

CHRONIC DISEASE

Chronic diseases such as heart disease, cancer, lung disease, stroke and diabetes are the leading causes of death in the US (Healthy People 2020). Heart disease and stroke together cost the US more than \$500 billion in health care expenditures in 2010 (Healthy People 2020). **Fortunately, maintaining a healthy weight, not smoking, and getting exercise can all help to prevent many chronic diseases.**

HIP Year 2020 Health Objectives related to Chronic Disease:

Healthy Kids

- Increase the percent of children 10-17 years who attain at least 60 minutes of physical activity five days per week from 58% to 80%.
- Increase consumption of five or more servings of fruits and vegetables per day in children 6-17 years from 13% to 28%.
- Decrease the overweight or obesity rate in low-income preschool children from 29% to 20%.
- Decrease the prevalence of asthma in children 2-17 years from 19% to 10%.

Healthy Adults

- Increase the proportion of adults who consume five or more servings of fruits and vegetables per day from 25% to 33%.
- Decrease the proportion of adults who are current smokers from 16% to 5%.
- Increase the proportion of adults who attain at least 30 minutes of moderate activity five days per week OR 20 minutes of vigorous activity three days per week from 49% to 62%.
- Increase the proportion of adults with a disability who participate in any physical activity for exercise during the past month from 59% to 79%.
- Decrease the proportion of adults who are overweight from 50% to 40%
- Reduce the annual rate of hospitalizations due to asthma in black or African-American females from 35 to 10 per 10,000.
- Decrease the prevalence of diabetes in black or African-American adults from 22% to 9%.

Healthy Older Adults

- Decrease the proportion of adults 50 years and older who have diabetes from 18% to 12%.
- Increase the proportion of adults 65 years and older who attain at least 30 minutes of moderate activity three days per week from 45% to 60%.
- Increase the proportion of women 50-64 years who get an annual mammogram from 62% to 68%.

Health Outcomes

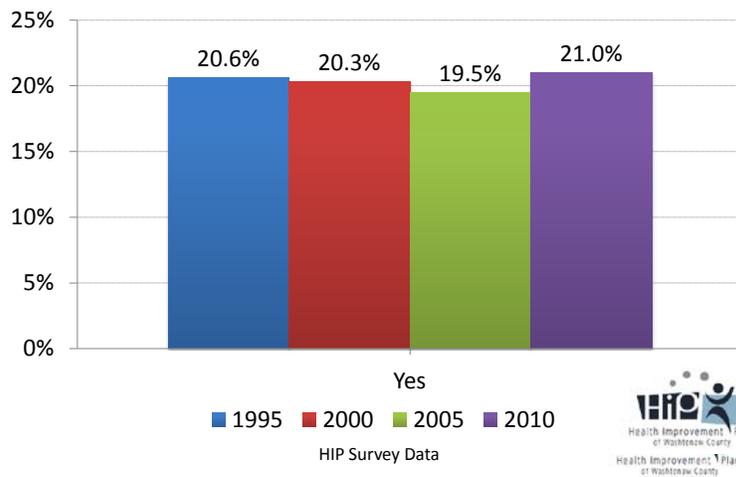
Heart Disease

Heart disease is the leading cause of death in Washtenaw County. The average rate of deaths from heart disease in Washtenaw is 125 per 100,000 population (2006-2010 average). This is lower than the state (159 per 100,000) or nation (135 per 100,000). Blacks or African Americans have the highest heart disease mortality rate among county races or ethnicities (177 per 100,000), followed by Hispanics or Latinos (148 per 100,000). The rate for whites is 122 per 100,000 and 46 per 100,000 for Asians.¹

Both high blood pressure and high cholesterol contribute to heart disease. Washtenaw County Public Health tracks the self-reported rate of both in the HIP Survey. The rates have remained fairly constant over the last fifteen years. High risk groups include blacks or African-Americans, those with an income of less than \$35,000 per year, and residents with activity limitations².

