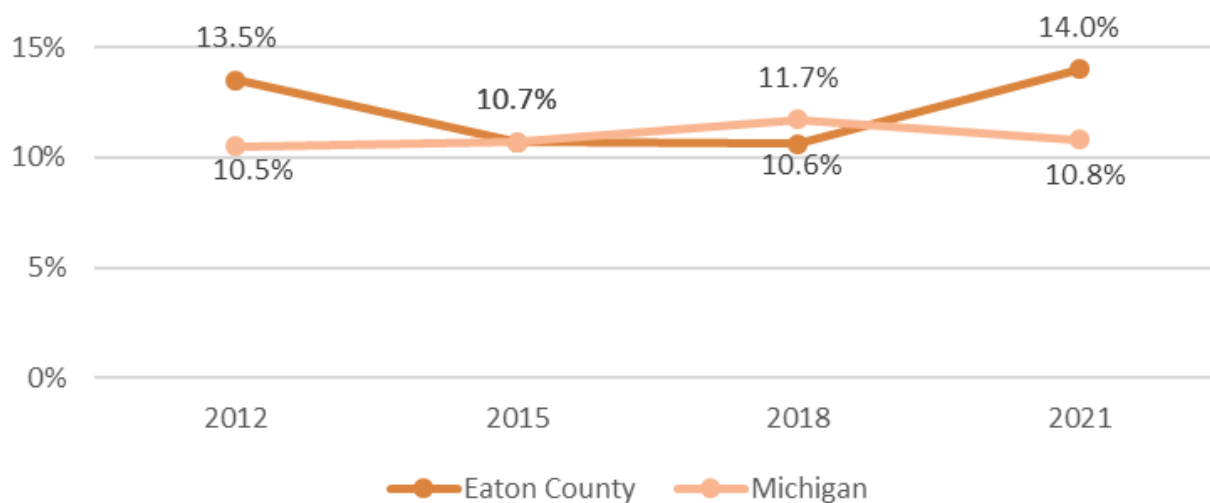
| Ever Told Diabetes | % | N |
|--------------------|------|----|
| Total | 14.0 | 55 |
| Male | 13.7 | 27 |
| Female | 14.3 | 28 |
| 18-34 | 5.6 | 6 |
| 35-54 | 8.1 | 10 |
| 55 + | 23.0 | 38 |
| Less than HS | 12.5 | 3 |
| HS Grad | 20.6 | 22 |
| Some College | 9.7 | 15 |
| College Grad | 14.0 | 15 |
| ≤\$24,999 | 24.3 | 9 |
| \$25,000-49,999 | 11.8 | 14 |
| \$50,000-74,999 | 6.8 | 5 |
| \$75,000 + | 17.6 | 19 |



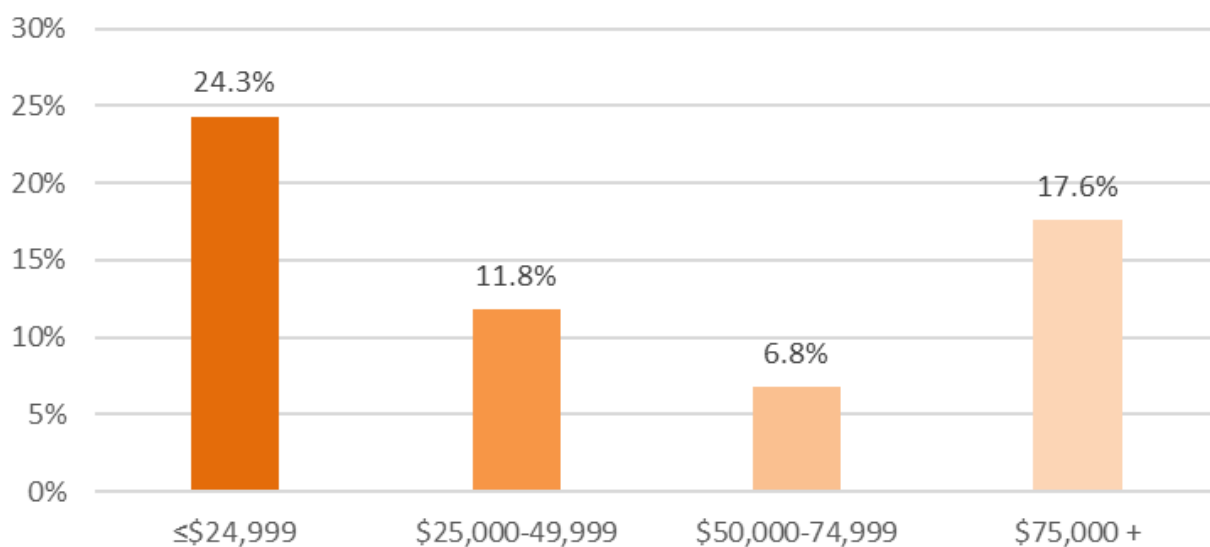
DIABETES CONT.



