

Purpose

The purpose of this project is to provide Winnebago County with information from an assessment conducted in the Fall 2017/Winter 2018, of the health status of county residents. Primary objectives are to:

1. Gather specific data on behavioral and lifestyle habits of the adult population. Select information will also be collected about the respondent's household.
2. Gather data on a random child (17 or younger) in the household through adult who makes health care decisions for the child.
3. Gather data on the prevalence of risk factors and disease conditions existing within the adult population.
4. Compare, where appropriate, health data of residents to previous health studies.
5. Compare, where appropriate and available, health data of residents to state and national measurements along with Healthy People 2020 goals.

This report was commissioned by the Fox Valley Community Health Improvement Coalition. It was sponsored by Ascension, Aurora Health Care, Children's Hospital of Wisconsin, ThedaCare and Winnebago County Public Health Department.

The survey was conducted by JKV Research, LLC. For technical information about survey methodology, contact Janet Kempf Vande Hey, M.S. at (920) 439-1399 or janet.vandehey@jkvresearch.com. For further information about the survey, contact Winnebago County Public Health Department (920) 232-3000.

Methodology

Data Collection

Respondents were scientifically selected so the survey would be representative of all adults 18 years old and older in the county. The sampling strategy was two-fold. 1) A random-digit-dial landline sample of telephone numbers which included listed and unlisted numbers. The respondent within each household was randomly selected by computer and based on the number of adults in the household (n=275). 2) A cell phone-only sample where the person answering the phone was selected as the respondent (n=225). At least 8 attempts were made to contact a respondent in each sample. Screener questions verifying location were included. Data collection was conducted by Management Decisions Incorporated. A total of 500 telephone interviews were completed between December 7, 2017 and February 28, 2018.

Weighting of Data

For the landline sample, weighting was based on the number of adults in the household and the number of residential phone numbers, excluding fax and computer lines, to take into account the probability of selection. For the cell-phone only sample, it was assumed the respondent, if an adult, was the primary cell phone user. Combined, post-stratification was conducted by sex and age to reflect the 2010 census proportion of these characteristics in the county.

Margin of Error

With a sample size of 500, we can be 95% sure that the sample percentage reported would not vary by more than ± 4 percent from what would have been obtained by interviewing all persons 18 years old and older with telephones in the county. This margin of error provides us with confidence in the data; 95 times out of 100, the true value will likely be somewhere between the lower and upper bound. The margin of error for smaller subgroups will be larger than ± 4 percent, since fewer respondents are in that category (e.g., adults who were asked about a random child in the household).

What do the Percentages Mean?

In 2017, the Census Bureau estimated 135,326 adult residents live in Winnebago County. Thus, in this report, one percentage point equals approximately 1,350 adults. So, when 15% of respondents reported their health was fair or poor, this roughly equals 20,250 residents \pm 5,400 individuals. Therefore, from 14,850 to 25,650 residents likely have fair or poor health. Because the margin of error is \pm 4%, events or health risks that are small will include zero.

In 2016, the Census Bureau estimated 69,169 occupied housing units in Winnebago County. In certain questions of the Community Health Survey, respondents were asked to report information about their household. Using the 2016 household estimate, each percentage point for household-level data represents approximately 690 households.

Definitions

Certain variables were recoded for better analysis and are listed below.

Marital status: Married respondents were classified as those who reported being married and those who reported to being a member of an unmarried couple. All others were classified as not married.

Household income: It is difficult to compare household income data throughout the years as the real dollar value changes. Each year, the Census Bureau classifies household income into five equal brackets, rounded to the nearest dollar. It is not possible to exactly match the survey income categories to the Census Bureau brackets since the survey categories are in increments of \$10,000 or more; however, it is the best way to track household income. This report looks at the Census Bureau's bottom 40%, middle 20% and top 40% household income brackets each survey year. In each year, the bottom 40% income bracket included survey categories less than \$40,001, the middle 20% income bracket was \$40,001 to \$60,000 and the top 40% income bracket was at least \$60,001.

Physical activity: The 2008 recommended amount of physical activity by the Centers for Disease Control is moderate activity for at least 30 minutes on five or more days of the week or vigorous activity for at least 20 minutes on three or more days of the week. Moderate physical activity includes walking briskly, bicycling, vacuuming, gardening or anything else that causes small increases in breathing or heart rate. Vigorous physical activity includes running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate. Insufficient physical activity includes participation in either activity, but not for the duration or the frequency recommended. Inactive respondents reported no moderate or vigorous physical activity in a typical week.