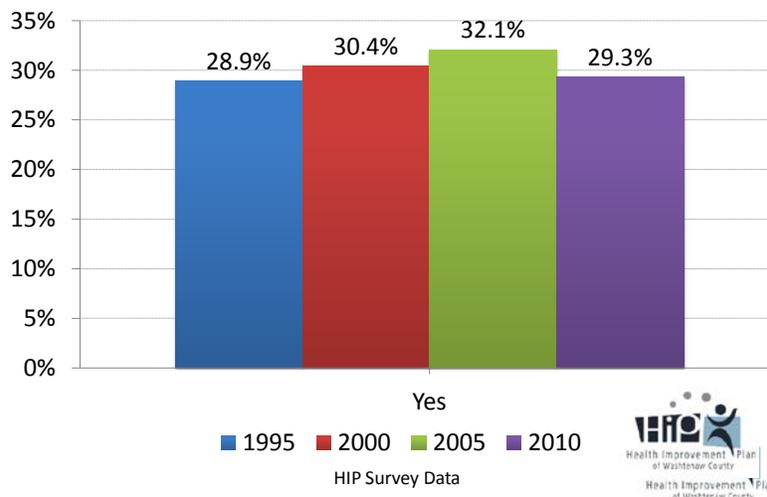
Ever told had high blood pressure

Washtenaw County Adults



Had cholesterol checked and told it was high

Washtenaw County Adults



Cancer

Cancer is the second leading cause of death in Washtenaw County. The rate of deaths from cancer in Washtenaw County is 162 per 100,000 population (2006-2010 average). This is lower than the state (185 per 100,000 population) or nation (177 per 100,000).³

Blacks or African Americans in Washtenaw County have a higher cancer mortality rate (203 per 100,000) compared to residents of other races (162 per 100,000 for whites; 113 per 100,000 for Hispanic or Latinos; and 56 per 100,000 for Asians). These cancer mortality differences by race within the county are mirrored in state and national averages as well.⁴

Diabetes

Diabetes is a serious illness that increases the risk for stroke and heart attack, blindness, kidney disease, and other chronic conditions. Overall, the risk for death among people with diabetes is about twice that of people of similar age without diabetes.⁵

Type 2 diabetes is largely preventable. Risks include:

- Obesity
- Sedentary lifestyle
- Family history
- Age greater than 45

For those over 50 years of age in Michigan, minorities are nearly twice as likely as whites to ever have been told they have diabetes.⁷

In Washtenaw County, 8% of adults over the age of 18 have been told they have diabetes. This is lower than Michigan (10%) or the nation (9%).⁶ For those over 50 years of age in Michigan, minorities are nearly twice as likely as whites to ever have been told by a doctor that they have diabetes (Hispanics or Latinos 30%; blacks or African Americans 27%, compared to whites 15%).⁷

In Michigan, an additional 500,000 adults are estimated to have prediabetes, meaning they have a significantly higher risk for developing diabetes.⁸

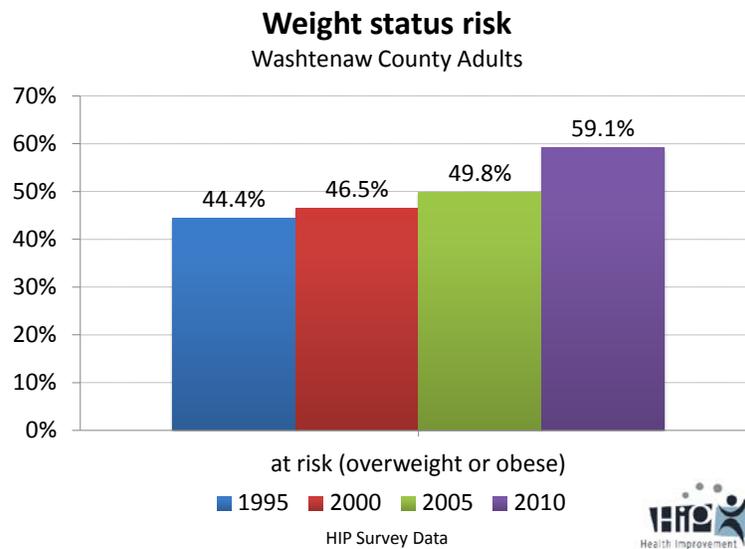
Obesity

Michigan was ranked as the 5th heaviest state in 2011 and 31% of Michigan adults are obese. In 2010 alone, obesity-related health spending in Michigan was almost \$19 billion. If current trends continue, 50-60% of adults will be obese in Michigan by 2030.⁹

Obesity increases the risk of a number of leading health issues such as:

- Type 2 diabetes
- Coronary heart disease and stroke
- Hypertension
- Arthritis
- Obesity-related cancers

The weight of county residents has been steadily increasing since 1995 (HIP Survey 1995, 2000, 2005, 2010). As of 2010, nearly 60% of adults reported being overweight or obese. Groups reporting a higher than average percent overweight or obesity in the county include African Americans (67%), those with activity limitations (69%), and individuals without health insurance (82%).