PERCENTAGE OF ADULTS REPORTING DIABETES,
EATON COUNTY* AND STATE OF MICHIGAN, 2012-
2021



PERCENTAGE OF ADULTS REPORTING DIABETES,
BY INCOME LEVEL, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

ASTHMA

Asthma is a condition that causes swelling and narrowing of the airways. Symptoms include shortness of breath, wheezing, coughing, and difficulty breathing.¹⁷ For some, asthma is mild and symptoms are merely a discomfort. But for others, asthma is much more serious. Asthma can be life-threatening and interfere with day-to-day activities. Asthma can be the result of genetic factors, environmental factors, or a combination of both.¹⁷

Of surveyed adults in Eaton County, 17.0% reported that they have or have had asthma. Males reported ever having asthma (20.4%) more than females (13.3%). The prevalence of lifetime asthma was highest among 18-34 year old's (21.5%). Adults with less than a high school education had the highest prevalence of lifetime asthma (37.5%). Incomes below \$25,000 also had the highest prevalence of having been ever told you have asthma (24.3%).

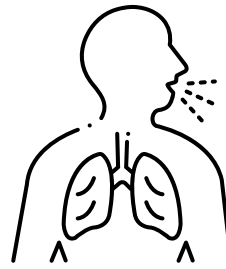
Eaton County's reported lifetime asthma prevalence (17.0%) is slightly higher than Michigan's (16.3% in 2021). Eaton County's prevalence of lifetime asthma has increased this cycle from 13.6% in 2014-2016 and 14.8% in 2017-2019.

Data by Demographics

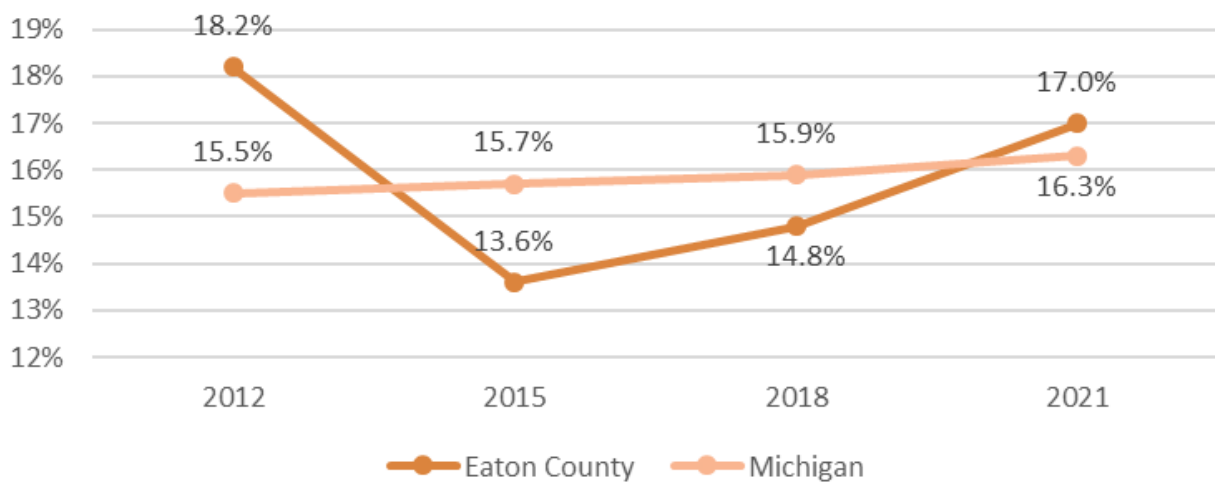
| Ever Told Asthma | % | N |
|------------------|------|----|
| Total | 17.0 | 67 |
| Male | 20.4 | 40 |
| Female | 13.3 | 26 |
| 18-34 | 21.5 | 23 |
| 35-54 | 13.9 | 17 |
| 55 + | 15.9 | 26 |
| Less than HS | 37.5 | 9 |
| HS Grad | 10.4 | 11 |
| Some College | 16.8 | 26 |
| College Grad | 18.7 | 20 |
| ≤\$24,999 | 24.3 | 9 |
| \$25,000-49,999 | 11.9 | 14 |
| \$50,000-74,999 | 28.4 | 21 |
| \$75,000 + | 11.2 | 12 |



