

2018 Mental Health Adult Status Questionnaire

Buffalo County Community Partners

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Executive Summary

This survey finds that residents of Buffalo County generally enjoy good mental and behavioral health. However, the purpose of this study is not to congratulate ourselves or savor the aroma of successful efforts from the past. It is to identify issue areas and segments of the population in need of further attention.

In the area of **mental health**, the survey reveals that almost half of all respondents (47.8%) report that stress, depression or emotional problems *did not* impair their activities at all in the previous month, while about one in ten (11.6%) said they were impaired by mental health conditions more than 10 days out of the previous 30. In other areas affecting mental wellbeing, most respondents do not worry about having enough money, most only work one job, and get the emotional and social support they need. Three quarters had three or fewer adverse childhood experiences. Three-fourths have never been diagnosed with any kind of depressive disorder, and 98% had not attempted suicide in the prior year.

All of this seems pretty positive. However, closer inspection of the mental health data reveals that younger respondents are more affected by mental health conditions or emotional problems. The 19-24 age group had the highest percentage of respondents reporting feeling depressed or impaired in their normal activities on 10 or more days in the prior month. This group also had the highest percentage of depression diagnoses, and was most likely to consider or attempt suicide. Women in the study also suffered more ill effects from mental health than did men, although there is no meaningful difference between men and women in the questions of suicidal ideation or attempted suicide. Nonwhite respondents more frequently reported depression, anxiety and suicidal ideation than white respondents, as lower-income groups more frequently reported these conditions than did higher-income respondents.

In a manner related to mental health, about 1 in 5 (20.2%) respondents reported they provide **regular care or assistance to a friend or family member** with a health problem or disability. The typical person in this situation is female, cares for a relative for 8 hours a week or fewer, and has been doing so for fewer than 30 days or longer than 5 years. In and of itself, this caregiving role does not pose a direct threat, and may even provide satisfaction to those who do it (the survey does not ask if these individuals want to be in this situation). Nevertheless, it is understood to signify a mental or emotional strain on individuals who may be in need of respite.

In short, the survey reveals that the greatest areas of concern when it comes to mental health appear to be depression and anxiety among young, low-income, female and nonwhite populations.

When it comes to **tobacco use**, three-quarters of respondents have never become smokers, and even fewer have tried e-cigarettes or another vaping product. But of those who have used these products, about 1 in 6 (17.2%) smokes tobacco daily, and about 1 in 20 vapes daily. Since no amount of tobacco or other nicotine-delivery systems can be considered safe, attempting to reduce daily usage to 0% seems a worthwhile goal. The survey suggests tobacco cessation efforts should be targeted at younger females with lower incomes, since these

populations most frequently smoke cigarettes on a daily basis. Younger males are more likely to be daily users of e-cigarette devices.

Alcohol use seems widespread among respondents to the survey, as less than one-third (31.2%) of respondents reported consuming no alcoholic beverages in the prior 30 days, and the distribution was fairly similar across all age groups. Of those who drank, 7 in 10 consumed only one or two drinks on any given day. While reasonable people may disagree on what may or may not be a “safe” amount of alcohol to consume, it is widely recognized that consuming 4-5 drinks on a single occasion poses significant risks to the individual and those in the immediate vicinity. Thus, the focus on respondents who “binge” by consuming 4 or more drinks for women, 5 or more for men. This behavior is most frequently reported among male respondents, and those between the ages of 19 and 34.

The results of this survey suggest very little **illicit drug use** among respondents, with marijuana being the most popular. Six percent of respondents report using marijuana in the prior month, and they were about evenly divided between recreational and medicinal users. Other illicit drugs like cocaine, heroin and methamphetamine see significantly less use among respondents. When it comes to prescription drugs, the survey reveals more opportunity to address potential problems. A sizable minority (42.1%) reported having medicine left over the last time they received a prescription for pain medication. This poses a risk of these drugs becoming available to those who would abuse them. About 1 in 20 (5.5%) respondents reported taking prescription drugs that were prescribed to another person. Of these 52 individuals, 23 reported abusing opiates in this way, indicating addiction or a significant risk of becoming addicted.

Among the demographic groups, marijuana was most frequently used by low-income groups. Prescription pain medications are used more frequently by low-income, older and female respondents. Likewise, female respondents were more likely to have prescription pain medication leftover, as were higher income groups. Optimistically, we may conclude that these segments of the population thought to minimize their personal risk by stopping the medication when they felt better. But, as indicated earlier, this practice exposes others to the risk that these drugs will be abused. Finally, the survey reveals that respondents with less education more frequently reported taking drugs prescribed to someone else, indicating the need for more education on the dangers of this practice.

This survey measures **safe driving habits** among respondents. Almost all respondents always (73.1%) or nearly always (18.2%) wore seatbelts when they drove or rode in a car. Cell phone use while driving was another matter, though. Fewer than half (44.8%) reported they never did this in the past month, while only 20% reported never talking on the phone while driving. While one might suspect that younger, digital-native respondents more frequently engage in these dangerous practices, the survey reveals instead that respondents between the ages of 25 and 54 more frequently texted or emailed while driving, and those in the 25-44-year-old age groups most frequently talked on the phone while driving. Among the other demographic groups, the survey revealed no meaningful differences when it comes to cell phone use while driving. Too many respondents are doing it, regardless of age, income, education, race or gender.

Methodology

Survey Instrument

The survey instrument was developed by Buffalo County Community Partners, in consultation with the research team from UNK Political Science. Most questions were modeled on the Center for Disease Control and Prevention's Behavioral Risk Factor Surveillance System, and were consistent with questions asked on past iterations of the Buffalo County BRFS.

The questionnaire was translated into Spanish by a native Spanish speaker, then evaluated and adjusted for dialectical differences by both native speakers and individuals who pursued formal Spanish-language study. Both the English- and Spanish-language versions were accessible through the same link.

The survey was constructed for online delivery in SurveyMonkey. Questionnaires in SurveyMonkey are optimized for use on portable devices, such as smartphones and tablets.

The full, English-language version of the questionnaire is reproduced in Appendix A.

Data Collection Process

The survey opened with a soft launch on 18 January, 2018. At that time, volunteers and coalition members of Buffalo County Community Partners were sent the link, invited to complete the survey and to share it with friends. On 6 February, 2018, the Spanish version of the survey was added to the link, and Buffalo County Community Partners launched its full communications campaign.

Communications consisted of news coverage, e-mail, social media and word-of-mouth. Over March and April, posters and postcards were developed (in English and Spanish) for distribution at supporting institutions.

Researchers from UNK conducted in-person survey collection at the Peterson Senior Activity Center, community dinners organized by the Jubilee Center, sporting events held on the UNK campus, and a variety of student organization meetings.

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The survey was closed on 30 April, 2018

Responses

The gross number of responses totaled 1106. Of those, 110 were considered invalid. A valid response was one in which the respondent answered one or more substantive questions. The net number of valid responses was 996. Eight of those were obtained from the Spanish-language version of the survey.

Data Cleaning and Weighting

The raw data are recorded and stored at SurveyMonkey.com. In addition, they were downloaded in SPSS format, and are stored on computers in the Department of Political Science at the University of Nebraska at Kearney. A copy of the SPSS data file has also been shared with staff of Buffalo County Community Partners.

Responses from the English and Spanish-language versions were cleaned separately and then combined into one dataset. In addition to removing invalid responses, the data cleaning involved converting height and weight information into pounds and inches and calculating each respondent's Body Mass Index (BMI).

Data on the demographic variables for age, race, gender, income and education were weighted to reflect the distribution of those variables among Buffalo County residents as reported in the most recent US Census (2010).

Contact Information

Any questions regarding this report or the data collected can be directed to the Department of Political Science at the University of Nebraska at Kearney by calling 308-865-8506 or by sending an e-mail to Diane Duffin at duffind@unk.edu, Satoshi Machida at machidas1@unk.edu or Charles Rowling at rowlingc@unk.edu

Major Findings

Section 1: General Demographics and Personal Characteristics

This chapter analyzes the demographic characteristics of the respondents from various perspectives. First, it is important to look into the issue of where they reside within Buffalo County. Judging from the zip codes associated with the respondents, the overwhelming majority of them are residents in Kearney (84.9%). Others live in Pleasanton (2.9%), Ravenna (2.0%), Gibbon (2.0%), Elm Creek (1.0%), and Shelton (1.0%). Since Kearney has the largest population in Buffalo County, a significant portion of the samples come from Kearney. Table 1.1 summarizes the geographic distribution of the respondents.

Table 1.1. Communities Represented in the Sample

Community	Percentage of the Sample	N
All Kearney Zip Codes	84.9%	917
Amherst	8.0%	9
Elm Creek	1.0%	11
Gibbon	2.0%	22
Miller	0.2%	2
Odessa	0.2%	2
Pleasanton	2.9%	31
Ravenna	2.6%	28
Riverdale	0.3%	3
Shelton	1.0%	11

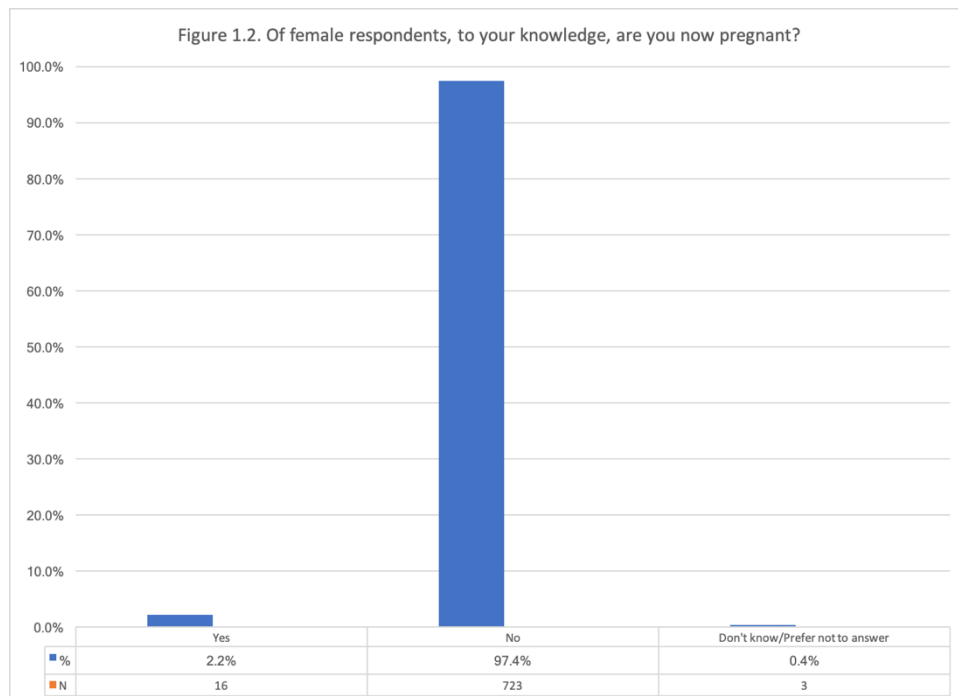
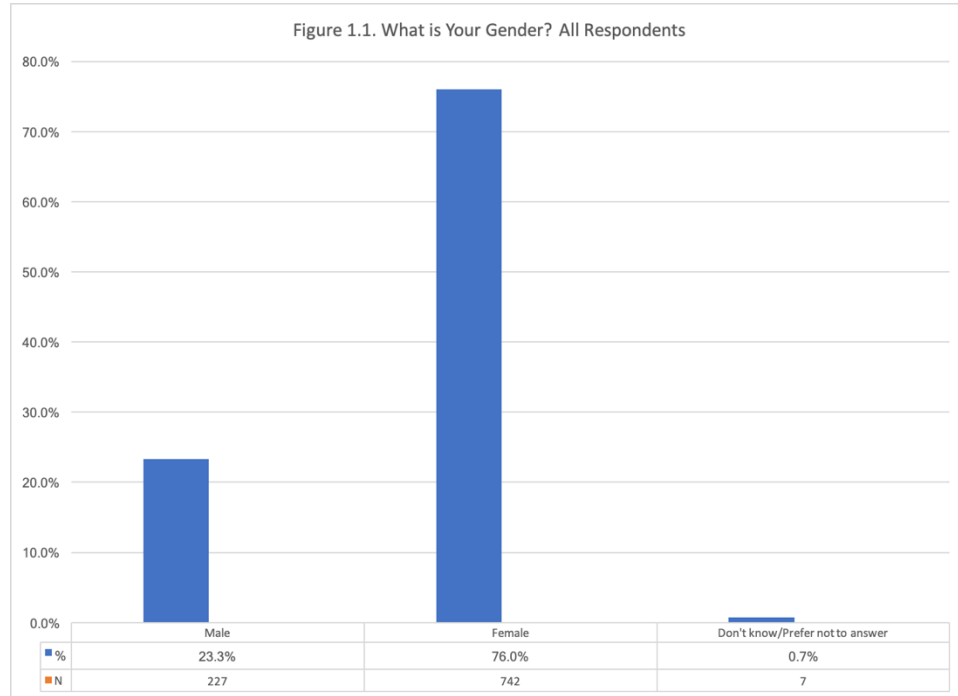
In terms of gender, the majority of the samples is female (76.0%) while the percentage of male respondents is 23.3%. It seems that females are much more likely to take the survey than males. This is a common tendency in most surveys. **Figure 1.1** (below) presents the gender breakdown of respondents.

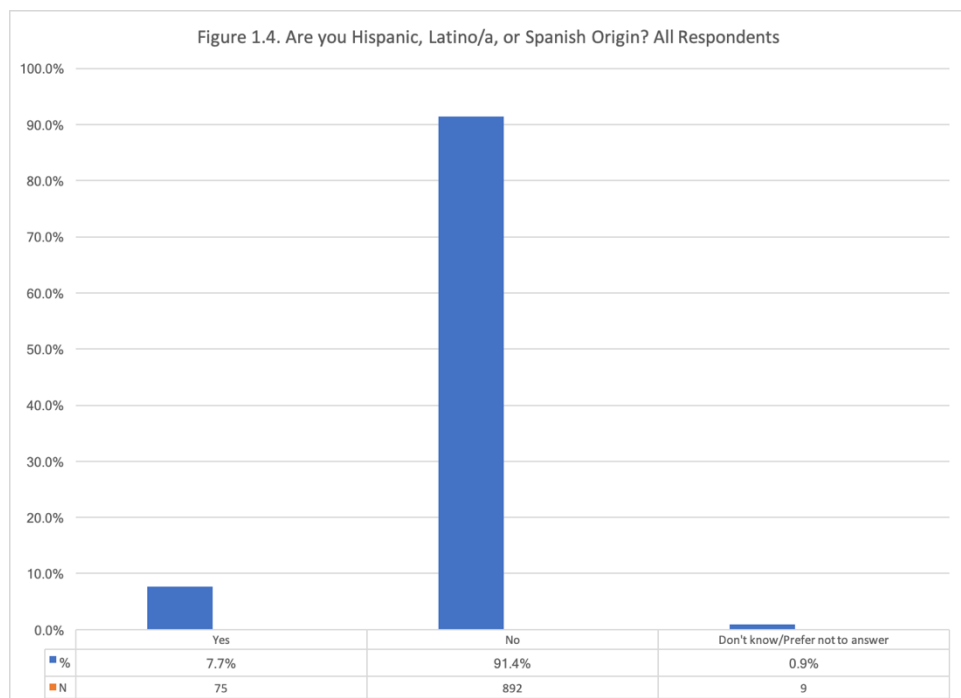
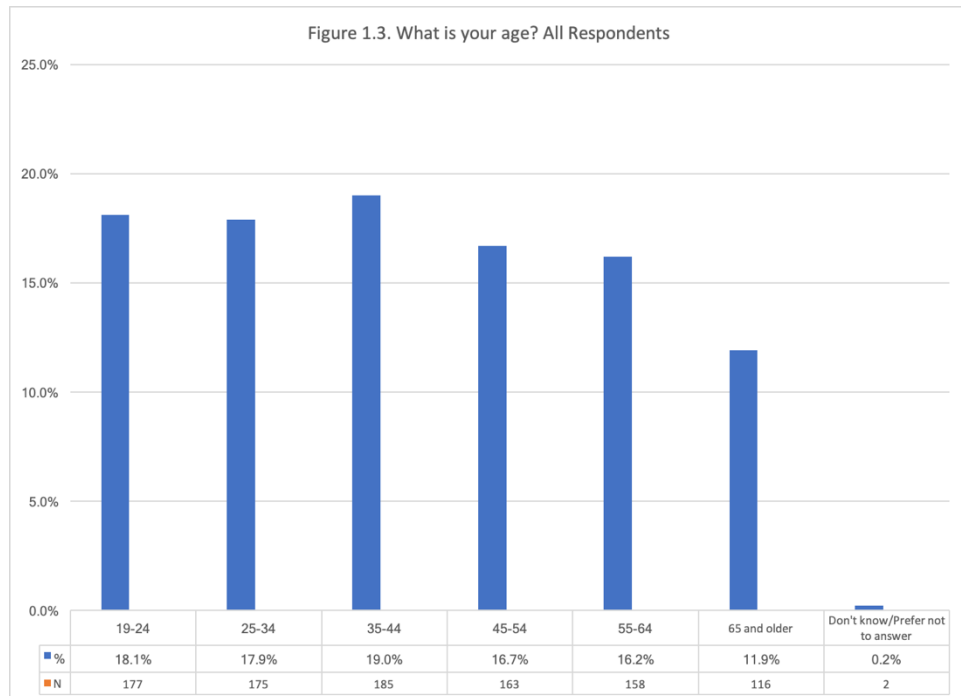
Among those who identified themselves as females, the survey further asked if they were pregnant or not by posing the following question: “To your knowledge, are you now pregnant?” 2.2% of them chose the answer of “Yes” while 97.4% of them said “No.” Summary data for this question are depicted in **Figure 1.2**.

The survey tapped into respondents’ age. The distribution of the respondents’ age is well-balanced as follows: 19-24 years old (18.1%), 25-35 (17.9%), 35-44 (19.0%), 45-44 (16.7%), 55-64 (16.2%), 65 and above (11.9%). Summary data for age groups are presented in **Figure 1.3**.

As indicated in **Figure 1.4**, below, the survey asked if respondents identify themselves as Hispanic or not by posing the following question: “Are you Hispanic, Latino/a, or Spanish

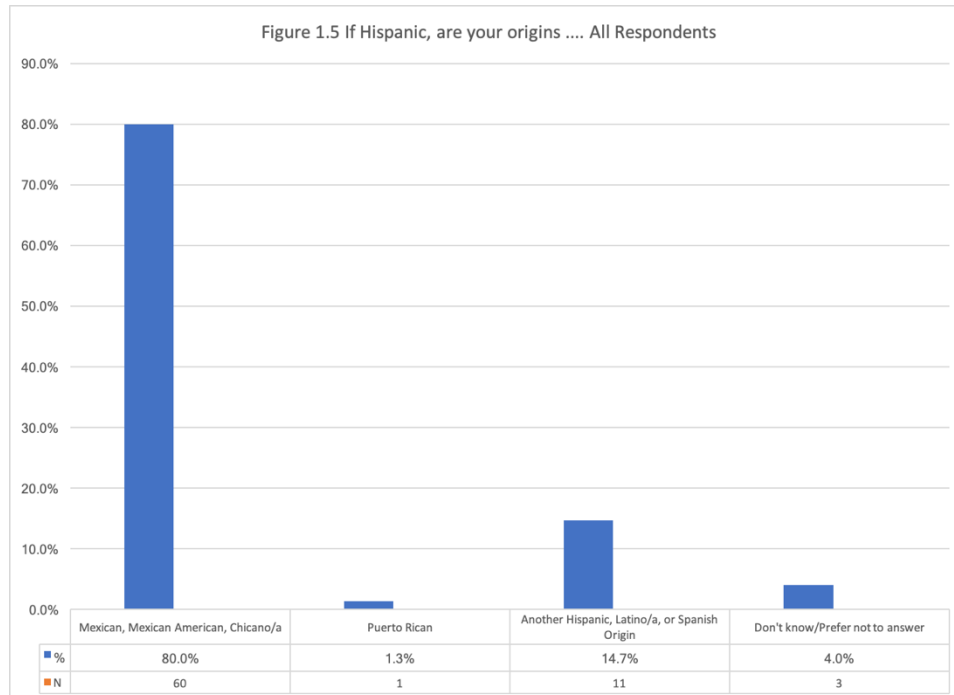
Origin?” 7.7% of the respondents answered this question with “Yes,” and 91.4% of them chose the answer of “No.”



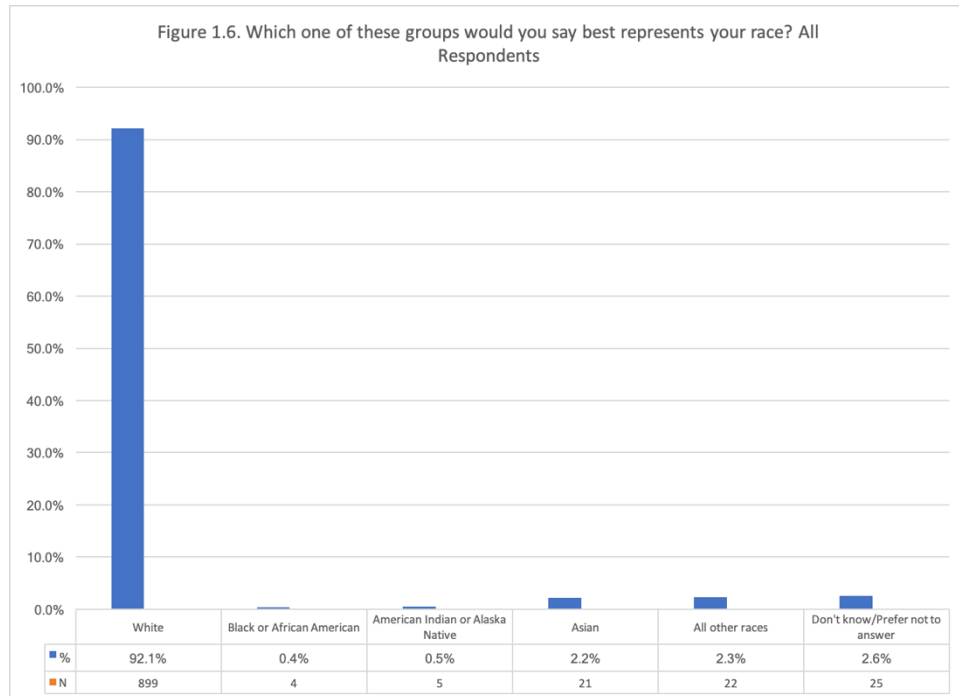


For those who answered with “Yes,” the survey further asked the following question: “If Hispanic, Latino/a, or Spanish Origin....” For this question, 80.0% of them picked “Mexican,

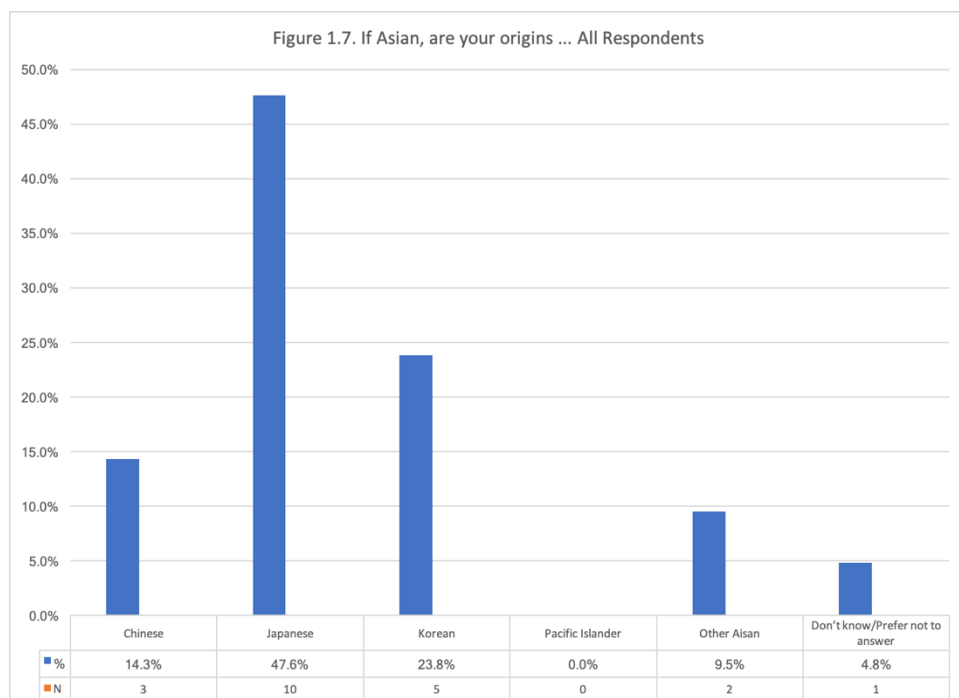
Mexican American, Chicano/a.” 1.3% of them marked “Puerto Rican” and 14.7% of them chose “Another Hispanic, Latino/a, or Spanish Origin.” While the overwhelming majority of them are Mexican origins, the Hispanic population in Buffalo County come from various backgrounds. **Figure 1.5** summarizes the responses.



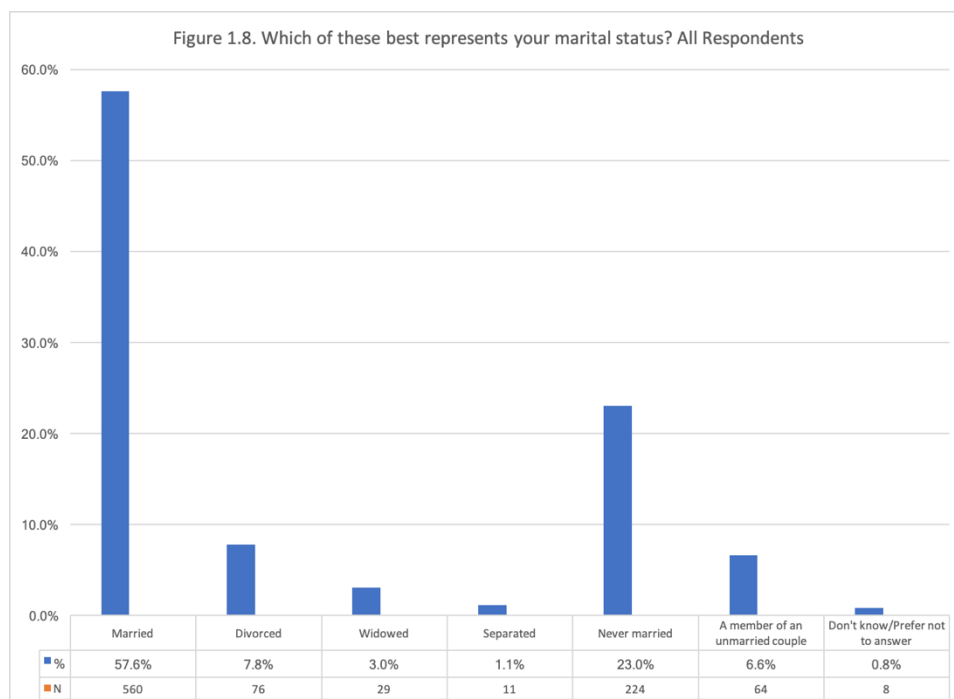
The survey taps into the respondents’ race by posing the following question: “Which one of these groups would you say best represents your race?” As indicated in **Figure 1.6**, below, 92.1% of them answered this question with the choice of “White.” 2.2% of them picked “Asian.” Others marked “Black or African American” (0.4%) and “American Indian or Alaska Native” (0.5%). Also, 2.3% of the respondents picked “Other.”



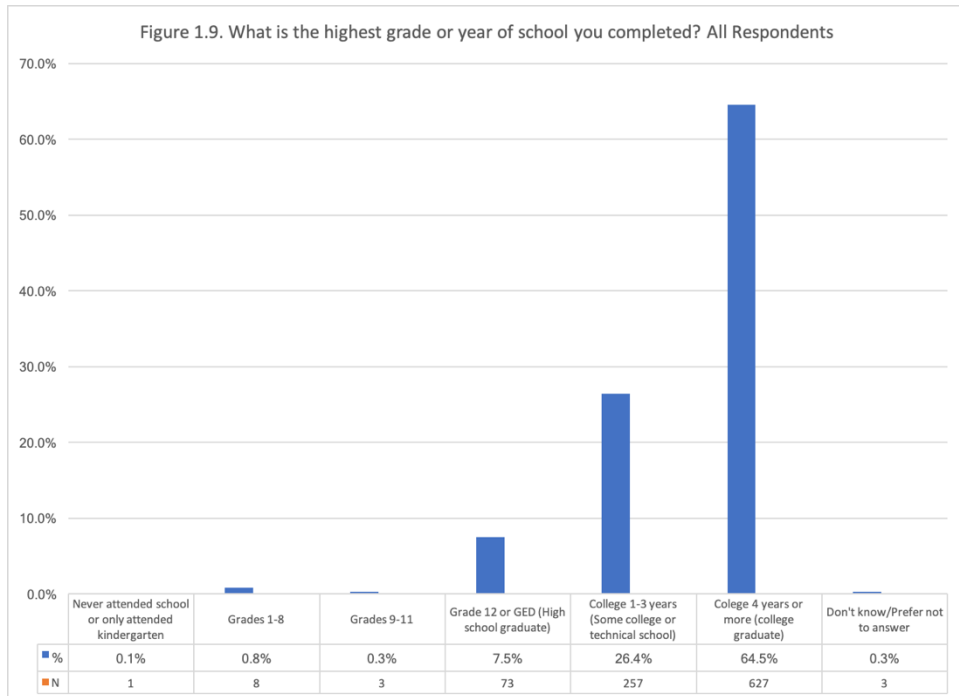
Furthermore, the survey further looks into the category of Asian by asking the following question: “If Asian, are you...” 47.6% of them picked the choice of “Japanese” and 23.8% of them marked “Korean.” Also, 14.3% of the respondents answered this question by choosing “Chinese.” Although the overwhelming majority fall into these three categories, 9.5% of the respondents marked “Other Asian.” **Figure 1.7** summarizes these data.



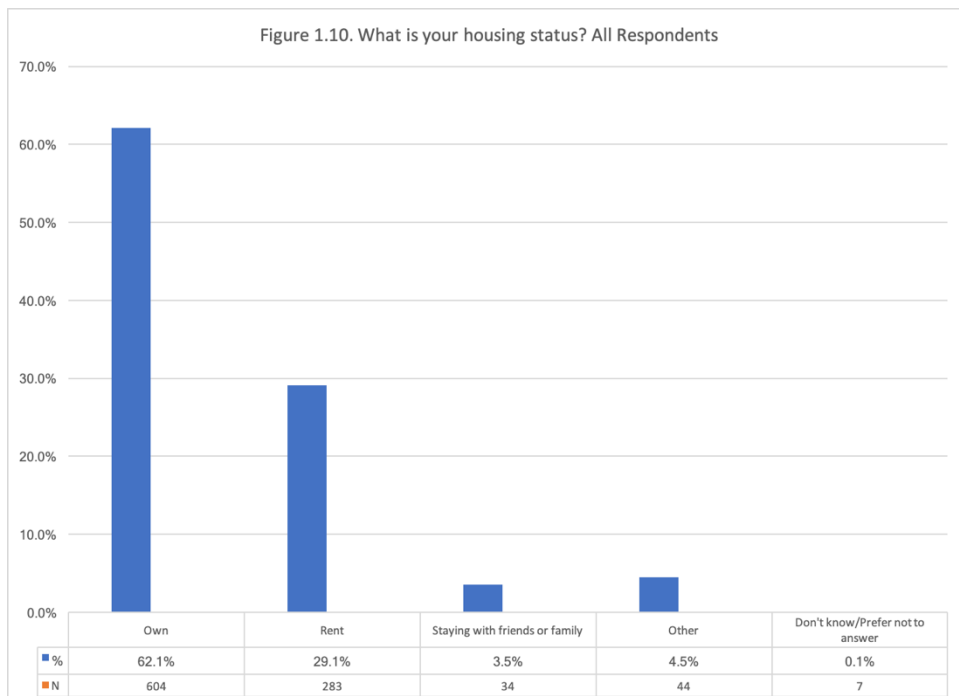
The survey inquired about respondents' marital status by posing the following question: "Which of these best represents your marital status?" As reported in **Figure 1.8**, 57.6% of the respondents answered this question with the choice of "Married." 7.8% of them picked "Divorced" and 3.0% of them marked "Widowed." Also, 1.1% of the respondents were "Separated." While the majority of them are married or were married before, 23.0% of the respondents marked "Never married." This may be due to the fact that the survey includes a number of younger respondents. Finally, 6.6% of the respondents picked the choice of "A member of an unmarried couple."



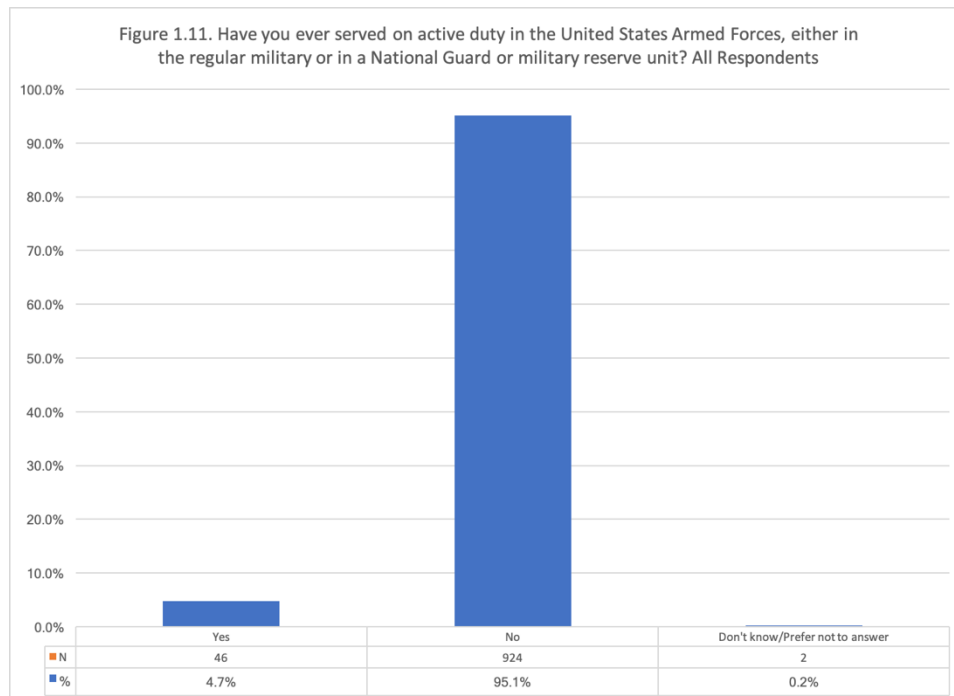
It is important to tap into respondents' educational attainments. For this purpose, the survey posed the following question: "What is the highest grade or year of school you completed?" 64.5% of the respondents marked "College 4 years or more (college graduates)." 26.4% of them picked the choice of "College 1-3 years (some college or technical school)." As these results indicate, the overwhelming majority of the respondents attended some college. However, 7.5% of them picked "Grade 12 or GED (High School graduate)" and there are a small number of respondents who have only limited education shown as follows: "Grade 9-11" (0.3%), "Grade 1-8" (0.8%), and "Never attended school or only attended kindergarten" (0.1%). Respondents in the survey have various educational attainments. **Figure 1.9**, below, itemizes these results.



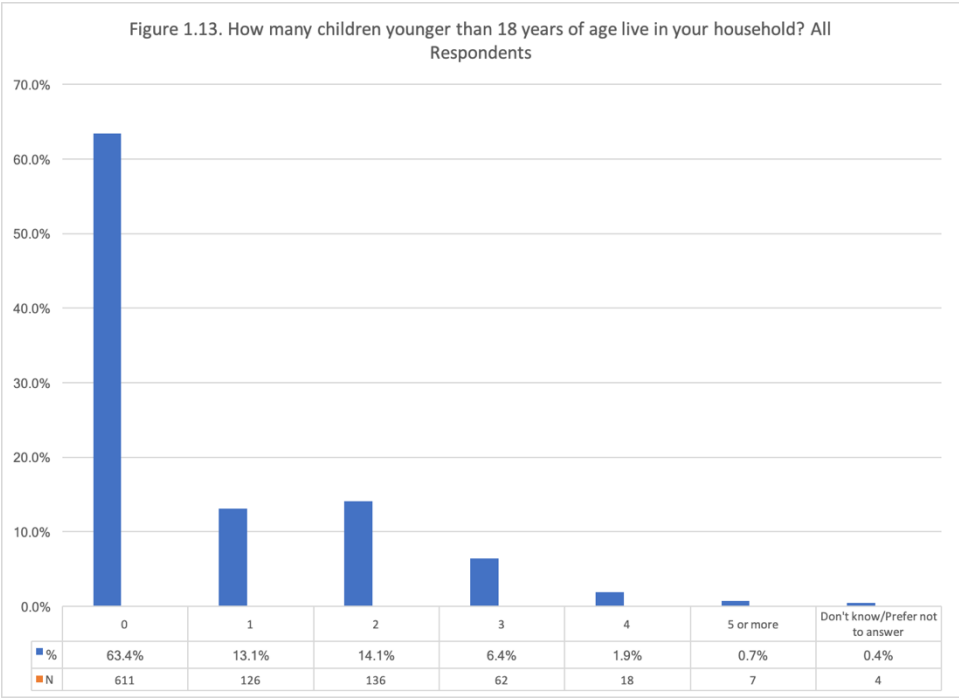
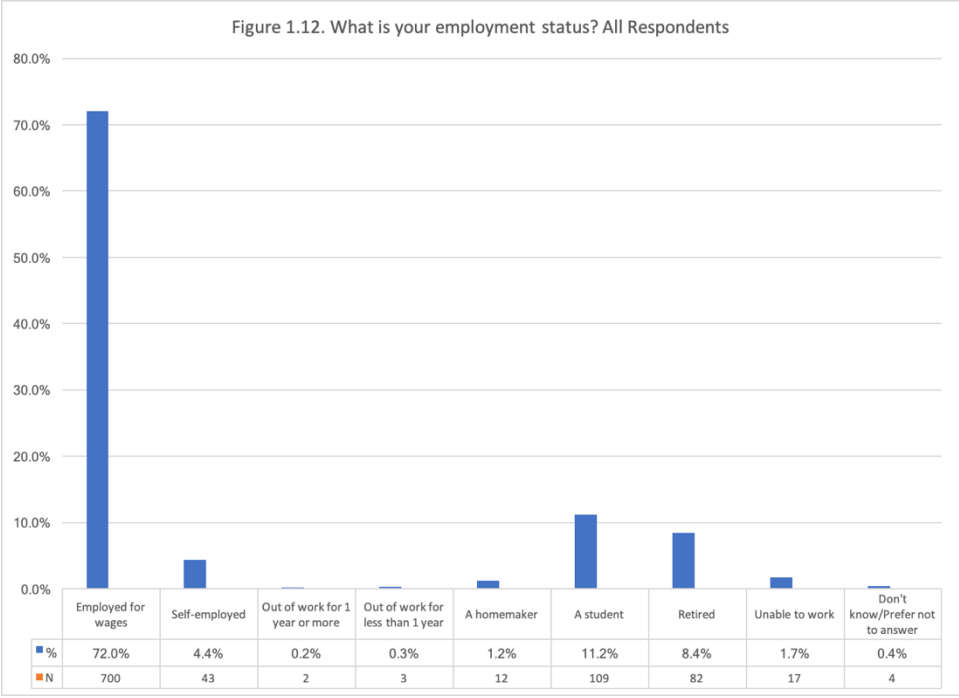
The survey touches upon the issue of respondents' housing status by asking the following question: "What is your housing status?" 62.1% of the respondents answered this question with the choice of "Own" and 29.1% of them picked "Rent." 3.5% of the respondents marked "Staying with friends or family." These results, summarized in **Figure 1.10**, indicate that the majority of the respondents own some kind of property.



The survey inquired about respondents' experience of serving in the military by posing the following question: "Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?" 4.7% of the respondents answered this question with the choice of "Yes" while 95.1% of them with "No." **Figure 1.11** presents these results.

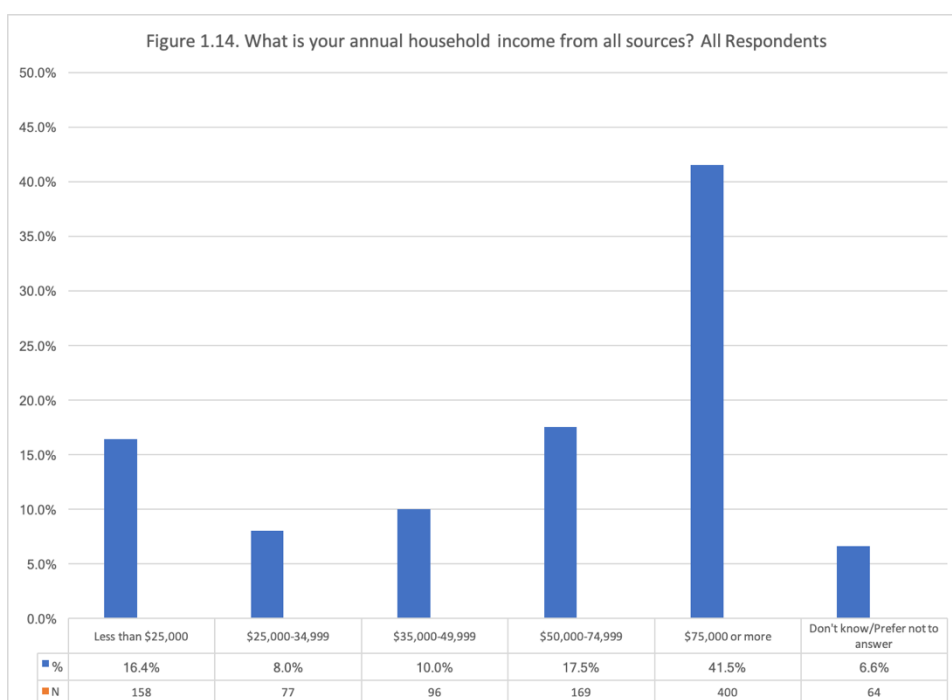


Also, the survey examined respondent' employment status by posing the following question: "What is your employment status?" 72.0% of the respondents are employed for wages, and 4.4% of them are self-employed. The percentage of those who are out of work for 1 year or more is 0.2% and that of those who are out of work for less than one year is 0.3%. While close to 80% of them are employed or self-employed, there are respondents who are not part of the workforce shown as follows: homemaker (1.2%), students (11.2%), retired (8.4%) and those who are not able to work (1.7%). These results are summarized below, in **Figure 1.12**.

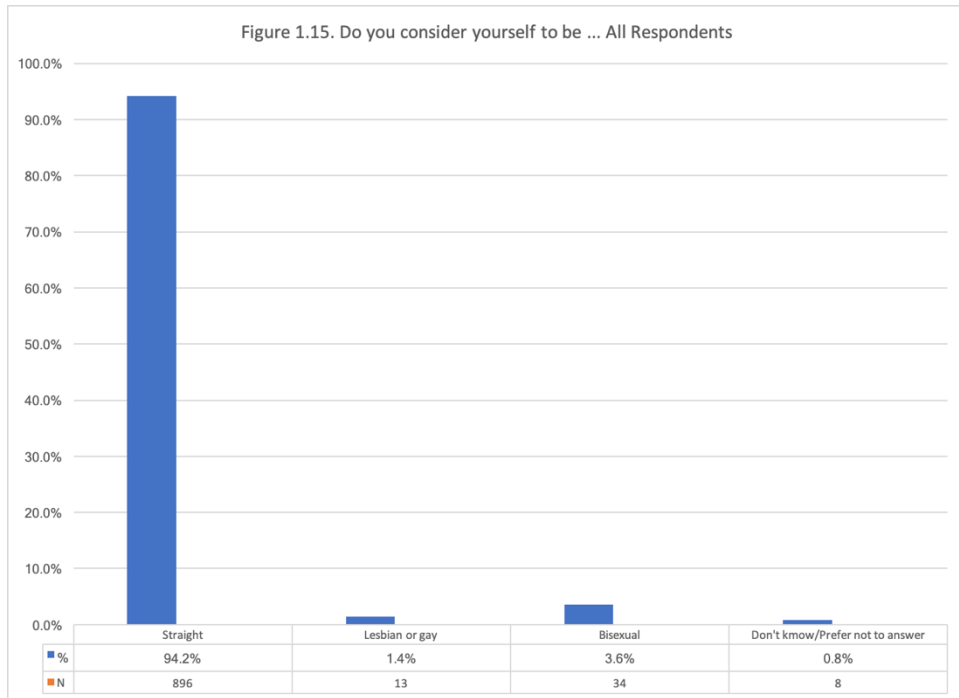


In order to capture respondents' family situations, the survey posed the following question: "How many children younger than 18 years of age live in your household?" 63.4% of the respondents answered this question with the choice of "0." 13.1% of them marked "1" and 14.1% of them picked "2" followed by "3" (6.4%) and "4" (1.9%). These results need to be evaluated with the respondents' age. Although the majority of the respondents do not live with their children who are younger than 18 years old, it is often the case that their children have already moved out of their household. **Figure 1.13**, above, presents the summary of these data.