Childhood Obesity

Obese children are at increased risk for type 2 diabetes, high blood pressure, high cholesterol, asthma and sleep apnea and muscle and joint problems.

31% of all Washtenaw County 9th and 11th graders are overweight or obese.¹⁰ In the Washtenaw County WIC program, 28% of low-income preschoolers were overweight or obese in 2012. A greater proportion of Hispanic or Latino preschoolers were overweight or obese (36%) compared to whites (27%) or blacks/African Americans (28%).

Some good news: Michigan is one of 19 states showing a decrease in childhood obesity. Among low-income preschoolers in Michigan, obesity has decreased from 14% in 2008 to 13% in 2011.¹¹

A greater proportion of Hispanic or Latino preschoolers are overweight compared to whites or blacks/African Americans in WIC.

Asthma

In Washtenaw County, 19% of adults aged 18 and older report that they have been told by a doctor, nurse, or other health professional that they have asthma.¹² This is higher than the state (15%) or the nation (13%).¹³ Groups more likely to report they have ever been told they have asthma by a health professional include blacks or African Americans (37%), those living in Ypsilanti (25%), and those with activity limitations (23%).¹⁴

The annual rate of hospitalizations due to asthma for black or African-American adult females was 15 per 10,000 in 2009, down from 35 per 10,000 in 2005. This is higher than the countywide average rate of 12 per 10,000 (2006-2010).¹⁵ Nearly 10% of children ages 2-17 years in Washtenaw County have been told by their doctor they have asthma, down from 19% in 2005.¹⁶

Health Factors

Health Behaviors

Behaviors such as poor diet, a lack of exercise, and tobacco use contribute to chronic disease risk.

Healthy Eating

In Washtenaw County, just 18% of adults report consuming five or more servings of fruits and vegetables each day.¹⁷ This is worse than the state (22%) or the nation (24%).¹⁸

Least likely to report eating five or more servings of fruits and vegetables per day¹⁹

Subgroup	% eating five or more servings of fruits and vegetables per day
Less than \$35,000 yearly income	10%
Less than high school education	12%
Western Washtenaw County and other suburban and rural areas	9%

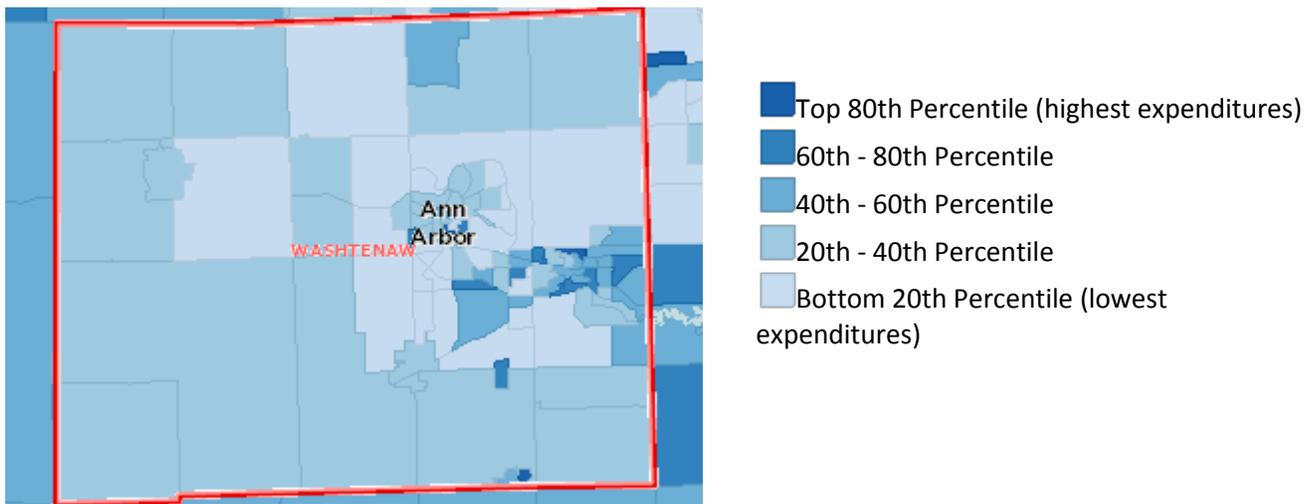
Source: Washtenaw County HIP Survey, 2010