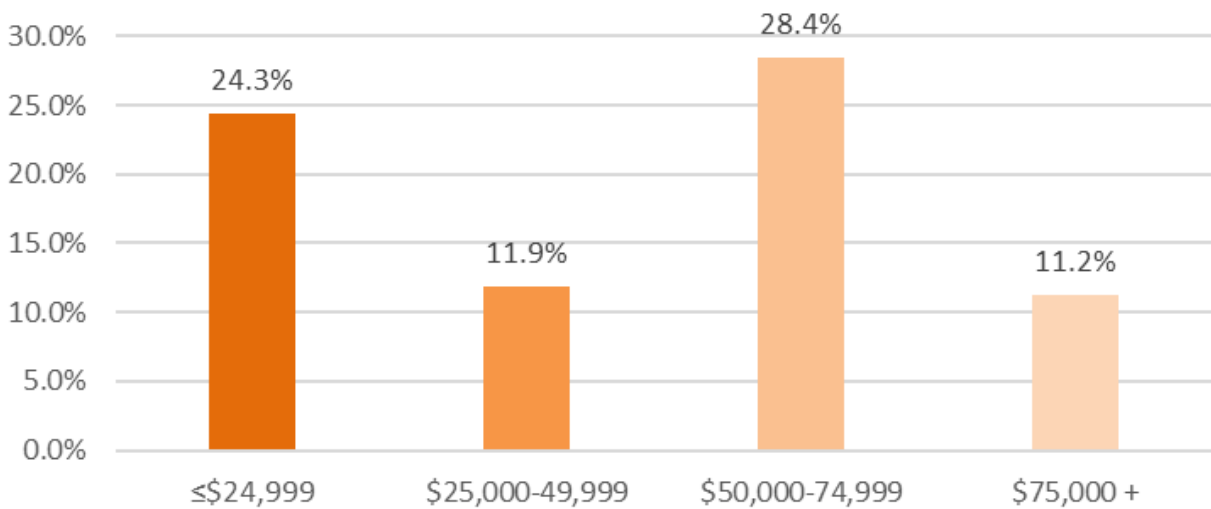
ASTHMA CONT.



PERCENTAGE OF ADULTS REPORTING LIFETIME
ASTHMA, EATON COUNTY* AND STATE OF
MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING LIFETIME
ASTHMA, BY INCOME LEVEL, EATON COUNTY,
2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

HIGH CHOLESTEROL

High cholesterol is often the result of unhealthy lifestyle choices, such as diets high in fat and physical inactivity. Being overweight, smoking, and having diabetes increase the risk of having high cholesterol. About 86 million U.S. adults age 20 or older have total cholesterol levels above 200 mg/dL.¹⁸ Cholesterol, specifically LDL (or bad) cholesterol, can build up in the blood vessels and cause narrowing or hardening and reduce the blood flow to and from the heart.¹⁸ Having high cholesterol can lead to life threatening conditions such as heart attack and stroke.¹⁸

The proportion of adults who ever had been told they have high cholesterol in Eaton County was 32.8%. Females had a slightly higher rate than males. Older adults more frequently reported ever having high cholesterol than younger adults. Adults with less than a high school education were more likely to report ever having high cholesterol than adults with more education. High cholesterol disproportionately affected those with an annual income of under \$25,000.

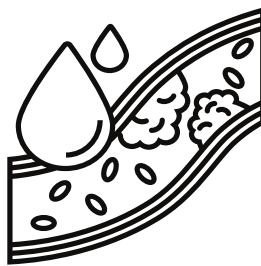
Eaton County had a lower percentage of adults who ever reported high cholesterol (32.8%) than the state of Michigan (36.8%) in 2021. The proportion of Eaton County adults who ever had high cholesterol increased from the 2017-2019 cycle.