Overweight status: Calculated using the Center for Disease Control's Body Mass Index (BMI) of kilograms/meter². A BMI of 25.0 to 29.9 is considered overweight and 30.0 or more as obese. In this report "overweight" includes both overweight and obese respondents.

Current smoker: Current smoker is defined as someone who smoked a tobacco cigarette at least some days.

Binge drinking: The definition for binge drinking varies. Currently, the Centers for Disease Control (CDC) defines binge drinking as four or more drinks per occasion for females and five or more drinks per occasion for males to account for weight and metabolism differences. Previously, the CDC defined binge drinking as five or more drinks at one time, regardless of gender. In 2018, the Tri-County Health Survey defined binge drinking as four or more drinks per occasion for females and five or more drinks per occasion for males to account for weight and metabolism differences. In 2011 and 2015, the definition was five or more drinks, regardless of gender.

Previous Data Collection

Previous survey administration was conducted by Survey Research Institute and focused on health department service areas. As a result, the Fox Cities were surveyed separately and were not included in the 2011 and 2016 Winnebago County reports. In order to compare the 2018 data with previous years, a random sample of the 2010 Fox Cities Community Health Survey was included in the 2011 Winnebago data at the proportion these communities are in the county. In addition, a random sample of the 2016 Fox Cities Community Health Survey was included in the 2016 Winnebago County data.

Demographic Profile

The following table includes the weighted demographic breakdown of respondents in the county.

Table 1. Weighted Demographic Variables of Community Health Survey Respondents for 2018 (Q72, Q73, Q79, Q87 & Q88)^{①,②}

	Survey Results
TOTAL	100%
Gender	
Male	51%
Female	49
Age	
18 to 34	32%
35 to 44	17
45 to 54	20
55 to 64	15
65 and Older	17
Education	
High School Graduate or Less	28%
Some Post High School	31
College Graduate	41
Household Income	
Bottom 40 Percent Bracket	29%
Middle 20 Percent Bracket	22
Top 40 Percent Bracket	42
Not Sure/No Answer	7
Married	52%

^①Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

^②Race and ethnicity breakdowns had too few cases for statistical reliability in crosstabulations (Q76 & Q77).

How to Read the Report

Statistical Significance

The use of statistics is to determine whether a true difference between two percentages is likely to exist. If a difference is statistically significant, it is unlikely that the difference between the two percentages is due to chance. Conversely, if a difference is not statistically significant, it is likely there is no real difference. For example, the difference between the percentage of adults reporting in 2011 they had at least one unhealthy day that kept them from their usual activities in the past month (24%) and the percentage of adults reporting this in 2018 (29%) is not statistically significant and so it is likely not a real difference; it is within the margin of error of the survey.

Data Interpretation

Data that has been found “statistically significant” and “not statistically significant” are both important for stakeholders to better understand county residents as they work on action plans. Additionally, demographic cross-tabulations provide information on whether or not there are statistically significant differences within the demographic categories (gender, age, education, household income level and marital status). Demographic data cannot be broken

down for race and ethnicity because there are too few cases in the sample. Finally, Healthy People 2020 goals as well as state, national and Tri-County percentages are included to provide another perspective of the health issues.