Sugar-Sweetened Beverages

Sugar-sweetened beverages include soft drinks (soda or pop), fruit drinks, energy drinks and vitamin water drinks. These drinks are the largest contributor to added sugar intake in the US diet. Their use can lead to weight gain, type 2 diabetes, and cardiovascular disease risk. Almost half of the population in the US drinks these beverages on any given day.²⁰

The following map shows soft drink purchases by census tract.²¹ The portions of the county with greatest money spent on soft drinks are in Ann Arbor, Ypsilanti city and township, Pittsfield Township, Northfield Township, and Milan.

Soda Expenditures, Ranked Percent of Total Expenditures by Tract, 2011



Fast Food

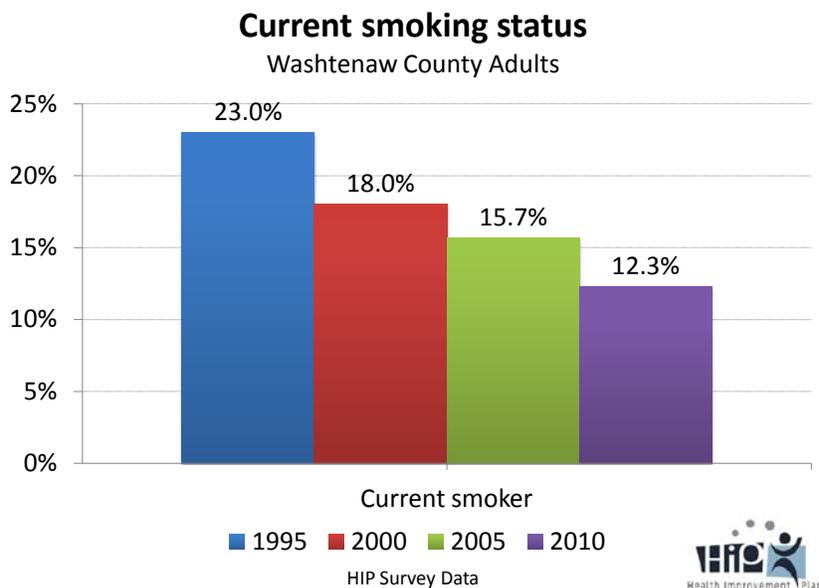
In Washtenaw County, 43% of adult respondents report eating fast food once or more per week and 19% report eating it two or more times per week. In Ypsilanti, 56% of residents report eating fast food once or more per week. This is higher than other areas (42% in Ann Arbor, 29% in Western Washtenaw County). Blacks or African Americans were also more likely to report eating fast food once or more per week (48%) as were those with incomes less than \$35,000 per year (49%).²²

Physical Activity

In 2010, an encouraging 65% of residents reported getting the recommended amount of physical activity (defined as at least 20 minutes of vigorous physical activity three or more days per week, or at least 30 minutes of moderate physical activity five or more days per week). Those living in Ann Arbor are the most likely to report getting adequate physical activity (74%) and those living in outer suburban or rural areas are least likely (50%). More men report adequate levels (77%) compared to women (53%). Finally, for those earning less than \$35,000 per year, only 45% report getting adequate levels of physical activity which is lower than those making \$35,000-\$74,999 (70%) or those earning \$75,000 or more (81%).²³

Tobacco

Smoking is linked to leading causes of death such as cancer and cardiovascular disease. The smoking rate has been declining in Washtenaw County, from 23% in 1995 to 12% in 2010.²⁴ This is lower than the state (20%) or the nation (19%).²⁵



In Washtenaw County, those more likely to report current smoking are²⁶:

Current smoking status – Washtenaw County adults

Subgroup	% current smokers
25-34 years old	23%
Student	26%
Western Washtenaw	20%
Ypsilanti	14%
Military service (yes)	23%
Male	16%
White	14%
Less than high school education	19%
High school graduate	22%
Some college	18%
No health insurance	33%
Activity limitations	23%

Source: Washtenaw County HIP Survey, 2010

Of adults in Washtenaw County, 32% are current or former (defined as ever smoking 100 or more cigarettes) tobacco users. The majority (73%) of current smokers in Washtenaw County report attempting to quit within the past 12 months.²⁷

Social and Economic Factors

Race

In Washtenaw County, blacks or African Americans suffer from a higher burden of chronic illness than the majority of residents. Deaths from heart disease and cancer are both much higher among blacks or African Americans than whites. Also, diabetes and asthma disproportionately impact this population.

