**SUPPLEMENT** 

# **GARRETT COUNTY**



# REPORT

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# Location

#### Garrett County, MD

# Standard Report - Quick Facts

# Demographics

Data Indicator	Indicator Variable	Location Summary	State Average
	Total Population	29,235	6,018,848
Total Population	Total Land Area(Square Miles)	649.08	9,709.60
	Population Density (Per Square Mile)	45.04	619.89
	Total Population, 2000 Census	29,846	5,296,477
	Total Population, 2010 Census	30,097	5,773,552
Total Population Change, 2000 - 2010	Population Change, 2000-2010	251	477,075
	Population Change, 2000-2010, Percent	0.84%	9.01%
	Total Population, 2010 Census	30,197	5,773,552
T	Total Population, 2020 Census	28,806	6,177,224
Total Population Change, 2010-2020	Population Change, 2010-2020	-1,391	403,672
	Population Change, 2010-2020, Percent	-4.61%	14.68%
	Total Population	30,097	5,773,552
	Urban Population	4,846	5,034,331
Urban and Rural Population	Rural Population	25,251	739,221
	Urban Population, Percent	16.10%	87.20%
	Rural Population, Percent	83.90%	12.80%
	Total Population	29,235	6,018,848
Median Age	Median Age	46.2	38.7
	Total Population	29,235	6,018,848
Population Under Age 18	Population Age 0-17	5,501	1,341,682
	Population Age 0-17, Percent	18.82%	22.29%
	Total Population	29,235	6,018,848
Population Age 18-64	Population Age 18-64	17,298	3,774,488
	Population Age 18-64, Percent	59.17%	62.71%
	Total Population	29,235	6,018,848
Population Age 65+	Population Age 65+	6,436	902,678
	Population Age 65+, Percent	22.01%	15.00%
	Total Population (For Whom Disability Status Is Determined)	28,751	5,920,779
Population with Any Disability	Population with a Disability	4,498	652,374
	Population with a Disability, Percent	15.64%	11.02%
	Population Age 5+	27,812	5,653,980
Population with Limited English Proficiency	Population Age 5+ with Limited English Proficiency	275	394,630
	Population Age 5+ with Limited English Proficiency, Percent	0.99%	6.98%
	Total Population	29,235	6,018,848
	Naturalized U.S. Citizens	208	471,279

Data Indicator	Indicator Variable	Location Summary	State Average
Foreign-Born Population	Population Without U.S. Citizenship	125	441,608
	Total Foreign-Birth Population	333	912,887
	Foreign-Birth Population, Percent of Total Population	1.14%	15.17%
	Native	28,699	5,012,367
	Born ina USTerritory	6	21,425
Citizenship Status	BornAbroad toUS Citizens	197	72,169
Citizenship status	Naturalized	208	471,279
	Non-Citizen	125	441,608
	Non-Citizen, Percent	0.43%	7.34%
Veteran Population	Total Population Age 18+	23,725	4,646,249
	Total Veterans	2,028	365,356
	Veterans, Percent of Total Population	8.55%	7.86%

# Income and Economics

Data Indicator	Indicator Variable	Location Summary	State Average
	Total Population Age 16+	24,473	4,827,204
Employment - Labor Force Participation Rate	Labor Force	14,419	3,238,282
	Labor Force Participation Rate	58.92%	67.08%
	Labor Force	14,825	3,150,758
	Number Employed	14,100	2,969,336
Employment - Unemployment Rate	Number Unemployed	725	181,422
	Unemployment Rate	4.9%	5.8%
Income - Inequality (GINI Index)	Total Households	12,425	2,205,204
income - inequality (Givi index)	Gini Index Value	0.45	0.45
	Total Households	12,425	2,205,204
Income - Median Household Income	Average Household Income	\$71,004	\$111,417
	Median Household Income	\$52,617	\$84,805
	Total Population	29,235	6,018,848
Income - Per Capita Income	Total Income (\$)	\$895,100,000	\$253,528,783,400
	Per Capita Income (\$)	\$30,617	\$42,122
	Total Population	28,480	5,876,434
Deverter Children Deleve 100% EDI	Population Under Age 18	5,257	1,321,245
Poverty - Children Below 100% FPL	Population Under Age 18 in Poverty	665	159,879
	Percent Population Under Age 18 in Poverty	12.65%	12.10%
	Total Students	3,842	896,827
Poverty - Children Eligible for Free/Reduced Price Lunch	Students Eligible for Free or Reduced Price Lunch	1,750	415,502
	Students Eligible for Free or Reduced Price Lunch, Percent	45.5%	46.3%
	Total Population	28,480	5,876,434
Poverty - Population Below 100% FPL	Population in Poverty	2,963	539,991
	Population in Poverty, Percent	10.40%	9.19%

# Education

Data Indicator	Indicator Variable	Location Summary	State Average
	Population Age 3-4	782	150,743
Access - Preschool Enrollment (Age 3-4)	Population Age 3-4 Enrolled in School	252	75,397
	Population Age 3-4 Enrolled in School, Percent	32.23%	50.02%
	Total Population Age 25+	21,472	4,139,008
Attainment - Bachelor's Degree or Higher	Population Age 25+ with Bachelor's Degree or Higher	4,497	1,662,724
	Population Age 25+ with Bachelor's Degree or Higher, Percent	20.94%	40.17%
	Adjusted Student Cohort	263	64,117
Attainment - High School Graduation Rate	Number of Diplomas Issued	242	55,762
	Cohort Graduation Rate	92.0%	87.0%
	Total Population Age 25+	21,472	4,139,008
Attainment - No High School Diploma	Population Age 25+ with No High School Diploma	2,189	405,463
	Population Age 25+ with No High School Diploma, Percent	10.19%	9.80%
	No High SchoolDiploma	10.19%	9.80%
	High SchoolOnly	43.3%	24.6%
Attainment - Overview	Some College	16.3%	18.7%
	AssociatesDegree	9.3%	6.7%
	BachelorsDegree	11.6%	21.5%
	Graduate or Professional Degree	9.4%	18.6%

# Housing and Families

Data Indicator	Indicator Variable	Location Summary	State Average
	Total Households	12,425	2,205,204
	Family Households	8,235	1,468,166
Households - Overview	Family Households, Percent	66.28%	66.58%
	Non-Family Households	4,190	737,038
	Non-Family Households, Percent	33.72%	33.42%
	Renter Occupied Households	3,065	131,919
	Eviction Filings	5	136,740
Evictions	Evictions	5	4,694
	Eviction Filing Rate	0.16%	103.65%
	Eviction Rate	0.16%	3.56%
	Total Households	12,425	2,205,204
Housing Costs - Cost Burden (30%)	Cost Burdened Households (Housing Costs Exceed 30% of Income)	2,862	691,259
	Cost Burdened Households, Percent	23.03%	31.35%
	Total Occupied Housing Units	12,425	2,205,204
Housing Quality - Substandard Housing	Occupied Housing Units with One or More Substandard Conditions	2,954	694,315
	Occupied Housing Units with One or More Substandard Conditions, Percent	23.77%	31.49%
Housing Stock Ago	Total Housing Units	19,338	2,448,422
Housing Stock - Age	Median Year Structures Built	1982	1977

# Other Social & Economic Factors

Data Indicator	Indicator Variable	Location Summary	State Average
	Total Population	29,235	5,908,275
Area Deprivation Index	State Percentile	80	No data
	National Percentile	56	32
	Total Occupied Households	12,425	2,205,204
Households with No Motor Vehicle	Households with No Motor Vehicle	840	197,611
	Households with No Motor Vehicle, Percent	6.76%	8.96%
	Total Population (For Whom Insurance Status is Determined)	28,751	5,920,779
Insurance - Uninsured Population (ACS)	Uninsured Population	2,000	359,135
	Uninsured Population, Percent	6.96%	6.07%
	Total Population	29,261.00	6,024,891.00
SNAP Benefits - Population Receiving SNAP (SAIPE)	Population Receiving SNAP Benefits	3,961	654,256
	Population Receiving SNAP Benefits, Percent	13.5%	10.9%
	Total Population	29,376	6,003,435
	Socioeconomic Theme Score	0.26	0.24
	Household Composition Theme Score	0.33	0.18
Social Vulnerability Index	Minority Status Theme Score	0.07	0.82
	Housing & Transportation Theme Score	0.36	0.55
	Social Vulnerability Index Score	0.18	0.39
	Female Population Age 15-19	5,368	2,640,652
Teen Births	Teen Births, Rate per 1,000 Female Population Age 15-19	23.1	16.1
	Total Population	30,082	6,221,642
Violent Crime - Total	Violent Crimes, 3-year Total	214	87,227
	Violent Crimes, Annual Rate (Per 100,000 Pop.)	237.10	467.30
	Total Population	29,531	5,996,420
Property Crime - Total	Property Crimes, Annual Average	417	145,136
	Property Crimes, Annual Rate (Per 100,000 Pop.)	1,412.10	2,420.40
Voter Participation Rate	Total Citizens Age 18+	23,632	4,280,946
	Total Votes Cast	15,611	3,037,030
	Voter Participation Rate	66.1%	70.9%
	Population Age 16-19	1,403	305,616
Young People Not in School and Not Working	Population Age 16-19 Not in School and Not Employed	97	18,288
	Population Age 16-19 Not in School and Not Employed, Percent	6.91%	5.98%

# Physical Environment

Data Indicator	Indicator Variable	Location Summary	State Average
	Total Population (2010)	30,097	5,773,552
	Average Daily Ambient Particulate Matter 2.5	6.68	8.34
Air & Water Quality - Particulate Matter 2.5	Days Exceeding Emissions Standards	0	0
	Days Exceeding Standards, Percent (Crude)	0.00	0.00
	Days Exceeding Standards, Percent (Weighted)	0.00%	0.11%
Durité Francisco de Dura diferendi Annon	Total Population (2019)	29,014	6,045,675
Built Environment - Broadband Access	Access to DL Speeds > 25MBPS (2020)	94.46%	97.56%
	Total Population (2010)	30,097	5,773,552
Built Environment - Liquor Stores	Number of Establishments	6	1,218
	Establishments, Rate per 100,000 Population	19.94	21.10
	Total Population (2010)	30,097	5,773,552
Built Environment - Recreation and Fitness Facility Access	Number of Establishments	3	713
	Establishments, Rate per 100,000 Population	9.97	12.35
	Time Period	2017-2019	2017-2019
	Weeks in D0 (Abnormally Dry), Percent	3.62%	15.11%
	Weeks in D1 (Moderate Drought), Percent	0.00%	14.18%
Climate & Health - Drought Severity	Weeks in D2 (Severe Drought), Percent	0.00%	1.85%
	Weeks in D3 (Extreme Drought), Percent	0.00%	0.00%
	Weeks in D4 (Exceptional Drought), Percent	0.00%	0.00%
	Weeks in Drought (Any), Percent	0.00%	16.02%
	Total Population (2010)	30,097	5,773,552
Food Environment - Fast Food Restaurants	Number of Establishments	28	5,424
	Establishments, Rate per 100,000 Population	93.03	93.95
	Total Population (2010)	30,097	5,773,552
	Food Desert Census Tracts	1	131
Food Environment - Food Desert Census Tracts	Other Census Tracts	6	1,259
	Food Desert Population	6,186	552,017
	Other Population	23,911	1,646,357
	Total Population (2010)	30,097	5,773,552
Food Environment - Grocery Stores	Number of Establishments	8	1,227
	Establishments, Rate per 100,000 Population	26.58	21.25
	Total Population (2010)	30,097	5,773,552
Food Environment - SNAP-Authorized Food Stores	Total SNAP-Authorized Retailers	38	3,469
-ood Environment - SNAP-Authorized Food Stores	SNAP-Authorized Retailers, Rate per 10,000 Population	12.63	6.01

# Clinical Care and Prevention

Data Indicator	Indicator Variable	Location Summary	State Average
Cancer Sereening Memmegram (Medicare)	Medicare Beneficiaries	7,169	1,036,816
Cancer Screening - Mammogram (Medicare)	Female Beneficiaries with Recent Mammogram, Percent	36%	33%
	Medicare Enrollees with Diabetes	737	22,229
Diabetes Management - Hemoglobin A1c Test	Medicare Enrollees with Diabetes with Annual Exam	673	19,879
	Medicare Enrollees with Diabetes with Annual Exam, Percent	91.32%	89.43%
Hospitalizations - Preventable Conditions	Medicare Beneficiaries	7,169	1,036,816
	Preventable Hospitalizations, Rate per 100,000 Beneficiaries	3,228	3,568

# Health Behaviors

Data Indicator	Indicator Variable	Location Summary	State Average
	Total Population (2018)	29,163	6,042,718
Alcohol - Heavy Alcohol Consumption	Adults Reporting Excessive Drinking	4,716	931,478
	Percentage of Adults Reporting Excessive Drinking	16.17%	15.41%
Alcohol Dingo Drinking	Total Population (2018)	29,163	6,042,718
Alcohol - Binge Drinking	Percentage of Adults Binge Drinking in the Past 30 Days	13.0%	14.4%
	Population Age 20+	23,117	4,524,687
Physical Inactivity	Adults with No Leisure Time Physical Activity	6,149	990,879
	Adults with No Leisure Time Physical Activity, Percent	24.5%	21.4%
	Total Population	29,233	6,052,177
STI - Chlamydia Incidence	Chlamydia Infections	38	35,482
	Chlamydia Infections, Rate per 100,000 Pop.	130.0	586.3
	Total Population	29,233	6,052,177
STI - Gonorrhea Incidence	Gonorrhea Infections	6	10,305
	Gonorrhea Infections, Rate per 100,000 Pop.	20.5	170.3
	Population Age 13+	25,440	5,079,641
STI - HIV Prevalence	Population with HIV / AIDS	15	33,164
	Population with HIV / AIDS,Rate per 100,000 Pop.	59.0	652.9
	Total Population (2018)	29,163	6,042,718
Tobacco Usage - Current Smokers	Percentage of Adult Current Smokers	17.0%	14.2%

## Health Outcomes

Data Indicator	Indicator Variable	Location Summary	State Average
	Estimated Total Population	43,788	7,025,635
Cancer Incidence - All Sites	New Cases (Annual Average)	190	31,791
	Cancer Incidence Rate (Per 100,000 Population)	433.9	452.5
	Total Medicare Fee-for-Service Beneficiaries	6,197	768,522
Chronic Conditions - Asthma (Medicare Population)	Beneficiaries with Asthma	274	41,511
	Percentage with Asthma	4.4%	5.4%
	Population Age 20+	23,098	4,534,073
Chronic Conditions - Diabetes (Adult)	Adults with Diagnosed Diabetes	3,049	501,275

Data Indicator	Indicator Variable	Location Summary	State Average
	Adults with Diagnosed Diabetes, Age-Adjusted Rate	10.4%	9.9%
	Total Medicare Fee-for-Service Beneficiaries	6,197	768,522
Chronic Conditions - Diabetes (Medicare Population)	Beneficiaries with Diabetes	1,840	227,236
	Beneficiaries with Diabetes, Percent	29.7%	29.6%
	Total Medicare Fee-for-Service Beneficiaries	6,197	768,522
Chronic Conditions - Heart Disease (Medicare Population)	Beneficiaries with Heart Disease	1,980	202,899
	Beneficiaries with Heart Disease, Percent	32.0%	26.4%
	Total Medicare Fee-for-Service Beneficiaries	6,197	768,522
Chronic Conditions - High Blood Pressure (Medicare Population)	Beneficiaries with High Blood Pressure	3,802	470,535
ropulation	Beneficiaries with High Blood Pressure, Percent	61.4%	61.2%
	Total Live Births	1,983	1,010,490
Low Birth Weight (CDC)	Low Birthweight Births	166	87,460
	Low Birthweight Births, Percentage	8.4%	8.7%
	Total Population, 2015-2019 Average	29,259	6,032,685
	Five Year Total Deaths, 2015-2019 Total	328	53,945
Mortality - Cancer	Crude Death Rate (Per 100,000 Population	224.2	178.8
	Age-Adjusted Death Rate (Per 100,000 Population)	140.0	151.3
	Total Population, 2015-2019 Average	29,259	6,032,685
	Five Year Total Deaths, 2015-2019 Total	342	32,719
Mortality - Coronary Heart Disease	Crude Death Rate (Per 100,000 Population)	233.8	108.5
	Age-Adjusted Death Rate (Per 100,000 Population)	148.6	92.1
	Total Population, 2015-2019 Average	29,259	6,032,685
	Five Year Total Deaths, 2015-2019 Total	35	10,725
Mortality - Poisoning	Crude Death Rate (Per 100,000 Population)	23.9	35.6
	Age-Adjusted Death Rate (Per 100,000 Population)	27.8	34.6
	Total Population, 2015-2019 Average	29,259	6,032,685
	Five Year Total Deaths, 2015-2019 Total	No data	2,881
Mortality - Homicide	Crude Death Rate (Per 100,000 Population)	No data	9.6
	Age-Adjusted Death Rate (Per 100,000 Population)	No data	10.0
	Total Population, 2015-2019 Average	29,259	6,032,685
	Five Year Total Deaths, 2015-2019 Total	93	10,580
Mortality - Lung Disease	Crude Death Rate (Per 100,000 Population)	63.6	35.1
	Age-Adjusted Death Rate (Per 100,000 Population)	38.9	30.3
	Total Population, 2015-2019 Average	29,259	6,032,685
	Five Year Total Deaths, 2015-2019 Total	26	2,676
Mortality - Motor Vehicle Crash	Crude Death Rate (Per 100,000 Population)	17.8	8.9
	Age-Adjusted Death Rate (Per 100,000 Population)	18.0	8.6
	Premature Deaths, 2017-2019	418	141,796
Mortality - Premature Death	Years of Potential Life Lost, 2017-2019 Average	5,899	2,453,535
Mortality - Premature Death	Years of Potential Life Lost, Rate per 100,000 Population	7,454	7,222
	Total Population, 2015-2019 Average	29,259	6,032,685

Data Indicator	Indicator Variable	Location Summary	State Average
Mortality - Stroke	Five Year Total Deaths, 2015-2019 Total	85	14,001
Nortanty - Stroke	Crude Death Rate (Per 100,000 Population)	58.1	46.4
	Age-Adjusted Death Rate (Per 100,000 Population)	37.1	40.0
	Total Population, 2015-2019 Average	29,259	6,032,685
Mortality - Suicide	Five Year Total Deaths, 2015-2019 Total	29	3,076
Nortanty - Suicide	Crude Death Rate (Per 100,000 Population)	19.8	10.2
	Age-Adjusted Death Rate (Per 100,000 Population)	18.3	9.7
	Total Population, 2015-2019 Average	29,259	6,032,685
No whether I be interesting of the interest ( A second with )	Five Year Total Deaths, 2015-2019 Total	69	11,314
Mortality - Unintentional Injury (Accident)	Crude Death Rate (Per 100,000 Population)	47.2	37.5
	Age-Adjusted Death Rate (Per 100,000 Population)	42.8	34.8
	Population Age 20+	23,158	4,529,198
Obesity	Adults with BMI > 30.0 (Obese)	8,221	1,431,286
	Adults with BMI > 30.0 (Obese), Percent	35.3%	31.3%
	Population Age 18+	6,401	3,195,098
Poor or Fair Health	Adults with Poor or Fair Health	1,112	495,415
	Percentage of Adults with Poor or Fair Health	17.4%	15.5%

https://sparkmap.org, 11/3/2021

# Standard Report

### Location

Garrett County, MD

### Demographics

Current population demographics and changes in demographic composition over time play a determining role in the types of health and social services needed by communities.

#### **Total Population**

A total of 29,235 people live in the 649.08 square mile report area defined for this assessment according to the U.S. Census Bureau American Community Survey 2015-19 5-year estimates. The population density for this area, estimated at 45.04 persons per square mile, is less than the national average population density of 91.93 persons per square mile.

Report Area	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
Garrett County, MD	29,235	649.08	45.04
Maryland	6,018,848	9,709.60	619.89
United States	324,697,795	3,532,068.58	91.93

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



☑ View larger map

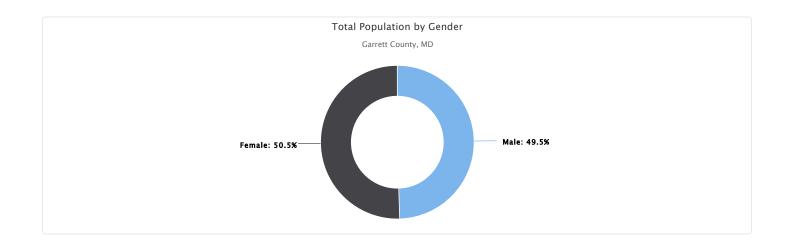
#### Population, Density (Persons per Sq Mile) by Tract, ACS 2015-19



#### Total Population by Gender

This indicator reports the total population of the report area by gender.

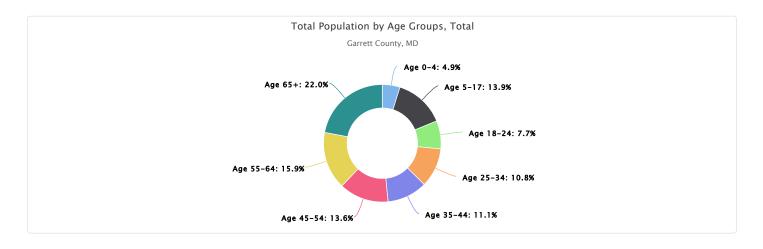
Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	14,478	14,757	49.52%	50.48%
Maryland	2,917,613	3,101,235	48.47%	51.53%
United States	159,886,919	164,810,876	49.24%	50.76%



#### Total Population by Age Groups, Total

This indicator reports the total population of the report area by age groups

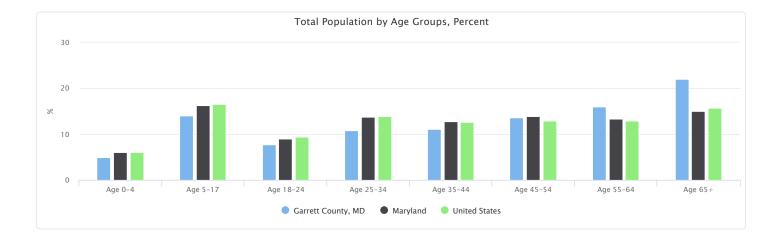
Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Garrett County, MD	1,423	4,078	2,262	3,167	3,234	3,982	4,653	6,436
Maryland	364,868	976,814	538,158	827,944	769,605	835,312	803,469	902,678
United States	19,767,670	53,661,722	30,646,327	45,030,415	40,978,831	42,072,620	41,756,414	50,783,796



#### Total Population by Age Groups, Percent

This indicator reports the percentage of age groups in the population of the report area.

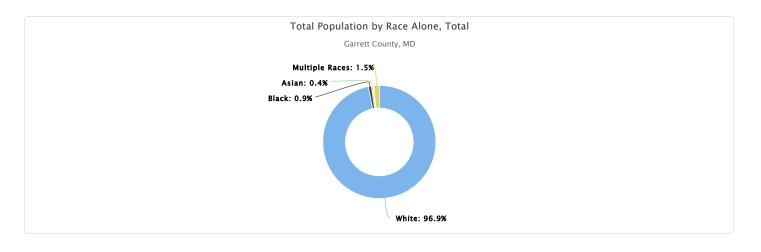
Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Garrett County, MD	4.87%	13.95%	7.74%	10.83%	11.06%	13.62%	15.92%	22.01%
Maryland	6.06%	16.23%	8.94%	13.76%	12.79%	13.88%	13.35%	15.00%
United States	6.09%	16.53%	9.44%	13.87%	12.62%	12.96%	12.86%	15.64%



#### Total Population by Race Alone, Total

This indicator reports the total population of the report area by race alone.

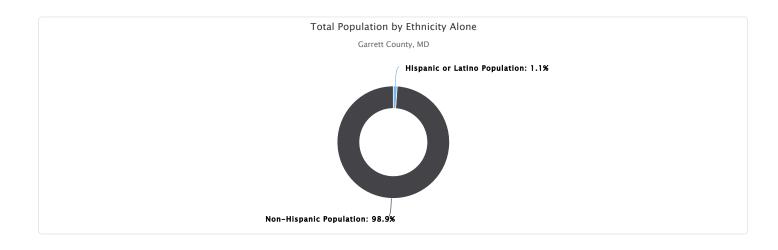
Report Area	White	Black	Asian	Native American / Alaska Native	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Races
Garrett County, MD	28,327	250	125	44	9	33	447
Maryland	3,343,003	1,799,094	378,126	16,762	3,034	272,137	206,692
United States	235,377,662	41,234,642	17,924,209	2,750,143	599,868	16,047,369	10,763,902



#### Total Population by Ethnicity Alone

This indicator reports the total population of the report area by ethnicity alone.

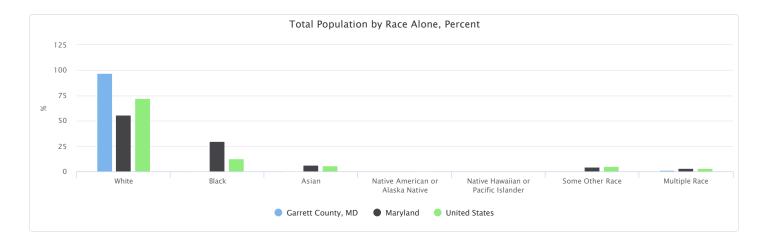
Report Area	Total Population	Hispanic or Latino Population	Hispanic or Latino Population, Percent	Non-Hispanic Population	Non-Hispanic Population, Percent
Garrett County, MD	29,235	330	1.13%	28,905	98.87%
Maryland	6,018,848	606,482	10.08%	5,412,366	89.92%
United States	324,697,795	58,479,370	18.01%	266,218,425	81.99%



#### Total Population by Race Alone, Percent

This indicator reports the percentage of population by race alone in the report area.

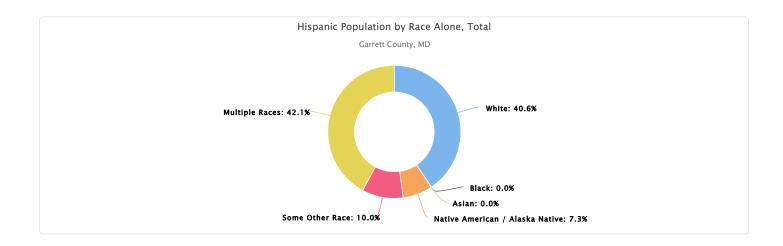
Report Area	White	Black	Asian	Native American or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	96.89%	0.86%	0.43%	0.15%	0.03%	0.11%	1.53%
Maryland	55.54%	29.89%	6.28%	0.28%	0.05%	4.52%	3.43%
United States	72.49%	12.70%	5.52%	0.85%	0.18%	4.94%	3.32%



#### Hispanic Population by Race Alone, Total

This indicator reports the total of Hispanic or Latino population in the report area by race alone.

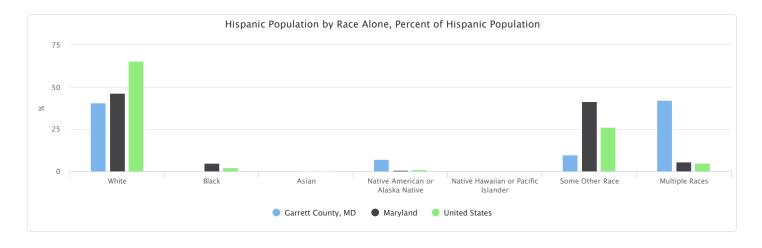
Report Area	White	Black	Asian	Native American or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Garrett County, MD	134	0	0	24	0	33	139
Maryland	280,640	30,498	2,175	4,760	740	252,812	34,857
United States	38,277,289	1,257,088	215,255	589,765	59,357	15,258,322	2,822,294



#### Hispanic Population by Race Alone, Percent of Hispanic Population

This indicator reports the percentage of Hispanic or Latino population in the report area by race alone.

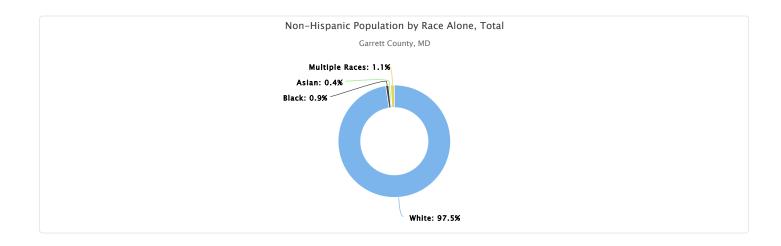
Report Area	White	Black	Asian	Native American or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Garrett County, MD	40.61%	0.00%	0.00%	7.27%	0.00%	10.00%	42.12%
Maryland	46.27%	5.03%	0.36%	0.78%	0.12%	41.68%	5.75%
United States	65.45%	2.15%	0.37%	1.01%	0.10%	26.09%	4.83%



#### Non-Hispanic Population by Race Alone, Total

This indicator reports the total of non-hispanic population in the report area by race alone.

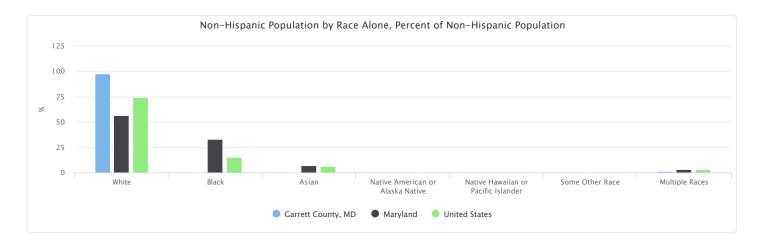
Report Area	White	Black	Asian	Native American or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Garrett County, MD	28,193	250	125	20	9	0	308
Maryland	3,062,363	1,768,596	375,951	12,002	2,294	19,325	171,835
United States	197,100,373	39,977,554	17,708,954	2,160,378	540,511	789,047	7,941,608



#### Non-Hispanic Population by Race Alone, Percent of Non-Hispanic Population

This indicator reports the percentage of non-Hispanic population in the report area by race alone.

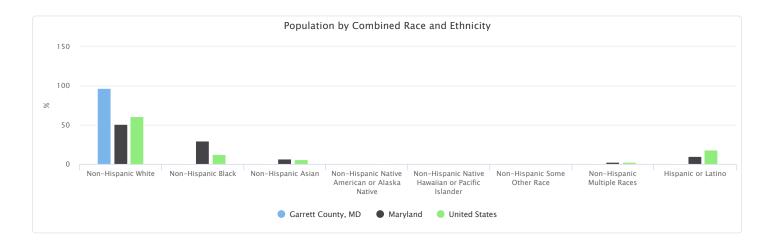
Report Area	White	Black	Asian	Native American or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Garrett County, MD	97.54%	0.86%	0.43%	0.07%	0.03%	0.00%	1.07%
Maryland	56.58%	32.68%	6.95%	0.22%	0.04%	0.36%	3.17%
United States	74.04%	15.02%	6.65%	0.81%	0.20%	0.30%	2.98%



#### Population by Combined Race and Ethnicity

This indicator reports the percentage of the total population in the report area by combined race and ethnicity.

Report Area	Non- Hispanic White	Non- Hispanic Black	Non- Hispanic Asian	Non-Hispanic Native American or Alaska Native	Non-Hispanic Native Hawaiian or Pacific Islander	Non-Hispanic Some Other Race	Non-Hispanic Multiple Races	Hispanic or Latino
Garrett County, MD	96.44%	0.86%	0.43%	0.07%	0.03%	0.00%	1.05%	1.13%
Maryland	50.88%	29.38%	6.25%	0.20%	0.04%	0.32%	2.85%	10.08%
United States	60.70%	12.31%	5.45%	0.67%	0.17%	0.24%	2.45%	18.01%



#### Total Population Change, 2000 - 2010

According to the United States Census Bureau Decennial Census, between 2000 and 2010 the population in the report area grew by 251 persons, a change of 0.84%. A significant positive or negative shift in total population over time impacts healthcare providers and the utilization of community resources.

Report Area	Total Population, 2000 Census	Total Population, 2010 Census	Population Change, 2000-2010	Population Change, 2000-2010, Percent
Garrett County, MD	29,846	30,097	251	0.84%
Maryland	5,296,477	5,773,552	477,075	9.01%
United States	280,405,781	307,745,539	27,339,758	9.75%

Data Source: US Census Bureau, Decennial Census. 2000 - 2010. Source geography: Tract



☑ View larger map

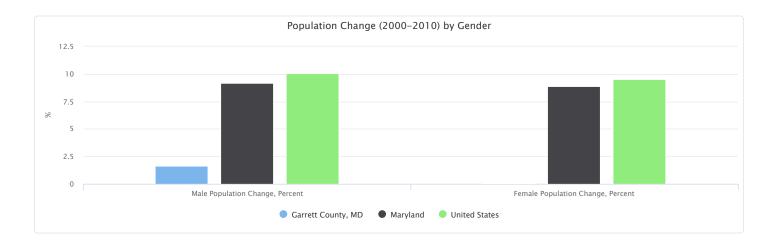
#### Population Change, Percent by Tract, US Census 2000 - 2010

Over 10.0% Increase ( + ) 1.0 - 10.0% Increase ( + ) Less Than 1.0% Change (+/-) 1.0 - 10.0% Decrease ( - ) Over 10.0% Decrease ( - ) No Population or No Data 🗖 Garrett County, MD

#### Population Change (2000-2010) by Gender

This indicator reports the population change of the report area by gender.

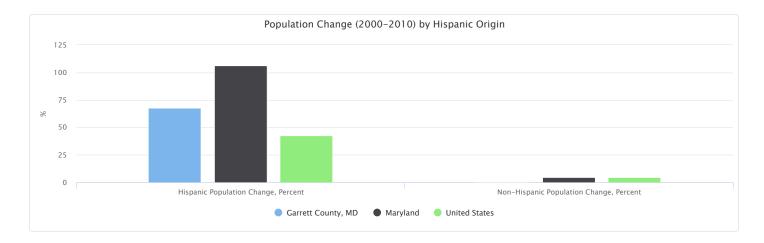
Report Area	Male Population Change, Total	Male Population Change, Percent	Female Population Change, Total	Female Population Change, Percent
Garrett County, MD	241	1.64%	10	0.07%
Maryland	233,972	9.15%	243,103	8.88%
United States	13,738,020	10.02%	13,601,733	9.55%



#### Population Change (2000-2010) by Hispanic Origin

This indicator reports the Hispanic or Latino population change in the report area.