Report Setup

- 1) Executive Summary—The Executive Summary includes a trend data table for the analyzed survey questions and comparisons to the most recent state percentages, national percentages and Healthy People 2020 goals, wherever possible. Also included is a summary of the key findings for each topic.
- 2) Key Findings—The Key Findings are broken down by:
 - a. Main Topics—overarching topics such as Overall Health, Health Care Coverage and Unmet Needs, and Health Information and Services. Each main topic is in **bold** in the report.
 - b. Key Findings—The first paragraph summarizes 2018 demographic findings of survey questions included in the main topic. The second paragraph, in *italics*, indicates if the 2018 percentages statistically changed over time.
 - c. Sub-Topics—Applicable survey questions are analyzed within each main topic and are listed in **bold**. For example, “Rating Their Own Health,” “Physically Unhealthy Days,” “Mentally Unhealthy Days,” and “Unhealthy Days Kept Respondent from Usual Activities” are the sub-topics within Overall Health.
 - i. Recommendations and/or Healthy People 2020 goals—*italicized* statements immediately after the sub-topic title, where possible.
 - ii. Data Comparisons—National and Wisconsin percentages are listed, when available, followed by the Tri-County percentage. This information is *italicized* as well.
 - iii. 2018 Findings
 1. First bullet—lists the percentages for sub-topic survey question response categories. Occasionally, a figure is included to visually see the breakdown. Open bullets are used when there is a skip pattern or filter in the questionnaire and fewer respondents were asked the survey question.
 2. Remaining bullets—a bullet is written for each demographic variable that is significant in 2018. It compares the highest and lowest percentages. The order of bullets is gender, age, education, household income and marital status. Overweight status, physical activity, smoking status and excessive drinking status are included for some analysis. Household income, marital status and presence of children are the demographic variables used for household-level questions since respondent-level variables cannot be used. Open bullets are used to indicate fewer respondents.
 - iv. 2011 to 2018 Year Comparisons
 1. First bullet—This bullet statistically compares the 2011 percent to the 2018 percent to determine if it has remained the same, increased or decreased. Open bullets are used to indicate fewer respondents.
 2. Remaining bullets—Each remaining bullet first indicates if the demographic variable was significant in 2011 and/or 2018. Secondly, the bullet includes if there were any changes within the demographic categories from 2011 to 2018. A bullet is not written if there is no statistical significance in both cases. Open bullets are used to indicate fewer respondents.
 - v. 2015 to 2018 Year Comparisons—same format as the 2011 to 2018 Year Comparisons, but compares 2015 to 2018 percentages instead.
 - vi. Sub-Topic Table—Percentages, whether statistically significant or not, are listed for each survey question analyzed and broken down by demographic variables to determine the bullets for “2018 Findings,” “2011 to 2018 Year Comparisons” and “2015 to 2018 Year Comparisons.” Statistically significant demographic differences within years are indicated by ¹, ² and/or ³ depending upon the number of years data is available. Statistically significant differences between years are indicated by ^a and/or ^b depending on the number of years of data. The table includes the survey question number in the title.
 - vii. Trend Figure—after all survey questions within the main topic is analyzed, a trend graph containing the sub-topics is included. The prevalence of the analyzed percent is the y-axis (vertical line) and the survey years is the x-axis (horizontal line).
- 3) Appendix A—The survey questionnaire listing each question and the percent breakdowns are included.

Throughout the report, some totals may be more or less than 100% due to rounding and response category distribution. Percentages occasionally may differ by one or two percentage points from previous reports or the Appendix as a result of rounding, recoding variables or response category distribution.

Executive Summary

This research provides valuable behavioral data, lifestyle habits, and the prevalence of risk factors and disease conditions of Winnebago County residents. Where possible, Wisconsin and U.S. data are included. The following data are highlights of the comprehensive study. Please see the full report for more details.

General Health	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Overall Health								
Excellent/Very Good ^{A,B,C,D}	57%	52%	42%	56%	53%	42%	NA	NA
Good	31%	31%	43%	31%	32%	43%	NA	NA
Fair or Poor	13%	17%	15%	13%	14%	16%	16%	16%
At Least 3 Physically Unhealthy Days in Past Month ^A	23%	33%	31%	24%	27%	27%	NA	NA
At Least 3 Mentally Unhealthy Days in Past Month ^{A,C}	25%	31%	30%	24%	28%	31%	NA	NA
At Least 3 Physically/Mentally Unhealthy Days Prevented Usual Activities in Past Month ^A	15%	22%	19%	15%	19%	18%	NA	NA

Health Care Coverage	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Currently No Health Care Coverage								
18 Years Old and Older [HP2020 Goal: 0%] ^{A,B,C,D}	12%	6%	<1%	9%	4%	<1%	9%	10%
18 to 64 Years Old [HP2020 Goal: 0%] ^{A,B,C,D}	14%	7%	<1%	10%	5%	1%	10%	12%
Unmet Care in Past Year (Household Member)								
Medical Care [HP2020 Goal: 4%]	--	--	6%	--	--	6%	NA	NA
Dental Care [HP2020 Goal: 5%]	--	--	8%	--	--	8%	NA	NA
Mental Health Care	--	--	2%	--	--	3%	NA	NA
Have a Primary Care Physician [HP2020 Goal: 84%] ^{A,C}	84%	--	89%	88%	--	91%	NA	NA
Advance Care Document or Conversation	--	--	67%	--	--	67%	NA	NA
Advance Directive Document for Health Care	--	--	44%	--	--	45%	NA	NA
Conversation with Trusted Person about Health Care Wishes if Unable to Speak for Self	--	--	49%	--	--	50%	NA	NA