The 2005 Michigan Department of Community Health report, “Epidemiology of Asthma in Washtenaw County” reveals three times as many hospitalizations for asthma occurred among blacks or African Americans compared to whites.²⁸

Social and environmental factors, particularly the unique stresses of racism, likely contribute to this inequality.²⁹

In Washtenaw County, blacks or African Americans suffer from a higher burden of chronic illness than the majority of residents.

Income

An estimated 14% of Washtenaw County residents live below the poverty level, and 27% have incomes below 200% of the poverty level.³⁰ Having a low income puts a resident at risk for poor physical and mental health.

Health Status of Low-Income Adults in Washtenaw County

	Income less than \$35,000 per year	County Average
General health status (fair or poor)	28%	12%
Days in month physical health not good (10 or more)	19%	13%
Day is month mental health not good (10 or more)	31%	14%
Seriously thought of committing suicide in past 12 months	12%	5%
Activity limited due to physical/mental/emotional problem	27%	21%
Overweight or obese (yes)	60%	59%
Does not get adequate physical activity	55%	35%
Eats less than five servings of fruits and vegetables per day	90%	82%
Current smoker	12%	12%
Adults in family reduced food intake due to cost in past year	13%	5%

Source: Washtenaw County HIP Survey, 2010

Clinical Care

The following clinical care issues relate specifically to chronic disease. See also Access to Care for a discussion of leading access to care issues.

Cancer Screenings

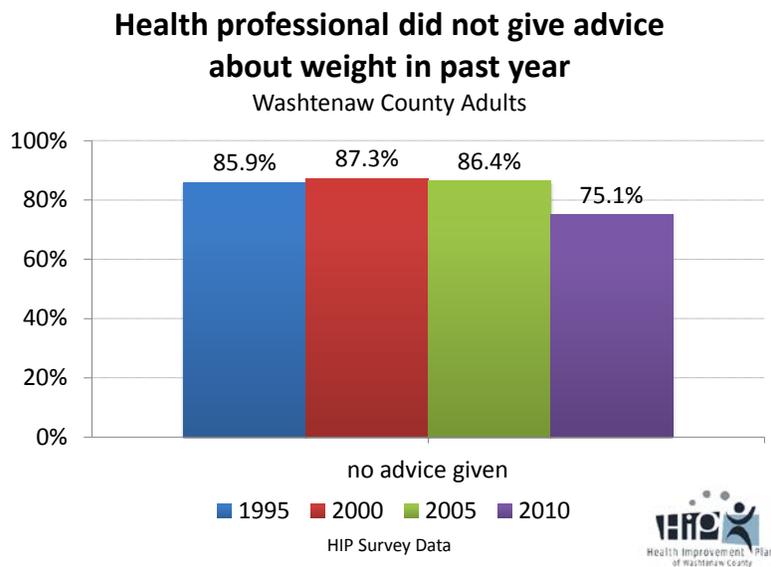
Approximately 73% of women 50-64 years report receiving an annual mammogram.³¹

The percentage of women aged 18 and older who self-report that they have had a Pap test in the past three years is 85%. This is higher than the state (81%) or the nation (80%).³²

Of HIP Survey (2010) respondents 50 and older, 73% reported ever receiving a sigmoidoscopy and colonoscopy exam to view the colon for signs of cancer or other health problems. 68% report having had one of these exams in the past two years.

Advice about Weight in Past Year

The majority (75%) of HIP Survey 2010 respondents report that their health professional did not give them any advice about their weight in the past year.