Report Area	Hispanic Population Change, Total	Hispanic Population Change, Percent	Non-Hispanic Population Change, Total	Non-Hispanic Population Change, Percent	
Garrett County, MD	89	67.94%	162	0.55%	
Maryland	242,715	106.49%	234,360	4.62%	
United States	15,152,943	42.93%	12,099,099	4.92%	



#### Total Population Change (2000-2010) by Race

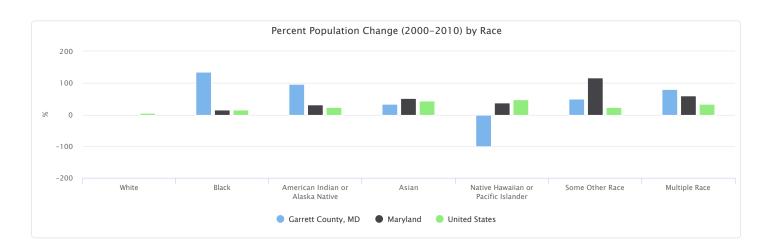
This indicator reports the total population change of the report area by race.

Report Area	White	Black	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	-56	173	21	19	-7	13	88
Maryland	-32,015	222,887	4,997	107,924	854	111,307	61,121
United States	12,199,518	5,189,316	521,420	4,433,864	141,446	3,703,567	2,190,889

#### Percent Population Change (2000-2010) by Race

This indicator reports the percentage of population change of the report area by race.

Report Area	White	Black	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	-0.19%	135.16%	95.45%	33.33%	-100%	50%	80%
Maryland	-0.94%	15.09%	32.4%	51.17%	37.08%	116.52%	59%
United States	5.8%	15.43%	22.56%	43.72%	47.37%	24.2%	32.61%



#### Total Population Change, 2010-2020

According to the United States Census Bureau Decennial Census, between 2010 and 2020 the population in the report area fell by -1,391 persons, a change of -4.61%. A significant positive or negative shift in total population over time impacts healthcare providers and the utilization of community resources.

Report Area	Total Population, 2010 Census	Total Population, 2020 Census	Population Change, 2010- 2020	Population Change, 2010-2020, Percent	Population Change 2010-2020 Percent:%
Garrett County, MD	30,197	28,806	-1,391	-4.61%	-20% 60%
Maryland	5,773,552	6,177,224	403,672	14.68%	Maryland (14.68%)
United States	312,471,161	334,735,155	22,263,994	14.96%	United States (14.96%)

Note: This indicator is compared to the state average.





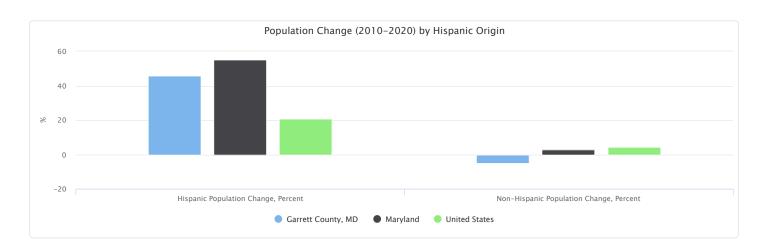
#### Population Change, Percent by Tract, US Census 2010 - 2020

Over 10.0% Increase (+)
 2.0 - 10.0% Increase (+)
 Less Than 2.0% Change (+/-)
 2.0 - 10.0% Decrease (-)
 Over 10.0% Decrease (-)
 No Population or No Data
 Garrett County, MD

#### Population Change (2010-2020) by Hispanic Origin

This indicator reports the Hispanic or Latino population change in the report area.

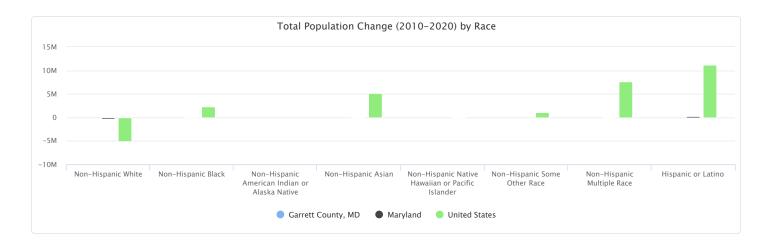
Report Area	Hispanic Population Change, Total	Hispanic Population Change, Percent	Non-Hispanic Population Change, Total	Non-Hispanic Population Change, Percent
Garrett County, MD	101	45.91%	-1,492	-4.98%
Maryland	259,110	55.06%	144,558	2.73%
United States	11,163,011	20.61%	11,100,922	4.3%



#### Total Population Change (2010-2020) by Race

This indicator reports the total population change of the report area by combined race and ethnicity.

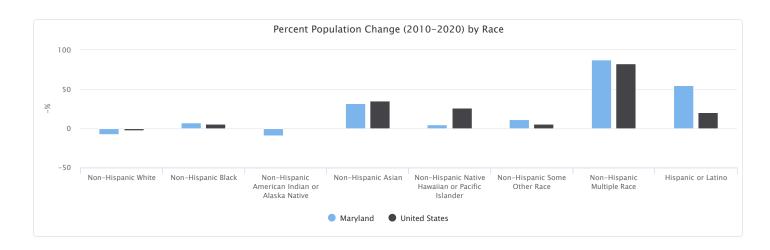
Report Area	Non- Hispanic White	Non- Hispanic Black	Non-Hispanic American Indian or Alaska Native	Non- Hispanic Asian	Non-Hispanic Native Hawaiian or Pacific Islander	Non-Hispanic Some Other Race	Non-Hispanic Multiple Race	Hispanic or Latino
Garrett County, MD	-1,974	-62	-4	6	2	52	488	101
Maryland	-244,180	120,801	-1,760	101,266	163	23,342	144,924	259,110
United States	-5,122,185	2,254,139	4,595	5,153,427	140,453	1,087,053	7,583,494	11,163,011



#### Percent Population Change (2010-2020) by Race

This indicator reports the percentage of population change of the report area by combined race and ethnicity.

Report Area	Non- Hispanic White	Non- Hispanic Black	Non-Hispanic American Indian or Alaska Native	Non- Hispanic Asian	Non-Hispanic Native Hawaiian or Pacific Islander	Non-Hispanic Some Other Race	Non-Hispanic Multiple Race	Hispanic or Latino
Maryland	-7.27%	7.1%	-8.62%	31.76%	5.16%	11.29%	87.99%	55.06%
United States	-2.26%	5.72%	0.16%	35.1%	25.99%	5.6%	83.05%	20.61%

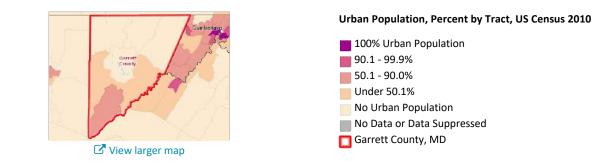


#### **Urban and Rural Population**

This indicator reports the percentage of population living in urban and rural areas. Urban areas are identified using population density, count, and size thresholds. Urban areas also include territory with a high degree of impervious surface (development). Rural areas are all areas that are not urban. Of the report areas 30,097 population, 4,846 or 16.10% of the population is classified urban while 25,251 or 83.90% is rural.

Report Area	Total Population	Urban Population	<b>Rural Population</b>	Urban Population, Percent	Rural Population, Percent
Garrett County, MD	30,097	4,846	25,251	16.10%	83.90%
Maryland	5,773,552	5,034,331	739,221	87.20%	12.80%
United States	312,471,327	252,746,527	59,724,800	80.89%	19.11%

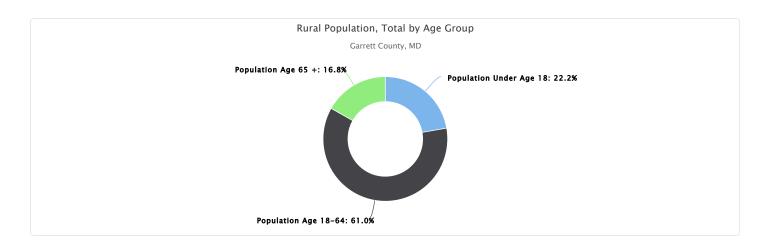
Data Source: US Census Bureau, Decennial Census. 2010. Source geography: Tract



#### Rural Population, Total by Age Group

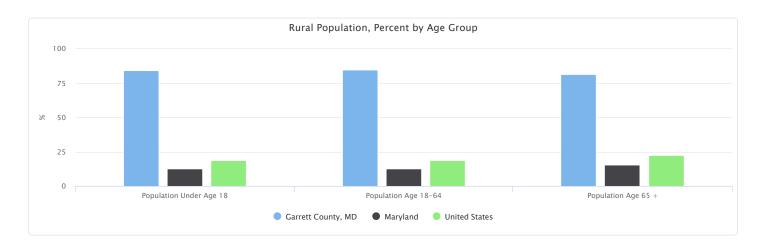
This indicator reports the total rural population of the report area by age group.

Report Area	Population Under Age 18	Population Age 18-64	Population Age 65 +
Garrett County, MD	5,615	15,391	4,245
Maryland	168,799	460,294	110,128
United States	13,907,394	36,734,957	9,082,449



#### Rural Population, Percent by Age Group

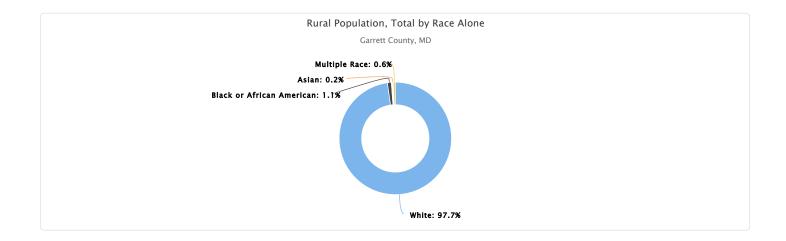
Report Area	Population Under Age 18	Population Age 18-64	Population Age 65 +
Garrett County, MD	84.31%	84.54%	81.15%
Maryland	12.48%	12.40%	15.56%
United States	18.52%	18.69%	22.26%



#### Rural Population, Total by Race Alone

This indicator reports the total rural population of the report area by race alone.

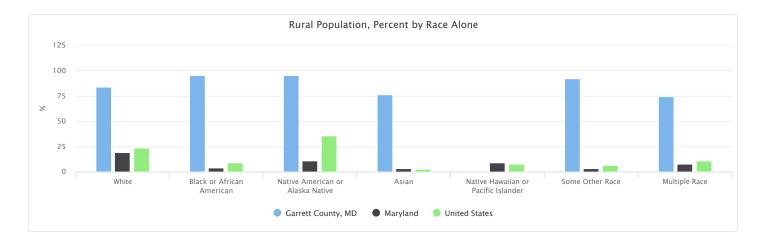
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	24,682	287	41	58	0	36	147
Maryland	644,273	63,077	2,167	10,524	281	6,328	12,571
United States	52,457,879	3,533,008	1,043,048	399,200	40,683	1,242,870	1,008,112



#### Rural Population, Percent by Race Alone

This indicator reports the percentage of rural population in the report area by race alone.

Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	83.84%	95.35%	95.35%	76.32%	No data	92.31%	74.24%
Maryland	19.18%	3.71%	10.61%	3.30%	8.90%	3.06%	7.63%
United States	23.17%	8.97%	35.33%	2.72%	7.53%	6.41%	11.04%

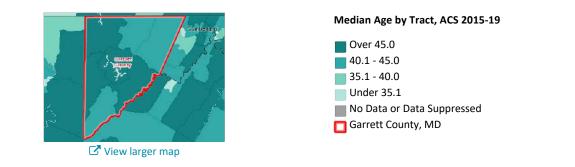


#### **Median Age**

Of the estimated 29,235 total population in the report area, the median age of all persons is 46.2. This indicates that the report population as a whole generally trends older than the state, which has a median age of 38.7. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates.

Report Area	Total Population	Median Age		
Garrett County, MD	29,235	46.2		
Maryland	6,018,848	38.7		
United States	324,697,795	38.1		

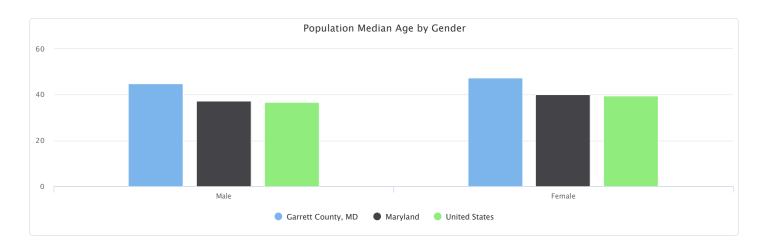
Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



#### Population Median Age by Gender

This indicator reports the median age of the population by gender.

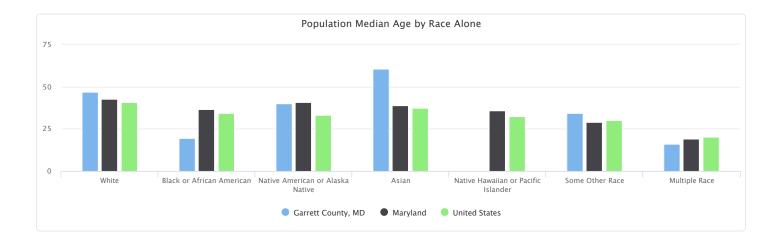
Report Area	Male	Female
Garrett County, MD	44.8	47.5
Maryland	37.2	40.2
United States	36.8	39.4



#### Population Median Age by Race Alone

This indicator reports the median age of the population by race alone.

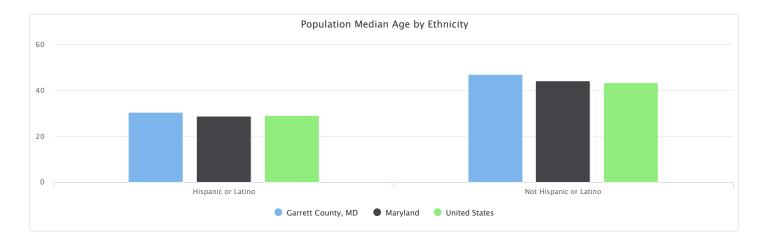
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	47.0	19.3	40.0	60.5	No data	34.4	15.8
Maryland	42.6	36.7	40.8	38.8	35.6	29.1	19.2
United States	40.7	34.1	33.0	37.2	32.2	29.9	20.3



#### Population Median Age by Ethnicity

This indicator reports the median age of the population by ethnicity.

Report Area	Hispanic or Latino	Not Hispanic or Latino
Garrett County, MD	30.6	47.1
Maryland	28.9	44.4
United States	29.2	43.5

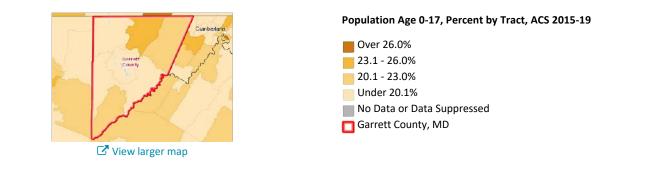


#### **Population Under Age 18**

Of the estimated 29,235 total population in the report area, an estimated 5,501 persons are under the age of 18, representing 18.82% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates. The number of persons under age 18 is relevant because this population has unique needs which should be considered separately from other age groups.

Report Area	<b>Total Population</b>	Population Age 0-17	Population Age 0-17, Percent
Garrett County, MD	29,235	5,501	18.82%
Maryland	6,018,848	1,341,682	22.29%
United States	324,697,795	73,429,392	22.61%

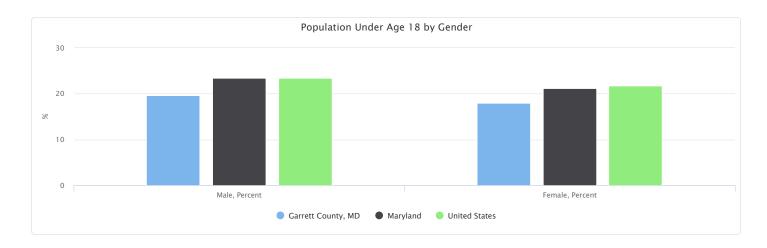
Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



#### Population Under Age 18 by Gender

This indicator reports the percentage of population that is under age 18 by gender.

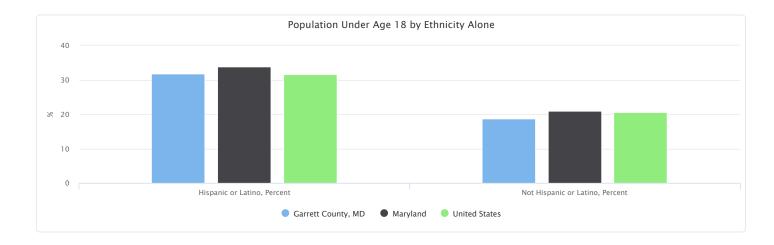
Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	2,848	2,653	19.67%	17.98%
Maryland	684,810	656,872	23.47%	21.18%
United States	37,526,534	35,902,858	23.47%	21.78%



#### Population Under Age 18 by Ethnicity Alone

This indicator reports the percentage of population who are under age 18 by ethnicity alone during 2015-2019, according to the American Community Survey (ACS). Within the report area, there were 105 Hispanics under age 18, representing 31.82% of the total Hispanic population. There were 5,396 Non-Hispanics under age 18 in the report area, representing 18.67% of the total Non-Hispanic population. Data for this indicator is only reported for individuals where age, race, and ethnicity were identified in the American Community Survey.

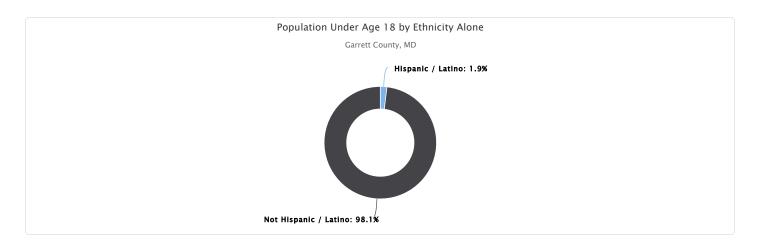
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	105	5,396	31.82%	18.67%
Maryland	205,266	1,136,416	33.85%	21.00%
United States	18,456,651	54,972,741	31.56%	20.65%



#### Population Under Age 18 by Ethnicity Alone

This indicator reports the percentage of population who are under age 18 by ethnicity alone during 2015-2019, according to the American Community Survey (ACS). Within the report area, there were 105 Hispanics under age 18, representing 1.91% of the total population under age 18. There were 5,396 Non-Hispanics under age 18 in the report area, representing 98.09% of the total population under age 18. Data for this indicator is only reported for individuals where age, race, and ethnicity were identified in the American Community Survey.

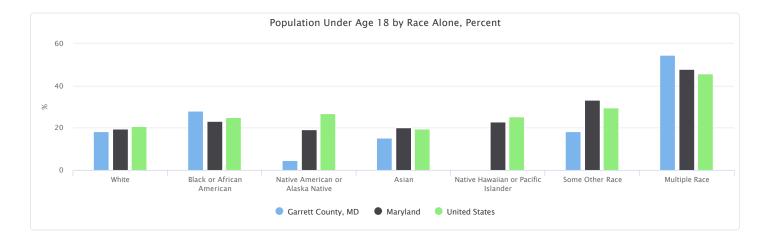
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	105	5,396	1.91%	98.09%
Maryland	205,266	1,136,416	15.30%	84.70%
United States	18,456,651	54,972,741	25.14%	74.86%



#### Population Under Age 18 by Race Alone, Percent

This indicator reports the percentage of population that is under age 18 by race alone.

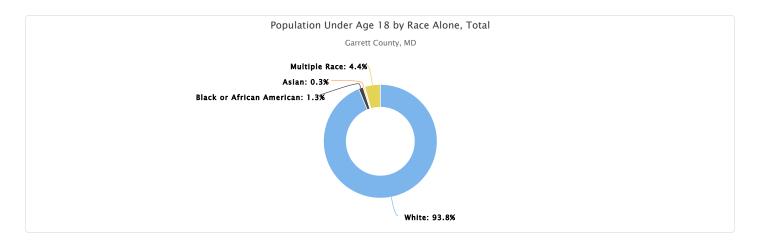
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	18.22%	28.00%	4.55%	15.20%	No data	18.18%	54.59%
Maryland	19.64%	23.13%	19.34%	20.05%	22.78%	33.30%	47.69%
United States	20.86%	24.94%	26.91%	19.62%	25.20%	29.48%	45.54%



#### Population Under Age 18 by Race Alone, Total

This indicator reports the proportion of each race (alone) making up the population under age 18.

Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	5,160	70	2	19	0	6	244
Maryland	656,618	416,120	3,241	75,827	691	90,614	98,571
United States	49,104,625	10,285,137	740,064	3,516,087	151,143	4,730,790	4,901,546

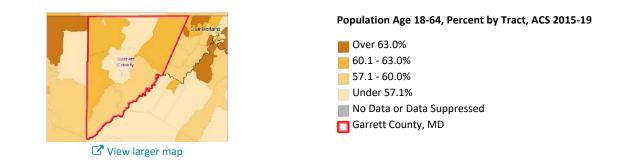


#### Population Age 18-64

Of the estimated 29,235 total population in the report area, an estimated 17,298 persons are between the ages of 18 and 64, representing 59.17% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates. The number of adults in the report area is relevant because this population has unique needs which should be considered separately from other age groups.

Report Area	Total Population	Population Age 18-64	Population Age 18-64, Percent	
Garrett County, MD	29,235	17,298	59.17%	
Maryland	6,018,848	3,774,488	62.71%	
United States	324,697,795	200,484,607	61.74%	

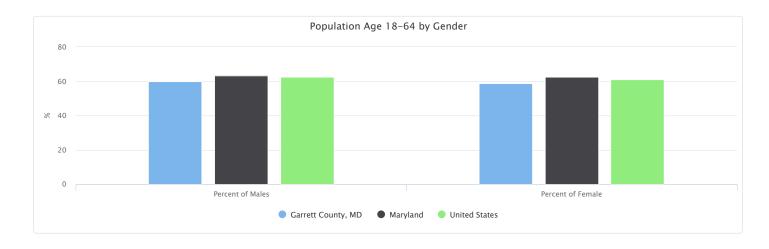
Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



#### Population Age 18-64 by Gender

The table below reports the percentage of the population that is age 18 to 64 by gender. Among the male population in the report area, 59.70% are aged 18-64 years. Among the female population, 58.64% are aged 18-64 years.

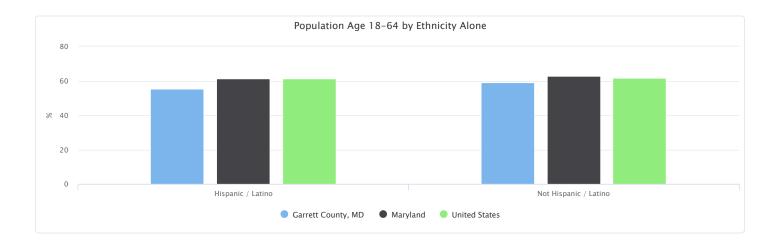
Report Area	Male Age 18-64	Female Age 18-64	Male Age 18-64, Percent	Female Age 18-64, Percent
Garrett County, MD	8,644	8,654	59.70%	58.64%
Maryland	1,842,674	1,931,814	63.16%	62.29%
United States	99,841,782	100,642,825	62.45%	61.07%



#### Population Age 18-64 by Ethnicity Alone

This indicator reports the percentage of population that are at age 18 to 64 by ethnicity alone. In the report area, 55.15% of Hispanic / Latino population are at age 18-64, and 59.21% of non Hispanic / Latino population are at age 18-64.

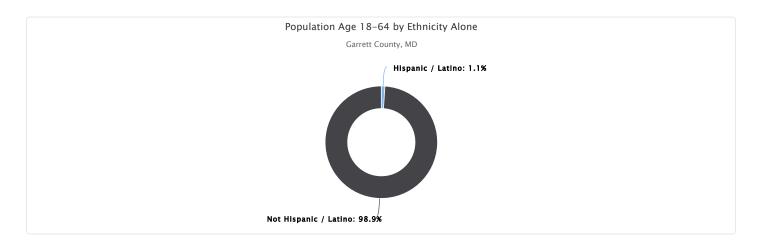
Report Area	Hispanic or Latino Age 18-64	Not Hispanic or Latino Age 18-64	Hispanic or Latino Age 18-64, Percent	Not Hispanic or Latino Age 18-64, Percent
Garrett County, MD	182	17,116	55.15%	59.21%
Maryland	372,221	3,402,267	61.37%	62.86%
United States	35,856,899	164,627,708	61.32%	61.84%



#### Population Age 18-64 by Ethnicity Alone

This indicator reports the percentage of population that are between the ages of 18 - 64 by ethnicity alone. In the report area, 1.05% of Hispanic / Latino population and 98.95% of non Hispanic / Latino population are between the ages of 18 - 64.

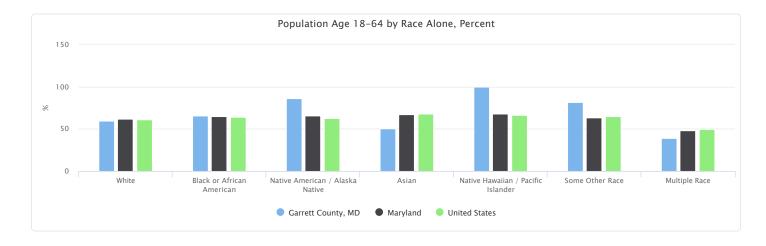
Report Area	Hispanic or Latino Age 18+	Not Hispanic or Latino Age 18+	Hispanic or Latino Age 18+, Percent	Not Hispanic or Latino Age 18+, Percent
Garrett County, MD	182	17,116	1.05%	98.95%
Maryland	372,221	3,402,267	9.86%	90.14%
United States	35,856,899	164,627,708	17.89%	82.11%



#### Population Age 18-64 by Race Alone, Percent

This indicator reports the percentage of population that are at age 18 to 64 by race alone.

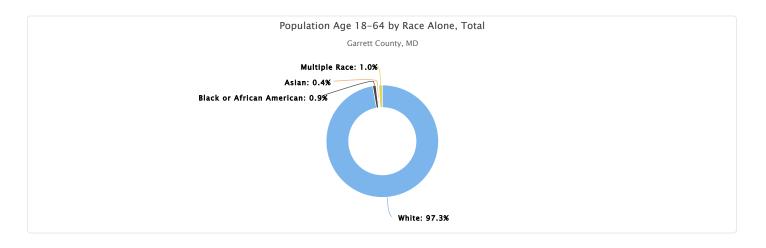
Report Area	White Age 18- 64	Black or African American Age 18-64	Native American or Alaska Native Age 18-64	Asian Age 18- 64	Native Hawaiian or Pacific Islander Age 18-64	Some Other Race Age 18-64	Multiple Race Age 18-64
Garrett County, MD	59.39%	65.20%	86.36%	50.40%	100.00%	81.82%	38.93%
Maryland	62.00%	64.70%	65.41%	67.25%	68.06%	63.16%	47.72%
United States	61.26%	63.78%	62.80%	67.93%	65.92%	64.72%	49.30%



#### Population Age 18-64 by Race Alone, Total

This indicator reports the proportion of each race (alone) making up the population aged 18 to 64.

Report Area	White Age 18-64	Black or African American Age 18-64	Native American or Alaska Native Age 18-64	Asian Age 18-64	Native Hawaiian or Pacific Islander Age 18-64	Some Other Race Age 18-64	Multiple Race Age 18-64
Garrett County, MD	16,824	163	38	63	9	27	174
Maryland	2,072,554	1,164,089	10,964	254,295	2,065	171,894	98,627
United States	144,193,825	26,300,100	1,726,976	12,176,086	395,444	10,385,749	5,306,427

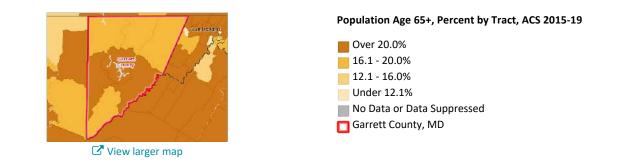


#### Population Age 65+

Of the estimated 29,235 total population in the report area, an estimated 6,436 persons are adults aged 65 and older, representing 22.01% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates. The number of older adults in the report area is relevant because this population has unique needs which should be considered separately from other age groups.

Report Area	<b>Total Population</b>	Population Age 65+	Population Age 65+, Percent
Garrett County, MD	29,235	6,436	22.01%
Maryland	6,018,848	902,678	15.00%
United States	324,697,795	50,783,796	15.64%

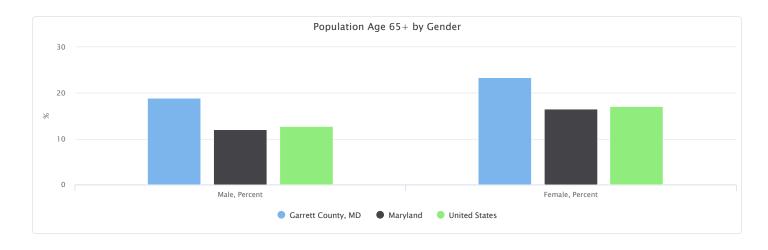
Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



#### Population Age 65+ by Gender

The table below reports the percentage of the population that is age 65 or older by gender. Among the male population in the report area, 18.99% are aged 65 years or older. Among the female population, 23.38% are aged 65 years or older.

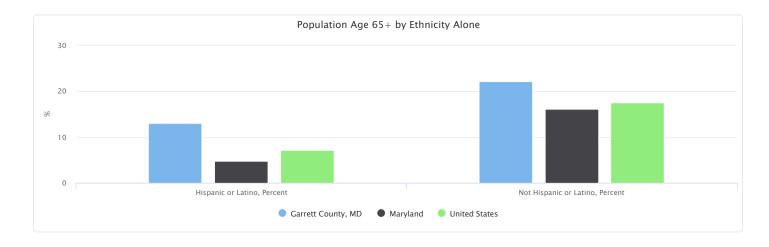
Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	2,750	3,450	18.99%	23.38%
Maryland	352,597	512,549	12.09%	16.53%
United States	20,320,351	28,265,193	12.71%	17.15%



#### Population Age 65+ by Ethnicity Alone

This indicator reports the percentage of population that are at age 65+ by ethnicity alone. In the report area, 13.03% of Hispanic / Latino population are at age 65+, and 22.12% of non Hispanic / Latino population are at age 65+.

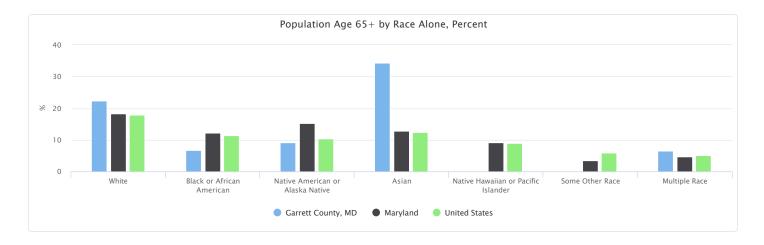
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	43	6,393	13.03%	22.12%
Maryland	28,995	873,683	4.78%	16.14%
United States	4,165,820	46,617,976	7.12%	17.51%



#### Population Age 65+ by Race Alone, Percent

This indicator reports the percentage of each race (alone) making up the population aged 65 or older.

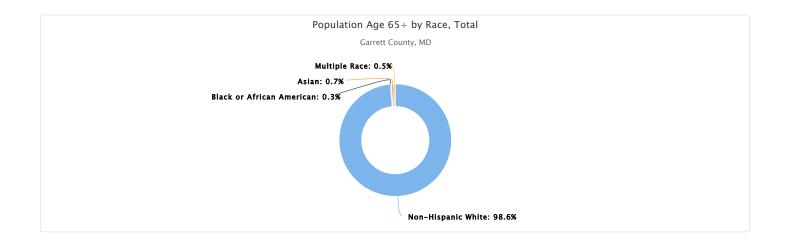
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	22.39%	6.80%	9.09%	34.40%	0.00%	0.00%	6.49%
Maryland	18.36%	12.17%	15.25%	12.70%	9.16%	3.54%	4.59%
United States	17.88%	11.28%	10.29%	12.45%	8.88%	5.80%	5.16%



#### Population Age 65+ by Race, Total

This indicator reports the proportion of each race (alone) making up the population aged 65 or older.

Report Area	Non-Hispanic White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	6,343	17	4	43	0	0	29
Maryland	613,831	218,885	2,557	48,004	278	9,629	9,494
United States	42,079,212	4,649,405	283,103	2,232,036	53,281	930,830	555,929



#### **Population with Any Disability**

This indicator reports the percentage of the total civilian non-institutionalized population with a disability. The report area has a total population of 28,751 for whom disability status has been determined, of which 4,498 or 15.64% have any disability. This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

Report Area	Total Population (For Whom Disability Status Is Determined)	Population with a Disability	Population with a Disability, Percent	Population with a Disability, Percent
Garrett County, MD	28,751	4,498	15.64%	0% 20%
Maryland	5,920,779	652,374	11.02%	Maryland (11.02%)
United States	319,706,872	40,335,099	12.62%	United States (12.62%)

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



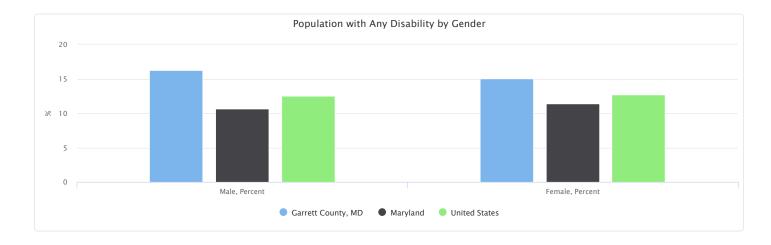
Disabled Population, Percent by Tract, ACS 2015-19



#### Population with Any Disability by Gender

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by gender.