Data by Demographics

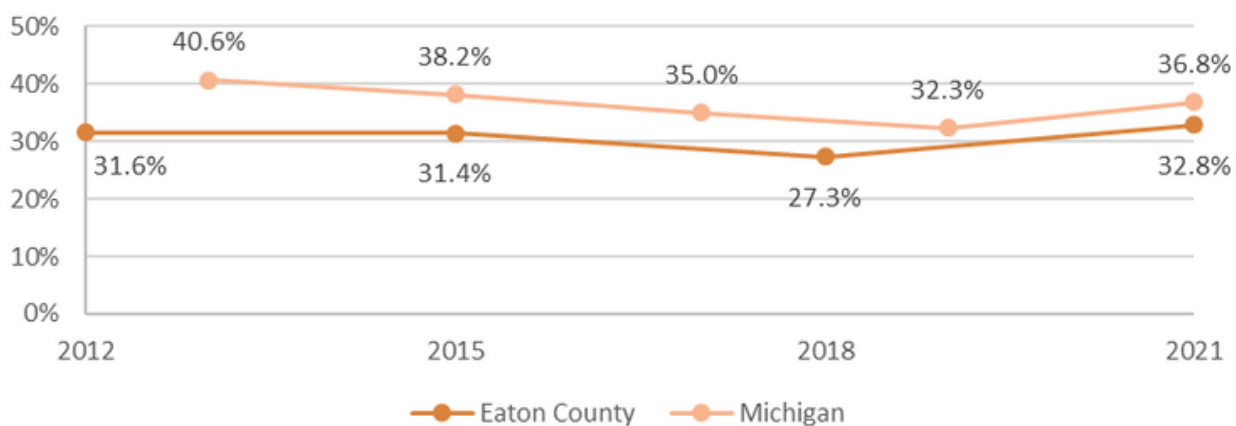
| Ever Told High Cholesterol | % | N |
|----------------------------|------|-----|
| Total | 32.8 | 129 |
| Male | 32.5 | 64 |
| Female | 33.2 | 65 |
| 18-34 | 11.2 | 12 |
| 35-54 | 29.5 | 36 |
| 55 + | 49.7 | 81 |
| Less than HS | 54.2 | 13 |
| HS Grad | 26.4 | 28 |
| Some College | 29.7 | 46 |
| College Grad | 29.9 | 32 |
| ≤\$24,999 | 54.1 | 20 |
| \$25,000-49,999 | 26.3 | 31 |
| \$50,000-74,999 | 24.7 | 18 |
| \$75,000 + | 34.6 | 37 |



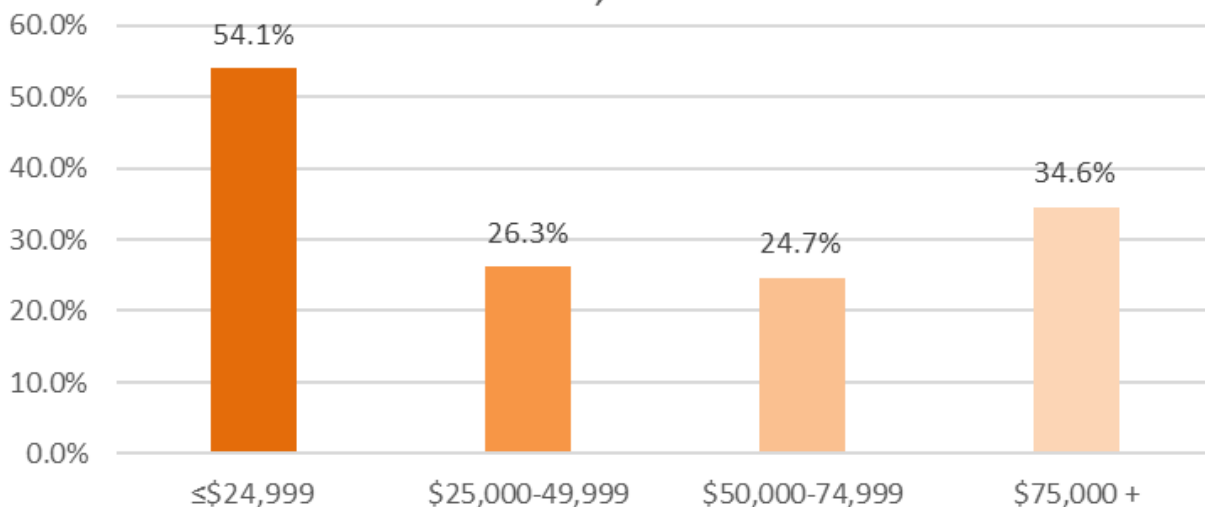
HIGH CHOLESTEROL CONT.



PERCENTAGE OF ADULTS REPORTING LIFETIME HIGH CHOLESTEROL, EATON COUNTY* AND STATE OF MICHIGAN, 2012-2021



PERCENTAGE OF ADULTS REPORTING LIFETIME HIGH CHOLESTEROL, BY INCOME, EATON COUNTY, 2020-2022



*Eaton County BRFSS data is collected over three years (2014-2016, 2017-2019, 2020-2022). For display purposes, these data points are placed in the middle of those time periods (2015, 2018, 2021).

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