09.05.2025

UNION COUNTY

Community Health Assessment 2025

UNION COUNTY HEALTH DEPARTMENT

This report has been funded by:

- Memorial Hospital
- Mental Health & Recovery Board of Union County
- Union County Health Department
- Union County Human Services

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Dear Community Member,

Thank you for your interest in the health and well-being of Union County. This publication presents the results of the 2023 Community Health Survey, completed by 549 Union County adults, along with health data taken from national, state, and local sources.

Monitoring the status of health within our community is an essential public health service. It allows us to identify challenges, risks, and opportunities within our community that are impacting the ability of our residents to reach their health goals. This community health assessment is an invaluable guide for identifying new health concerns, measuring the impact of current community health improvement efforts, and guiding the judicious use of local resources. However, this is only one planning tool. A true plan of action for community health improvement will require taking a closer look at these survey results; seeking additional information from community residents and service providers; identifying population(s) at risk for specific health conditions; and choosing effective strategies that will truly improve the health of Union County residents when put into action.

This report would not exist without the financial support of community organizations, a committed workgroup, and assistance from community leaders who all care about your health. We thank each member of the workgroup and express our appreciation to the following organizations who provided financial support to the project: Mental Health & Recovery Board of Union County, Memorial Hospital, Union County Health Department, and Union County Human Services.

While data is useful, it is how people utilize this information that ultimately benefits the community. We invite each person who reads this report to join us in our work to improve the health and well-being of Union County residents. We encourage you to be open to new ideas and collaborations and to remain optimistic about the excellent work this community is doing together.

Sincerely

Jason E. Orcena, DrPH
Health Commissioner
Union County Health Department

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Process

The Union County Health Department (UCHD) brought partners together to develop this Community Health Assessment (CHA) with information from the following quantitative and qualitative sources:

- 2023 Union County CHA survey of 549 residents, with comparison trend data from the 2018 Union County CHA survey of 396 residents
- 2023-2024 Ohio Healthy Youth Environments Survey (OHYES!) of 967 students in grades 7 and 9-11 from all three public school districts in the county
- Data from UCHD services and programs
- Data from other local, state and federal agencies, such as local police departments, the Ohio Department of Education and Workforce, the U.S. Census Bureau, and County Health Rankings and Roadmaps
- Qualitative data from Union County United Community Conversations with individuals with developmental disabilities, caregivers, and family members
- Examples of community assets from UCHD and partner organizations (asset profiles)

Strengths

Union County has many strengths to build upon. Positive CHA findings include:

- **Long lives:** Union County has better overall health outcomes compared to Ohio, including longer life expectancy.
- **Vibrant community conditions:** Compared to Ohio overall, Union County has a relatively young population, high levels of education and income, strong labor force participation, and high rates of home ownership.
- **Healthy behaviors:** Union County adults are more physically active than Ohioans overall and the county has a lower rate of food insecurity.
- **Access to health care:** Compared to Ohio, Union County has high rates of health insurance coverage and utilization of preventive services, such as flu vaccines for older adults, mammograms for women, and prostate-specific antigen (PSA) tests for men. Most adults report routine checkups and visits to the dentist.
- **Lower substance use:** Union County has lower rates of adult cigarette smoking and marijuana use than Ohio overall. Among middle and high school students, 4% reported drinking alcohol in the past 30 days and 2% reported using marijuana.
- **Youth protective factors:** Students report high levels of parental engagement and physical activity—two important protective factors that support physical and mental health.

Challenges

Even with many strengths, some challenges to the health of residents do persist and there are opportunities to ensure that all Union County residents have the opportunity to achieve good health. Negative trends, disparities and other barriers to well-being identified by the CHA include:

Community conditions

- **High costs:** Union County residents face higher childcare and transportation costs compared to Ohioans overall.
- **Income disparities by geography:** Northern areas of the county, including the North Union school district, have higher rates of economic disadvantage, and all areas of the county have a significant number of households that struggle to afford basic needs.

Health behaviors

- **Barriers to active living and healthy eating:** Union County residents have longer commutes compared to other Ohioans, and some lower-income residents have limited access to grocery stores.
- **Disparities in physical activity:** Women and adults with annual household incomes below $50,000 were less likely to report leisure-time physical activity than were men or adults in higher-income households.
- **Disparities in food access:** Adults ages 18-65 and those with annual household incomes below $50,000 were more likely to say they had difficulty affording balanced meals than were older adults or people in higher-income households.
- **Alcohol use:** Union County has a higher adult drinking rate than Ohio overall and almost a third of motor vehicle crash deaths involve alcohol.
- **Youth nutrition and sleep:** Students are not eating enough fruit and vegetables or getting enough sleep. Inadequate sleep is a particular concern for high school students; only 38% of those in grades 9-11 said they get 8 or more hours of sleep on an average school night. Relatedly, only 35% of those in grades 9-11 said their parents put limits on their use of electronic devices.

Access to health care

- **Disparities in access to health care:** Union County residents with lower incomes (below $50,000) and non-elderly adults reported more difficulties accessing care in general and were less likely to have visited a dentist in the past year compared to those with higher incomes and over age 65.
- **Fewer providers:** Union County has fewer dentists and mental health providers per population than Ohio overall.

Health outcomes

- **Worsening overall health:** CHA survey respondents reported an increase in self-reported health problems from 2018 to 2023 and higher rates of poor health among women and people in lower-income households compared to men and people with higher incomes.
- **Rising rates of chronic disease:** Obesity, overweight and high blood pressure are very common among Union County adults and increased from 2018 to 2023. Over a third of 2023 Union County survey respondents said they had been diagnosed with high blood pressure, up from 28% in 2018. Other chronic conditions such as diabetes, cancer and heart disease also increased.

- **Poor adult mental health:** Self-reported poor mental health among Union County adults increased from 2018 to 2023. About one-third of adults (35%) said they felt sad or hopeless for two or more weeks in a row (2023).
- **Adult mental health disparities:** Female adults and those in lower-income households ($0-$49,999 annual income) were much more likely than males and those in higher-income households ($50,000+) to report that their mental health was "not good" on five or more days over the past 30 days.
- **Youth mental health concerns:** Many middle and high school students reported mental health concerns; 21% reported anxiety and 16% said they felt sad or hopeless almost every day for two weeks or more in a row during the past year.

Next steps

In 2025, UCHD will reconvene CHA partners to develop Union County's next Community Health Improvement Plan (CHIP). The CHIP will identify priorities, goals, outcomes and strategies to address selected challenges iden tified in this CHA.

Overall health and well-being

Overall health affects our ability to work, take care of family members and engage in other daily activities. This section addresses adult health status, life expectancy and causes of death. Youth health status is discussed on pages 41-44.
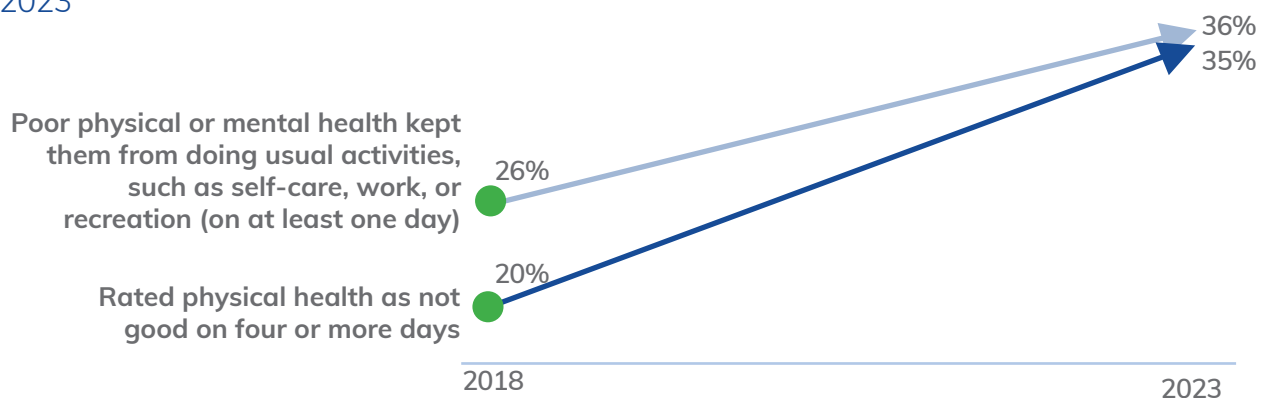
Key findings

- Union County has better overall health outcomes compared to Ohio, including longer life expectancy.
- Challenges include an increase in self-reported health problems from 2018 to 2023 and higher rates of poor health among women and people in lower-income households compared to men and people with higher incomes.

Health status

Adults in Union County report being healthier than adults in Ohio overall.[1] In 2022, 13% of Union County adults described their health status as "fair" or "poor," compared to 18% of Ohioans.[2]

Responses to the 2018 and 2023 Union County CHA surveys, however, indicate a troubling increase in the percentage of residents who are experiencing health problems. In 2023, Union County adults reported that their physical health was not good for an average of 4.9 days in the past 30 days, up from 3.4 days in 2018. There were similar worsening trends for the proportion rating their physical health as not good on four or more days and that poor health kept them from doing usual activities in the past 30 days (see figure 1.1).

Figure 1.1. Self-reported health problems in past 30 days, Union County adults, 2018-2023

Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day)   26% → 36%

Rated physical health as not good on four or more days   20% → 35%

2018   2023

Source: Union County CHA surveys, UCHD

Poor physical health is much more common in some groups of Union County residents. As shown in figure 1.2, female adults and those in lower-income households were much more likely than males and those in higher-income households to report that their physical health was "not good" on five or more days over the past 30 days.

Figure 1.2. Percent of Union County adults who rated their physical health as not good on five or more days in past 30 days, by gender and income, 2023

Percent reporting physical health was "not good" 5 or more days

25%	30%		46%	24%
Male (n=163)	**Female** (n=382)		**$0-$49,9999** (n=114)	**$50,000+** (n=387)
Gender*			Annual household income	
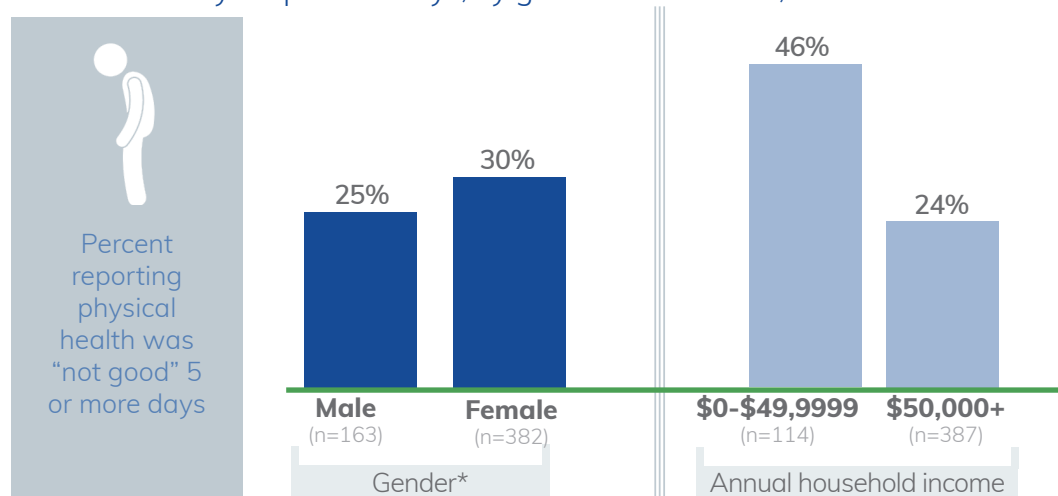
*Non-binary/other n= <10
Source: 2023 Union County CHA Survey, UCHD

Life expectancy and causes of death

Union County residents enjoy longer lifespans than Ohioans overall.[3] In 2020-2022, average life expectancy in the county was 78.5 years, compared to 75.2 years for Ohio.[4]

In 2023, the leading causes of death before age 75 in Union County were:
1. Stroke
2. Lung cancer
3. COPD, asthma and other chronic lower respiratory diseases
4. Diabetes
5. Heart disease
6. Colorectal cancer
7. Kidney disease
8. Breast cancer

By comparison, **Ohio's** leading causes of death before age 75 in 2017-2020 were unintentional injuries (including drug overdose), heart disease and cancer.

Community conditions

Community conditions shape our health in many ways—from the air we breathe to opportunities for employment and education. This section describes the demographic characteristics of Union County and strengths and challenges in the social, economic and physical environments.

Key findings

- Compared to Ohio overall, Union County has a relatively young population, high levels of education and income, strong labor force participation, and high rates of home ownership.
- Challenges include significant childcare and transportation costs and long commutes.
- Within Union County, there are significant income disparities by geography. Northern areas of the county, including zip codes 43036 and 43344 and the North Union school district, have higher rates of economic disadvantage and struggling households.

Demographic characteristics

Population size. In 2023, the total population of Union County was 65,293. Marysville is the largest city in the county, with 28,423 residents in 2023.[5] Union County continues to be one of the fastest growing counties in the state in terms of percentage change in population size.[6] The 2025 Union County Comprehensive Plan projects a continued high rate of growth relative to the state over the next few decades. For additional information about population change and population projections, access the **Comprehensive Plan**.

Age, education and income. Union County has a relatively young population with almost 30% of residents being under age 18 in 2023. Compared to Ohio, the county has a higher percentage of residents with a bachelor's degree or higher and a higher median household income (see figure 2.1). Twenty percent of households had an annual income below $50,000 in 2023. Additional demographic characteristics are provided in the appendix.