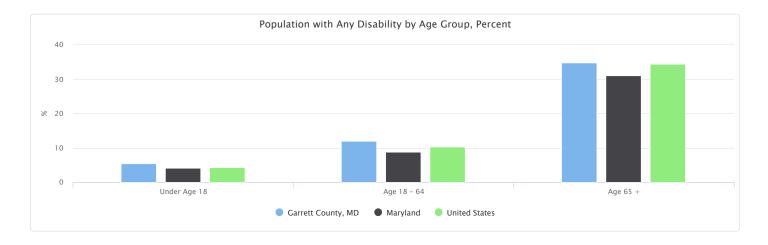
Report Area	Male	Female	Male, Percent	Female, Percent	
Garrett County, MD	2,317	2,181	16.28%	15.02%	
Maryland	303,259	349,115	10.65%	11.36%	
United States	19,519,273	20,815,826	12.49%	12.74%	



#### Population with Any Disability by Age Group, Percent

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by age group.

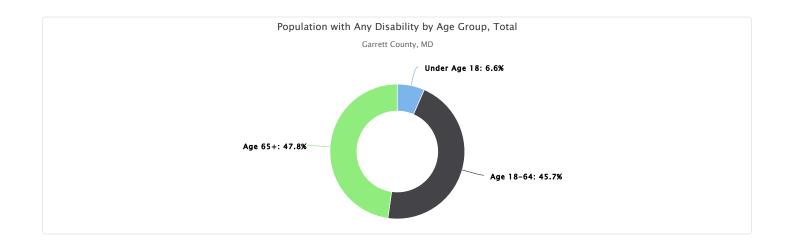
Report Area	Under Age 18	Age 18 - 64	Age 65 +	
Garrett County, MD	5.46%	11.96%	34.84%	
Maryland	4.02%	8.82%	30.96%	
United States	4.21%	10.25%	34.48%	



#### Population with Any Disability by Age Group, Total

This indicator reports the proportion of the total civilian non-institutionalized population with a disability by age group.

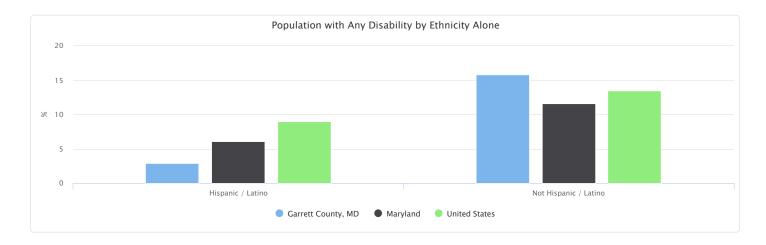
Report Area	Under Age 18	Age 18-64	Age 65+
Garrett County, MD	295	2,055	2,148
Maryland	53,839	326,345	272,190
United States	3,084,450	20,187,604	17,063,045



#### Population with Any Disability by Ethnicity Alone

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by ethnicity alone.

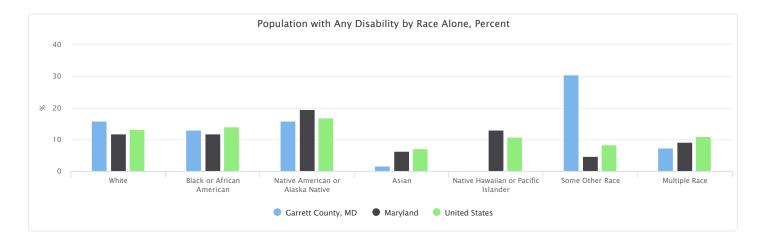
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	9	4,489	2.86%	15.79%
Maryland	36,345	616,029	6.06%	11.58%
United States	5,180,805	35,154,294	8.97%	13.42%



#### Population with Any Disability by Race Alone, Percent

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by race alone.

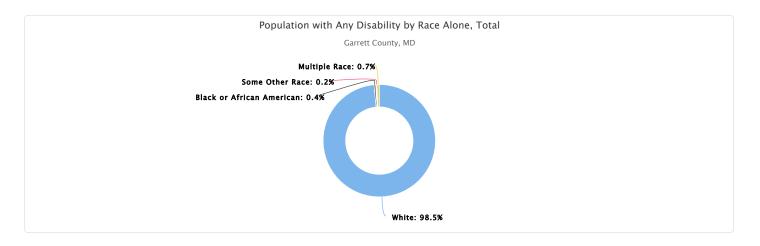
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	15.84%	12.99%	15.91%	1.69%	0.00%	30.43%	7.31%
Maryland	11.76%	11.75%	19.54%	6.37%	12.98%	4.57%	9.08%
United States	13.14%	13.95%	16.94%	7.06%	10.78%	8.27%	10.93%



#### Population with Any Disability by Race Alone, Total

This indicator reports the proportion of the total civilian non-institutionalized population with a disability by race alone.

Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	4,431	20	7	2	0	7	31
Maryland	387,044	206,972	3,187	23,941	364	12,382	18,484
United States	30,510,078	5,579,158	454,471	1,259,426	63,132	1,310,335	1,158,499

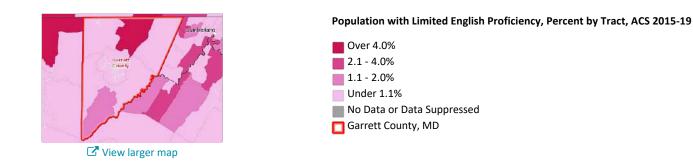


#### **Population with Limited English Proficiency**

This indicator reports the percentage of the population aged 5 and older who speak a language other than English at home and speak English less than "very well". This indicator is relevant because an inability to speak English well creates barriers to healthcare access, provider communications, and health literacy/education. Of the 27,812 total population aged 5 and older in the report area, 275 or 0.99% have limited English proficiency.

Report Area	Population Age 5+	Population Age 5+ with Limited English Proficiency	Population Age 5+ with Limited English Proficiency, Percent	Population Age 5+ with Limited English Proficiency, Percent
Garrett County, MD	27,812	275	0.99%	
Maryland	5,653,980	394,630	6.98%	0% 25% Garrett County (0.99%)
United States	304,930,125	25,615,365	8.40%	<ul> <li>Maryland (6.98%)</li> <li>United States (8.40%)</li> </ul>

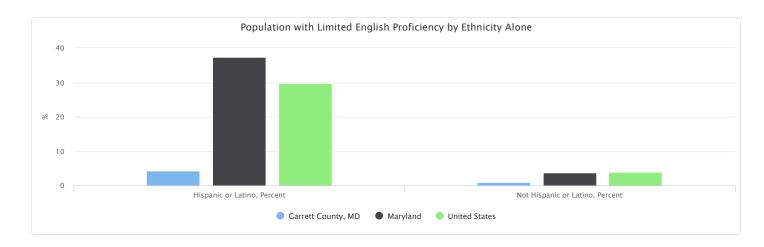
Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



#### Population with Limited English Proficiency by Ethnicity Alone

This indicator reports the total population aged 5 and older who speak a language other than English at home and speak English less than "very well" by ethnicity alone in the report area.

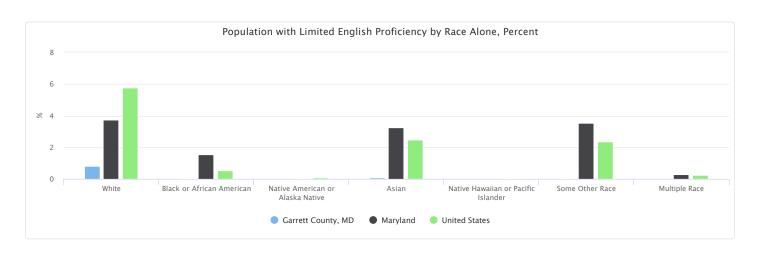
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	12	263	4.32%	0.96%
Maryland	201,660	192,970	37.30%	3.77%
United States	15,847,641	9,767,724	29.69%	3.88%



#### Population with Limited English Proficiency by Race Alone, Percent

This indicator reports the percentage of the population aged 5 and older who speak a language other than English at home and speak English less than "very well" by race alone in the report area.

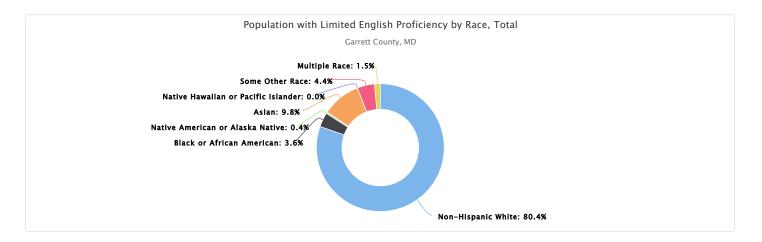
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	0.82%	0.04%	0.00%	0.10%	0.00%	0.04%	0.01%
Maryland	3.75%	1.55%	0.06%	3.26%	0.01%	3.55%	0.28%
United States	5.75%	0.54%	0.09%	2.49%	0.03%	2.36%	0.26%



#### Population with Limited English Proficiency by Race, Total

This indicator reports the total population aged 5 and older who speak a language other than English at home and speak English less than "very well" by race alone in the report area.

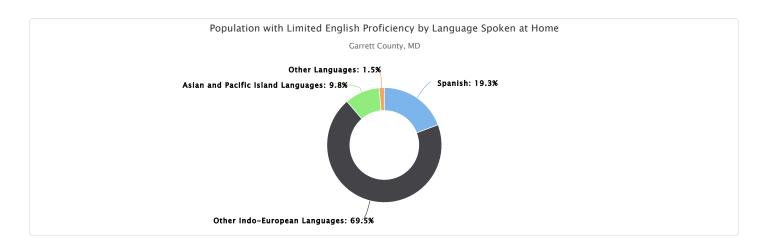
Report Area	Non-Hispanic White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	221	10	1	27	0	12	4
Maryland	118,653	49,133	1,897	103,132	440	112,451	8,924
United States	12,785,991	1,205,315	193,205	5,538,575	69,831	5,254,025	568,423



#### Population with Limited English Proficiency by Language Spoken at Home

This indicator reports the total population aged 5 and older who speak a language other than English at home and speak English less than "very well" by language spoken at home in the report area.

Report Area	Spanish	Other Indo-European Languages	Asian and Pacific Island Languages	Other Languages
Garrett County, MD	53	191	27	4
Maryland	210,394	68,497	84,916	30,823
United States	16,258,571	3,418,899	4,910,799	1,027,096



#### **Foreign-Born Population**

This indicator reports the percentage of the population that is foreign-born. The foreign-born population includes anyone who was not a U.S. citizen or a U.S. national at birth. This includes any non-citizens, as well as persons born outside of the U.S. who have become naturalized citizens. The native U.S. population includes any person born in the United States, Puerto Rico, a U.S. Island Area (such as Guam), or abroad of American (U.S. citizen) parent or parents. The latest figures from the U.S. Census Bureau show that 333 persons in the report area are of foreign birth, which represents 1.14% of the report area population. This percentage is less than the national average of 13.55%.

Report Area	Total Population	Naturalized U.S. Citizens	Population Without U.S. Citizenship	Total Foreign-Birth Population	Foreign-Birth Population, Percent of Total Population
Garrett County, MD	29,235	208	125	333	1.14%
Maryland	6,018,848	471,279	441,608	912,887	15.17%
United States	324,697,795	21,847,890	22,163,980	44,011,870	13.55%

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



☑ View larger map

# Foreign-Born Population (Non-Citizen or Naturalized), Percent by Tract, ACS 2015-19



#### **Citizenship Status**

The table below shows the numbers and percent of population by citizenship status for the report area. According to the latest American Community Survey (ACS), the report area has a total of 125 non-Citizens, or 0.43% of the total population of 29,235 persons, in contrast to the state average of 7.34% of the population and the national average of 6.83% non-Citizens living in the United States.

Report Area	Native	Born in a US Territory	Born Abroad to US Citizens	Naturalized	Non-Citizen	Non-Citizen, Percent
Garrett County, MD	28,699	6	197	208	125	0.43%
Maryland	5,012,367	21,425	72,169	471,279	441,608	7.34%
United States	275,537,270	2,019,168	3,129,487	21,847,890	22,163,980	6.83%

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: County



# Foreign-Born Population (Non-Citizen or Naturalized), Percent by Tract, ACS 2015-19

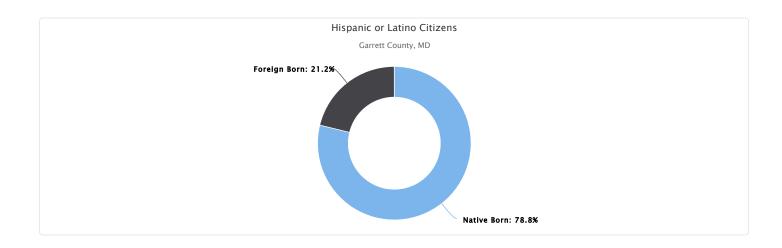




#### Hispanic or Latino Citizens

This indicator reports the citizenship status of the Hispanic or Latino population within the report area.

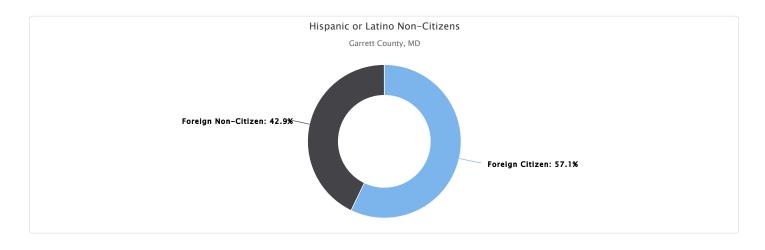
Report Area	Native Born	Native Born	Foreign Born	Foreign Born
Garrett County, MD	260	0.89%	70	0.24%
Maryland	319,831	5.31%	286,651	4.76%
United States	38,893,023	11.98%	19,586,347	6.03%



#### Hispanic or Latino Non-Citizens

This indicator reports the citizenship status of the Non-Hispanic or Latino population within the report area.

Report Area	Foreign Citizen	Foreign Citizen	Foreign Non-Citizen	Foreign Non-Citizen
Garrett County, MD	40	0.14%	30	0.10%
Maryland	89,274	1.48%	197,377	3.28%
United States	7,307,849	2.25%	12,278,498	3.78%

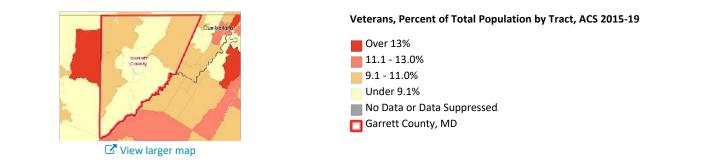


#### **Veteran Population**

This indicator reports the percentage of the population age 18 and older that served (even for a short time), but is not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or that served in the U.S. Merchant Marine during World War II. Of the 23,725 population of the report area, 2,028 or 8.55% are veterans.

Report Area	Total Population Age 18+	Total Veterans	Veterans, Percent of Total Population
Garrett County, MD	23,725	2,028	8.55%
Maryland	4,646,249	365,356	7.86%
United States	250,195,726	18,230,322	7.29%

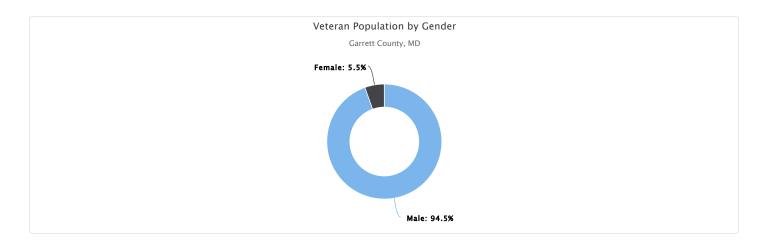
Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



#### Veteran Population by Gender

This indicator reports the veteran population in the report area by gender.

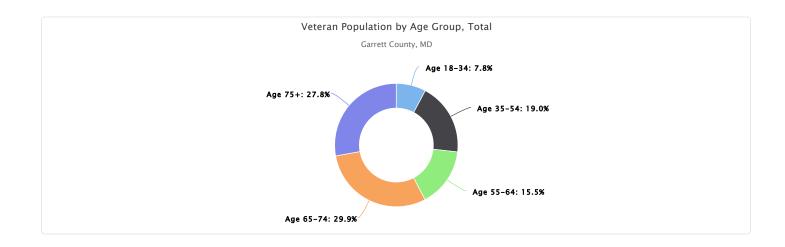
Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	1,917	111	16.50%	0.92%
Maryland	319,176	46,180	14.46%	1.89%
United States	16,611,283	1,619,039	13.68%	1.26%



#### Veteran Population by Age Group, Total

This indicator reports the total veteran population in the report area by age group.

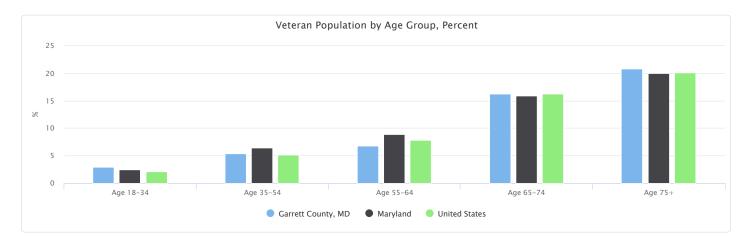
Report Area	Age 18-34	Age 35-54	Age 55-64	Age 65-74	Age 75+
Garrett County, MD	158	385	315	606	564
Maryland	33,175	101,829	71,730	84,350	74,272
United States	1,609,388	4,281,826	3,251,828	4,811,798	4,275,482



#### Veteran Population by Age Group, Percent

This indicator reports the percentage of veterans in the report area by age group.

Report Area	Age 18-34	Age 35-54	Age 55-64	Age 65-74	Age 75+
Garrett County, MD	2.91%	5.34%	6.77%	16.25%	20.83%
Maryland	2.46%	6.39%	8.93%	15.90%	19.95%
United States	2.15%	5.17%	7.79%	16.29%	20.13%



## Income and Economics

Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

#### **Employment - Labor Force Participation Rate**

The table below displays the labor force participation rate for the report area. According to the 2015 – 2019 American Community Survey, of the 24,473 working age population, 14,419 are included in the labor force. The labor force participation rate is 58.92%.

Report Area	Total Population Age 16+	Labor Force	Labor Force Participation Rate	Labor Force Participation F
Garrett County, MD	24,473	14,419	58.92%	
Maryland	4,827,204	3,238,282	67.08%	
United States	259,662,880	163,555,585	62.99%	20% 100
lote: This indicator is compared to the si lata Source: US Census Bureau, American	tate average. n Community Survey. 2015-19. Source geography: County	,		<ul> <li>Garrett County (58.92</li> <li>Maryland (67.08%)</li> <li>United States (62.99%)</li> </ul>



#### **Employment - Unemployment Rate**

Total unemployment in the report area for the current month equals 725, or 4.9% of the civilian non-institutionalized population age 16 and older (non-seasonally adjusted). This indicator is relevant because unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Labor Force	Number Employed	Number Unemployed	Unemployment Rate
Garrett County, MD	14,825	14,100	725	4.9%
Maryland	3,150,758	2,969,336	181,422	5.8%
United States	162,875,350	154,220,063	8,655,287	5.3%

Note: This indicator is compared to the state average.

Data Source: US Department of Labor, Bureau of Labor Statistics. 2021 - August. Source geography: County



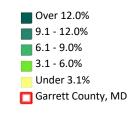
☑ View larger map



15%

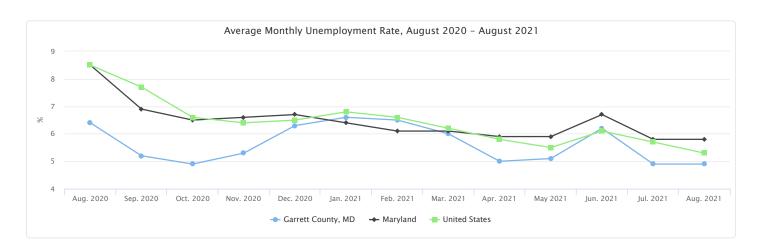
Garrett County (4.9%)

Maryland (5.8%) United States (5.3%)



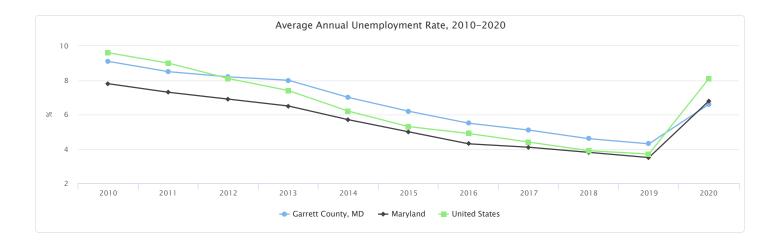
Average Monthly Unemployment Rate, August 2020 - August 2021

Report Area	Aug. 2020	Sep. 2020	Oct. 2020	Nov. 2020	Dec. 2020	Jan. 2021	Feb. 2021	Mar. 2021	Apr. 2021	May 2021	Jun. 2021	Jul. 2021	Aug. 2021
Garrett County, MD	6.4%	5.2%	4.9%	5.3%	6.3%	6.6%	6.5%	6.0%	5.0%	5.1%	6.2%	4.9%	4.9%
Maryland	8.5%	6.9%	6.5%	6.6%	6.7%	6.4%	6.1%	6.1%	5.9%	5.9%	6.7%	5.8%	5.8%
United States	8.5%	7.7%	6.6%	6.4%	6.5%	6.8%	6.6%	6.2%	5.8%	5.5%	6.1%	5.7%	5.3%



#### Average Annual Unemployment Rate, 2010-2020

Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Garrett County, MD	9.1%	8.5%	8.2%	8.0%	7.0%	6.2%	5.5%	5.1%	4.6%	4.3%	6.6%
Maryland	7.8%	7.3%	6.9%	6.5%	5.7%	5.0%	4.3%	4.1%	3.8%	3.5%	6.8%
United States	9.6%	9.0%	8.1%	7.4%	6.2%	5.3%	4.9%	4.4%	3.9%	3.7%	8.1%



#### Income - Inequality (GINI Index)

This indicator reports income inequality using the Gini coefficient. Gini index values range between zero and one. A value of one indicates perfect inequality where only one house-hold has any income. A value of zero indicates perfect equality, where all households have equal income.

Index values are acquired from the 2015-19 American Community Survey and are not available for custom report areas or multi-county areas.

Report Area	Total Households	Gini Index Value	Gini Index Value
Garrett County, MD	12,425	0.45	
Maryland	2,205,204	0.45	
United States	120,756,048	0.48	
lote: This indicator is compared to the state average. Iata Source: US Census Bureau, American Community Survey. 2015-1:	9. Source geography: Tract		<ul> <li>Garrett County (0</li> <li>Maryland (0.45)</li> <li>United States (0.4</li> </ul>
		nequality (GINI), Index Value by Trac	t, ACS 2015-19
	Over C	0.460	



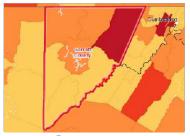
#### **Income - Median Household Income**

This indicator reports median household income based on the latest 5-year American Community Survey estimates. This includes the income of the householder and all other individuals 15 years old and over in the household, whether they are related to the householder or not. Because many households consist of only one person, average household income is usually less than average family income. There are 12,425 households in the report area, with an average income of \$71,004 and median income of \$52,617.

Report Area	Total Households	Average Household Income	Median Household Income	
Garrett County, MD	12,425	\$71,004	\$52,617	
Maryland	2,205,204	\$111,417	\$84,805	
United States	120,756,048	\$88,607	\$62,843	

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



View larger map

#### Median Household Income by Tract, ACS 2015-19

Median Household Income

Garrett (\$52,617)

Maryland (\$84,805)
 United States (\$62,843)

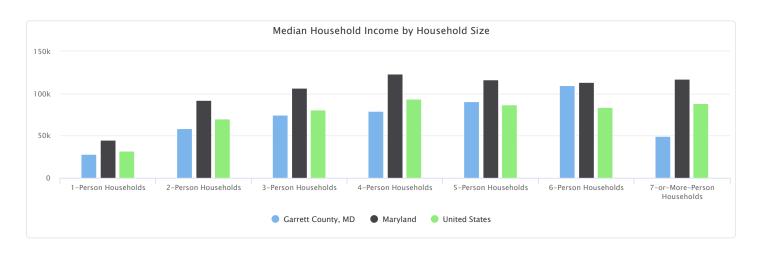
100000

Over \$70,000
 \$60,001 - \$70,000
 \$50,001 - \$60,000
 Under \$50,001
 No Data or Data Suppressed
 Garrett County, MD

#### Median Household Income by Household Size

This indicator reports the median household income of the report area by household size.

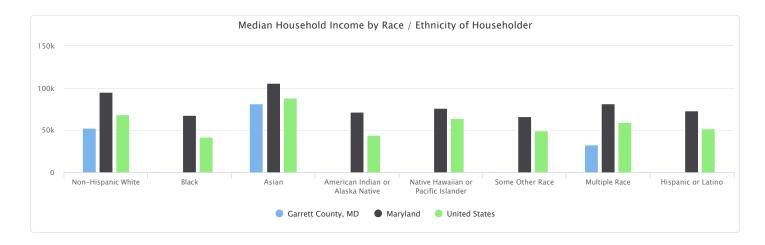
Report Area	1-Person Households	2-Person Households	3-Person Households	4-Person Households	5-Person Households	6-Person Households	7-or-More-Person Households
Garrett County, MD	\$28,012	\$58,580	\$74,464	\$78,864	\$90,833	\$109,375	\$49,241
Maryland	\$44,964	\$92,501	\$106,807	\$123,480	\$116,439	\$113,584	\$117,028
United States	\$32,008	\$70,231	\$81,087	\$93,831	\$86,817	\$83,852	\$88,580



#### Median Household Income by Race / Ethnicity of Householder

Report Area	Non-Hispanic White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Garrett County, MD	\$52,710	No data	\$81,477	No data	No data	No data	\$32,778	No data
Maryland	\$95,238	\$67,583	\$105,691	\$71,803	\$76,106	\$66,033	\$81,646	\$72,758
United States	\$68,785	\$41,935	\$88,204	\$43,825	\$63,613	\$49,221	\$59,184	\$51,811

This indicator reports the median household income of the report area by race / ethnicity of householder.

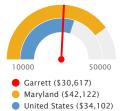


#### Income - Per Capita Income

The per capita income for the report area is \$30,617. This includes all reported income from wages and salaries as well as income from self-employment, interest or dividends, public assistance, retirement, and other sources. The per capita income in this report area is the average (mean) income computed for every man, woman, and child in the specified area.

Report Area	Total Population	Total Income (\$)	Per Capita Income (\$)		
Garrett County, MD	29,235	\$895,100,000	\$30,617		
Maryland	6,018,848	\$253,528,783,400	\$42,122		
United States	324,697,795	\$11,073,131,694,900	\$34,102		

Per Capita Income (\$)

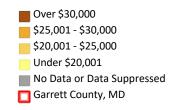


Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



☑ View larger map

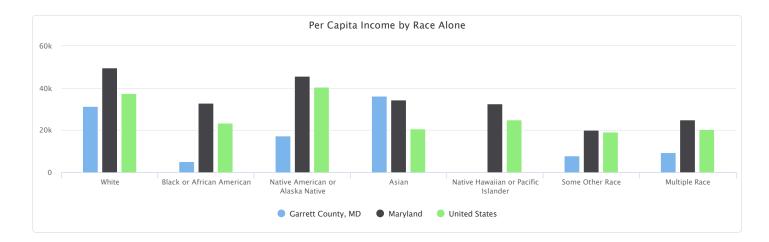
#### Per Capita Income by Tract, ACS 2015-19



#### Per Capita Income by Race Alone

This indicator reports the per capita income of the report area by race alone.

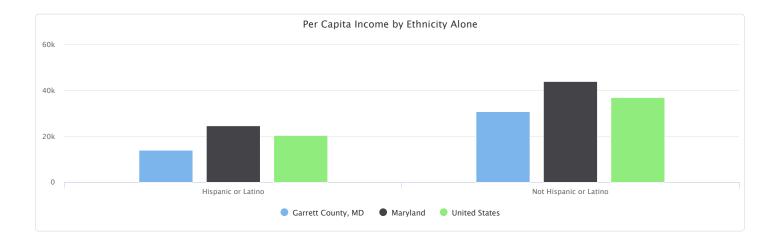
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	\$31,248.00	\$5,196.00	\$17,253.00	\$36,175.00	\$0.00	\$7,979.00	\$9,514.00
Maryland	\$49,508.00	\$33,006.00	\$45,799.00	\$34,546.00	\$32,684.00	\$20,097.00	\$25,041.00
United States	\$37,326.00	\$23 <i>,</i> 383.00	\$40,524.00	\$20,844.00	\$24,961.00	\$19,071.00	\$20,296.00



#### Per Capita Income by Ethnicity Alone

This indicator reports the per capita income of the report area by ethnicity alone.

Report Area	Hispanic or Latino	Not Hispanic or Latino
Garrett County, MD	\$14,050.00	\$30,807.00
Maryland	\$24,737.00	\$44,071.00
United States	\$20,515.00	\$37,088.00



#### Poverty - Children Below 100% FPL

In the report area 12.65% or 665 children aged 0-17 are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population Under Age 18	Population Under Age 18 in Poverty	Percent Population Under Age 18 in Poverty	Percent Population Under Age 18 in Poverty
Garrett County, MD	28,480	5,257	665	12.65%	0% 50%
Maryland	5,876,434	1,321,245	159,879	12.10%	Maryland (12.10%)
United States	316,715,051	72,235,700	13,377,778	18.52%	United States (18.52%)

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



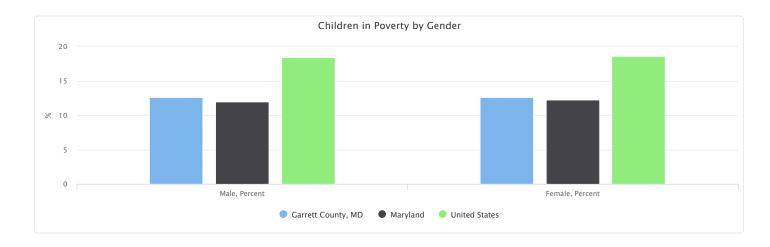
# Population Below the Poverty Level, Children (Age 0-17), Percent by Tract, ACS 2015-19

Over 30.0%
22.6 - 30.0%
15.1 - 22.5%
Under 15.1%
No Population Age 0-17 Reported
No Data or Data Suppressed
Garrett County, MD

#### Children in Poverty by Gender

This indicator reports children aged 0-17 living in households with income below the federal poverty level by gender.

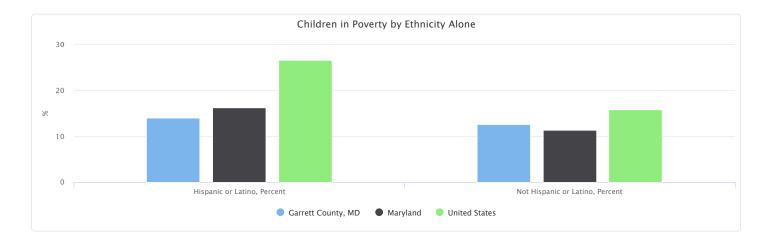
Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	336	329	12.64%	12.66%
Maryland	80,519	79,360	11.94%	12.26%
United States	6,799,287	6,578,491	18.43%	18.61%



#### Children in Poverty by Ethnicity Alone

This indicator reports children aged 0-17 living in households with income below the federal poverty level by ethnicity alone.

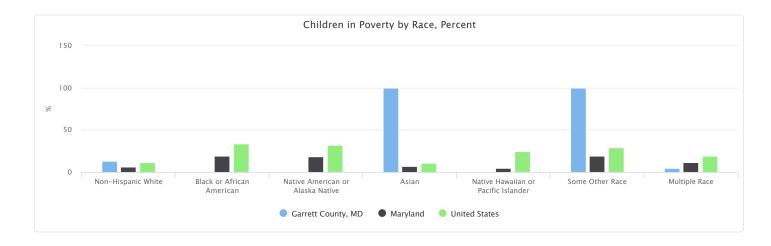
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	14	651	14.00%	12.62%
Maryland	32,599	127,280	16.31%	11.35%
United States	4,839,972	8,537,806	26.63%	15.79%



#### Children in Poverty by Race, Percent

This indicator reports percent of children aged 0-17 living in households with income below the federal poverty level by race alone.

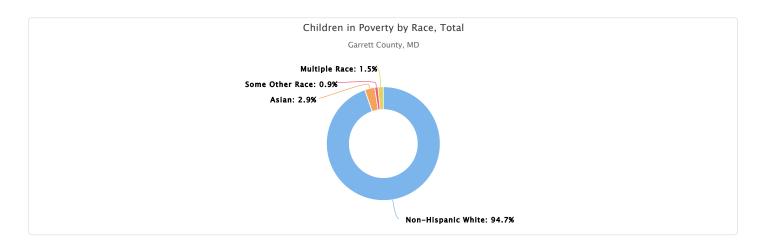
Report Area	Non-Hispanic White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	12.74%	0.00%	0.00%	100.00%	No data	100.00%	4.20%
Maryland	6.01%	19.27%	17.90%	6.91%	4.23%	19.38%	11.62%
United States	11.13%	33.23%	32.23%	10.64%	24.13%	29.19%	18.78%



#### Children in Poverty by Race, Total

This indicator reports the total children aged 0-17 living in households with income below the federal poverty level by race alone.