Routine Procedures	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Routine Checkup (2 Years Ago or Less) ^{A,C,D}	83%	91%	92%	84%	88%	91%	84%	84%
Respondents with a Routine Checkup in Past 2 Years								
HCP Inquired about Alcohol Consumption ^{B,D}	--	66%	81%	--	65%	83%	NA	NA
Advised to Quit or Reduce Alcohol Consumption (of HCP Inquiries)	--	10%	6%	--	7%	5%	NA	NA
Dental Checkup (Past Year) [HP2020 Goal: 49%] ^{A,B}	80%	79%	74%	79%	78%	77%	73%	66%

Health Conditions in Past 3 Years	Winnebago County			Tri-County			WI	US
	2011 ¹	2015 ¹	2018	2011 ¹	2015 ¹	2018	2016	2016
High Blood Pressure	30%	26%	26%	26%	26%	25%	NA	NA
High Blood Cholesterol ^D	19%	27%	22%	26%	30%	24%	NA	NA
Mental Health Condition	--	24%	21%	--	24%	21%	NA	NA
Diabetes	7%	8%	10%	8%	8%	10%	NA	NA
Heart Disease/Condition	--	--	8%	--	--	8%	NA	NA
Asthma (Current) ^D	--	12%	9%	--	15%	9%	9%	9%

--Not asked or worded differently. NA-Wisconsin and/or US comparison data not available.

¹In 2011 and 2015, time frame was “ever”.

^AWinnebago County statistical change from 2011 to 2018. ^BWinnebago County statistical change from 2015 to 2018.

^CTri-County statistical change from 2011 to 2018. ^DTri-County statistical change from 2015 to 2018.

Financial Factors Affecting Health in Past Year	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Worried/Stressed About Having Enough Money for Rent, Mortgage or Utilities (Always/Usually)	--	17%	14%	--	14%	14%	NA	NA
Food Didn't Last and Unable to Purchase More (Often True/Sometimes True)	--	17%	15%	--	11%	13%	NA	NA

Mental Health Status	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Get Social/Emotional Support Needed (Rarely/Never) ^A	7%	11%	10%	6%	8%	6%	NA	NA
Stress Because Mind is Troubled in Past Month (All the Time/Most of the Time)	--	--	13%	--	--	15%	NA	NA
Considered Suicide in Past Year	--	--	10%	--	--	8%	NA	NA

Physical Health	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Overweight Status								
Overweight/Obese (BMI 25.0+) [HP2020: 66%] ^{A,B}	64%	62%	70%	66%	65%	67%	67%	65%
Obese (BMI 30.0+) [HP2020: 31%] ^{A,B,C}	30%	31%	39%	30%	32%	35%	31%	30%
Physical Activity/Week								
Moderate Activity (5 Times/30 Min) ^{B,D}	--	20%	32%	--	22%	33%	42% ¹	33% ¹
Vigorous Activity (3 Times/20 Min)	--	24%	25%	--	28%	25%	31% ³	29% ³
Recommended Moderate or Vigorous ^B	--	35%	43%	--	40%	44%	53% ³	51% ³
Major Reasons Not Participate in Physical Activity More (Of Respondents Who Did Not Meet Recommendation)								
Not Enough Time to Exercise	--	--	30%	--	--	24%	NA	NA
Difficult to Motivate Self	--	--	28%	--	--	24%	NA	NA
Boring	--	--	15%	--	--	11%	NA	NA