Union County Comprehensive Plan: 2025 Update

Led by the Logan-Union-Champaign Regional Planning Commission, the Union County Comprehensive Plan provides detailed data the existing conditions of the following topics:

- Population characteristics
- Economy
- Housing
- Education
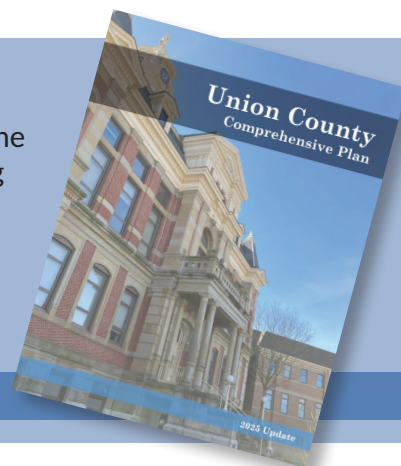- Environmental conditions

Access the plan here: **https://www.lucplanning.com/union-county**

Figure 2.1. Selected demographic characteristics, Union County and Ohio, 2023

	Union County	Ohio
Age		
Under 18 years	30%	28%
18-64 years	57%	54%
65+ years	14%	19%
Educational attainment		
Bachelor's degree or higher (percent of persons age 25+)	39%	31%
Income		
Median household income	$109,506	$69,680
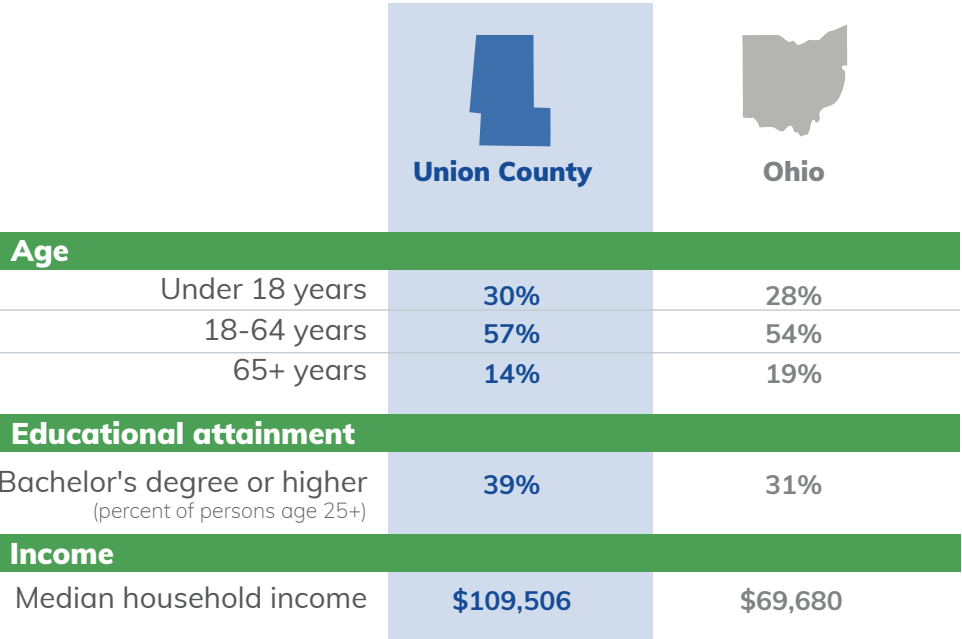
Note: See Appendix for additional demographic data
Source: U.S. Census Bureau, American Community Survey 5-Year estimates

The Ohio Department of Education and Workforce reports the percentage of students in each district that are economically disadvantaged, which generally refers to students eligible for free or reduced-price lunches (a proxy for households with lower incomes). Within Union County, this rate varies from a low of 18.4% in Fairbanks to 45.7% in North Union (figure 2.2).

Figure 2.2. Percent of students who are economically disadvantaged, by district, 2023-2024

District	Percent
North Union (1,385 enrollment)	46%
Marysville (5,352 enrollment)	26%
Fairbanks (1,028 enrollment)	18%
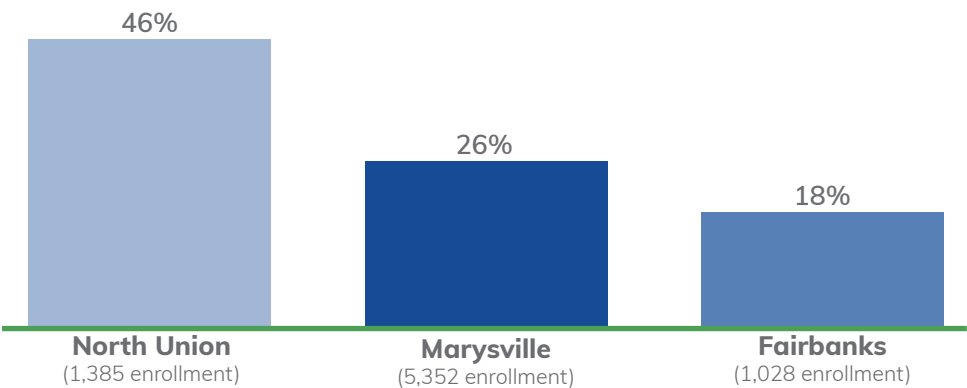
Source: Ohio Department of Education and Workforce

The United Way calculates the "household survival budget" for counties, which includes the costs of housing, child care, food, transportation, healthcare, smartphone plan, plus taxes and small contingency. Households with incomes below this Asset Limited, Income Constrained, Employed (ALICE) threshold have difficulty making ends meet. Within Union County, the proportion of households below this level varies widely by zip code. The Magnetic Springs and Richwood areas (43036 and 43344 zip codes, both within the North Union school district) have the highest percentage of households with limited incomes (45% and 39%, respectively; see figure 2.3). By contrast, the Plain City area (43064 zip code) has relatively few households living below the ALICE threshold. It is important to note, however, that the Plain City area has grown significantly in recent years, largely due to new residents with higher incomes. Income disparities persist throughout the county and the number of ALICE households has increased over time (see figure 2.4).

Figure 2.3. Households below Asset Limited, Income Constrained, Employed (ALICE) threshold in Union County, by zip code, 2022

Percent of households with income below the "household survival budget" level, including housing, child care, food, transportation, healthcare, smartphone plan, plus taxes and small contingency

39%
43344
Richwood

45%
43036
Magnetic Springs

32%
43067

28%
43040

Marysville

23%
43045

Plain City

16%
43064

Source: U.S. Census Bureau American Community Survey data compiled by United Way, United for ALICE
Note: The 43358 zip code covers parts of Logan and Union Counties. 17% of households in the 43348 zip code were below the ALICE threshold in 2022.

Household survival budget, Union County, 2022

Monthly Costs and Credits	Single Adult	One Adult, One Child	One Adult, One In Child Care	Two Adults	Two Adults Two Children	Two Adults, Two In Child Care	Single Adult 65+	Two Adults 65+
Annual total	$27,888	$43,296	$50,940	$41,040	$69,384	$87,348	$32,088	$50,064
Hourly wage	$13.94	$21.65	$25.47	$20.52	$34.69	$43.67	$16.04	$25.03

Figure 2.4. Number of households below Asset Limited, Income Constrained, Employed (ALICE) threshold in Union County, 2010 to 2023
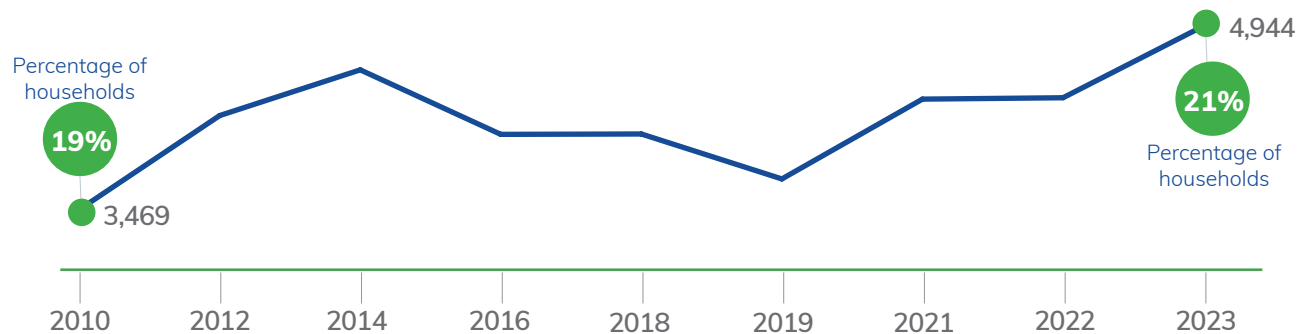
Source: U.S. Census Bureau American Community Survey data compiled by United Way, United for ALICE

Race, ethnicity and language. In 2023, 91.2% of Union County residents were white, 5.4% were Asian, 3.7% were Black or African American and 2.9% were Hispanic or Latino (of any race).[7] In 2017-2021, 5.4% of residents were foreign born and 1.7% had limited English proficiency.[8] Three percent of students in the Marysville school district were English Learners in 2023-24 (and very small numbers in the other two districts).[9]

Workforce development

Union County has a strong workforce. In 2021, 66.5% of Union County residents were in the labor force, compared to 61.5% for Ohio overall.[10] The county's unemployment rate was 3.51% in 2021, which was one of the lowest rates in the state.[11]

Figure 2.5 displays the top 10 most common occupations in 2020 and projected for 2030 in the central Ohio region—an 11-county area that includes Union County. The biggest increases are projected for registered nurses, waiters/waitresses and laborers and freight, stock and material movers. Other than for registered nurses, the median hourly wage for these most common jobs is below most of the ALICE survival budget levels (see figure 2.3), indicating that many households may struggle to afford basic necessities. Child care costs are of particular concern. In Union County in 2023-2024, the average household with child care costs spent 27% of its income on child care for two children.[12]

Figure 2.5. Employment in central Ohio (11-county region)

Total 2020 employment and projected 2030 for 10 most common occupations

Occupation	2020 → 2030	median hourly wage 2021 ▼
Laborers and freight, stock, and material movers, hand		$17.82
Customer service representatives		$18.00
Retail salespersons		$13.41
Fast food and counter workers		$10.78
Registered nurses		$36.08
Stockers and order fillers		$17.34
Office clerks, general		$18.13
Cashiers		$11.04
Janitors and cleaners, except maids and housekeeping cleaners		$14.15
Waiters and waitresses		$10.04

Number of jobs: 5,000 — 10,000 — 15,000 — 20,000 — 25,000 — 30,000 — 35,000 — 40,000

Source: Ohio Means Jobs employment projections

Most Union County students graduate from high school (see figure 2.6). Among graduates, many pursue additional training or education while others enter the workforce. Some variation in the rates of those pursuing additional training or education exists between the three high schools. Almost three-quarters of Fairbanks students who graduated in 2021 had enrolled in college or technical school within two years of graduation (72.4%), compared to 58% of Marysville students and 47% of North Union students. A similar pattern emerges when looking at the percentage of students who graduate from college or technical school within 6 years of leaving high school.

Figure 2.6. High school graduation, college enrollment and college graduation, by district
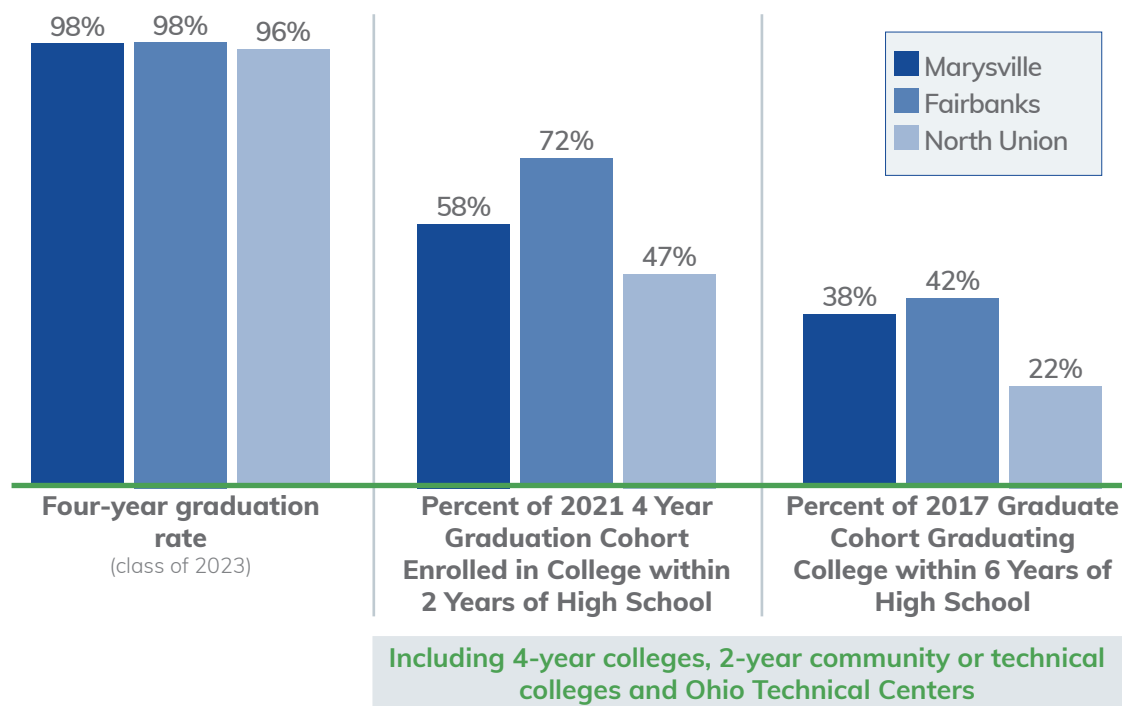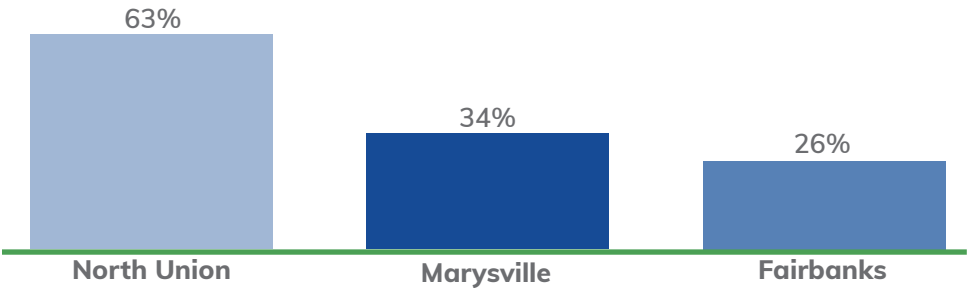

Source: Ohio Department of Education and Workforce (2023-2024 report card)

Figures 2.7 and 2.8 provide more detailed data about college, career and workforce readiness for the class of 2023. Career-Technical Education (CTE) students complete technical assessments to assess proficiency in their career field pathway. Among CTE students in the class of 2023, the percentage who achieved proficiency on three or more assessments ranged from 26% in Fairbanks to 63% in North Union.

A majority of North Union students from the class of 2023 (70%) were gainfully employed directly following high school graduation, compared to 37% of Marysville graduates and 28% of Fairbanks graduates. Two-year and four-year post-secondary institution enrollment also varied by district, with Marysville having the highest percentage of students enrolling in four-year colleges and Fairbanks and North Union having sizable percentages enrolling in two-year colleges.