Report Area	Non-Hispanic White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	630	0	0	19	0	6	10
Maryland	33,494	78,965	568	5,197	29	16,968	11,317
United States	4,070,361	3,346,711	231,663	370,660	35,458	1,356,208	905,096



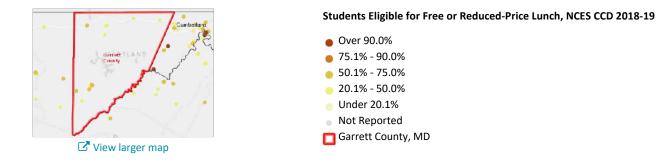
#### Poverty - Children Eligible for Free/Reduced Price Lunch

Free or reduced price lunches are served to qualifying students in families with income between under 185 percent (reduced price) or under 130% (free lunch) of the US federal poverty threshold as part of the federal National School Lunch Program (NSLP).

Out of 3,842 total public school students in the report area, 1,750 were eligible for the free or reduced price lunch program in the latest report year. This represents 45.5% of public school students, which is lower than the state average of 46.3%.

Report Area	Total Students	Students Eligible for Free or Reduced Price Lunch	Students Eligible for Free or Reduced Price Lunch, Percent	Percentage of Students Eligible for Free or Reduced Price School Lunch
Garrett County, MD	3,842	1,750	45.5%	
Maryland	896,827	415,502	46.3%	0% 100% 0% 100%
United States	50,744,629	25,124,175	49.5%	<ul> <li>Maryland (46.3%)</li> <li>United States (49.5%)</li> </ul>

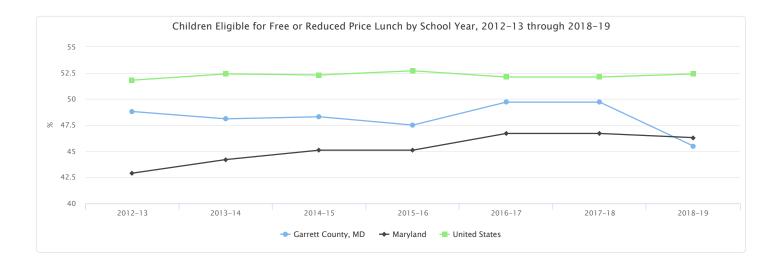
Note: This indicator is compared to the state average. Data Source: National Center for Education Statistics, NCES - Common Core of Data. 2018-19. Source geography: Address



#### Children Eligible for Free or Reduced Price Lunch by School Year, 2012-13 through 2018-19

The table below shows local, state, and national trends in student free and reduced lunch eligibility by percent.

Report Area	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19
Garrett County, MD	48.8%	48.1%	48.3%	47.5%	49.7%	49.7%	45.5%
Maryland	42.9%	44.2%	45.1%	45.1%	46.7%	46.7%	46.3%
United States	51.8%	52.4%	52.3%	52.7%	52.1%	52.1%	52.4%

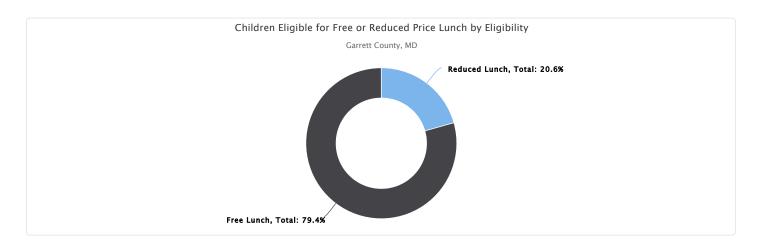


#### Children Eligible for Free or Reduced Price Lunch by Eligibility

The table below displays the number and percentage of students eligible for free or reduced price lunch by income eligibility category. Percentages in the table below are out of the total student population.

Report Area	Free Lunch, Total	Free Lunch, Percent	Reduced Lunch, Total	Reduced Lunch, Percent
Garrett County, MD	1,389	36.2%	361	9.4%
Maryland	363,966	40.6%	51,530	5.7%
United States	21,661,831	43.0%	2,568,683	5.1%

The chart below displays the percentage of the students in each eligibility category out of the total number of students eligible for free or reduced price lunch.



#### **Poverty - Population Below 100% FPL**

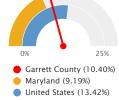
Poverty is considered a key driver of health status.

Within the report area 10.40% or 2,963 individuals are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population in Poverty	Population in Poverty, Percent
Garrett County, MD	28,480	2,963	10.40%
Maryland	5,876,434	539,991	9.19%
United States	316,715,051	42,510,843	13.42%

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract





**View** larger map

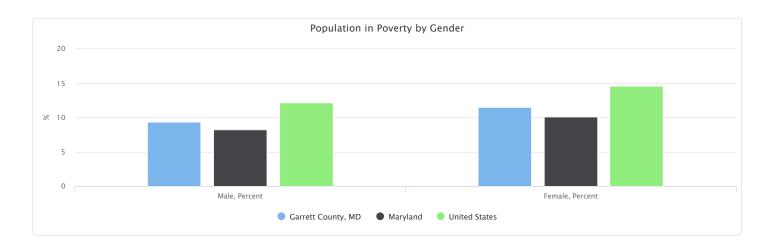
#### Population Below the Poverty Level, Percent by Tract, ACS 2015-19



#### Population in Poverty by Gender

This indicator reports the population in poverty in the report area by gender.

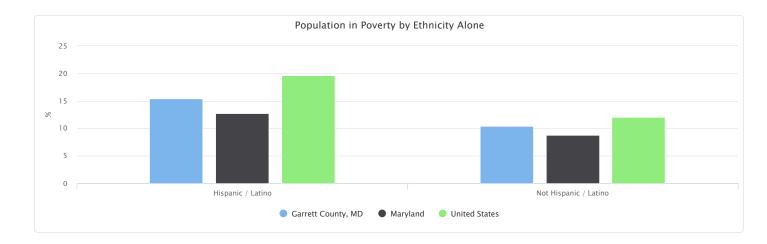
Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	1,309	1,654	9.31%	11.47%
Maryland	232,000	307,991	8.19%	10.12%
United States	18,909,451	23,601,392	12.19%	14.61%



#### Population in Poverty by Ethnicity Alone

This indicator reports the population in poverty in the report area by ethnicity alone.

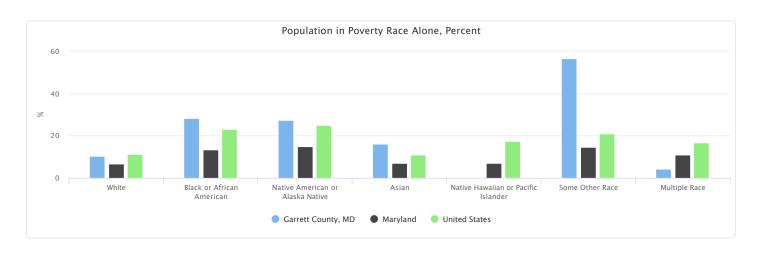
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	48	2,915	15.43%	10.35%
Maryland	75,291	464,700	12.68%	8.80%
United States	11,256,244	31,254,599	19.64%	12.05%



#### Population in Poverty Race Alone, Percent

This indicator reports the percentage of population in poverty in the report area by race alone.

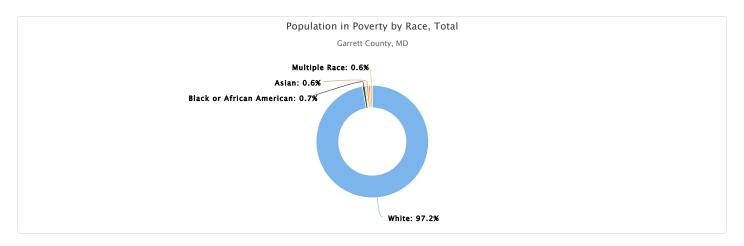
Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	10.36%	28.21%	27.27%	16.10%	0.00%	56.52%	4.35%
Maryland	6.67%	13.31%	15.05%	7.02%	7.07%	14.53%	10.92%
United States	11.15%	23.04%	24.86%	10.94%	17.51%	21.04%	16.66%



#### Population in Poverty by Race, Total

Report Area	Non-Hispanic White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	2,879	22	12	19	0	13	18
Maryland	218,229	232,108	2,438	26,145	198	38,874	21,999
United States	25,658,220	9,114,217	660,695	1,922,319	101,826	3,313,183	1,740,383

This indicator reports the total population in poverty in the report area by race alone.



# Education

This category contains indicators that describe the education system and the educational outcomes of report area populations. Education metrics can be used to describe variation in population access, proficiency, and attainment throughout the education system, from access to pre-kindergarten through advanced degree attainment. These indicators are important because education is closely tied to health outcomes and economic opportunity.

#### Access - Preschool Enrollment (Age 3-4)

This indicator reports the percentage of the population age 3-4 that is enrolled in school. This indicator helps identify places where pre-school opportunities are either abundant or lacking in the educational system.

Report Area	Population Age 3-4	Population Age 3-4 Enrolled in School	Population Age 3-4 Enrolled in School, Percent	Percentage of Population Age 3-4 Enrolled in School
Garrett County, MD	782	252	32.23%	
Maryland	150,743	75,397	50.02%	0% 100%
United States	8,151,928	3,938,693	48.32%	<ul> <li>Maryland (50.02%)</li> <li>United States (48.32%)</li> </ul>

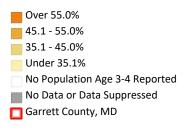
Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



🕑 View larger map

Enrollment in School, Children (Age 3-4), Percent by Tract, ACS 2015-19



#### Attainment - Bachelor's Degree or Higher

20.94% of the population aged 25 and older, or 4,497 have obtained a Bachelor's level degree or higher. This indicator is relevant because educational attainment has been linked to positive health outcomes.

Report Area	Total Population Age 25+	Population Age 25+ with Bachelor's Degree or Higher	Population Age 25+ with Bachelor's Degree or Higher, Percent	Population Age 25+ with Bachelor's Degree or Higher Percent
Garrett County, MD	21,472	4,497	20.94%	
Maryland	4,139,008	1,662,724	40.17%	0% 100% Garrett County (20.94%)
United States	220,622,076	70,920,162	32.15%	<ul> <li>Maryland (40.17%)</li> <li>United States (32.15%)</li> </ul>

Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



# Population with a Bachelor's Degree or Higher, Percent by Tract, ACS 2015-19

Over 23.0%
 18.1 - 23.0%
 13.1 - 18.0%
 Under 13.1%
 No Data or Data Suppressed
 Garrett County, MD

#### **Attainment - High School Graduation Rate**

The adjusted cohort graduation rate (ACGR) is a graduation metric that follows a "cohort" of first-time 9th graders in a particular school year, and adjust this number by adding any students who transfer into the cohort after 9th grade and subtracting any students who transfer out, emigrate to another country, or pass away. The ACGR is the percentage of the students in this cohort who graduate within four years. In the report area, the adjusted cohort graduation rate was 92.0% during the most recently reported school year. Students in the report area performed better than the state, which had an ACGR of 87.0%.

Report Area	Adjusted Student Cohort	Number of Diplomas Issued	Cohort Graduation Rate
Garrett County, MD	263	242	92.0%
Maryland	64,117	55,762	87.0%
United States	3,095,240	2,715,610	87.7%

Note: This indicator is compared to the state average.

Data Source: US Department of Education, EDFacts. Additional data analysis by CARES. 2018-19. Source geography: School District



View larger map

#### On-Time Graduation, Rate by School District (Secondary), EDFacts 2018-19

Garrett County (92.0%)

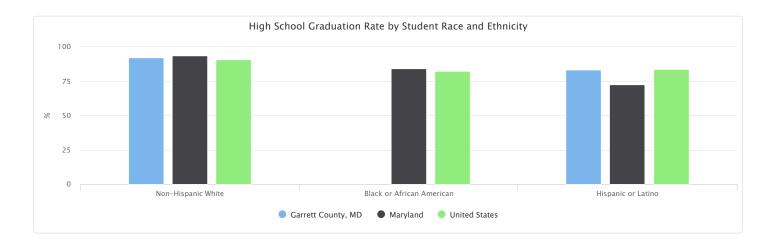
Maryland (87.0%)
 United States (87.7%)



#### High School Graduation Rate by Student Race and Ethnicity

The table and chart below display local, state, and national variation in cohort graduation rates by student race and ethnicity. Note: Data are suppressed for some school districts for population groups when the "universe" population falls below a certain threshold. County, state, and national summaries are aggregates of district level data and may not represent all students when suppression has occurred.

Report Area	Non-Hispanic White	Black or African American	Hispanic or Latino
Garrett County, MD	91.9%	No data	83.3%
Maryland	93.3%	84.3%	72.2%
United States	90.8%	82.1%	83.7%

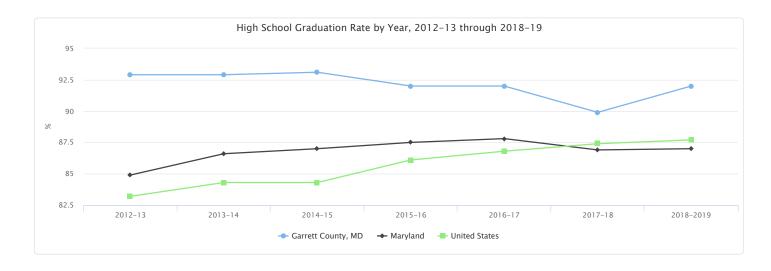


#### High School Graduation Rate by Year, 2012-13 through 2018-19

The table below shows local, state, and national trends in cohort graduation rates.

Note: Data for some states are omitted each year when they fail to meet federal reporting standards or deadlines. Use caution when comparing national trends as the "universe" population may differ over time.

Report Area	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-2019
Garrett County, MD	92.9%	92.9%	93.1%	92.0%	92.0%	89.9%	92.0%
Maryland	84.9%	86.6%	87.0%	87.5%	87.8%	86.9%	87.0%
United States	83.2%	84.3%	84.3%	86.1%	86.8%	87.4%	87.7%



#### **Attainment - No High School Diploma**

Within the report area there are 2,189 persons aged 25 and older without a high school diploma (or equivalency) or higher. This represents 10.19% of the total population aged 25 and older. This indicator is relevant because educational attainment is linked to positive health outcomes (Freudenberg & Ruglis, 2007).

Report Area	Total Population Age 25+	Population Age 25+ with No High School Diploma	Population Age 25+ with No High School Diploma, Percent	Population Age 25+ with No High School Diploma, Percent
Garrett County, MD	21,472	2,189	10.19%	
Maryland	4,139,008	405,463	9.80%	0% 50%
United States	220,622,076	26,472,261	12.00%	<ul> <li>Maryland (9.80%)</li> <li>United States (12.00%)</li> </ul>

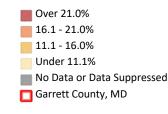
Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



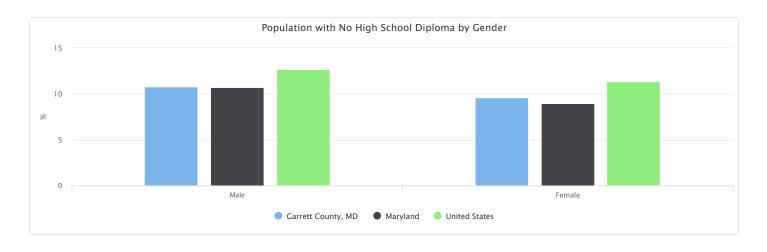
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Population with No High School Diploma (Age 25+), Percent by Tract, ACS 2015-19



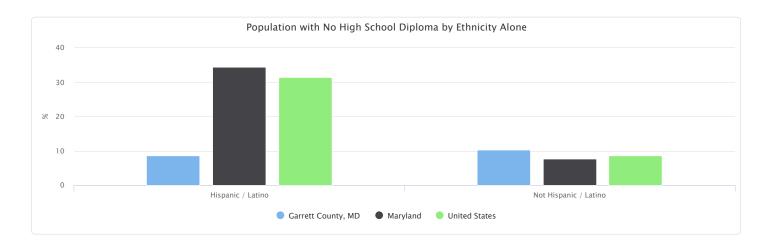
## Population with No High School Diploma by Gender

Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	1,128	1,061	10.82%	9.60%
Maryland	209,486	195,977	10.70%	8.99%
United States	13,534,549	12,937,712	12.69%	11.35%



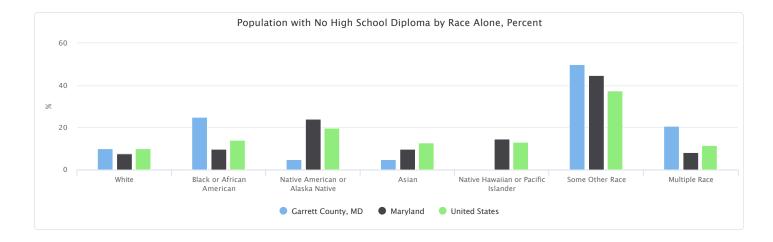
## Population with No High School Diploma by Ethnicity Alone

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	16	2,173	8.65%	10.21%
Maryland	116,845	288,618	34.42%	7.60%
United States	10,420,909	16,051,352	31.33%	8.57%



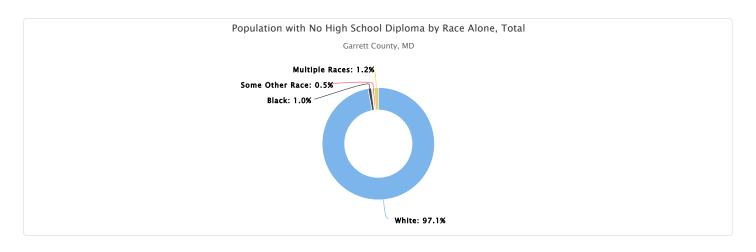
## Population with No High School Diploma by Race Alone, Percent

Report Area	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	10.08%	25.00%	4.76%	4.90%	0.00%	50.00%	20.63%
Maryland	7.55%	9.77%	24.07%	9.78%	14.66%	44.81%	8.35%
United States	10.10%	14.03%	19.69%	12.88%	13.01%	37.31%	11.53%



#### Population with No High School Diploma by Race Alone, Total

Report Area	White	Black	Asian	Native American or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Garrett County, MD	2,125	21	5	2	0	10	26
Maryland	181,843	117,814	26,453	2,839	291	69,096	7,127
United States	16,711,016	3,704,565	1,636,415	336,227	49,291	3,510,814	523,933



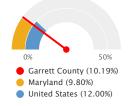
#### **Attainment - Overview**

Educational Attainment shows the distribution of the highest level of education achieved in the report area, and helps schools and businesses to understand the needs of adults, whether it be workforce training or the ability to develop science, technology, engineering, and mathematics opportunities. Educational attainment is calculated for persons over 25, and is an estimated average for the period from 2014 to 2019.

For the selected area, 11.6% have at least a college bachelor's degree, while 43.3% stopped their formal educational attainment after high school.

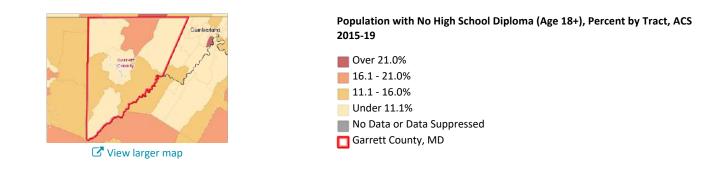
Report Area	No High School Diploma	High School Only	Some College	Associates Degree	Bachelors Degree	Graduate or Professional Degree
Garrett County, MD	10.19%	43.3%	16.3%	9.3%	11.6%	9.4%
Maryland	9.80%	24.6%	18.7%	6.7%	21.5%	18.6%
United States	12.00%	27.0%	20.4%	8.5%	19.8%	12.4%

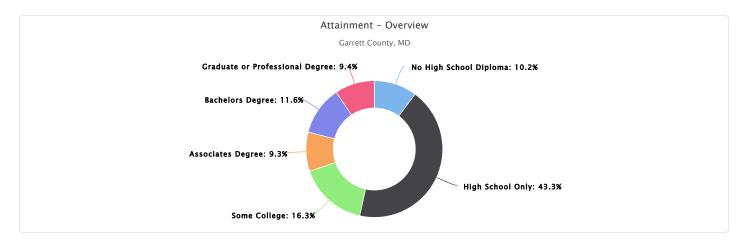
Percent Population with No High School Diploma



Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: County





# Housing and Families

This category contains indicators that describe the structure of housing and families, and the condition and quality of housing units and residential neighborhoods. These indicators are important because housing issues like overcrowding and affordability have been linked to multiple health outcomes, including infectious disease, injuries, and mental disorders. Furthermore, housing metrics like home-ownership rates and housing prices are key for economic analysis.

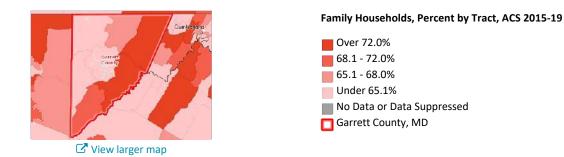
#### **Households - Overview**

This indicator reports the total number and percentage of households by composition (married couple family, nonfamily, etc.). According to the American Community Survey subject definitions, a family household is any housing unit in which the householder is living with one or more individuals related to him or her by birth, marriage, or adoption\*. A non-family households is any household occupied by the householder alone, or by the householder and one or more unrelated individuals.

\*Family households and married-couple families do not include same-sex married couples even if the marriage was performed in a state issuing marriage certificates for same-sex couples. Same sex couple households are included in the family households category if there is at least one additional person related to the householder by birth or adoption.

Report Area	Total Households	Family Households	Family Households, Percent	Non-Family Households	Non-Family Households, Percent
Garrett County, MD	12,425	8,235	66.28%	4,190	33.72%
Maryland	2,205,204	1,468,166	66.58%	737,038	33.42%
United States	120,756,048	79,114,031	65.52%	41,642,017	34.48%

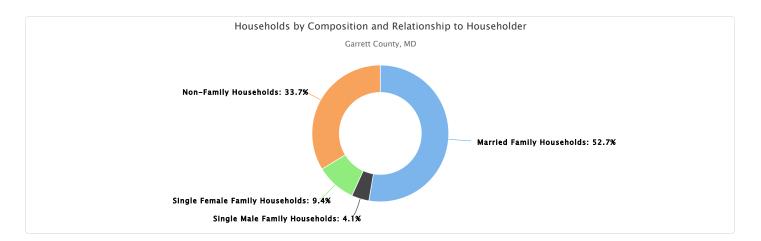
Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



#### Households by Composition and Relationship to Householder

This indicator reports households by composition and relationship to householder.

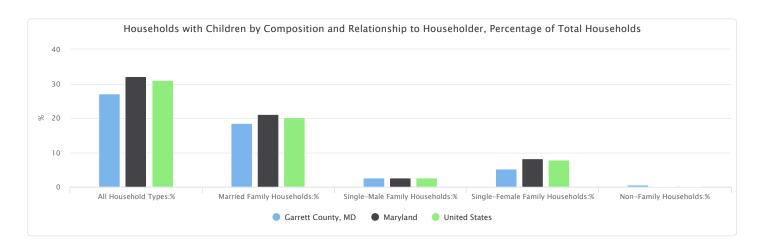
Report Area	Total Households	Married Family Households	Single Male Family Households	Single Female Family Households	Non-Family Households
Garrett County, MD	12,425	6,547	514	1,174	4,190
Maryland	2,205,204	1,058,595	105,366	304,205	737,038
United States	120,756,048	58,198,771	5,898,296	15,016,964	41,642,017



# Households with Children by Composition and Relationship to Householder, Percentage of Total Households

This indicator reports households with children by composition and relationship to householder by percentage of total households.

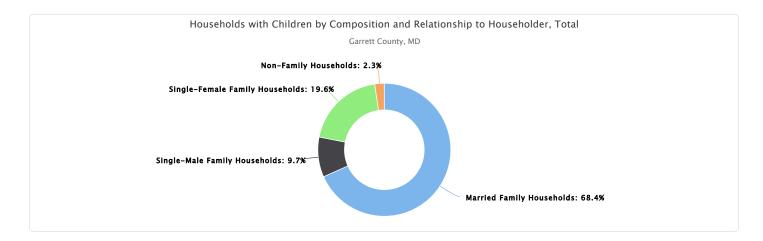
Report Area	All Household Types	Married Family Households	Single-Male Family Households	Single-Female Family Households	Non-Family Households
Garrett County, MD	27.12%	18.54%	2.64%	5.31%	0.63%
Maryland	32.15%	21.04%	2.62%	8.21%	0.28%
United States	31.05%	20.26%	2.70%	7.81%	0.28%



#### Households with Children by Composition and Relationship to Householder, Total

Report Area	All Household	Married Family	Single-Male Family	Single-Female Family	Non-Family	
Report Area	Types	Households	Households	Households	Households	
Garrett County, MD	3,370	2,304	328	660	78	
Maryland	708,938	463,969	57,886	180,946	6,137	
United States	37,494,224	24,465,699	3,258,322	9,427,068	343,135	

This indicator reports the total number of households with children by composition and relationship to householder.



#### Evictions

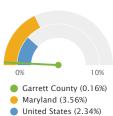
This indicator reports information about formal evictions based on court records from 48 states and the District of Columbia, compiled by the Eviction Lab. The number evictions and eviction filings within the report area is shown in below. The "filing rate" is the ratio of the number of evictions filed in an area over the number of renter-occupied homes in that area. An "eviction rate" is the subset of those homes that received an eviction judgment in which renters were ordered to leave. For

the year 2016, the Eviction Lab reports that, of 3,065 homes in the report area, there were 5 eviction filings, for an eviction filing rate of 0.16%. 5 of the eviction filings ended in an eviction, for an eviction rate of 0.16%.

Note: Not all counties have data that has been provided. Indicator data do not include information about "informal evictions", or those that happen outside of the courtroom.

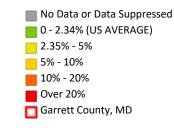
Report Area	Renter Occupied Households	<b>Eviction Filings</b>	Evictions	<b>Eviction Filing Rate</b>	Eviction Rate
Garrett County, MD	3,065	5	5	0.16%	0.16%
Maryland	131,919	136,740	4,694	103.65%	3.56%
United States	38,372,860	2,350,042	898,479	6.12%	2.34%

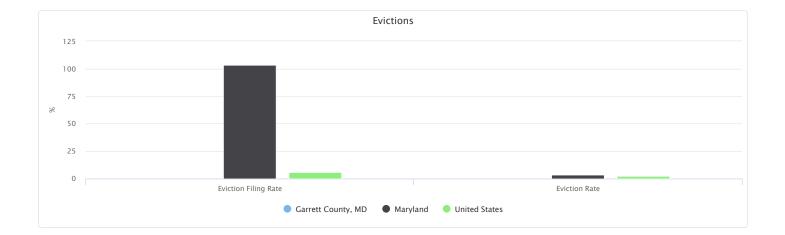
Note: This indicator is compared to the state average. Data Source: Eviction Lab. 2016. Source geography: Census Tract



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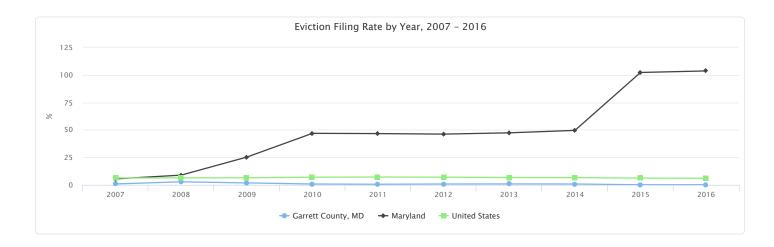
#### Evictions, Rate per 100 Rental Homes by County, Eviction Lab 2016





#### Eviction Filing Rate by Year, 2007 - 2016

Report Area	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Garrett County, MD	0.9%	2.8%	1.8%	0.8%	0.6%	0.8%	0.9%	0.8%	0.1%	0.2%
Maryland	5.5%	8.9%	25.3%	46.9%	46.7%	46.2%	47.4%	49.6%	102.3%	103.7%
United States	6.3%	6.4%	6.4%	7.0%	7.2%	7.0%	6.7%	6.6%	6.2%	6.1%

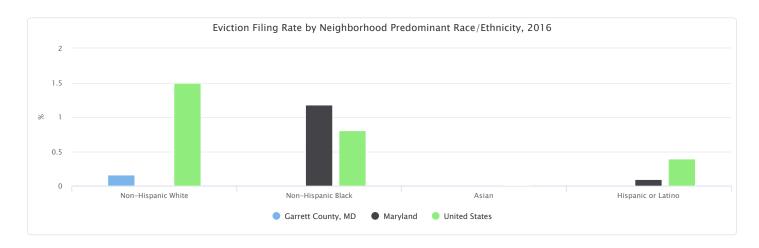


#### Eviction Filing Rate by Neighborhood Predominant Race/Ethnicity, 2016

Rates by race/ethnicity are calculated by aggregating data on evictions in census block groups with a majority of the population (over 50%) belonging to a specific race/ethnicity. Reported race/ethnicity categories include: Non-Hispanic White; Black or Africa American; Asian, and Hispanic or Latino. In some counties there are no majority Black, Asian, or Hispanic census block groups.

Note: Not all counties or states have data that has been provided.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian	Hispanic or Latino
Garrett County, MD	0.16%	No data	No data	No data
Maryland	0.01%	1.18%	No data	0.09%
United States	1.50%	0.80%	0.01%	0.39%



#### Eviction Filings by Neighborhood Predominant Race/Ethnicity, 2016

Totals by race/ethnicity are calculated by aggregating data on evictions in census block groups with a majority of the population (over 50%) belonging to a specific race/ethnicity. Reported race/ethnicity categories include: Non-Hispanic White; Black or Africa American; Asian, and Hispanic or Latino. In some counties there are no majority Black, Asian, or Hispanic census block groups.

Note: Not all counties or states have data that has been provided.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian	Hispanic or Latino
Garrett County, MD	5	No data	No data	No data
Maryland	25	3,950	No data	301
United States	405,649	217,305	1,960	105,380

#### Housing Costs - Cost Burden (30%)

This indicator reports the percentage of the households where housing costs are 30% or more of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels. Of the 12,425 total households in the report area, 2,862 or 23.03% of the population live in cost burdened households.

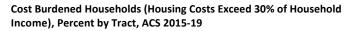
Report Area	Total Households	Cost Burdened Households (Housing Costs Exceed 30% of Income)	Cost Burdened Households, Percent	Percentage of Househo Housing Costs Exceed Income
Garrett County, MD	12,425	2,862	23.03%	
Maryland	2,205,204	691,259	31.35%	0% Garrett County (2
United States	120,756,048	37,249,895	30.85%	<ul> <li>Maryland (31.35)</li> <li>United States (30)</li> </ul>

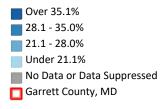
Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



View larger map

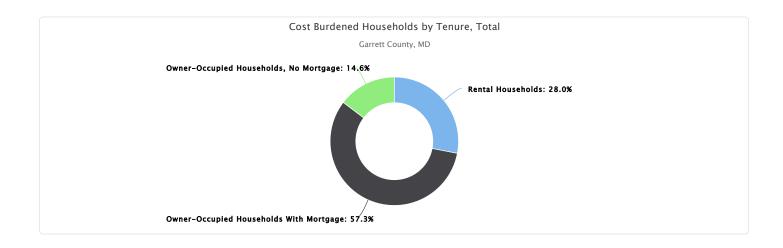




#### Cost Burdened Households by Tenure, Total

These data show the number of households that spend more than 30% of the household income on housing costs. In the report area, there were 2,862 cost burdened households according to the U.S. Census Bureau American Community Survey (ACS) 2015-2019 5-year estimates. The data for this indicator is only reported for households where household housing costs and income earned was identified in the American Community Survey.

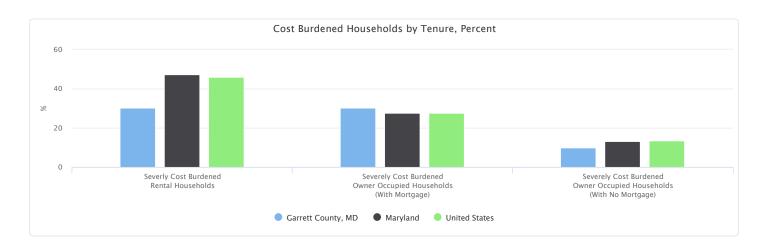
Report Area	Cost Burdened Households	Cost Burdened Rental Households	Cost Burdened Owner Occupied Households (With Mortgage)	Cost Burdened Owner Occupied Households (With No Mortgage)
Garrett County, MD	2,862	802	1,641	419
Maryland	691,259	343,994	294,770	52,495
United States	37,249,895	20,002,945	13,400,012	3,846,938



#### Cost Burdened Households by Tenure, Percent

These data show the percentage of households by tenure that are cost burdened. Cost burdened rental households (those that spent more than 30% of the household income on rental costs) represented 30.22% of all of the rental households in the report area, according to the U.S. Census Bureau American Community Survey (ACS) 2015-2019 5-year estimates. The data for this indicator is only reported for households where tenure, household housing costs, and income earned was identified in the American Community Survey.

Report Area	Rental Households	Percentage of Rental Households that are Cost Burdened	Owner Occupied Households (With Mortgage)	Percentage of Owner Occupied Households w/ Mortgages that are Cost Burdened	Owner Occupied Households (No Mortgage)	Percentage of Owner Occupied Households w/o Mortgages that are Cost Burdened
Garrett County, MD	2,654	30.22%	5,464	30.03%	4,307	9.73%
Maryland	730,055	47.12%	1,075,641	27.40%	399,508	13.14%
United States	43,481,667	46.00%	48,416,627	27.68%	28,857,754	13.33%



#### **Housing Quality - Substandard Housing**

This indicator reports the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%. Selected conditions provide information in assessing the quality of the

housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard. Of the 12,425 total occupied housing units in the report area, 2,954 or 23.77% have one or more substandard conditions.