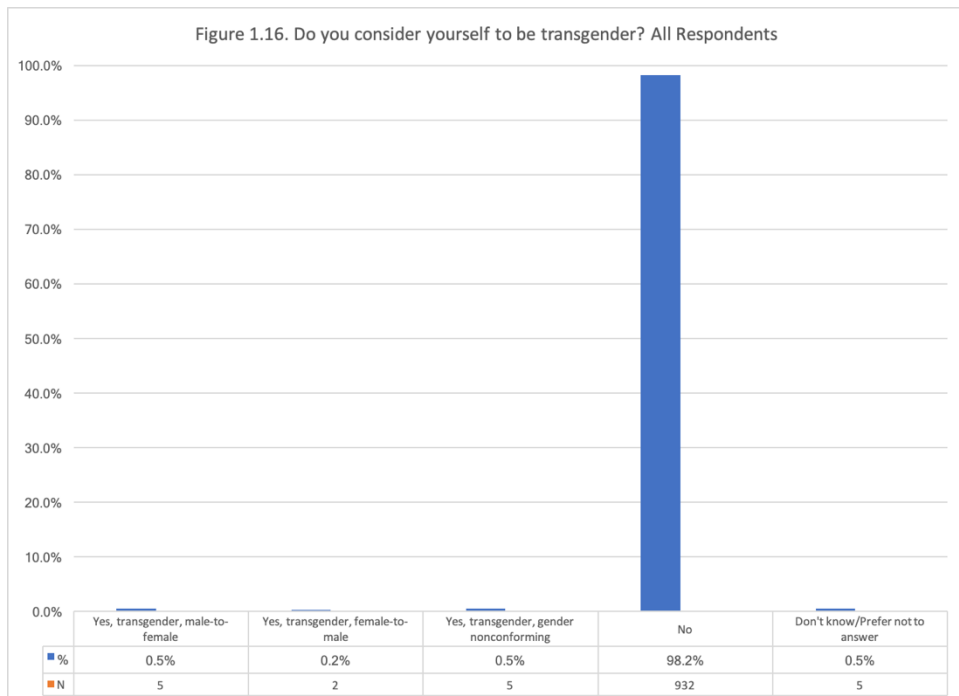
The survey also taps into respondents' annual incomes by asking the following question: "What is your annual household income from all sources?" The distribution of the annual incomes is as follows: "Less than \$25,000" (16.4%), "\$25,000-\$34,999" (8.0%), "\$35,000-\$49,999" (10%), "\$50,000-74,999" (17.5%), and "\$75,000 or more" (41.5%). These results suggest that a significant portion of the respondent earn more than \$75,000, which is well above the national average. This may have to do with the sampling method of the survey, which relied on the online survey platform. Accordingly, the respondents tend to be from relatively well-off backgrounds. **Figure 1.14**, below, breaks down the respondents by income category.



The survey investigated respondents' sexual orientation by posing the following question: "Do you consider yourself to be..." For this question, 94.2% of the respondents chose "Straight." Yet, there are some respondents who picked different answers such as "Lesbian or Gay" (1.4%) and "Bisexual" (3.6%). These results are presented in **Figure 1.15**.

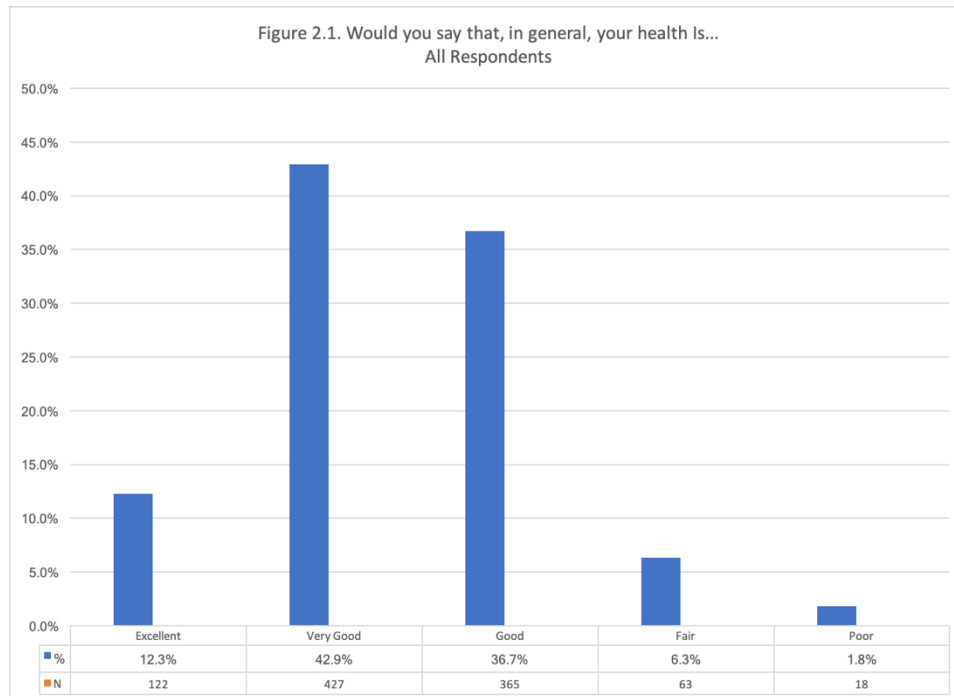


Related to this matter, the survey also posed the question: “Do you consider yourself to be transgender?” As reported in **Figure 1.16**, 98.2% of them answered this question with “No,” but there are some respondents who consider themselves to be transgender. As one can see in these answers, respondents exhibit various sexual orientations.



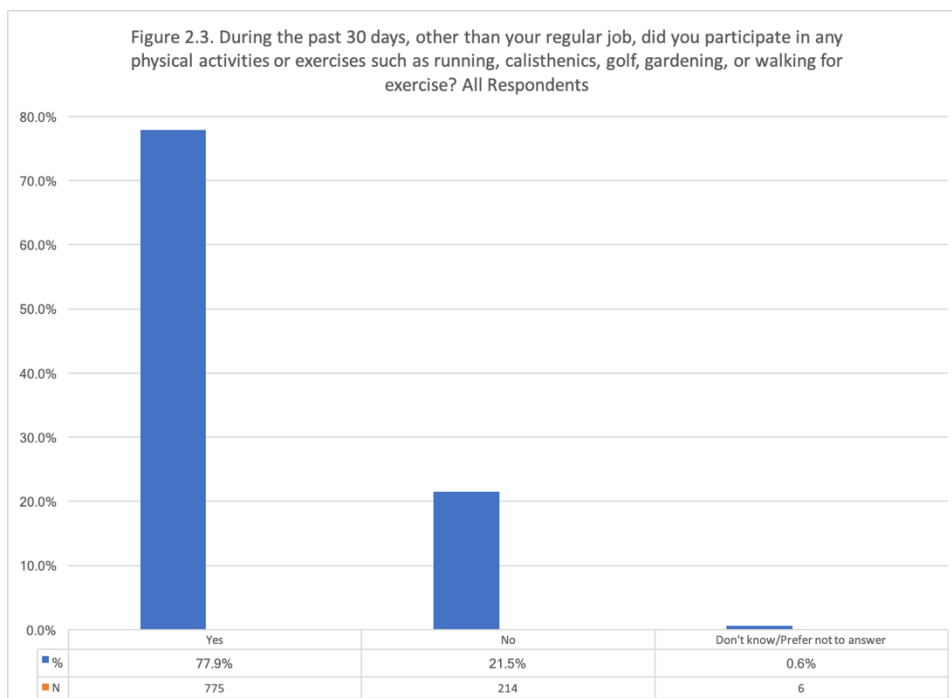
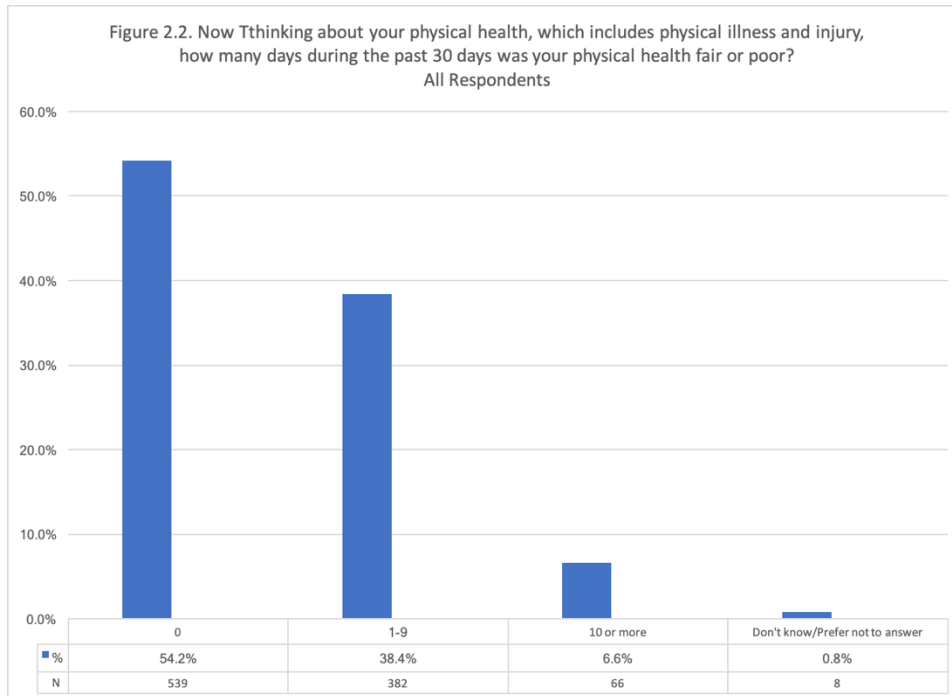
Section 2: General Health

One of the major goals of this survey is to grasp conditions regarding general health among residents in Buffalo County. For this purpose, the survey asked a series of questions on this subject. One of the questions reads as follows: “Would you say that, in general, your health is...” As reported in **Figure 2.1**, 12.3% of the respondents answered this question using “excellent,” 42.9% of them “very good,” and 36.7% picked “good.” These results suggest that the overwhelming majority of the respondents tend to enjoy generally good health.

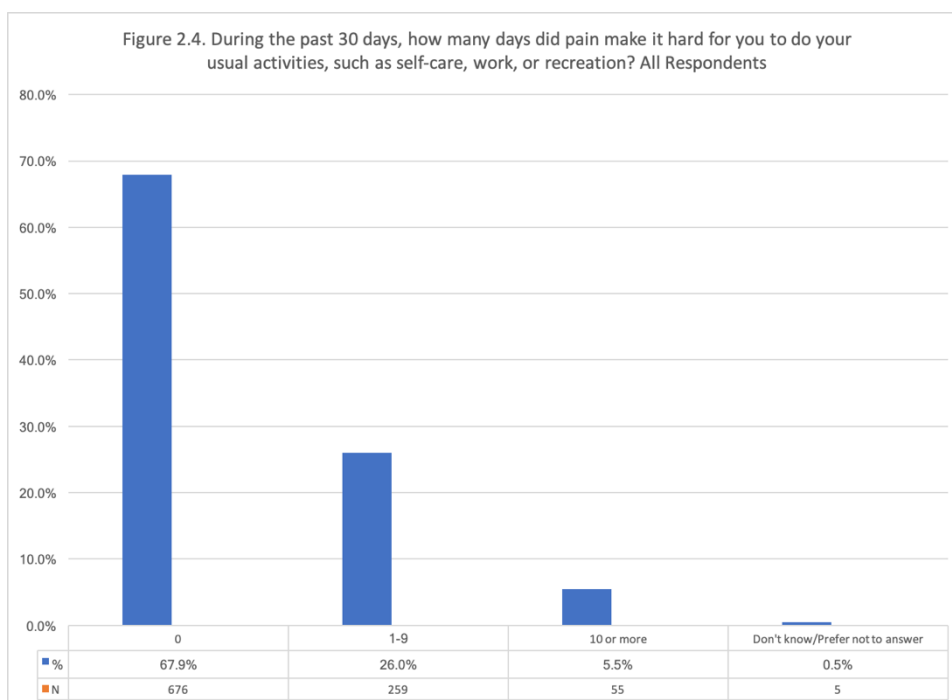


Related to the above question, the survey asked the following question: “Now thinking about your physical health, which includes physical illness and injury, how many days during the past 30 days was your physical health fair or poor?” 54.2% of the respondents answered with the choice of “0 times.” 38.4% of them used the choice of “1-9 times” and 6.6% of them picked the choice of “10+ times.” As shown in **Figure 2.2**, these results show that more than half of the respondents do not have any problems regarding their physical health. Yet, a significant portion of the respondents tend to have days when their physical health is not satisfactory.

In addition to the overall health conditions, the survey examined how active they are in various activities by asking the following question: “During the past 30 days, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?” **Figure 2.3**, below, shows that 77.9% of them answered this question with the choice of “Yes,” while 21.5% of them with the choice of “No.” These results suggest that the majority of the respondents tend to be at least somewhat active in various activities.

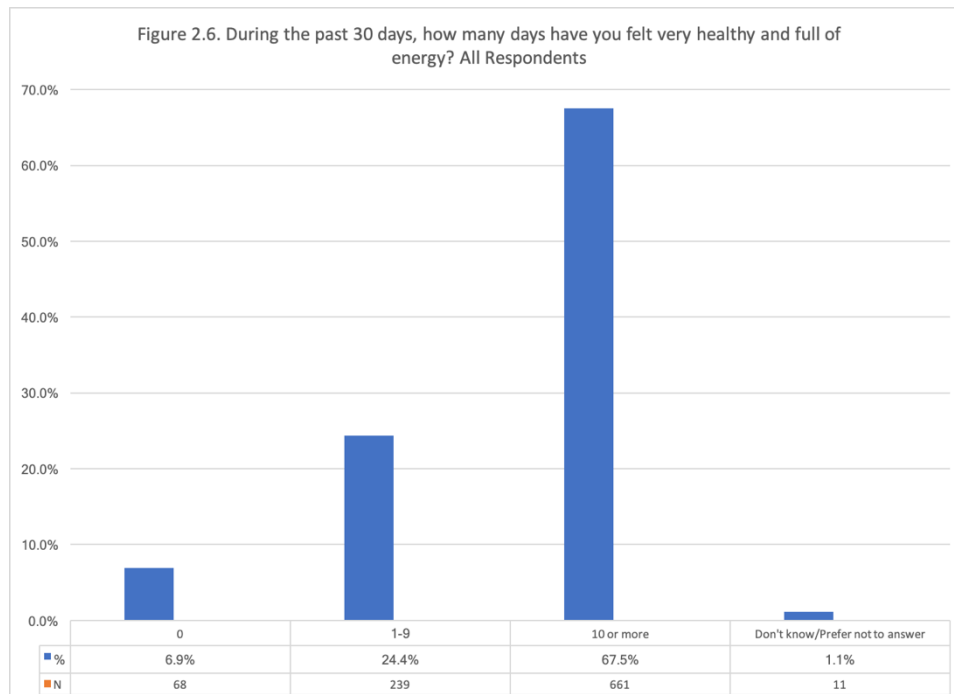
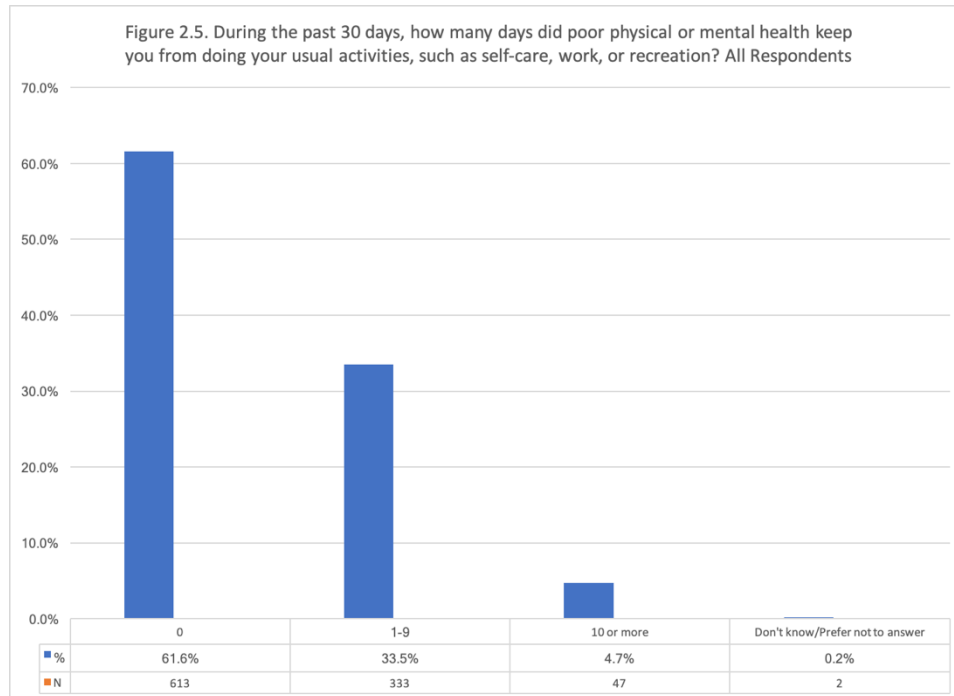


The survey also analyzes the relationship between pain and respondents' activities by posing the following question: "During the past 30 days, how many days did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?" 67.9% of them answered this question with the choice of "0 times." 26.0% of them used "1-9 times" and 5.5% of them marked the choice of "10+ times." Considering these results, pain does not seem to be an issue for the majority of the respondents while it prevents some from engaging in various activities. These results are summarized in **Figure 2.4**.

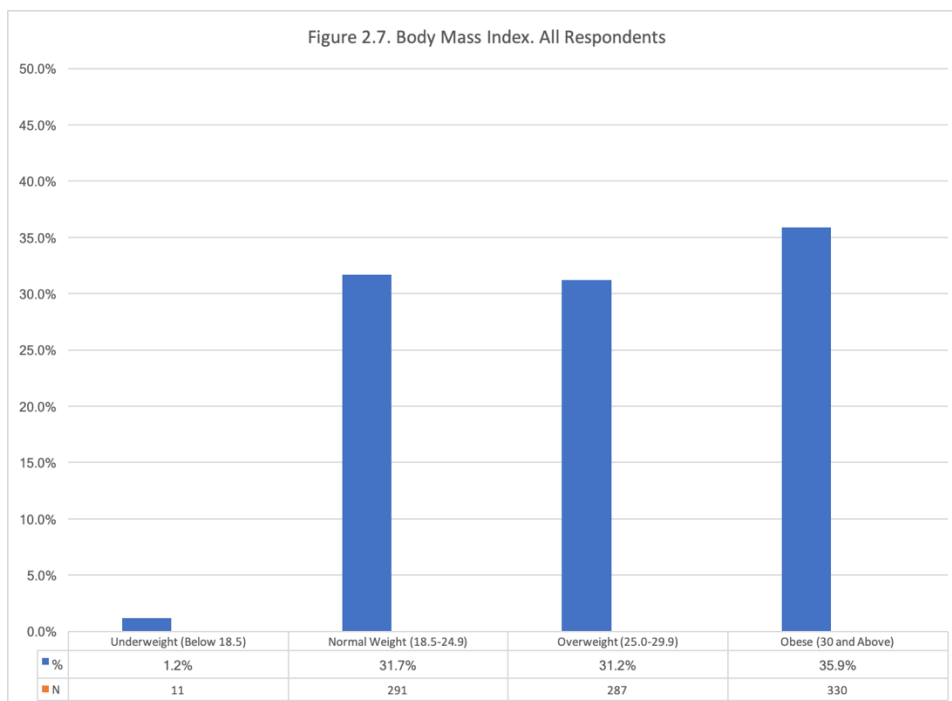


Related to the question above, the survey asked the following question: "During the past 30 days, how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?" As **Figure 2.5** shows, 61.6% of the respondents answered this question with the choice of "0 times." 33.5% of them marked the choice of "1-9 times" and 4.7% chose "10+ times." The majority of the respondents have not experienced any trouble in engaging in usual activities while close to 40% of them have experienced more or less difficulty in this matter.

To get an overall assessment of respondents' health the survey asked the following question: "During the past 30 days, how many days have you felt very healthy and full of energy?" The data reported in **Figure 2.6** reveal that 67.5% of the respondents answered this question with the choice of "10+ times." 24.4% of them marked "1-9 times." 6.9% used the choice the "0 times." Given these results, the majority of the respondents in Buffalo County tend to feel healthy and energetic although a small percentage of them never feel so.



Finally, the survey taps into the BMI among respondents. Using the guidelines established by the Centers for Disease Control and Prevention, we grouped respondents' BMI into four categories: Underweight (Below 18.5), Normal Weight (18.5-24.9), Overweight (25.0-29.9) and Obese (30 and Above). The distribution among the respondents is presented in **Figure 2.7**. Since the BMI higher than 25 is considered "overweight," a total of 67.1% of the respondents can be considered as "overweight." Considering that the majority of the respondents fall within the category of "overweight," this problem continues to require Buffalo County Community Partners' attention.



The second part of this chapter examines the issue of physical health in terms of a series of demographic variables. First, it is important to analyze how age affects respondents' physical health. For this purpose, the data reported in **Figure 2.8** show how respondents with different ages answer the following question: "During the past 30 days, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" For this question, respondents in all of the age groups, except the group of 65 and older, indicate a high degree of participations in these activities (76.1%-85.2%). Yet, the participation levels for the age group is 65 and older tend to be particularly low (67.5%). This result shows that a lower percentage of respondents who are 65 years and older tend to engage in various activities, thus indicating a negative relationship between age and one's activity level.

Figure 2.8. During the past 30 days, other than your regular job, did you participate in any physical activities or exercises, such as running, calisthenics, golf, gardening, or walking for exercise? by Age

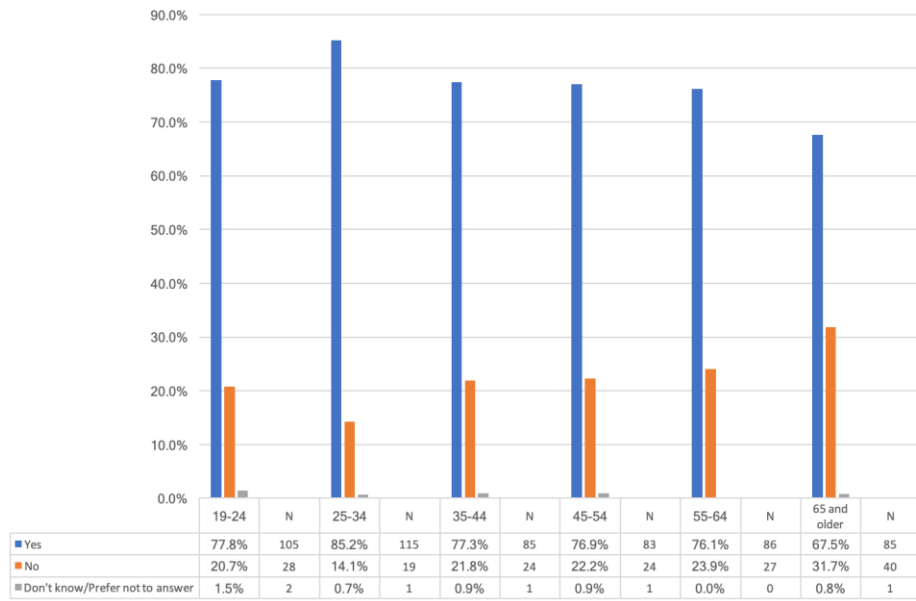
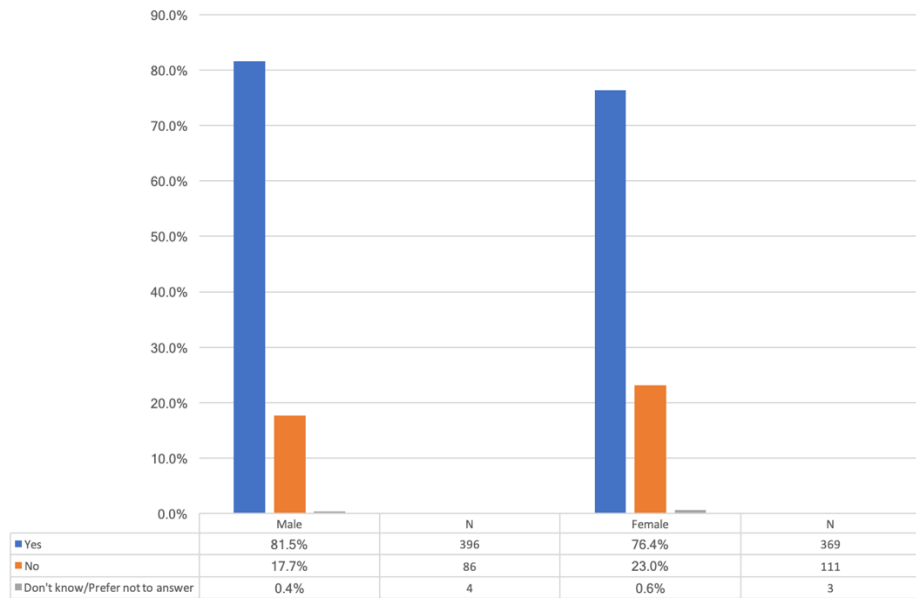
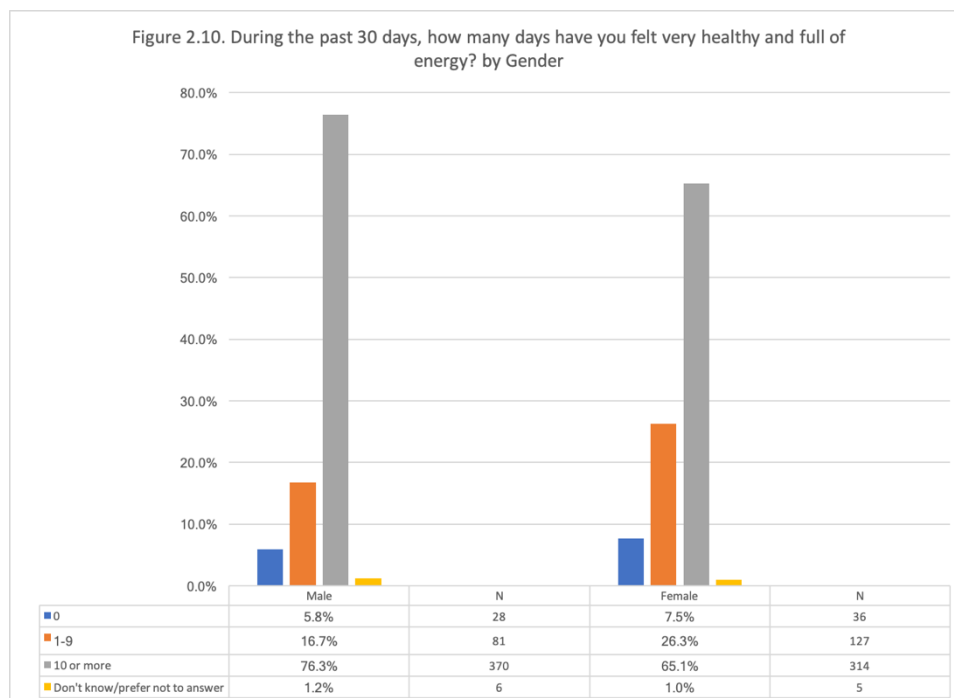


Figure 2.9. During the past 30 days, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening or walking for exercise? by Gender



The survey also shows that gender is closely related to the issue of general health among respondents. For instance, the results reported in **Figure 2.9** indicate that gender has something to do with the activity levels among respondents. In order to capture the activity levels, the survey asked the following question; “During the past 30 days, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?” 76.4% of female respondents answered this question with the choice of “yes,” while 81.5% of males said “Yes.” This result indicates that male respondents tend to be more active in various activities.

While males tend to be more active, evidence indicates that they also tend to feel more energetic in their daily lives (see **Figure 2.10**). The survey asked the following question: “During the past 30 days, how many days have you felt very healthy and full of energy?” While 65.1% of females marked the choice of “10+ times,” 76.3% of the male respondents used the choice of “10+ times.” As one can see in these results, the relationship between gender and general health is fairly straightforward.



The relationship between race and general health is also important. The survey asked the following question: “During the past 30 days, how many days have you felt very healthy and full of energy?” The data summarized in **Figure 2.11** reveal a difference: 50.8% of the non-white respondents picked the choice of “10+ times,” while 67.5% of whites marked the choice of “10+ times.” These results indicate that white respondents tend to feel more energetic in their daily lives than non-white respondents. Race can be an important factor that determines the condition of general health. Accordingly, it is important to identify factors associate with race that critically influence one’s health.

Figure 2.11. During the past 30 days, how many days have you felt very healthy and full of energy? by Race

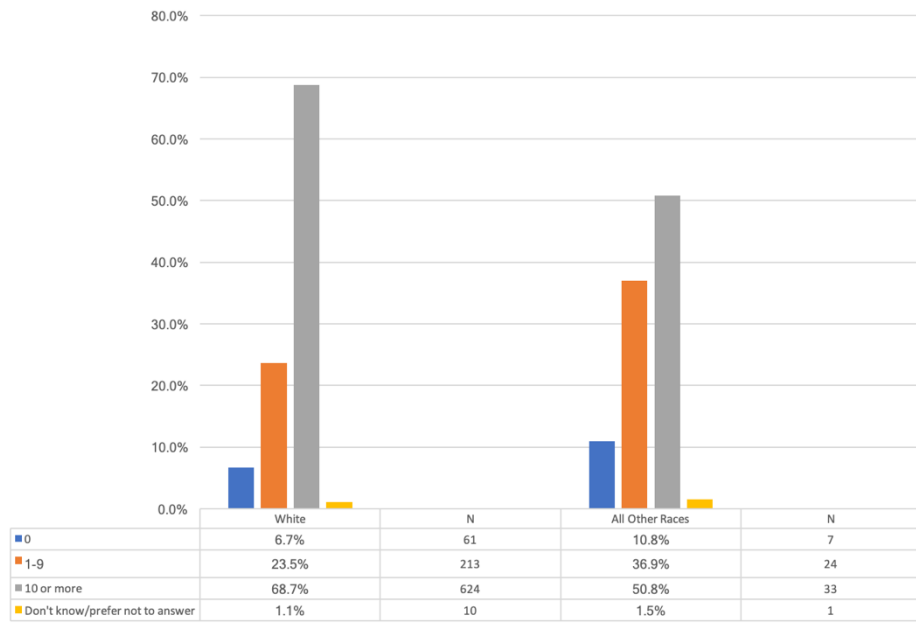
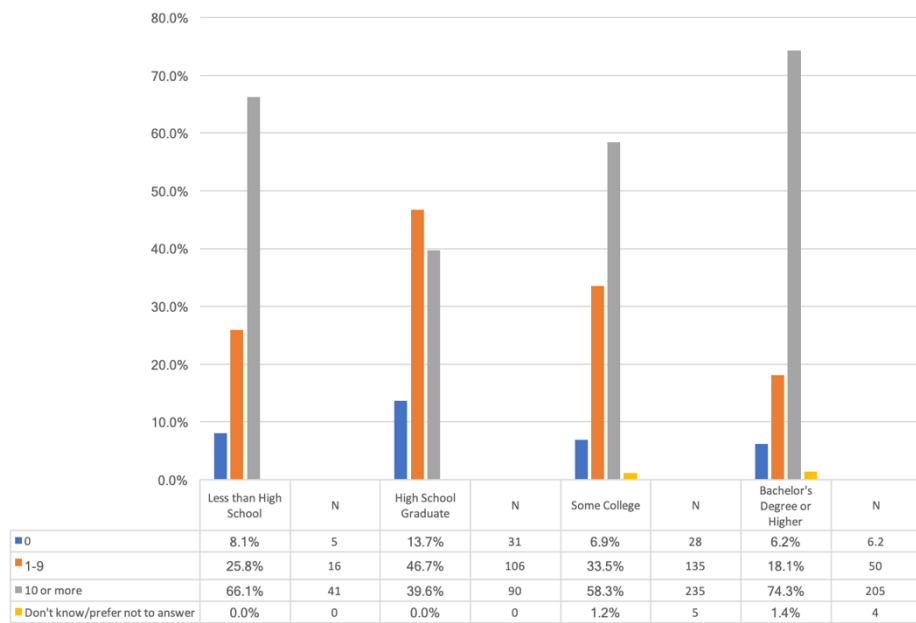
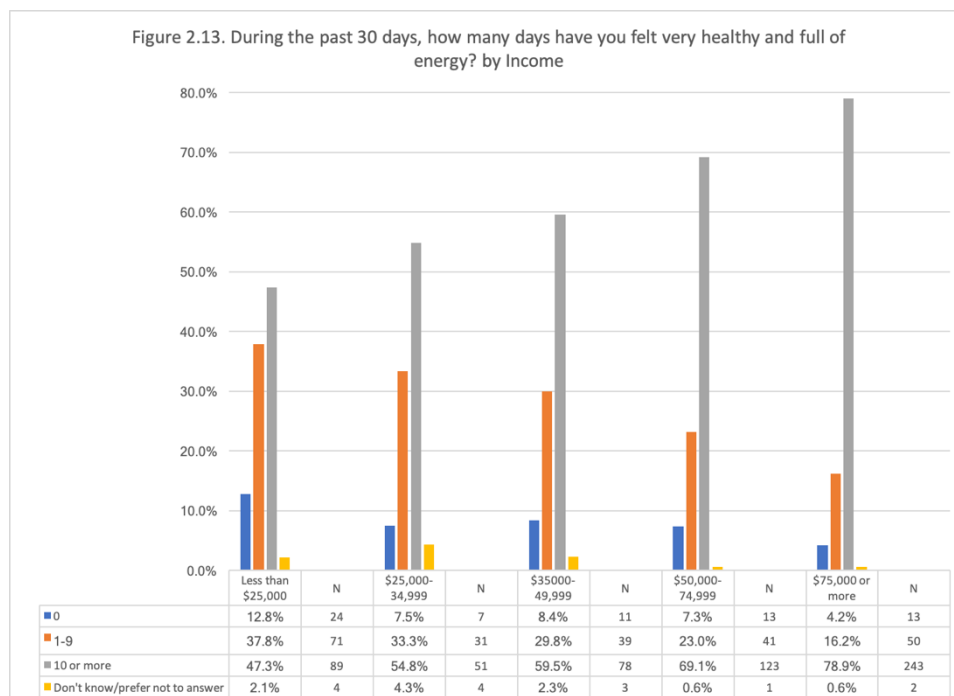


Figure 2.12. During the past 30 days, how many days have you felt very healthy and full of energy? by Education



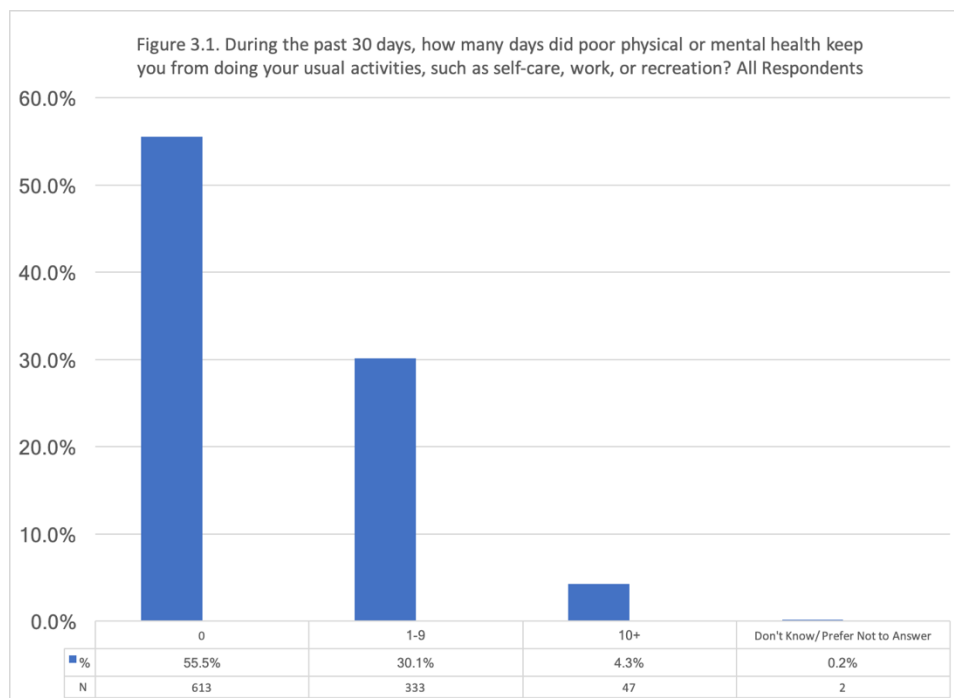
It is also necessary to examine the relationship between education and general health. For this purpose, it is useful to examine respondents' answers for this question: "During the past 30 days, how many days have you felt very healthy and full of energy?" 39.6% of them answered this question using the choice of "10+" but the percentage goes up to 74.3% for those whose educational attainments are bachelor's degree or higher. There is a huge gap between these two groups in terms of the energy levels in their lives. **Figure 2.12** details these differences. Accordingly, it is important to identify the factors that lead to different outcomes among respondents with varying degrees of educational attainments.

Finally, we note a relationship between income and respondents' general health. As in the case of other demographic variables, it is useful to analyze the answers to the following question: "During the past 30 days, how many days have you felt very healthy and full of energy?" 47.3% of the respondents whose income is less than \$25,000 answered this question with the choice of "10+." For those whose income is \$25,000 to \$34,999, 54.8% of them responded with the choice of "10+." 59.5% of them whose income is \$35,000-\$49,999 answered in the same way. For those whose income is \$50,000-\$74,999, 69.1% of them answered with the choice of "10+." For those whose income is \$75,000 or more, 78.9% of them answered with the choice of "10+." As these results, summarized in **Figure 2.13**, indicate, income is strongly related to the energy levels among respondents. It is critical to further examine the relationship between income and general health in various issues.

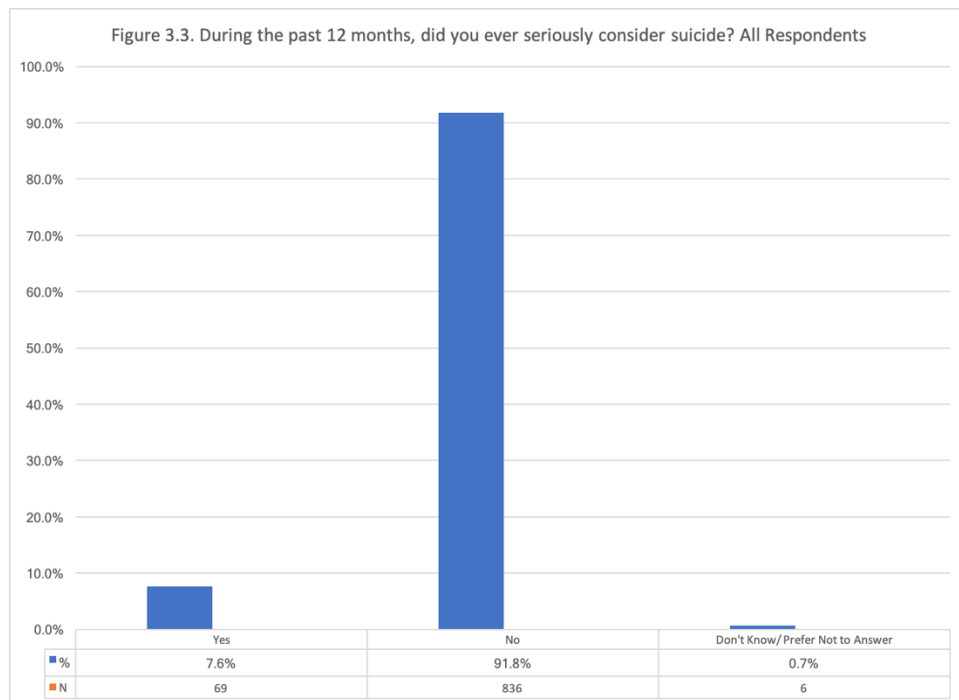
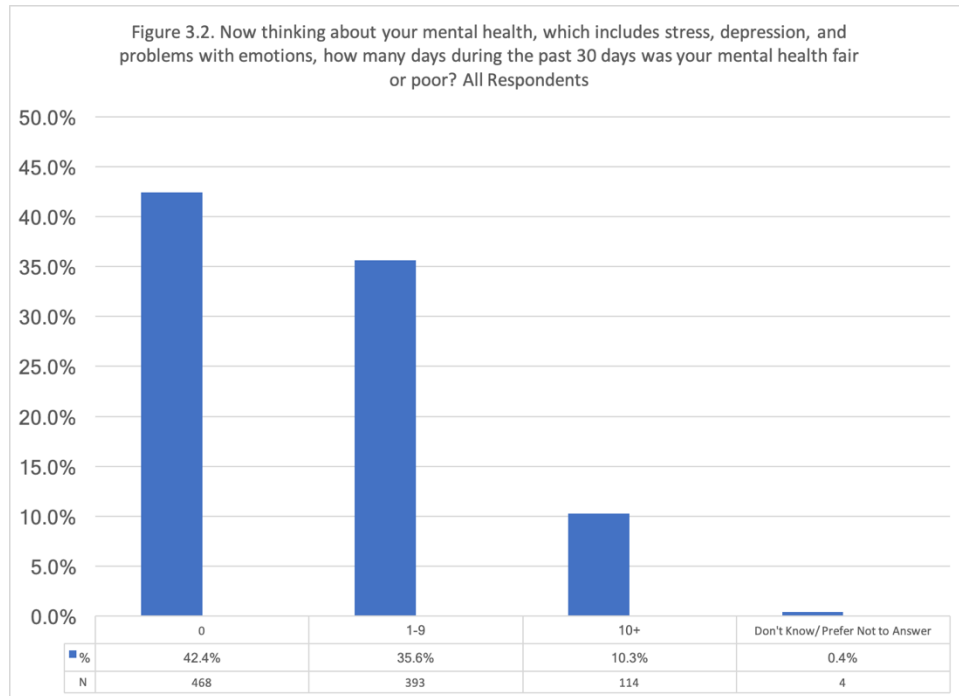


Section 3: Mental Health

This chapter focuses on the issue of mental health. The first part of this chapter analyzes county-wide tendencies on this matter. In order to capture the situation surrounding respondents' mental health, the survey employed a series of questions. For instance, the survey asked the following question: "During the past 30 days, how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?" For this question, 61.6% of them picked the choice of "0 times," but 33.5% of them said "1-9 times." Moreover, 4.7% of them answered this question using "10+ times" (see **Figure 3.1**). While the majority of the respondents lived their lives without suffering from a mental health condition, a significant portion of them experienced difficulty in conducting usual activities.

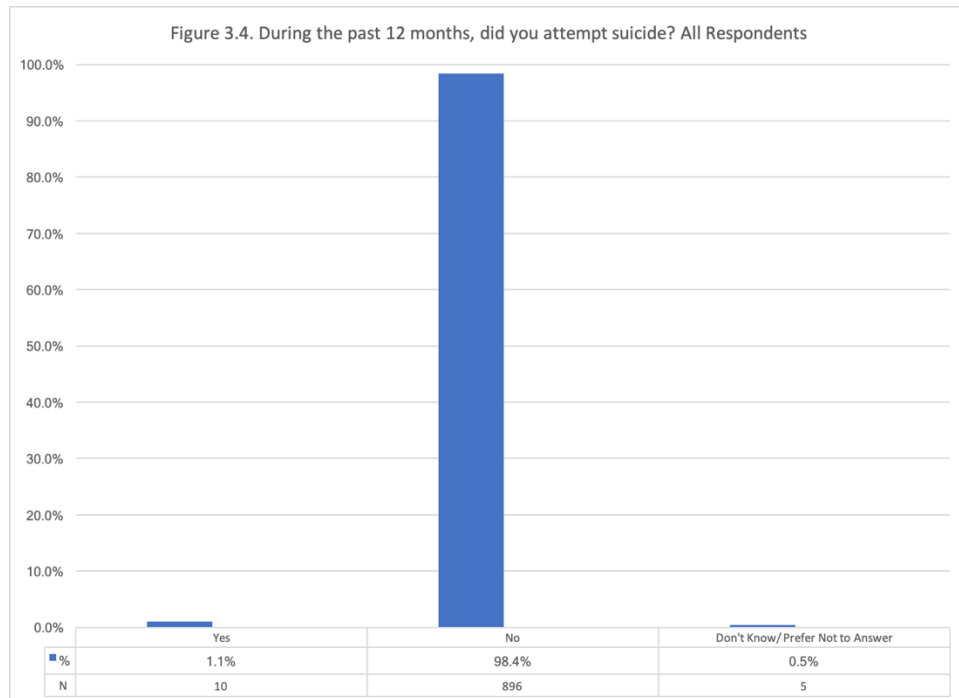


We can observe a similar tendency in another question: "Now thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health fair or poor?" As shown in **Figure 3.2**, 47.8% of them answered this question with "0 times" However, 40.1% of them said "1-9 times" and 11.6% of them picked "10+ times." Other questions in the survey captured a similar pattern regarding the conditions of mental health among respondents.