Figure 2.7. Percent of students achieving proficiency on three or more technical assessments, by district (class of 2023, among Career-Technical Education concentrators in a pathway with a required assessment)

Source: Ohio Department of Education and Workforce (2023-2024 report card)

Figure 2.8. Post-high school pathways, by district (class of 2023)
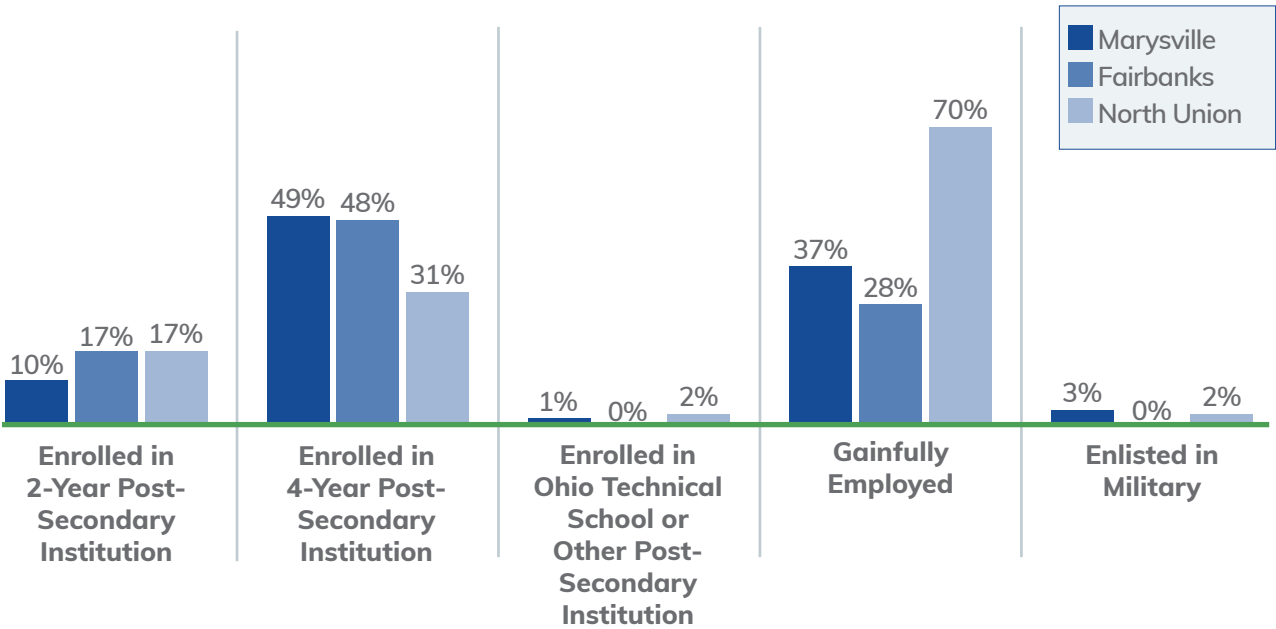
Source: Ohio Department of Education and Workforce (2023-2024 report card)

Transportation

Over 26,500 commuters come to Union County each day for work, while 20,280 leave the county and 8,219 both live and work in the county.[13] Many Union County residents have long commutes; in 2019-2023, 38% of Union County commuters who drove alone to work had a drive of more than 30 minutes, compared to 31% in Ohio.[14] T ransportation costs are also high; total average annual transportation costs (including auto ownership, auto use and transit) was $16,428 in Union County in 2015-2019, compared to $13,781 for Ohio.[15]

Housing

Union County's home ownership rate and median home value are among the highest in the state.[16] Rents are also relatively high and 14.8% of renters spend more than 50% of their income on housing and utilities (defined as "severe rent burden"), lower than 24.7% in Ohio (see figure 2.9.). The proportion of owner to renter occupied units in Union County is like Champaign, Delaware, Logan, and Madison counties; 20% of occupied units in Union County in 2022 were renter occupied.[17]

Figure 2.9. Housing affordability and supply, Union County and Ohio

	Union County	Ohio
Home ownership (2017-2021)	81%	67%
Median home value (2017-2021)	$242,400	$180,200
Median monthly gross rent (2017-2021)	$1,050	$870
Severe rent burden (2017-2021)	14.8%	24.7%
Housing wage: Hourly wage needed to afford a 2-bedroom apartment at fair market rent (FY2023)	$22.79	$19.09
Change in number of housing units (from 2020 to 2022)	+8.92%	+0.9%

Source: Ohio Housing Finance Agency and Coalition on Housing and Homelessness in Ohio

Environmental health

Air quality. Air pollution contributes to many health problems, such as poor birth outcomes, lung disease, heart conditions and cancer. In 2020, Union County had an annual average of 7.9 micrograms per cubic meter of fine particulate matter, which was the same rate as Ohio overall and higher than the U.S. rate of 7.3.[18]

Hazardous materials. From 2018 to 2023, there were 68 known spills of hazardous materials (Haz-Mat) in Union County. Diesel fuel was the most common material spilled and Marysville (24), Jerome Township (9) and Paris Township (6) had the largest number of spills within the county.

Figure 2.10. Haz-Mat spills, by material, Union County, 2018-2023 (n=68 spills)

37% Diesel fuel/ fuel	12% Gasoline	13% Oil	16% Other	22% Unknown
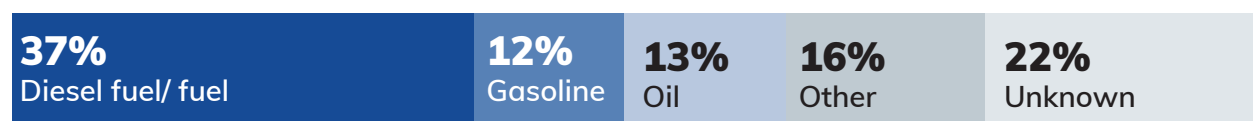
Source: Union County Emergency Management Agency (reported through 9/28/2023)
Note: A hazardous material (hazmat) spill, as defined by the National Fire Protection Association (NFPA), is the uncontrolled release of a substance that can cause harm to people, the environment, or property.

Sewage. Across Union County there are at least 7,500 private sewage treatment systems in the ground. In any given year, some of these systems will have operational issues that require repair or replacement. The Union County Health Department inspects about 800 aerators, a type of system that treats sewage and then discharges off the property directly or indirectly into the waters of the state. On average, about one-third of these systems are identified annually as failing, potentially discharging improperly treated sewage into the waters of the state.

Health hazards in homes. Housing conditions can also affect health. Respondents to the 2023 Union County CHA Survey reported that insects (fleas, ticks, flies, mosquitoes), air quality and rodents (mice or rats) were the most common problems in their home that threatened their health (see figure 2.11).

Figure 2.11. "In or around your home, which of the following do you think have threatened you or your family's health in the past 12 months?" (n=290)
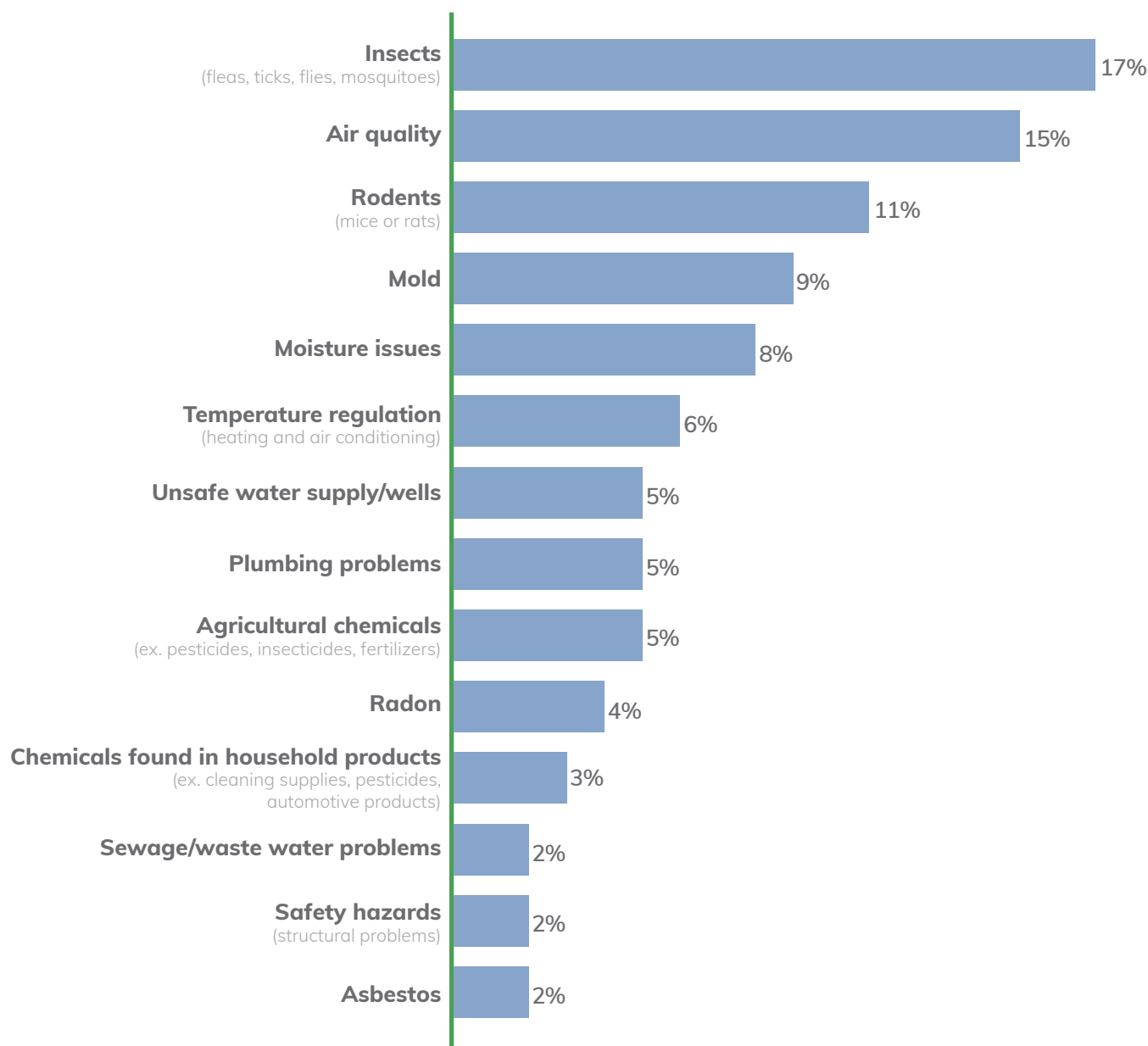
Source: 2023 Union County CHA Survey, UCHD
Note: <1% of respondents indicated problems with bed bugs, lead paint, cockroaches, sanitation issues, radiation or lice.

Social determinants of health

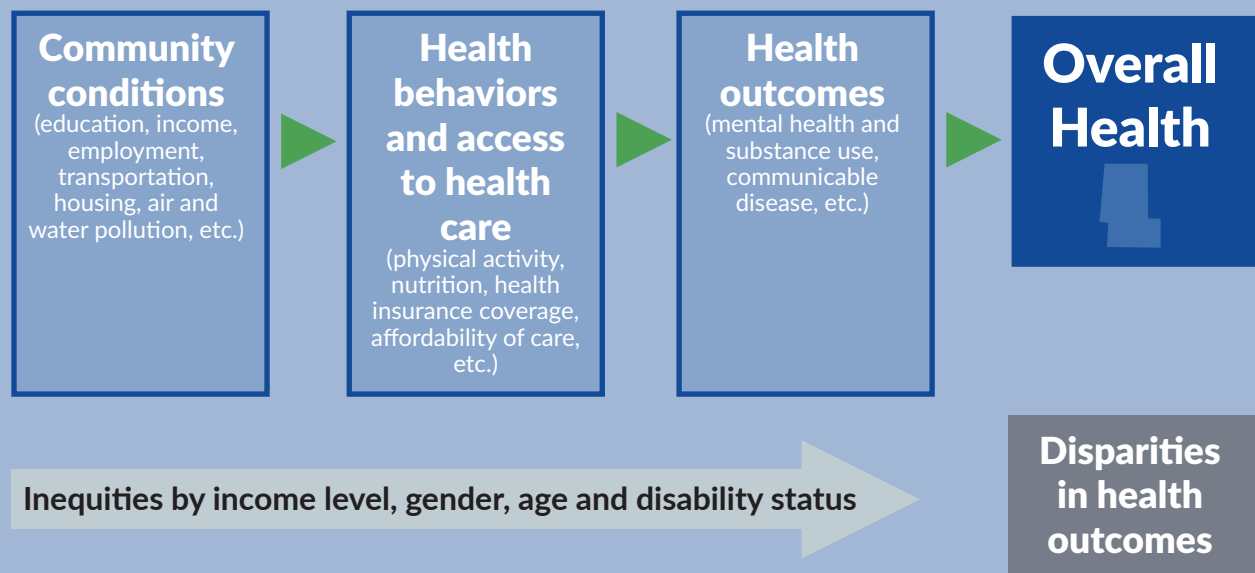Community conditions affect access to health care, health behaviors and health outcomes. For example, adults with higher levels of education are more likely to have jobs that offer health insurance, workers with long commutes have less time for physical activity, and children exposed to air pollution are more vulnerable to asthma. While Union County overall has high levels of education, income and employment, there are still many households with lower incomes that may struggle to afford nutritious food, health care services and other resources needed for good health. Differences in health outcomes by income level, gender, age group and disability status are highlighted throughout this CHA and point to opportunities for improvement to ensure that all Union County residents can enjoy optimal health.

Community conditions (education, income, employment, transportation, housing, air and water pollution, etc.) ▶ **Health behaviors and access to health care** (physical activity, nutrition, health insurance coverage, affordability of care, etc.) ▶ **Health outcomes** (mental health and substance use, communicable disease, etc.) ▶ **Overall Health**

Inequities by income level, gender, age and disability status ➡ **Disparities in health outcomes**

Human services (child welfare and disability services)

Trends in Children Services and Adult Protective Services were relatively stable from 2018 to 2022. In 2022, there were 69 children in out-of-home placements and 38 Adult Protective Services investigations.

In 2023-2024, a total of 1,357 students enrolled in the K-12 public schools had a disability. Marysville schools had the highest proportion of students with disabilities (18.5%). From 2018 to 2022, the Union County Board of Developmental Disabilities served 1,135 people (ages 0+).

Figure 2.12. Percent of K-12 students with a disability, 2023-24, by district

19%
990
Marysville

14%
145
Fairbanks

16%
222
North Union
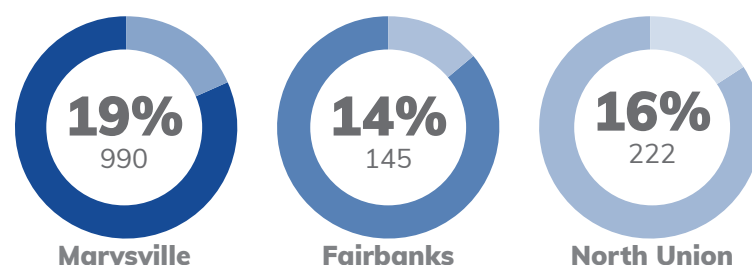
Source: Ohio Department of Education and Workforce

Union County residents with developmental disabilities and their families and caregivers

Partnership for improvement

The Union County Health Department (UCHD) is part of a small cohort of health departments convened by the National Association of City and County Health Officials (NACCHO) and Special Olympics to ensure inclusion of individuals with developmental disabilities in community health reports such as this one.