Report Area	Total Occupied Housing Units	Occupied Housing Units with One or More Substandard Conditions	Occupied Housing Units with One or More Substandard Conditions, Percent	Occupied Housing Units with One or More Substandard Conditions, Percent
Garrett County, MD	12,425	2,954	23.77%	0% 50%
Maryland	2,205,204	694,315	31.49%	<ul> <li>Garrett County (23.77%)</li> <li>Maryland (31.49%)</li> </ul>
United States	120,756,048	38,530,862	31.91%	United States (31.91%)

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



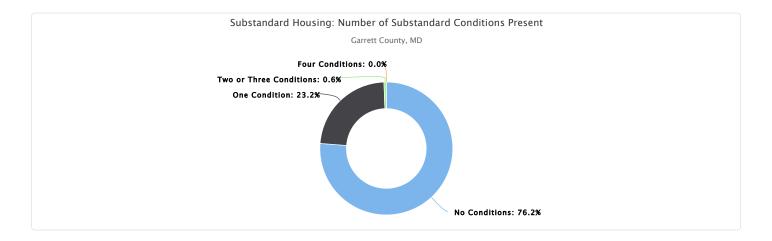
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#### Substandard Housing Units, Percent of Total by Tract, ACS 2015-19



#### Substandard Housing: Number of Substandard Conditions Present

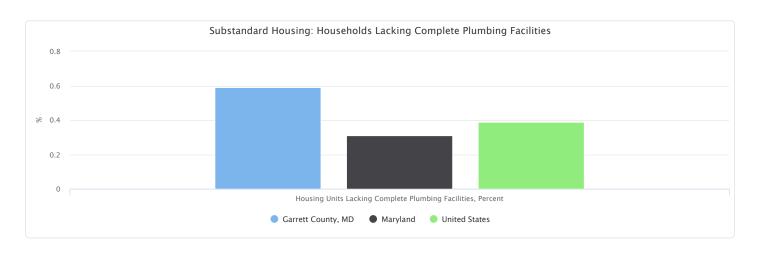
Report Area	No Conditions	One Condition	Two or Three Conditions	Four Conditions
Garrett County, MD	76.23%	23.22%	0.56%	0.00%
Maryland	68.51%	30.20%	1.29%	0.00%
United States	68.09%	30.03%	1.87%	0.01%



#### Substandard Housing: Households Lacking Complete Plumbing Facilities

Complete plumbing facilities include: (a) hot and cold running water, (b) a flush toilet, and (c) a bathtub or shower. All three facilities must be located inside the house, apartment, or mobile home, but not necessarily in the same room. Housing units are classified as lacking complete plumbing facilities when any of the three facilities is not present.

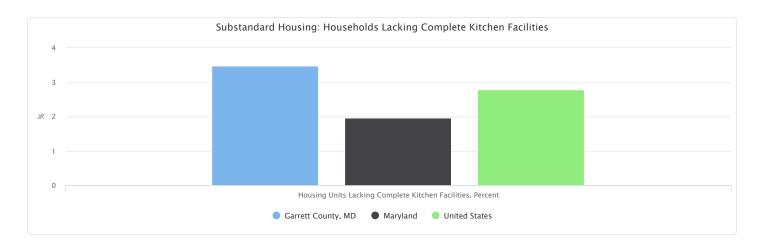
Report Area	Occupied Housing Units	Housing Units Lacking Complete Plumbing Facilities	Housing Units Lacking Complete Plumbing Facilities, Percent
Garrett County, MD	12,425	73	0.59%
Maryland	2,205,204	6,767	0.31%
United States	120,756,048	468,497	0.39%



#### Substandard Housing: Households Lacking Complete Kitchen Facilities

A unit has complete kitchen facilities when it has all three of the following facilities: (a) a sink with a faucet, (b) a stove or range, and (c) a refrigerator. All kitchen facilities must be located in the house, apartment, or mobile home, but they need not be in the same room. A housing unit having only a microwave or portable heating equipment such as a hot plate or camping stove should not be considered as having complete kitchen facilities. An icebox is not considered to be a refrigerator.

Report Area	Occupied Housing Units	Housing Units Lacking Complete Kitchen Facilities	Housing Units Lacking Complete Kitchen Facilities, Percent
Garrett County, MD	19,338	671	3.47%
Maryland	2,448,422	48,250	1.97%
United States	137,428,986	3,840,988	2.79%

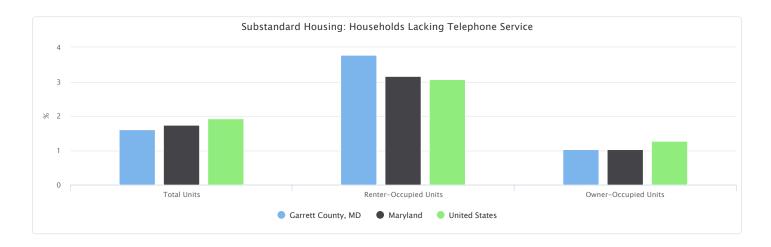


#### Substandard Housing: Households Lacking Telephone Service

A telephone must be in working order and service available in the house, apartment, or mobile home that allows the

respondent to both make and receive calls. Households that have cell-phones (no land-line) are counted as having telephone service available. Households whose service has been discontinued for nonpayment or other reasons are not counted as having telephone service available.

Report Area	Housing Units Lacking Telephone Service	Housing Units Lacking Telephone Service	Owner-Occupied Units Lacking Telephone Service	Owner-Occupied Units Lacking Telephone Service	Renter-Occupied Units Lacking Telephone Service	Renter-Occupied Units Lacking Telephone Service
Garrett County, MD	200	1.61%	100	1.02%	100	3.77%
Maryland	38,165	1.73%	15,134	1.03%	23,031	3.15%
United States	2,317,813	1.92%	987,063	1.28%	1,330,750	3.06%



#### **Housing Stock - Age**

This indicator reports, for a given geographic area, the median year in which all housing units (vacant and occupied) were first constructed. The year the structure was built provides information on the age of housing units. These data help identify new housing construction and measures the disappearance of old housing from the inventory, when used in combination with data from previous years. This data also serves to aid in the development of formulas to determine substandard housing and provide assistance in forecasting future services, such as energy consumption and fire protection. There are a total 19,338 housing units in the report area, and the median year built is 1982.

Report Area	Total Housing Units	Median Year Structures Built
Garrett County, MD	19,338	1982
Maryland	2,448,422	1977
United States	137,428,986	1978

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



☑ View larger map



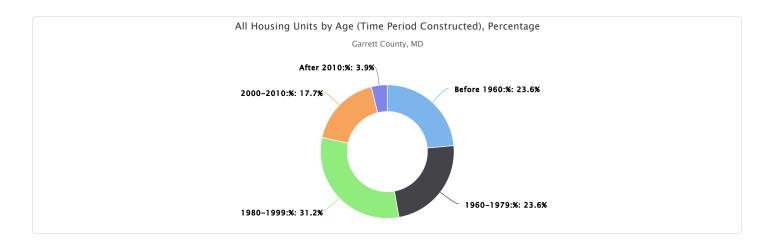
Newer than 1985
 1976 - 1985
 1966 - 1975
 Older than 1966
 No Data or Data Suppressed
 Garrett County, MD

### All Housing Units by Age (Time Period Constructed), Total

Report Area	Before 1960	1960-1979	1980-1999	2000-2010	After 2010
Garrett County, MD	4,562	4,567	6,035	3,428	746
Maryland	695,480	627,547	726,650	279,681	119,064
United States	38,219,876	35,404,384	37,527,914	19,186,932	7,089,880

### All Housing Units by Age (Time Period Constructed), Percentage

Report Area	Before 1960	1960-1979	1980-1999	2000-2010	After 2010
Garrett County, MD	23.59%	23.62%	31.21%	17.73%	3.86%
Maryland	28.41%	25.63%	29.68%	11.42%	4.86%
United States	27.81%	25.76%	27.31%	13.96%	5.16%

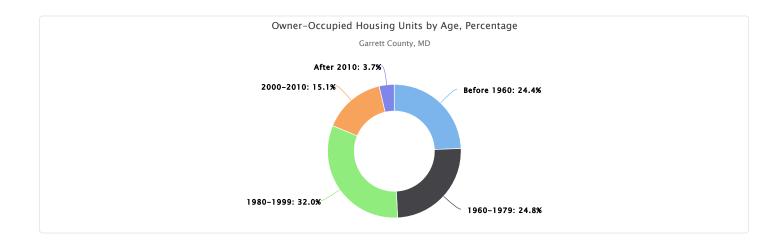


## Owner-Occupied Housing Units by Age, Total

Report Area	Before 1960	1960-1979	1980-1999	2000-2010	After 2010
Garrett County, MD	2,381	2,427	3,131	1,475	357
Maryland	404,336	352,267	467,245	185,869	65,432
United States	20,814,679	18,958,153	21,451,529	12,189,768	3,860,252

## Owner-Occupied Housing Units by Age, Percentage

Report Area	Before 1960	1960-1979	1980-1999	2000-2010	After 2010
Garrett County, MD	24.37%	24.84%	32.04%	15.10%	3.65%
Maryland	27.41%	23.88%	31.67%	12.60%	4.44%
United States	26.94%	24.53%	27.76%	15.77%	5.00%

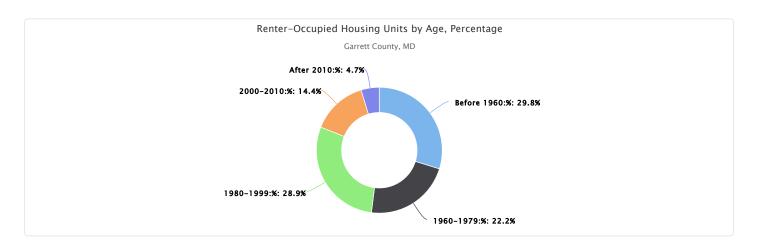


## Renter-Occupied Housing Units by Age, Total

Report Area	Before 1960	1960-1979	1980-1999	2000-2010	After 2010
Garrett County, MD	791	4,567	768	381	124
Maryland	194,830	627,547	203,906	70,214	44,962
United States	12,345,064	35,404,384	11,688,214	4,823,321	2,441,519

#### Renter-Occupied Housing Units by Age, Percentage

Report Area	Before 1960	1960-1979	1980-1999	2000-2010	After 2010
Garrett County, MD	29.80%	22.23%	28.94%	14.36%	4.67%
Maryland	26.69%	29.61%	27.93%	9.62%	6.16%
United States	28.39%	28.02%	26.88%	11.09%	5.62%



# Other Social & Economic Factors

Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

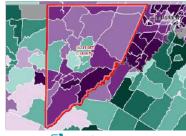
#### **Area Deprivation Index**

This indicator reports the average (population weighted) Area Deprivation Index (ADI) for the selected area. The Area

Deprivation Index ranks neighborhoods and communities relative to all neighborhoods across the nation (National Percentile) or relative to other neighborhoods within just one state (State Percentile). The ADI is calculated based on 17 measures related to four primary domains (Education; Income & Employment; Housing; and Household Characteristics). The overall scores are measured on a scale of 1 to 100 where 1 indicates the lowest level of deprivation (least disadvantaged) and 100 is the highest level of deprivation (most disadvantaged).

Report Area	Total Population	State Percentile	National Percentile	Area Deprivation Ir (Average
Garrett County, MD	29,235	80	56	
Maryland	5,908,275	No data	32	
United States	320,934,417	No data	No data	0
lote: This indicator is compared to the state avera	age.			Garrett Count

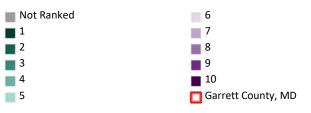
Data Source: University of Wisconsin-Madison School of Medicine and Public Health, Neighborhood Atlas. 2021. Source geography: Block Group



🕑 View larger map

Area Deprivation Index (2019), State Decile by Block Group, Neighborhood Atlas 2021

Maryland (32)
 United States (No data)



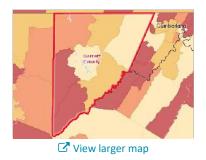
#### Households with No Motor Vehicle

This indicator reports the number and percentage of households with no motor vehicle based on the latest 5-year American Community Survey estimates. Of the 12,425 total households in the report area, 840 or 6.76% are without a motor vehicle.

Report Area	Total Occupied Households	Households with No Motor Vehicle	Households with No Motor Vehicle, Percent	Percentage of Households with No Motor Vehicle
	nousellolus	venicle	reitellt	
Garrett County, MD	12,425	840	6.76%	
Maryland	2,205,204	197,611	8.96%	0% 20%
United States	120,756,048	10,395,713	8.61%	<ul> <li>Garrett County (6.76%)</li> <li>Maryland (8.96%)</li> <li>United States (8.61%)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract

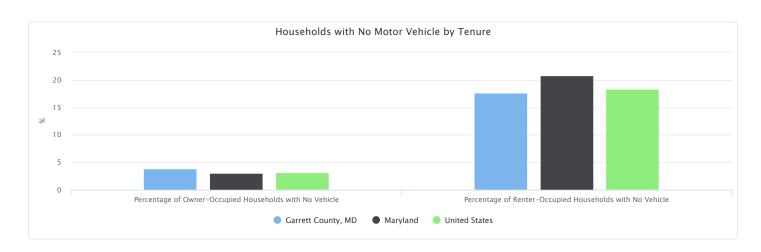


#### Households with No Vehicle, Percent by Tract, ACS 2015-19



#### Households with No Motor Vehicle by Tenure

Report Area	Owner-Occupied Households	Owner-Occupied Households, Percent	Renter-Occupied Households	Renter-Occupied Households, Percent
Garrett County, MD	372	3.81%	468	17.63%
Maryland	45,485	3.08%	152,126	20.84%
United States	2,414,113	3.12%	7,981,600	18.36%



#### **Insurance - Uninsured Population (ACS)**

The lack of health insurance is considered a key driver of health status.

In the report area 6.96% of the total civilian non-institutionalized population are without health insurance coverage. The rate of uninsured persons in the report area is greater than the state average of 6.07%. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

Report Area	Total Population (For Whom Insurance Status is Determined)	Uninsured Population	Uninsured Population, Percent	Uninsured Population, Percent		
Garrett County, MD	28,751	2,000	6.96%	0% 25%		
Maryland	5,920,779	359,135	6.07%	Maryland (6.07%)		
United States	319,706,872	28,248,613	8.84%	United States (8.84%)		

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract



☑ View larger map

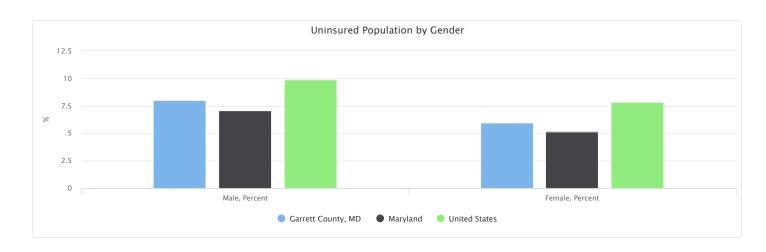
#### Uninsured Population, Percent by Tract, ACS 2015-19



## Uninsured Population by Gender

#### This indicator reports the uninsured population by gender.

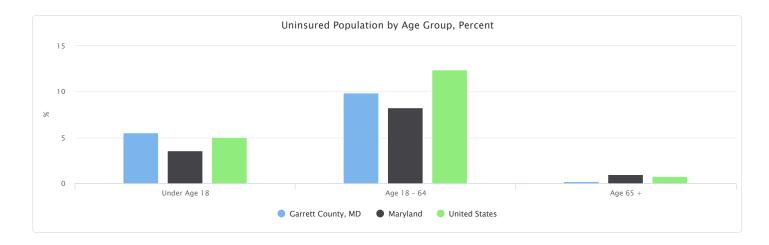
Report Area	Male	Female	Male, Percent	Female, Percent
Garrett County, MD	1,135	865	7.98%	5.96%
Maryland	200,936	158,199	7.06%	5.15%
United States	15,420,135	12,828,478	9.87%	7.85%



## Uninsured Population by Age Group, Percent

This indicator reports the percentage of uninsured population by age group.

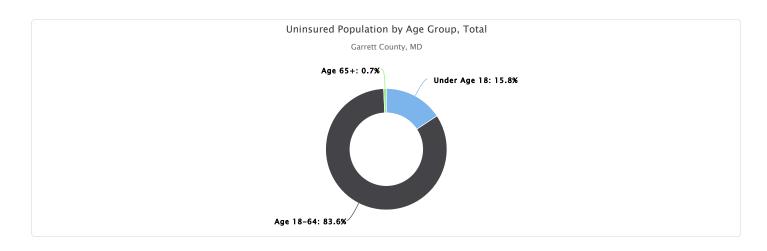
Report Area	Under Age 18	Age 18 - 64	Age 65 +
Garrett County, MD	5.51%	9.91%	0.23%
Maryland	3.55%	8.28%	1.00%
United States	5.08%	12.42%	0.79%



## Uninsured Population by Age Group, Total

This indicator reports the total uninsured population by age group.

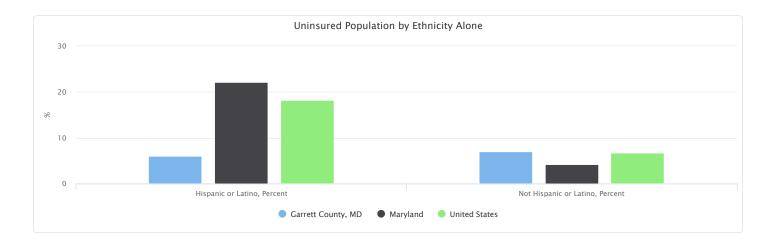
Report Area	Under Age 18	Age 18-64	Age 65+
Garrett County, MD	315	1,671	14
Maryland	50,281	300,047	8,807
United States	3,945,906	23,910,236	392,471



## Uninsured Population by Ethnicity Alone

This indicator reports the uninsured population by ethnicity alone.

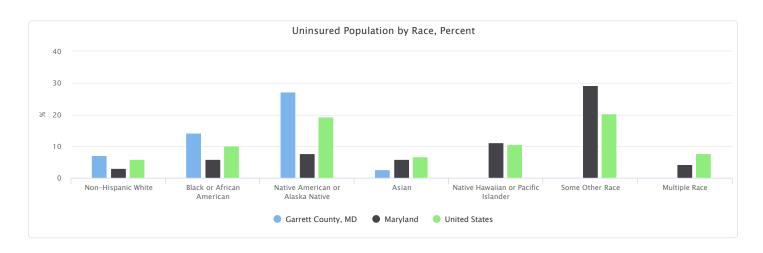
Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Garrett County, MD	19	1,981	6.03%	6.97%
Maryland	132,410	226,725	22.08%	4.26%
United States	10,515,589	17,733,024	18.22%	6.77%



### Uninsured Population by Race, Percent

This indicator reports the percentage of uninsured population by race alone.

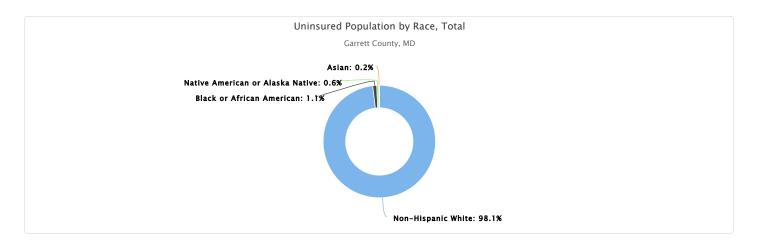
Report Area	Non-Hispanic White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	7.01%	14.29%	27.27%	2.54%	0.00%	0.00%	0.00%
Maryland	3.10%	5.97%	7.67%	5.87%	11.16%	29.34%	4.26%
United States	5.94%	10.07%	19.23%	6.73%	10.63%	20.38%	7.67%



## Uninsured Population by Race, Total

This indicator reports the total uninsured population by race alone.

Report Area	Non-Hispanic White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Garrett County, MD	1,952	22	12	3	0	0	0
Maryland	93,396	105,092	1,251	22,049	313	79,478	8,670
United States	11,541,949	4,024,678	515,950	1,200,568	62,249	3,230,689	813,166



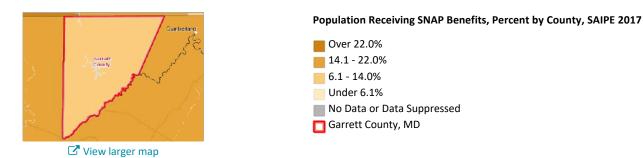
#### **SNAP Benefits - Population Receiving SNAP (SAIPE)**

The Supplemental Nutrition Assistance Program, or SNAP, is a federal program that provides nutrition benefits to low-income individuals and families that are used at stores to purchase food. This indicator reports the average percentage of the population receiving SNAP benefits during the month of July during the most recent report year.

Report Area	Total Population	Population Receiving SNAP Benefits	Population Receiving SNAP Benefits, Percent	Percentage of Total Populatio Receiving SNAP Benefits
Garrett County, MD	29,261.00	3,961	13.5%	
Maryland	6,024,891.00	654,256	10.9%	0% 25% Garrett County (13.5%)
United States	325,147,121.00	40,771,688	12.5%	<ul> <li>Maryland (10.9%)</li> <li>United States (12.5%)</li> </ul>

Note: This indicator is compared to the state average.

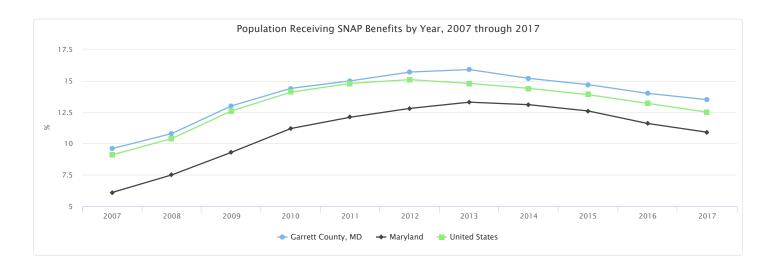
Data Source: US Census Bureau, Small Area Income and Poverty Estimates. 2017. Source geography: County



# Population Receiving SNAP Benefits by Year, 2007 through 2017

The table below reports local, state, and National trends in SNAP participation rates.

Report Area	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Garrett County, MD	9.6%	10.8%	13.0%	14.4%	15.0%	15.7%	15.9%	15.2%	14.7%	14.0%	13.5%
Maryland	6.1%	7.5%	9.3%	11.2%	12.1%	12.8%	13.3%	13.1%	12.6%	11.6%	10.9%
United States	9.1%	10.4%	12.6%	14.1%	14.8%	15.1%	14.8%	14.4%	13.9%	13.2%	12.5%



#### **Social Vulnerability Index**

The degree to which a community exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowded households, may affect that community's ability to prevent human suffering and financial loss in the event of disaster. These factors describe a community's social vulnerability.

The social vulnerability index is a measure of the degree of social vulnerability in counties and neighborhoods across the United States, where a higher score indicates higher vulnerability. The report area has a social vulnerability index score of 0.18, which is which is less than the state average of 0.39.

Report Area	Total Population	Socioeconomic Theme Score	Household Composition Theme Score	Minority Status Theme Score	Housing & Transportation Theme Score	Social Vulnerability Index Score
Garrett County, MD	29,376	0.26	0.33	0.07	0.36	0.18
Maryland	6,003,435	0.24	0.18	0.82	0.55	0.39
United States	322,903,030	0.30	0.32	0.76	0.62	0.40

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC - GRASP. 2018. Source geography: Tract



#### Social Vulnerability Index by Tract, CDC 2018

0.81 - 1.00 (Highest Vulnerability)
 0.61 - 0.80
 0.41 - 0.60
 0.21 - 0.40
 0.00 - 0.20 (Lowest Vulnerability)
 No Data or Data Suppressed
 Garrett County, MD

#### **Teen Births**

This indicator reports the seven-year average number of births per 1,000 female population age 15-19. Data were from the National Center for Health Statistics - Natality files (2013-2019) and are used for the 2021 County Health Rankings.

In the report area, of the 5,368 total female population age 15-19, the teen birth rate is 23.1 per 1,000, which is greater than the state's teen birth rate of 16.1.

Note: Data are suppressed for counties with fewer than 10 teen births in the time frame.

Report Area	Female Population Age 15-19	Teen Births, Rate per 1,000 Female Population Age 15-19	Teen birth rate per 1,000 female population, ages 15-19
Garrett County, MD	5,368	23.1	
Maryland	2,640,652	16.1	
United States	144,319,360	20.9	<ul> <li>Garrett County (23.1)</li> <li>Maryland (16.1)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via County Health Rankings. 2013-2019. Source geography: County



Teen Births, Rate Per 1,000 Live Births by County, CDC NVSS 2013-2019

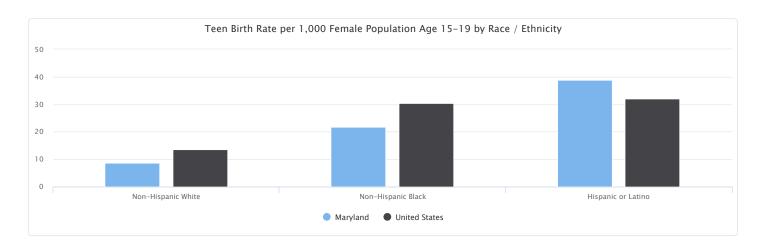
United States (20.9)



Teen Birth Rate per 1,000 Female Population Age 15-19 by Race / Ethnicity

This indicator reports the 2013-2019 seven-year average teen birth rate per 1,000 female population age 15-19 by race / ethnicity.

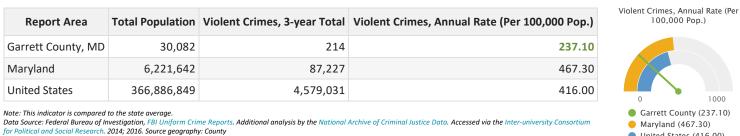
Report Area	Non-Hispanic White	Non-Hispanic Black	Hispanic or Latino	
Garrett County, MD	No data	No data	No data	
Maryland	8.7	21.7	38.7	
United States	13.6	30.3	32.1	



#### **Violent Crime - Total**

Violent crime includes homicide, rape, robbery, and aggravated assault.

Within the report area, the 3 year total of reported violent crimes was 214, which equates to an annual rate of 237.10 crimes per 100,000 people, lower than the statewide rate of 467.30.

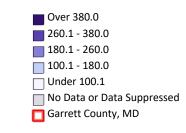


United States (416.00)



View larger map

Violent Crimes, All, Rate (Per 100,000 Pop.) by County, FBI UCR 2014; 2016



#### **Property Crime - Total**

This indicator reports the rate of property crime offenses reported by law enforcement per 100,000 residents. Property crimes include burglary, larceny-theft, motor vehicle theft, and arson. This indicator is relevant because it assesses community safety.

In the report area, 29,531 property crimes occurred in 2014 and 2016 (two years). The property crime rate of 417 per 100,000 residents is lower than the statewide rate of 145,136 per 100,000.

Note: Data are suppressed for counties if, for both years of available data, the population reported by agencies is less than 50% of the population reported in Census or less than 80% of agencies measuring crimes reported data.

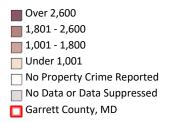
Report Area	Total Population	Property Crimes, Annual Average	Property Crimes, Annual Rate (Per 100,000 Pop.)
Garrett County, MD	29,531	417	1,412.10
aryland	5,996,420	145,136	2,420.40
nited States	321,015,117	7,915,583	2,466.10

Note: This indicator is compared to the state average.

Data Source: Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-university Consortium for Political and Social Research. 2014&2016. Source geography: County



Property Crimes, All, Rate (Per 100,000 Pop.) by County, FBI UCR 2014; 2016



#### **Voter Participation Rate**

This indicator reports the percentage of the adult population that voted in the national elections on November 2, 2020. Results are preliminary as of December 14, 2020. Voter participation rates are calculated as a percentage of the voting age population (age 18+) and not as a percentage of registered voters. In the 2020 election, of the report area's 23,632 voting age population, 15,611 or 66.1% have cast a vote.

Report Area	Total Citizens Age 18+	Total Votes Cast	Voter Participation Rate	V
arrett County, MD	23,632	15,611	66.1%	
aryland	4,280,946	3,037,030	70.9%	
nited States	230,428,731	158,433,557	68.8%	
States	, ,	158,433,557	68.8%	

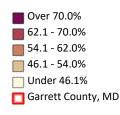
Note: This indicator is compared to the state average. Data Source: Townhall.com Election Results. 2016. Source geography: County



**View** larger map

Voter Turnout, Percent by County, Townhall.com 2016

🔴 Maryland (70.9%) United States (68.8%)



#### Young People Not in School and Not Working

This indicator reports the percentage of youth age 16-19 who are not currently enrolled in school and who are not employed. The report area has a total population of 1,403 between the ages, of which 97 are not in school and not employed.

Report Area	t Area Population Population Age 16-19 Age 16-19 and Not Emplo		Population Age 16-19 Not in School and Not Employed, Percent	Population Age 16-19 Not in School and Not Employed, Percent
Garrett County, MD	1,403	97	6.91%	
Maryland	305,616	18,288	5.98%	0% 25%
United States	17,025,696	1,124,551	6.61%	<ul> <li>Maryland (5.98%)</li> <li>United States (6.61%)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2015-2019. Source geography: Tract

## **Physical Environment**

A community's health also is affected by the physical environment. A safe, clean environment that provides access to healthy food and recreational opportunities is important to maintaining and improving community health.

#### Air & Water Quality - Particulate Matter 2.5

This indicator reports the percentage of days with particulate matter 2.5 levels above the National Ambient Air Quality Standard (35 micrograms per cubic meter) per year, calculated using data collected by monitoring stations and modeled to include counties where no monitoring stations occur. This indicator is relevant because poor air quality contributes to respiratory issues and overall poor health.

Report Area	Total Population (2010)	Average Daily Ambient Particulate Matter 2.5	Days Exceeding Emissions Standards	Days Exceeding Standards, Percent (Crude)	Days Exceeding Standards, Percent (Weighted)
Garrett County, MD	30,097	6.68	0	0.00	0.00%
Maryland	5,773,552	8.34	0	0.00	0.11%
United States	306,675,006	8.26	0	0	0.11%

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, CDC - National Environmental Public Health Tracking Network. 2016. Source geography: Tract

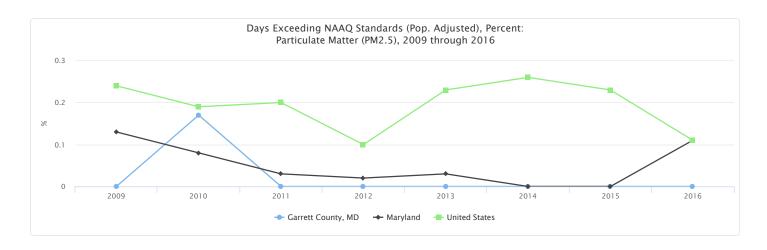


# Fine Particulate Matter Levels (PM 2.5), Percentage of Days Above NAAQ Standards by Tract, NEPHTN 2016



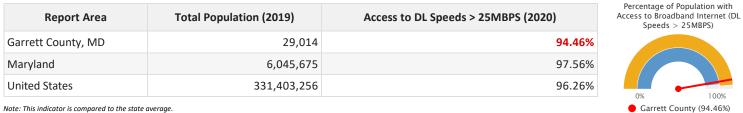
Days Exceeding NAAQ Standards (Pop. Adjusted), Percent: Particulate Matter (PM2.5), 2009 through 2016

Report Area	2009	2010	2011	2012	2013	2014	2015	2016
Garrett County, MD	0.00%	0.17%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Maryland	0.13%	0.08%	0.03%	0.02%	0.03%	0.00%	0.00%	0.11%
United States	0.24%	0.19%	0.20%	0.10%	0.23%	0.26%	0.23%	0.11%



#### **Built Environment - Broadband Access**

This indicator reports the percentage of population with access to high-speed internet. Data are based on the reported service area of providers offering download speeds of 25 MBPS or more and upload speeds of 3 MBPS or more. This data represent both wireline and fixed/terrestrial wireless internet providers. Cellular internet providers are not included.



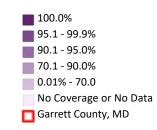
Note: This indicator is compared to the state average. Data Source: National Broadband Map. June 2020. Source aeoaraphy: Tract



☑ View larger map

Broadband Access, Pct. Population in a High-Speed Internet Service Area by Tract, FCC June 2020

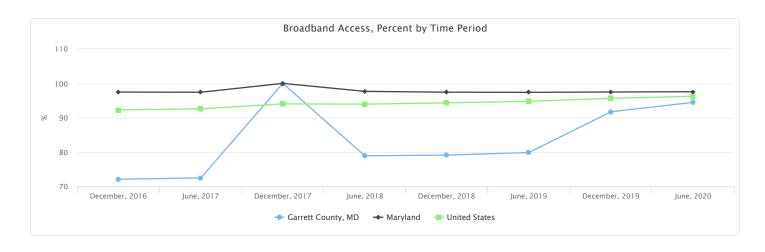
e Maryland (97.56%) United States (96.26%)



#### Broadband Access, Percent by Time Period

The table below displays temporal trends in high-speed internet availability as the percent of the population with access to broadband in the indicated area.

Report Area	December, 2016	June, 2017	December, 2017	June, 2018	December, 2018	June, 2019	December, 2019	June, 2020
Garrett County, MD	72.11%	72.48%	100.00%	78.92%	79.12%	79.88%	91.74%	94.46%
Maryland	97.48%	97.42%	100.00%	97.69%	97.43%	97.41%	97.49%	97.56%
United States	92.29%	92.59%	94.03%	93.96%	94.34%	94.78%	95.64%	96.26%



#### **Built Environment - Liquor Stores**

There are 6 establishments in the report area primarily engaged in retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor. The number of liquor stores per 100,000 population provides a measure of environmental influences on dietary behaviors and the accessibility of healthy foods. Note this data excludes establishments preparing and serving alcohol for consumption on premises (including bars and restaurants) or which sell alcohol as a secondary retail product (including gas stations and grocery stores).