High Blood Pressure Management

The percentage of adults aged 18 and older in Washtenaw County who self-report that they are not taking medication for their high blood pressure is 26%. This is higher than the state (21%) or the nation (22%).³³

Physical Environment

Air Quality

Poor air quality is associated with higher rates of asthma, poor lung function, and chronic bronchitis. The average daily measure of fine particulate matter the Washtenaw County is 11.7 micrograms per cubic meter, higher than Michigan (9.9 micrograms per cubic meter). The National benchmark is 8.8 micrograms per cubic meter.³⁴

Walking, Biking, and Transit

Walking and biking are healthy and relatively cheap ways to get exercise. Safe walking or biking, however, is not always an option where sidewalks or paths are not available. In Washtenaw County, 74% of residents agree that there are pedestrian sidewalks, walking paths, or trails in or near their neighborhoods. Agreement varied by community from a high of 91% in Ann Arbor to a low of 51% in Western Washtenaw and other rural areas of the county.³⁵ Overall, there are 980 miles of missing sidewalk and 1,404 miles of missing bike facilities in Washtenaw County communities.³⁶

Within and around the cities of Ann Arbor and Ypsilanti, there is fixed-route bus service. Ann Arbor has the most extensive bus service coverage in the county. Residents in Ypsilanti have limited access during nights and weekends; some low-income areas of Ypsilanti Township have very limited access to transit. For those living outside of Ann Arbor and Ypsilanti, 61% have no access to fixed-route service providing access to grocery stores, medical offices, and other essential destinations. For residents with disabilities, there is door-to-door service in the Ann Arbor and Ypsilanti areas available with an advance reservation.³⁷

Approximately 10,000 or 7.5% of households in Washtenaw County have no vehicle available.³⁸ An estimated 4% of the population uses public transportation (buses) as their primary means of commuting to work.³⁹ When asked, 22% of adult residents reported biking or walking in the past week for transportation.⁴⁰

“Limited access to vital destinations, such as grocery stores and medical facilities, can have serious health and social implications on individuals and the community as a whole, as can limited access to employment and educational opportunities.”³⁷

Parks, Recreation, and Fitness Facilities

Washtenaw County has many city and county parks, and many residents (51%) live within one-half mile of a park.⁴¹ There are approximately 12 recreation and fitness facilities per 100,000, which is higher than the state (9 per 100,000) or the nation (10 per 100,000).⁴²

Residents in the City of Ypsilanti have more limited access to indoor recreational facilities than the rest of the county. There is currently no public or non-profit recreational facility operating in the city. In a phone survey of 600 residents of Ypsilanti, 7% indicated interest in the building of a full recreational facility in their service area. Families with children indicated the strongest interest in the facility, which may be because the existing for-profit facilities are adult-only facilities.⁴³

Grocery Store Access

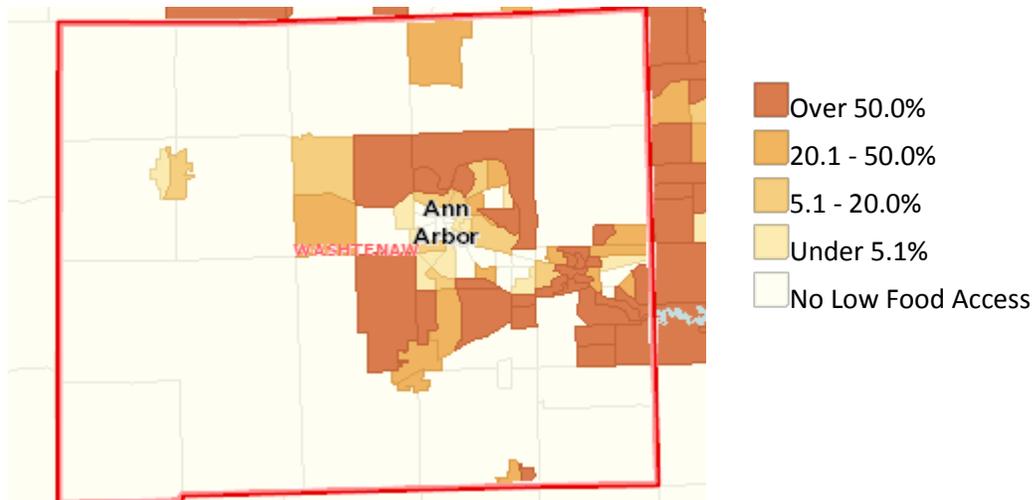
Washtenaw County has a lower rate per 100,000 residents of grocery stores, SNAP (food stamp)-authorized food stores, and WIC-authorized food stores than the state and nation:

- Grocery stores: 17 per 100,000. This is lower than the state or nation (both are 21 per 100,000).⁴⁴
- SNAP-authorized: 68 per 100,000. This is lower than the state (99 per 100,000) or nation (78 per 100,000).⁴⁵
- WIC-authorized: 16 per 100,000. This is a lower rate than the state (22 per 100,000), but it is the same as the nation (16 per 100,000).⁴⁶

Food Access

An estimated 27% of the population in Washtenaw County has more limited access to food, or low food access. Low food access is defined as a census tract in the county with many low-income residents and limited access to a supermarket or large grocery store. Areas of the county with low food access are shown in the map below and include Ann Arbor Township, Scio Township, Lodi Township, Pittsfield Township, Ypsilanti Township, Northfield Township, City of Ypsilanti, and Milan.⁴⁷

Population with Limited Food Access, Percent by Tract, 2010



Fast Food Access

Washtenaw County has an estimated rate of 73 fast food restaurants per 100,000 residents. This is a slightly higher rate than the state (65 per 100,000) or the nation (70 per 100,000).⁴⁸

Tobacco Sales to Minors

Currently, 90% of local vendors comply with laws restricting tobacco sales to minors.⁴⁹

Washtenaw County has tools, knowledge, and determination. When properly resourced, we can be a model for the healthy community movement at state and national levels.

Data Sources:

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² HIP Survey, 2010.

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⁵ US Centers for Disease Control and Prevention, 2011 National Diabetes Fact Sheet. Accessed from <http://www.cdc.gov/diabetes/pubs/estimates11.htm>

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⁷ Michigan Behavioral Risk Factor Survey, 2012.

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⁹ Trust for America's Health and the Robert Wood Johnson Foundation, 2012. Bending the Obesity Cost Curve in Michigan: Reducing the average body mass index in the state by 5 percent could lead to health care savings of more than \$8 billion in 10 years and \$24 billion in 20 years. Accessed from: <http://www.rwjf.org/content/dam/farm/reports/reports/2012/rwjf401442>.

¹⁰ Michigan Profile for Healthy Youth, 2012. Accessed from: <https://mdoe.state.mi.us/schoolhealthsurveys/ExternalReports/CountyReportGeneration.aspx>

¹¹ CDC Vital Signs, August 2013, Progress on Childhood Obesity. Accessed from: <http://www.cdc.gov/vitalsigns/childhoodobesity/>

¹² HIP Survey, 2010.

¹³ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010. Accessed from www.chna.org

¹⁴ HIP Survey, 2010.

¹⁵ Michigan Resident Inpatient Files, Division for Vital Records and Health Statistics, Michigan Department of Community Health. Accessed from: <http://www.mdch.state.mi.us/pha/osr/CHI/HOSP/FRAME.HTML>

¹⁶ HIP Survey, 2005, 2010.

¹⁷ HIP Survey, 2010.

¹⁸ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2005-2009. Accessed from: www.chna.org

¹⁹ HIP Survey, 2010.

²⁰ American Heart Association, 2010.

²¹ Nielsen Claritas SiteReports, Consumer Buying Power, 2011. Accessed from www.chna.org.

²² HIP Survey, 2010.

²³ HIP Survey, 2010.

²⁴ HIP Survey 1995, 2010.

²⁵ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System: 2005-11. Accessed from: www.chna.org.

²⁶ HIP Survey, 2010.

²⁷ HIP Survey, 2010.

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- ²⁹ David R. Williams, Harold W. Neighbors, and James S. Jackson. Racial/Ethnic Discrimination and Health: Findings From Community Studies. American Journal of Public Health: February 2003, Vol. 93, No. 2, pp. 200-208.
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- ³³ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010. Accessed from: www.chna.org.
- ³⁴ CDC WONDER Environmental Data 2003-2008. Accessed from: www.countyhealthrankings.org.
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- ³⁸ US Census Bureau, 2007-2011 American Community Survey.
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- ⁴² US Census Bureau, County Business Patterns, 2011. Accessed from: www.chna.org
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- ⁴⁸ US Census Bureau, County Business Patterns, 2011. Accessed from: www.chna.org
- ⁴⁹ Michigan Department of Community Health, Behavioral Health and Developmental Disabilities Administration, Bureau of Substance Abuse & Addiction Services, Report for Fiscal Year 2012, Prevention - Youth Tobacco Sales Rates, Synar, Washtenaw. Accessed from: http://www.michigan.gov/mdch/0,4612,7-132-2941_4871_45835_48569-15628--,00.html.