As part of this effort, UCHD has partnered with the Union County Board of Developmental Disabilities (UCBDD) and the Union County United Health Team to capture aspirations and identify opportunities for community-driven change from the perspectives of individuals with developmental disabilities, caregivers, and family members.

Greatest needs

From these conversations, we have learned that individuals want to live in a community of inclusion, where bi-directional integration happens at a young age, and with an open-mindedness that affords all individuals to be welcomed.

"I want my community to be okay with my daughter."

"My daughter just wants to be there, just to take in what's happening."

When asked about areas of concern, many indicated transportation was a barrier to a more independent lifestyle. Specific individuals mentioned they would like to see transportation services available for evening activities, as well as on-demand.

"There is no spontaneity in the transportation system. I can't just grab a ride, run errands, or attend last-minute events."

When asked about aspirations or barriers to a healthy life, individuals identified an ongoing reality to manage complex medical issues and a desire to do so locally with knowledgeable providers. Some also mentioned challenges with access to housing and a safe place to live when parents or other family members are no longer available.

"What happens to my child when I can't take care of them anymore?"

"I have to live forever [to care for my child]."

Next steps

The Union County United Health Team is working to share these aspirations and opportunities for change with people and partners who can listen and run with solutions. UCHD is dedicated to ensuring that future assessments and community reports are inclusive of individuals with developmental disabilities.

Law enforcement

The overall volume of calls to the Marysville police rose from 490 in 2018 to 540 in 2022, largely driven by an upward trend in mental health calls (figure 2.13).

Figure 2.13. Calls to the Marysville Police Department, 2018-2022

Initial calls for domestic violence assistance declined 16% and mental health calls increased 241%

Domestic violence Initial call for assistance — 209 ... 176

Suicide threat — 104 ... 90

Driving under the influence (DUI)/ **Operating a Vehicle Impaired** (OVI) — 54 ... 56

Mental health calls — 41 ... 140

Domestic violence Arrest — 35 ... 38

Suicide attempted — 29 ... 20

Overdose — 18 ... 20

2018   2019   2020   2021   2022

Source: Marysville Police Department

Figure 2.14. Top offenses reported by police departments, 2022

Marysville
- Larceny/theft
- Assault offenses
- Fraud offenses
- Destruction/damage/vandalism
- Drug/narcotic offenses
- Disorderly conduct
- Driving under the influence
- Trespass of real property
- Burglary/breaking and entering
- Rape

Richwood
- Traffic stops
- Domestic violence/domestic disputes
- Animal complaints
- Suspicious circumstances
- Vehicle lockouts
- Thefts
- Check well being
- Juvenile complaints
- Suspicious person
- Suspicious vehicle

Health behaviors

Many factors beyond medical care affect health outcomes, including physical activity, access to healthy food and sexual behavior. This section focuses on adults; youth physical activity and nutrition are addressed on page 42.

Key findings

- Union County adults are more physically active than Ohioans overall and the county has a lower rate of food insecurity.
- Challenges include less proximity to parks and recreation facilities (population living within 0.5 to 3 miles of a park or recreational facilities), long commutes, and limited access to grocery stores for some lower-income residents.
- Women and adults with annual household incomes below $50,000 were less likely to report leisure-time physical activity than were men or adults in higher-income households.
- Adults ages 18-65 and those with annual household incomes below $50,000 were more likely to say they had difficulty affording balanced meals than were older adults or people in higher-income households.

Physical activity

Union County adults are more physically active than adults in Ohio overall.[19] In 2022, 80% of Union County adults reported some leisure-time physical activity, compared to 76% of Ohioans.[20] There is room for improvement, however, in strengthening opportunities to be active. For example:

- In 2024, 80% of Union County residents lived close to a park or recreation facility, below 84% for Ohio overall. (Defined as the percentage of population living within a half mile of a park, or within one mile of a recreational facility in an urban area, or within three miles of a recreational facility in a rural area.) [21]
- In 2019-2023, 38% of Union County workers drive alone to work and have a commute of more than 30 minutes each way, much higher than 31% for Ohio overall.[22]

As a rural community, Union County has unique challenges and opportunities for increasing access to places for physical activity. Expanding trails, improving parks and overcoming transportation barriers may help to better connect residents to existing greenspace.

Responses to the 2023 Union County CHA survey provide additional detail about factors that contribute to active living. Women and adults with annual household incomes below $50,000 were less likely to report leisure-time physical activity than were men or adults in higher-income households (figure 3.1). Differences between age groups were minimal.

Figure 3.1. Physical activity or exercise during the past month, Union County adults, by gender and income, 2023
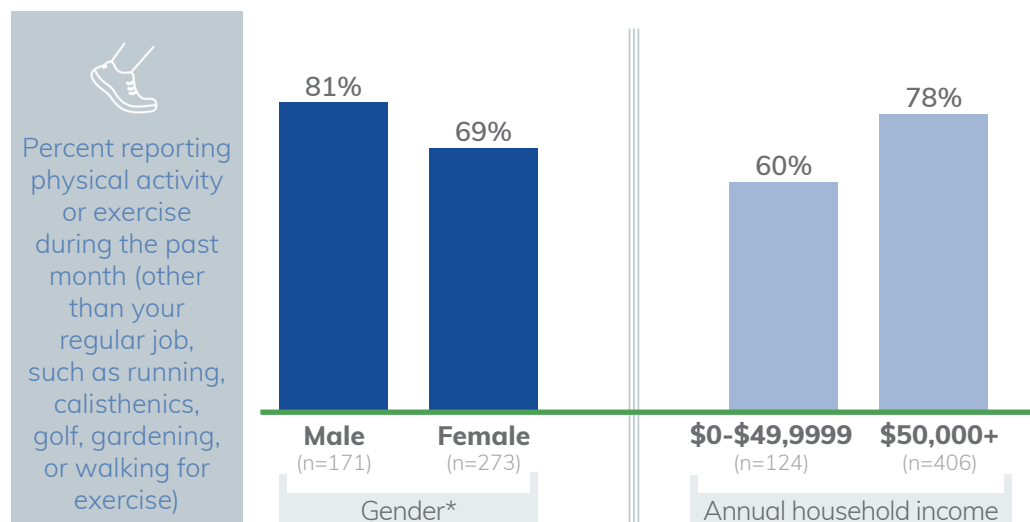
*Non-binary/other n= <10
Source: 2023 Union County CHA Survey, UCHD

When asked, "What would encourage more (walk, bike, roll, etc.)?", the most common responses (from a closed-ended list) were:
- More sidewalks or trails in the community (224 respondents)
- Having people to move with me (169)
- Better maintenance of sidewalks and trails (137)
- Better lighting of sidewalks, trails and streets (130)
- Seeing my friends/family/neighbors move more (105)
- More separation between cars, trucks and people (103)
- More trees and shade along sidewalks and trails (99)

Access to healthy food

Union County has a lower rate of food insecurity compared to Ohio overall, meaning the county is home to fewer households that lack enough food for an active, healthy life or have uncertain availability of nutritionally adequate foods.[23] In 2022, 10% of Union County residents were food insecure, compared to 14% of Ohioans.[24] However, Union County has a slightly higher rate of limited access to healthy foods—defined as the percent of people that have low incomes and do not live within 10 miles of a grocery store in rural areas or within 1 mile in non-rural areas.[25] In 2019, 8% of Union County residents had limited access to grocery stores, compared to 7% in Ohio overall.[26]

2023 Union County CHA survey findings provide information about disparities in the proportion of adults who said they were unable to afford to eat balanced meals in the past 12 months. Adults ages 18-65 and those with annual household incomes below $50,000 were more likely to report difficulty affording balanced meals than were older adults or people in higher-income households (figure 3.2). Differences between males and females were minimal.

Figure 3.2. Unable to afford to eat balanced meals, Union County adults, by age and income, 2023

Percent reporting they were unable to afford to eat balanced meals during past 12 months "always," "usually," or "sometimes"

21%
8%
38%
11%

18-65
(n=408)
66+
(n=162)
$0-$49,9999
(n=124)
$50,000+
(n=447)

Age group

Annual household income
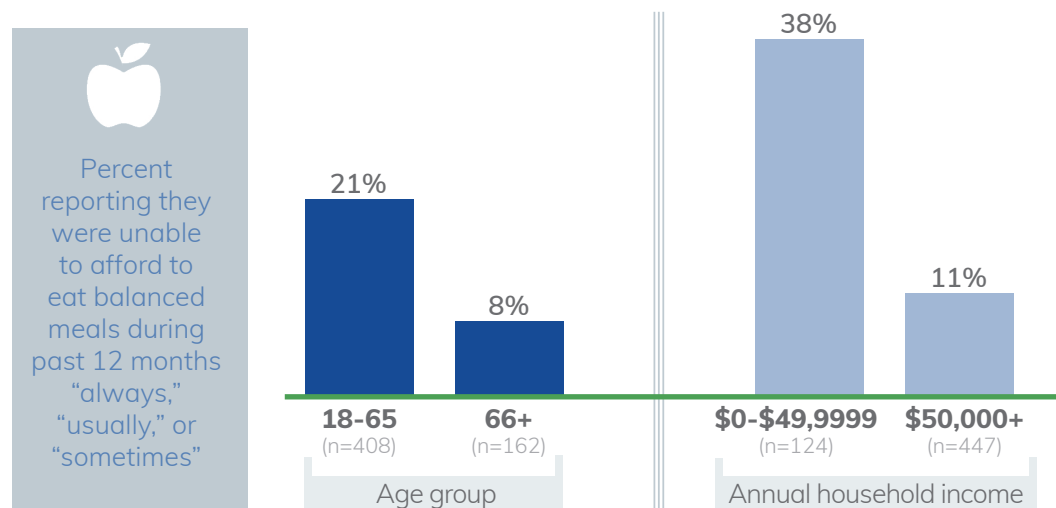
Source: 2023 Union County CHA Survey, UCHD

Sexual behavior and sexually transmitted infections

In 2023, 5% of Union County CHA Survey respondents said they had more than one sexual partner in the past year, down from 6% in 2018.

Union County had a lower rate of chlamydia infections in 2022 compared to Ohio overall (240.7 new cases per 100,000 people in Union County vs. 463.2 in Ohio).[27] The UCHD Sexual Health Clinic provides education, testing and treatment for sexually transmitted infections (STIs). The clinic served 938 individuals (unduplicated) in 2021-2022, up from 736 in 2018-2019.

Access to healthy food

Farmers markets

In rural communities, farmers' markets and community support play a pivotal role in improving access to nutritious food. Farmers' markets offer a direct channel for residents to obtain fresh, healthy produce, often at more affordable prices than the convenience stores typically found in food deserts. This direct access addresses nutritional deficiencies, reducing the risk of diet-related chronic diseases like diabetes and heart disease, which are often more prevalent in rural areas due to limited food access. Beyond nutrition, these markets foster community cohesion, providing a shared space for social interaction and strengthening local economies by supporting small family farms.

Union County is fortunate to have several farmers' markets sprinkled throughout the county, offering access to fresh produce every day of the week except Sunday throughout the summer season. Many of the farmers' markets accept nutrition assistance benefits including SNAP (Supplemental Nutrition Assistance Program), the federal Produce Perks initiative, WIC Farmers Market Nutrition Program (FMNP), and the Senior Farmers Market Nutrition Program (SFMNP). Acceptance of these benefits is significantly boosting food security and nutrition for vulnerable populations.

Access to health care

Access to affordable healthcare services at the right time and the right place is critical for effective prevention and treatment of chronic and acute illnesses. This section addresses health insurance coverage, preventive services, oral health, prescription assistance and emergency services utilization.

Key findings

- Union County has high rates of health insurance coverage and utilization of preventive services, such as flu vaccines for older adults, mammograms for women, and PSA tests for men. Most adults report routine checkups and visits to the dentist.
- Access challenges include a decline in pap smears (for women ages 21 to 65) and limited availability of dentists in the county compared to the state overall.
- Union County residents with lower incomes and non-elderly adults reported more difficulties accessing care in general and were less likely to have visited a dentist in the past year compared to those with higher incomes and over age 65.

Health insurance coverage

Most Union County residents have health insurance, and the uninsured rate has dropped over the past decade (see figure 4.1). In 2023, 17% of Union County children were covered by Medicaid, compared to 12% of adults aged 19-64 and 10% of adults over age 65.[28]

Figure 4.1. Uninsured, by age group, Union County, 2008 to 2022
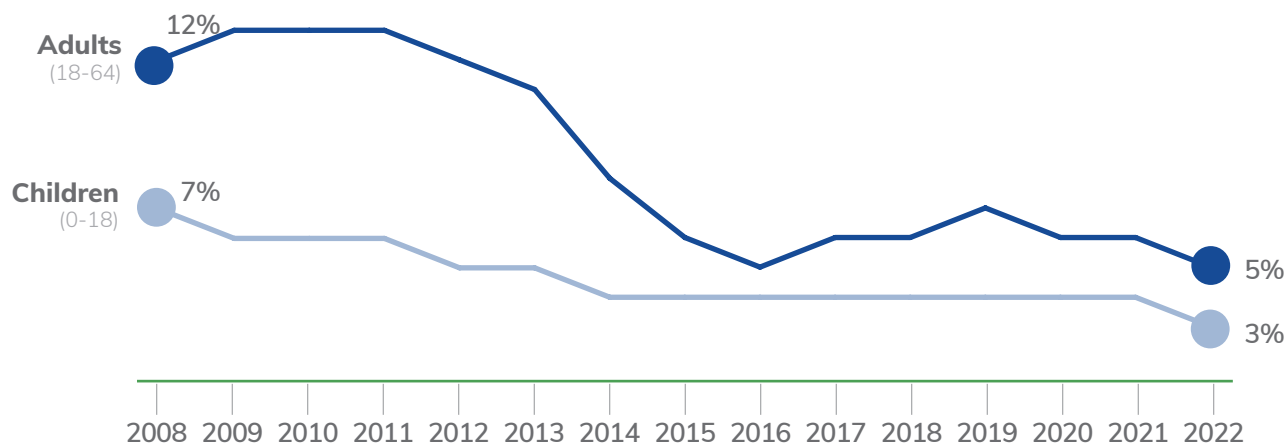
Source: US Census Bureau, Small Area Health Insurance Estimates

Preventive health care

Responses to the 2018 and 2023 Union County CHA surveys identified several strengths and challenges related to preventive healthcare utilization among adults:
- In 2023, 76% reported that they had visited a doctor for a routine checkup in the past year.
- The proportion of adults age 65 and older who reported receiving a flu vaccine rose from 81% in 2018 to 90% in 2023 and is much higher than in Ohio overall (65%).[29]
- Mammography rates (mammography within the past two years among women age 40 and over) improved and were higher in Union County (89%) than in Ohio (76%), while pap smear rates (pap smear within past three years among women ag 21-65) declined and were lower in Union County (73%) than in Ohio (77%).[30]
- Men's preventive health improved from 2018 to 2023, with more men reporting a PSA test within the past two years (65% of men age 40 and over) and 65% reporting ever having a digital rectal exam.