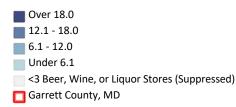
Report Area	Total Population (2010)	Number of Establishments	Establishments, Rate per 100,000 Population	Liquor Stores, Rate per 100,000 Population
Garrett County, MD	30,097	6	19.94	
Maryland	5,773,552	1,218	21.10	0 30 Garrett County (19.94)
United States	308,745,538	34,576	11.20	<ul> <li>Maryland (21.10)</li> <li>United States (11.20)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2019. Source geography: County

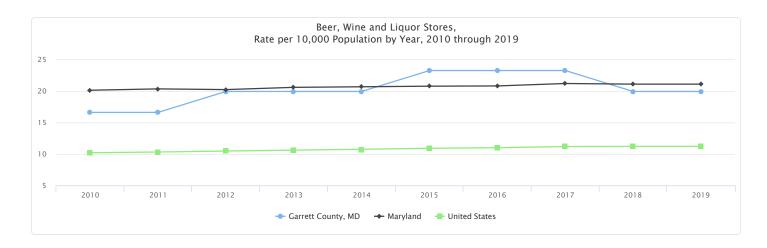


# Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by County, CBP 2019



Beer, Wine and Liquor Stores, Rate per 10,000 Population by Year, 2010 through 2019

Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Garrett County, MD	16.61	16.61	19.94	19.94	19.94	23.26	23.26	23.26	19.94	19.94
Maryland	20.13	20.35	20.23	20.59	20.68	20.78	20.82	21.2	21.1	21.1
United States	10.2	10.32	10.47	10.61	10.75	10.91	11	11.18	11.2	11.2



#### **Built Environment - Recreation and Fitness Facility Access**

Access to recreation and fitness facilities encourages physical activity and other healthy behaviors. The report area includes 3 establishments primarily engaged in operating fitness and recreational sports facilities featuring exercise and other active physical fitness conditioning or recreational sports activities, such as swimming, skating, or racquet sports.

Report Area	Total Population (2010)	Number of Establishments	Establishments, Rate per 100,000 Population	Recreation and Fitness Facilities, Rate per 100,000 Population
Garrett County, MD	30,097	3	9.97	
Maryland	5,773,552	713	12.35	0 20 Garrett County (9.97)
United States	308,745,538	37,758	12.23	<ul> <li>Maryland (12.35)</li> <li>United States (12.23)</li> </ul>

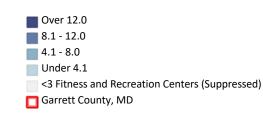
Note: This indicator is compared to the state average.

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2019. Source geography: County



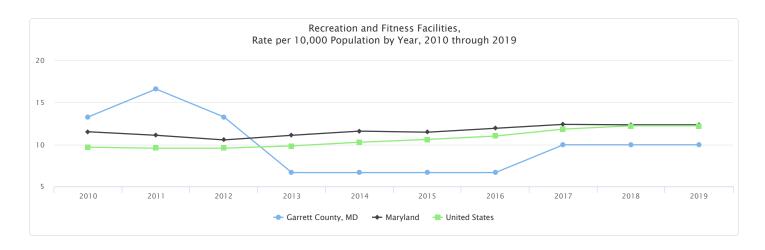
☑ View larger map

# Recreation and Fitness Facilities, Rate (Per 100,000 Pop.) by County, CBP 2019



Recreation and Fitness Facilities, Rate per 10,000 Population by Year, 2010 through 2019

Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Garrett County, MD	13.29	16.61	13.29	6.65	6.65	6.65	6.65	9.97	9.97	9.97
Maryland	11.52	11.1	10.55	11.1	11.6	11.47	11.93	12.4	12.35	12.35
United States	9.68	9.56	9.56	9.84	10.27	10.6	11.01	11.83	12.23	12.23



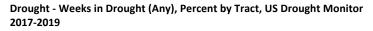
#### **Climate & Health - Drought Severity**

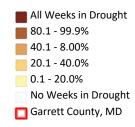
Drought is defined as a moisture deficit bad enough to have social, environmental or economic effects. The Drought Monitor map identifies areas of drought and labels them by intensity<sup>1</sup>. D1 is the least intense level and D4 the most intense. In the report area, 0.00% of weeks during the 2017-2019 period were spent in drought (any level). An additional 3.62% of weeks were categorized spent in "abnormally dry conditions" (D0) indicating that drought could occur, or that the area is recovering from drought but are not yet back to normal.

Report Area	Time Period	Weeks in D0 (Abnormally Dry), Percent	Weeks in D1 (Moderate Drought), Percent	Weeks in D2 (Severe Drought), Percent	Weeks in D3 (Extreme Drought), Percent	Weeks in D4 (Exceptional Drought), Percent	Weeks in Drought (Any), Percent	Weeks in Drought (Any),
Garrett County, MD	2017- 2019	3.62%	0.00%	0.00%	0.00%	0.00%	0.00%	<ul> <li>Garrett County (0</li> <li>Maryland (16.02)</li> <li>United States (13)</li> </ul>
Maryland	2017- 2019	15.11%	14.18%	1.85%	0.00%	0.00%	16.02%	
United States	2017- 2019	16.22%	7.81%	4.49%	0.83%	0.08%	13.21%	

Note: This indicator is compared to the state average. Data Source: US Drought Monitor. 2017-2019. Source geography: Tract



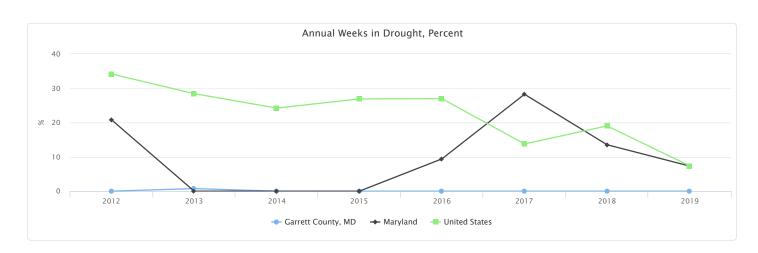




## Annual Weeks in Drought, Percent

Data reported is the population-weighted percentage of weeks in drought for each calendar year, beginning January 1, 2012.

Report Area	2012	2013	2014	2015	2016	2017	2018	2019
Garrett County, MD	0.00%	0.75%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Maryland	20.77%	0.00%	0.00%	0.00%	9.40%	28.20%	13.52%	7.31%
United States	34.11%	28.40%	24.18%	26.85%	26.93%	13.76%	18.99%	7.36%



## **Food Environment - Fast Food Restaurants**

This indicator reports the number of fast food restaurants per 100,000 population. The prevalence of fast food restaurants provides a measure of both access to healthy food and environmental influences on dietary behaviors. Fast food restaurants are defined as limited-service establishments primarily engaged in providing food services (except snack and nonalcoholic beverage bars) where patrons generally order or select items and pay before eating.

Report Area	Total Population (2010)	Number of Establishments	Establishments, Rate per 100,000 Population	Fast Food Restaurants, Rat 100,000 Population
Garrett County, MD	30,097	28	93.03	
Maryland	5,773,552	5,424	93.95	0 10 Garrett County (93.0
United States	308,745,538	253,841	82.22	<ul> <li>Maryland (93.95)</li> <li>United States (82.22)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, County Business Patterns, Additional data analysis by CARES, 2019, Source aeoaraphy: County



**View** larger map

#### Fast Food Restaurants, Rate (Per 100,000 Pop.) by County, CBP 2019



Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Garrett County, MD	63.13	63.13	76.42	76.42	83.06	79.74	86.39	99.68	93.03	93.03
Maryland	81.08	81.51	85.77	86.64	84.8	86.6	88.33	93.67	93.95	93.95
United States	69.14	70.04	72.84	73.68	74.07	75.59	77.06	81.3	82.22	82.22



#### Food Environment - Food Desert Census Tracts

This indicator reports the number of neighborhoods in the report area that are within food deserts. The USDA Food Access Research Atlas defines a food desert as any neighborhood that lacks healthy food sources due to income level, distance to supermarkets, or vehicle access. The report area has a population of 6,186 living in food deserts and a total of 1 census tracts classified as food deserts by the USDA.

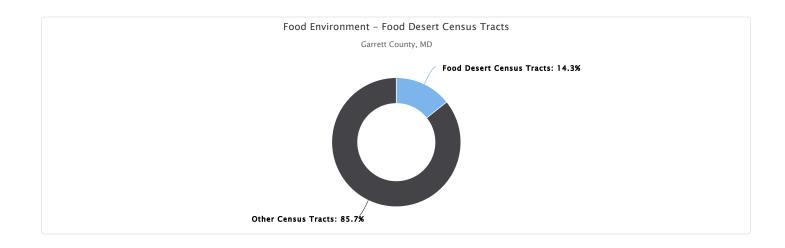
Report Area	Total Population (2010)	Food Desert Census Tracts	Other Census Tracts	Food Desert Population	Other Population
Garrett County, MD	30,097	1	6	6,186	23,911
Maryland	5,773,552	131	1,259	552,017	1,646,357
United States	308,745,538	9,293	63,238	39,074,974	81,328,997

Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2019. Source geography: Tract



#### Food Desert Census Tracts, 1 Mi. / 10 Mi. by Tract, USDA - FARA 2019

Food Desert
Not a Food Desert
No Data
Garrett County, MD



#### **Food Environment - Grocery Stores**

Healthy dietary behaviors are supported by access to healthy foods, and Grocery Stores are a major provider of these foods. There are 8 grocery establishments in the report area, a rate of 26.58 per 100,000 population. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Delicatessen-type establishments are also included. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores, are excluded.

Report Area	Total Population (2010)	Number of Establishments	Establishments, Rate per 100,000 Population	Grocery Stores, Rate per 100,000 Population
Garrett County, MD	30,097	8	26.58	
Maryland	5,773,552	1,227	21.25	0 30 Garrett County (26.58)
United States	308,745,538	64,132	20.77	<ul> <li>Maryland (21.25)</li> <li>United States (20.77)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2019. Source geography: County



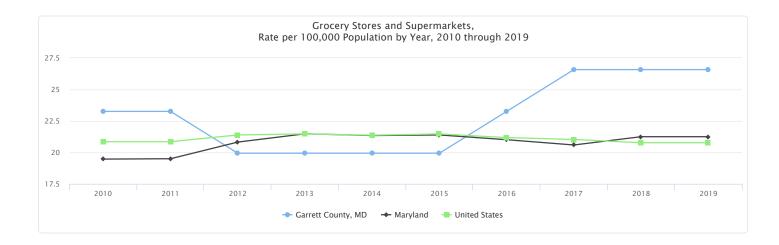
☑ View larger map

Grocery Stores and Supermarkets, Rate (Per 100,000 Pop.) by County, CBP 2019



#### Grocery Stores and Supermarkets, Rate per 100,000 Population by Year, 2010 through 2019

Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Garrett County, MD	23.26	23.26	19.94	19.94	19.94	19.94	23.26	26.58	26.58	26.58
Maryland	19.47	19.5	20.82	21.48	21.34	21.39	21.01	20.59	21.25	21.25
United States	20.85	20.85	21.39	21.47	21.37	21.47	21.18	21.03	20.77	20.77



#### Food Environment - SNAP-Authorized Food Stores

This indicator reports the number of SNAP-authorized food stores as a rate per 10,000 population. SNAP-authorized stores include grocery stores as well as supercenters, specialty food stores, and convenience stores that are authorized to accept SNAP (Supplemental Nutrition Assistance Program) benefits. The report area contains 38 total SNAP-Authorized Retailers with a rate of 12.63.

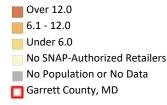
Report Area	Total Population (2010)	Total SNAP-Authorized Retailers	SNAP-Authorized Retailers, Rate per 10,000 Population	SNAP-Authorized Retailers, Rate (Per 10,000 Population)
Garrett County, MD	30,097	38	12.63	
Maryland	5,773,552	3,469	6.01	0 60 Garrett County (12.63)
United States	312,383,875	242,299	7.76	<ul> <li>Maryland (6.01)</li> <li>United States (7.76)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Additional data analysis by CARES. 2019. Source geography: Tract



SNAP-Authorized Retailers Access, Rate per 10,000 Population by Tract, USDA 2019



## **Clinical Care and Prevention**

A lack of access to care presents barriers to good health. Supply of facilities and physicians, the rate of uninsurance, financial hardship, transportation barriers, cultural competency, and coverage limitations affect access.

Rates of morbidity, mortality, and emergency hospitalizations can be reduced if community residents access services such as health screenings, routine tests, and vaccinations. Prevention indicators can call attention to a lack of access or knowledge regarding one or more health issues and can inform program interventions.

#### Cancer Screening - Mammogram (Medicare)

This indicator reports the percentage of female Medicare beneficiaries age 35 and older who had a mammogram in most recent reporting year. The American Cancer Society recommends that women age 45 to 54 should get a mammogram every

year, and women age 55 and older should get a mammogram every other year. In the latest reporting period there were 7,169 Medicare beneficiaries in the report area, and 36% of female beneficiaries age 35 or older had a mammogram in the past year. The rate in the report area was higher than the state rate of 33% during the same time period.

Report Area	Medicare Beneficiaries	Female Beneficiaries with Recent Mammogram, Percent	Percentage of Female Medicare Beneficiaries Age 35+ with Recent Mammogram
Garrett County, MD	7,169	36%	
Maryland	1,036,816	33%	
United States	61,006,129	33%	0% 100%
Note: This indicator is compared to t Data Source: Centers for Medicare ar	he state average. nd Medicaid Services, Mapping Medicare Dispari	ities Tool. 2019. Source geography: County	<ul> <li>Garrett County, MD (36%)</li> <li>Maryland (33%)</li> </ul>



✓ View larger map

Mammogram, Medicare Beneficiaries, Percent of Medicare Beneficiaries by County, CMS 2019

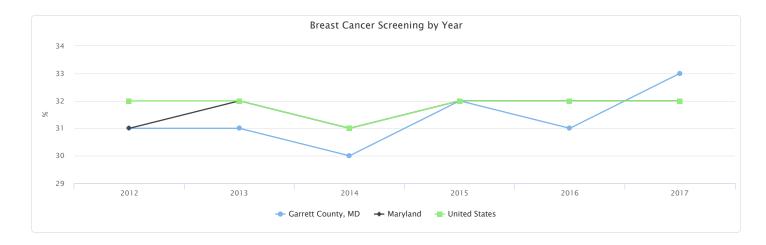
United States (33%)



#### Breast Cancer Screening by Year

The table and chart below display local, state, and national trends in annual breast exam rates among female Medicare beneficiaries age 35 and older.

Report Area	2012	2013	2014	2015	2016	2017
Garrett County, MD	31%	31%	30%	32%	31%	33%
Maryland	31%	32%	31%	32%	32%	32%
United States	32%	32%	31%	32%	32%	32%



#### **Diabetes Management - Hemoglobin A1c Test**

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also

highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Report Area	Medicare Enrollees with Diabetes	Medicare Enrollees with Diabetes with Annual Exam	Medicare Enrollees with Diabetes with Annual Exam, Percent	Percentage of Medicare Beneficiaries with Diabetes with Annual A1C Test
Garrett County, MD	737	673	91.32%	
Maryland	22,229	19,879	89.43%	0% 100% Garrett County (91.32%)
United States	6,912,882	6,035,518	87.31%	<ul> <li>Maryland (89.43%)</li> <li>United States (87.31%)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2017. Source geography: County



View larger map

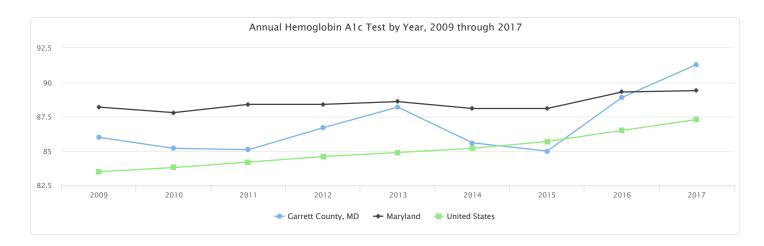
# Patients with Annual HA1C Test (Diabetes), Percent of Medicare Enrollees with Diabetes by County, Dartmouth Atlas 2015



#### Annual Hemoglobin A1c Test by Year, 2009 through 2017

Percent of Medicare Beneficiaries with Diabetes with Annual Hemoglobin A1c Test

Report Area	2009	2010	2011	2012	2013	2014	2015	2016	2017
Garrett County, MD	86.0	85.2	85.1	86.7	88.2	85.6	85.0	88.9	91.3
Maryland	88.2	87.8	88.4	88.4	88.6	88.1	88.1	89.3	89.4
United States	83.5	83.8	84.2	84.6	84.9	85.2	85.7	86.5	87.3



#### **Hospitalizations - Preventable Conditions**

This indicator reports the preventable hospitalization rate among Medicare beneficiaries for the latest reporting period. Preventable hospitalizations include hospital admissions for one or more of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection. Rates are presented per 100,000 beneficiaries. In the latest reporting period there were 7,169 Medicare beneficiaries in the report area. The preventable hospitalization rate was 3,228. The rate in the report area was lower than the state rate of 3,568 during the same time period.

Report Area	Medicare Beneficiaries	Preventable Hospitalizations, Rate per 100,000 Beneficiaries	Preventable Hospital Events, Rate per 100,000 Beneficiaries
Garrett County, MD	7,169	3,228	
Maryland	1,036,816	3,568	
United States	61,006,129	3,807	0 4000
Note: This indicator is compared to	the state average.		Garrett County (3,228)

Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool. 2019. Source geography: County



#### Preventable Hospitalization, Medicare Beneficiaries, Rate by County, CMS 2019

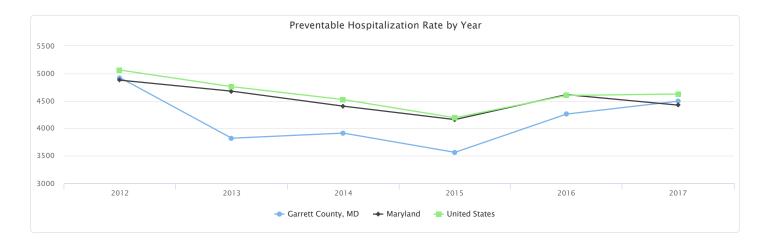
Marvland (3.568) United States (3,807)



#### Preventable Hospitalization Rate by Year

The table and chart below display local, state, and national trends in preventable hospitalization rates among Medicare beneficiaries.

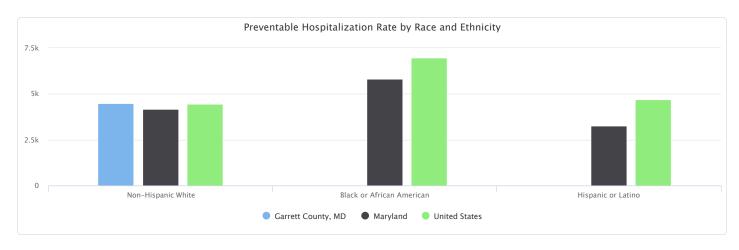
Report Area	2012	2013	2014	2015	2016	2017
Garrett County, MD	4,921	3,820	3,913	3,563	4,259	4,494
Maryland	4,876	4,676	4,403	4,159	4,613	4,422
United States	5,060	4,758	4,523	4,192	4,598	4,624



#### Preventable Hospitalization Rate by Race and Ethnicity

The table and chart below display local, state, and national trends in preventable hospitalization rates among Medicare beneficiaries for the latest report year (2017) by patient race and ethnicity.

Report Area	Non-Hispanic White	Black or African American	Hispanic or Latino	
Garrett County, MD	4,495	No data	No data	
Maryland	4,174	5,818	3,276	
United States	4,447	6,961	4,699	



# **Health Behaviors**

Health behaviors such as poor diet, a lack of exercise, and substance abuse contribute to poor health status.

#### Alcohol - Heavy Alcohol Consumption

In the report area, 4,716, or 16.17% adults self-report excessive drinking in the last 30 days, which is greater than the state rate of 15.41%. Data for this indicator were based on survey responses to the 2018 Behavioral Risk Factor Surveillance System (BRFSS) annual survey and are used for the 2021 County Health Rankings.

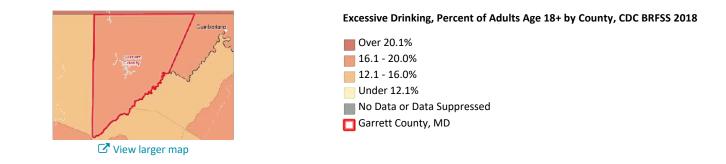
Excessive drinking is defined as the percentage of the population who report at least one binge drinking episode involving five or more drinks for men and four or more for women over the past 30 days, or heavy drinking involving more than two drinks per day for men and more than one per day for women, over the same time period. Alcohol use is a behavioral health issue that is also a risk factor for a number of negative health outcomes, including: physical injuries related to motor vehicle accidents, stroke, chronic diseases such as heart disease and cancer, and mental health conditions such as depression and suicide. There are a number of evidence-based interventions that may reduce excessive/binge drinking; examples include raising taxes on alcoholic beverages, restricting access to alcohol by limiting days and hours of retail sales, and screening and counseling for alcohol abuse (Centers for Disease Control and Prevention, Preventing Excessive Alcohol Use, 2020).

Report Area	Total Population (2018)	Adults Reporting Excessive Drinking	Percentage of Adults Reporting Excessive Drinking	Percenta Reporting
Garrett County, MD	29,163	4,716	16.17%	
Maryland	6,042,718	931,478	15.41%	0% Garre
United States	327,167,434	62,733,046	19.17%	<ul> <li>Maryl</li> <li>United</li> </ul>



Note: This indicator is compared to the state average

Data Source: University of Wisconsin Population Health Institute, County Health Rankings, 2018, Source geography: County



#### **Alcohol - Binge Drinking**

This indicator reports the percentage of adults age 18 and older who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days.

Within the report area there are 13.0% adults who reported having four or more drinks in the last month of the total population.

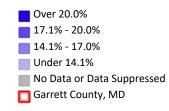
Report Area	Total Population (2018)	Percentage of Adults Binge Drinking in the Past 30 Days	Percentage of Adults Bin Drinking in the Past 30 D
Garrett County, MD	29,163	13.0%	
Maryland	6,042,718	14.4%	
United States	327,167,434	16.9%	0% 20
lote: This indicator is compared to t lata Source: Centers for Disease Con		lance System. Accessed via the 500 Cities Data Portal. 2018.	<ul> <li>Garrett County (13.0</li> <li>Maryland (14.4%)</li> </ul>



☑ View larger map

Binge Drinking, Percent of Adults Age 18+ by Tract, CDC BRFSS PLACES Project 2018

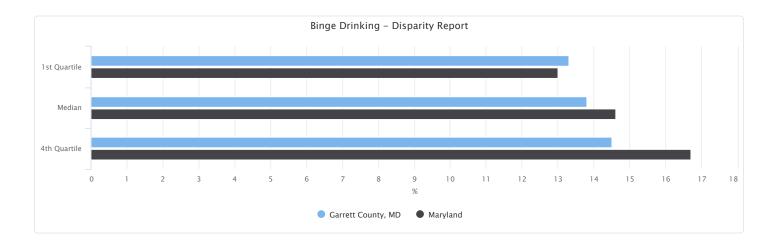
United States (16.9%)



#### Binge Drinking - Disparity Report

The table and chart below display the median and interquartile ranges for census tract values related to the indicator.

Report Area	1st Quartile	Median	4th Quartile
Garrett County, MD	13.30%	13.80%	14.50%
Maryland	13.00%	14.60%	16.70%



#### **Physical Inactivity**

Within the report area, 6,149 or 24.5% of adults aged 20 and older self-report no active leisure time, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

Report Area	Population Age 20+	Adults with No Leisure Time Physical Activity	Adults with No Leisure Time Physical Activity, Percent	Percentage of Adults with No Leisure-Time Physical Acitvity, 2017
Garrett County, MD	23,117	6,149	24.5%	
Maryland	4,524,687	990,879	21.4%	0% 50%
United States	243,068,284	55,261,407	22.1%	<ul> <li>Maryland (21.4%)</li> <li>United States (22.1%)</li> </ul>

Note: This indicator is compared to the state average

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2017. Source geography: County



☑ View larger map

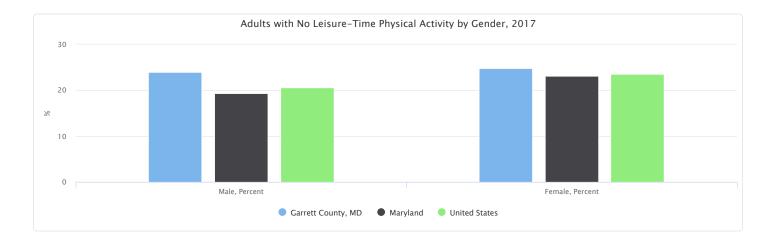
#### No Leisure-Time Physical Activity, Adults Age 20+, Percent by County, CDC NCCDPHP 2017

Over 29.0% 26.1 - 29.0% 23.1 - 26.0% Under 23.1% No Data or Data Suppressed 🗖 Garrett County, MD

Adults with No Leisure-Time Physical Activity by Gender, 2017

The table below displays national, state, and local variation in the percentage of adults reporting no leisure-time physical by gender.

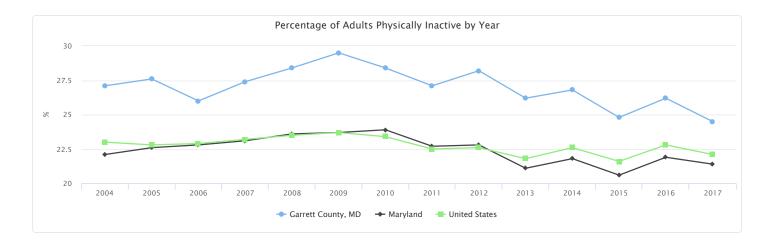
Report Area	Male	Male, Percent	Female	Female, Percent
Garrett County, MD	2,903	24.0%	3,246	24.8%
Maryland	425,184	19.4%	565,700	23.1%
United States	24,806,207	20.6%	30,455,202	23.5%



#### Percentage of Adults Physically Inactive by Year

The table below displays trends in the percentage of adults reporting no leisure-time physical activity for years 2004 through 2017.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Garrett County, MD	27.1%	27.6%	26.0%	27.4%	28.4%	29.5%	28.4%	27.1%	28.2%	26.2%	26.8%	24.8%	26.2%	24.5%
Maryland	22.1%	22.6%	22.8%	23.1%	23.6%	23.7%	23.9%	22.7%	22.8%	21.1%	21.8%	20.6%	21.9%	21.4%
United States	23.0%	22.8%	22.9%	23.2%	23.5%	23.7%	23.4%	22.5%	22.6%	21.8%	22.6%	21.6%	22.8%	22.1%



#### STI - Chlamydia Incidence

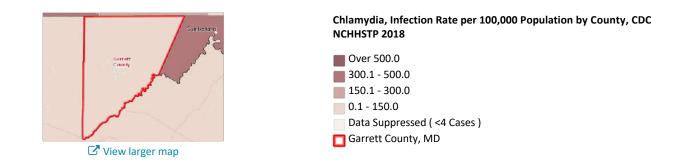
This indicator reports the number chlamydia cases occurring in the report area. Rates are presented per 100,000 population.

The number of cases are based on laboratory-confirmed diagnoses that occurred between January 1st and December 31st of the latest reporting year. These data are delivered to and analyzed by the CDC as part of the Nationally notifiable STD surveillance system.

Report Area	Total Population	Chlamydia Infections	Chlamydia Infections, Rate per 100,000 Pop.
Garrett County, MD	29,233	38	130.0
laryland	6,052,177	35,482	586.3
nited States	325,719,178	1,758,668	539.9

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2018. Source geography: County

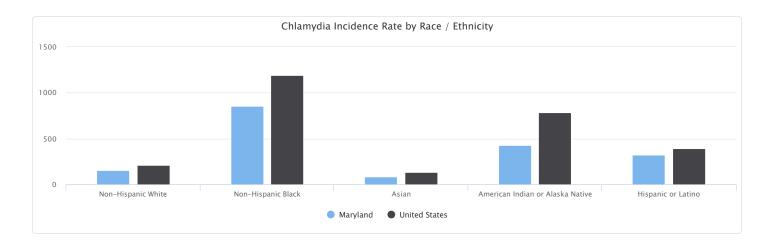
United States (539.9)



### Chlamydia Incidence Rate by Race / Ethnicity

The table below displays national, state, and local variation in the rate of diagnosed chlamydia cases for the latest report year by population race and ethnicity.

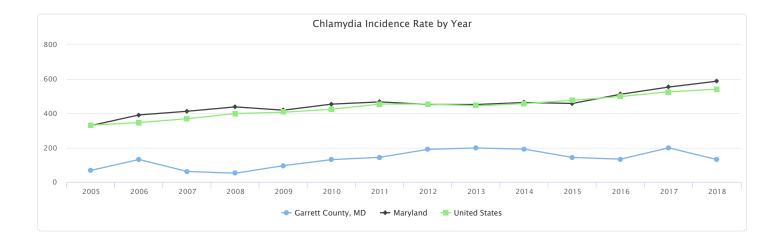
Report Area	Non-Hispanic White	Non-Hispanic Black	Asian	American Indian or Alaska Native	Hispanic or Latino	
Garrett County, MD	No data	No data	No data	No data	No data	
Maryland	152.3	857.5	81.5	430.6	325.9	
United States	212.1	1,192.5	132.1	784.8	392.6	



#### Chlamydia Incidence Rate by Year

The table below displays trends in the rate of diagnosed chlamydia cases for years 2005 through 2018. Rates are expressed per 100,000 total population.

Report Area	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Garrett County, MD	66.9	130.6	60.8	50.5	94.7	129.6	143.1	189.7	197.4	190.7	142.6	132.4	198.4	130.0
Maryland	328.0	390.0	411.4	436.6	417.5	452.6	465.9	450.9	450.4	462.1	457.0	510.4	552.1	586.3
United States	330.3	345.4	367.7	398.0	405.7	422.8	453.4	453.4	443.5	456.1	475.0	497.3	524.6	539.9



#### STI - Gonorrhea Incidence

This indicator reports the number gonorrhea cases occurring in the report area. Rates are presented per 100,000 population.

The number of cases are based on laboratory-confirmed diagnoses that occurred between January 1st and December 31st of the latest reporting year. These data are delivered to and analyzed by the CDC as part of the Nationally notifiable STD surveillance system.

Report Area	Total Population	Gonorrhea Infections	Gonorrhea Infections, Rate per 100,000 Pop.	Gonorrhea Infection Rat (Per 100,000 Pop.)
Garrett County, MD	29,233	6	20.5	
Maryland	6,052,177	10,305	170.3	0 700
United States	325,719,178	583,405	179.1	Garrett County (20.5 Maryland (170.3)

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2018. Source geography: County



☑ View larger map

# Gonorrhea, Infection Rate per 100,000 Population by County, CDC NCHHSTP 2018

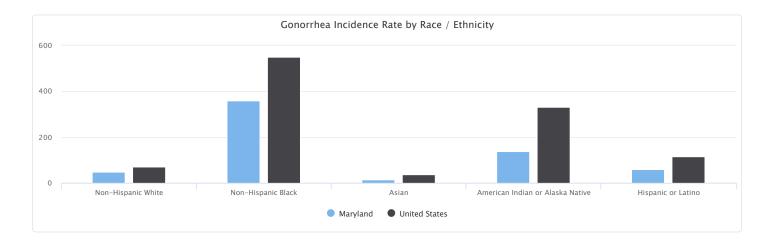
United States (179.1)



#### Gonorrhea Incidence Rate by Race / Ethnicity

The table below displays national, state, and local variation in the rate of diagnosed gonorrhea cases for the latest report year by population race and ethnicity.

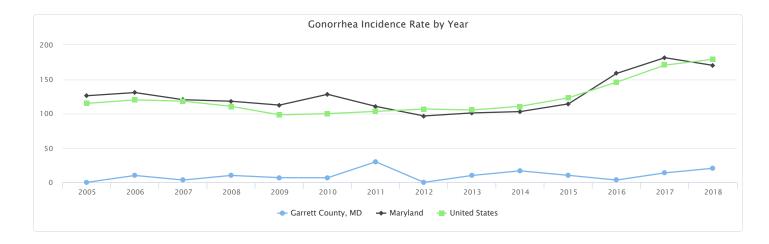
Report Area	Non-Hispanic White	Non-Hispanic Black	Asian	American Indian or Alaska Native	Hispanic or Latino
Garrett County, MD	No data	No data	No data	No data	No data
Maryland	47.1	359.8	14.3	136.7	58.4
United States	71.1	548.9	35.1	329.5	115.9



#### Gonorrhea Incidence Rate by Year

The table below displays trends in the rate of diagnosed gonorrhea cases for years 2005 through 2018. Rates are expressed per 100,000 total population.

Report Area	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Garrett County, MD	0.0	10.0	3.4	10.1	6.8	6.6	29.9	0.0	10.0	16.7	10.2	3.4	13.7	20.5
Maryland	126.1	130.7	120.3	118.0	112.4	128.1	110.6	96.6	101.0	103.0	114.2	158.5	181.4	170.3
United States	114.9	120.1	118.1	110.7	98.2	100.0	103.3	106.7	105.3	110.7	123.0	145.8	170.6	179.1



#### **STI - HIV Prevalence**

This indicator reports the prevalence of HIV in the report area as a rate per 100,000 population over age 13. The data reflect persons living with diagnosed HIV infection at the end of the latest reporting year, or persons living with infection ever classified as stage 3 (AIDS) at the end of the latest report year.

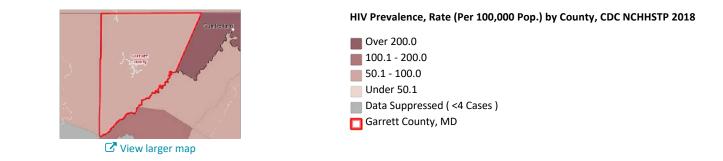
Report Area	Population Age 13+	Population with HIV / AIDS	Population with HIV / AIDS, Rate per 100,000 Pop.
Garrett County, MD	25,440	15	59.0
Maryland	5,079,641	33,164	652.9
United States	274,605,948	1,023,832	372.8

Population with HIV / AIDS, Rate per 100,000 Pop.



Note: This indicator is compared to the state average.