Nutrition	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Fruit Intake (2+ Servings/Day) ^{B,C,D}	49%	54%	44%	54%	60%	48%	NA	NA
Vegetable Intake (3+ Servings/Day) ^C	29%	27%	31%	26%	33%	31%	NA	NA
At Least 5 Fruit/Vegetables/Day ^D	28%	33%	28%	30%	39%	29%	23% ³	23% ³
Sugar Drink (1+ Drinks/Day/Past Month)	--	--	34%	--	--	30%	NA	NA
Non-Work Screen Time (4+ Hours/Day) ^B	--	44%	32%	--	36%	30%	NA	NA
Sleep in Past 24 Hours (7+ Hours) [HP2020 Goal: 71%]	--	63%	64%	--	67%	65%	NA	NA
Family Meals (Households with More than 1 Person; 5+ Meals/Week) ^{B,D}	--	65%	56%	--	64%	59%	NA	NA

Alcohol Use in Past Month	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Heavy Drinker (Female 31+ Drinks; Male 61+ Drinks)	--	--	9%	--	--	10%	7% ²	5% ²
Binge Drinker (Female 4+ Drinks; Male 5+ Drinks on an Occasion) [HP2020 Goal: 24% (5+ Drinks)] ^{B,D}	26% ⁴	18% ⁴	28%	23% ⁴	20% ⁴	25%	25%	17%
Excessive Drinker (Either Heavy or Binge Drinker) [HP2020 Goal: 25%] ^{B,D}	26% ⁵	18% ⁵	29%	23% ⁵	20% ⁵	26%	NA	NA
Driven When Perhaps Had Too Much to Drink ^{B,C,D}	2%	4%	2%	3%	5%	1%	NA	NA

--Not asked or worded differently. NA-Wisconsin and/or US comparison data not available.

¹2005 WI and US Data; ²2007 WI and US Data; ³2009 WI and US Data.

⁴In 2011 and 2015, binge drinking was defined as 5 or more drinks on an occasion, regardless of gender.

⁵In 2011 and 2015, heavy drinking was not asked. As a result, 2011 and 2015 percentages include binge drinking only.

^AWinnebago County statistical change from 2011 to 2018. ^BWinnebago County statistical change from 2015 to 2018.

^CTri-County statistical change from 2011 to 2018. ^DTri-County statistical change from 2015 to 2018.

Tobacco Use	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Current Use (Every Day/Some Days)								
Tobacco Cigarette Smoker [HP2020 Goal: 12%] ^{C,D}	17%	16%	17%	18%	16%	12%	17%	17%
Smokeless Tobacco [HP2020 Goal: 0.2%] ^A	5%	4%	2%	3%	3%	4%	4%	4%
Electronic Cigarettes/Vaping	--	5%	6%	--	5%	5%	5%	5%
Of Current Tobacco Cigarette Smokers...								
Quit Smoking 1 Day or More in Past Year Because Trying to Quit [HP2020 Goal: 80%]	43%	41%	45%	59%	51%	48%	49% ¹	56% ¹
Someone Smokes in Household or Vehicle [HP2020 Goal: 13%] ^{A,C}	14%	--	9%	15%	--	7%	NA	NA

Household Problems Associated With...	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Alcohol (Past Year) ^C	4%	--	4%	4%	--	2%	NA	NA
Misuse of Prescription or Over-the-Counter Drugs (Past Year)	--	--	2%	--	--	2%	NA	NA

Firearms in Household	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2002	2002
Firearm in House/Garage	--	--	43%	--	--	43%	44%	33%
Firearm Loaded (All Households)	--	--	14%	--	--	9%	3%	8%
Loaded Firearm Also Unlocked (All Households)	--	--	7%	--	--	3%	2%	4%
Of Households with a Firearm								
Loaded Firearm Also Unlocked	--	--	16%	--	--	7%	5%	13%

Personal Safety in Past Year	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
At Least One Personal Safety Issue	--	--	13%	--	--	10%	NA	NA
Afraid for Safety	--	--	9%	--	--	8%	NA	NA
Pushed, Kicked, Slapped, or Hit	--	--	5%	--	--	4%	NA	NA
Felt Extremely Unsafe/Unsafe from Crime in Neighborhood	--	--	4%	--	--	2%	NA	NA