Having analyzed respondents' mental health, the survey examined the conditions surrounding the issue of suicide by asking the following question: "During the past 12 months, did you ever seriously consider suicide?" As reported in **Figure 3.3**, 7.6% of the respondents picked the choice of "yes" while 91.8% of them choosing "no."

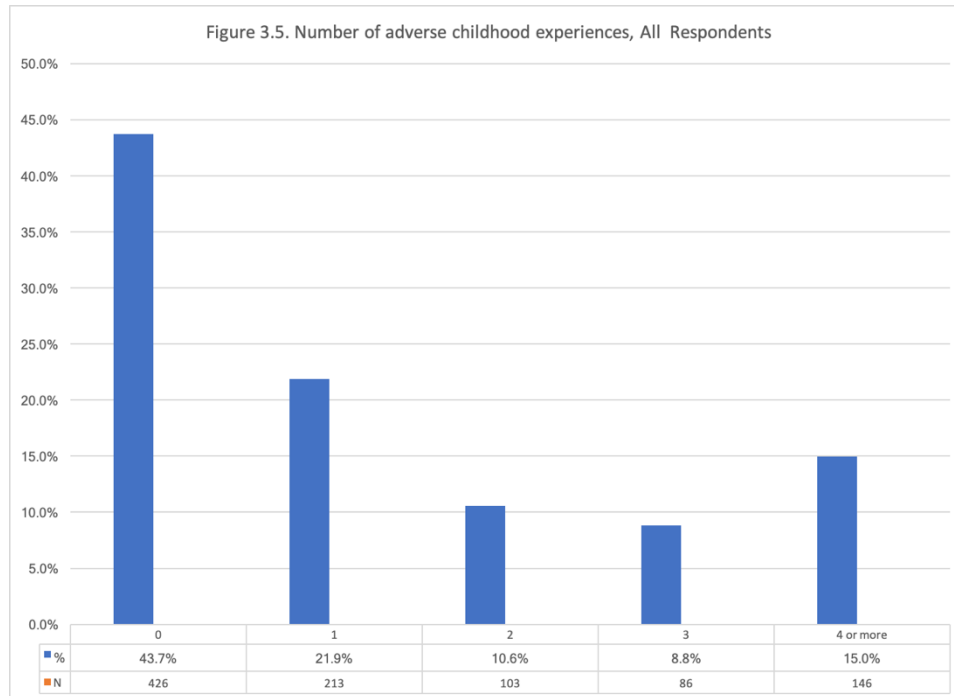
Also, the survey asked if the respondents actually attempted suicide by the following question: “During the past 12 months, did you attempt suicide?” As reported in **Figure 3.4**, 1.1% of the respondents answered this question with “yes” while 98.4% of them used the choice of “no.” Judging from the results from these two survey questions about suicide, 69 individuals reported considering suicide while 10 actually attempted suicide.



Having examined the conditions of mental health among respondents, it is important to address some of the potential causes of mental disorder. One of the approaches the survey adopted is to ask respondents about their childhood experiences that may have negatively affected their current situation. Among the different Adverse Childhood Experiences (ACEs) queried, 24% of the respondents chose the answer “You lived with someone who was depressed, mentally ill, or suicidal.” Also, 21% of them marked the answer “You lived with someone who was a problem drinker or alcoholic.” Furthermore, 19.5% of them chose the answer “You were sworn at, insulted, or put down by a parent or adult in your home.” Also, 18.8% of the respondents marked the choice “Your parents were separated or divorced.” These results show that a significant proportion of residents in Buffalo County suffered from various kinds of trauma in their childhood, which may have influenced their mental health later. The frequencies for the full list of ACEs queried are reported in **Table 3.1**.

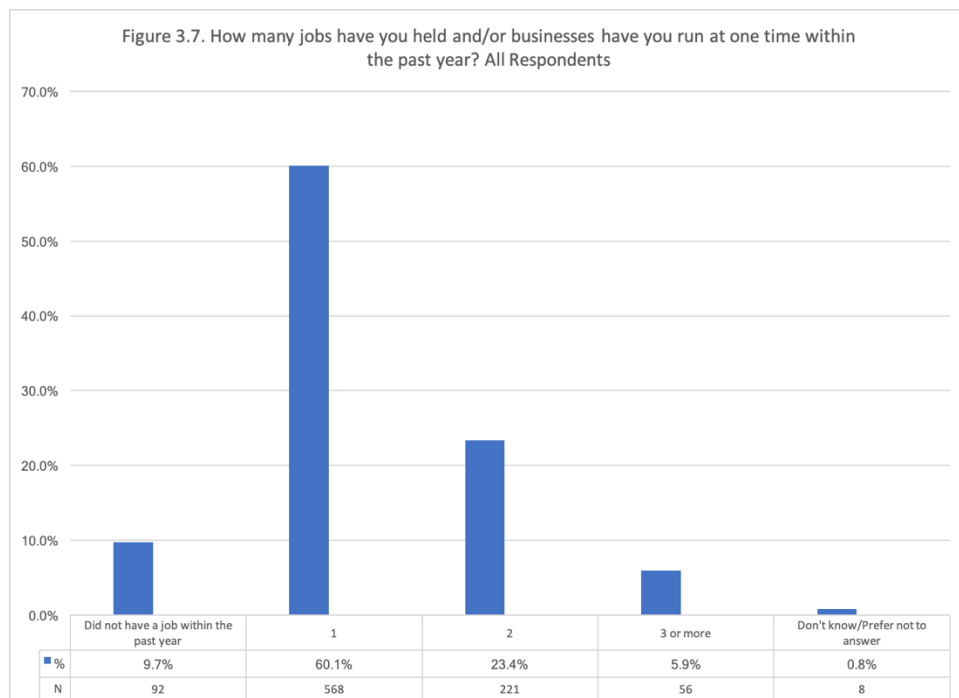
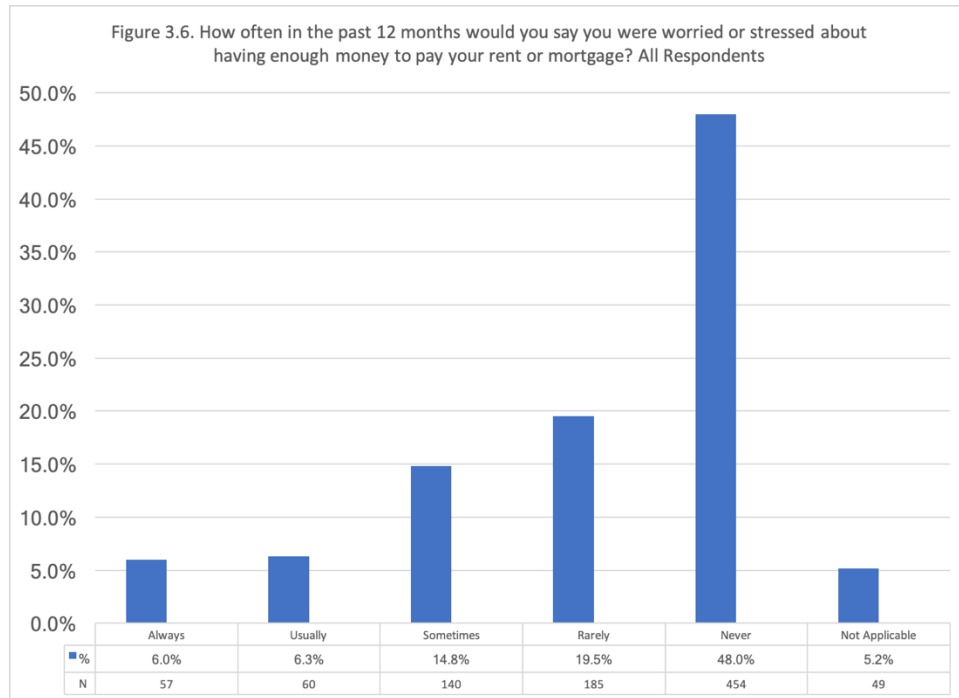
Table 3.1. Frequency of responses for adverse childhood experiences. All Respondents		
ACE	% Responding Yes	N
You lived with someone who was depressed, mentally ill, or suicidal	24%	265
You lived with someone who was a problem drinker or alcoholic	21%	232
You were sworn at, insulted or put down by a parent or adult in your home	19.5%	215
Your parents were separated or divorced	18.8%	208
You were slapped, hit, kicked, punched or physically hurt by a parent or adult in your home (excluding spanking)	10.9%	120
You were touched sexually by an adult at least 5 years older than you	10.0%	111
You lived with someone who used illegal street drugs or abused prescription medications	7.2%	80
Parents or adults in the home slapped, hit, kicked, punched or beat each other up	7.0%	77
You lived with someone who served time or was sentence to serve time a prison, jail, or other correctional facility	5.4%	60
An adult at least 5 years older than you tried to make you touch them sexually	5.3%	59
You were forced to have sex with someone at least 5 years older than you	2.3%	25

The Centers for Disease Control and Prevention report that ACEs have a graded-dose relationship with more than 40 health outcomes. This means that the more ACEs in an individual's background, the greater the risk that individual will suffer from negative affects to health, behavioral choices or life potential. **Figure 3.5** indicates that more than half of adults in the sample (56.3%) have at least one ACE, while more than 1 in 5 people (21.9%) have one ACE, about 1 in 10 (10.6%) have two ACEs, 8.8% have three ACEs, and 15% have four or more ACEs.

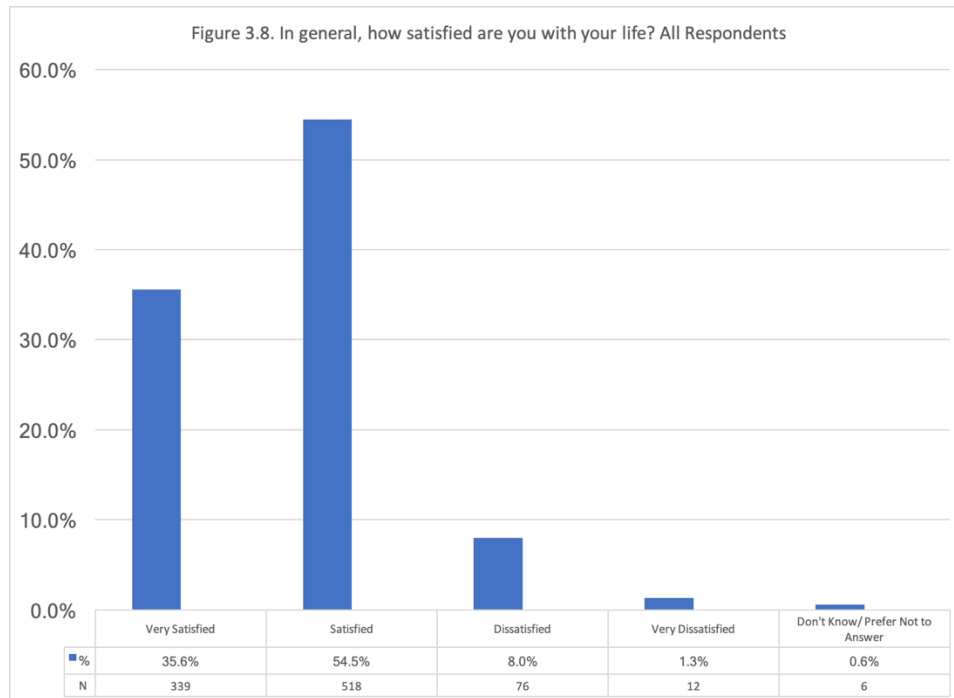


In addition to respondents' experiences in their childhood, the survey addressed their financial situations, which can contribute to mental health problems among respondents. The survey asked the following question: "How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage?" (**Figure 3.6**). For this question, 48% of the respondents chose "never." However, some of the respondents mentioned that they were "usually" (6.3%) or "always" (6%) worried about their rent/mortgage. According to these results, more than 10% of the respondents seem to be constantly concerned about their financial situations.

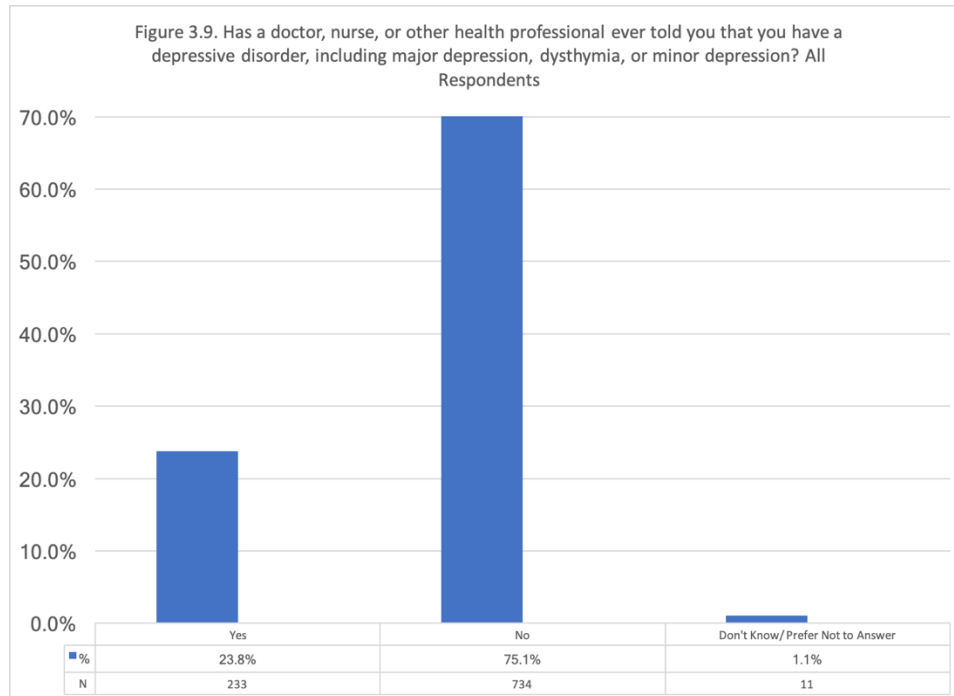
Also, the survey asked the following question: "How many jobs have you held and or businesses have you run at one time within the past year?" The results reported in **Figure 3.7** show that 60.1% of them mentioned that they have "1" job. However, some people have held multiple jobs. 23.4% of them said they have had "two jobs" and 5.9% of them suggested that they have held "three or more jobs." Considering that many of the respondents have multiple jobs, it may be the case that some of them struggle to meet the financial needs in their households, or feel a strain from being over-scheduled week in and week out.



In addition to these questions, the survey posed the following question: “In general, how satisfied are you with your life?” (**Figure 3.8**). For this question, 35.6% of the respondents said that they were “very satisfied.” Also, 54.5% of them mentioned they were “satisfied.” As these results suggest, more than 90% of the respondents expressed some degree of satisfaction with life. Recognizing that most residents in Buffalo County display high degrees of life satisfaction, we might conclude that people accept the adversities they report elsewhere in the survey, and do not let them interfere with their general outlooks.

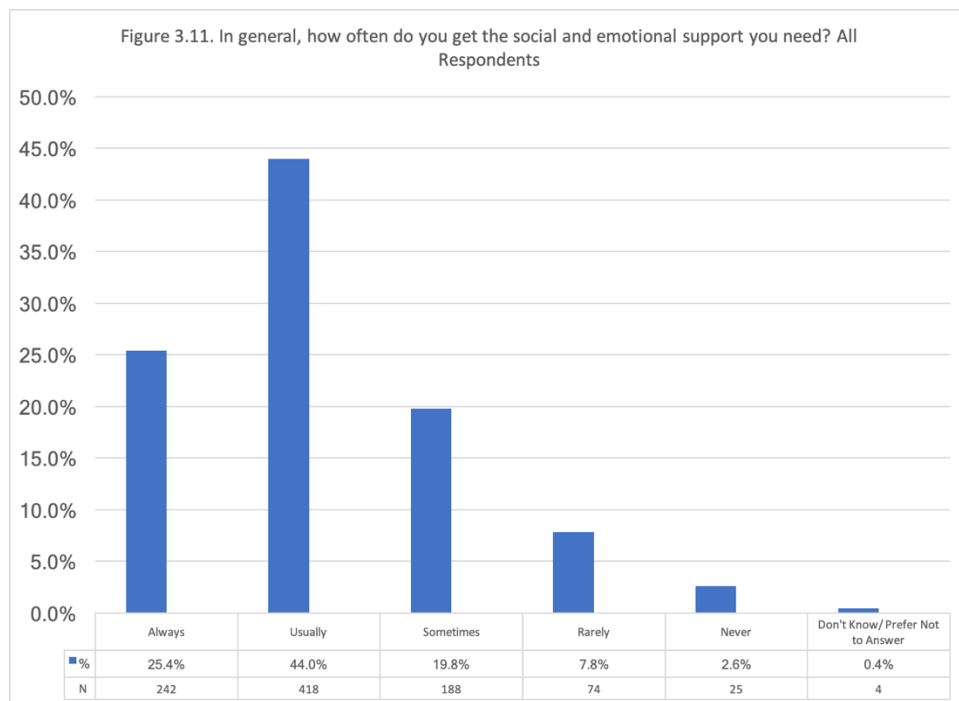
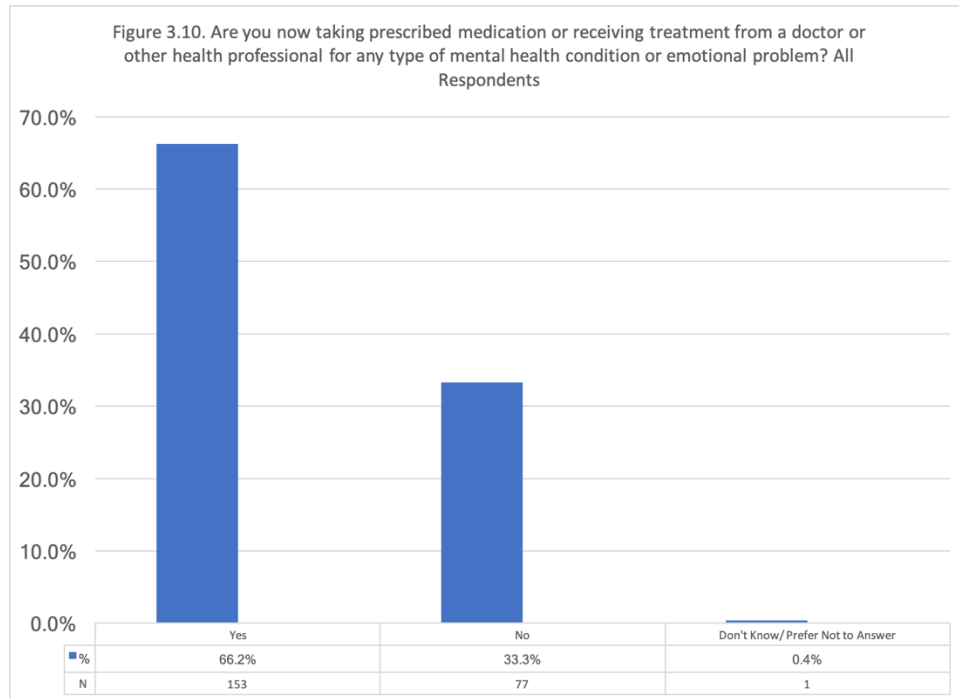


Having briefly analyzed the possible factors that cause mental disorder, the survey went on to look at the support system that residents in Buffalo County are exposed to. The survey asked if the respondents were diagnosed with any depressive disorder by the following question: “Has a doctor, nurse, or other health professional ever told you that you have a depressive disorder, including major depression, dysthymia, or minor depression?” The results are summarized in **Figure 3.9**. 23.8% of the respondents answered this question with “yes” while 75.1% of them said “no.” These results indicate a relatively high percentage of respondents who have been diagnosed to have some symptoms associated with mental health.

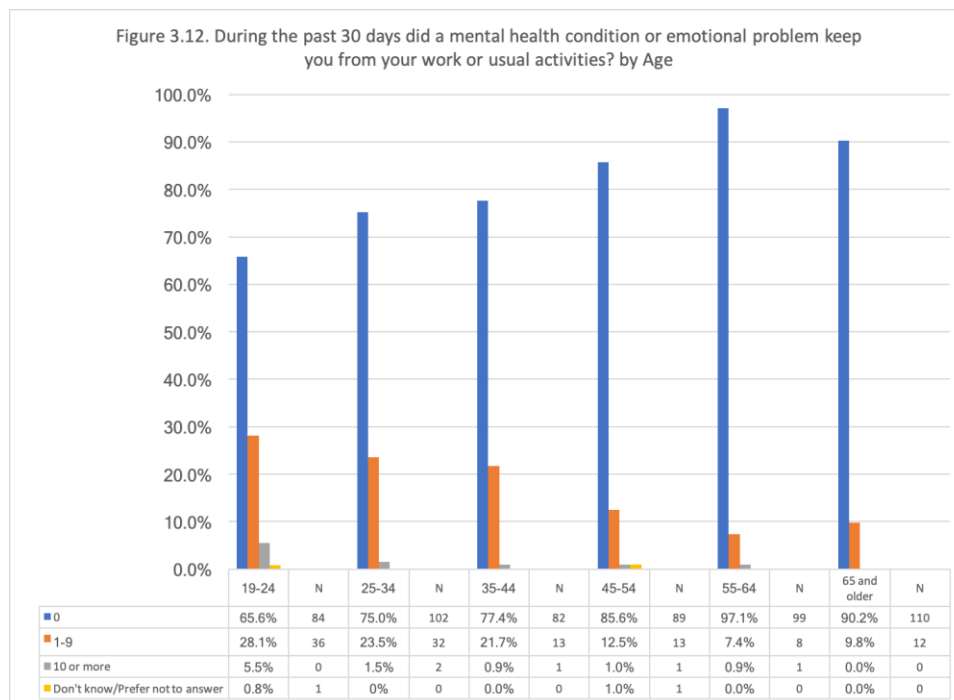


Among those who have answered this question with “yes,” the survey asked the following question: “Are you now taking prescribed medication or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?” The results reported in **Figure 3.10** indicate that about two-thirds, (66.2%) of them said they are now on medication or receiving treatment, while 33.3% of them are not. According to these results, the majority of the respondents who suffer from mental disorder tend to be on medication or receiving medical treatment.

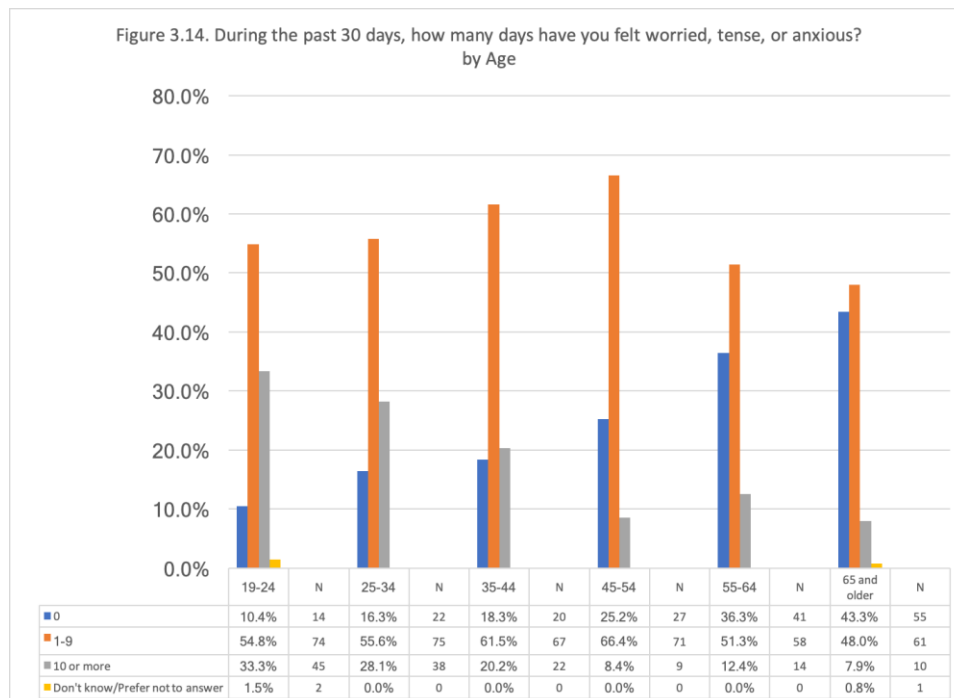
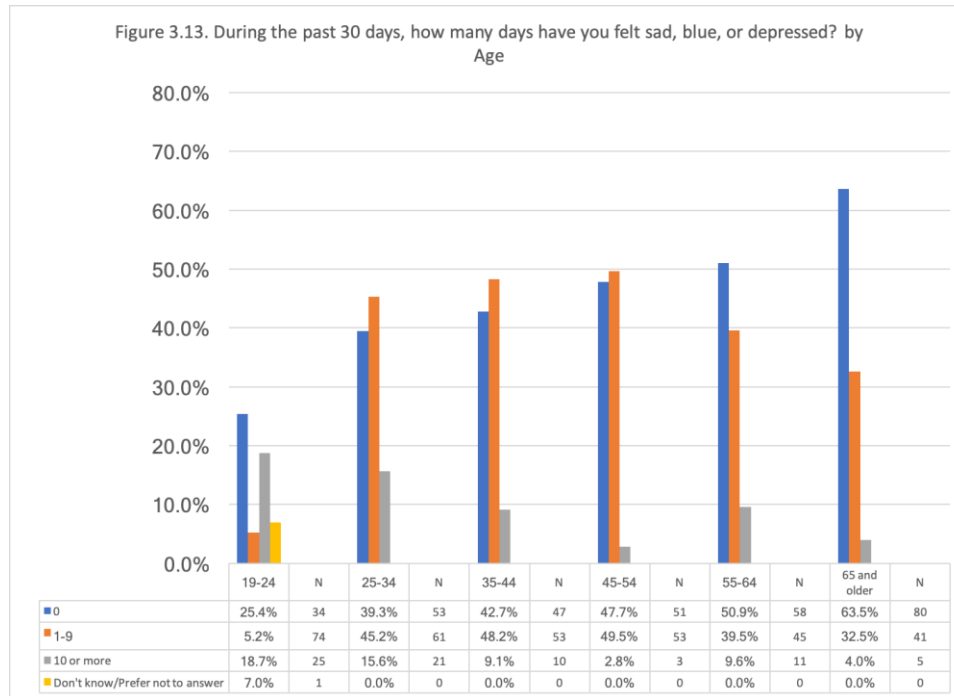
In addition to medical attention, it is essential to examine social and emotional support that respondents receive. For this purpose, the survey asked the following question: “In general, how often do you get the social and emotional support you need?” For this question, 25.4% of the respondents said that they “always” get social and emotional support they need. 44% of them answered this question with the choice of “usually,” and 19.8% adopted the choice of “sometimes” (see **Figure 3.11**). The majority of the respondents in Buffalo County get social and emotional support they need. Yet, that there are some who fail to receive enough support. It is important to identify the factors that prevent them from getting necessary assistance in the issue of mental health.



The second part of this module examines the issues of mental health in terms of a series of demographic variables. First, age seems to be closely related to the issue of mental health. The survey posed the following question: “During the past 30 days did a mental health condition or emotional problem keep you from work or usual activities?” As reported in **Figure 3.12**, 5.5% of the respondents among those whose age is 19-24 marked “10+ times.” However, the figure drops down to 1.5% for the age group of 25-34 and 0.9% for the age group of 35-44 respectively. The problem of mental disorder seems to be particularly acute among those who are young.



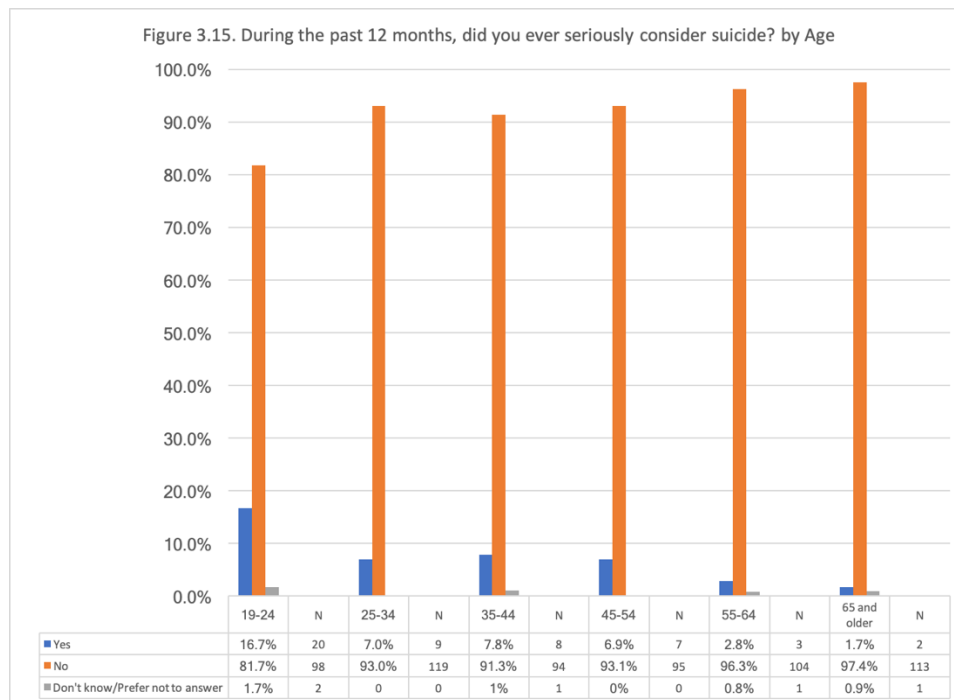
It is possible to observe a similar pattern in other questions about mental health. The survey posed the following question: “During the past 30 days, how many days have you felt sad, blue, or depressed?” For this question, 18.7% of the respondents among the age group of 19-24 picked the choice of “10+ times.” For the age group of 25-34, the percentage of those who chose “10+ times” is 15.6%. Yet, the figure tends to be lower for older cohorts: 9.1% (age: 35-44), 2.8% (age: 45-54), 9.6% (age: 55-64) and 4.0% (age 65+). These results suggest that younger respondents are more likely to suffer from mental disorders. These data are summarized in **Figure 3.13**.



Furthermore, the survey asked another question regarding mental health: “During the past 30 days, how many days have you felt worried, tense, or anxious?” As **Figure 3.14** shows, it is overwhelmingly younger respondents who have anxiety issues. For the age group of 19-24, 33.3% of them expressed that they have suffered from these symptoms “10+ times” during the

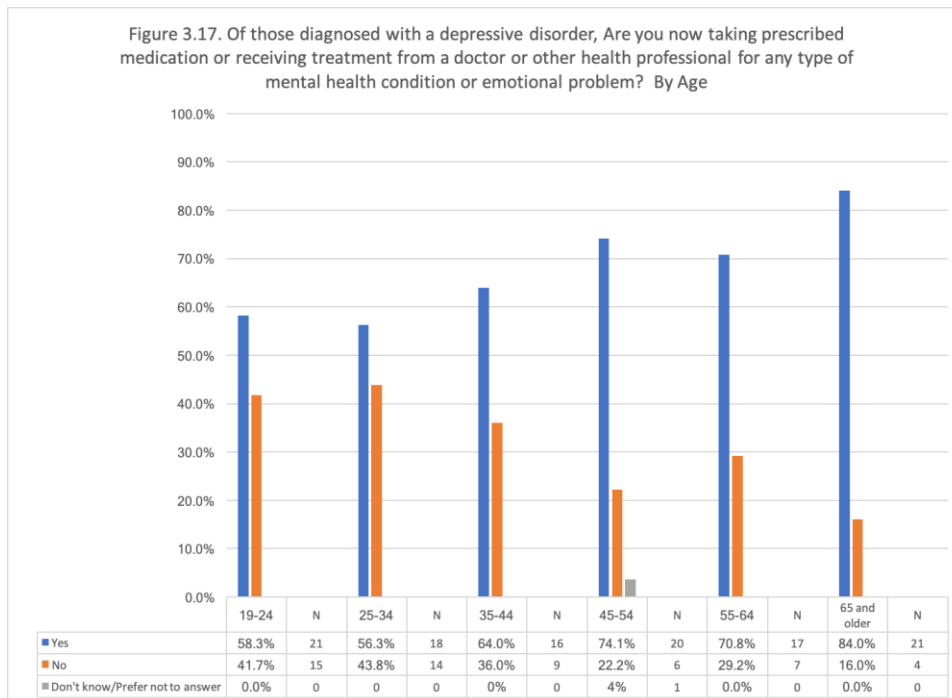
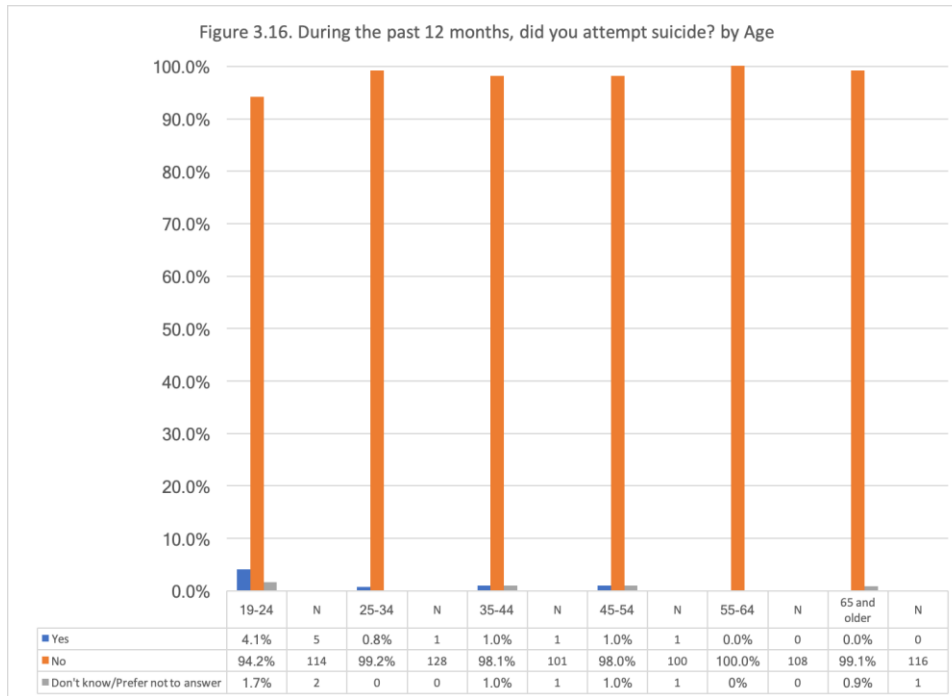
past 30 days. For the age group 25-34, 28.1% of them indicated that they had these issues “10+ times.” As the age group gets older, the percentage of the respondents who suffer from these problems steadily decreases. Accordingly, one can suggest that age and the incidence of anxiety disorders seem to be negatively related; the younger the respondents are, the more likely they are to experience emotions associated with anxiety.

In addressing the issue of mental health, it is critical to closely examine the problem of suicide. In this matter, age seems to be an important factor. The survey asked the following question: “During the past 12 months, did you ever seriously consider suicide?” For this question, 16.7% of the respondents whose age is 19-24 said “yes.” However, the percentage of the respondents who considered suicide is consistently low for other age groups. These results clearly show that younger respondents are more inclined to consider suicide (see **Figure 3.15**).



Furthermore, it is important to examine if they have actually attempted suicide before. As reported in **Figure 3.16**, the survey asked the following question: “During the past 12 months, did you attempt suicide?” For the age group of 19-24, 4.1% of them answered this question with “yes.” The comparable figure for other age groups is consistently lower (0.8%-1.0%). Again, the results indicate that it is younger respondents who tend to attempt suicide.

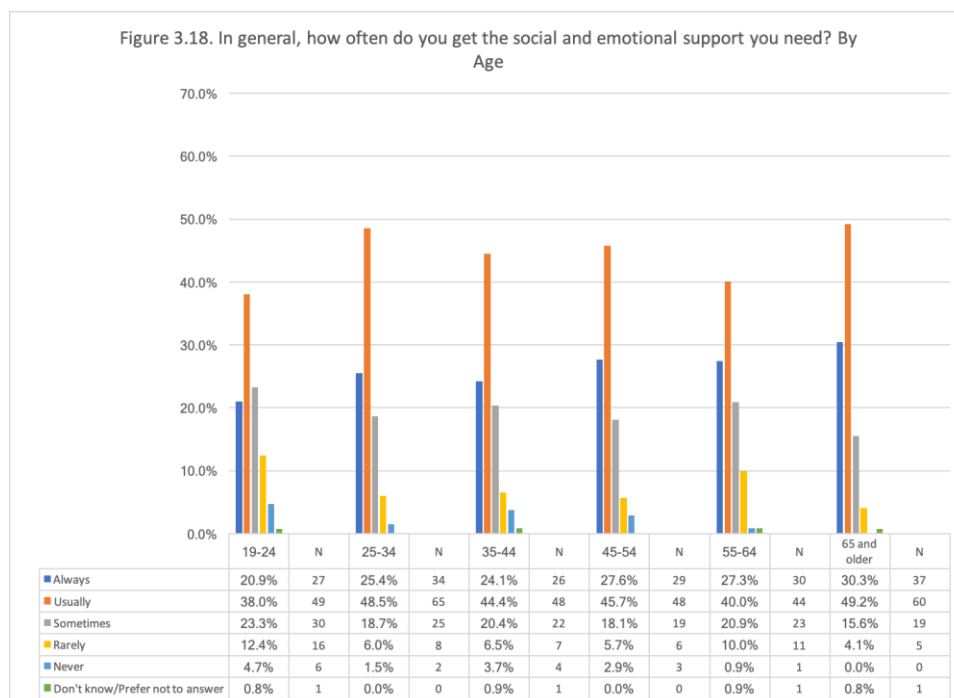
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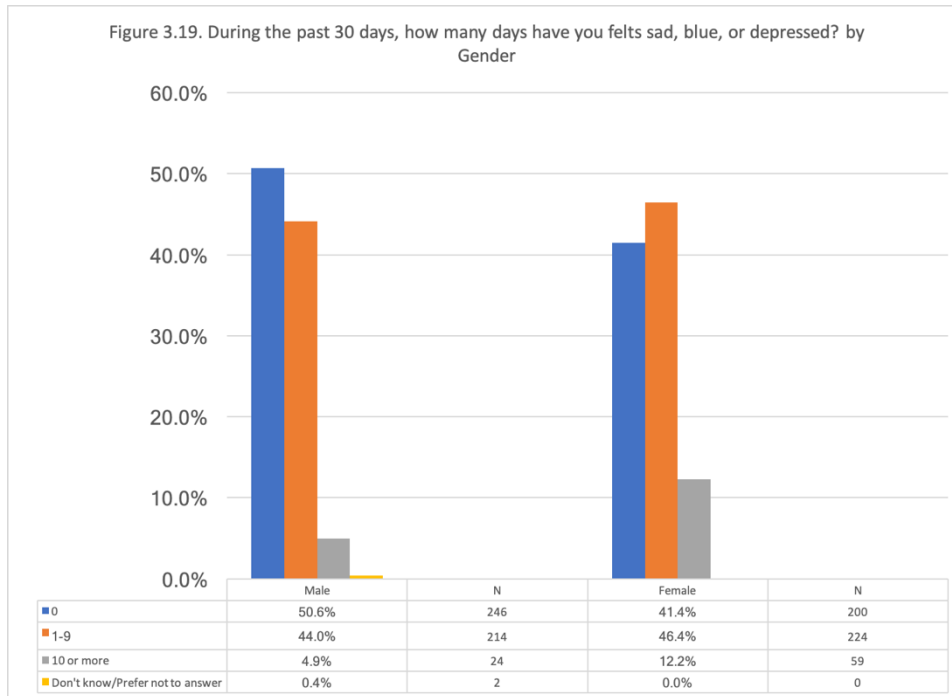
Recognizing that younger cohorts tend to suffer from depressive disorders, it is important to examine the support they are receiving. The survey asked the following question: “Are you now taking prescribed medication or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?” For this question, 58.3% of the respondents whose age is 19-24 answered with “yes.” The percentage of respondents who are

on medication or receiving treatment steadily increases as they get older. For instance, 84.0% of the respondents answered with “yes” for those who are 65 and older. These results, summarized in **Figure 3.17**, suggest a paradoxical picture: while it is younger people who are especially vulnerable to this problem, they are less likely to be on medication or receive treatment.

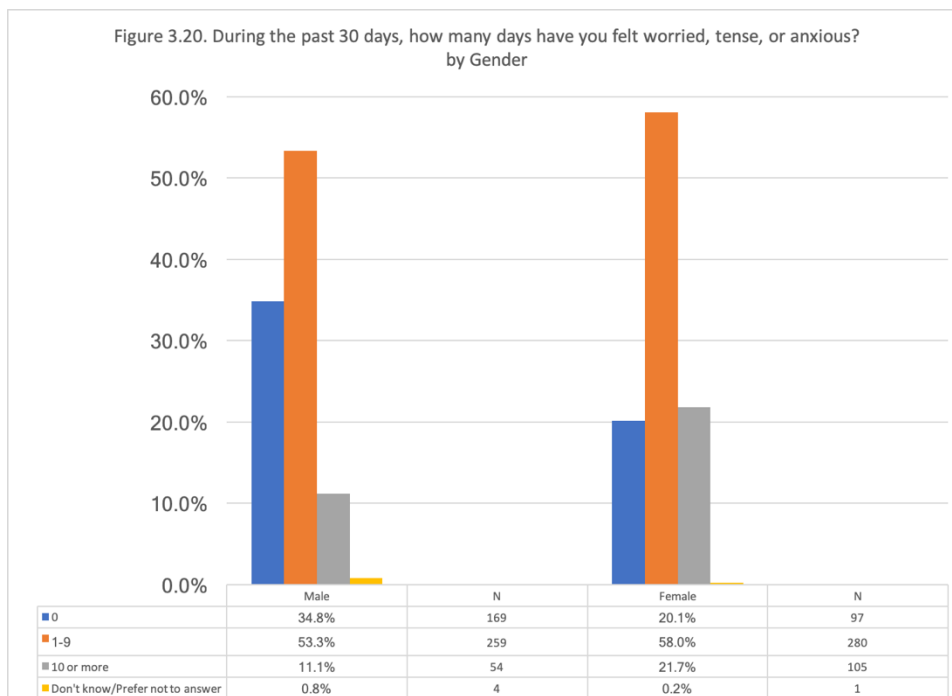
The survey also asked the following question: “In general, how often do you get the social and emotional support you need?” Answers to this question show a similar age-related tendency. 20.9% of the respondents whose age is 19-24 said “always.” Respondents who belong to older age groups are more likely to say they get the social and emotional support they need. For instance, for those who are 65 and older, 30.3% of the respondents answered this question with the choice of “always.” While younger people tend to consider suicide, they are less like to have a support system that meets their social and emotional needs (see **Figure 3.18**).