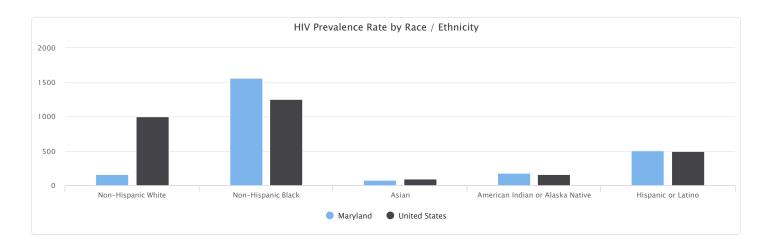
Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2018. Source geography: County



#### HIV Prevalence Rate by Race / Ethnicity

The table below displays trends in the prevalence rate for HIV/AIDS for the latest report year by population race and ethnicity.

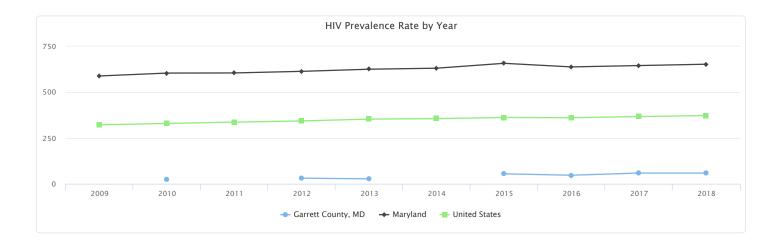
Report Area	Non-Hispanic White	Non-Hispanic Black	Asian	American Indian or Alaska Native	Hispanic or Latino	
Garrett County, MD	No data	No data	No data	No data	No data	
Maryland	158.9	1,564.5	70.2	174.0	508.4	
United States	1,004.4	1,252.9	93.6	158.2	499.9	



#### HIV Prevalence Rate by Year

The table below displays trends in the prevalence rate for HIV/AIDS for years 2009 through 2018. Rates are expressed per 100,000 population age 13 and older.

Report Area	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Garrett County, MD	Suppressed	23.2	No data	31.0	27.2	No data	54.7	47.0	58.8	59.0
Maryland	588.9	604.5	605.2	614.1	625.6	631.1	657.8	638.2	645.6	652.9
United States	322.2	329.7	336.8	343.5	353.2	355.8	362.3	361.1	367.0	372.8



#### **Tobacco Usage - Current Smokers**

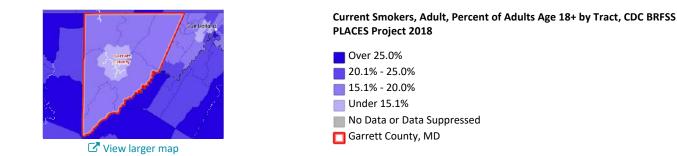
This indicator reports the percentage of adults age 18 and older who report having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.

Within the report area there are 17.0% adults who have smoked or currently smoke of the total population.

Report Area	Total Population (2018)	Percentage of Adult Current Smokers	Percentage of A Current Sr
Garrett County, MD	29,163	17.0%	
Maryland	6,042,718	14.2%	
United States	327,167,434	17.0%	0%
ote: This indicator is compared to the state	average.		Garrett Cour

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2018.





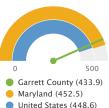
## Health Outcomes

Measuring morbidity and mortality rates allows assessing linkages between social determinants of health and outcomes. By comparing, for example, the prevalence of certain chronic diseases to indicators in other categories (e.g., poor diet and exercise) with outcomes (e.g., high rates of obesity and diabetes), various causal relationship may emerge, allowing a better understanding of how certain community health needs may be addressed.

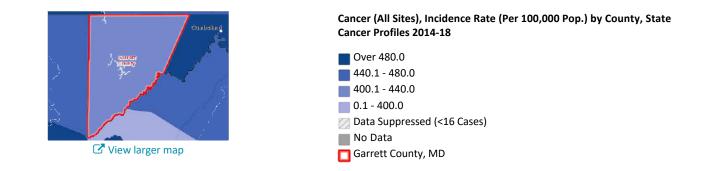
#### **Cancer Incidence - All Sites**

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of cancer (all sites) adjusted to 2000 U.S. standard population age groups (Under age 1, 1-4, 5-9, ..., 80-84, 85 and older).

Within the report area, there were 190 new cases of cancer reported. This means there is a rate of 433.9 for every 100,000 total population.



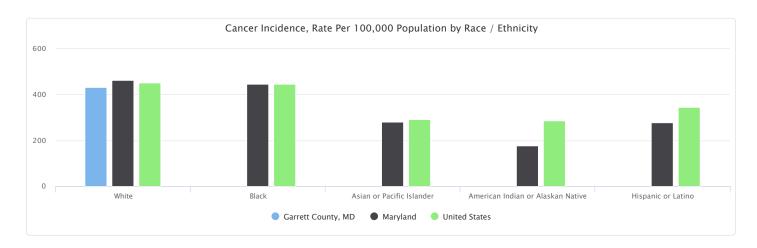
Note: This indicator is compared to the state average. Data Source: State Cancer Profiles. 2014-18. Source geography: County



## Cancer Incidence, Rate Per 100,000 Population by Race / Ethnicity

This indicator reports the age-adjusted cancer incidence rate per 100,000 people for the 5-year period 2014-2018 by race and by Hispanic origin.

Report Area	White	Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino	
Garrett County, MD	431	Suppressed	Suppressed	Suppressed	Suppressed	
Maryland	463.4	445.9	279	175.7	276.2	
United States	451	444.9	291.1	285.8	345	



## Cancer Incidence (Average Annual New Cases) by Race / Ethnicity

This indicator reports the age-adjusted cancer incidence rate average for the 5-year period 2014-2018 by race and by Hispanic origin.

Report Area	White	Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	188	Suppressed	Suppressed	Suppressed	Suppressed
Maryland	21,586	8,632	1,162	52	942
United States	1,419,027	187,408	56,991	10,326	137,386

### Top Five Most Commonly Diagnosed Cancers

The table below shows counts and age-adjusted incidence rates of the five most common newly diagnosed cancers by site for the 5-year period 2014-2018.

Area Name	Cancer Site	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Population)
Garrett County, Maryland	1 - Breast (All Stages^), 2014-2018	29	124
Garrett County, Maryland	2 - Prostate (All Stages^), 2014-2018	23	100.9
Garrett County, Maryland	3 - Lung & Bronchus (All Stages^), 2014-2018	21	44.3
Garrett County, Maryland	4 - Colon & Rectum (All Stages^), 2014-2018	19	45.1
Garrett County, Maryland	5 - Melanoma of the Skin (All Stages <sup>^</sup> ), 2014-2018	11	26.3
Maryland	1 - Breast (All Stages^), 2014-2018	4,943	132.2
Maryland	2 - Prostate (All Stages^), 2014-2018	4,405	128.1
Maryland	3 - Lung & Bronchus (All Stages^), 2014-2018	3,897	55.1
Maryland	4 - Colon & Rectum (All Stages^), 2014-2018	2,518	36.4
Maryland	5 - Melanoma of the Skin (All Stages <sup>^</sup> ), 2014-2018	1,653	24.1

### **Chronic Conditions - Asthma (Medicare Population)**

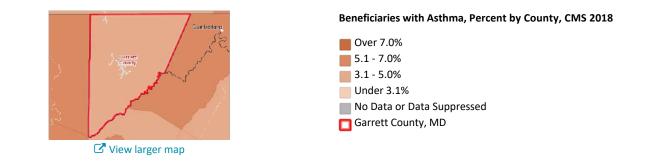
This indicator reports the number and percentage of the Medicare fee-for-service population with asthma. Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program.

Within the report area, there were 274 beneficiaries with asthma based on administrative claims data in the latest report year. This represents 4.4% of the total Medicare fee-for-service beneficiaries.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Asthma	Percentage with Asthma
Garrett County, MD	6,197	274	4.4%
Maryland	768,522	41,511	5.4%
United States	33,499,472	1,665,694	5.0%

Note: This indicator is compared to the state average.

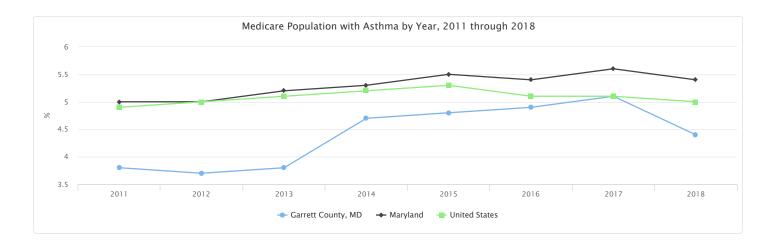
Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File . 2018. Source geography: County



#### Medicare Population with Asthma by Year, 2011 through 2018

This indicator reports the percentage of the Medicare fee-for-service population with asthma over time.

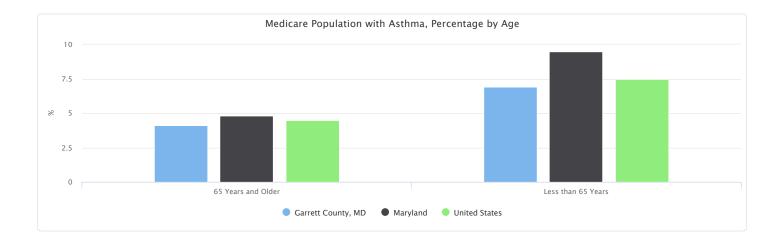
Report Area	2011	2012	2013	2014	2015	2016	2017	2018
Garrett County, MD	3.8%	3.7%	3.8%	4.7%	4.8%	4.9%	5.1%	4.4%
Maryland	5.0%	5.0%	5.2%	5.3%	5.5%	5.4%	5.6%	5.4%
United States	4.9%	5.0%	5.1%	5.2%	5.3%	5.1%	5.1%	5.0%



#### Medicare Population with Asthma, Percentage by Age

This indicator reports the prevalence of asthma among Medicare beneficiaries by age.

Report Area	65 Years and Older	Less than 65 Years
Garrett County, MD	4.1%	6.9%
Maryland	4.8%	9.5%
United States	4.5%	7.5%



#### **Chronic Conditions - Diabetes (Adult)**

This indicator reports the number and percentage of adults age 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Within the report area, 3,049 of adults age 20 and older have diabetes. This represents 10.4% of the total survey population.

Report Area	Population Age 20+	Adults with Diagnosed Diabetes	Adults with Diagnosed Diabetes, Age-Adjusted Rate	Percentage of Adults Diagnosed Diabet (Age-Adjusted), 20
Garrett County, MD	23,098	3,049	10.4%	
Maryland	4,534,073	501,275	9.9%	0% Garrett County (1
United States	245,628,960	25,942,874	9.5%	Maryland (9.9%)

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2017. Source geography: County



☑ View larger map

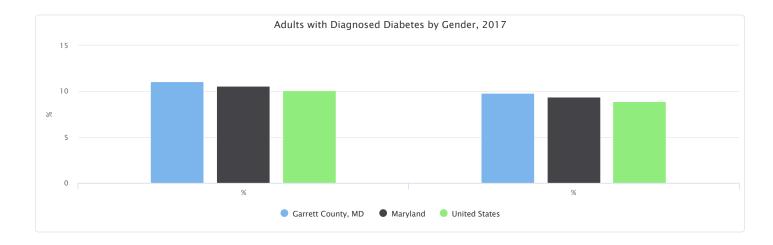
Diabetes Prevalence, Percent of Adults Age 20+ by County, CDC NCCDPHP 2017

Over 11.0%
 9.6 - 11.0%
 8.1 - 9.5%
 Under 8.1%
 No Data or Data Suppressed
 Garrett County, MD

#### Adults with Diagnosed Diabetes by Gender, 2017

The table below displays national, state, and local variation in the prevalence of diabetes among the adult population by gender.

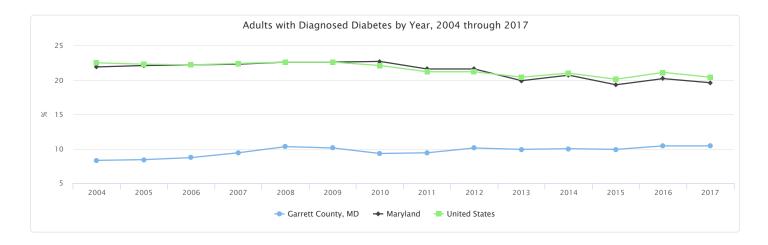
Report Area	Male	Male, Percent	Female	Female, Percent
Garrett County, MD	1,570	11.1%	1,479	9.8%
Maryland	247,486	10.6%	253,787	9.4%
United States	12,926,433	10.1%	12,576,507	8.9%



#### Adults with Diagnosed Diabetes by Year, 2004 through 2017

The table below displays the percentage of adults with diabetes over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Garrett County, MD	8.3%	8.4%	8.7%	9.4%	10.3%	10.1%	9.3%	9.4%	10.1%	9.9%	10.0%	9.9%	10.4%	10.4%
Maryland	21.9%	22.1%	22.2%	22.3%	22.6%	22.6%	22.7%	21.6%	21.6%	19.9%	20.7%	19.3%	20.2%	19.6%
United States	22.5%	22.3%	22.2%	22.4%	22.6%	22.6%	22.1%	21.2%	21.2%	20.4%	21.0%	20.1%	21.1%	20.4%



#### **Chronic Conditions - Diabetes (Medicare Population)**

This indicator reports the number and percentage of the Medicare fee-for-service population with diabetes. Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program.

Within the report area, there were 1,840 beneficiaries with diabetes based on administrative claims data in the latest report year. This represents 29.7% of the total Medicare fee-for-service beneficiaries.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Diabetes	Beneficiaries with Diabetes, Percent
Garrett County, MD	6,197	1,840	29.7%
Maryland	768,522	227,236	29.6%
United States	33,499,472	9,029,582	27.0%

Note: This indicator is compared to the state average.

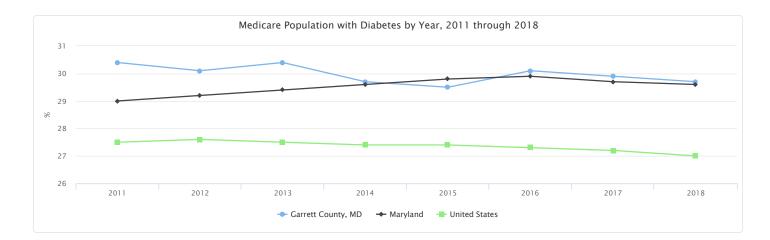
Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File . 2018. Source geography: County



### Medicare Population with Diabetes by Year, 2011 through 2018

This indicator reports the percentage of the Medicare fee-for-service population with diabetes over time.

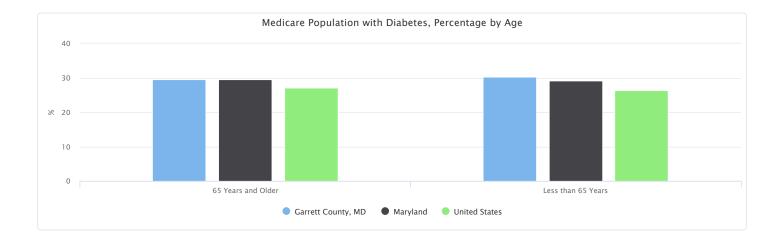
Report Area	2011	2012	2013	2014	2015	2016	2017	2018
Garrett County, MD	30.4%	30.1%	30.4%	29.7%	29.5%	30.1%	29.9%	29.7%
Maryland	29.0%	29.2%	29.4%	29.6%	29.8%	29.9%	29.7%	29.6%
United States	27.5%	27.6%	27.5%	27.4%	27.4%	27.3%	27.2%	27.0%



### Medicare Population with Diabetes, Percentage by Age

This indicator reports the prevalence of diabetes among Medicare beneficiaries by age.

Report Area	65 Years and Older	Less than 65 Years
Garrett County, MD	29.6%	30.2%
Maryland	29.6%	29.2%
United States	27.1%	26.4%



### **Chronic Conditions - Heart Disease (Medicare Population)**

This indicator reports the number and percentage of the Medicare fee-for-service population with ischemic heart disease. Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-forservice program.

Within the report area, there were 1,980 beneficiaries with ischemic heart disease based on administrative claims data in the latest report year. This represents 32.0% of the total Medicare fee-for-service beneficiaries.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Heart Disease	Beneficiaries with Heart Disease, Percent	Percentage of Medicare Beneficiaries with Heart Disease
Garrett County, MD	6,197	1,980	32.0%	
Maryland	768,522	202,899	26.4%	0% 60% Garrett County (32.0%)
United States	33,499,472	8,979,902	26.8%	<ul> <li>Maryland (26.4%)</li> <li>United States (26.8%)</li> </ul>

Note: This indicator is compared to the state average.

Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File . 2018. Source geography: County



View larger map

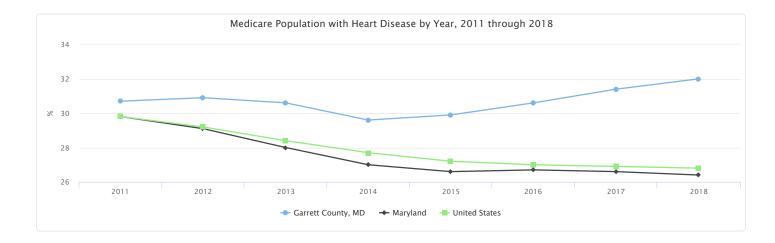
#### Beneficiaries with Ischemic Heart Disease, Percent by County, CMS 2018



#### Medicare Population with Heart Disease by Year, 2011 through 2018

This indicator reports the percentage of the Medicare fee-for-service population with heart disease over time.

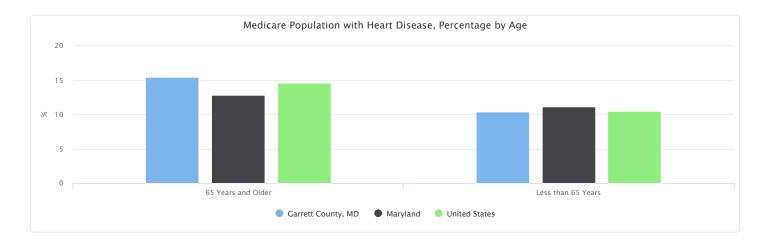
Report Area	2011	2012	2013	2014	2015	2016	2017	2018
Garrett County, MD	30.7%	30.9%	30.6%	29.6%	29.9%	30.6%	31.4%	32.0%
Maryland	29.8%	29.1%	28.0%	27.0%	26.6%	26.7%	26.6%	26.4%
United States	29.8%	29.2%	28.4%	27.7%	27.2%	27.0%	26.9%	26.8%



### Medicare Population with Heart Disease, Percentage by Age

This indicator reports the prevalence of heart disease among Medicare beneficiaries by age.

Report Area	65 Years and Older	Less than 65 Years
Garrett County, MD	15.4%	10.4%
Maryland	12.8%	11.1%
United States	14.6%	10.5%



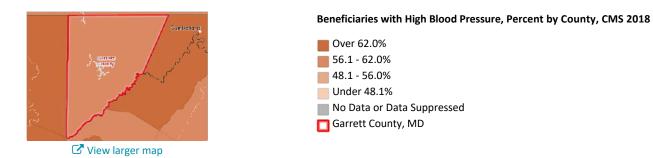
### **Chronic Conditions - High Blood Pressure (Medicare Population)**

This indicator reports the number and percentage of the Medicare fee-for-service population with hypertension (high blood pressure). Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program.

Within the report area, there were 3,802 beneficiaries with hypertension (high blood pressure) based on administrative claims data in the latest report year. This represents 61.4% of the total Medicare fee-for-service beneficiaries.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with High Blood Pressure	Beneficiaries with High Blood Pressure, Percent	Percentage of Medicare Beneficiaries with High Blood Pressure
Garrett County, MD	6,197	3,802	61.4%	
Maryland	768,522	470,535	61.2%	0% 70%
United States	33,499,472	19,162,770	57.2%	<ul> <li>Maryland (61.2%)</li> <li>United States (57.2%)</li> </ul>

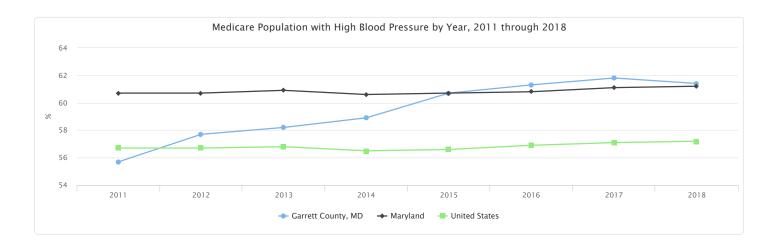
Note: This indicator is compared to the state average. Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File . 2018. Source geography: County



# Medicare Population with High Blood Pressure by Year, 2011 through 2018

This indicator reports the percentage of the Medicare fee-for-service population with high blood pressure over time.

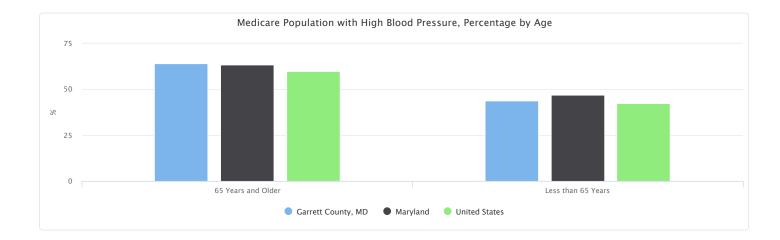
Report Area	2011	2012	2013	2014	2015	2016	2017	2018
Garrett County, MD	55.7%	57.7%	58.2%	58.9%	60.7%	61.3%	61.8%	61.4%
Maryland	60.7%	60.7%	60.9%	60.6%	60.7%	60.8%	61.1%	61.2%
United States	56.7%	56.7%	56.8%	56.5%	56.6%	56.9%	57.1%	57.2%



### Medicare Population with High Blood Pressure, Percentage by Age

This indicator reports the prevalence of high blood pressure among Medicare beneficiaries by age.

Report Area	65 Years and Older	Less than 65 Years
Garrett County, MD	64.0%	43.7%
Maryland	63.4%	47.0%
United States	59.8%	42.4%



### Low Birth Weight (CDC)

This indicator reports the percentage of live births where the infant weighed less than 2,500 grams (approximately 5 lbs., 8 oz.). These data are reported for a 7-year aggregated time period. Data were from the National Center for Health Statistics -Natality Files (2013-2019) and are used for the 2021 County Health Rankings.

Within the report area, there were 166 infants born with low birth weight. This represents 8.4% of the total live births. Note: Data are suppressed for counties with fewer than 10 low birthweight births in the reporting period.

Report Area	Total Live Births	Low Birthweight Births	Low Birthweight Births, Percentage	Percentage of Infants with Low Birthweight:%
Garrett County, MD	1,983	166	8.4%	
Maryland	1,010,490	87,460	8.7%	
United States	54,416,819	4,440,508	8.2%	0% 9%
Note: This indicator is compared to the Data Source: University of Wisconsin	<ul> <li>Garrett County (8.4%)</li> <li>Maryland (8.7%)</li> </ul>			



**View** larger map

Low Birthweight, Percentage of Live Births by County, CDC NVSS 2013-2019

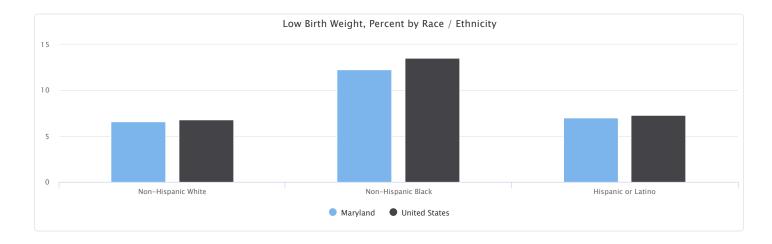
United States (8.2%)



### Low Birth Weight, Percent by Race / Ethnicity

This indicator reports the 2013-2019 seven-year average percentage of live births with low birthweight (< 2,500 grams) by race and by Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Hispanic or Latino
Garrett County, MD	No data	No data	No data
Maryland	6.6	12.3	7.0
United States	6.8	13.5	7.3



### **Mortality - Cancer**

This indicator reports the 2015-2019 five-year average rate of death due to malignant neoplasm (cancer) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because cancer is a leading cause of death in the United States.

Within the report area, there are a total of 328 deaths due to cancer. This represents an age-adjusted death rate of 140.0 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

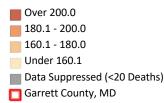
Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population	Age-Adjusted Death Rate (Per 100,000 Population)	Cancer M Age-Adjustec (Per 100,0
Garrett County, MD	29,259	328	224.2	140.0	0 Garrett C
Maryland	6,032,685	53,945	178.8	151.3	<ul> <li>Maryland</li> <li>United Sta</li> </ul>
United States	325,134,494	2,991,951	184.0	152.3	United Sta

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



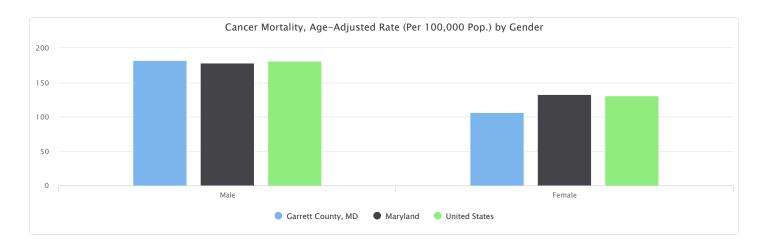
#### Cancer Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, CDC NVSS 2015-19



### Cancer Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to cancer per 100,000 people by gender.

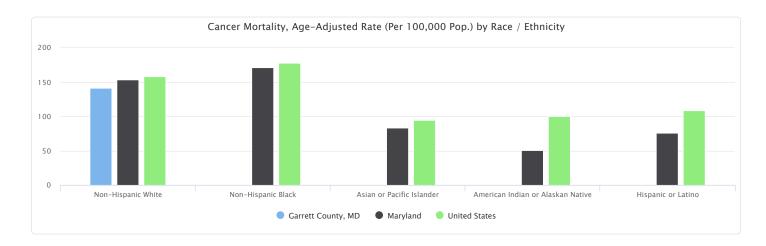
Report Area	Male	Female
Garrett County, MD	182.5	106.4
Maryland	178.2	132.6
United States	180.9	131.1



### Cancer Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate death due to cancer per 100,000 people for the 5-year period 2015-2019 by race and by Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	141.2	No data	No data	No data	No data
Maryland	153.2	171.3	83.4	50.4	75.6
United States	157.5	178.0	94.7	100.1	108.2

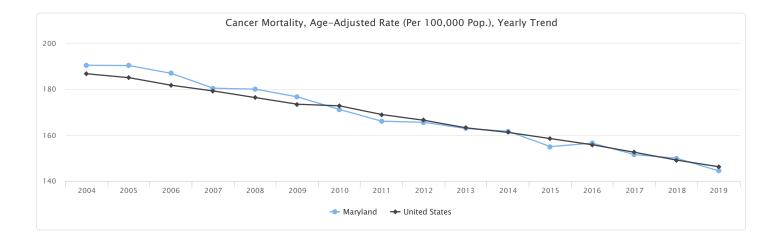


### Cancer Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

The table below shows age-adjusted death rates due to cancer per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	190.5	190.4	187.0	180.5	180.1	176.7	171.2	166.1	165.6	162.9	161.7	155.0	156.5	151.5	149.9	144.4
United States	186.8	185.1	181.8	179.3	176.4	173.5	172.8	169.0	166.5	163.2	161.2	158.5	155.8	152.5	149.1	146.2

Note: No county data available. See data source and methodology for more details.



### **Mortality - Coronary Heart Disease**

This indicator reports the 2015-2019 five-year average rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because coronary heart disease is a leading cause of death in the United States.

Within the report area, there are a total of 342 deaths due to coronary heart disease. This represents an age-adjusted death rate of 148.6 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)	Coronary Heart Disease Mort Age-Adjusted Death Rate (Per 100,000 Pop.)
Garrett County, MD	29,259	342	233.8	148.6	0 200 Garrett County (148.6
Maryland	6,032,685	32,719	108.5	92.1	Maryland (92.1)
United States	325,134,494	1,822,811	112.1	92.6	United States (92.6)

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



#### Coronary Heart Disease Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, CDC NVSS 2015-19

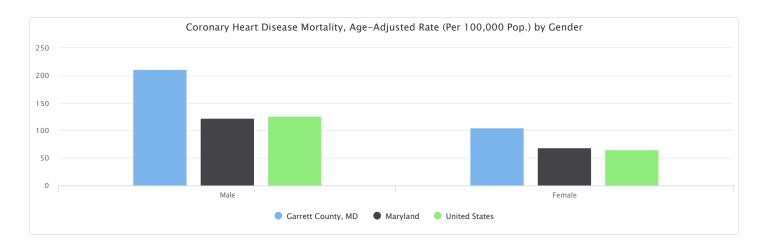
Mortality,

Over 150.0 120.1 - 150.0 100.1 - 120.0 Under 100.1 Data Suppressed (<20 Deaths) Garrett County, MD

### Coronary Heart Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to coronary heart disease per 100,000 people by gender.

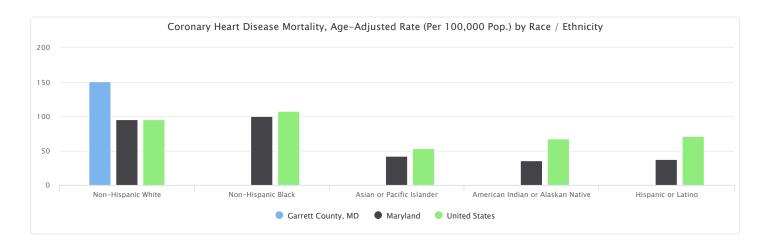
Report Area	Male	Female
Garrett County, MD	211.8	105.2
Maryland	122.5	69.1
United States	126.2	65.9



### Coronary Heart Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate of death due to coronary heart disease per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	150.3	No data	No data	No data	No data
Maryland	95.1	100.1	42.3	35.3	37.5
United States	95.1	107.4	53.0	67.1	70.8

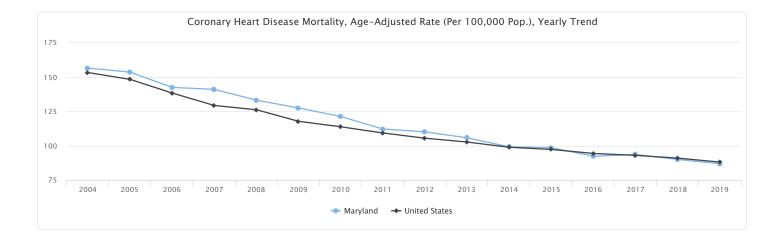


### Coronary Heart Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports age-adjusted rate of death due to coronary heart disease per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	156.4	153.5	142.4	140.9	133.1	127.4	121.2	112.1	110.0	105.7	99.1	98.5	92.3	93.5	89.9	86.8
United States	153.2	148.2	138.3	129.2	126.1	117.7	113.7	109.2	105.4	102.6	98.8	97.2	94.3	92.9	90.9	88.0

Note: No county data available. See data source and methodology for more details.



### **Mortality - Poisoning**

This indicator reports the 2015-2019 five-year average rate of death due to poisoning (including drug overdose) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because poisoning deaths, especially from drug overdose, are a national public health emergency.

Within the report area, there are a total of 35 deaths due to poisoning. This represents an age-adjusted death rate of 27.8 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Total Population, Report Area 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
rett County, 29,25	9 35	23.9	
Maryland 6,032,68	5 10,725	35.6	34.6
Jnited States 325,134,49	4 350,184	21.5	21.6

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



View larger map

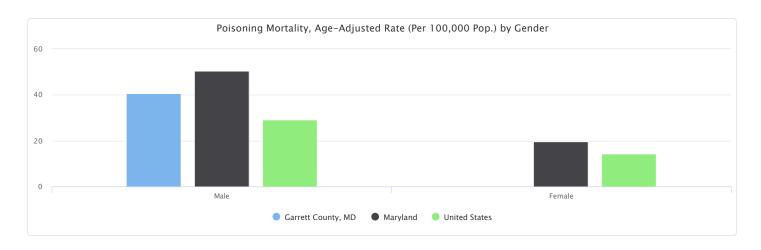
#### Poisoning Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, CDC NVSS 2015-19



Poisoning Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to poisoning (including drug poisoning) per 100,000 people by gender.

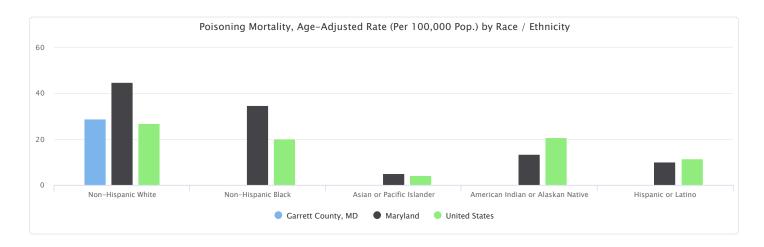
Report Area	Male	Female
Garrett County, MD	40.6	No data
Maryland	50.6	19.5
United States	29.1	14.2



### Poisoning Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate of death due to poisoning (including drug poisoning) per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	28.9	No data	No data	No data	No data
Maryland	45.0	34.8	5.0	13.5	10.2
United States	26.9	20.3	4.1	20.8	11.4



### **Mortality - Homicide**

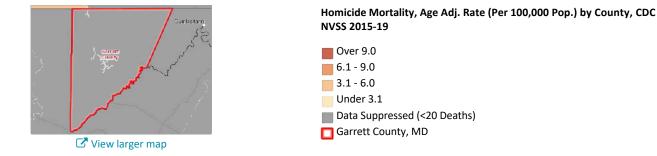
This indicator reports the 2015-2019 five-year average rate of death due to assault (homicide) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because homicide rate is a measure of poor community safety and is a leading cause of premature death.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Garrett County, 29,259 No data No data No data	MD 29,259 No data No data No data	Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
		1.				
Maryland 6,032,685 2,881 9.6 10.0		United States	325,134,494	94,636	5.8	6.0

Note: This indicator is compared to the state average.