Top Community Health Issues	Winnebago County			Tri-County			WI	US
	2011	2015	2018	2011	2015	2018	2016	2016
Overweight or Obesity	--	--	26%	--	--	22%	NA	NA
Chronic Diseases	--	--	22%	--	--	21%	NA	NA
Illegal Drug Use	--	--	18%	--	--	18%	NA	NA
Mental Health or Depression	--	--	16%	--	--	15%	NA	NA
Infectious Diseases	--	--	15%	--	--	13%	NA	NA
Cancer	--	--	14%	--	--	17%	NA	NA
Alcohol Use or Abuse	--	--	14%	--	--	14%	NA	NA
Access to Health Care	--	--	14%	--	--	17%	NA	NA
Prescription or Over-the-Counter Drug Abuse	--	--	10%	--	--	9%	NA	NA
Violence or Crime	--	--	6%	--	--	4%	NA	NA
Affordable Health Care	--	--	6%	--	--	8%	NA	NA
Lack of Physical Activity	--	--	6%	--	--	5%	NA	NA
Access to Affordable Healthy Food	--	--	6%	--	--	6%	NA	NA

--Not asked or worded differently. NA-Wisconsin and/or US comparison data not available.

¹2005 WI and US Data.

^AWinnebago County statistical change from 2011 to 2018. ^BWinnebago County statistical change from 2015 to 2018.

^CTri-County statistical change from 2011 to 2018. ^DTri-County statistical change from 2015 to 2018.

Children in Household	Winnebago County		Tri-County	
	2015 ¹	2018 ¹	2015 ¹	2018 ¹
Personal Doctor/Nurse Who Knows Child Well and Familiar with History ^A	99%	92%	96%	95%
Visited Personal Doctor/Nurse for Preventive Care in Past Year (Children who have a Personal Doctor/Nurse)	97%	97%	96%	97%
Did Not Receive Specialist Care Needed (Past Year) ^{A,B}	4%	0%	3%	0%
Used New Parent Programs for Child ^B	15%	12%	23%	12%
Health Conditions				
Asthma	9%	10%	10%	6%
Diabetes	0%	0%	2%	<1%
Extremely Unsafe/Unsafe in Community/Neighborhood	--	1%	--	<1%
Fruit Intake (2+ Servings/Day) ^{A,B}	86%	73%	82%	73%
Vegetable Intake (3+ Servings/Day) ^B	32%	23%	31%	23%
5+ Fruit/Vegetables per Day ^{A,B}	52%	36%	50%	40%
Sugar Drink in Past Month				
Less Than One/Day, but More Than One/Week	--	44%	--	38%
At Least One per Day	--	19%	--	15%
Screen Time				
2 or 3 Hours/Day	--	38%	--	38%
4 or More Hours/Day	--	23%	--	18%
Sleeping Location when an Infant				
Crib or Bassinette	93%	92%	89%	94%
In Bed with Adult	3%	1%	2%	3%
Children 4 to 17 Years Old				
Physical Activity (60 Min./5 or More Days/Week) ^{A,B}	39%	64%	50%	63%
Unhappy, Sad or Depressed in Past 6 Months (Always/Nearly Always)	4%	9%	5%	6%
Experienced Bullying in Past Year	16%	25%	18%	24%
Verbally Bullied ^B	13%	23%	13%	21%
Physically Bullied ^A	1%	7%	4%	7%
Cyber Bullied	0%	3%	<1%	3%

--Not asked or worded differently.

¹In 2015, survey included children 12 years old or younger. In 2018, survey included children 17 or younger.

^AWinnebago County statistical change from 2015 to 2018. ^BTri-County statistical change from 2015 to 2018.

General Health

In 2018, 42% of Winnebago County respondents reported their health as excellent or very good; 15% reported fair or poor. Respondents 55 to 64 years old, with some post high school education or less, in the bottom 40 percent household income bracket, who were overweight/obese, inactive or did not excessively drink in the past month were more likely to report fair or poor health. Thirty-one percent of respondents reported in the past month their physical health was not good for at least three days; respondents who were 35 to 44 years old, overweight/obese, inactive or who did not excessively drink in the past month were more likely to report this. Thirty percent of respondents reported in the past month their mental health was not good for at least three days; respondents who were 18 to 34 years old, in the bottom 40 percent household income bracket or smokers were more likely to report this. Nineteen percent of all respondents reported during the past month poor physical or mental health kept them from doing their usual activities for at least three days. Respondents who were female, 35 to 44 years old, with some post high school education or less, in the bottom 60 percent household income bracket, unmarried or smokers were more likely to report at least three unhealthy days kept them from usual activities in the past month. *From 2011 to 2018, there was no statistical change in the overall percent of respondents who reported their health as fair or poor, as well as from 2015 to 2018. From 2011 to 2018, there was a statistical increase in the overall percent of respondents who reported at least three physically unhealthy days in the past month while from 2015 to 2018, there was no statistical change. From 2011 to 2018, there was no statistical change in the overall percent of respondents who reported at least three*