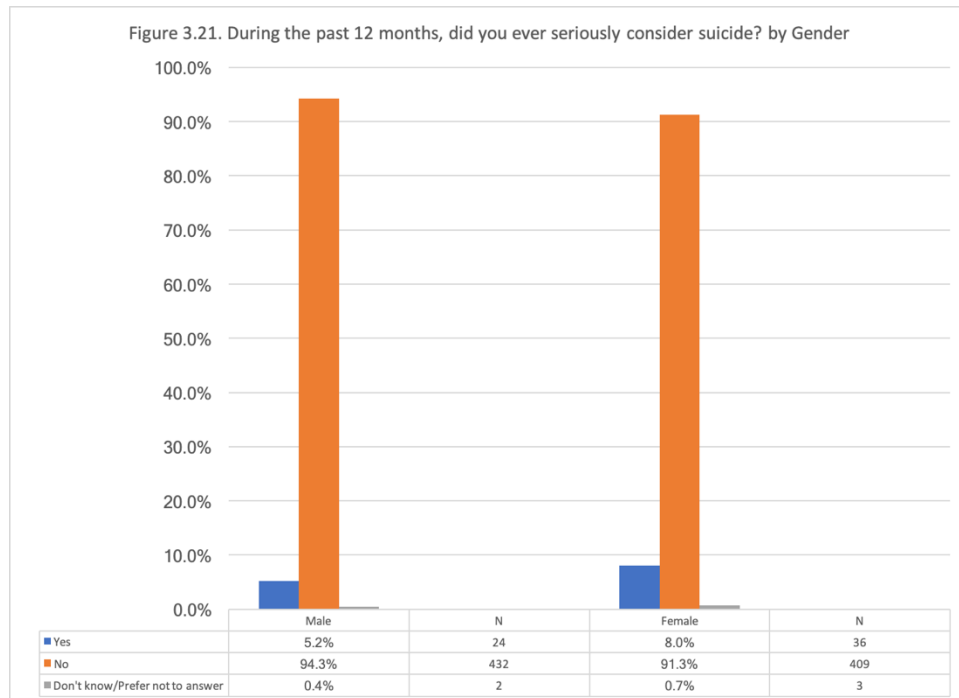
In addition to age, it is important to examine the relationship between gender and mental health. The survey asked the following question: “During the past 30 days, how many days have you felt sad, blue, or depressed?” For this question, 4.9% of the male respondents picked the choice of “10+ days.” However, 12.2% of female respondents marked the same choice in answering this question. As these results indicate, female respondents are more likely to express that they have experienced sadness or depression (see **Figure 3.19**).



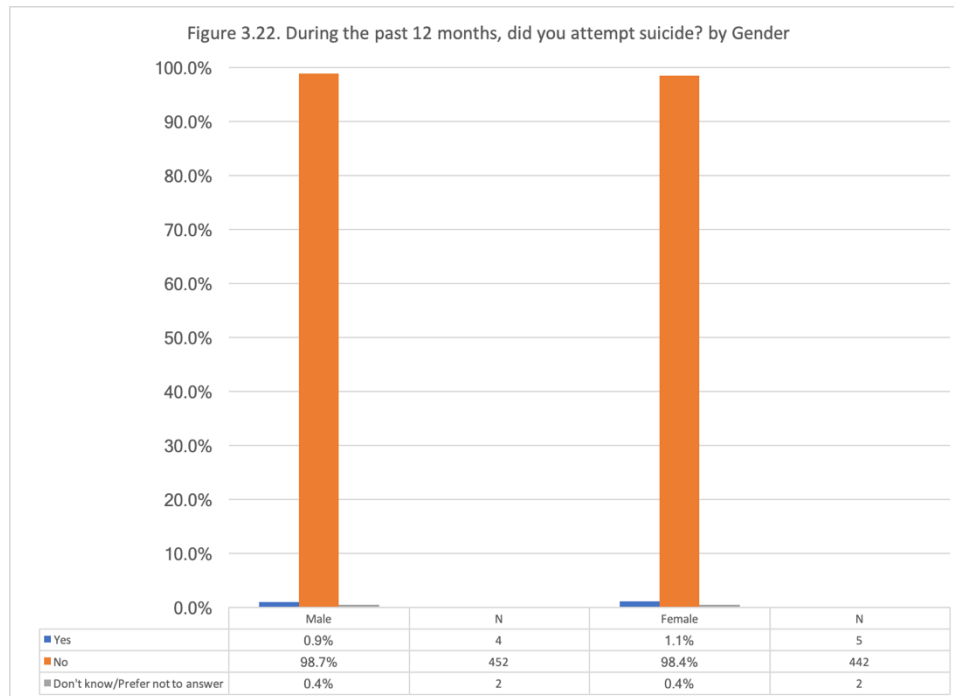
In the same manner, the survey asked the following question: “During the past 30 days, how many days have you felt worried, tense, or anxious?” The results reported in **Figure 3.20** reveal that 11.1% of male respondents answered this question with the choice of “10+ times.” The percentage of female respondents who answered with the same choice is 21.7%, which is significantly higher than that among male respondents. As in the case of the previous question, the results verify that women are more likely to experience symptoms associated with mental illness.



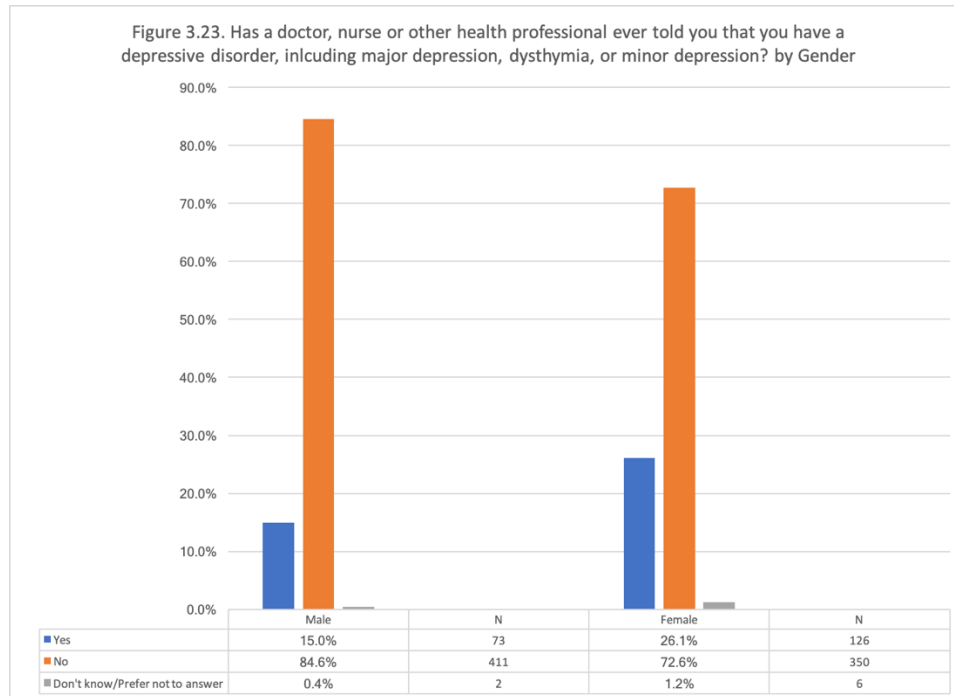
The survey also asked the following question: “During the past 12 months, did you ever seriously consider suicide?” 5.2% of the male respondents answered this question with the choice of “yes,” while 8.0% of female respondents said “yes” (see **Figure 3.21**). As in other questions, it is female respondents who are more likely to consider suicide.



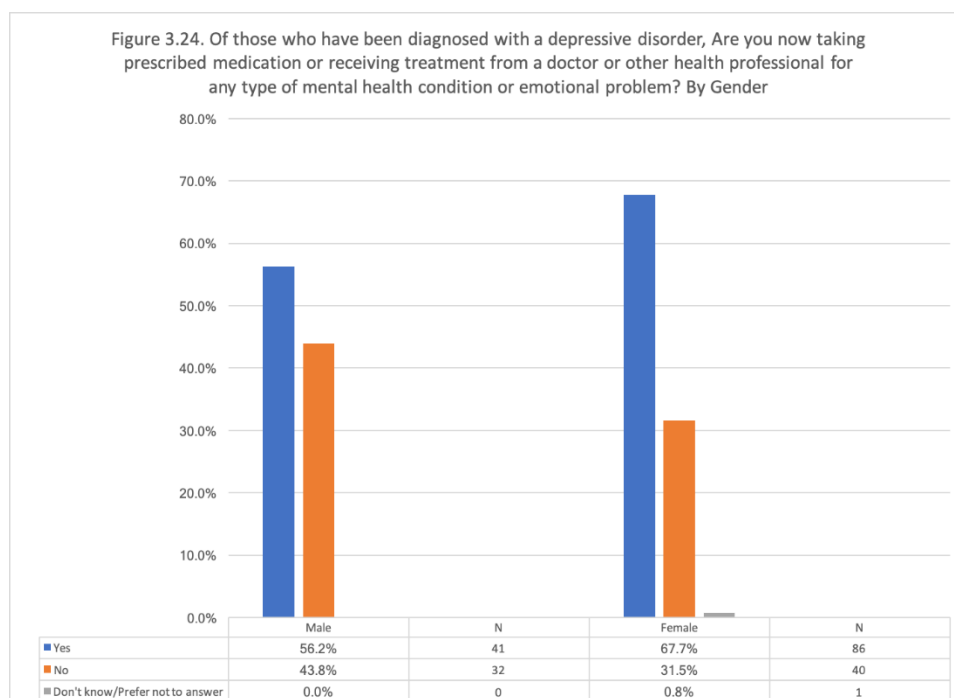
Regarding the actual attempt to commit suicide, the difference tends to be less clear. As shown in **Figure 3.22**, the survey posed the following question: “During the past 12 months, did you attempt suicide?” 0.9% of the respondents answered this question with the choice of “yes,” while 1.1% of the female respondents mentioned that they attempted suicide. These results did not indicate drastically different outcomes between genders on this matter.



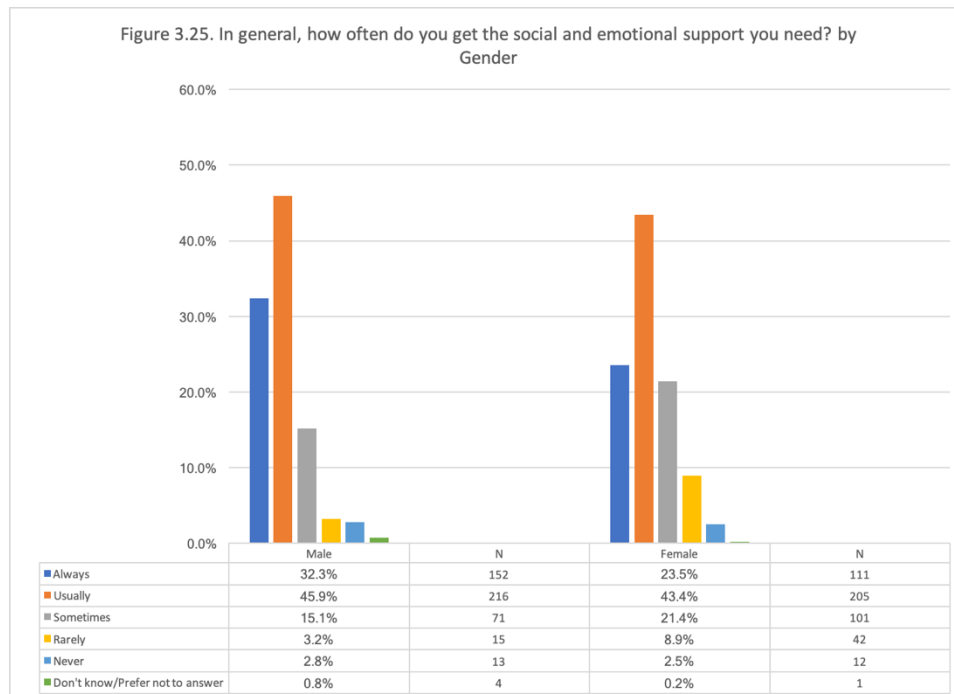
Furthermore, it is important to examine whether there is a difference between male and female respondents regarding the diagnosis of a depressive disorder. For this purpose, the survey asked the following question: “Has a doctor, nurse, or other health professional ever told you that you have a depressive order, including major depression, dysthymia, or minor depression?” For this question, 15.0% of males and 26.1% of females said “yes.” It is female respondents who are diagnosed with a depressive disorder. See **Figure 3.23** for a summary of these data.



The survey also asked the following question: “Are you now taking prescribed medication or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?” 56.2% of the male respondents answered this question with “yes” while 67.7% of female respondents said “yes.” These results suggest that females are more likely to be on medication or receive treatment.

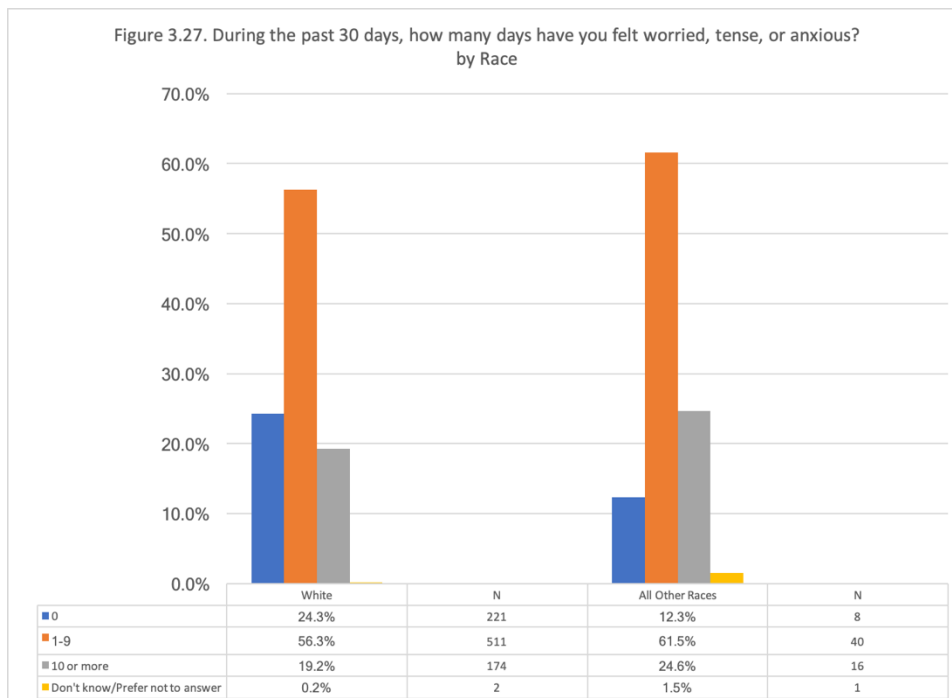
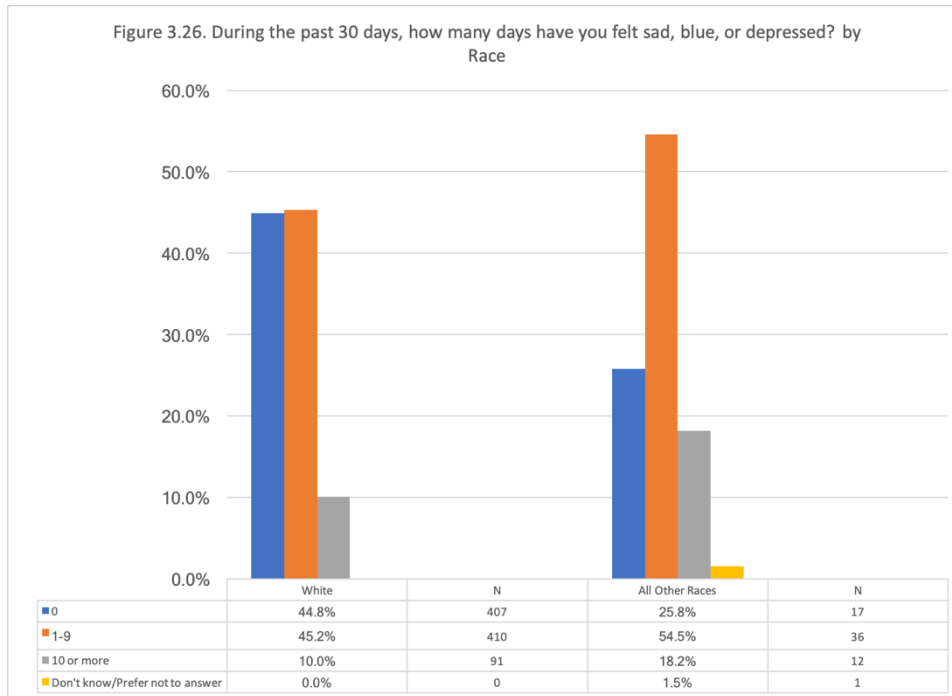


Finally, in regards to respondents' gender, the survey asked the following question: "In general, how often do you get the social and emotional support you need?" 32.3% of the male respondents answered this question with the choice of "always." However, only 23.5% of the female respondents picked "always." **Figure 3.25** summarizes these results.



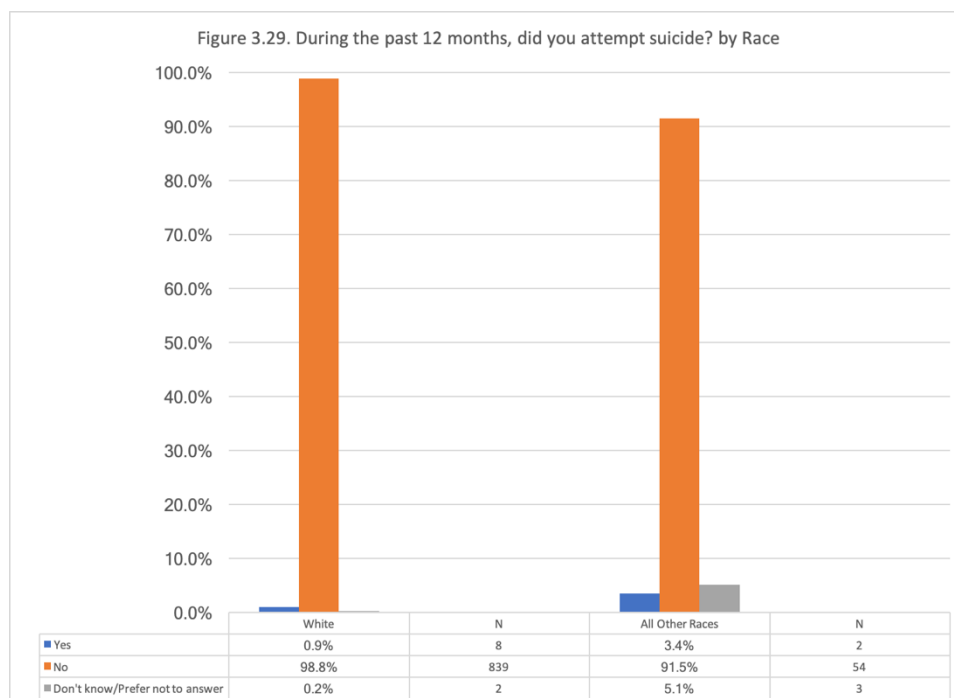
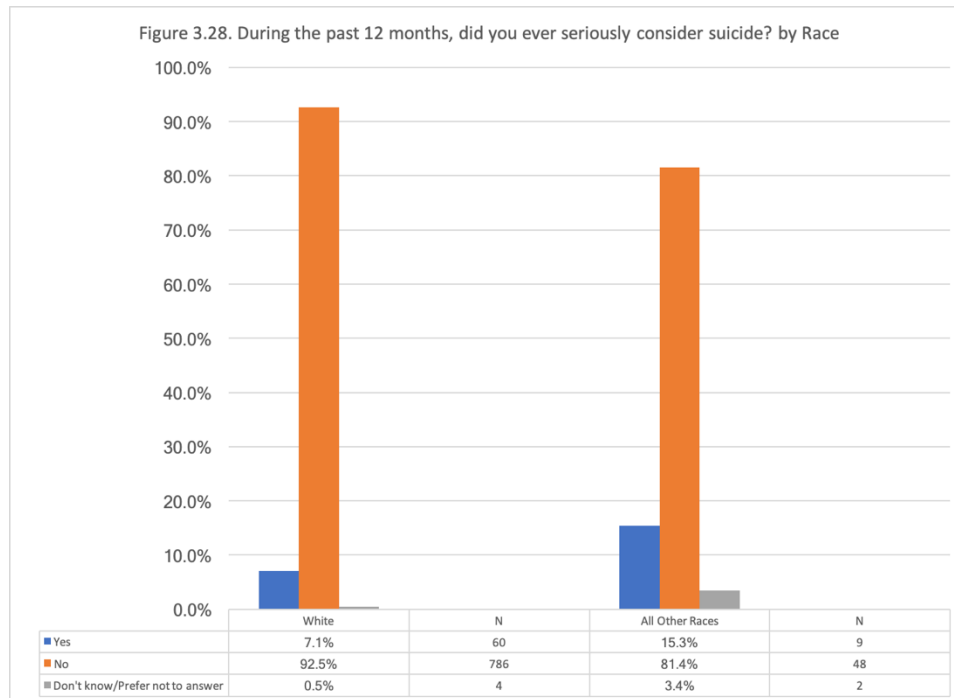
In addition to age and gender, it is important to examine the relationship between race and mental health. In order to capture the conditions surrounding mental health among respondents, the survey asked the following question: "During the past 30 days, how many days have you felt sad, blue, or depressed?" As reported in **Figure 3.26**, 10% of the white respondents answered this question with the choice of "10+ times" while 18.2% of respondents representing other races picked the same choice, showing that nonwhite respondents are more likely to suffer from a mental health disorder.

In the same manner, the survey asked the following question: "During the past 30 days, how many days have you felt worried, tense, or anxious?" While 19.2% of the white respondents said "10+ times," 24.6% of nonwhite respondents answered this question with the choice of "10+ times." These data are summarized in **Figure 3.27**. Again, nonwhite respondents are more likely to suffer from symptoms associated with mental health disorder. This is a pattern that can be observed across questions.



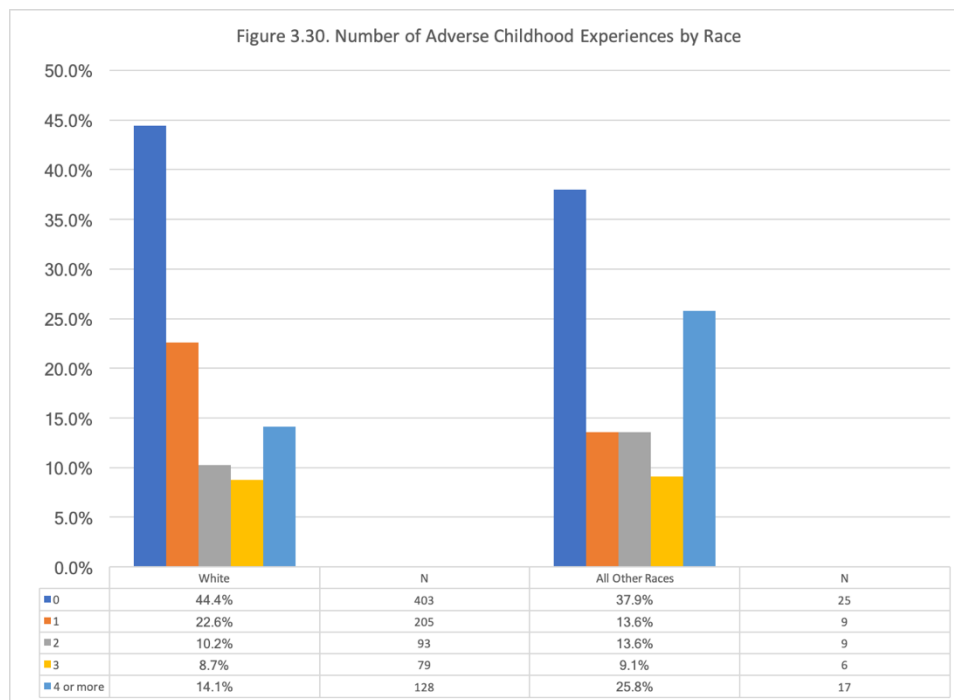
In examining another dimension of mental health, it is imperative to examine the relationship between race and suicide. For this purpose, the survey asked the following question: “During the past 12 months, did you ever seriously consider suicide?” For this question, 7.1% of the white respondents marked the choice of “yes,” while 15.3% of the nonwhite respondents said

“yes.” Consistent with the situation surrounding mental health, these results indicate that nonwhite respondents are more likely to consider suicide. See **Figure 3.28**.



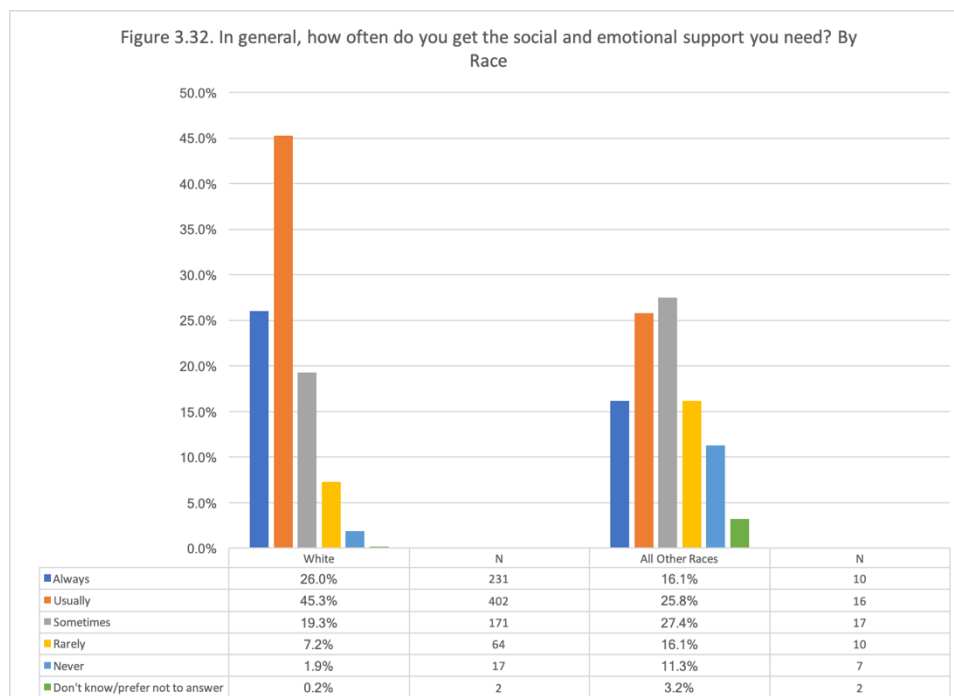
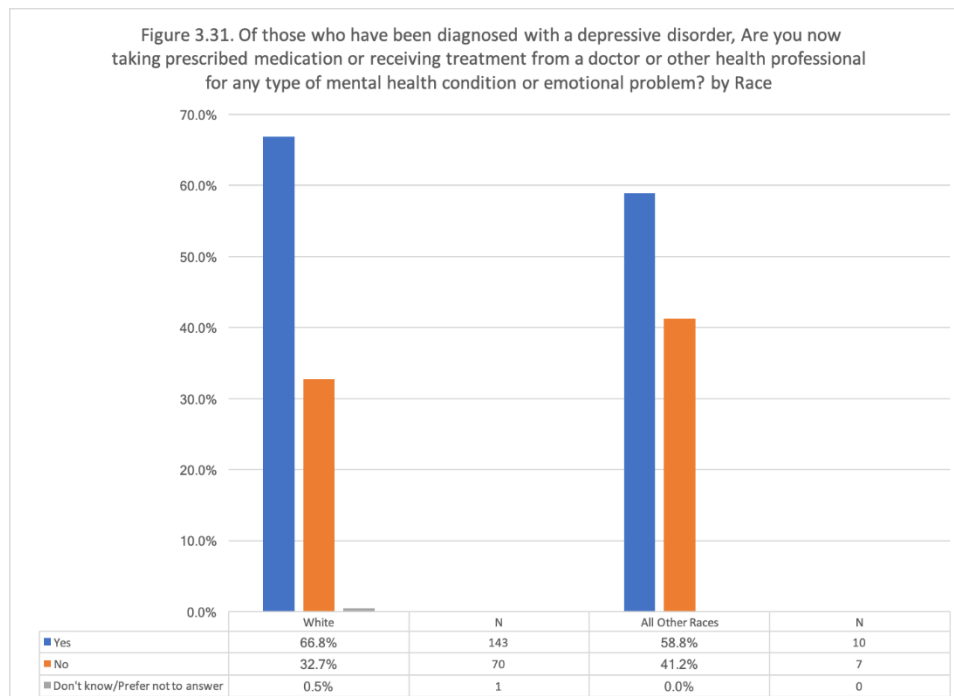
Furthermore, it is important to examine how race may matter in determining respondents' behavior in the issue of suicide. The survey asked the following question: "During the past 12 months, did you attempt suicide?" As reported in **Figure 3.29**, 0.9% of the white respondents answered this question with the choice of "yes." However, as high as 3.4% of the nonwhite respondents said that they attempted suicide during the past 12 months. As is seen in the previous question, people representing other races are significantly more likely to attempt suicide than whites.

The survey questions examined so far consistently indicate that nonwhite respondents tend to be more vulnerable than white respondents in terms of mental health issues. In order to explore the potential causes for this situation, the survey investigated respondents' Adverse Childhood Experiences by asking them to pick the items describing potentially traumatic experiences. As **Figure 3.30** shows, 14.1% of white respondents had four or more Adverse Childhood Experiences. However, slightly more than one-quarter (25.8%) of nonwhite respondents experienced four or more ACEs. These results suggest that nonwhite respondents tend to have more traumatic experiences in their childhoods.



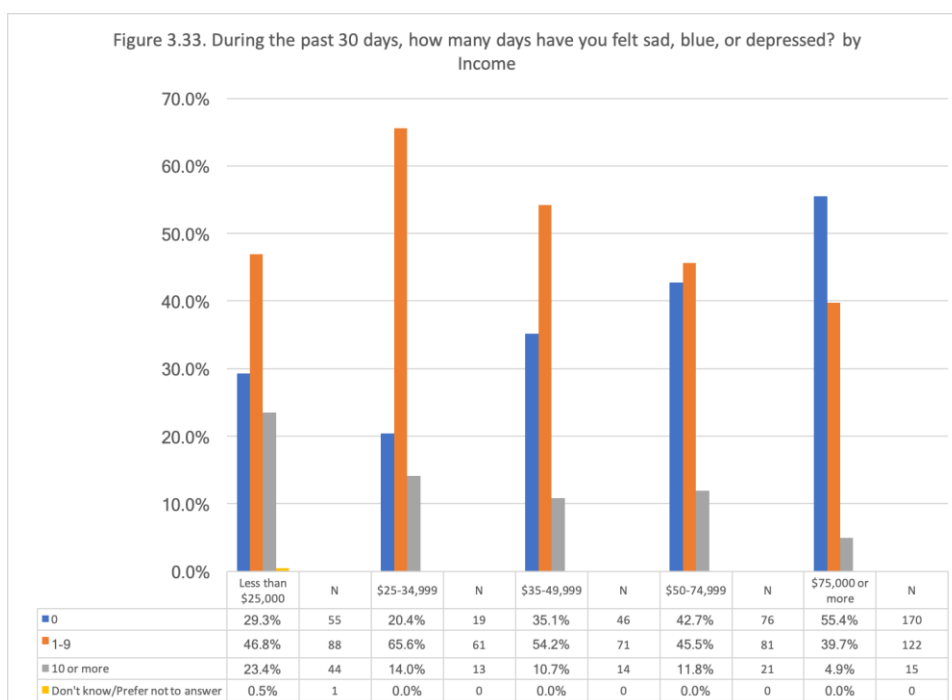
It is imperative to examine how race differently affects their treatments of depressive disorders. For this purpose, the survey asked the following question: "Are you now taking prescribed medication or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?" For this question, as reported in **Figure 3.31**, 66.8% of the white respondents said "yes" while 58.8% of nonwhites mentioned they were on medication or receiving treatment. Although it is nonwhite respondents who are more likely to

suffer from depressive disorders, they are less likely to be on medication or receive medical treatment for their illnesses.

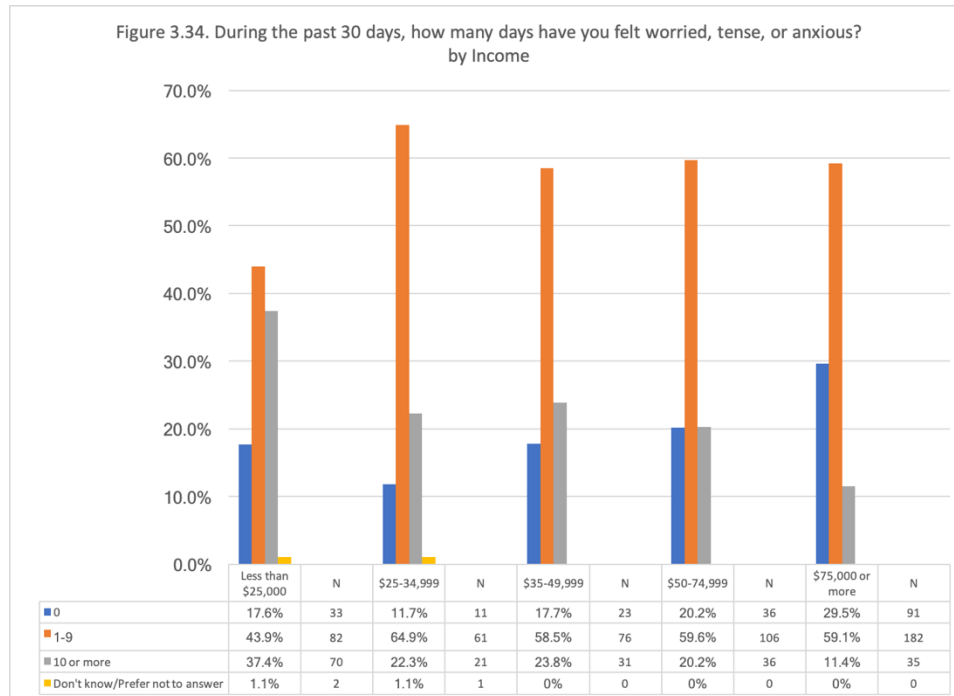


Furthermore, the survey asked the following question: “In general, how often do you get the social and emotional support you need?” **Figure 3.32** shows that 26.0% of the white respondents answered this question with the choice of “always,” while it is only 16.1% of respondents from other races who answered this question in the same manner. This suggests that nonwhites are less likely to receive the social and emotional support they need in the issue of mental health, the picture that is consistent throughout the survey.

In addition to various demographic variables, the survey also shows that income is closely related to the issue of mental health. The survey asked the following question: “During the past 30 days, how many days have you felt sad, blue, or depressed?” As summarized in **Figure 3.33**, 23.4% of the respondents whose income is less than \$25,000 answered the question with the choice of “10+ times.” However, the proportion of the respondents who used “10+ times” is consistently low for other income groups. For instance, for those who make \$75,000 or more, only 4.9% of the respondents marked the choice of “10+ times.” Clearly, those with higher income are less likely to suffer from mental health concerns.



In the same manner, the survey asked the following question: “During the past 30 days, how many days have you felt worried, tense, or anxious?” For those whose income is less than \$25,000, as high as 37.4% of those said “10+ times.” However, for those who make more than \$75,000, the percentage drops down to 11.4%. Judging from these results, those with high incomes tend to be less susceptible to these feelings associated with anxiety (see **Figure 3.34**).



In discussing the issue of mental health disparities by income, it is imperative to address the problem of suicide in terms of respondents' income. The survey asked the following question: "During the past 12 months, did you ever seriously consider suicide?" For those whose income is less than \$25,000, 21.4% of them said "yes." However, for those whose income is \$75,000 or more, the proportion goes down to 4.4%. **Figure 3.35** confirms the gap between these two groups, making clear that those respondents with lower income are more likely to consider suicide.

Still on the subject of suicide, the survey asked: "During the past 12 months, did you attempt suicide?" As summarized in **Figure 3.36**, 5.8% of those whose income is less than \$25,000 said "yes." The proportion of those respondents who answered with "yes" is consistently low for those with higher income (0.0%~1.1%). Clearly, it tends to be those with lower income who actually attempted suicide, thus verifying the importance of income in understanding the issue of suicide.

Figure 3.35. During the past 12 months, did you ever seriously consider suicide? by Income

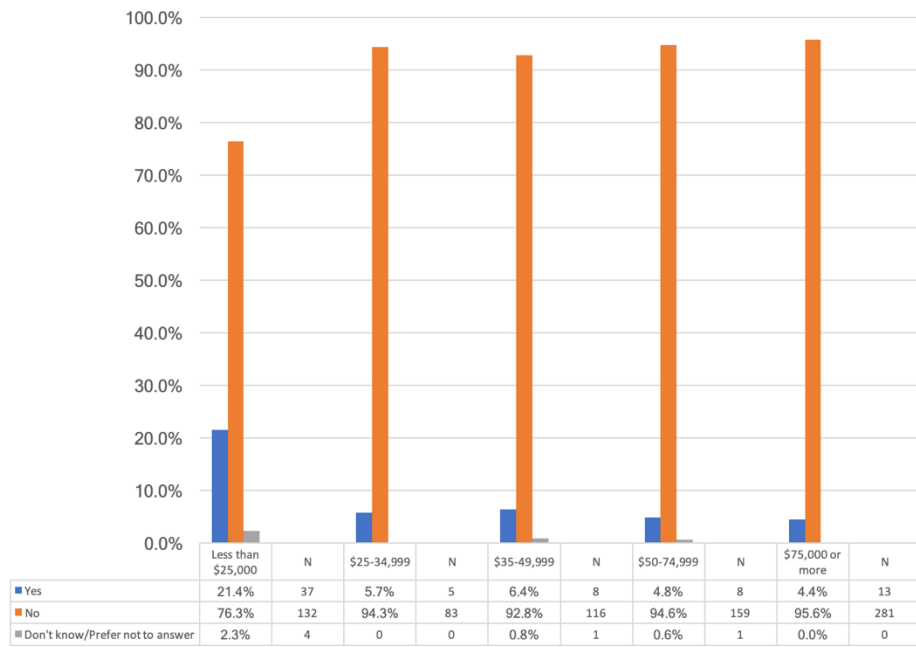
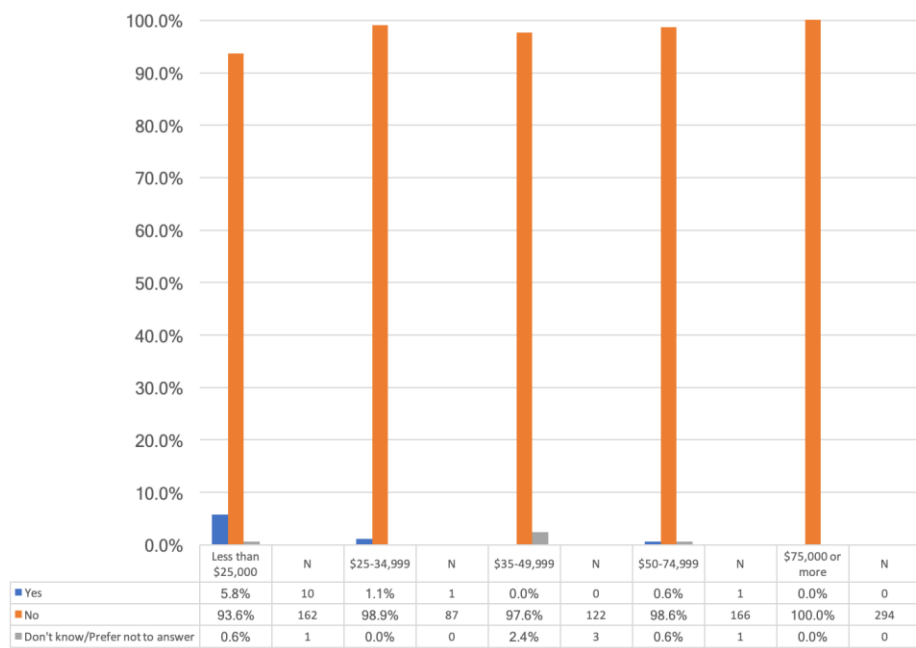


Figure 3.36. During the past 12 months, did you attempt suicide? by Income



Closely related to the issue of income, the survey asked the following question: “How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage?” As expected, those with lower incomes tend to feel more stress about rent or mortgage payments. For those whose income is less than \$25,000, 17.4% of the respondents said they “always” worry about the payment. However, for those whose income is more than \$75,000, only 1.6% of them said they “always” worry about this matter. Accordingly, it may be that those who are worried about rent or mortgage payments are more likely to experience emotional stress due to their financial circumstances. See **Figure 3.37** for the complete age breakdown on this question.



It is important to examine the degrees of support respondents receive, relative to their incomes. In this attempt, the survey asked the question: “In general, how often do you get the social and emotional support you need?” Responses by income are reported in **Figure 3.38**. It is noteworthy that 5.9% of the respondents whose income is less than \$25,000 said “never.” Those who have higher income are less likely to answer the question in the same way. For those who make more than \$75,000, only 1.3% of them answered this question with the choice of “never.” Combined with their financial difficulty, the lack of social and emotional support among those with lower income may be an important factor that creates hardship for them.

Figure 3.38. In general, how often do you get the social and emotional support you need? by Income

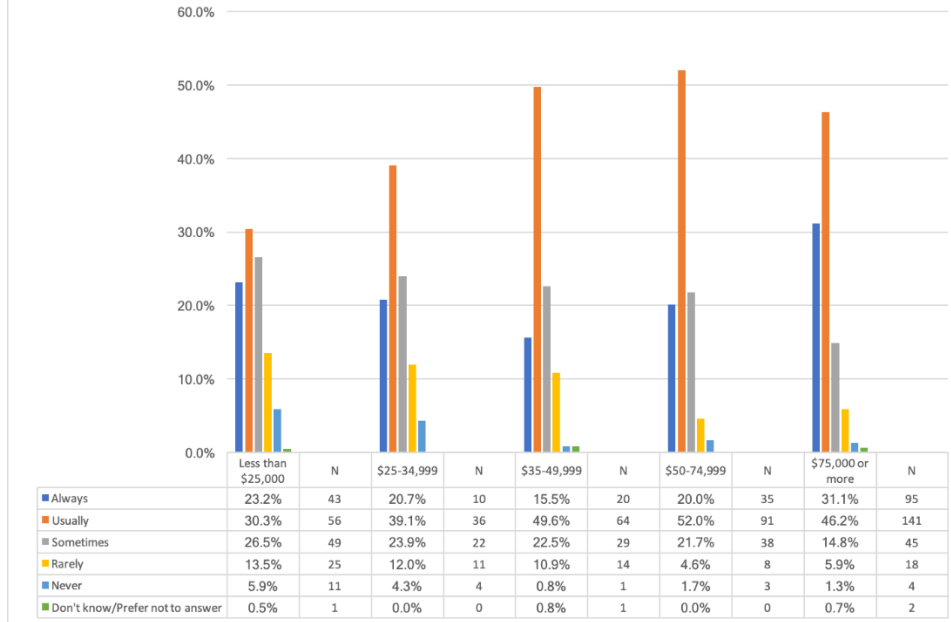
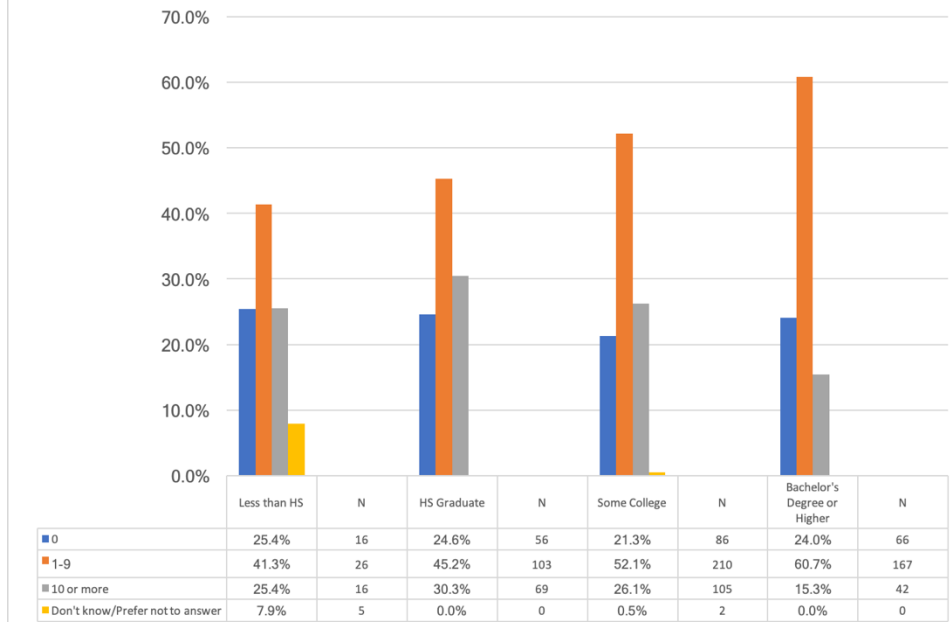
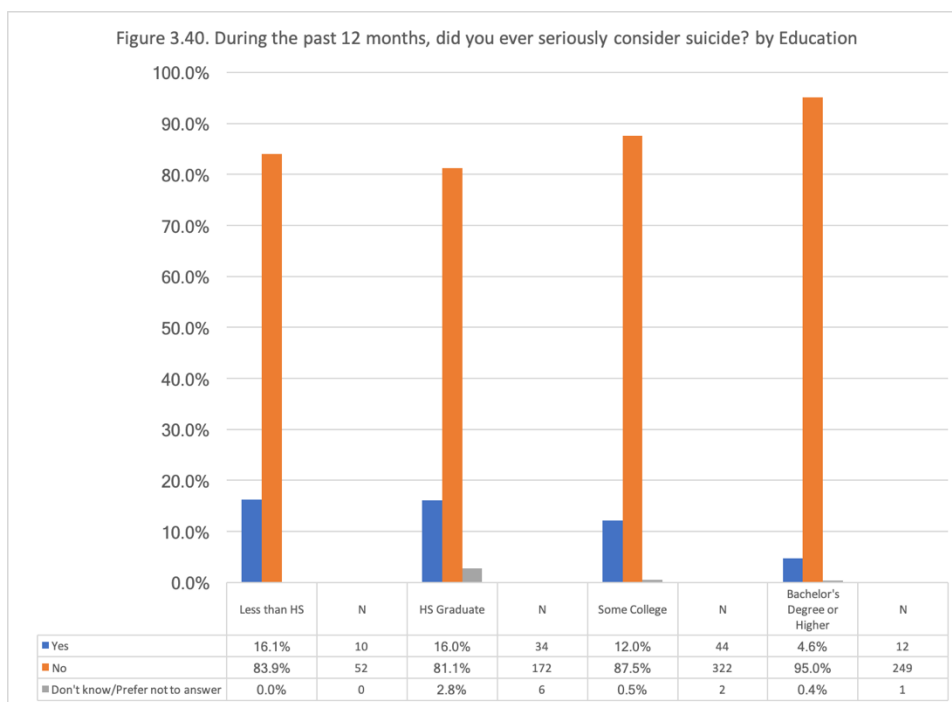


Figure 3.39. During the past 30 days, how many days have you felt worried, tense, or anxious? by Education



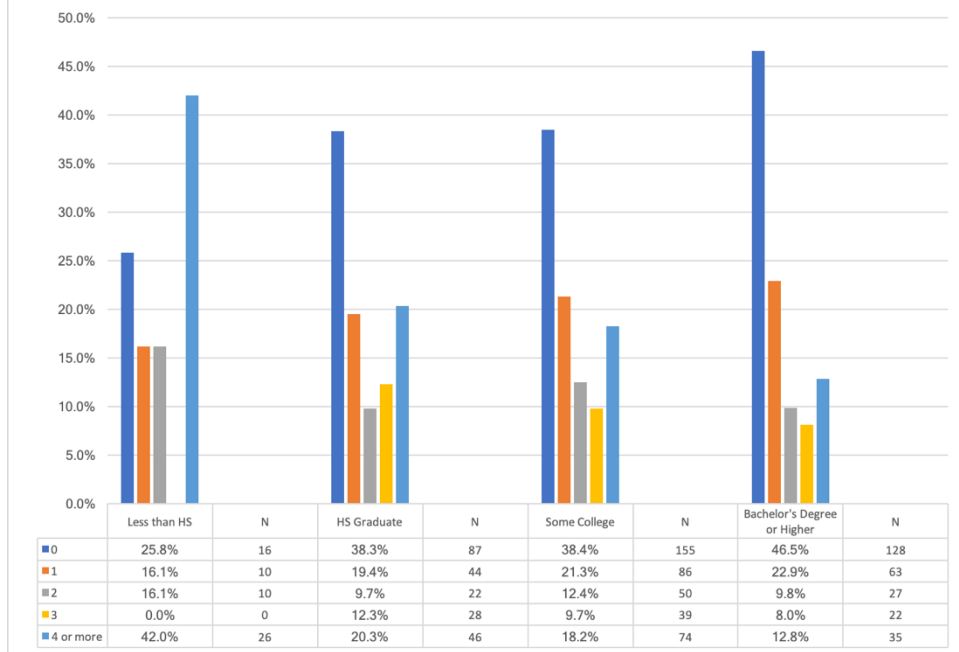
In examining the relationship between education and the issue of anxiety, the survey asked the following question: “During the past 30 days, how many days have you felt worried, tense, or anxious?” One thing that stands out is that only 15.3% of the respondents said they suffered from those emotions among respondents with bachelor’s degree or higher. Given that the comparable figure is 30.3% among those with high school education, one can infer that those with higher education are less likely to experience frequent anxiety (see **Figure 3.39**).