Oral health

In 2022, there was one dentist per 2,910 people in Union County. This ratio is higher than for Ohio overall (1,530:1), meaning that Union County has relatively fewer dentists available to serve the population.[31] In 2023, an estimated 12% of Union County adults (19-64) reported unmet need for dental care in the past 12 months (**Ohio Medicaid Assessment Survey**).

Despite these access challenges, the 2023 Union County CHA survey found that:
- 82% of adults had visited a dentist or dental clinic within the past year, above the 64% rate for Ohio overall.[32]
- Adults in households with incomes below $50,000 were less likely to report visiting the dentist than higher income households (69% vs. 84% for adults with household incomes $50,000+).
- 10% of adults 65 and older had all their permanent teeth removed, down from 15% in 2018.

Prescription drug access

In 2023, an estimated 12% of Union County adults (19-64) were unable to fill a prescription within the past 12 months, higher than 10% for Ohio overall.[33] With funding from the United Way of Central Ohio, UCHD provides short-term assistance for people in need of prescription medication. The number of residents served by this program has declined in recent years, while the average amount per voucher has increased (see figure 4.2).

Figure 4.2. UCHD Prescription Assistance Program Utilization

	Number of people served	Average voucher amount
2018	95	$157.36
2019	86	$143.53
2020	59	$179.52
2021	23	$267.30
2022	31	$327.18

Source: Union County Prescription Assistance Program

Overall ease of access to health care

The 2023 CHA survey asked: "Thinking about access to healthcare, how difficult or easy was it to get the healthcare services you needed within the past 12 months?" Overall, 10% of respondents said it was "extremely difficult" or "difficult," while 90% said it was "moderate," "easy" or "extremely easy." Group differences indicate that Union County adults with lower incomes and those under age 66 have the most difficulties accessing care, while there were not differences by gender. Seventeen percent of respondents in households with annual income of $0 to $49,999 said healthcare services were "extremely difficult" or "difficult" to get, compared to 8% of households with income of $50,000 or higher. Thirteen percent of respondents age 18-65 described access as "extremely difficult" or "difficult," compared to 3% of older adults (ages 66+).

Preventive medicine

Primary care close to home

Efforts to increase access to preventative healthcare have been underway as the population in Union County grows. For example:

- **Memorial Health**, a community health system, has expanded its offerings, bringing more primary care providers and specialists under its umbrella.
- **The Union County Health Department** has expanded its scope of care to offer primary care and sick bay services helping to provide more access to preventative care and chronic disease maintenance for people with and without insurance.
- **Lower Lights Christian Health Center**, a federally qualified health center, continues to provide comprehensive primary care and behavioral health services, often serving as a much needed option for people without insurance or with high deductible insurance.

Memorial Health has a core focus on the health and wellness of the Union County population. In addition to the flagship hospital in Marysville, Memorial has outpatient centers and physician practices positioned strategically throughout the region to provide residents with care near work and home. A host of free wellness classes are offered to the public, with topics ranging from heart healthy nutrition and exercise for good health, to Parkinson's disease, fall risk reduction, and clinical depression. Additionally, the team at Memorial strives to bring healthy tips right to the people, participating in local health fairs, screenings, and blood pressure checks throughout the year. And because the strength of our community is in our people, Memorial also offers a robust Occupational Health program for small and large businesses in Union County.

The Union County Health Department began efforts in 2024 to expand its existing vaccination and reproductive health clinic into a Community Health Center. This transition allows patients to receive ongoing preventive health services and have acute needs met, while improving continuity of care and maintaining affordability for patients of various economic backgrounds and those with and without insurance. By building on an established foundation of clinical and public health expertise, the Community Health Center at the Union County Health Department aims to enhance access to preventive care, reduce health disparities, and ensure that all residents have a source of affordable, high-quality, patient-centered care.

Lower Lights Christian Health Center, a federally qualified community health center, is another provider welcoming of un and underinsured populations. Lower Lights offers primary care, behavioral healthcare, and women's healthcare and is committed to delivering high-quality, affordable healthcare to every patient, regardless of ability to pay. Both Lower Lights and the Community Health Center at the Union County Health Department provide supportive wrap-around services from assistance with health insurance enrollment for Medicaid, Medicare, and the marketplace to pharmacy assistance.

Mental health and substance use

Behavioral health includes mental health and substance use disorders. The drug overdose epidemic and the rise of mental health concerns during the COVID-19 pandemic has led to behavioral health becoming a high priority across the state. This section addresses mental health, drug use, suicide and drug overdose deaths, with a focus on adults. Youth mental health is addressed on pages 43.

Key findings

- Union County has fewer mental health providers per population than Ohio overall.
- Self-reported poor mental health among Union County adults increased from 2018 to 2023. About one-third (35%) said they felt sad or hopeless for two or more weeks in a row (2023).
- Female adults and those in lower-income households ($0-$49,999 annual income) were much more likely than males and those in higher-income households ($50,000+) to report that their mental health was "not good" on five or more days over the past 30 days.
- Behavioral health emergency department (ED) visits declined from 2022 to 2023. Suicide attempts were the most common reason for behavioral health-related ED visits.
- Union County has lower rates of adult cigarette smoking and marijuana use than Ohio overall, but a higher adult drinking rate. Drunk driving may be increasing and almost a third of motor vehicle crash deaths involve alcohol.

Access to mental health care

In 2024, there was one mental health provider per 750 people in Union County. This ratio is higher than for Ohio overall (290:1), meaning that Union County has relatively fewer mental health providers available to serve the population.[34] In 2023, an estimated 13% of Union County adults (19-64) reported unmet need for mental health care in the past 12 months.[35]

Mental wellbeing

Responses to the Union County CHA surveys indicate an increase in poor mental health in recent years. In 2023, 38% of Union County adults rated their mental health as "not good" on four or more days in the past 30 days and 35% felt sad or hopeless for two or more weeks in a row. Figure 5.1. displays the increases from 2018.

Figure 5.1. Poor mental health, Union County adults, 2018 and 2023

Rated their mental health as "not good" on four or more days (in past 30 days)
- 2018: 30%
- 2023: 38%

Felt sad or hopeless for two or more weeks in a row
- 2018: 11%
- 2023: 35%

Average days that mental health not good (in past 30 days)
- 2018: 4.2
- 2023: 5.4
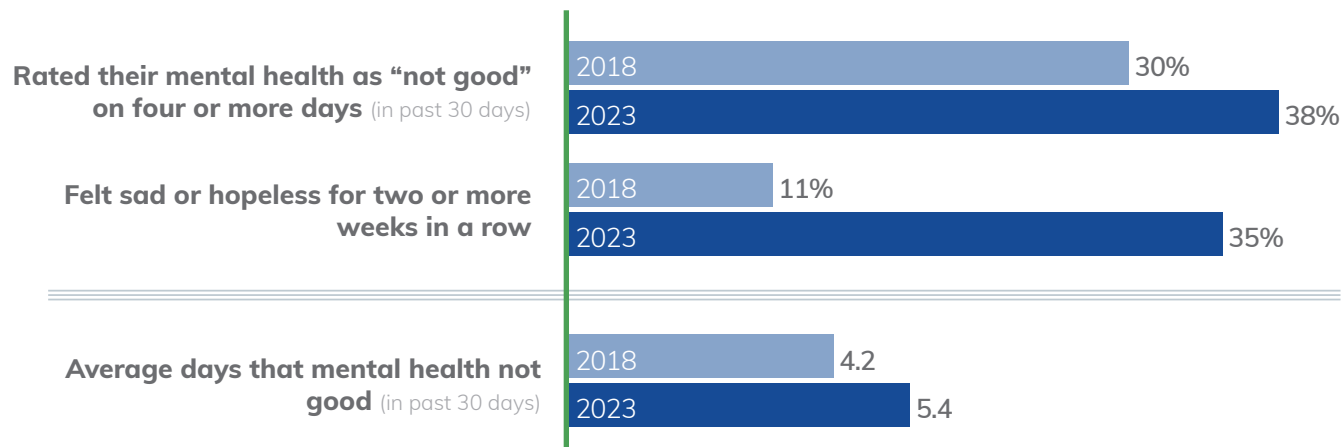
Source: 2018 and 2023 Union County CHA Surveys, UCHD

Poor mental health is much more common in some groups of Union County residents. As shown in figure 5.2, female adults and those in lower-income households were much more likely than males and those in higher-income households to report that their mental health was "not good" on five or more days over the past 30 days.

Figure 5.2. Mental health not good for 5 or more days during last 30 days, Union County adults, by gender and income, 2023

Percent reporting mental health was "not good" 5 or more days"

Gender*
- Male (n=164): 8%
- Female (n=379): 26%

Annual household income
- $0-$49,9999 (n=112): 51%
- $50,000+ (n=397): 30%
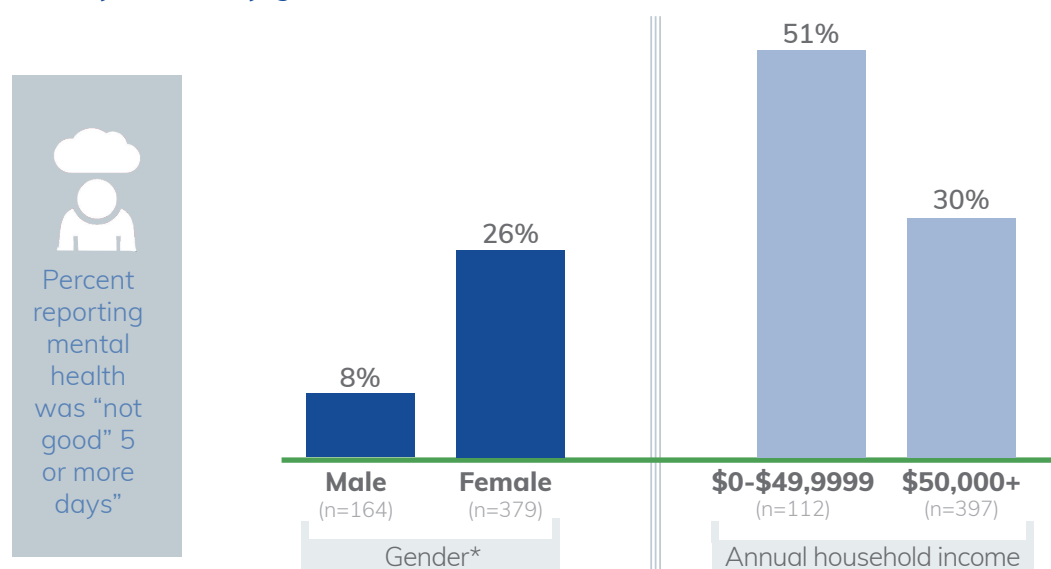
*Non-binary/other n= <10
Source: 2023 Union County CHA Survey, UCHD

In 2023, the most common behavioral health diagnoses reported by the Union County Mental Health and Recovery Board were:
• Depressive disorders
• Anxiety disorders
• Bipolar disorders
• Opioid use disorders
• Post Traumatic Stress Disorder

As shown in figure 5.3, there was a decline from 2022 to 2023 in emergency department (ED) visits for mental health or substance use issues. Suicide attempt was by far the most common ED chief complaint and most were adults (15% children).

Figure 5.3. Memorial Hospital ED utilization for behavioral health concerns, 2022 and 2023

	2022 (number of patients)	2023 (number of patients)	2023 (percent of MHSA patients)
Total "mental health or substance abuse" (MHSA) visits	516	371	
ED chief complaint			
Suicidal	211	156	42%
Anxiety	116	87	23%
Drug overdose	54	33	9%
Alcohol intoxication	43	31	8%
Hallucinations	35	19	5%
Depression	24	21	6%
Alcohol problem	13	9	2%
Mental health problem	7	11	3%
Psychosis, affective	7	3	1%
Paranoid	6	1	0%
Gender			
Male	251	177	48%
Female	265	194	52%
Age			
0-17	82	55	15%
18-49	321	220	59%
50+	113	96	26%

Source: Union County Mental Health and Recovery Board

Tobacco, alcohol and marijuana use

Tobacco (nicotine), alcohol and marijuana are the most commonly used drugs in Ohio.[36] All of these substances are now legal for adults to use. Ohio's medical marijuana began in January 2019 and recreational marijuana sales began in August 2024.

Union County has lower rates of adult cigarette smoking and marijuana use than Ohio overall, but a higher adult drinking rate (figure 5.6).

Figure 5.6. Tobacco, alcohol and marijuana use among adults, Union County (2023) and Ohio (2022)
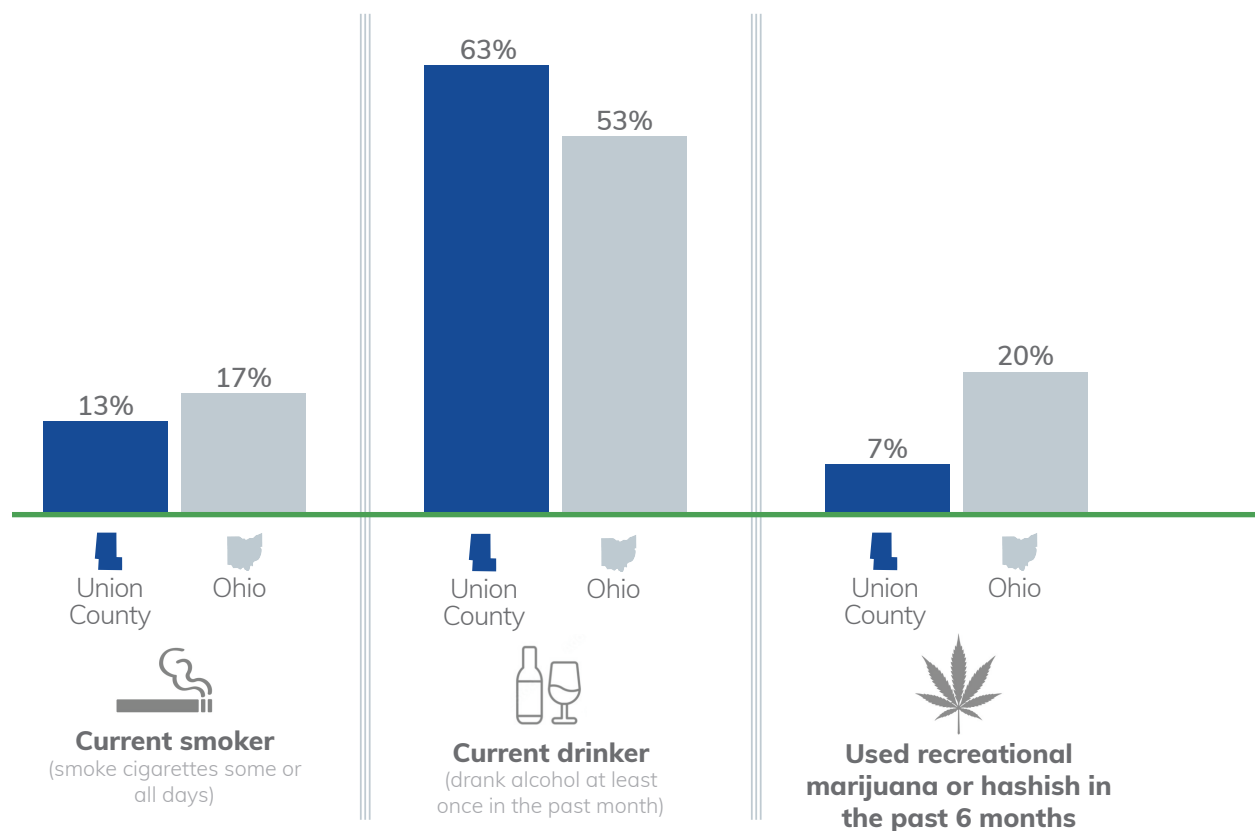
Source for Union County data: 2023 Union County CHA Survey, UCHD
Source for Ohio data: Behavioral Risk Factor Surveillance System Prevalence and Trends, US Centers for Disease Control and Prevention

There was a slight increase in self-reported drunk driving in 2023; 4% of CHA survey respondents in 2023 said they drove after "perhaps having too much alcohol to drink," up from 3% in 2018. In 2018-2022, 31% of motor vehicle crash deaths in Union County involved alcohol—a rate similar to Ohio overall (32%) and higher than the U.S. (26%).[37]

Suicide and drug overdose death rates

The number of unintentional drug overdose deaths in Union County fell from 12 in 2020 to 7 in 2023.[38] The number of suicide deaths did not change from 2020 to 2023 (8 deaths in each year).[39]

Communicable disease

Also known as "infectious diseases," communicable diseases are caused by pathogens (like viruses or bacteria) that can be transmitted from person to person, or animal to person, or from the environment to a person. This section addresses specific communicable diseases that healthcare providers and laboratories report to UCHD.