mentally unhealthy days in the past month, as well as from 2015 to 2018. From 2011 to 2018, there was a statistical increase in the overall percent of respondents who reported at least three unhealthy days kept them from usual activities in the past month while from 2015 to 2018, there was no statistical change.

Health Care Coverage and Information

In 2018, less than one percent of Winnebago County respondents reported they were not currently covered by health care insurance. Six percent of respondents reported there was a time in the past year someone in the household did not receive the medical care needed; married respondents were more likely to report this. Eight percent of respondents reported there was a time in the past year someone in the household did not receive the dental care needed; respondents in the bottom 40 percent household income bracket were more likely to report this. Two percent of respondents reported in the past year someone in the household did not receive the mental health care needed. *From 2011 to 2018, the overall percent statistically decreased for respondents 18 and older or 18 to 64 years old who reported no current personal health care coverage, as well as from 2015 to 2018.*

In 2018, 89% of Winnebago County respondents reported they have a personal care physician they think of as their personal doctor or health care provider; respondents who were female, 55 and older, in the middle 20 percent household income bracket or married were more likely to report a personal care physician. Forty-four percent of respondents reported they had an Advance Directive for Health Care document. Forty-nine percent of respondents reported in the past year they had a conversation with family, friends or other persons they trust about their wishes for health care if they are unable to speak for themselves. A total of 67% completed either the Advance Directive for Health Care document or had a conversation with a trusted person about their health care wishes; respondents who were female, 65 and older, with some post high school education or married respondents were more likely to report this. *From 2011 to 2018, there was a statistical increase in the overall percent of respondents reporting they have a doctor, nurse practitioner, physician assistant or primary care clinic they think of as their personal doctor or health care provider.*

Routine Procedures

In 2018, 92% of Winnebago County respondents reported a routine medical checkup two years ago or less. Respondents who were female, 55 and older or married were more likely to report a routine checkup two years ago or less. Eighty-one percent of respondents who had a routine checkup in the past two years reported their health care provider inquired about their alcohol consumption. Respondents 45 to 54 years old, with a college education, in the top 40 percent household income bracket, who were unmarried or drank excessively in the past month were more likely to report their provider inquired about their alcohol consumption. Six percent of respondents who were asked about their alcohol consumption were advised to reduce or quit their drinking. Respondents with some post high school education, in the bottom 40 percent household income bracket, in the top 40 percent household income bracket, who were unmarried or drank excessively in the past month were more likely to report they were advised to reduce or quit their drinking. Seventy-four percent of respondents reported a visit to the dentist in the past year; respondents who were female, with a college education, in the top 40 percent household income bracket or married respondents were more likely to report this. *From 2011 to 2018, there was a statistical increase in the overall percent of respondents reporting a routine checkup while from 2015 to 2018, there was no statistical change. From 2015 to 2018, there was a statistical increase in the overall percent of respondents reporting their health care provider asked about their alcohol use. From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting their health care provider advised the, to quit or lessen alcohol use at their last routine checkup. From 2011 to 2018, there was a statistical decrease in the overall percent of respondents reporting a dental checkup, as well as from 2015 to 2018.*

Health Conditions

In 2018, out of six health conditions listed, the most often mentioned in the past three years was high blood pressure (26%) or high blood cholesterol (22%) in Winnebago County. Respondents 65 and older, with a high school education or less, who were overweight/obese, inactive or nonsmokers were more likely to report high blood pressure. Respondents 65 and older, with a high school education or less, who were overweight/obese, inactive or did not excessively drink in the past month were more likely to report high blood cholesterol. Twenty-one percent reported a mental health condition; respondents who were female, 18 to 34 years old, with some post high school education, in the bottom 40 percent household income bracket or who were smokers were more likely to report this. Ten percent of respondents reported diabetes. Respondents 65 and older, with a high school education or less, in the