It is possible to observe a similar relationship between mental health and education regarding the issue of suicide. The survey asked the following question: “During the past 12 months, did you ever seriously consider suicide?” As **Figure 3.40** reports, 16.1% of those respondents with less than high school education said “yes.” However, for those with bachelor’s degree or higher, only 4.6% of them answered this question with “Yes.”



Finally, it is important to examine potential causes of mental health concerns in terms of respondents’ educational attainments. For this purpose, the survey asked the respondents about traumatic experiences in their childhood. As **Figure 3.41** shows, among those whose education is less than high school, as high as 42% of them had four or more Adverse Childhood Experiences. However, the comparable number drops down to 12.8% for those with bachelor’s degrees. The relationship between ACEs and educational attainment is suggestive. Fewer ACEs would seem to predict higher educational attainment, while higher educational attainment is associated with fewer mental health concerns. These data reinforce the view that multiple variables can combine to influence a respondent’s mental health.

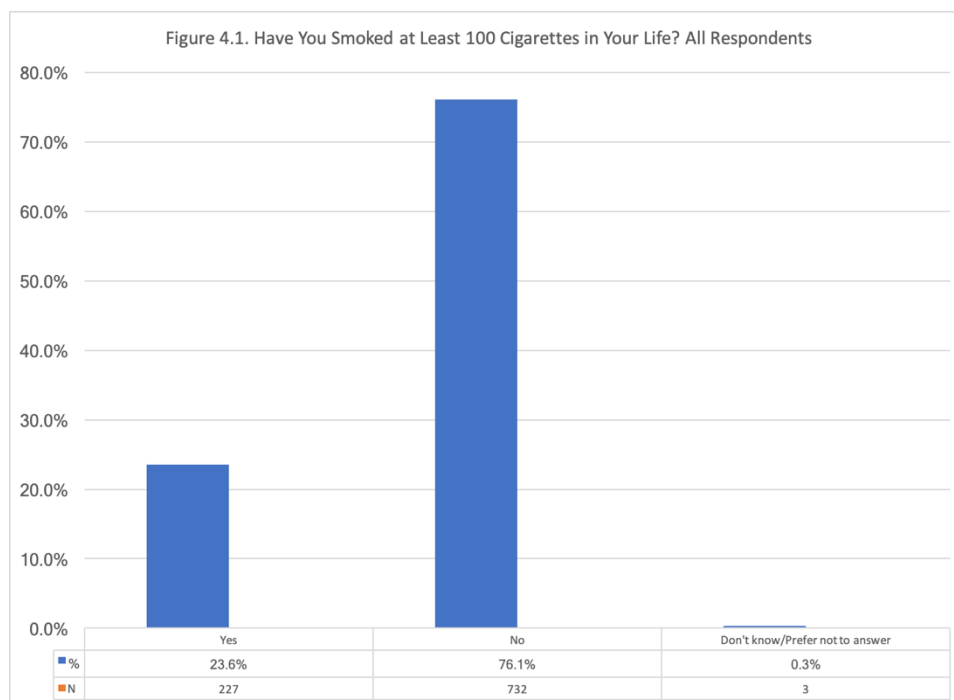
Figure 3.41. Number of Adverse Childhood Experiences, by Education



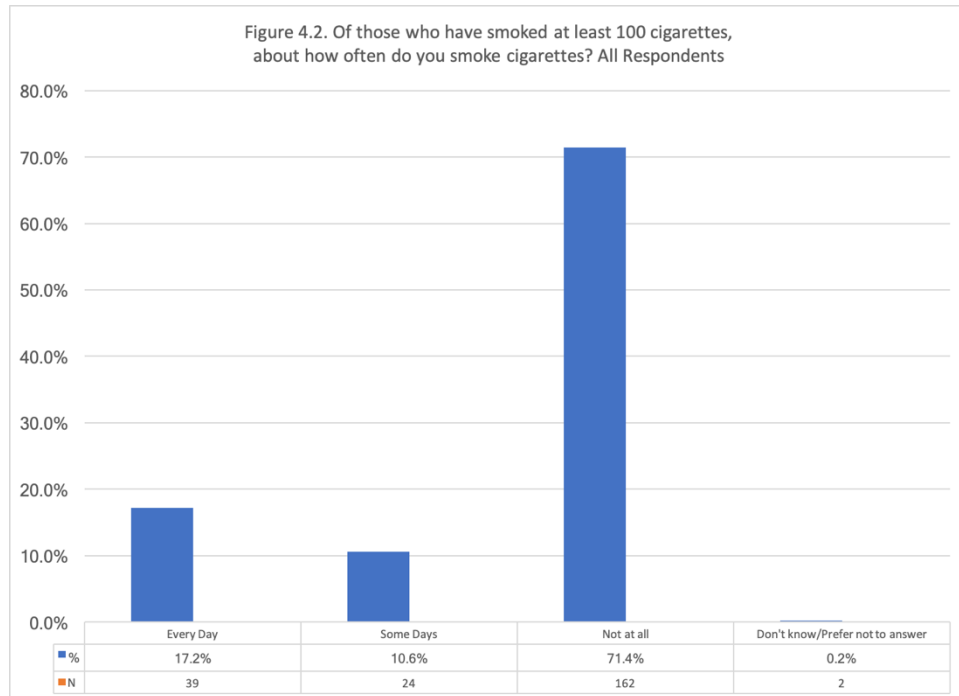
Section 4: Tobacco Use

The survey has examined respondents' behavior in the issue of tobacco use from a variety of perspectives. This section discusses the results from the survey by focusing on key aspects. The first part analyzes figures that represent the county-wide data on this matter. The second part dissects the county-wide data by a series of demographic variables in order to identify groups that especially stand out in this matter.

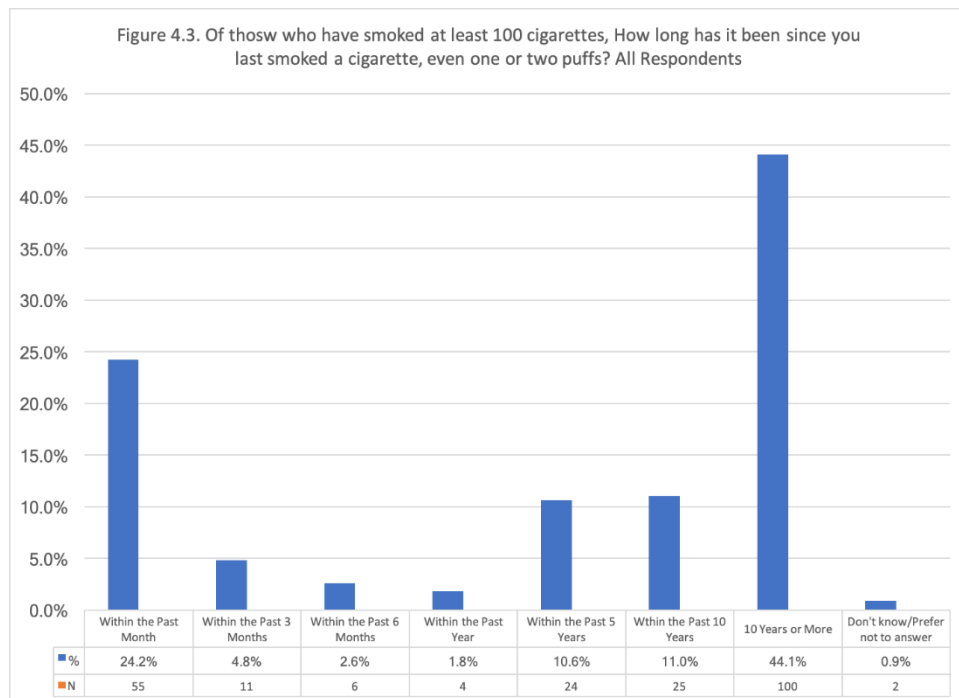
First, it is important to examine county-wide data regarding respondents' smoking habits. One striking finding is that a large majority of the respondents do not smoke cigarettes in Buffalo County (see **Figure 4.1**). For the question, "Have you smoked at least 100 cigarettes in your life?" 76.1% of them answered the question by selecting "No".



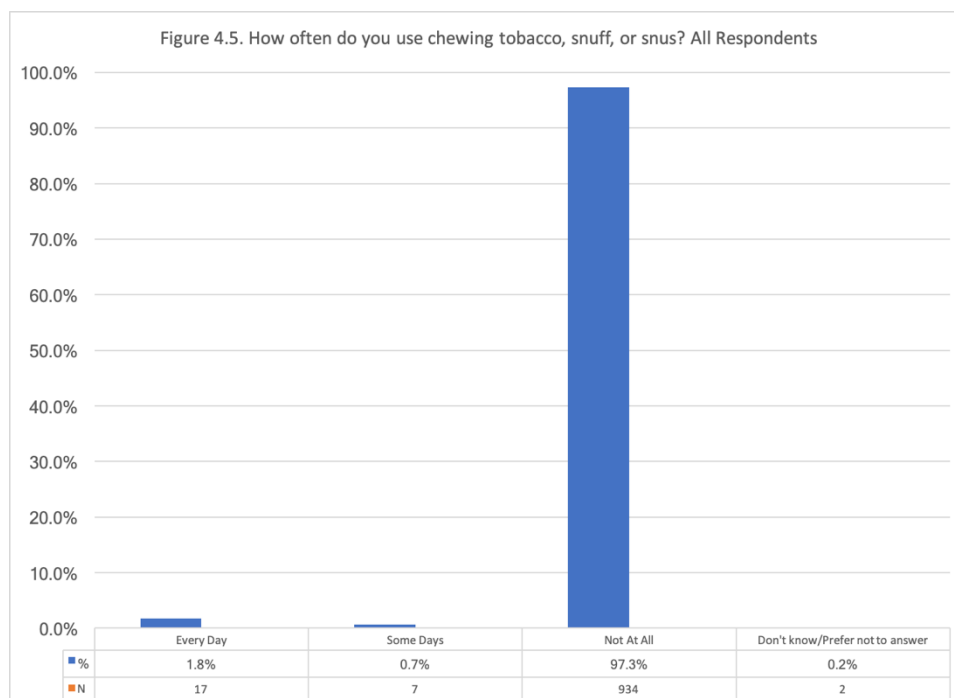
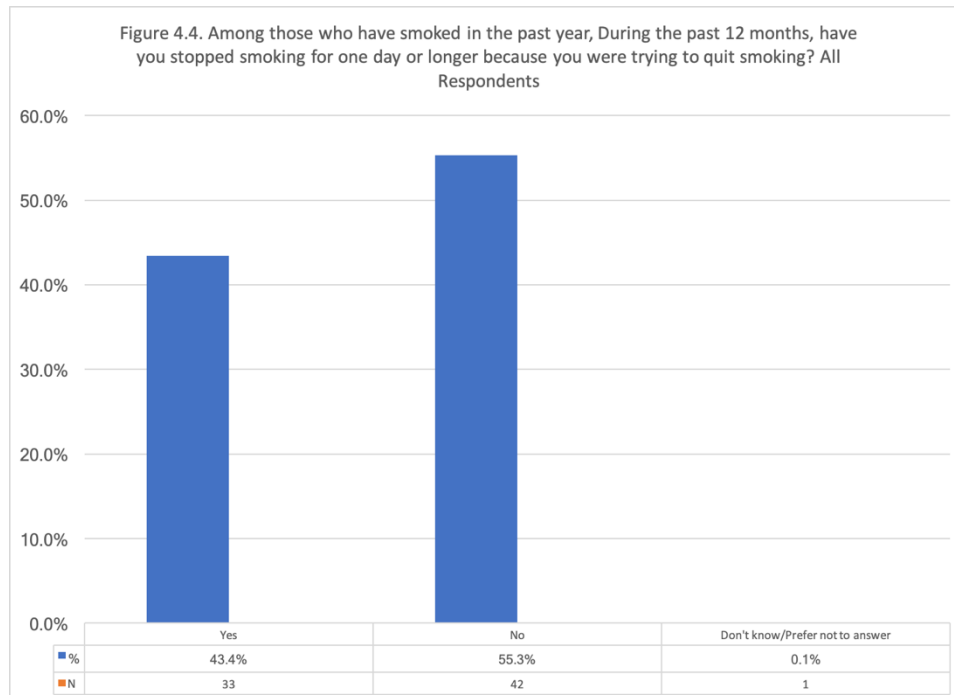
Even among those who answered this question by using "yes," it is only a small portion of the respondents who smoke cigarettes every day (17.2%), as indicated in **Figure 4.2**.



Regarding the question “How long has it been since you last smoked a cigarette, even one or two puffs?” the majority of the respondents have not smoked cigarettes for years (see **Figure 4.3**). Judging from this result, it seems that a high percentage of the respondents have stayed away from smoking for a long period of time.

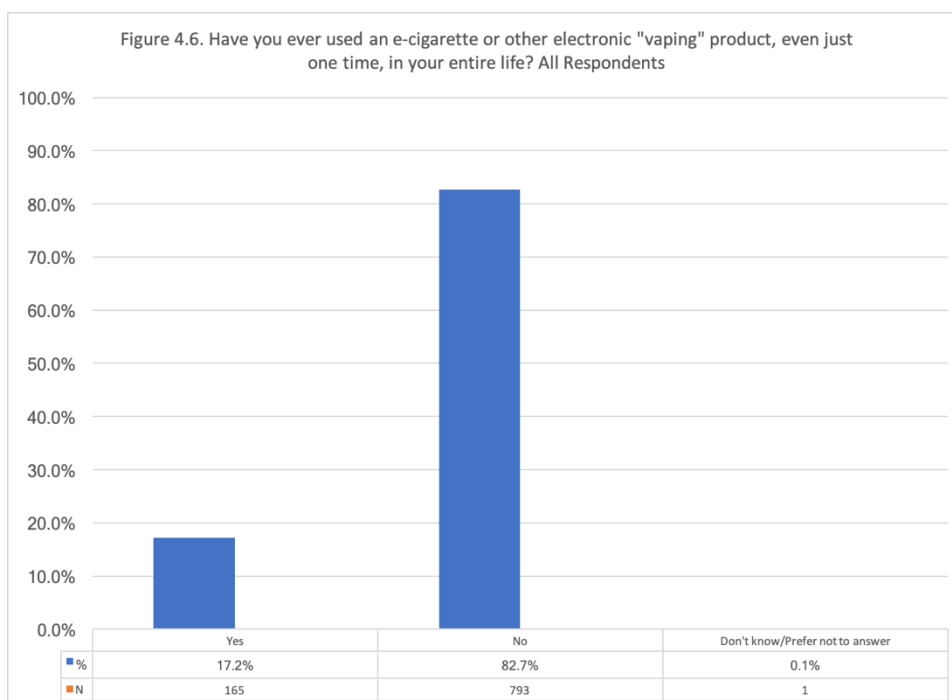


For those who have smoked within the past year, we have posed the question, “During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking.” Results are reported in **Figure 4.4**, where 43.4% of respondents answered the question “Yes,” and 55.3% of them answered with “No.” While almost half of respondents tried to stop smoking, the rest may not have any intention of giving up cigarettes at this time.



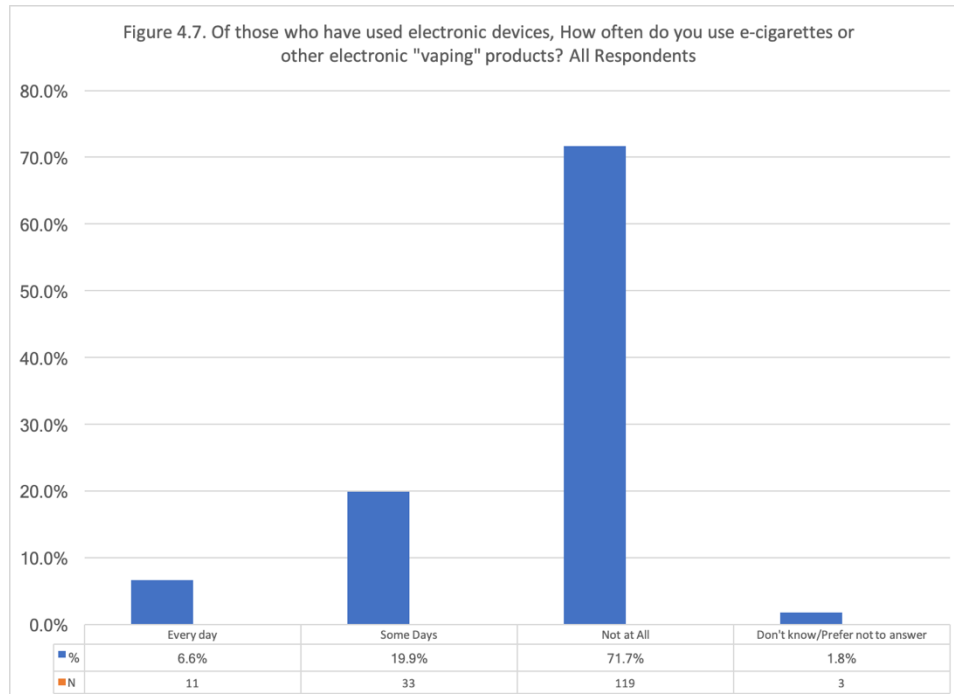
Turning to the questions about other tobacco products, we have posed the following question: “How often do you use chewing tobacco, snuff or snus?” The survey shows (**Figure 4.5**) that only a small percentage of the respondents use these products regularly and the majority of them have never used these products (97.3%).

In a similar manner, the survey analyzed the respondents’ tendencies regarding the use of e-cigarettes or other products by posing the following question: “Have you ever used an e-cigarette or other electronic “vaping” product, even just one time, in your entire life?” As reported in **Figure 4.6**, only 17% of the respondents said that they have used these products whereas 83% of the respondents have never used them.



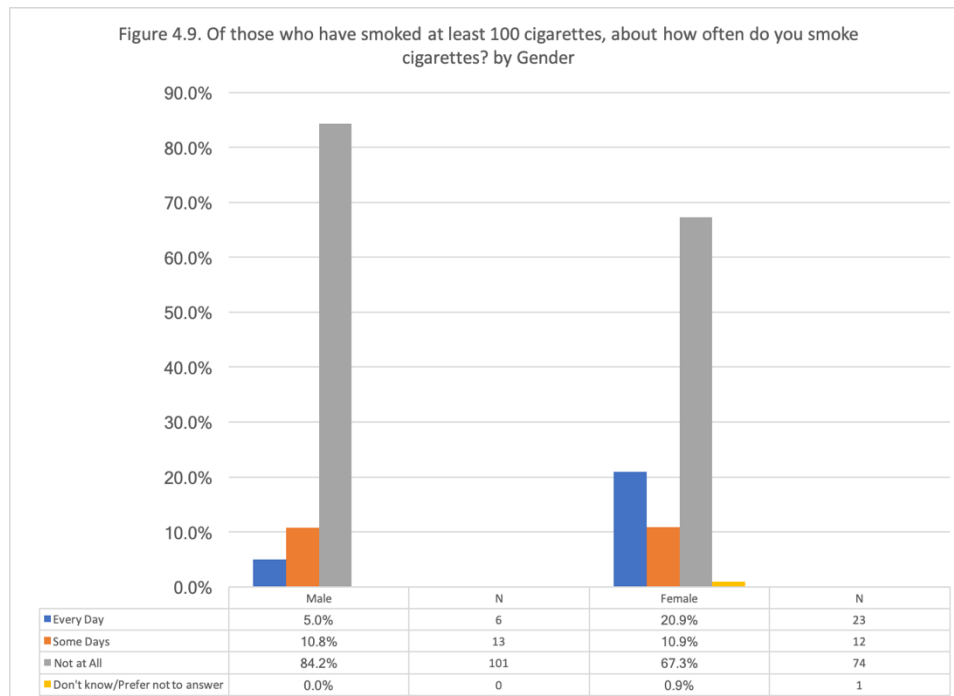
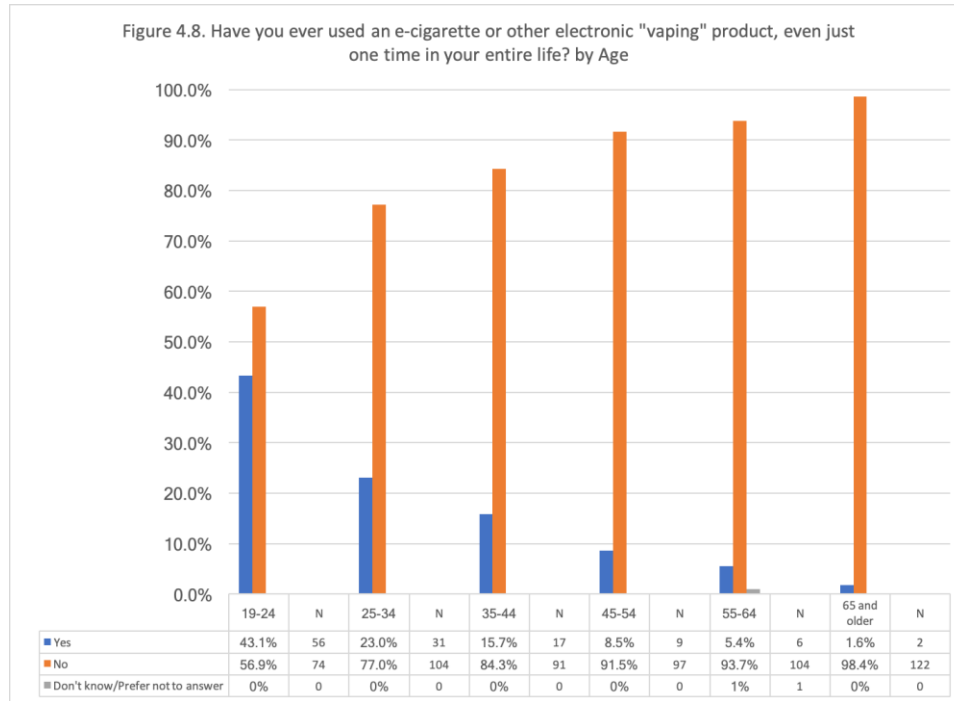
Among those who have actually used them before, the survey further examined how often they engage in these behaviors by asking the following question: “How often do you use e-cigarettes or other electronic “vaping” products?” The result, reported in **Figure 4.7**, suggests that 71.7% of the respondents answered this question by choosing “Not at all” while a total of 26.5% of them answered by selecting “every day” (6.6%) or “some days” (19.9%). | |

[EB2]

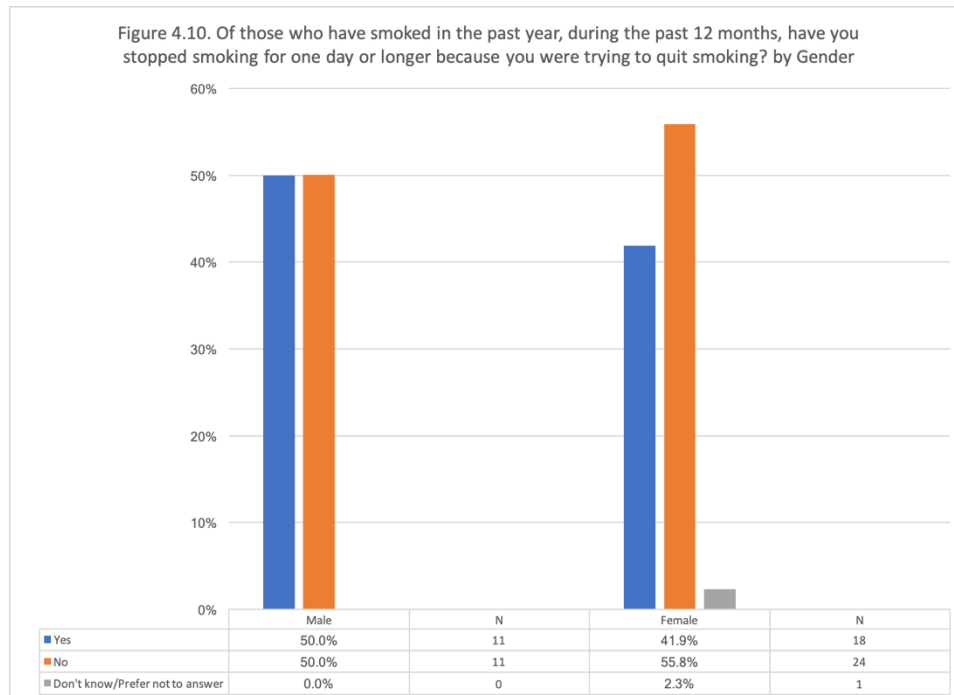


Second, it is necessary to analyze the results by a range of demographic variables in order to further examine respondents' behaviors in the issue of tobacco use. Findings suggest that some of the demographic variables affect respondents' behaviors. For instance, **Figure 4.8** demonstrates that respondents' ages clearly matter in determining the use of e-cigarettes or other vaping products. The younger the respondents are, the more widely they tend to use these products.

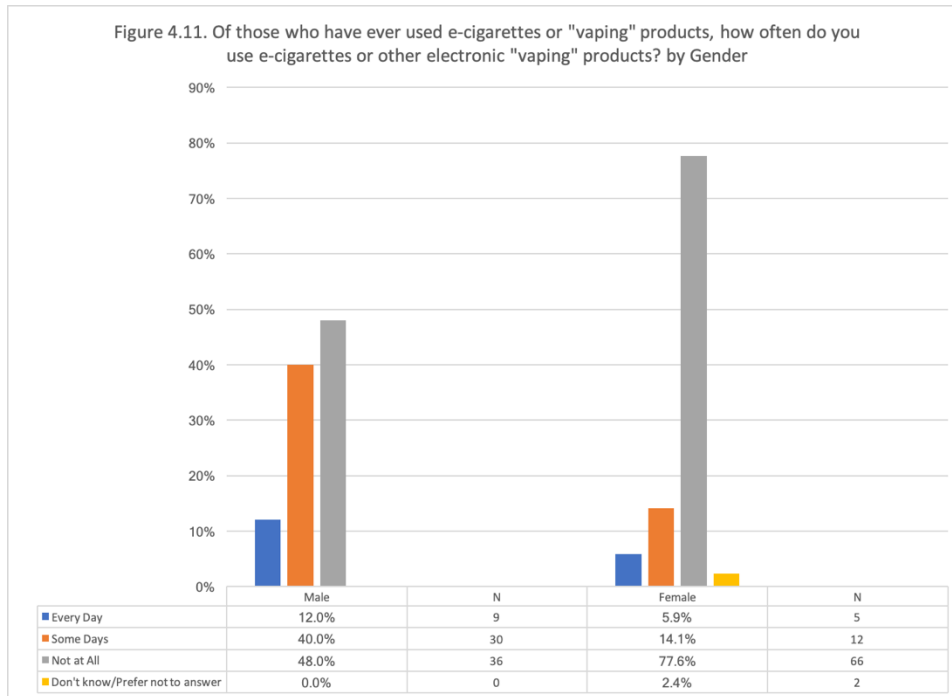
Regarding gender, it is important to suggest several points. For the question, "Have you smoked at least 100 cigarettes in your life?" we do not observe a major difference between genders with 15.8% of male respondents and 17.7% of female respondents answering this question with "Yes." Yet, this picture changes when the survey taps a smoking habit among those respondents who have smoked at least 100 cigarettes (see **Figure 4.9**).



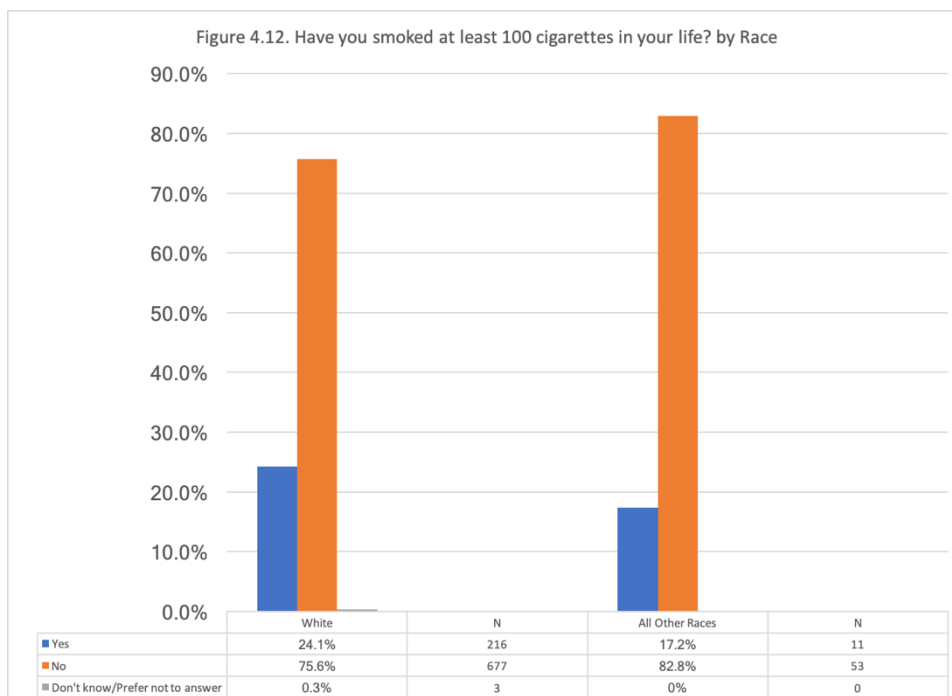
While only 5% of the male respondents say they smoke every day, 20.9% of the female respondents reported that they smoke every day. This tendency is also observed in the question, “During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking” (**Figure 4.10**). While 50% of the male respondents have tried to quit smoking, only 41.9% of the females have tried to do so.

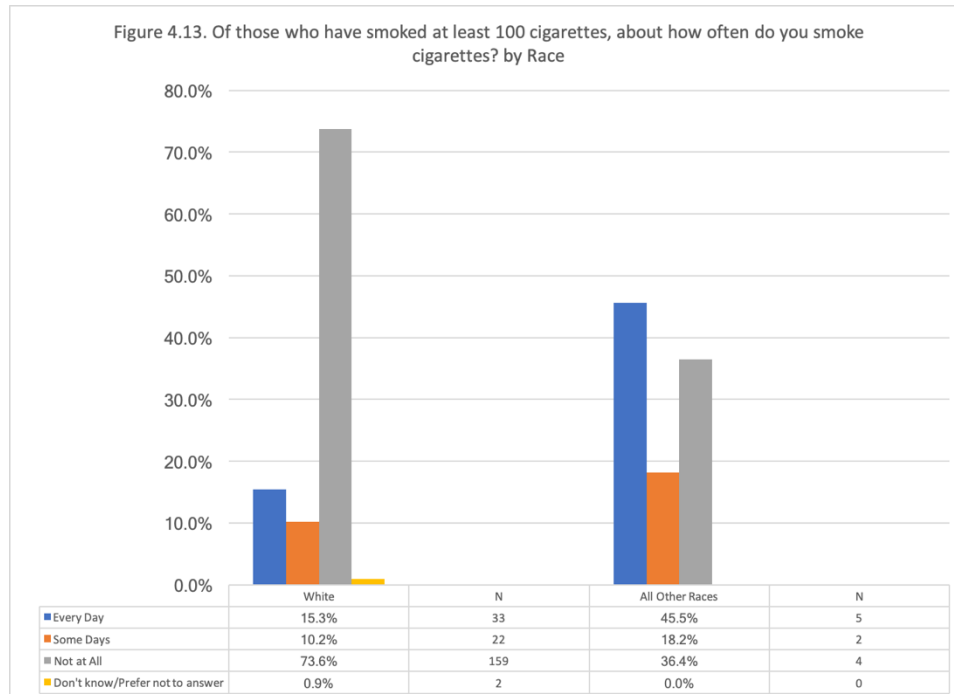


Regarding the use of e-cigarette and other vaping products, male and female respondents behave in a similar manner: 15.8% percent of the males and 17.7% of the females said they have used these products. Yet, the frequency of using these products significantly varies between genders. Male respondents tend to use e-cigarettes and other vaping products more frequently (12% - “every day” and 40% - “some days.”) than female counterparts (5.9% - “every day” and 14.1% - “some days.”) These results suggest an interesting picture: while females tend to engage in smoking cigarettes, it is male respondents who tend to use e-cigarettes and other vaping products more widely (**Figure 4.11**).

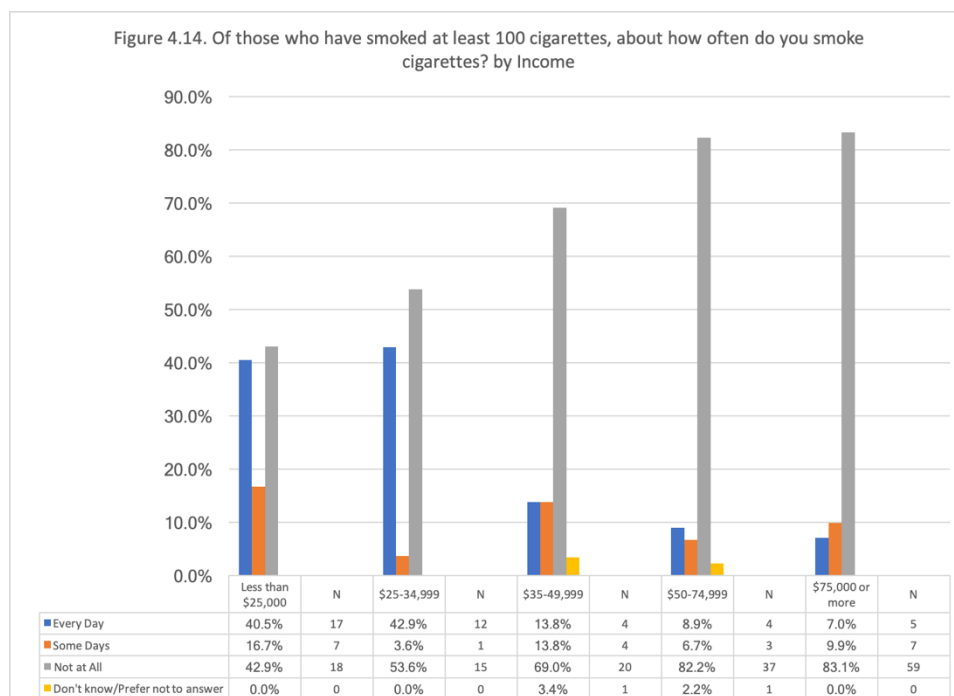


The race factor seems to play a role in respondents' smoking habits. While 24.1% of whites reported that they have smoked at least 100 cigarettes in their lives, the result for non-whites is only 17.2% (see **Figure 4.12**). However, this picture changes when the survey taps into the frequency of smoking. As reported in **Figure 4.13**, while only 15.3% of whites said they smoke "every day," the figure for non-whites is as high as 45.5%. These results present somewhat an interesting picture regarding the smoking habit: whites are more likely to smoke but non-whites tend to smoke more frequently.

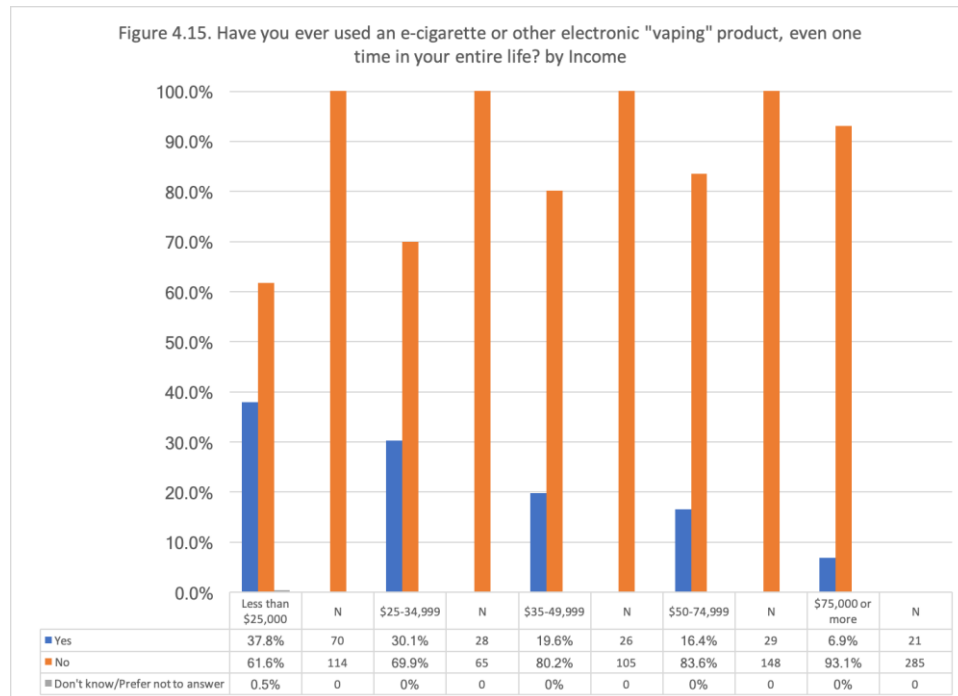




Finally, the results indicate that income is closely related to respondents' smoking habits. The relationship between income and smoking is especially salient in the question tapping the frequency of smoking cigarettes. Regarding the question, "About how often do you smoke cigarettes?" As shown in **Figure 4.14**, while 40.5% of the respondents with income of less than \$25,000 reported that they smoke "every day," the percentage is only 7% for those who make more than \$75,000.



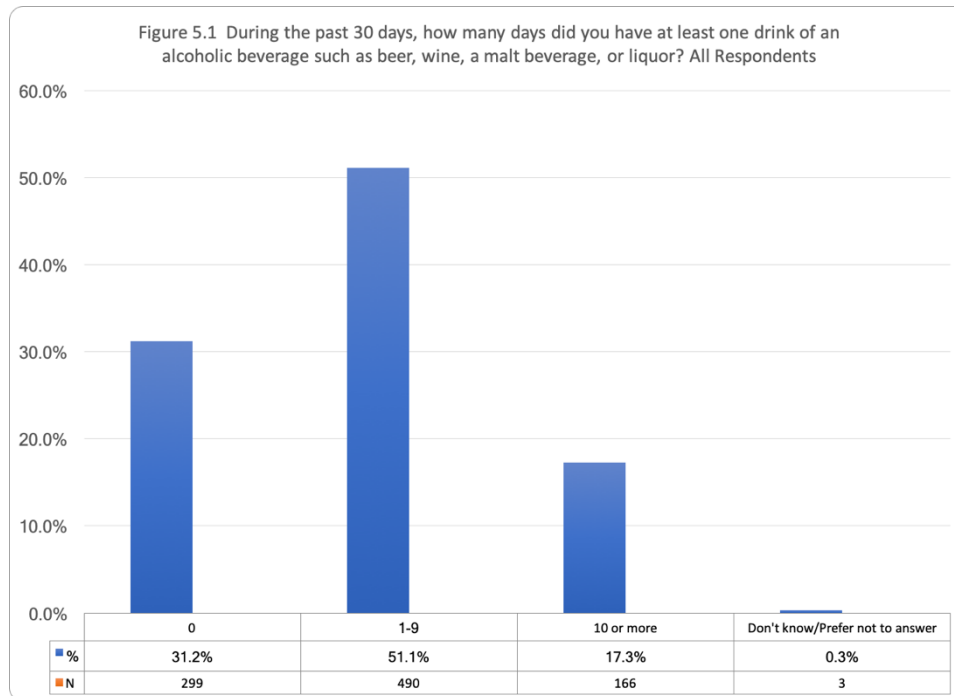
In the same manner (**Figure 4.15**), income is closely related to respondents' experiences of using e-cigarettes and other vaping products. While 37.8% of the respondents who make less than \$25,000 have used them before, the figure for those with more than \$75,000 income is only 6.9%.



These results suggest that income is one of the important factors determining respondents' behavior in the issues related to tobacco products in general.

Section 5: Alcohol Use

It is important to examine the county-wide trends about respondents' drinking behavior. In order to capture the general outlook regarding this matter, the survey asked the following question: "During the past 30 days, how many days did you have at least one drink of an alcoholic beverage such as beer, wine, a malt beverage, or liquor?" As **Figure 5.1** indicates, the majority of the respondents (68.8%) had at least one drink during the past 30 days, which indicates that drinking is fairly common among residents in Buffalo County.



For those who answered that they had at least 1 drink during the past 30 days, the survey subsequently posed the following question: "During the past 30 days, on the days when you drank, about how many drinks did you drink on average?" (see **Figure 5.2**). The result of the survey shows that 71.4% of the respondents had one or two drinks. Furthermore, 21.9% of the respondents had 3-4 drinks, and 6.4% of them mentioned that they had more than 5 drinks on the day they drank.

The survey also inquired about respondents' behavior on drunk driving by posing the following question: "During the past 30 days, how many times have you driven when you have perhaps had too much to drink?" (**Figure 5.3**). For this question, 90.5% of the respondents answered they had never driven when they had too much to drink. However, some of the respondents chose to answer this question by "1-9 times" (8.9%) and "10+ times" (0.2%). While a large majority are responsible drivers, about 9% of the drivers tend to engage in risky behavior one way or another.