Key findings

- UCHD monitors several communicable diseases to prevent their spread, including foodborne illness outbreaks, rabies and Lyme disease.
- Sexually transmitted infections (such as chlamydia and gonorrhea) are the most commonly reported type of communicable disease in Union County, aside from COVID-19.

Reported diseases

UCHD's communicable disease team works to prevent, identify, and mitigate outbreaks of infectious diseases within Union County. The team of epidemiologists and public health nurses monitor disease trends, do disease investigations and contact tracing, issue health alerts and provide infection control guidance to patients, affected worksites or community locations, and healthcare providers.

Including COVID-19, the number of communicable disease cases reported to UCHD rose from 294 in 2018 to 7,560 in 2022. In every year from 2018 to 2022, sexually transmitted infections were the most commonly reported type of communicable disease, aside from COVID-19 (figure 6.1). The UCHD Sexual Health Clinic served a total of 576 clients in 2021-2022 (unduplicated) and performed 367 HIV tests during that time period.

Figure 6.1. Reported communicable disease cases, Union County, 2022

Selected diseases, not including COVID-19

Sexually Transmitted Infections
(such as chlamydia, gonorrhea and syphilis)
121

Enteric illnesses
(such as salmonellaosis, campylobacteriosis, E. coli
and other causes of foodborne illnesses)
32

Vaccine preventable illnesses
(such as measles, mumps and pertussis)
35

Bloodborne pathogens
(Hepatitis C and perinatal hepatitis C)
32

Vectorborne illnesses
(such as West Nile visus and Lyme disease)
3

Other reported illnesses
13

Source: UCHD

Any bite by a mammal must be reported to the health department for rabies testing. From 2018 to 2022, there were 635 bite reports, most commonly from dogs, cats and bats. There were three positive rabies cases, all from bats. Rabies is endemic to Ohio wildlife and rabies disease in humans is always fatal.

Chronic disease

Chronic diseases, such as heart disease and cancer, are leading causes of death. Prevention and management of conditions such as obesity, high blood pressure, diabetes and arthritis are critical for improving quality of life and overall well-being. This section addresses weight status, cardiovascular health and specific chronic conditions among adults.

Key findings

- Obesity, overweight and high blood pressure are very common among Union County adults and increased from 2018 to 2023. Over a third of 2023 Union County survey respondents said they had been diagnosed with high blood pressure, up from 28% in 2018.
- Other chronic conditions such as diabetes, cancer and heart disease also increased, while arthritis prevalence declined.

Weight status and cardiovascular health

Responses to the 2018 and 2023 Union County CHA surveys identified several chronic disease challenges for Union County adults:
- From 2018 to 2023, there was an increase in the proportion of adults reporting above-normal weight. In 2023, 43% of respondents indicated they were obese, up from 38% in 2018 and above the Ohio rate of 38%.[40] In addition, overweight increased from 29% in 2018 to 33% in 2023, similar to rates in Ohio overall.[41]
- Self-reported high blood pressure also increased, from 28% in 2018 to 38% in 2023.

Arthritis, asthma and diabetes and cancer

CHA survey responses also identified the following strengths and challenges for specific conditions:
- The proportion of adults reporting that they had been diagnosed with arthritis fell from 30% in 2018 to 25% in 2023.
- Diabetes prevalence rose sharply, from 7% in 2018 to 16% in 2023.
- In 2023, 12% of adults reported being diagnosed with asthma, similar to the rate in 2018 (13%).
- There was an increase in cancer prevalence, from 6% in 2018 to 7% in 2023 (any type of cancer other than skin cancer).

Figure 7.1. Chronic conditions reported by Union County adults, 2023 prevalence and percent change from 2018 to 2023

(selected conditions with notable trends*)

	Percent change from 2018 to 2023**
Obese	43% ▲+13%
Had been diagnosed with high blood pressure	38% ▲+36%
Overweight	33% ▲+14%
Had been diagnosed with arthritis	25% ▼-17%
Had been diagnosed with diabetes	16% ▲+129%
Diagnosed with any type of cancer, other than skin cancer	7% ▲+17%
Had angina or coronary heart disease	4% ▲+33%
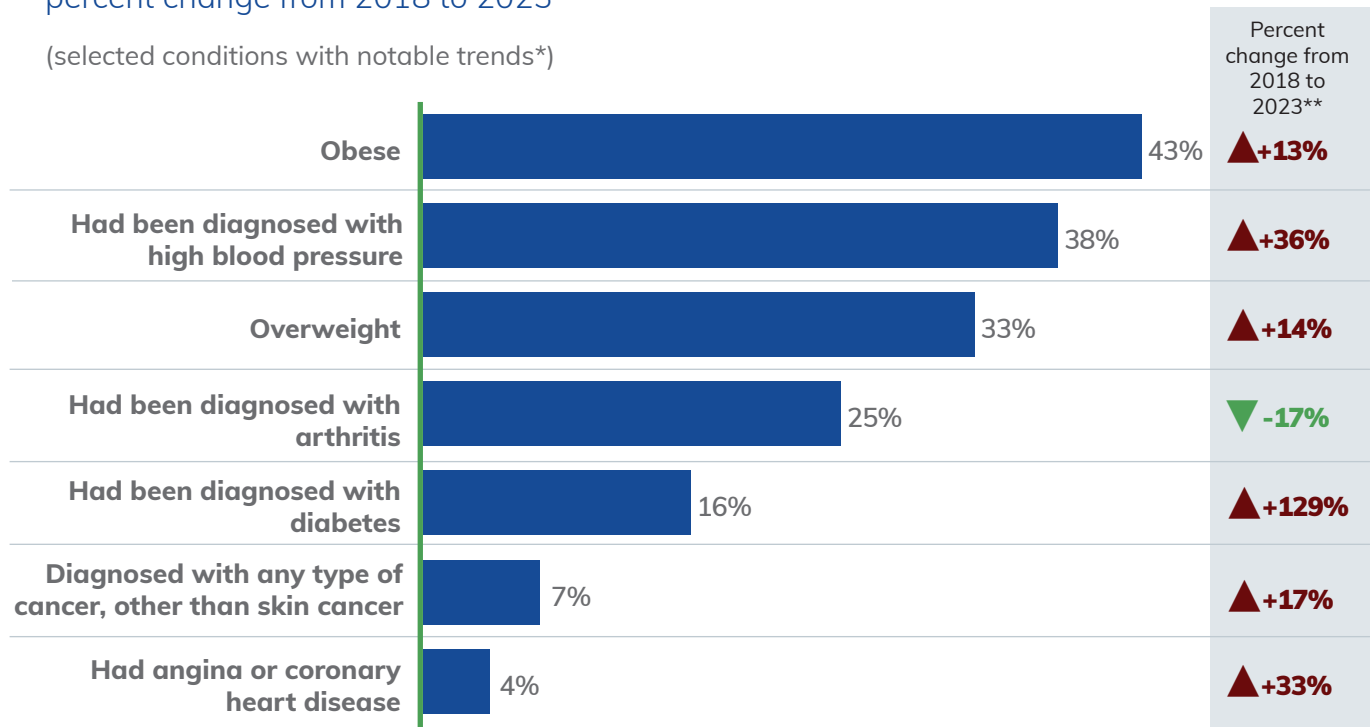
*Percent change of 10% or more from 2018 to 2023
** Relative change
Source: 2018 and 2023 Union County CHA Surveys, UCHD

Active living

Trail connectivity

Trails and their connectivity are vital for promoting healthy lifestyles and offering essential transportation alternatives. Trails provide accessible and safe avenues for walking, cycling, hiking, or jogging, enabling residents of all ages to incorporate physical activity into their daily routines. Beyond recreation, trails serve as crucial transportation corridors, linking homes, businesses, schools, and parks, and facilitating movement and access to necessary destinations.

By connecting neighborhoods and communities, local businesses are also supported through increased foot traffic and tourism. Union County, for example, aims to establish neighborhood and community trails with connectivity beyond its borders, recognizing its role in creating a comprehensive regional trail system.

Maternal and infant health

All babies deserve a healthy start. This section highlights the health and well-being of mothers, infants, and families during pregnancy, birth, and the early stages of life. It explores key indicators such as prenatal care access, birth outcomes, infant mortality, and car seats.

Key findings

- Union County has good birth outcomes, including rates of infant mortality and preterm births that are lower than in Ohio overall.
- Increasing the proportion of women who get prenatal care in the first trimester and helping women of childbearing age to maintain a healthy weight could further improve maternal and infant health.

Compared to Ohio overall, Union County has good birth outcomes. The county's 2019-2023 infant mortality rate was 4.6 deaths per 1,000 live births, compared to 7.1 for Ohio in 2023. Union County's rates of low birth weight and preterm births were also lower (see figure 8.1).

Most Union County mothers received prenatal care in the first trimester (69%) (figure 8.1). More than half of mothers were overweight or obese (54.9%). Being underweight or obese is associated with worse maternal and infant health outcomes, including infant mortality.

Figure 8.1. Birth outcomes, Union County (2019-2023) and Ohio (2023)

Low birth weight: 7% (Union County), 9% (Ohio)

Preterm (extremely, very or moderate to late preterm): 8% (Union County), 11% (Ohio)
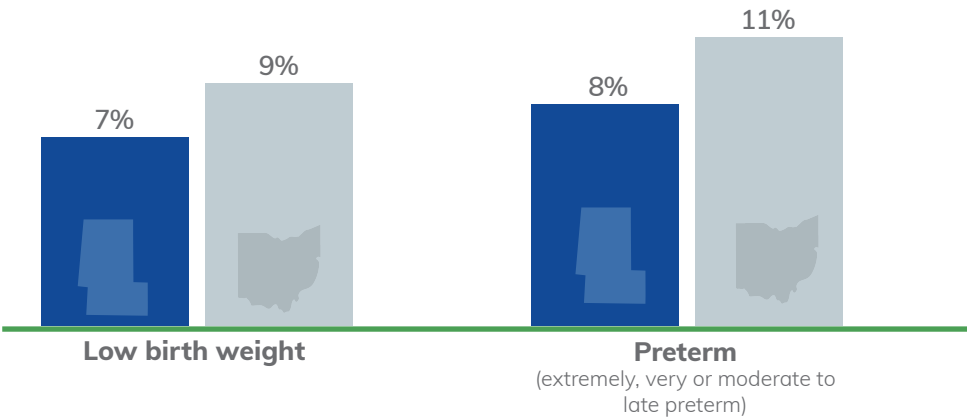
Trimester of First Prenatal Care Appointment

First trimester	Second trimester	Third trimester	None	Unknown
69%	19.3%	2.3%	0.7%	8.5%

Mother's Body Mass Index (BMI)

Underweight (under 18.5)	Normal (18.5-24.9)	Overweight (25-29.9)	Obese (over 30)
2.4%	42.7%	26.8%	28.1%

Source: 2023 Annual Report Infant Mortality, Ohio Department of Children and Youth

UCHD provides several services to improve maternal health and prevent injuries to infants and young children. In 2022, UCHD:
• Served 32 women in the Sexual Health Clinic
• Distributed 46 car seats
• Checked installation of 23 car seats
• Distributed 3 Pack-and-Plays (cribs for safe sleep)

Youth health and wellbeing

This section presents the findings of the Ohio Healthy Youth Environments Survey (OHYES!) that 966 students in grades 7, 9, 10 and 11 in the Fairbanks, Marysville and North Union school districts completed during the 2023-24 school year.

Key findings

- Students report high levels of parental engagement and physical activity—two important protective factors that support physical and mental health.
- Many students are not eating enough fruit and vegetables or getting enough sleep. Inadequate sleep is a particular concern for high school students; only 38% of those in grades 9-11 said they get 8 or more hours of sleep on an average school night. Relatedly, only 35% of those in grades 9-11 said their parents put limits on their use of electronic devices.
- Mental health concerns and gambling are more common than drug use. For example, 4% of students reported drinking alcohol in the past 30 days and 2% reported using marijuana, while 21% reported anxiety, 16% said they felt sad or hopeless almost every day for two weeks or more in a row during the past year and 10% had ever gambled.
- Mental health concerns were much more common for female, transgender and gender non-conforming students, compared to male students. Gambling, was more common among male students.

Parental involvement and school connectedness

Having parents involved in their daily lives and feeling connected to school can protect youth from engaging in risky behaviors. Most Union County students reported that their parents talk to them about what they do in school and push them to work hard at school. However, fewer students said their parents put limits on use of electronic devices, particularly among 9th-11th graders (see figure 9.1). While many students described positive connections to school (shown in figure 9.1), only about a third agreed or strongly agreed that they enjoy coming to school.