Figure 5.2 During the past 30 days, on the days when you drank, about how many drinks did you have on average? All Respondents

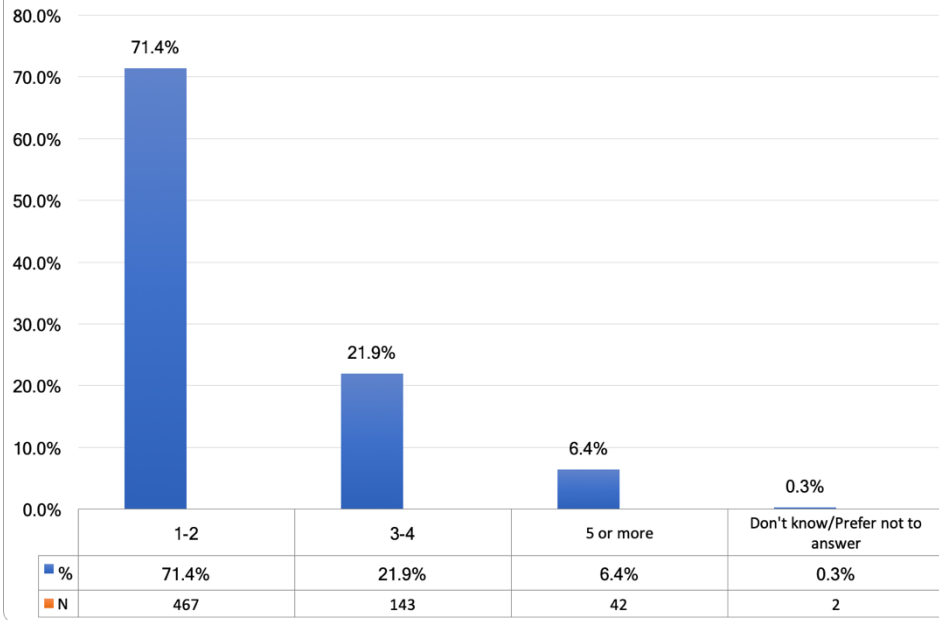
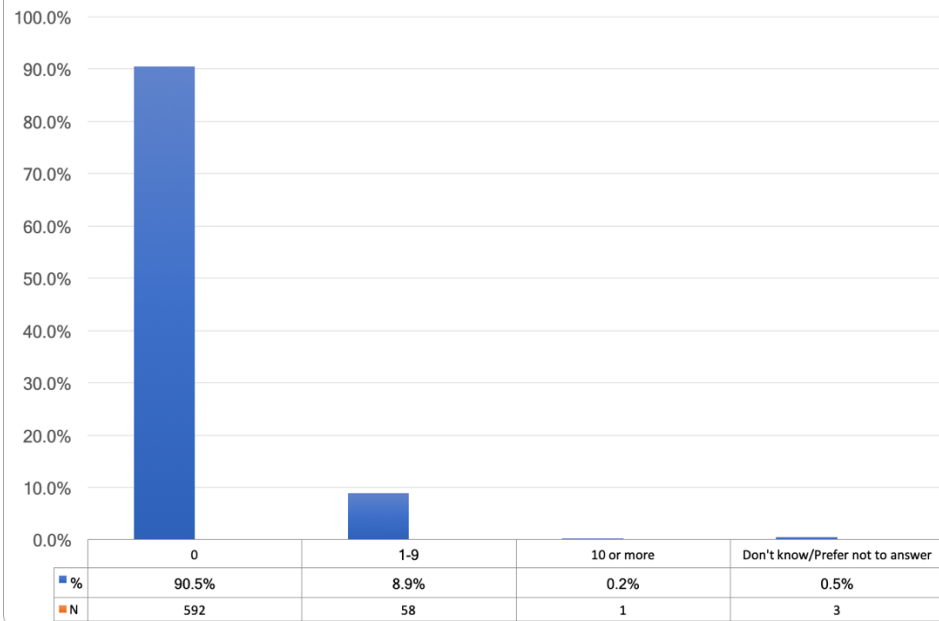
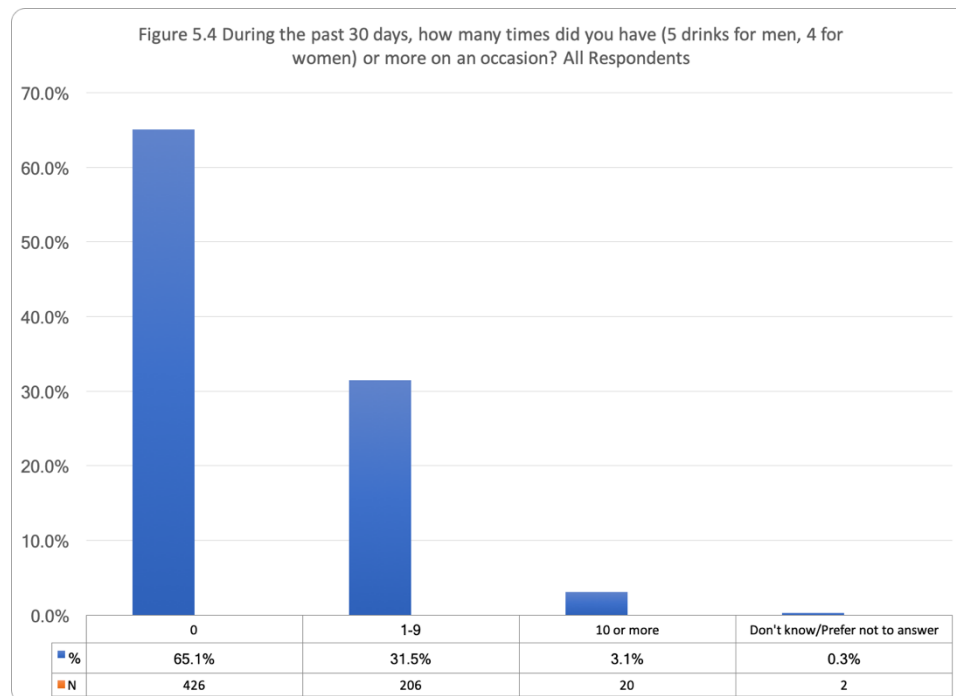


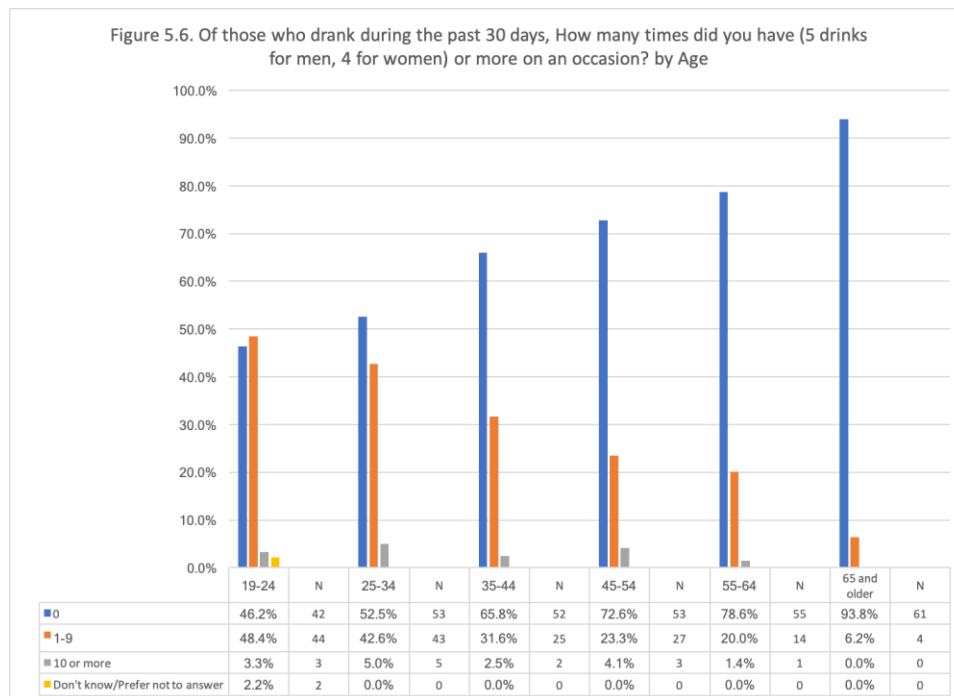
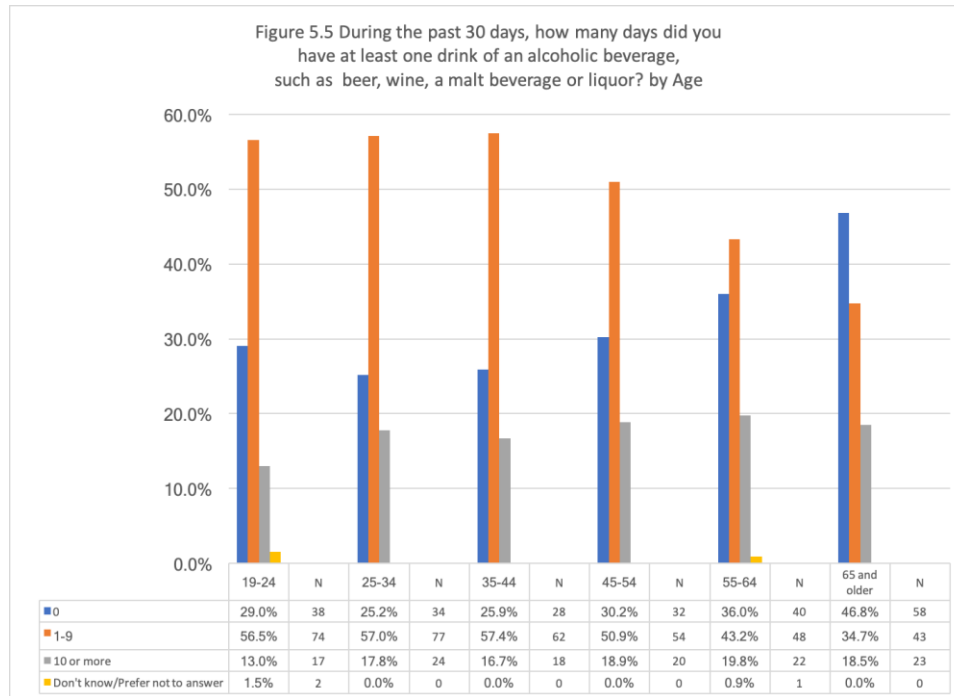
Figure 5.3 During the past 30 days, how many times have you driven when you have perhaps had too much to drink? All Respondents



Finally, the survey asked the following question: “During the past 30 days, how many times did you have (5 drinks for men, and 4 drinks for women) on one or more occasions?” As reported in **Figure 5.4**, 65.1% of the respondents said that they have never had this much drink. However, 31.5% of the respondents answered this question using “1-9 days” and 3.1% of them with the choice of “10+ days.” Although the majority of the respondents tend to stay away from heavy drinking, approximately 34.6% (31.5%+3.1%) of the respondents tend to drink heavily at times or routinely.

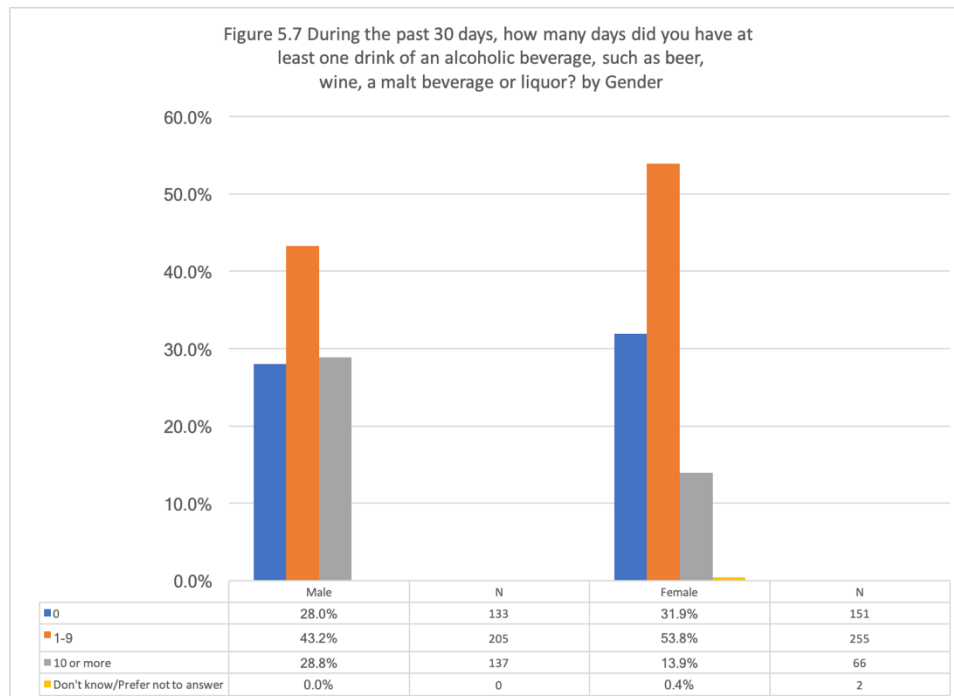


The second part of this chapter takes a look at these figures in relations to a series of demographic variables. Findings suggest that some of the demographic variables affect respondents' drinking behavior. Regarding the frequency of drinking (**Figure 5.5**), age seems to be significantly related to the frequency of drinking. The result shows that those who are older are more likely to stay away from drinking completely. For instance, the percentage of those who did not have any drinks during the past 30 days is 25.2% among those whose age is 25-34. Yet, the percentage goes up to 46.8% for those who are 65 years and older.



In the same manner, the results reported in **Figure 5.6** are suggestive. As respondents get older, the percentage of those who engage in heavy drinking significantly decreases. For those whose age is 25-34, 47.6% of them had at least one day when they had many drinks (5 drinks for men, and 4 drinks for women). The percentage drops down to 6.2% for those who are 65

years old and older. In this way, age is an important factor that can determine respondents' drinking habits.



In the same manner, it is necessary to analyze how gender affects respondents' drinking behavior. Regarding the frequency of drinking, the percentage for those who have had drinks for 10 days or more is 28.8% for men and 13.9% for women (see **Figure 5.7**). In the same manner, 13.8% of men had 5 or more drinks on the day when they drank while the figure for women is only 4.1% (**Figure 5.8**). These results suggest that male respondents are more likely to engage in drinking in both frequency and degree.

Furthermore, it is essential to analyze the relationship between race and respondents' drinking habits. Regarding the frequency of drinking, 30.6% of the white respondents said they never had a drink during the past 30 days while 38.1% of the non-white stayed away from drinking during the same period (see **Figure 5.9**). Judging from this finding, it seems that white respondents are more likely to engage in drinking than non-white respondents. Yet, this is the only question that indicates somewhat divergent outcomes for white and non-white respondents. Race does not seem to affect one's drinking behavior in other aspects of drinking since both white and non-white respondents tend to answer those questions more or less similarly.

Figure 5.8 Of those who drank during the past 30 days, On the days when you drank, about how many drinks did you drink on average? by Gender

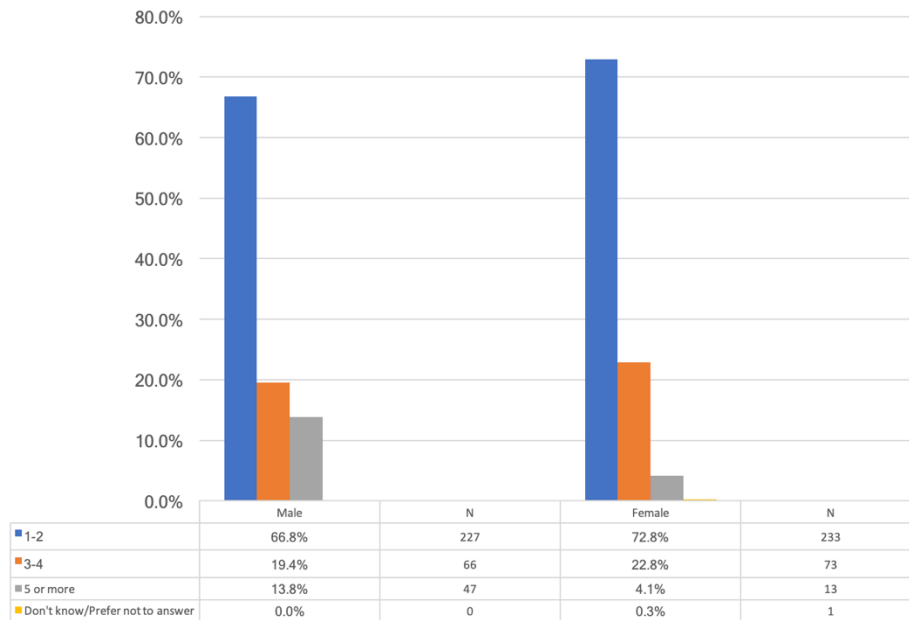
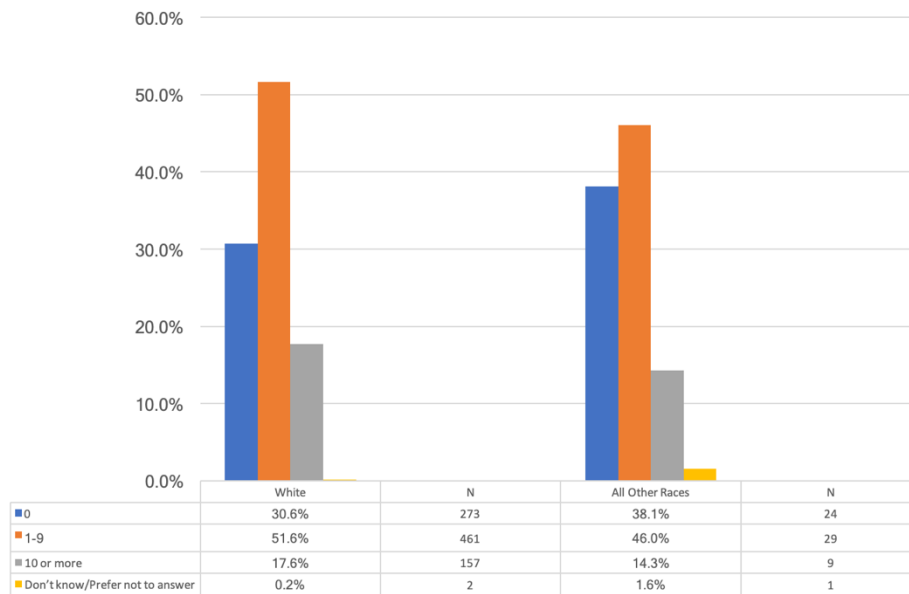
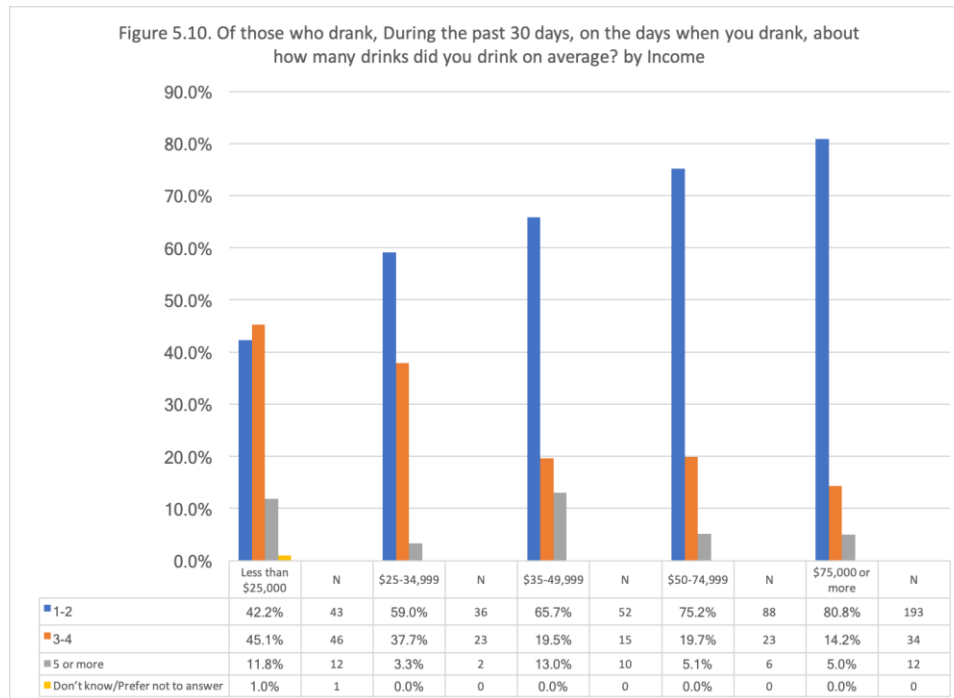


Figure 5.9 During the past 30 days, how many days did you have at least one drink of an alcoholic beverage, such as beer, wine, a malt beverage or liquor? by Race

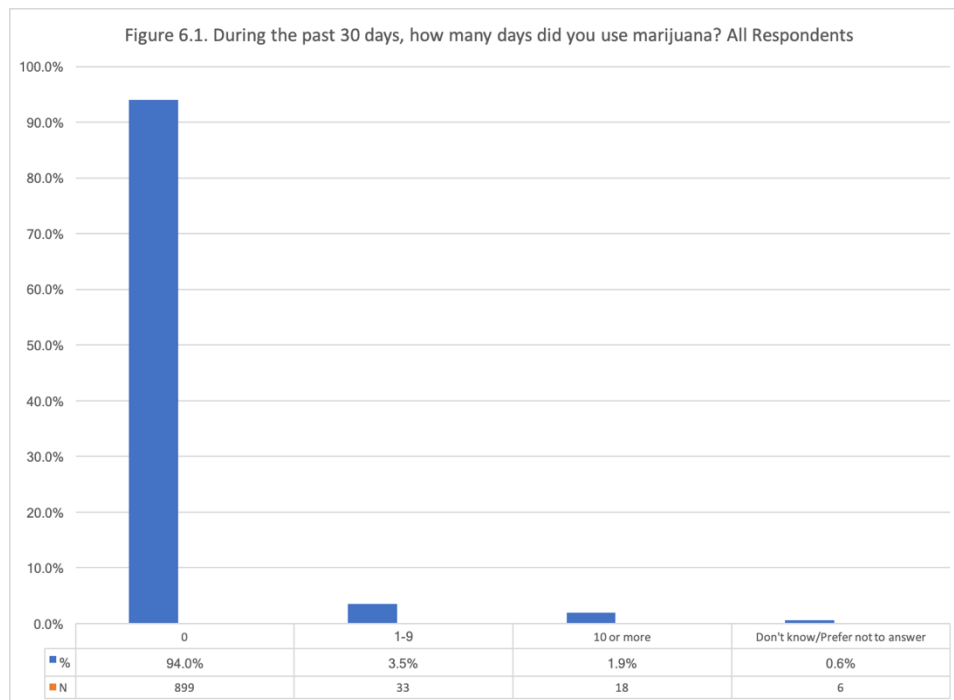


Also, it is imperative to dissect the relationship between income and respondents' drinking behavior. As **Figure 5.10** indicates, income significantly increases the percentage of those who engage in a moderate degree of drinking. For those who make less than \$25,000, the percentage of those who have 1-2 drinks on average is 42.2%. This figure steadily increases as respondents' incomes rise. For those who make \$75,000 or more, the percentage of those who have 1-2 drinks on average is 80.8%. Those whose income are higher are less likely to engage in heavy drinking.

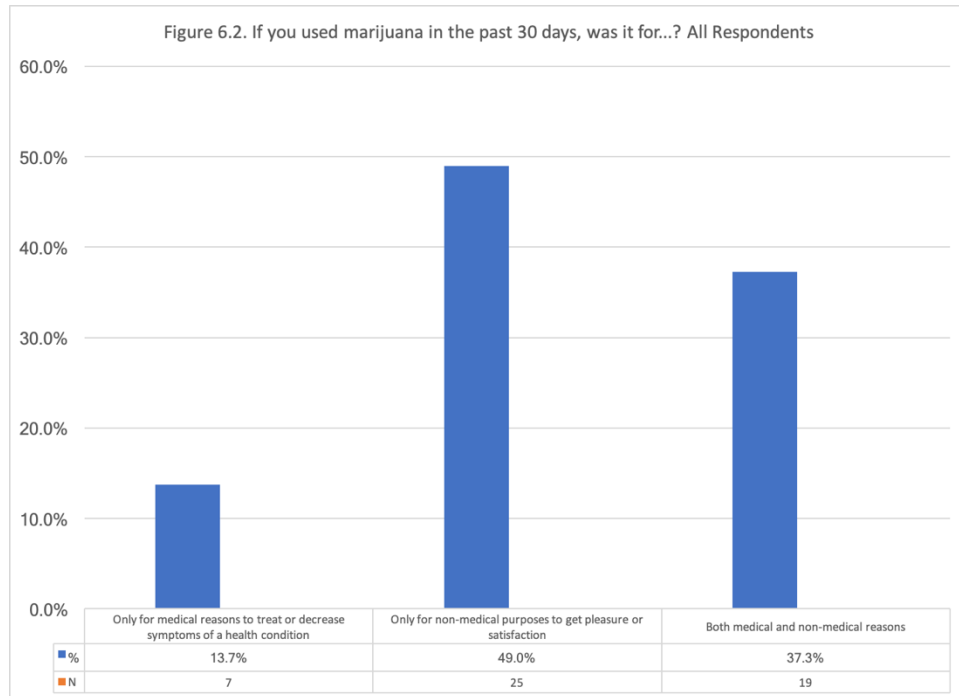


Section 6: Drug Use

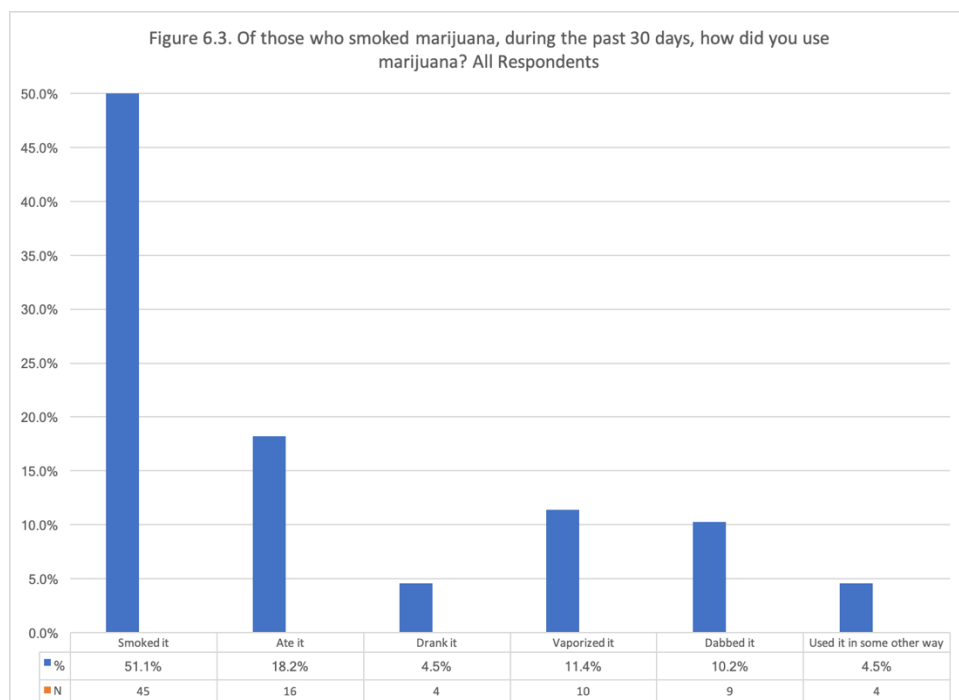
This module examines drug use in Buffalo County. The first part analyzes county-wide trends in this matter. First, the survey asked about the use of marijuana by the following question: “During the past 30 days, how many days did you use marijuana?” For this question, 94% of the respondents chose the answer of “0 times”, meaning that an overwhelming majority of the respondents stayed away from marijuana. However, 3.5% of the respondents chose “1-9 times” and 1.9% of them employed “10+ times” (see **Figure 6.1**). These results indicate that there are some people who use marijuana routinely one way or another.



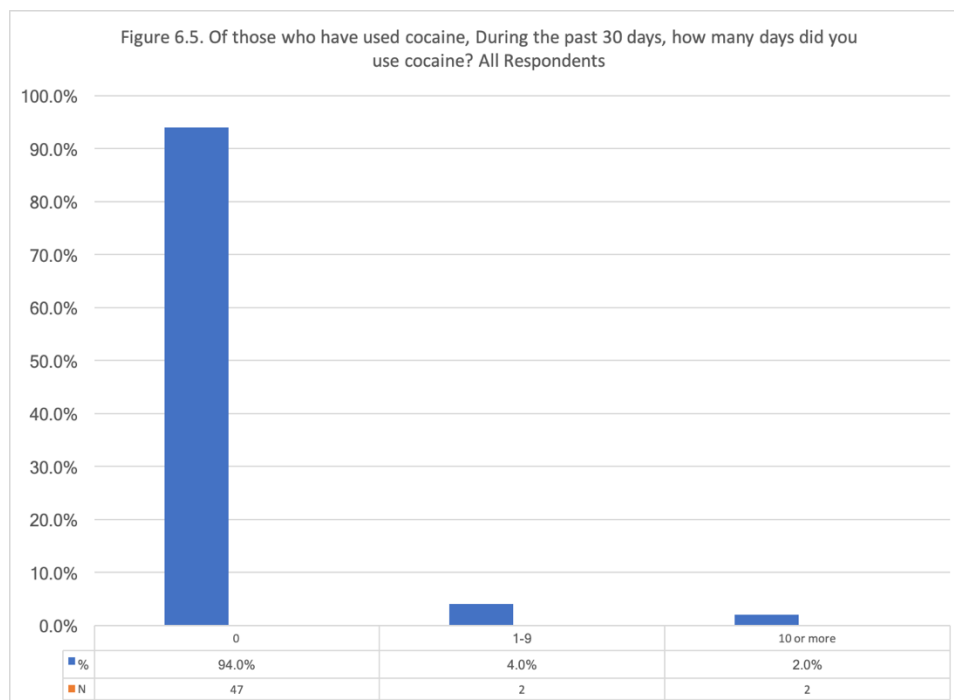
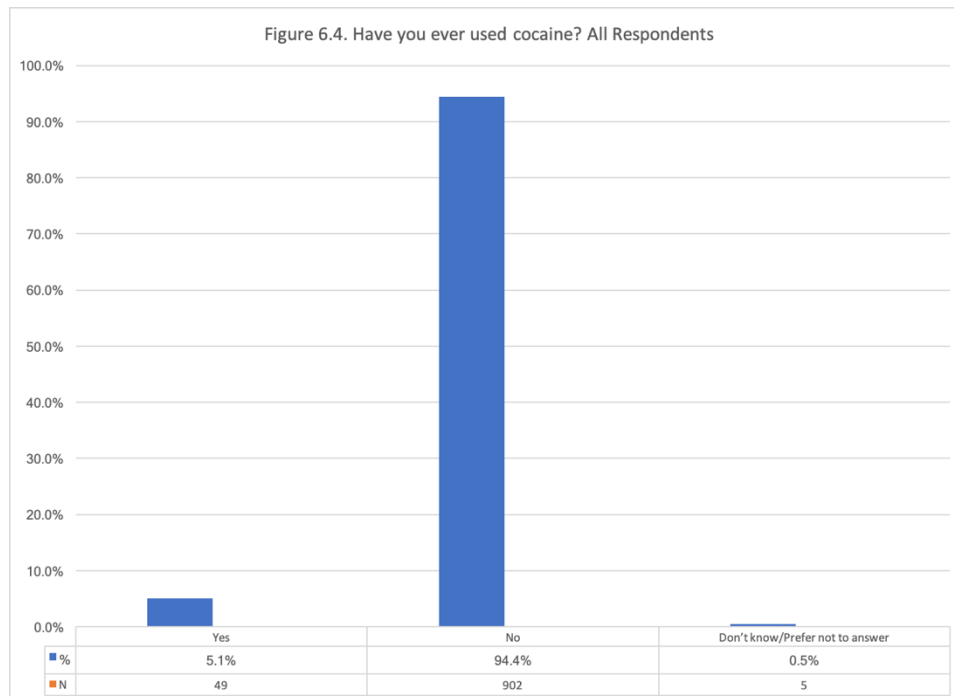
For those who said they used marijuana during the past 30 days, the survey subsequently inquired about the purpose of using it by the following question: “If you used marijuana in the past 30 days, was it for...” For this question, 13.7% of them said they used marijuana for “medical reasons to treat or decrease symptoms of a health condition.” However, 49% of them used marijuana “only for non-medical purposes to get pleasure or satisfaction” and 37.3% of them for “both medical and non-medical reasons” (see **Figure 6.2**). These results suggest that there are more people who use marijuana for recreational purposes rather than medical reasons.



Also, the survey examined how they used marijuana by posing the following question: “During the past 30 days, how did you use marijuana?” Answers from the respondents suggest that smoking marijuana is the most popular method of taking it (51.1%) followed by eating (18.2%), vaporizing (11.4%), dabbing (10.2%), drinking (4.6%), and other methods (4.6%) (see **Figure 6.3**).

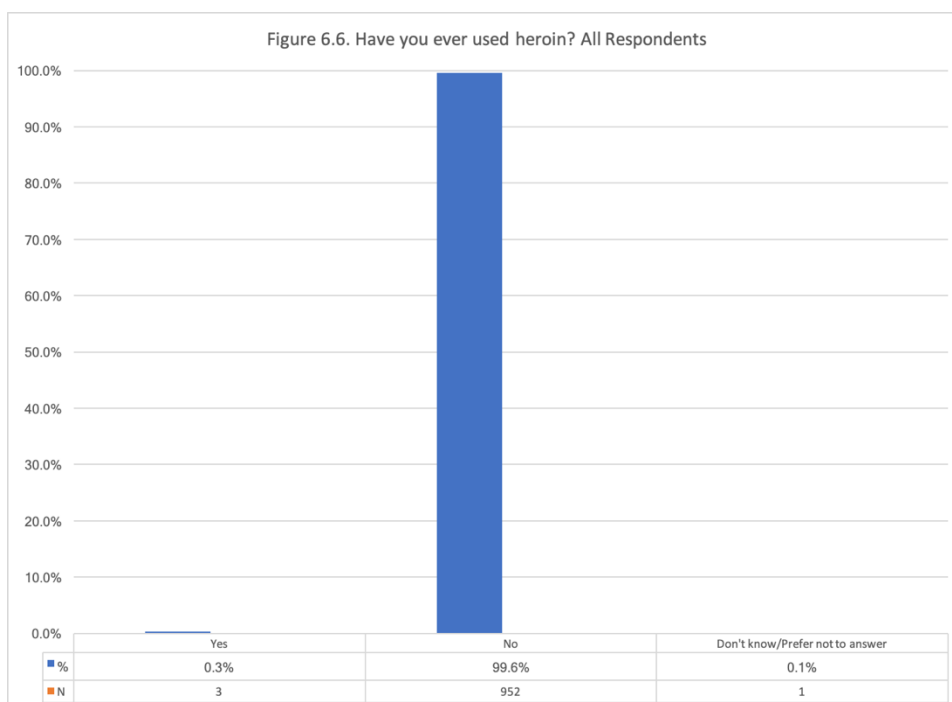


In addition to marijuana, the survey examines respondents' use of cocaine by the following question: "Have you ever used cocaine?" For this question, 5.1% answered with "yes" while 94.4% of them said "no" (see **Figure 6.4**).

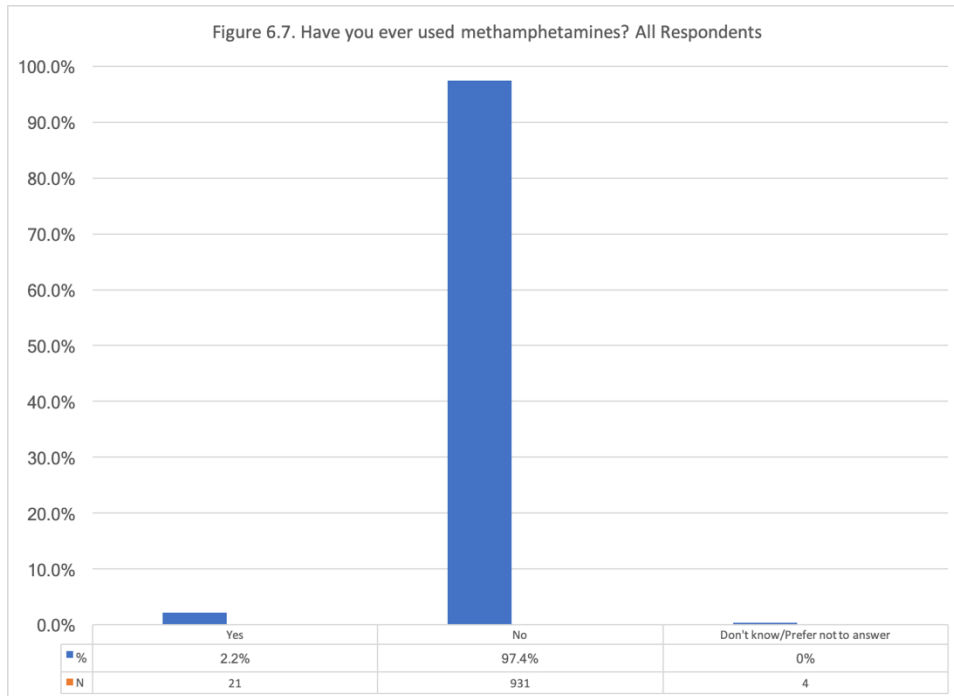


Also, the survey asked the following question: “During the past 30 days, how many days did you use cocaine?” 94% of them picked the choice of “0 times” However, 4.0% of them said they have used cocaine for “1-9 times” and 2.0% of them for “10+ times.” According to these results, while a large majority of people stay away from cocaine, a small portion of them still use cocaine routinely (see **Figure 6.5**).

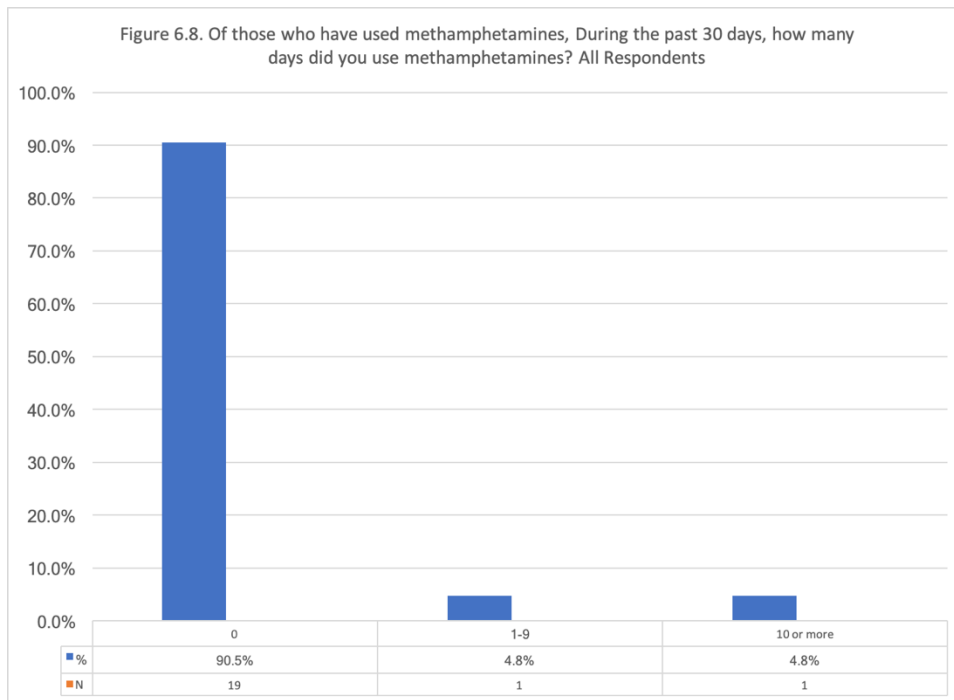
The survey also inquired about the use of heroin among residents in Buffalo County by the following question: “Have you ever used heroin?” For this question, only 0.3% answered that they have used heroin before while the rest of them answered that they have never used heroin (see **Figure 6.6**). Clearly, the use of heroine is not widespread in Buffalo County.



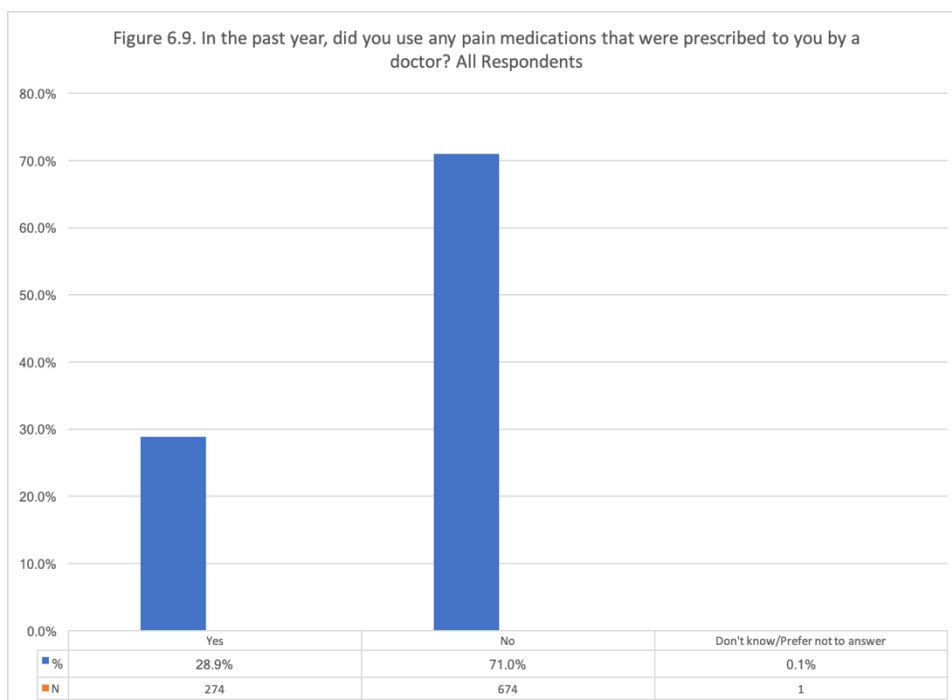
Finally, the survey taps the use of methamphetamines by the following question: “Have you ever used methamphetamines?” The results indicate that 2.2% of the respondents have used methamphetamines before and 97.4% of them have never used them (see **Figure 6.7**).



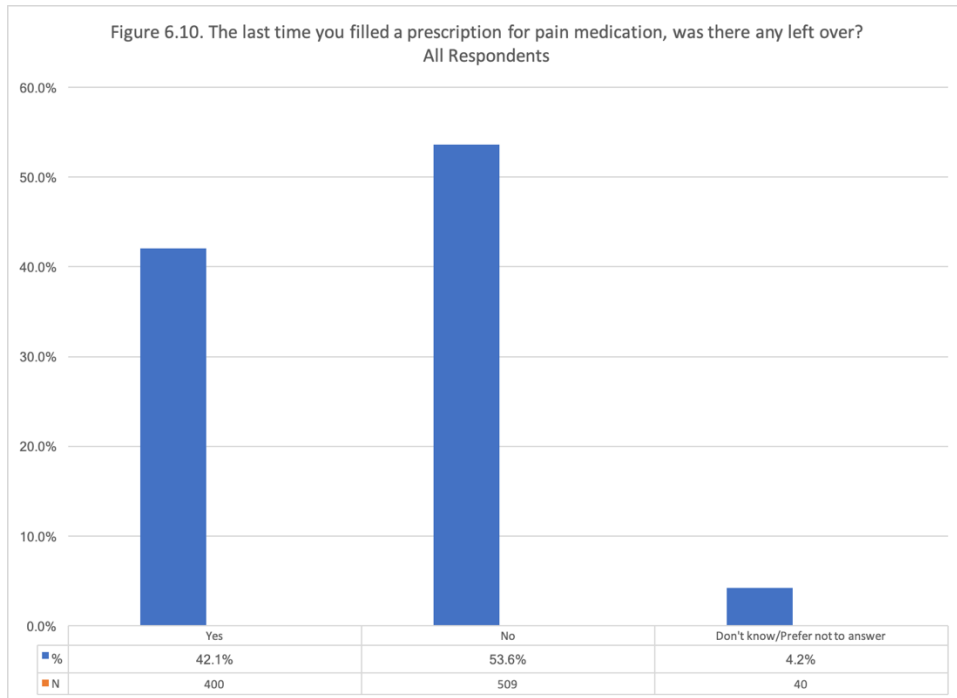
For those who have used methamphetamines before, the survey asked the following question: “During the past 30 days, how many days did you use methamphetamines?” 90.5% of them answered this question with the choice of “0 times” while others have used methamphetamines “1-9 times” (4.8%) and “10+ times” (4.8%) during the past 30 days (**see Figure 6.8**).



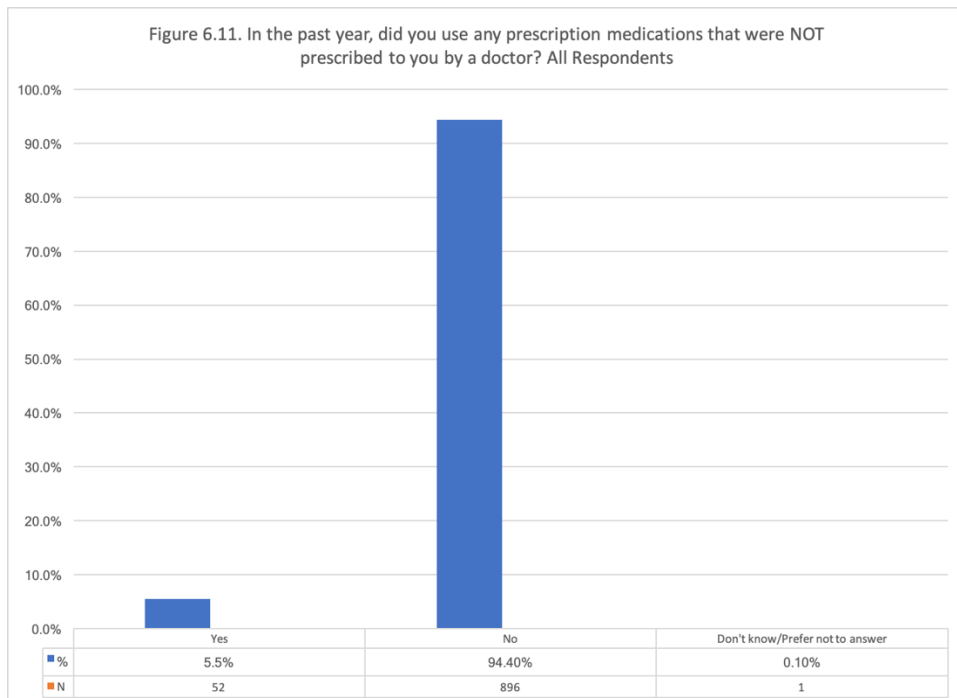
Turning to prescription drugs, the survey asked respondents whether they had been prescribed any pain medications in the past year. As reported in **Figure 6.9**, a sizable majority, 71%, reported receiving no prescriptions for pain medication in the past year, leaving 28.9% who said yes. Although the results are lopsided against potential use of prescription pain medication, we find it noteworthy that almost 3 respondents in every 10 did receive such a prescription. Further, we do not know whether the drugs prescribed are opiates or other forms of analgesic. At this level of analysis, we ought not infer too much from this statistic. We note, though, that it bears monitoring.



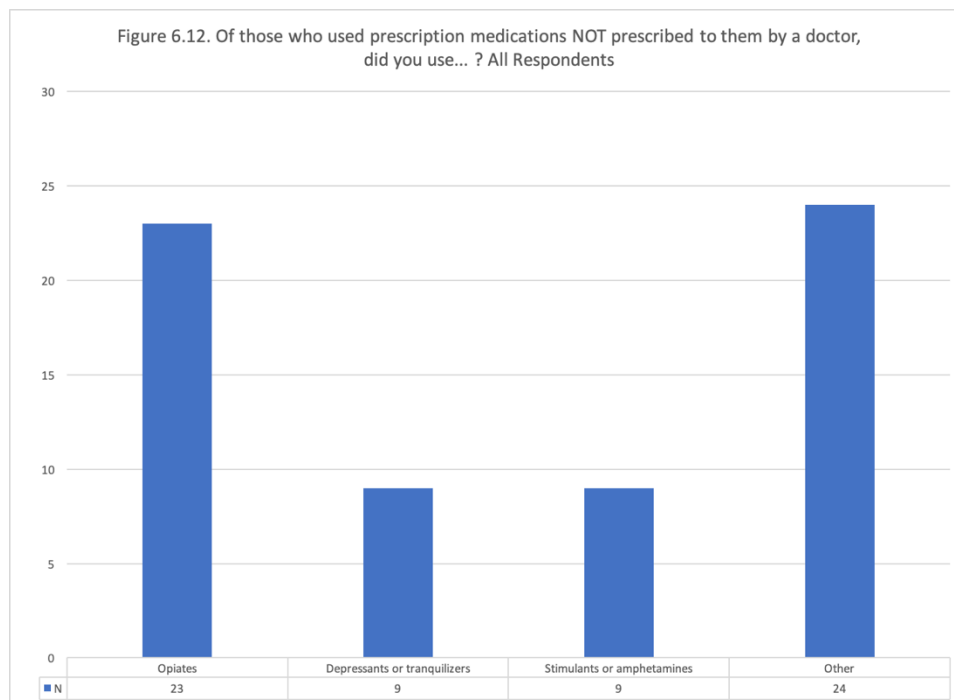
While about 3 in 10 respondents reported receiving a prescription for pain medication in the past year, we see mixed results in the degree to which respondents take all doses in a prescription. The data presented in **Figure 6.10** reveal that 53.6% of respondents report no medicine left over the last time they filled a prescription for pain medication. Note that this does not account only for respondents who received a pain medicine prescription in the past year. This question asked about “the last time,” which could have been in the past year, or at any other time in the past. From a drug abuse prevention standpoint, the large number of people with medicine left over is problematic.



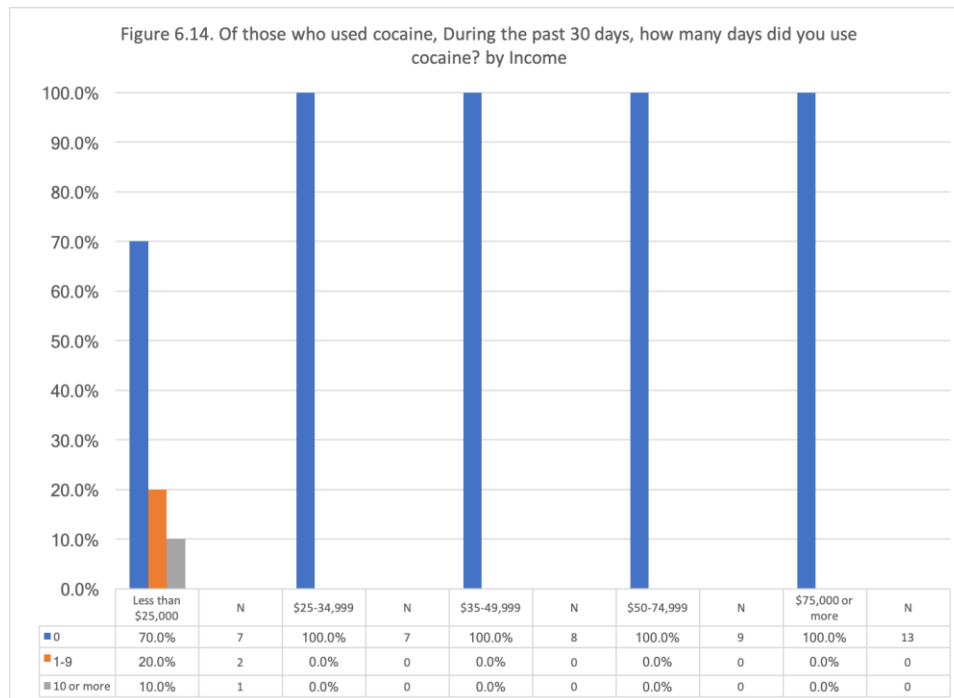
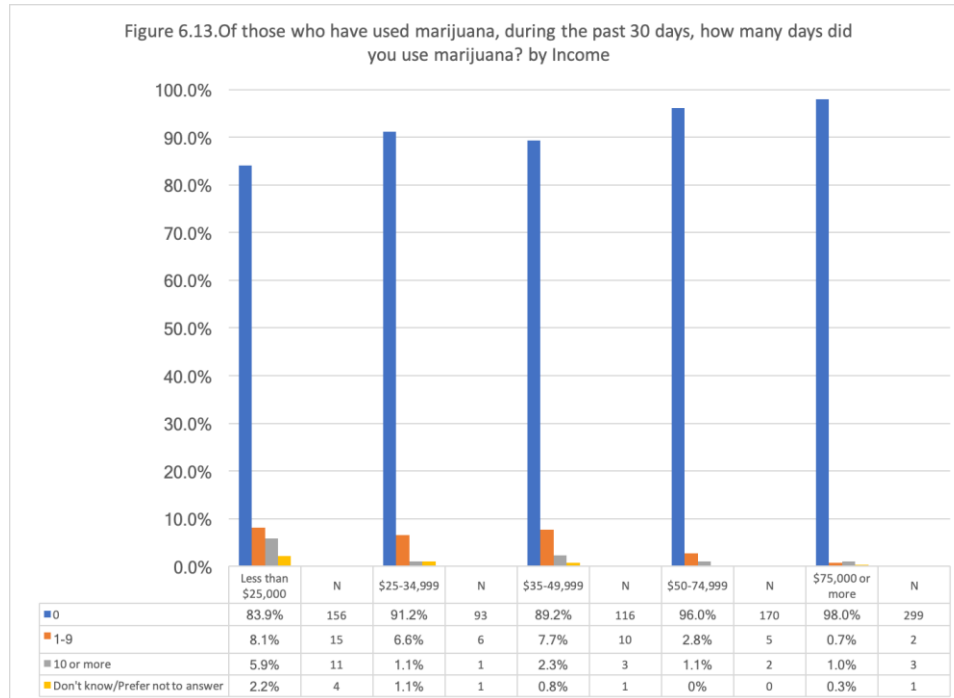
The next question concerns use of prescription medication by persons not named in the prescription. **Figure 6.11** shows that about one in twenty respondents took medications meant for someone else in the past year.



Although only 5.5% of respondents reported taking prescription medications that were NOT prescribed to them, the kinds of drugs those individuals took is concerning. Safely assuming that the respondents in the “Other” category drew from a variety of drugs, the data reported in **Figure 6.12** indicate that a plurality of these respondents took an unprescribed opiate of some form. While it is never advisable to take medicine prescribed for another person, few other drugs pose the public health dangers associated with opioid misuse.



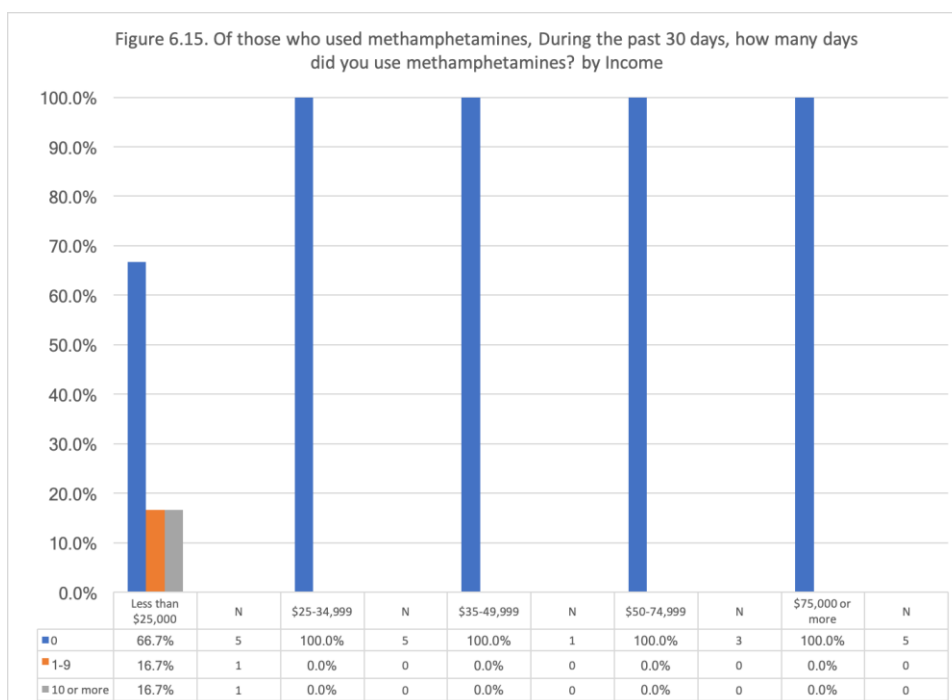
The second part of this module examines the issues of drugs in terms of demographic variables. Among various variables, the results indicate that income is closely related to the use of drugs. For instance, the survey asked the following question: “During the past 30 days, how many days did you use marijuana?” For those whose income is less than \$25,000, 83.9% of the respondents have stayed away from marijuana during the past 30 days. However, the percentage for non-users goes up to 98% for those whose income is \$75,000 or more (see **Figure 6.13**).



One can observe the same tendency regarding the use of cocaine. The survey asked the following question: “During the past 30 days, how many days did you use cocaine?” Among those who make less than \$25,000, 20% of the respondents used cocaine “1-10 times” and

10% of them said they used cocaine “10+ times.” However, none of the respondents who make more than \$25,000 reported that they used cocaine during the past 30 days (see **Figure 6.14**).

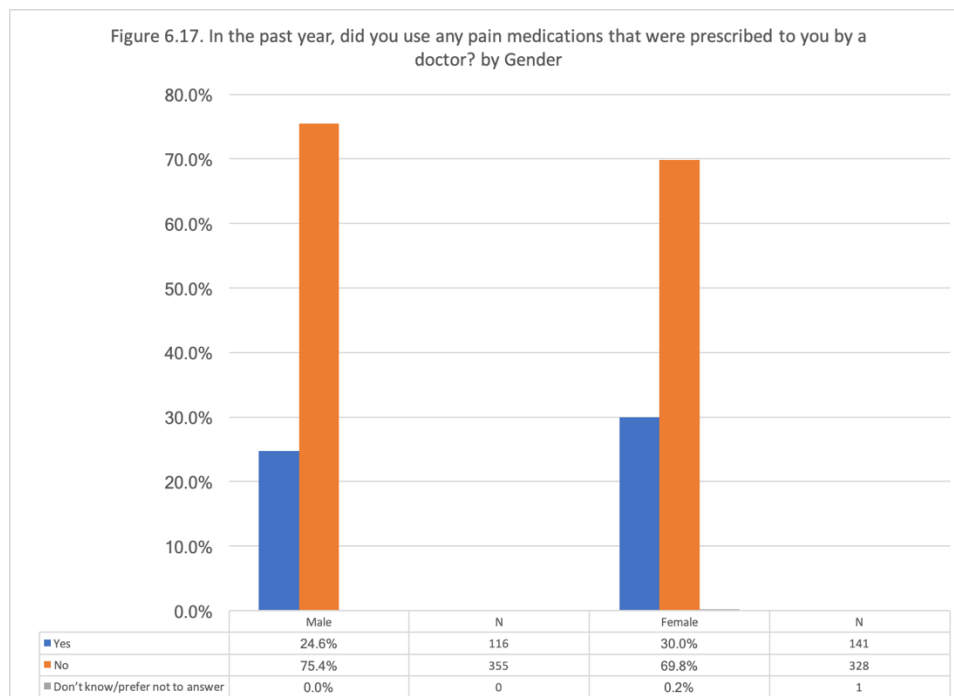
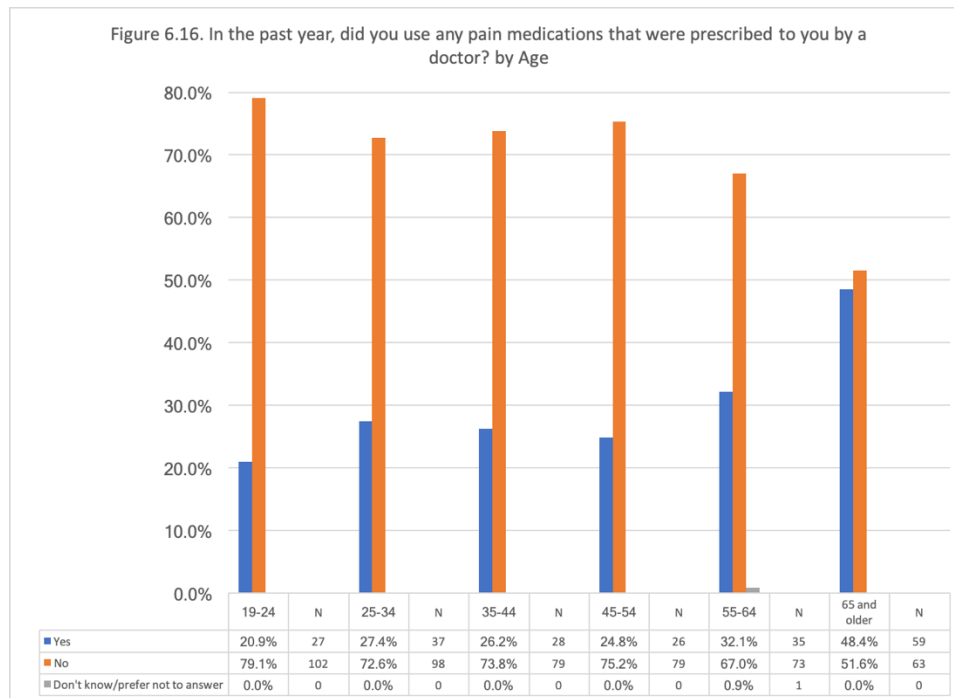
Finally, the results reveal the same pattern regarding the use of methamphetamines. The survey posed the following question: “During the past 30 days, how many days did you use methamphetamines?” For this question, only those whose income is less than \$25,000 indicated that they used methamphetamines one way or another. None of the respondents whose income is over \$25,000 used methamphetamines during the past 30 days (see **Figure 6.15**).



Considering these findings, it is clear that income is closely related to the use of various kinds of drugs. There are two ways of interpreting this relationship. First, it is possible to contend that drugs hinders one’s ability to earn a higher income. Second, one can suggest an opposite causality; those respondents with lower incomes tend to use drugs. Although a more in-depth analysis is needed to verify the causality, it is clear that the use of drugs and income are negatively related.

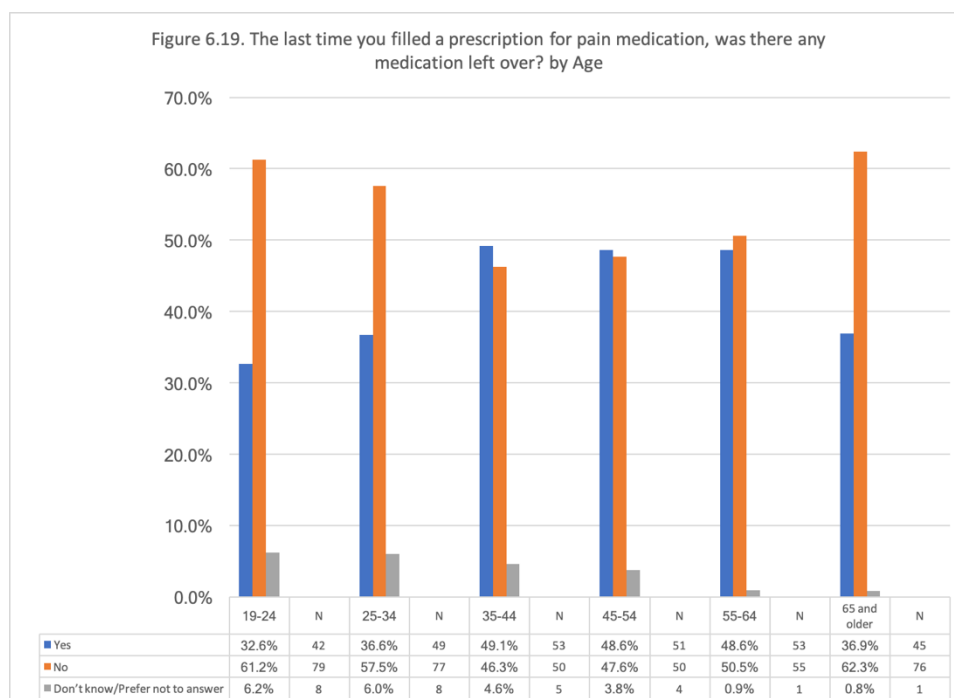
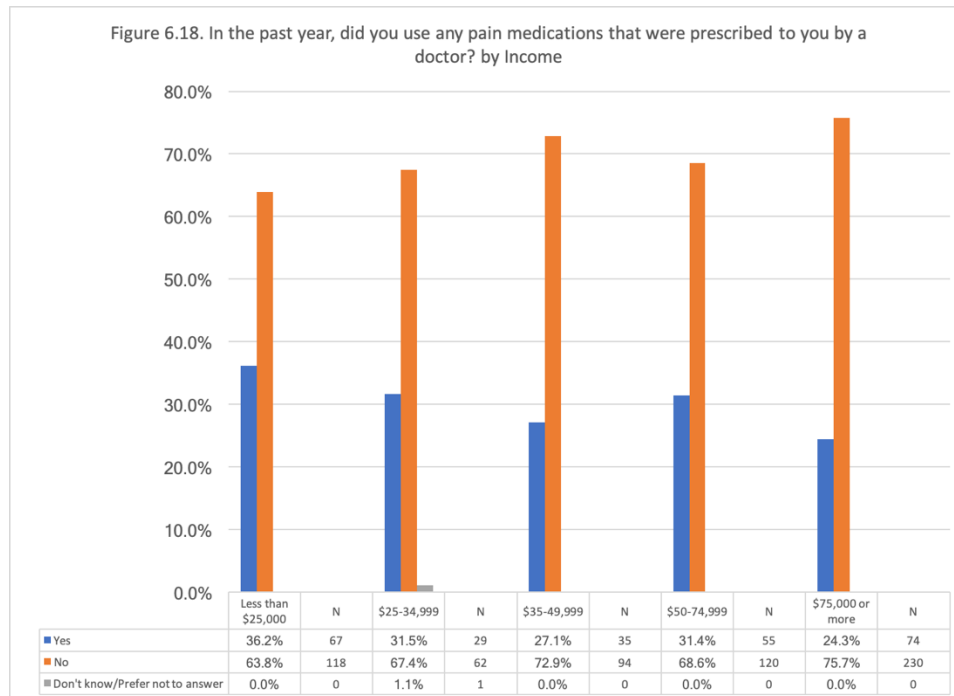
Regarding the use of prescription drugs by specific demographic subgroups, the survey finds a few demographic groups whose reported behavior deviates from the population in significant ways. When it comes to pain medications, the population receiving prescriptions for such drugs skews a little older, a little more female, and a little more low-income than the full body of survey respondents. **Figure 6.16** shows the usage of prescription pain medication in the past 12

months by age group. The data make clear that middle-aged and older respondents have been more frequent recipients of pain medication in the prior 12 months.



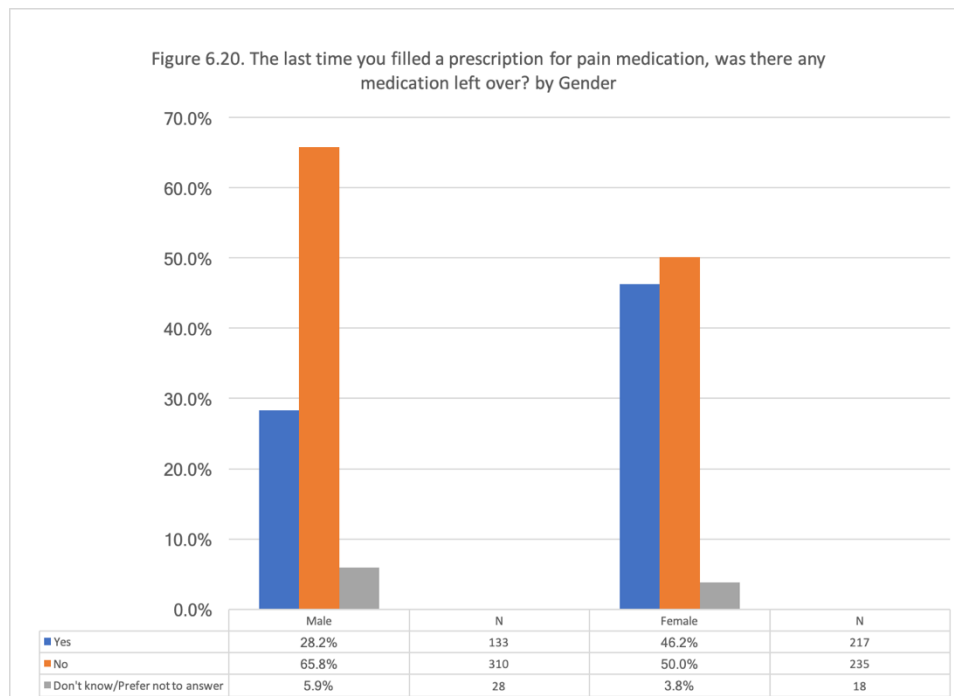
In like manner, female respondents received prescriptions for pain medication more frequently than male respondents. **Figure 6.17** shows the gender breakdown

Finally, when it comes to which demographic subgroups received more prescriptions for pain medication in the previous year, the survey reveals that lower-income groups contributed disproportionately to this population (see **Figure 6.18**).

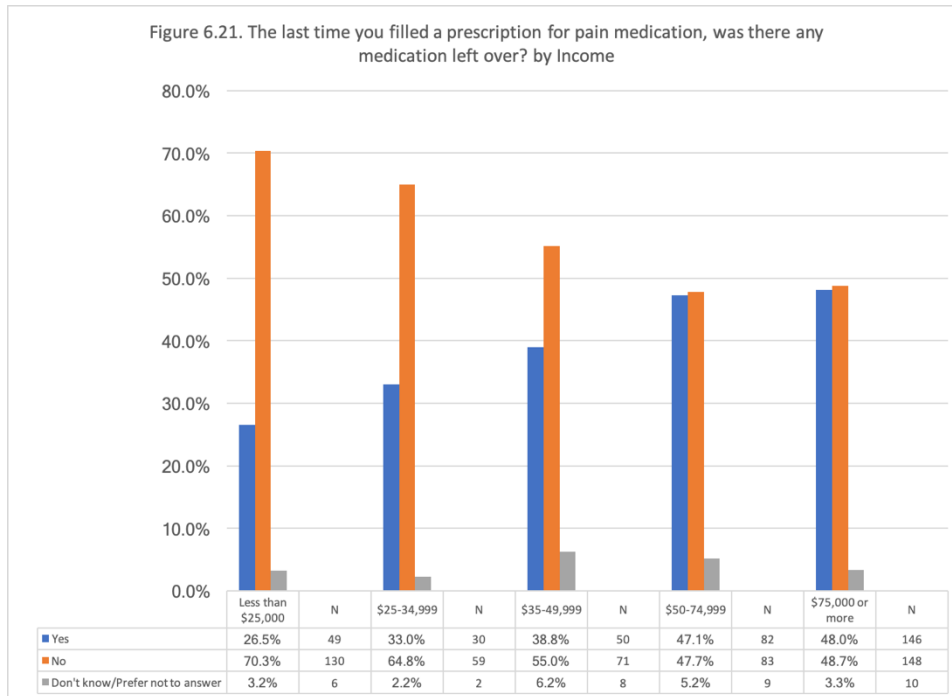


In and of itself, taking prescription pain medication may not pose a public health risk. However, when patients fail to take all of the pills in a prescription, it creates a risk of the medicine coming into the possession of someone who will abuse it. The survey reveals that certain segments of the population are more likely to contribute to this risk than others. Specifically, middle-aged, female, and upper-income groups are more likely than their demographic counterparts to leave unfinished pain medication. **Figure 6.19** presents these data broken down by age.

Figure 6.20 shows that female respondents were more likely than male respondents to have pain medication left over from their last prescription.



To complete the picture on population subgroups that disproportionately failed to take all of their pills from a pain medication prescription, **Figure 6.21** shows the breakdowns by income. The data make pretty clear that failure to complete a prescription correlates with increasing income. What the survey does not tell us is what these individuals did with their leftover pills – whether they were returned to a pharmacy or prescription give-back program, or were left in their homes.



Finally, the survey included a question on taking medications that were NOT prescribed to the respondent. The data reveal that education and race were strong predictors for this misuse of prescription drugs. **Figure 6.22** presents the survey results broken down by education. Although large majorities of respondents did not take prescription drugs NOT prescribed by a doctor, those without a high school diploma were disproportionately willing to engage in this behavior.

With further respect to misuse of prescription drugs, the survey shows significant distinctions based on respondents' race. **Figure 6.23** indicates that white respondents were less likely to take unprescribed prescription drugs than respondents from other races.

Figure 6.22. In the past year, did you use any prescription medications that were NOT prescribed to you by a doctor? by Education

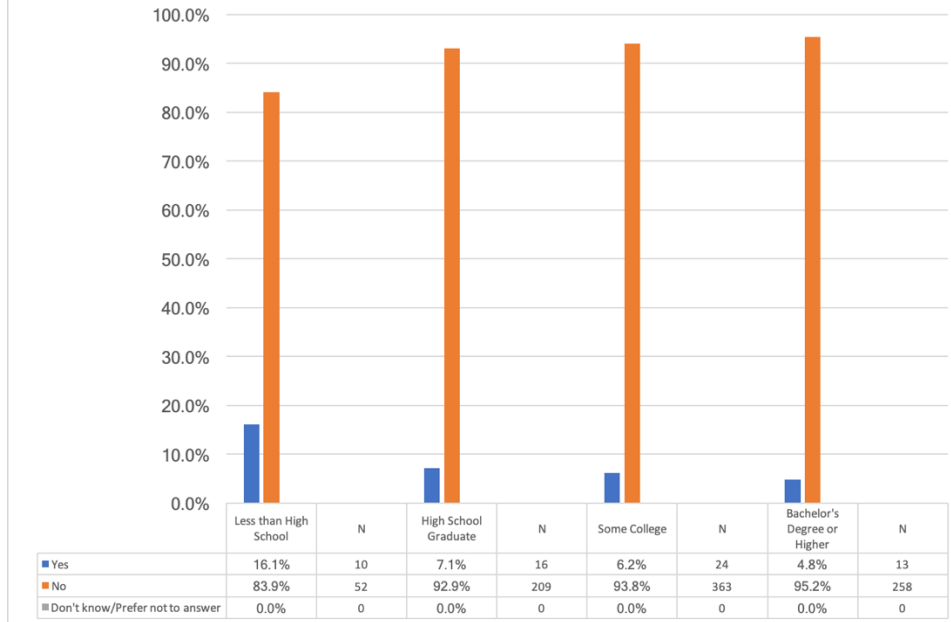
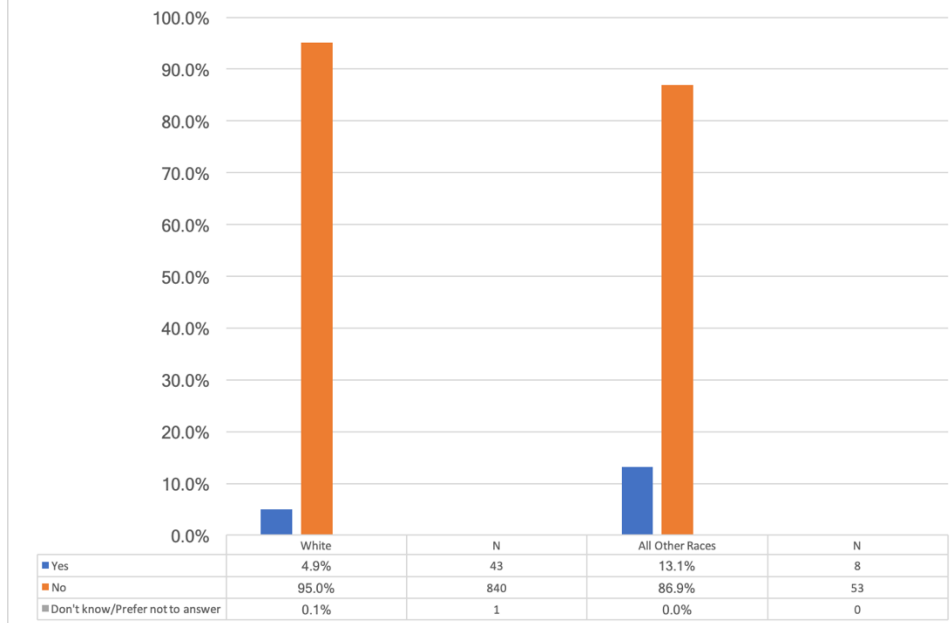
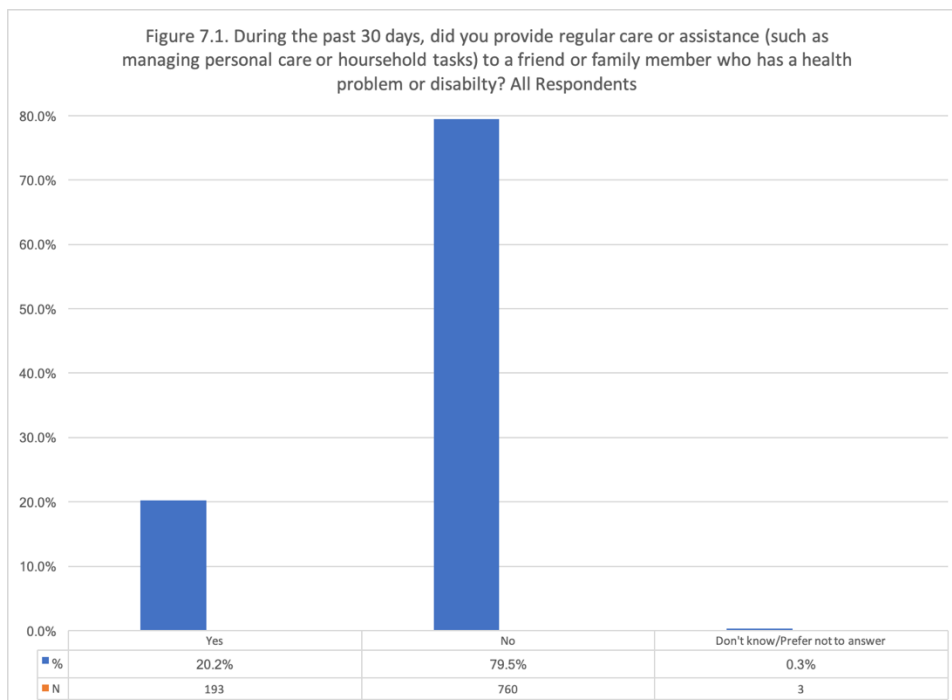


Figure 6.23. In the past year, did you use any prescription medications that were NOT prescribed to you by a doctor? by Race



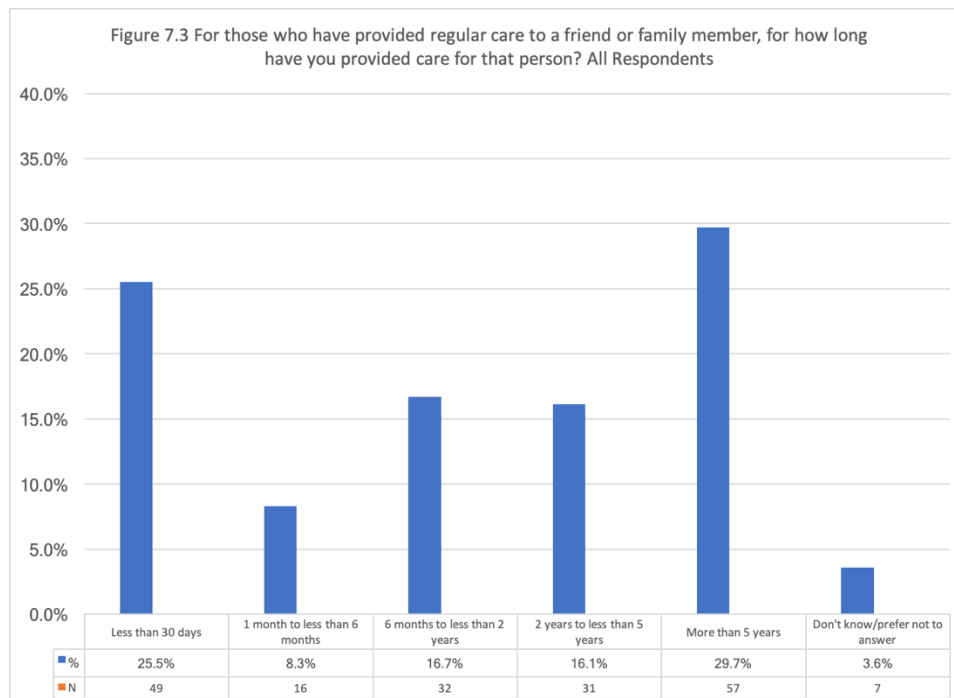
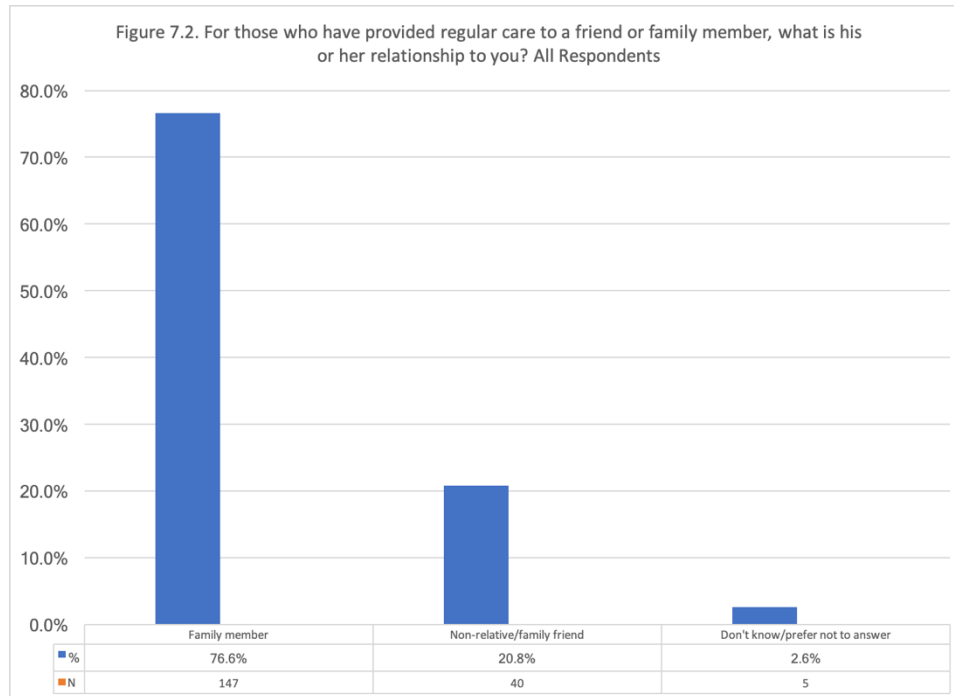
Section 7: Care Providers

The first part of this chapter analyzes county-wide tendencies regarding the issue of caregiving. First, the survey asked the following question: “During the past 30 days, did you provide regular care or assistance (such as managing personal care or household tasks) to a friend or family member who has a health problem or disability?” As reported in **Figure 7.1**, 20.2% of the respondents said “yes” while 79.5% of them answered with “no.”

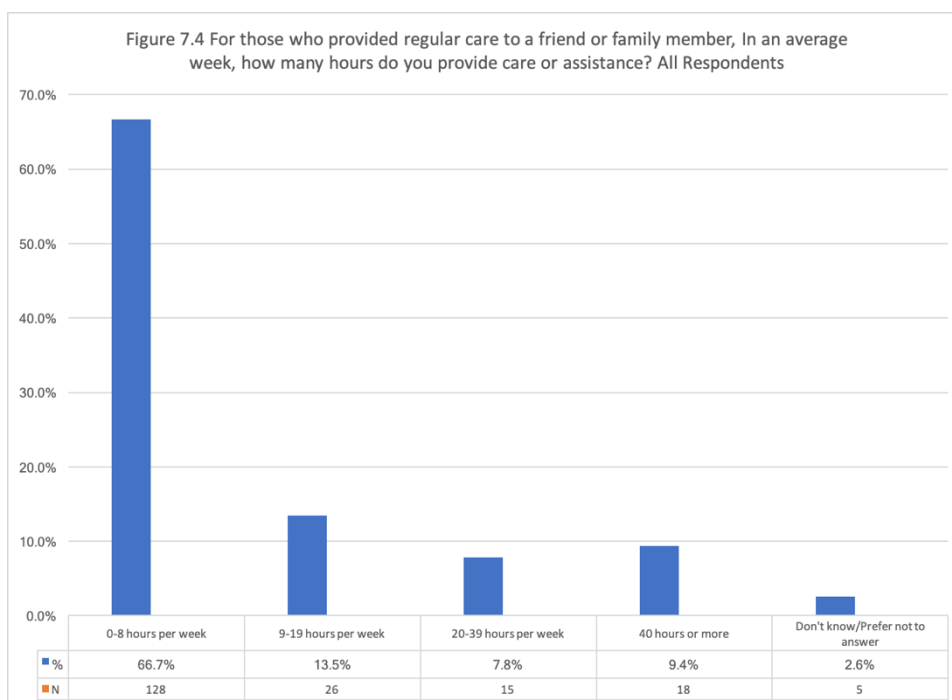


For those who have provided care for others, the survey subsequently asked the following question: “What is his or her relationship to you?” As indicated in **Figure 7.2**, a large majority, 76.6% of the respondents to this question, provided care to “family members,” and 20.8% of them to “non-relative/family friend.”

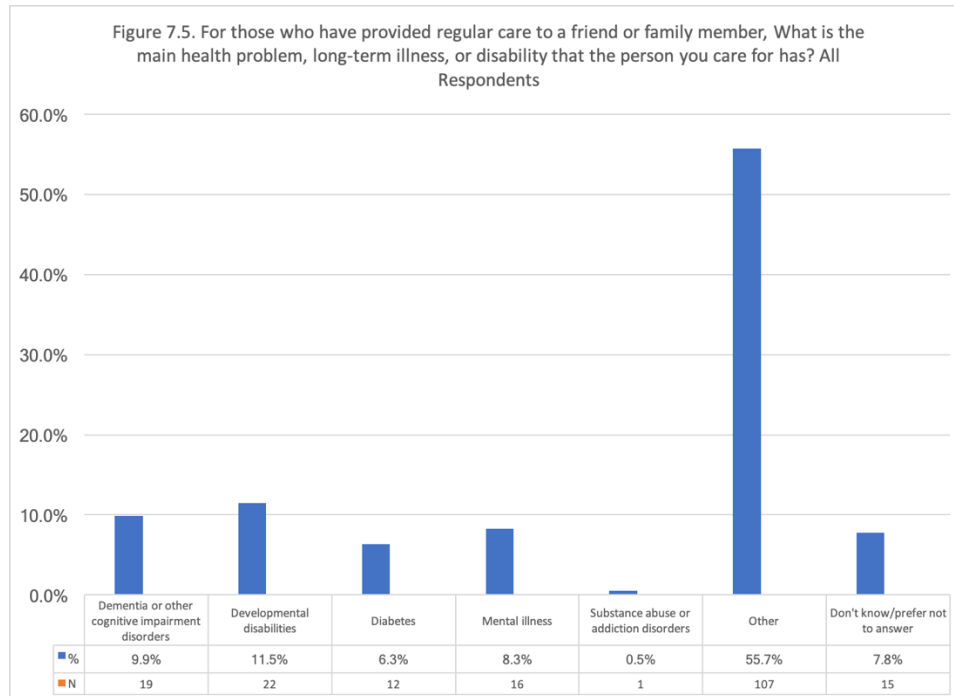
Furthermore, the survey inquired about the length of the period during which respondents provided care by the following question: “For how long have you provided care for that person?” Results are reported in **Figure 7.3**. Two of the most common answers for this question are “less than 30 days” (25.5%) and “more than five years” (29.7%). While some have provided care for a relatively short time, others have engaged in caregiving for longer than five years. That a plurality of respondents have provided care for more than five years suggests two implications for our community: a shortage of alternatives for people in need of care, and an ongoing mental or physical strain on care providers.



In addition to the length of providing care, it is important to capture the hours respondents usually spend providing care by the following question: “In an average week, how many hours do you provide care or assistance?” As reported in **Figure 7.4**, the majority of respondents (66.7%) spend between 0-8 hours per week, and 13.5% of them spend 9-19 hours per week. For about 80% of the respondents, this care occurs on a part-time basis, perhaps making it manageable. However, almost 20% of respondents provide care more than 20 hours per week.