Figure 9.1. Parental involvement and school connectedness, by grade, 2023-2024, Union County school districts

Parental involvement

My parents push me to work hard at school
Agree or Strongly agree
- Grade 7: 84%
- Grades 9-11: 87%

My parents talk to me about what I do in school
Agree or Strongly agree
- Grade 7: 81%
- Grades 9-11: 75%

My parents put limits on use of electronic devices for non-school purposes
Agree or Strongly agree
- Grade 7: 59%
- Grades 9-11: 35%

School connectedness

My school provides opportunities to learn about different cultures
Agree or Strongly agree
- Grade 7: 73%
- Grades 9-11: 61%

I can go to adults at my school for help if I need it
Agree or Strongly agree
- Grade 7: 69%
- Grades 9-11: 62%

I feel like I belong at my school
Agree or Strongly agree
- Grade 7: 61%
- Grades 9-11: 53%

I enjoy coming to school
Agree or Strongly agree
- Grade 7: 36%
- Grades 9-11: 37%

Source: 2023-2024 OHYES! Survey (analysis by UCHD)

Physical activity, nutrition and sleep

More than half of students reported being physically active at least 60 minutes per day on five or more days in the past week. Fruit and vegetable consumption, however, was relatively low with only 14% of students eating five or more servings per day in the past seven days. Adequate sleep was much lower for high school students; only 38% of those in grades 9-11 said they got 8 hours or more of sleep on an average school night, compared to 56% of 7th graders (figure 9.2).

Figure 9.2. Physical activity, nutrition and sleep, by grade, 2023-2024, Union County school districts

Physically active at least 60 minutes per day on 5 or more days in the past week
- Grade 7: 66%
- Grades 9-11: 59%

Get 8 hours or more of sleep on an average school night
- Grade 7: 56%
- Grades 9-11: 38%

Ate 5 or more servings of fruits and vegetables per day (in the past 7 days)
- Grade 7: 17%
- Grades 9-11: 11%
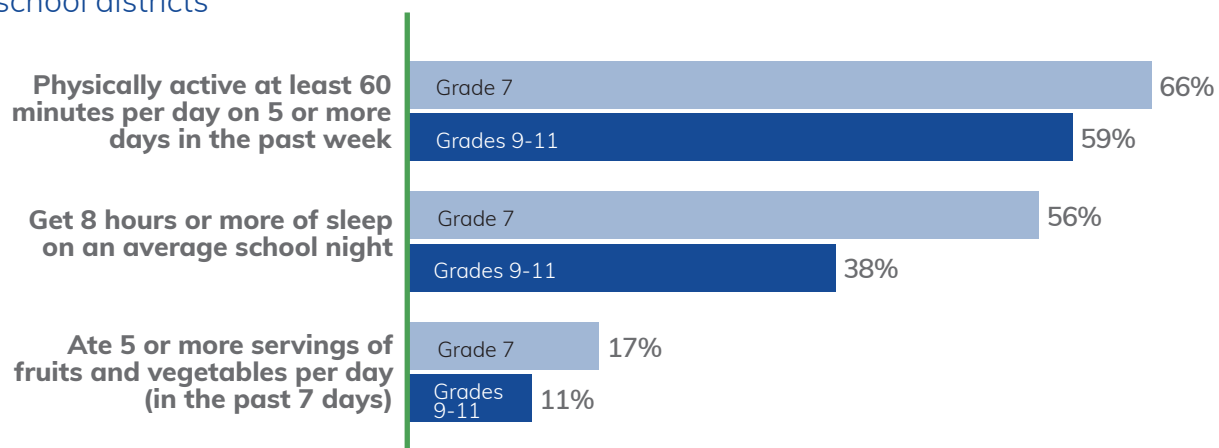
Source: 2023-2024 OHYES! Survey (analysis by UCHD)

Mental health

Female, transgender and gender non-conforming students reported more mental health concerns than male students (figure 9.3). For example, 12% of males said they felt sad or hopeless almost every day, compared to 18% of females and 59% of transgender, gender non-conforming and other students.

Figure 9.3. Mental health, by gender, 2023-2024, Union County school districts
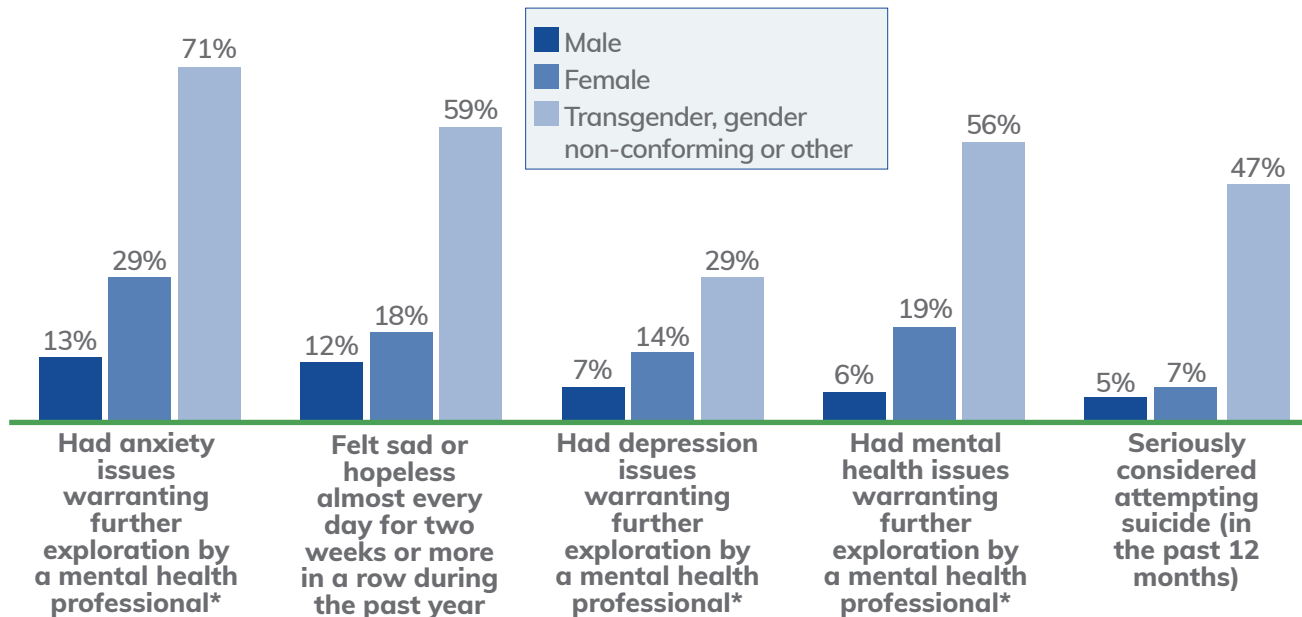

Legend:
- Male
- Female
- Transgender, gender non-conforming or other

	Had anxiety issues warranting further exploration by a mental health professional*	Felt sad or hopeless almost every day for two weeks or more in a row during the past year	Had depression issues warranting further exploration by a mental health professional*	Had mental health issues warranting further exploration by a mental health professional*	Seriously considered attempting suicide (in the past 12 months)
Male	13%	12%	7%	6%	5%
Female	29%	18%	14%	19%	7%
Transgender, gender non-conforming or other	71%	59%	29%	56%	47%

*Based on threshold scores from the Patient Health Questionnaire for Psychological Distress (PHQ-4)
Note: The number of students who completed the survey and identified their gender was: 488 male, 458 female, 17 transgender or gender nonconforming and 4 missing.
Source: 2023-2024 OHYES! Survey (analysis by UCHD)

Drug use and gambling

Overall, drug use is very rare among 7th graders in Union County. Among students in grades 9-11, electronic vapor products (vaping) and alcohol were the most commonly used substances (figure 9.4).

Figure 9.4. Any use of drugs in the past 30 days (1 or more days), grades 9-11, 2023-2024, Union County school districts

Any use in past 30 days (1 or more days)

9%	8%	3%
Electronic vapor product	Alcohol (drank one or more drinks)	Marijuana or hashish
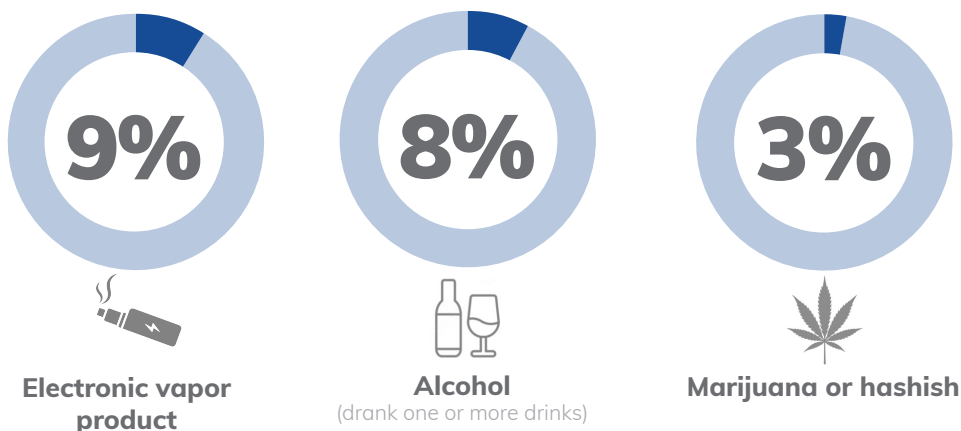
Source: 2023-2024 OHYES! Survey (analysis by UCHD)

Ten percent of students said they had ever gambled. Gambling was much more common among males (18%) compared to females (3%).

Bullying

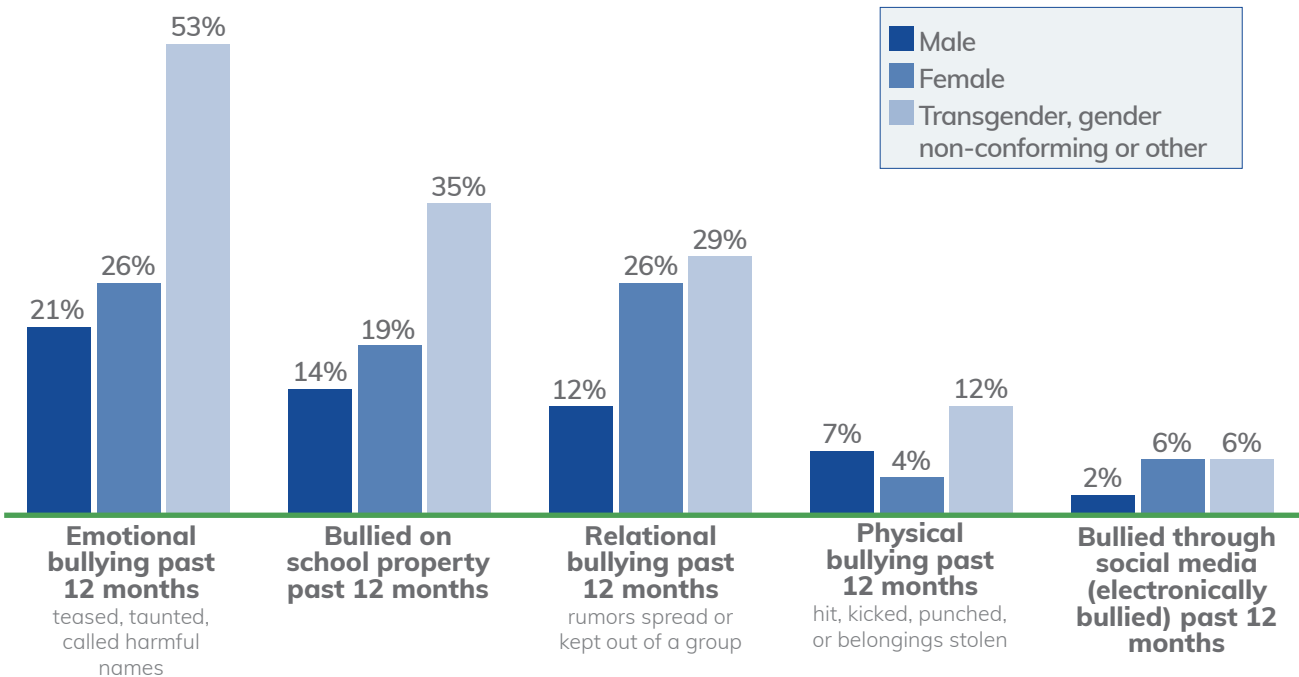The most common form of bullying reported by students was emotional bullying (e.g. being teased, taunted or called harmful names), which was experienced by 24% of students overall. Electronic bullying (via social media) was less common, reported by 4% of students overall. Female, transgender and gender non-conforming students were generally more likely than male students to report that they had been bulled in the past 12 months (figure 9.5).

Figure 9.5. Bullying, by gender, 2023-2024, Union County school districts

Legend:
- Male
- Female
- Transgender, gender non-conforming or other

Emotional bullying past 12 months — teased, taunted, called harmful names: Male 21%, Female 26%, Transgender/other 53%

Bullied on school property past 12 months: Male 14%, Female 19%, Transgender/other 35%

Relational bullying past 12 months — rumors spread or kept out of a group: Male 12%, Female 26%, Transgender/other 29%

Physical bullying past 12 months — hit, kicked, punched, or belongings stolen: Male 7%, Female 4%, Transgender/other 12%

Bullied through social media (electronically bullied) past 12 months: Male 2%, Female 6%, Transgender/other 6%

Source: 2023-2024 OHYES! Survey (analysis by UCHD)

Appendices

Appendix A. Demographic characteristics

Figure A.1. General demographic characteristics of Union County, 2023 5-year estimates

Total Population	Number	Percent (%)
2023 Total Population	65,293	100.0%
Largest City - Marysville	**Number**	**Percent (%)**
2023 Total Population	28,423	100.0%
Population by Race/Ethnicity	**Number**	**Percent (%)**
Total Population	65,293	100.0%
White	59,545	91.2%
Asian	3,551	5.4%
Black or African American	2,435	3.7%
Two or more races	3,254	5.0%
Hispanic or Latino (of any race)	1,905	2.9%
Some other race	1,987	3.0%
American Indian and Alaska Native	1,213	1.9%
Population by Age	**Number**	**Percent (%)**
Under 5 years	4,037	6.2%
5 to 17 years	11,810	18.1%
18 to 24 years	4,955	7.6%
25 to 44 years	18,836	28.8%
45 to 64 years	17,205	26.4%
65 years and more	8,450	12.9%
Median age (years)	38.1	N/A
Sex	**Number**	**Percent (%)**
Male	31,579	48.4%
Female	33,714	51.6%

Household by Type	Number	Percent (%)
Total households	23,495	100.0%
Total families	17,567	N/A
Married-couple family household	14,695	60.4%
Married-couple family household with children <18 years	6,707	28.5%
Female householder, no husband present	3,908	16.6%
Female householder, no husband present with children <18 years	855	3.6%
Nonfamily household (single person) living alone	4,712	20.1%
Nonfamily household (single person) 65 years+	1,678	7.1%
Households with one or more people <18 years	9,283	39.5%
Households with one or more people 65 years and >	5,702	24.3%
Average household size	2.67	N/A
Average family size	3.07	N/A
Housing Occupancy	**Number**	**Percent (%)**
Median value of owner-occupied units	$306,600.00	N/A
Median housing units with a mortgage	13,557	72.8%
Median housing units without a mortgage	5,070	27.2%
Median value of occupied units paying rent	$1,188.00	N/A
Median rooms per total housing unit	6.6	N/A
Total occupied housing units	24,298	100.0%
No telephone service available	101	0.4%
Lacking complete kitchen facilities	102	0.4%
Lacking complete plumbing facilities	83	0.4%
School Enrollment	**Number**	**Percent (%)**
Population 3 years and over enrolled in school	16,140	100.0%
Nursery & preschool	1,673	10.4%
Kindergarten	822	5.1%
Elementary School (Grades 1-8)	7,105	44.0%
High School (Grades 9-12)	4,156	25.7%
College or Graduate School	2,384	14.8%

Figure A.1. General demographic characteristics of Union County, 2023 5-year estimates (cont.)