Finally, the survey asked the following question: “What is the main health problem, long-term illness, or disability that the person you care for has?” The most common answer to this question is “other” (55.7%), meaning that respondents in Buffalo County provide care for others who suffer from a wide range of health problems. The data reported in **Figure 7.5** reveal that developmental disabilities, cognitive impairment and mental illness combine to make up more than a quarter of the conditions in need of care.



The second part of this module analyzes respondents' experience of providing care in terms of a series of demographic variables. Two of the demographic variables seem to be closely related to this matter: age and gender. First, it is essential to analyze how age is related to caregiving. The survey asked the following question: "During the past 30 days, did you provide regular care or assistance (such as managing personal care or household tasks) to a friend or family member who has a health problem or disability?" From the answers to this question reported in **Figure 7.6**, we see a strong relationship between respondents' age and caregiving. For the age group of 19-24, 16.2% of the respondents provided care for others. In the same manner, 11.9% of those respondents whose age is 25-34 engaged in caregiving. However, the percentage goes up for older cohorts: 27.3% for the age group of 55-64 and 30.1% for those who are 65 and older. As respondents get older, they are more likely to be in a position to provide care for others.

The relationship between age and the length of care is also important. The survey asked the following question: "For how long have you provided care for that person?" Respondents' answers for this question significantly vary depending on their ages. For instance, only 12.5% of the respondents whose ages are 25-34 provide care for longer than 5 years. However, the percentage significantly increases as respondents get older: 46.7% (age: 55-64) and 30.6% (age: 65 and older). As these results show, respondents' age seems to be closely related to their experience of caregiving. The results reported in **Figure 7.7** suggest that once adults reach age 35, the duration of caregiving reaches a tipping point, where they can expect to be providing care for a significant number of years. While a larger number of people older than 65 provide care to friends or family members, the duration of that care is generally shorter than that experienced by the age 55-64 cohort.

Figure 7.6. During the past 30 days, did you provide regular care or assistance (such as managing personal care or household tasks) to a friend or family member who has a health problem or disability? by Age

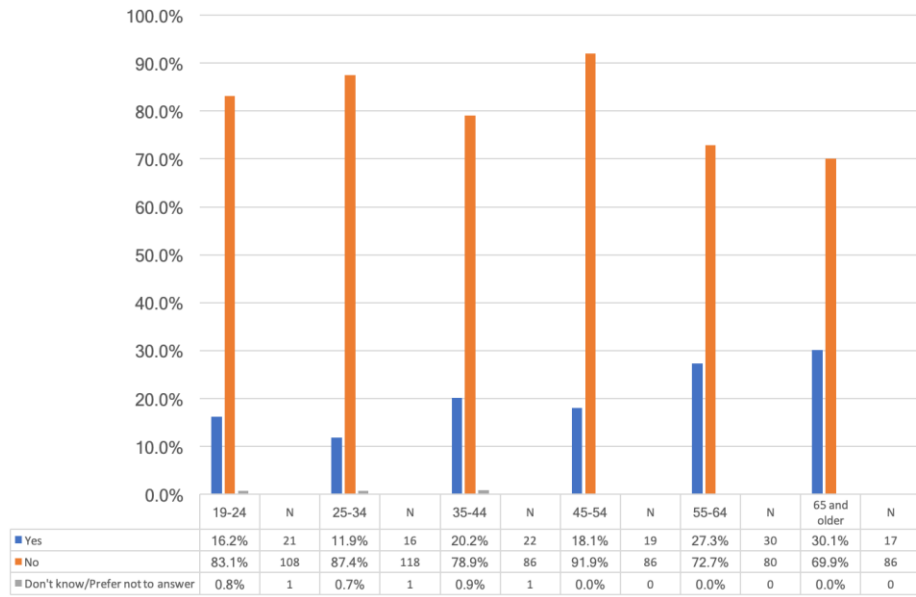
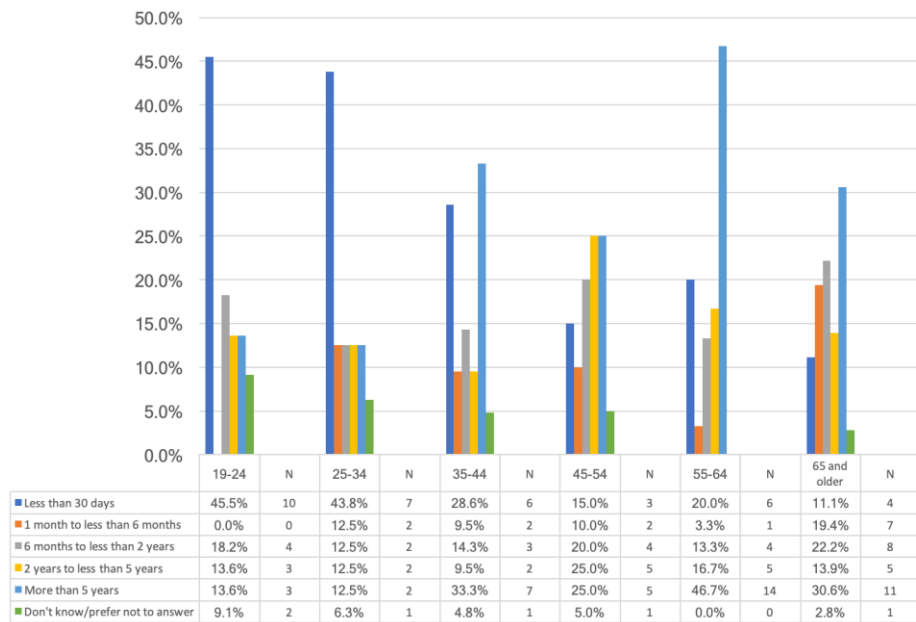
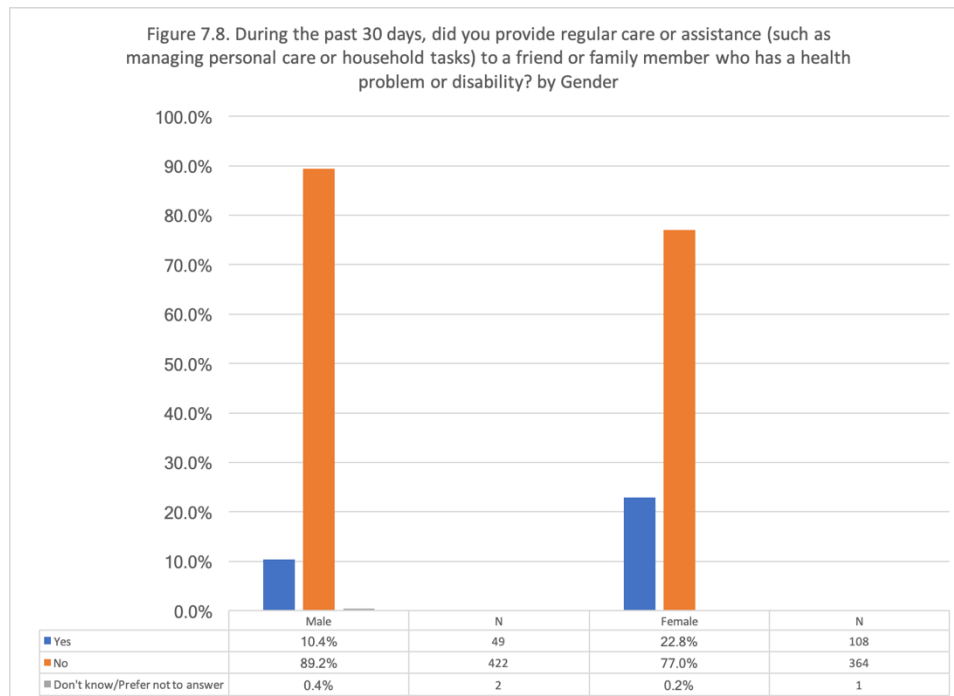


Figure 7.7. For those who provided regular care to a friend or family member, For how long have you provided care for that person? by Age



In addition to age, we find a relationship between gender and caregiving. The survey asked the following question: “During the past 30 days, did you provide regular care or assistance (such as managing personal care or household tasks) to a friend or family member who has a health problem or disability?” (see **Figure 7.8**). For this question, 22.2% of the female respondents chose “yes,” while only 10.4% of the male respondents provided care for others, suggesting that females are more likely to engage in caregiving than males. However, the relationship between gender and caregiving is not straightforward.



In order to capture the length of caregiving as experienced by men and women, the survey posed the following question: “For how long have you provided care for that person?” For this question, as reported in **Figure 7.9**, 32.6% of the male respondents noted that they have provided care for more than 5 years, while the percentage for the female respondents is 27.8%.

In a similar manner, the survey inquired about the hours of caregiving each week in the following manner: “In an average week, how many hours do you provide care or assistance?” while a majority of caregivers of both sexes do so on a part-time basis (see **Figure 7.10**), 13% of male respondents mentioned that they provide care for 40 hours per week or more. In contrast, 8.3% of females said they spend 40 hours per week or more on caregiving. As these results show, the relationship between gender and caregiving seems to be rather complex. Neither men nor women can be said to bear the burden of caregiving alone. More women than men care for a friend or relative, but men seem to do so more intensely: for a longer period of time and for longer hours in a week.

Figure 7.9. For those who provided regular care for a friend or family member, For how long have you provided care for that person? by Gender

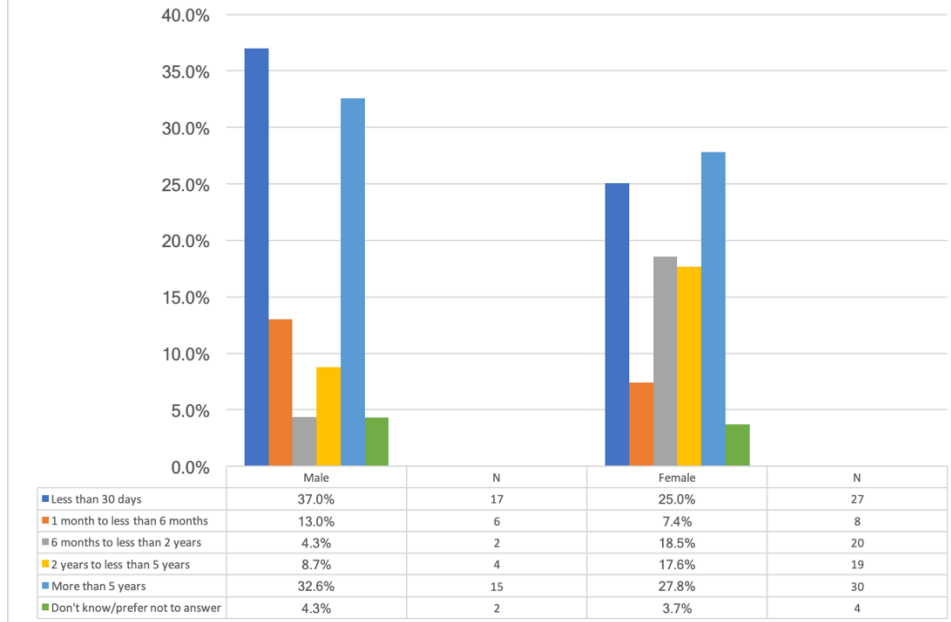
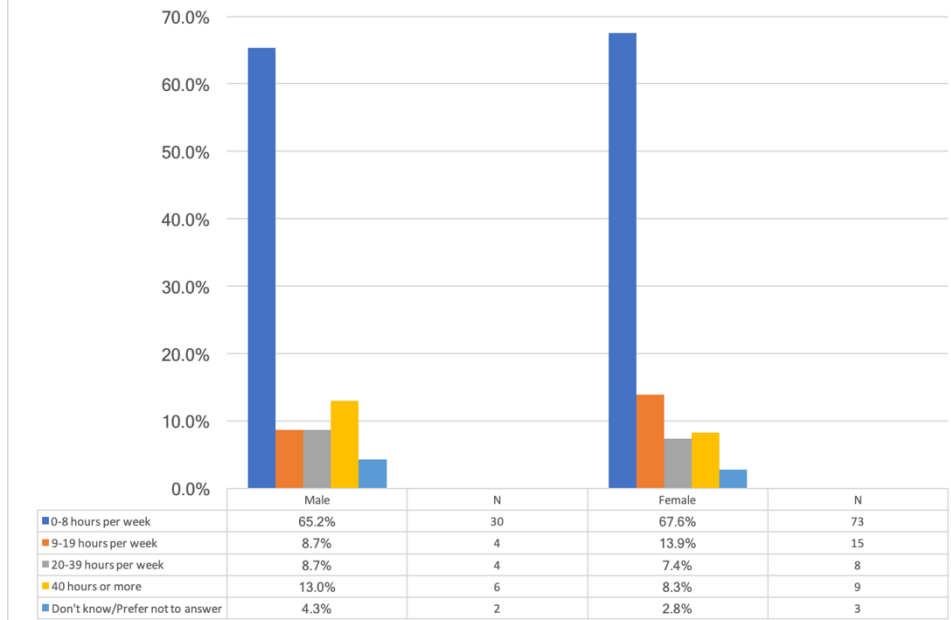
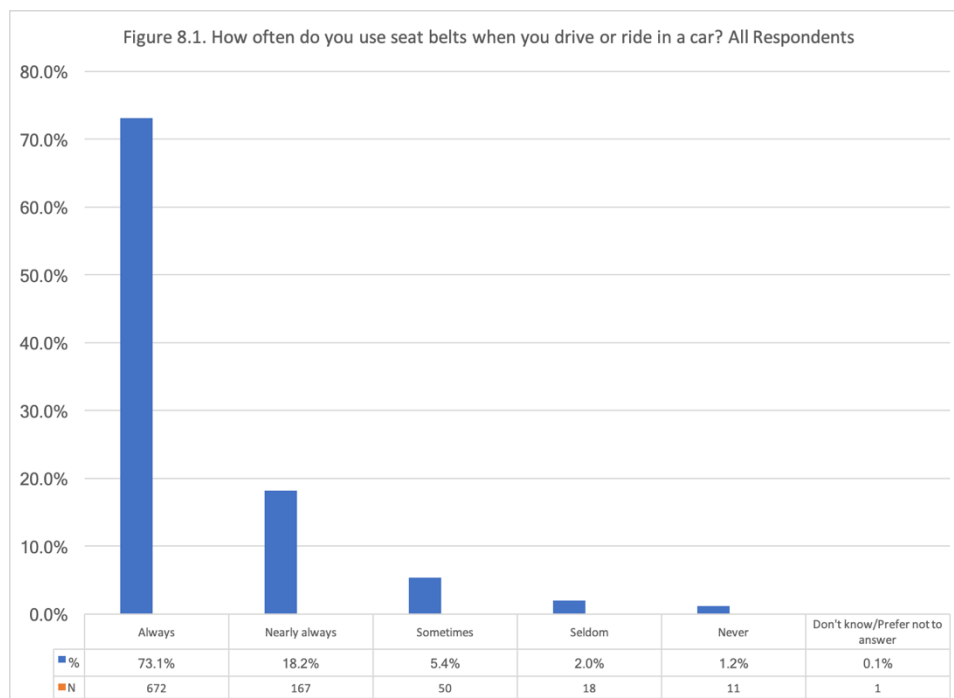


Figure 7.10. For those who provided regular care to a friend or family member, In an average week, how many hours do you provide care or assistance? by Gender

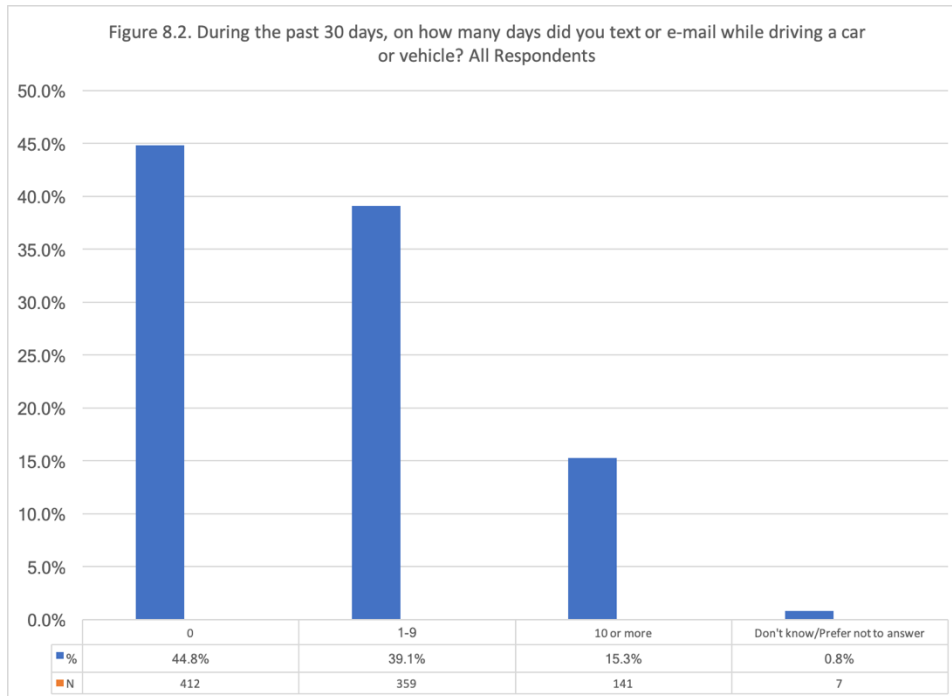


Section 8: Driving Safety

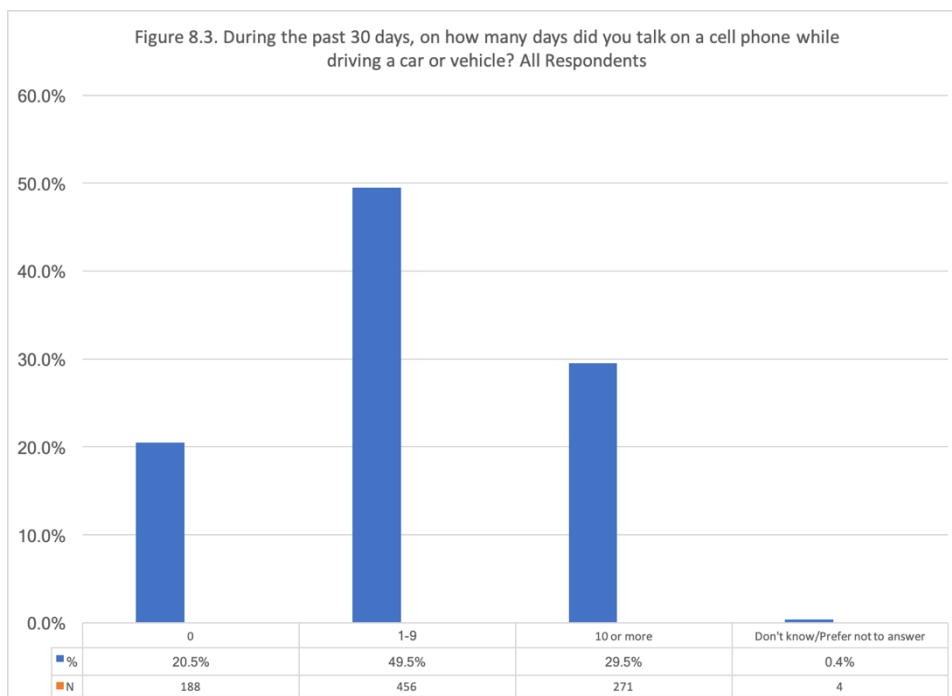
The first part of this module analyzes respondents' general behavior about driving. The first question in this chapter is about the use of seat belts. The survey posed the following question: "How often do you use seat belts when you drive or ride in a car?" For this question, 73.1% of the respondents answered with the choice of "always" and 18.2% of them said "nearly always" (**Figure 8.1**). These results suggest that the large majority of the respondents almost never fail to wear seat belts when they drive, suggesting the wide use of seat belts among the residents in Buffalo County.



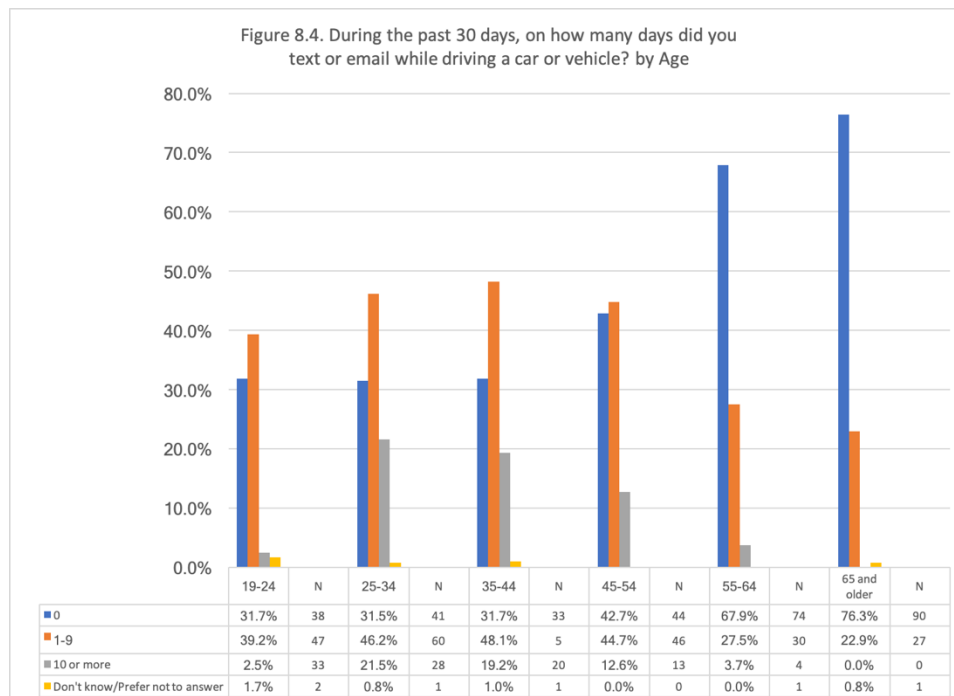
The second question in this module concerns texting or emailing while driving. The survey examined respondents' behavior on this matter by asking the following question: "During the past 30 days, on how many days did you text or e-mail while driving a car or vehicle?" For this question, 44.8% of the respondents answered this question by using "0 times", showing that they never text or email while driving. However, 39.1% of the respondents used the choice of "1-9 times" and 15.3% of them employed the choice of "10+ (days)" (see **Figure 8.2**). These results suggest that the majority of the respondents tend to text or email while they are driving.



Finally, the survey asked if respondents talk on the phone while driving or not by the following question: “During the past 30 days, on how many days did you talk on a cell phone while driving a car or vehicle?” For this question, only 20.5% of the respondents chose “0 times.” 49.6% of the respondents answered this question with the choice of “1-9 times” and 29.5% of them adopted the choice of “10+ times” (see **Figure 8.3**) These results suggest that almost 80% of the respondents tend to engage in phone conversations while driving one way or another.

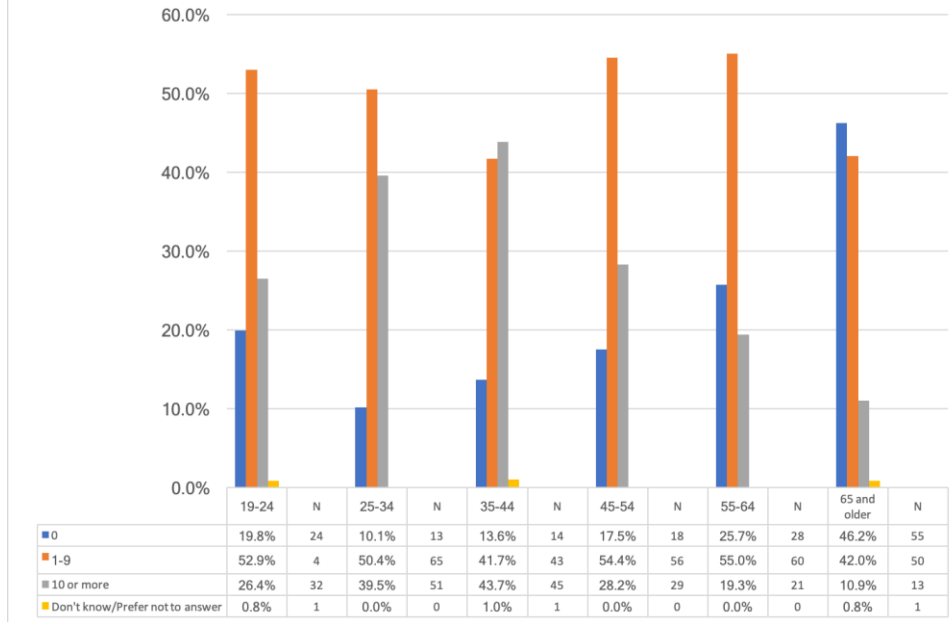


The second part of this module dissects respondents' behavior on driving in terms of a demographic variable. Among a series of demographic variables, age significantly affects respondents' behavior in driving. In order to explore how age is related to texting and emailing while driving, the survey posed the following question: "During the past 30 days, on how many days did you text or e-mail while driving a car or vehicle?" For the age group of 25-34, 21.5% of the respondents used the choice of "10+ times." However, the figure tends to be lower for older cohorts. Only 3.7% of the respondents who are in the age group of 55-64 chose "10+ times" for this question. For those who are 65 and older, nobody picked the answer of "10+ times" (see **Figure 8.4**).



We observe the same tendency regarding phone conversations while driving. The survey asked the following question: "During the past 30 days, on how many days did you talk on a cell phone while driving a car or vehicle. Among those respondents who are in the age group of 25-34, 39.5% of them answered this question using "10+ times." For those whose ages are 35-44, 43.7% of them chose "10+ times." These age groups show a particularly high tendency to talk on the phone while driving. However, for the age group of 65 and older, the percentage drops down to 10.9%, which is significantly lower than those of younger counterparts (see **Figure 8.5**). These results suggest a clear tendency regarding driving safety; younger drivers are more likely to engage in behavior that undermines driving safety. Considering these results, it is beneficial to further examine the relationship between age and the issue of driving safety.

Figure 8.5. During the past 30 days, on how many days did you talk on a cell phone while driving a car or vehicle? by Age



Section 9: Support for Children and Young Adults

Adults play an important role in guiding the behavior of youth/young adults. Therefore, the survey examined respondents' opinions about supporting children by posing the following question: "At what age is it most important to support physical, intellectual, and social-emotional development in children?" Respondents answered this question by choosing the following items: "0-8 years old" (76.8%), "9-13 years old" (13.6%), and "14-18 years old" (3.8%). The results reported in **Table 9.1** show that the majority of the respondents think it is critical to support children who are 0-8 years old. Those respondents highlight the importance of supporting children at the earlier stage of their growth.

Table 9.1. At what age is it most important to support physical, intellectual and social-emotional development in children? All Respondents

Response	%	N
0-8 years old	76.8%	706
9-13 years old	13.6%	125
14-18 years old	3.8%	35
Don't know/Prefer not to answer	5.8%	53

It is important to capture respondents' perceptions to various issues in terms of mentoring youth/young adults. Accordingly, the survey asked the following question: "As an adult you have the ability to mentor youth/young adults. Please rank the following topics of conversation to have with youth/young adults in order of importance with 1 being the most important and 7 being the least." For this question, the survey provided the following items: "Emotional Abuse/Controlling Behaviors (blaming, accusing, restricting freedom)," "Technology Abuse (calling/texting repeatedly, cyber bullying)," "Verbal Abuse (name-calling, yelling or shouting)," "Sexual Activity (consent, risky sexual behavior, forced sexual contact)," "Physical Abuse (hitting, restraining, pushing, slapping)," "Substance Use (alcohol, tobacco, and other drugs)," and "Mental Health Wellness (depression, anxiety, self-harm, etc.)." By examining the rank order that the respondents provided, it is possible to capture what respondents consider important in mentoring youth/young adults. **Table 9.2** reports the percentage of the respondents who gave the choice of "1" to the following issues is as follows: Mental health wellness (29.1%), emotional abuse/controlling behaviors (19.9%), sexual activity (17.6%), physical abuse (14.2%), substance use (11.0%), technology abuse (7.1%), and verbal abuse (4.7%). As these results show, a high percentage of the respondents think the issue of mental health is very important (29.1%). Closely related to this issue, 19.9% of the respondents consider the issue of emotional abuse and controlling behaviors very important. These results reflect high levels of interest in the issues related to mental health.

Table 9.2. Percentage of respondents ranking each item as most important topic of conversation to have with youth and young adults. All Respondents

Topic	% ranking #1	N ranking #1
Mental health wellness (depression, anxiety, self-harm, etc.)	29.1%	241
Emotional abuse/controlling behaviors (blaming, accusing, restricting freedom)	19.9%	159
Sexual activity (consent, risky sexual behavior, forced sexual contact)	17.6%	141
Physical abuse (hitting, restraining, pushing, slapping)	14.2%	113
Substance use (alcohol, tobacco, and other drugs)	11.0%	88
Technology abuse (calling/texting repeatedly, cyber bullying)	7.1%	57
Verbal abuse (name-calling, yelling or shouting)	4.7%	38

Furthermore, the survey asked the following question: “In reference to the healthy relationship topics in the previous question, which have you had conversations about with youth/young adults?” Respondents were asked to mark the topics that they discussed with youth/young adults, and could mark all that apply. The results are shown in **Table 9.3** as follows: Mental health wellness (45.5%), emotional abuse/controlling behaviors (44.6%), verbal abuse (44.0%), technology abuse (39.5%), physical abuse (36.8%), and substance use (42.7%). These results indicate that less than half of the respondents have discussed these issue with youth/young adults. One of the reasons why these percentages are low is because the survey includes a large number of respondents who are young themselves and do not have children.

Table 9.3. Percentage who discussed each topic with youth/young adults. All Respondents

Topic	% who have discussed topic	N who have discussed topic
Mental health wellness (depression, anxiety, self-harm, etc.)	45.5%	503
Emotional abuse/controlling behaviors (blaming, accusing, restricting freedom)	44.6%	493
Verbal abuse (name-calling, yelling or shouting)	44.0%	486
Substance use (alcohol, tobacco, and other drugs)	42.7%	472
Technology abuse (calling/texting repeatedly, cyber bullying)	39.5%	437
Sexual activity (consent, risky sexual behavior, forced sexual contact)	37.1%	410
Physical abuse (hitting, restraining, pushing, slapping)	36.8%	407
None of the above	15.7%	173

Appendix

Buffalo County Community Partners Adult Behavioral Risk Factor Survey

You are invited to participate in this research study. The following information is provided to help you to make an informed decision whether or not to participate. Participation in this study will require approximately 10 minutes of your time.

You are eligible to participate if you are at least 19 years old and currently reside in Buffalo County, Nebraska. The survey does not ask for any identifying information. Your IP address will not be connected to your specific responses or shared by SurveyMonkey with the researchers. You are free to decide not to participate in this study or to withdraw at any time. If you have any questions, please contact the investigators listed below.

The purpose of this study is to collect information on the health status and health risk factors of Buffalo County residents. The information gained may help us to better understand what public health risks are prevalent in Buffalo County, and to plan educational or health programming to address those risks. By completing the survey, you are performing an important community service, and helping build a healthier Buffalo County.

Investigators Dr. Diane L. Duffin (duffind@unk.edu) Dr. Satoshi Machida (machidas1@unk.edu) Dr. Charles M. Rowling (rowlingcm@unk.edu) Department of Political Science University of Nebraska at Kearney

1. By clicking "Yes" below, you are voluntarily making a decision to participate in this study. This certifies that you have decided to participate, having read and understood the information presented. If you have decided not to participate, please select "No" to exit out of the survey.

Yes

No

2. Which of the following zip codes do you live in?

68812 – Amherst

68836 – Elm Creek

68840 – Gibbon

68845 – Kearney

68847 – Kearney

68848 – Kearney

68849 – Kearney

68858 – Miller

68861 – Odessa

68866 – Pleasanton

68869 – Ravenna

68870 – Riverdale

68876 – Shelton

I don't live in any of these zip codes (exit survey)

3. Would you say that, in general, your health is...

Excellent

Very good

Good

Fair

Poor

Don't know/ Prefer not to answer

4. Now thinking about your physical health, which includes physical illness and injury, how many days during the past 30 days was your physical health fair or poor?

0

1-9

10+

Don't know/ Prefer not to answer

5. During the past 30 days, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

Yes

No

Don't know/ Prefer not to answer

6. During the past 30 days, how many days did poor physical or mental health keep you from doing your

usual activities, such as self-care, work, or recreation?

0

1-9

10+

Don't know/ Prefer not to answer

7. During the past 30 days, how many days did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?

0

1-9

10+

Don't know/ Prefer not to answer

8. Now thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health fair or poor?

0

1-9

10+

Don't know/ Prefer not to answer

9. During the past 30 days, how many days have you felt sad, blue, or depressed?

0

1-9

10+

Don't know/ Prefer not to answer

10. During the past 30 days, how many days have you felt worried, tense, or anxious?

0

1-9

10+

Don't know/ Prefer not to answer

11. During the past 30 days, how many days have you felt very healthy and full of energy?

0

1-9

10+

Don't know/ Prefer not to answer

12. Has a doctor, nurse, or other health professional ever told you that you have a depressive disorder, including major depression, dysthymia, or minor depression?

Yes

No

Don't know/ Prefer not to answer

13. Are you now taking prescribed medication or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?

Yes

No

Don't know/ Prefer not to answer

14. What is your gender?

Male

Female

Don't know/ Prefer not to answer

15. To your knowledge, are you now pregnant?

Yes

No

Don't know/ Prefer not to answer

16. What is your age?

19-24

25-34

35-44

45-54

55-64

65 and above

Don't know/ Prefer not to answer

17. Are you Hispanic, Latino/a, or Spanish Origin?

Yes

No

Don't know/ Prefer not to answer

18. If Hispanic, Latino/a, or Spanish Origin

Mexican, Mexican American, Chicano/a

Puerto Rican

Cuban

Another Hispanic, Latino/a, or Spanish Origin

Don't know/ Prefer not to answer

19. Which one of these groups would you say best represents your race?

White

Black or African American

American Indian or Alaska Native

Asian

Pacific Islander

Don't know/ Prefer not to answer

Other (please specify)

20. If Asian, are you...

Asian Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

Other Asian

Don't know/ Prefer not to answer

21. If Pacific Islander, are you...

Native Hawaiian

Guamanian or Chamorro

Samoan

Other Pacific Islander

Don't know/ Prefer not to answer

22. Which of these best represents your marital status?

Married

Divorced

Widowed

Separated

Never Married

A member of an unmarried couple

Don't know/ Prefer not to answer

23. What is the highest grade or year of school you completed?

Never attended school or only attended kindergarten

Grades 1-8

Grades 9-11

Grade 12 or GED (High School graduate)

College 1-3- years (Some college or technical school)

College 4 years or more (College graduate)

Don't know/ Prefer not to answer

24. What is your housing status?

Own

Rent

Staying with friends or family

Homeless (shelter or transitional housing)

Nursing home or assisted living facility

Group home/halfway house

Other

Don't know/ Prefer not to answer

25. Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?

Yes

No

Don't know/ Prefer not to answer

26. What is your employment status?

Employed for wages

Self-employed

Out of work for 1 year or more

Out of work for less than 1 year

A Homemaker

A Student

Retired

Unable to work

Don't know/ Prefer not to answer

27. How many children less than 18 years of age live in your household?

0

1

2

3

4

5 or more

Don't know/ Prefer not to answer

28. What is your annual household income from all sources?

Less than \$25,000

\$25,000-\$34,999

\$35,000-\$49,999

\$50,000-\$74,999

\$75,000 or more

Don't know/ Prefer not to answer

29. What is your height in feet and inches (for example, if you are 5 feet and 4 inches, write 5'4)?

30. What is your current weight in pounds?

31. Do you have serious difficulty concentrating, remembering or making decisions because of a physical, mental, or emotional condition?

Yes

No

Don't know/ Prefer not to answer

32. Do you have difficulty doing errands alone such as visiting a doctor's office or shopping because of a

physical, mental, or emotional condition?

Yes

No

Don't know/ Prefer not to answer

33. Have you smoked at least 100 cigarettes in your life?

Yes

No

Don't know/ Prefer not to answer

34. About how often do you smoke cigarettes?

Every day

Some days

Not at all

Don't know/ Prefer not to answer

35. How long has it been since you last smoked a cigarette, even one or two puffs?

Within the past month

Within the past 3 months

Within the past 6 months

Within the past year

Within the past 5 years

Within the past 10 years

10 years or more

Don't know/ Prefer not to answer

36. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

Yes

No

Don't know/ Prefer not to answer

37. How often do you use chewing tobacco, snuff, or snus?

Every day

Some days

Not at all

Don't know/ Prefer not to answer

38. Have you ever used an e-cigarette or other electronic "vaping" product, even just one time, in your entire

life?

Yes

No

Don't know/ Prefer not to answer

39. How often do you use e-cigarettes or other electronic “vaping” products? *

Every day

Some days

Not at all

Don't know/ Prefer not to answer

40. During the past 30 days, how many days did you have at least one drink of an alcoholic beverage such as beer, wine, a malt beverage, or liquor?

0

1-9

10+

Don't know/ Prefer not to answer

41. During the past 30 days, on the days when you drank, about how many drinks did you drink on average? (One drink is equivalent to a 12-ounce beer, a 5 ounce glass of wine, or a drink with one shot of liquor)

1-2

3-4

5+

Don't know/ Prefer not to answer

42. During the past 30 days, how many times have you driven when you have perhaps had too much to drink?

0

1-9

10+

Don't know/ Prefer not to answer

43. During the past 30 days, how many times did you have (5 drinks for men, 4 for women) or more on an occasion?

0

1-9

10+

Don't know/ Prefer not to answer

44. During the past 30 days, how many days did you use marijuana?

0

1-9

10+

Don't know/ Prefer not to answer

45. If you used marijuana in the past 30 days, was it for...

Only for medical reasons to treat or decrease symptoms of a health condition

Only for non-medical purposes to get pleasure or satisfaction

Both medical and non-medical reasons

Don't know/ Prefer not to answer

46. During the past 30 days, how did you use marijuana? (select all that apply)

Smoked it (for example, in a joint, bong, pipe or blunt)

Ate it (for example, in brownies, cakes, cookies, or candy)

Drank it (for example, in tea, cola, alcohol)

Vaporized it (for example, in an e-cigarette-like vaporizer)

Dabbed it (for example using butane hash oil, wax, or concentrates)

Used it in some other way

47. Have you ever used cocaine?

Yes

No

Don't know/ Prefer not to answer

48. During the past 30 days, how many days did you use cocaine?

0

1-9

10+

Don't know/ Prefer not to answer

49. Have you ever used heroin?

Yes

No

Don't know/ Prefer not to answer

50. During the past 30 days, how many days did you use heroin?

0

1-9

10+

Don't know/ Prefer not to answer

51. Have you ever used methamphetamines?

Yes

No

Don't know/ Refuse to answer

52. During the past 30 days, how many days did you use methamphetamines?

0

1-9

10+

Don't know/ Prefer not to answer

53. During the past 30 days, did you provide regular care or assistance (such as managing personal care or household tasks) to a friend or family member who has a health problem or disability?

Yes

No

Don't know/ Prefer not to answer

54. What is his or her relationship to you? Family member

Non-relative/family friend

Don't know/ Prefer not to answer

55. For how long have you provided care for that person? Less than 30 days

1 month to less than 6 months

6 months to less than 2 years

2 years to less than 5 years

More than 5 years

Don't know/ Prefer not to answer

56. In an average week, how many hours do you provide care or assistance? Between 0-8 hours per week

9-19 hours per week

20-39 hours per week

40 hours or more

Don't know/ Prefer not to answer

57. What is the main health problem, long-term illness, or disability that the person you care for has?

Dementia or other cognitive impairment disorders (Alzheimer's)

Developmental disabilities such as Autism, Down's Syndrome, and Spina Bifida

Diabetes

Mental illness such as Anxiety, Depression, or Schizophrenia

Substance Abuse or Addiction Disorders

Other

Don't know/ Prefer not to answer

58. In general, how often do you get the social and emotional support you need?

Always

Usually

Sometimes

Rarely

Never

Don't know/ Prefer not to answer

59. In general, how satisfied are you with your life?

Very satisfied

Satisfied

Dissatisfied

Very dissatisfied

Don't know/ Prefer not to answer

60. Do you consider yourself to be...

Straight

Lesbian or gay

Bisexual

Don't know/ Prefer not to answer

61. Do you consider yourself to be transgender?

Yes, Transgender, male-to-female

Yes, Transgender, female-to-male

Yes, Transgender, gender nonconforming

No

Don't know/ Prefer not to answer

62. In the past year, did you use any pain medications that were prescribed to you by a doctor?

Yes

No

Don't know/ Prefer not to answer

63. The last time you filled a prescription for pain medication, was there any medication leftover?

Yes

No

Don't know/ Prefer not to answer

64. In the past year, did you use any prescription medications that were NOT prescribed to you by a doctor?

Yes

No

Don't know/ Prefer not to answer

65. Did you use: (select all that apply)

Opiates (examples: Vicodin, Percocet, OxyContin, Lortab, Lorcet, Hydrocodone)

Depressants/Tranquilizers (examples: Xanax, Valium, Ativan, Klonopin)

Stimulants/Amphetamines (examples: Ritalin, Adderall, Dexadrine, Concerta)

Other

66. How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage?

Always

Usually

Sometimes

Rarely

Never

Not applicable

Don't know/ Refuse to answer

67. How many jobs have you held and or businesses have you run at one time within the past year?

Did not have a job within the past year

One

Two

Three or more

Don't know/ Prefer not to answer

68. About how many hours do you work per week at all of your jobs and businesses combined?

0-9

10-19

20-29

30-39

40-49

50-59

60+

Don't know/ Prefer not to answer

69. During the past 30 days, how often did you feel so depressed that nothing could cheer you up?

All of the time

Most of the time

Some of the time

A little of the time

None of the time

Don't know/ Prefer not to answer

70. During the past 30 days, how many days did a mental health condition or emotional problem keep you from doing your work or other usual activities?

0

1-9

10+

Don't know/ Prefer not to answer

71. The following questions are about events that happened during your childhood. This information will allow us to better understand problems that may occur early in life, and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. Please keep in mind that you can skip this question if you do not want to answer. All questions refer to the time period before you were 18 years of age. Select all that apply:

You lived with someone who was depressed, mentally ill, or suicidal

You lived with someone who was a problem drinker or alcoholic

You lived with someone who used illegal street drugs or who abused prescription medications

You lived with someone who served time or was sentenced to serve time in a prison, jail, or other correctional facility

Your parents were separated or divorced

You were slapped, hit, kicked, punched, or physically hurt by a parent or adult in your home (excluding spanking)

You were swore at, insulted, or put down by a parent or adult in your home

Parents or adults in the home slapped, hit, kicked, punched, or beat each other up

You were touched sexually by an adult at least 5 years older than you

An adult at least 5 years older than you tried to make you touch them sexually

You were forced to have sex by someone at least 5 years older than you

72. How often do you use seat belts when you drive or ride in a car? Always

Nearly always

Sometimes

Seldom

Never

Don't know/ Prefer not to answer

73. During the past 30 days, on how many days did you text or e-mail while driving a car or vehicle?

0

1-9

10+

Don't know/ Prefer not to answer

74. During the past 30 days, on how many days did you talk on a cell phone while driving a car or vehicle?

0

1-9

10+

Don't know/ Refuse to answer

75. At what age is it most important to support physical, intellectual, and social-emotional development in children?

0-8 years old

9-13 years old

14-18 years old

Don't know/ Prefer not to answer

76. As an adult you have the ability to mentor youth/young adults. Please rank the following topics of conversation to have with youth/young adults in order of importance with 1 being the most important and 7 being the least:

Emotional Abuse/Controlling Behaviors (blaming, accusing, restricting freedom)

Technology abuse (calling/texting repeatedly, cyber bullying)

Verbal Abuse (name-calling, yelling or shouting)

Sexual Activity (consent, risky sexual behavior, forced sexual contact)

Physical Abuse (hitting, restraining, pushing, slapping)

Substance Use (alcohol, tobacco, and other drugs)

Mental Health Wellness (depression, anxiety, self-harm, etc.)

77. In reference to the healthy relationship topics in the previous question, which have you had conversations about with youth/young adults? Select all that apply:

Emotional Abuse/Controlling Behaviors (blaming, accusing, restricting freedom)

Technology abuse (calling/texting repeatedly, cyber bullying)

Verbal Abuse (name-calling, yelling or shouting)

Sexual Activity (consent, risky sexual behavior, forced sexual contact)

Physical Abuse (hitting, restraining, pushing, slapping)

Substance Use (alcohol, tobacco, and other drugs)

Mental Health Wellness (depression, anxiety, self-harm, etc.)

None of the above

78. During the past 12 months, did you ever seriously consider suicide?

Yes

No

Don't know/ Prefer not to answer

79. During the past 12 months, did you attempt suicide?

Yes

No

Don't know/ Prefer not to answer