Educational Attainment	Number	Percent (%)
Population 25 years and over	44,491	100.0%
< 9th grade education	442	1.0%
9th to 12th grade (no diploma)	1,682	3.8%
High school graduate (includes equivalency)	13,406	30.1%
Some college, no degree	8,110	18.2%
Associate degree	3,454	7.8%
Bachelor's degree	11,245	25.3%
Graduate or professional degree	6,152	13.8%
High school graduate or higher	42,367	95.2%
Bachelor's degree or higher	17,397	39.1%
Marital Status	**Number**	**Percent (%)**
Population 15 years and over	52,356	80.2%
Never married	14,451	27.6%
Now married, excluding separated	29,859	57.0%
Separated	707	1.4%
Widowed	2,293	4.4%
Widowed females	1,657	6.1%
Divorced	5,046	9.6%
Divorced females	2,888	10.6%
Veteran Status	**Number**	**Percent (%)**
Civilian population 18 years and over	49,428	100.0%
Veterans 18 years and over	2,876	5.8%
Disability Status of the Civilian Non-Institutionalized Population	**Number**	**Percent (%)**
Total civilian noninstitutionalized population	62,734	100.0%
Civilian with a disability	6,638	10.6%
Under 18 years	15,826	25.2%
Under 18 years with a disability	510	3.2%
18 to 64 years	38,764	61.8%
18 to 64 years with a disability	3,379	8.7%
65 Years and over	8,144	13.0%
65 Years and over with a disability	2,749	33.8%

Figure A.1. General demographic characteristics of Union County, 2023 5-year estimates (cont.)

Employment Status	Number	Percent (%)
Population 16 years and over	51,319	100.0%
16 years and over in labor force	35,117	68.4%
16 years and over not in labor force	16,202	31.6%
Females 16 years and over	26,658	100.0%
Females 16 years and over in labor force	16,327	61.2%
Population living with own children <6 years	4,522	8.8%
All parents in family in labor force	3,269	100.0%
Class of Worker	**Number**	**Percent (%)**
Civilian employed population 16 years and over	34,256	100.0%
Private wage and salary workers	27,789	81.1%
Government workers	4,704	13.7%
Self-employed workers in own not incorporated business	1,756	5.1%
Unpaid family workers	7	0.0%
Median Earnings	**Income**	
Male, Full-time, Year-Round Workers	$76,204.00	N/A
Female, Full-time, Year-Round Workers	$60,010.00	N/A
Occupations	**Number**	**Percent (%)**
Employed civilian population 16 years and over	34,256	100.0%
Management, business, science, and art occupations	16,412	47.9%
Sales and office occupations	6,448	18.8%
Production, transportation, and material moving occupations	5,222	15.2%
Service occupations	3,834	11.2%
Natural resources, construction, and maintenance occupations	2,340	6.8%

Leading Industries	Number	Percent (%)
Educational services, and health care and social assistance	7,325	21.4%
Manufacturing	5,932	17.3%
Professional, scientific, and management, and administrative and waste management services	4,288	12.5%
Retail trade	3,145	9.2%
Finance and insurance, and real estate and rental and leasing	2,780	8.1%
Arts, entertainment, and recreation, and accommodation and food services	1,876	5.5%
Public administration	1,817	5.3%
Construction	1,766	5.2%
Transportation and warehousing, and utilities	1,724	5.0%
Other services (except public administration)	1,318	3.8%
Wholesale trade	1,268	3.7%
Agriculture, forestry, fishing and hunting, and mining	628	1.8%
Information	389	1.1%
Income in 2023	**Number**	**Percent (%)**
Households	23,495	100.0%
< $10,000	558	2.4%
$10,000 to $14,999	202	0.9%
$15,000 to $24,999	766	3.3%
$25,000 to $34,999	858	3.7%
$35,000 to $49,999	2,167	9.2%
$50,000 to $74,999	3,281	14.0%
$75,000 to $99,999	2,813	12.0%
$100,000 to $149,999	5,703	24.3%
$150,000 to $199,999	3,364	14.3%
$200,000 or more	3,783	16.1%

Figure A.1. General demographic characteristics of Union County, 2023 5-year estimates (cont.)

Median household income	$109,506.00	N/A
Families	17,567	100.0%
< $10,000	199	1.1%
$10,000 to $14,999	150	0.9%
$15,000 to $24,999	450	2.6%
$25,000 to $34,999	257	1.5%
$35,000 to $49,999	1,092	6.2%
$50,000 to $74,999	2,352	13.4%
$75,000 to $99,999	1,835	10.4%
$100,000 to $149,999	4,675	26.6%
$150,000 to $199,999	2,959	16.8%
$200,000 or more	3,598	20.5%
Median family income	$123,968	
Per capita income in 2023	$49,946	

Source: US Census Bureau, American Community Survey

Appendix B. Partner collaboration and data methodology

Background

A community health assessment (CHA) is a comprehensive appraisal of the community's health status that identifies areas for improvement. The CHA identifies contributing factors that impact health outcomes and community strengths, assets, and resources that can be mobilized to improve population health.

Local organizations can then use this information when developing a community health improvement plan to inform how and where resources should be allocated to best meet community needs.

A CHA offers benefits to the residents of a community in many ways, including:
- **Improved Health Services:** CHAs help identify needs and gaps in health services, leading to better-targeted programs and resources that directly benefit community members.
- **Informed Decision-Making:** The data collected during assessments can inform individuals about health risks and resources within their community, empowering them to make better health choices.

- **Community Engagement:** CHAs often involve community members in the process, fostering a sense of ownership and encouraging participation in health initiatives, which can lead to stronger community ties.
- **Policy Development:** The findings from CHAs can influence local health policies and funding decisions, ensuring that the needs of the community are prioritized and addressed.

Overall, CHAs play a crucial role in enhancing the health and well-being of individuals within a community by ensuring that health services are aligned with the actual needs of the population.

The assessment cycle can vary. State law requires hospitals and health departments to complete an assessment, or update an existing assessment, once every three years. This cadence is intended to align with the state's health assessment cycle. CHAs are also a requirement of the Public Health Accreditation Board (PHAB) and are required to be completed at least once every five years.

PHAB standards highly recommend using national models of methodology when compiling CHAs. The 2023 Union County CHA was based on the National Association of County and City Health Officials (NACCHO) Mobilizing Action through Partnerships and Planning (MAPP) process. MAPP is a community-driven planning process for improving community health that provides a structure for communities to assess their most pressing population health issues and align resources across sectors for strategic action.

Primary data collection methods

The 2023 CHA includes data from three primary sources: 1) Quantitative data from the cross-sectional 2023 CHA Survey of adults, 2) Quantitative administrative data from UCHD programs and services, and 3) Qualitative data from community conversations with people with developmental disabilities and their families and caregivers. In addition, 2023 CHA Survey results were compared to 2018 CHA Survey results (see the 2018 CHA for methodology).

From the beginning, community leaders were actively engaged in the planning process and helped define the content and scope of the survey. The Union County CHA steering committee reviewed and discussed banks of potential questions from the Behavioral Risk Factor Surveillance System (BRFSS) survey, selecting 76 questions for the final Union County CHA survey. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

The survey was marketed to individuals aged 18 and older living in Union County, Ohio. According to the 2020 U.S. Census, 49,446 persons aged 18 and over lived in Union County. A power analysis was used to determine the sample size needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error of the survey findings.) A sample size of at least 382 adults was needed to ensure this level of confidence.

Online surveying was completed through Qualtrics, and paper surveys were made available for those unable to access the survey online. Surveying took place over six weeks in the late fall and early winter of 2023. Individual survey responses were anonymous. A total of 549 Union County residents completed the survey, with all areas of the county and all adult age groups represented. This sample size means that the responses in the health assessment should be representative of

the entire county.

Responses to the surveys were evaluated for age, gender, and geography throughout data collection to ensure the sample size had adequate representation. Social media posts and stakeholder support were utilized to advertise which demographic was lacking in responses and to encourage participation from those demographics.

Data was analyzed by Ohio University researchers. Crosstabs were used to calculate descriptive statistics for the data presented in this report.

CHA survey limitations

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Union County CHA Survey had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Union County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

It is important to note that although several questions were asked using the same wording as the BRFSS questionnaire, the data collection methods differed. The CDC adult data was collected using a set of questions from the total question bank, and participants were asked the questions over the telephone rather than through an online or paper survey.

Lastly, caution should be used when interpreting subgroup results, as the margin of error for any subgroup is higher than that of the overall survey. The survey margin of error was ±4.2%

Secondary data collection methods

Ohio University researchers, the Union County Health Department epidemiologists, and Amy Bush Stevens Consulting compiled secondary data from sources such as the Behavioral Risk Factor Surveillance System (BRFSS), numerous CDC sites, the U.S. Census Bureau, the Ohio Department of Education and Workforce, County Health Rankings and roadmaps, and other national, state, and local sources. All data sources are included as citations throughout the report.

In addition, the youth section of the CHA relied on data from the 2023-2024 Ohio Healthy Youth Environments Survey (OHYES!) of 967 students in grades 7 and 9-11 from all three public school districts in the county. The methodology for that survey is described here: **https://youthsurveys. ohio.gov/our-surveys/ohyes**

Appendix C. Alignment with PHAB reaccreditation standards and measures

PHAB Measure 1.1.1 A.	Page number(s)
A. A list of participating partners involved in the CHA process.	Pg. 2
B. The process for how partners collaborated in developing the CHA.	Pg. 50-52

C. Comprehensive, broad- based data. Data must include:
   1. Primary data.
   2. Secondary data from two or more different sources.
	Pg. 8-48

D. A description of the demographics of the population served by the health department, which must, at minimum, include:
   1. The percent of the population by race and ethnicity.
   2. Languages spoken within the jurisdiction.
	Pg. 10-13 and Pg. 45-50

E. A description of health challenges experienced by the population served by the health department, based on data listed in required element (c) above, which must include an examination of disparities between subpopulations or sub-geographic areas in terms of each of the following:
   1. Health status.
   2. Health behaviors.
	Pg. 5-9 and Pg. 22-24

F. A description of inequities in the factors that contribute to health challenges (required element e), which must include social determinants of health or built environment.	Pg. 19 and Pg. 9-44
G. Community assets or resources beyond healthcare and the health department that can be mobilized to address health challenges.	Pg. 25, 29 and 38
Measure 1.1.2 A	
1. Evolution of the community health assessment partnership's membership with a diversity, equity, inclusion lens.	Pg. 50-52
2. Use of the community health assessment by either the health department or partner(s).	Pg. 50-51
Measure 1.2.1 A	
1. Primary population health data collected for the purpose of further understanding health status in the jurisdiction, including: a. One example of the health department's collection of primary quantitative data and why the data were collected.	Pg. 8-48
b. One example of the health department's collection of primary qualitative data and why the data were collected.	Pg. 20
Measure 7.1.1 A	
1. A collaborative assessment of access to health care that includes the following: a. A list of partners that were involved, which must include primary care and behavioral health providers.	Pg. 2
b. Review of data on populations who lack access or experience barriers to care.	Pg. 6 and 27-28
c. Review of data on the availability and gaps in services.	Pg. 26-28
d. Conclusions drawn about the causes of barriers to access to care.	Pg. 19-20
e. Emerging issues related to access +to care. Primary care and behavioral health care must each be considered	Pg. 20 and 27-28

Notes

1. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
2. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
3. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
4. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
5. Ohio Housing Finance Agency, "FY 2024 Housing Needs Assessment (Interactive)."
6. Ohio Department of Development, "Projected 2050 Ohio County Populations."
7. US Census Bureau, "American Community Survey."
8. Ohio Housing Finance Agency, "FY 2024 Housing Needs Assessment (Interactive)."
9. Ohio Department of Education and Workforce, "2023-2024 School District Data."
10. Ohio Housing Finance Agency, "FY 2024 Housing Needs Assessment (Interactive)."
11. Ohio Housing Finance Agency. "FY 2024 Housing Needs Assessment (Interactive)."
12. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
13. Union County and Union County Moves Coalition, "Union County Transit and Mobility Study.
14. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
15. Ohio Housing Finance Agency, "FY 2024 Housing Needs Assessment (Interactive)."
16. Ohio Housing Finance Agency, "FY 2024 Housing Needs Assessment (Interactive)."
17. Logan-Union-Champaign Regional Planning Commission, Union County Comprehensive Plan: 2025 Update
18. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
19. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
20. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
21. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
22. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
23. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
24. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
25. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
26. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
27. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
28. US Census Bureau, "American Community Survey."
29. Centers for Disease Control and Prevention, "Behavioral Risk Factor Surveillance System (BRFSS)."
30. Centers for Disease Control and Prevention, "Behavioral Risk Factor Surveillance System (BRFSS)."
31. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
32. Centers for Disease Control and Prevention, "Behavioral Risk Factor Surveillance System (BRFSS)."
33. Ohio Colleges of Medicine Government Resource Center, "Ohio Medicaid Assessment Survey Dashboard."
34. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
35. Ohio Colleges of Medicine Government Resource Center, "Ohio Medicaid Assessment Survey Dashboard."
36. Substance Abuse and Mental Health Services Administration, "National Survey on Drug Use and Health (NSDUH)."
37. County Health Rankings and Roadmaps, University of Wisconsin Population Health Institute.
38. Ohio Department of Health, "2023 Ohio Unintentional Drug Overdose Report."
39. Ohio Department of Health, "2023 Ohio Suicide Report."
40. Centers for Disease Control and Prevention, "Behavioral Risk Factor Surveillance System (BRFSS)."
41. Centers for Disease Control and Prevention, "Behavioral Risk Factor Surveillance System (BRFSS)."