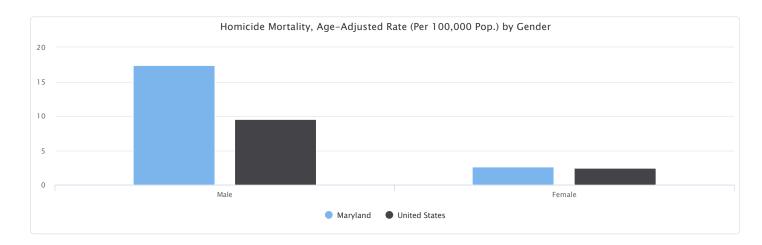
Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



### Homicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to homicide per 100,000 people by gender.

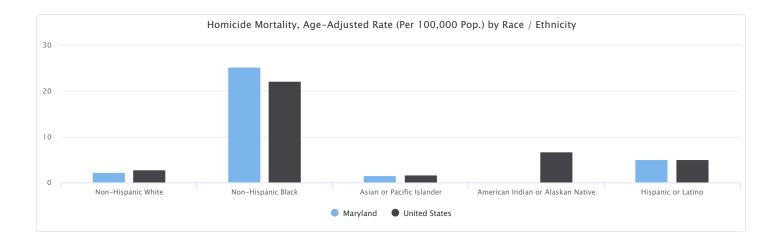
Report Area	Male	Female
Garrett County, MD	No data	No data
Maryland	17.4	2.6
United States	9.5	2.4



### Homicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate of death due to homicide per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	No data	No data	No data	No data	No data
Maryland	2.2	25.3	1.6	No data	5.0
United States	2.8	22.2	1.7	6.7	5.1

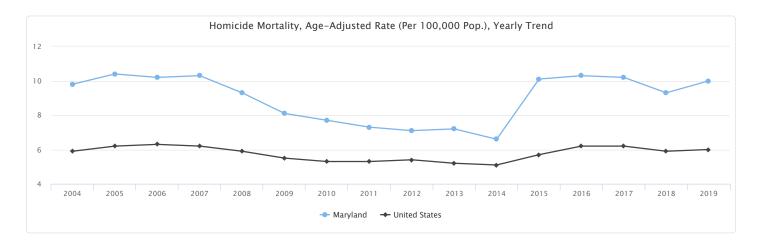


### Homicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports the age-adjusted rate of death due to homicide per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	9.8	10.4	10.2	10.3	9.3	8.1	7.7	7.3	7.1	7.2	6.6	10.1	10.3	10.2	9.3	10.0
United States	5.9	6.2	6.3	6.2	5.9	5.5	5.3	5.3	5.4	5.2	5.1	5.7	6.2	6.2	5.9	6.0

Note: No county data available. See data source and methodology for more details.



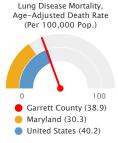
### **Mortality - Lung Disease**

This indicator reports the 2015-2019 five-year average rate of death due to chronic lower respiratory disease per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because lung disease is a leading cause of death in the United States.

Within the report area, there are a total of 93 deaths due to lung disease. This represents an age-adjusted death rate of 38.9 per every 100,000 total population.

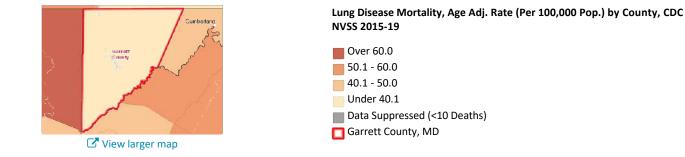
Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Garrett County, MD	29,259	93	63.6	38.9
Maryland	6,032,685	10,580	35.1	30.3
United States	325,134,494	786,303	48.4	40.2



Note: This indicator is compared to the state average.

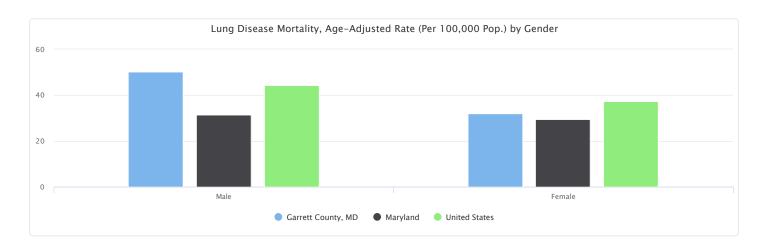
Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



### Lung Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to lung disease per 100,000 people by gender.

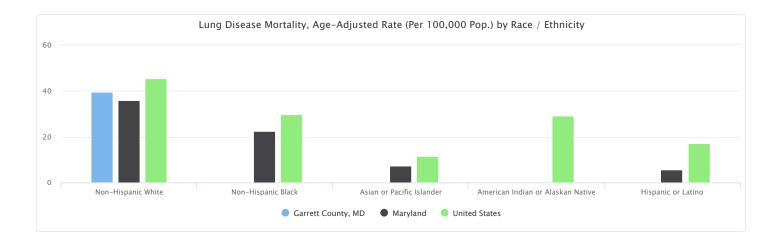
Report Area	Male	Female
Garrett County, MD	50.1	31.9
Maryland	31.5	29.4
United States	44.2	37.3



### Lung Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate of death due to lung disease per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	39.5	No data	No data	No data	No data
Maryland	36.0	22.3	7.2	No data	5.6
United States	45.5	29.8	11.5	29.2	17.0

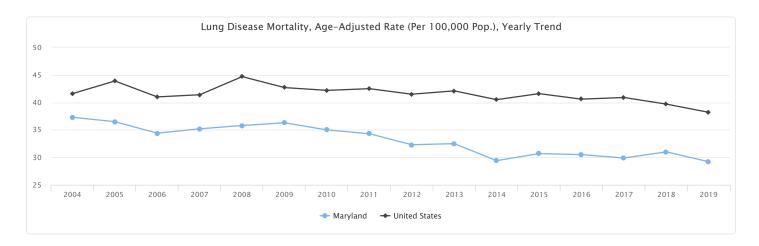


### Lung Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports the age-adjusted rate of death due to lung disease per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	37.3	36.5	34.4	35.2	35.8	36.3	35.0	34.3	32.3	32.5	29.4	30.7	30.5	29.9	31.0	29.2
United States	41.6	43.9	41.0	41.4	44.7	42.7	42.2	42.5	41.5	42.1	40.5	41.6	40.6	40.9	39.7	38.2

Note: No county data available. See data source and methodology for more details.



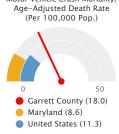
### **Mortality - Motor Vehicle Crash**

This indicator reports the 2015-2019 five-year average rate of death due to motor vehicle crash per 100,000 population, which include collisions with another motor vehicle, a nonmotorist, a fixed object, and a non-fixed object, an overturn, and any other non-collision. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. This indicator is relevant because motor vehicle crash deaths are preventable and they are a cause of premature death.

Within the report area, there are a total of 26 deaths due to motor vehicle crash. This represents an age-adjusted death rate of 18.0 per every 100,000 total population.

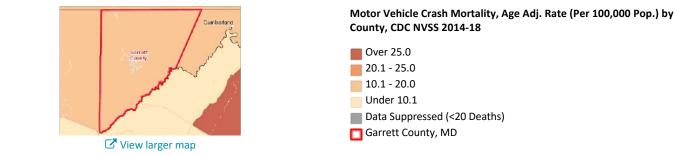
Note: Fatality counts are based on the location of the crash and not the decedent's residence.

Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)	Motor Vehicle Crash Morta Age-Adjusted Death Ra (Per 100,000 Pop.)
Garrett County, MD	29,259	26	17.8	18.0	0 5 Garrett County (18.
Maryland	6,032,685	2,676	8.9	8.6	Maryland (8.6)
United States	325,134,494	189,154	11.6	11.3	United States (11.3)



Note: This indicator is compared to the state average.

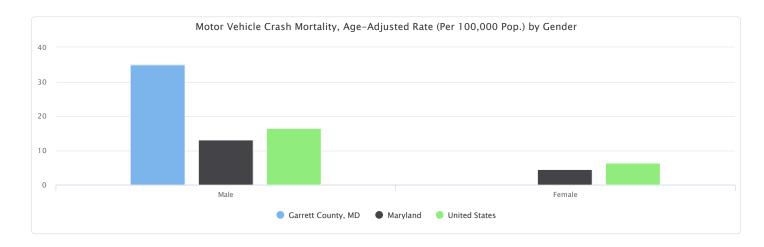
Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



### Motor Vehicle Crash Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports age-adjusted rate of death due to motor vehicle crash per 100,000 people by gender.

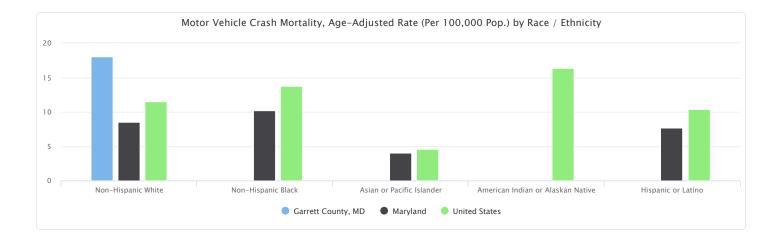
Report Area	Male	Female
Garrett County, MD	34.9	No data
Maryland	13.1	4.5
United States	16.4	6.4



### Motor Vehicle Crash Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports age-adjusted rate of death due to motor vehicle crash per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	18.0	No data	No data	No data	No data
Maryland	8.5	10.2	4.0	No data	7.7
United States	11.5	13.7	4.6	16.4	10.4

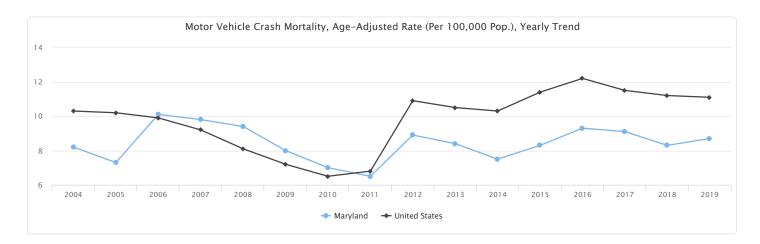


### Motor Vehicle Crash Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

The table below shows age-adjusted death rates due to motor vehicle crash per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	8.2	7.3	10.1	9.8	9.4	8.0	7.0	6.5	8.9	8.4	7.5	8.3	9.3	9.1	8.3	8.7
United States	10.3	10.2	9.9	9.2	8.1	7.2	6.5	6.8	10.9	10.5	10.3	11.4	12.2	11.5	11.2	11.1

Note: No county data available. See data source and methodology for more details.



### **Mortality - Premature Death**

This indicator reports the Years of Potential Life Lost (YPLL) before age 75 per 100,000 population for all causes of death. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. YPLL measures premature death and is calculated by subtracting the age of death from the 75 year benchmark. Data were from the National Center for Health Statistics - Mortality Files (2017-2019) and are used for the 2021 County Health Rankings. This indicator is relevant because a measure of premature death can provide a unique and comprehensive look at overall health status.

Within the report area, there are a total of 418 premature deaths. This represents an age-adjusted death rate of 7,454 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the three-year time frame.

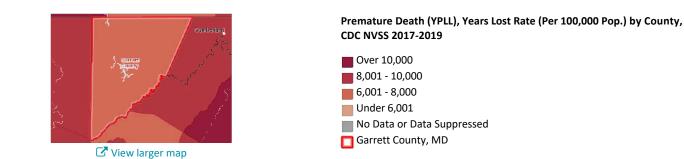
Report Area	Premature Deaths, 2017-2019	Years of Potential Life Lost, 2017-2019 Average	Years of Potential Life Lost, Rate per 100,000 Population
Garrett County, MD	418	5,899	7,454
Maryland	141,796	2,453,535	7,222
United States	7,697,253	126,961,190	6,943



10000 ett County (7,454) land (7.222) United States (6,943)

Note: This indicator is compared to the state average.

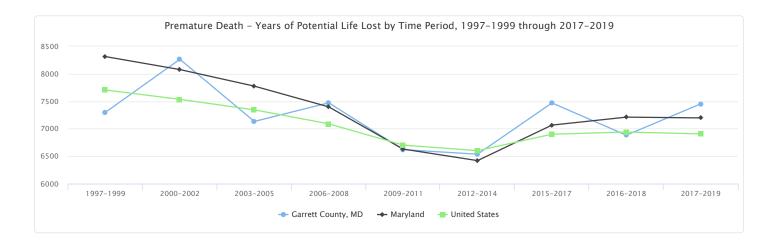
Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2017-2019. Source geography: County



### Premature Death - Years of Potential Life Lost by Time Period, 1997-1999 through 2017-2019

The table below shows age-adjusted death rates due to Years of Potential Life Lost (YPLL) before age 75 per 100,000 people over time.

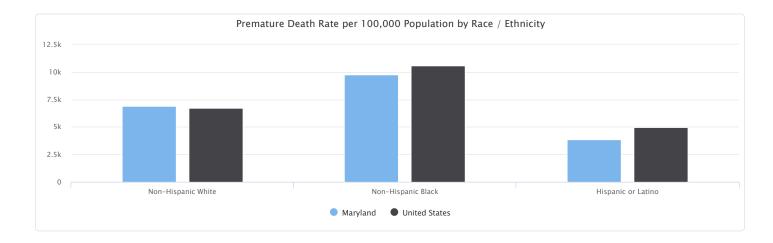
Report Area	1997-1999	2000-2002	2003-2005	2006-2008	2009-2011	2012-2014	2015-2017	2016-2018	2017-2019
Garrett County, MD	7,300.0	8,263.7	7,133.3	7,472.1	6,620.5	6,536.9	7,469.5	6,883.7	7,453.9
Maryland	8,313.1	8,077.7	7,775.6	7,399.0	6,631.0	6,420.1	7,066.9	7,211.1	7,197.7
United States	7,705.2	7,535.0	7,345.0	7,090.5	6,703.7	6,601.2	6,900.6	6,940.1	6,906.6



### Premature Death Rate per 100,000 Population by Race / Ethnicity

This indicator reports age-adjusted rate of death due to Years of Potential Life Lost (YPLL) before age 75 per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Hispanic or Latino
Garrett County, MD	No data	No data	No data
Maryland	6,878.7	9,732.6	3,868.9
United States	6,744.0	10,554.0	4,966.6



### **Mortality - Stroke**

This indicator reports the 2015-2019 five-year average rate of death due to cerebrovascular disease (stroke) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because stroke is a leading cause of death in the United States.

Within the report area, there are a total of 85 deaths due to stroke. This represents an age-adjusted death rate of 37.1 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Garrett County, MD	29,259	85	58.1	37.1
Maryland	6,032,685	14,001	46.4	40.0
United States	325,134,494	726,663	44.7	37.3

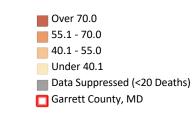
Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



☑ View larger map

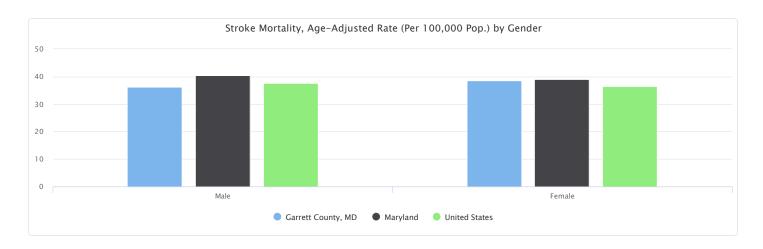
# Stroke Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, CDC NVSS 2015-19



Stroke Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to stroke per 100,000 people by gender.

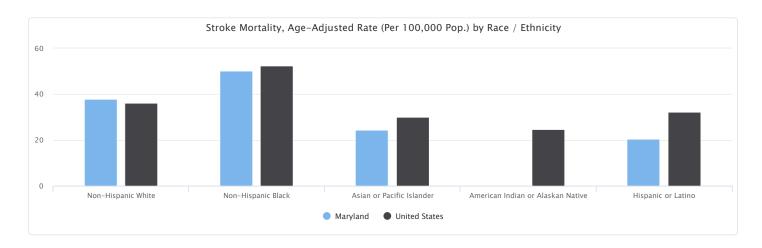
Report Area	Male	Female
Garrett County, MD	36.1	38.5
Maryland	40.5	39.0
United States	37.7	36.4



### Stroke Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate of death due to stroke per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Maryland	37.9	50.3	24.5	No data	20.4
United States	36.1	52.3	29.9	24.7	32.2

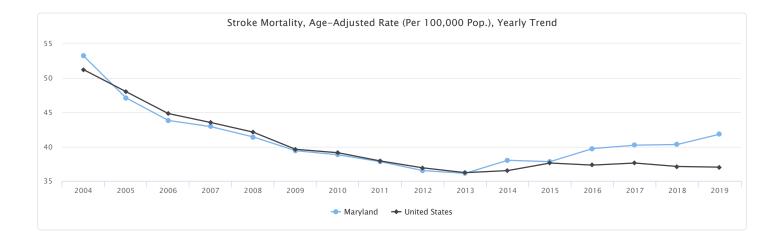


### Stroke Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

This indicator age-adjusted rate of death due to stroke per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	53.2	47.1	43.8	42.9	41.4	39.4	38.8	37.8	36.5	36.1	38.0	37.8	39.7	40.2	40.3	41.8
United States	51.2	48.0	44.8	43.5	42.1	39.6	39.1	37.9	36.9	36.2	36.5	37.6	37.3	37.6	37.1	37.0

Note: No county data available. See data source and methodology for more details.



### **Mortality - Suicide**

This indicator reports the 2015-2019 five-year average rate of death due to intentional self-harm (suicide) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because suicide is an indicator of poor mental health.

Within the report area, there are a total of 29 deaths due to suicide. This represents an age-adjusted death rate of 18.3 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Garrett County, MD	29,259	29	19.8	18.3
Maryland	6,032,685	3,076	10.2	9.7
United States	325,134,494	232,186	14.3	13.8

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



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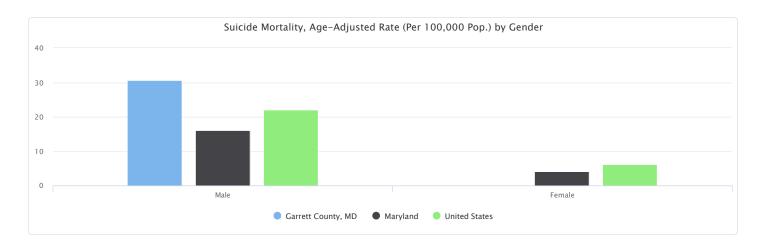
Suicide Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, CDC NVSS 2015-19



### Suicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to suicide per 100,000 people by gender.

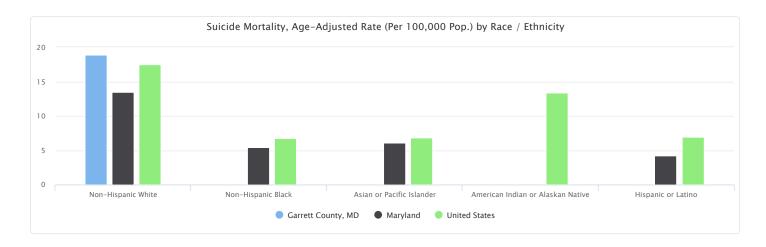
Report Area	Male	Female
Garrett County, MD	30.7	No data
Maryland	16.0	4.1
United States	22.0	6.1



### Suicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate of death due to suicide per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	18.9	No data	No data	No data	No data
Maryland	13.5	5.4	6.1	No data	4.2
United States	17.5	6.7	6.8	13.4	6.9

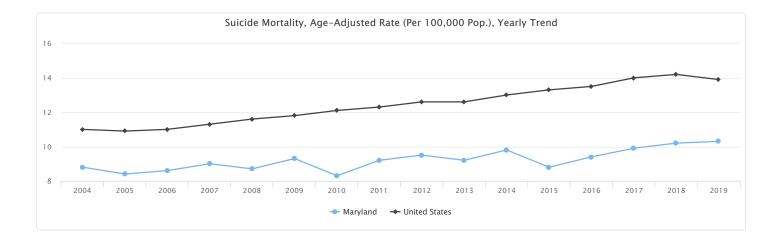


### Suicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports the age-adjusted rate of death due to suicide per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	8.8	8.4	8.6	9.0	8.7	9.3	8.3	9.2	9.5	9.2	9.8	8.8	9.4	9.9	10.2	10.3
United States	11.0	10.9	11.0	11.3	11.6	11.8	12.1	12.3	12.6	12.6	13.0	13.3	13.5	14.0	14.2	13.9

Note: No county data available. See data source and methodology for more details.



### Mortality - Unintentional Injury (Accident)

This indicator reports the 2015-2019 five-year average rate of death due to unintentional injury (accident) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because accidents are a leading cause of death in the United States.

Within the report area, there are a total of 69 deaths due to unintentional injury. This represents an age-adjusted death rate of 42.8 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Garrett County, 29,259 69 47.2 42.8	Report Area	Total Population, 2015-2019 Average	Five Year Total Deaths, 2015-2019 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
			69	47.2	
	United States	325,134,494	818,048	50.3	47.5

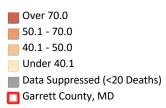
Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2015-2019. Source geography: County



View larger map

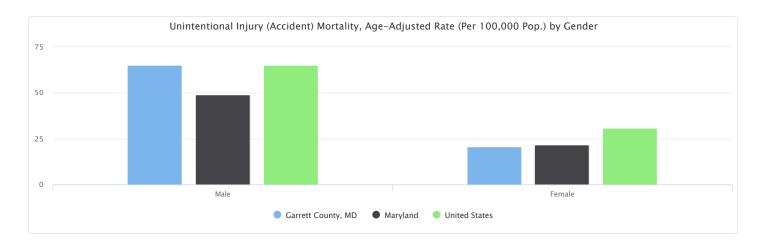
Unintentional Injury (Accident) Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, CDC NVSS 2015-19



Unintentional Injury (Accident) Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

This table reports the age-adjusted rate of death due to unintentional injury (accident) per 100,000 people by gender.

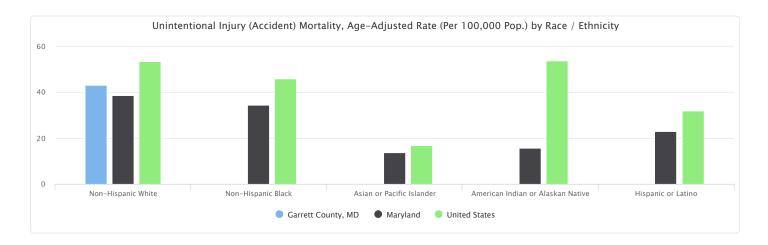
Report Area	Male	Female
Garrett County, MD	65.3	20.7
Maryland	49.2	21.9
United States	65.2	30.8



### Unintentional Injury (Accident) Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Race / Ethnicity

This table reports the age-adjusted rate of death due to unintentional injury (accident) per 100,000 people by race and Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Asian or Pacific Islander	American Indian or Alaskan Native	Hispanic or Latino
Garrett County, MD	43.1	No data	No data	No data	No data
Maryland	38.6	34.4	13.6	15.6	23.1
United States	53.5	46.0	16.9	53.7	32.1

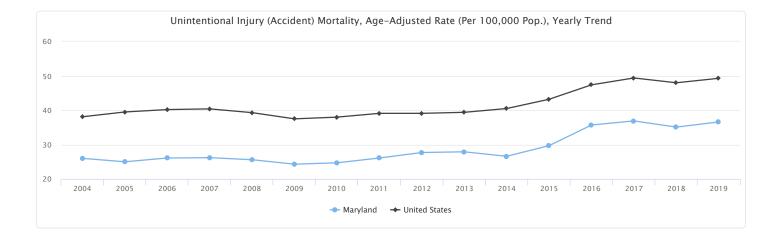


### Unintentional Injury (Accident) Mortality, Age-Adjusted Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports the age-adjusted rate of death due to unintentional injury (accident) per 100,000 people over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Maryland	26.0	25.0	26.1	26.2	25.6	24.3	24.7	26.1	27.7	27.9	26.6	29.7	35.7	36.9	35.1	36.6
United States	38.1	39.5	40.2	40.4	39.3	37.5	38.0	39.1	39.1	39.4	40.5	43.2	47.4	49.4	48.0	49.3

Note: No county data available. See data source and methodology for more details.



### Obesity

This indicator reports the number and percentage of adults aged 20 and older self-report having a Body Mass Index (BMI) greater than 30.0 (obese). Respondents were considered obese if their Body Mass Index (BMI) was 30 or greater. Body mass index (weight [kg]/height [m]2) was derived from self-report of height and weight. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Within the report area, there are a total of 8,221 adults age 20 and older who self-reported having a BMI greater than 30.0. This represents a 35.3% of the survey population.

Report Area	Population Age 20+	Adults with BMI > 30.0 (Obese)	Adults with BMI > 30.0 (Obese), Percent	Percentag (BMI >
arrett County, MD	23,158	8,221	35.3%	
/laryland	4,529,198	1,431,286	31.3%	
United States	243,101,202	72,159,365	29.5%	0%

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2017. Source geography: County



☑ View larger map

Obese (BMI >= 30), Adults Age 20+, Percent by County, CDC NCCDPHP 2017

Garrett County (35.3%)

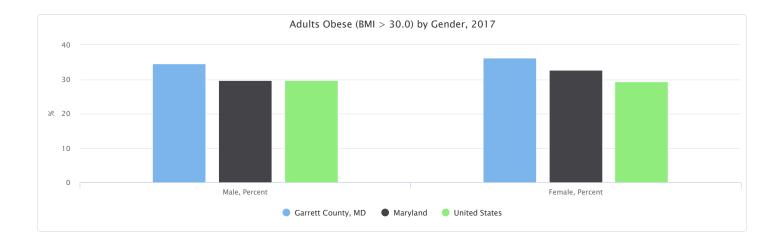
Maryland (31.3%) United States (29.5%)



### Adults Obese (BMI > 30.0) by Gender, 2017

The table below displays national, state, and local variation in the prevalence of obesity among the adult population by gender.

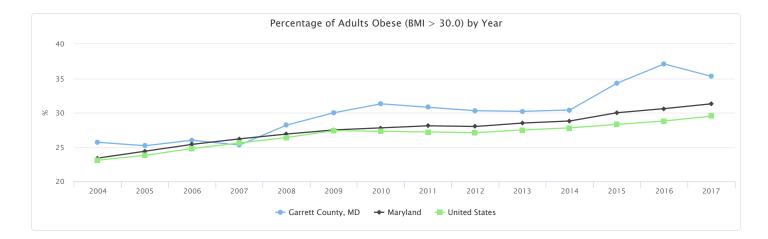
Report Area	Male	Male, Percent	Female	Female, Percent
Garrett County, MD	3,969	34.5%	4,251	36.2%
Maryland	649,093	29.7%	782,194	32.8%
United States	35,502,906	29.8%	36,656,416	29.3%



### Percentage of Adults Obese (BMI > 30.0) by Year

The table below displays trends in the percentage of adults that are obese over time.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Garrett County, MD	25.7%	25.2%	26.0%	25.3%	28.2%	30.0%	31.3%	30.8%	30.3%	30.2%	30.4%	34.3%	37.1%	35.3%
Maryland	23.4%	24.4%	25.4%	26.2%	26.9%	27.5%	27.8%	28.1%	28.0%	28.5%	28.8%	30.0%	30.6%	31.3%
United States	23.1%	23.8%	24.8%	25.6%	26.4%	27.4%	27.3%	27.2%	27.1%	27.5%	27.8%	28.3%	28.8%	29.5%



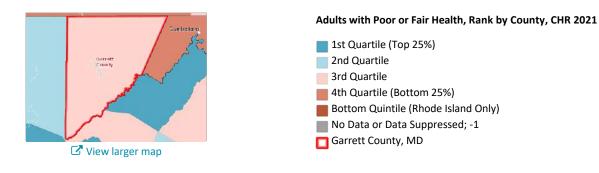
### **Poor or Fair Health**

This indicator reports the percentage of adults age 18 and older who self-report having poor or fair health (age-adjusted to the 2000 standard). Data were from the 2018 Behavioral Risk Factor Surveillance System (BRFSS) annual survey and are used for the 2021 County Health Rankings. This indicator is relevant because it is a measure of general poor health status.

Within the report area there are 1,112 persons aged 18 and older who self-report having poor or fair health. This represents 17.4% of the total population aged 18 and older, which is greater than the state rate of 15.5%.

Report Area	Population Age 18+	Adults with Poor or Fair Health	Percentage of Adults with Poor or Fair Health	Percentage of Adults w Poor Health
Garrett County, MD	6,401	1,112	17.4%	
Maryland	3,195,098	495,415	15.5%	0% Garrett County (
United States	172,018,492	30,907,322	18.0%	<ul> <li>Maryland (15.5%</li> <li>United States (18)</li> </ul>

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via County Health Rankings. 2018. Source geography: County



https://sparkmap.org, 11/3/2021

# Standard Report - Source & Methodology

# Demographics

### **Total Population**

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Population density is a measurement of persons per square mile. Area demographic statistics are measured as a percentage of the total population based on the following formula:

Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. Total population counts are reported in the ACS public use files by combined race and ethnicity; social and economic data are reported by race or ethnicity alone.

### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations have age and sex distributions that are very different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on demographic distribution. This is particularly true for areas with a substantial GQ population (like areas with military bases, colleges, or jails).

### Total Population Change, 2000 - 2010

# Data Background

The U.S. Census counts every resident in the United States. It is mandated by Article I, Section 2 of the Constitution and takes place every 10 years. The census collects information about the age, sex, race, and ethnicity of every person in the United States. The data collected by the decennial census determine the number of seats each state has in the U.S. House of Representatives and is also used to distribute billions in federal funds to local communities. For more information about this source, refer to the United States Census 2010 website.

# Methodology

Population data for years 2000 and 2010 from the U.S. Census Bureau Decennial Census. Mapped data are summarized to 2010 census tract boundaries. Population change is calculated using the following formula:

### Total Change = [Total Population 2010] - [Total Population 2000] Rate Change = ( ( [Total Population 2010] - [Total Population 2000] ) / [Total Population 2000] ) \* 100

### Notes

### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the US Decennial Census based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the 2010 Census are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity.

### Total Population Change, 2010-2020

# Data Background

The U.S. Census counts every resident in the United States. It is mandated by Article I, Section 2 of the Constitution and takes place every 10 years. The census collects information about the age, sex, race, and ethnicity of every person in the United States. The data collected by the decennial census determine the number of seats each state has in the U.S. House of Representatives and is also used to distribute billions in federal funds to local communities. For more information about this source, refer to the United States Census 2020 website.

# Methodology

Population data for years 2010 and 2020 from the U.S. Census Bureau Decennial Census. Mapped data are summarized to 2020 census tract boundaries. Population change is calculated using the following formula:

### Total Change = [Total Population 2020] - [Total Population 2010] Rate Change = ( ( [Total Population 2020] - [Total Population 2010] ) / [Total Population 2010] ) \* 100

### **Urban and Rural Population**

# Data Background

The U.S. Census counts every resident in the United States. It is mandated by Article I, Section 2 of the Constitution and takes place every 10 years. The census collects information about the age, sex, race, and ethnicity of every person in the United States. The data collected by the decennial census determine the number of seats each state has in the U.S. House of Representatives and is also used to distribute billions in federal funds to local communities. For more information about this source, refer to the United States Census 2010 website.

# Methodology

Data are from the US 2010 Decennial Census, which provides urban and rural attributes for all geographic areas. by the 2010 Census definition, urban areas are comprised of a densely settled core of census tracts and/or census blocks that meet minimum population density requirements and/or land use requirements. The Census Bureau identifies two types of urban areas:

- Urbanized Areas (UAs) of 50,000 or more people;
- Urban Clusters (UCs) of at least 2,500 and less than 50,000 people.

To qualify as an urban area, the territory identified according to criteria must encompass at least 2,500 people, at least 1,500 of which reside outside institutional group quarters. Areas adjacent to urban areas and cores are also designated as urban when they are non-residential, but contain urban land uses, or when they contain low population, but link outlying densely settled territory with the densely settled core.

"Rural" areas consist of all territory, population, and housing units located outside UAs and UCs. Geographic entities, such as metropolitan areas, counties, minor civil divisions, places, and census tracts, often contain both urban and rural territory, population, and housing units. Indicator data tables display the percentage of population in areas designated either urban or rural based on the following formula:

### Percentage = [Urban or Rural Population] / [Total Population] \* 100

For more information, please visit the US Census Bureau's 2010 Urban and Rural Classification web page.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the US Decennial Census based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the 2010 Census are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity.

### Median Age

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

# *Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).*

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Median age data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. The median divides the income distribution into two equal parts: one-half of the cases falling below the median income and one-half above the

median. Due to the nature of medians, report areas based on multiple counties or custom areas will return "no data".

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### **Data Limitations**

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations have age and sex distributions that are very different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on demographic distribution. This is particularly true for areas with a substantial GQ population (like areas with military bases, colleges, or jails).

### **Population Under Age 18**

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

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For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations have age and sex distributions that are very different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on demographic distribution. This is particularly true for areas with a substantial GQ population (like areas with military bases, colleges, or jails).

### Population Age 18-64

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population based on the following formula:

### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations have age and sex distributions that are very different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on demographic distribution. This is particularly true for areas with a substantial GQ population (like areas with military bases, colleges, or jails).

### Population Age 65+

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

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For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations have age and sex distributions that are very different from the household population. The inclusion of the GQ population could

therefore have a noticeable impact on demographic distribution. This is particularly true for areas with a substantial GQ population (like areas with military bases, colleges, or jails).

### Population with Any Disability

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Counts of population subgroups and total area population data are acquired from the U.S. Census Bureau's American Community Survey (ACS). Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Disability status is classified in the ACS according to yes/no responses to questions (17 - 19) about six types of disability concepts. For children under 5 years old, hearing and vision difficulty are used to determine disability status. For children between the ages of 5 and 14, disability status is determined from hearing, vision, cognitive, ambulatory, and self-care difficulties. For people aged 15 years and older, they are considered to have a disability if they have difficulty with any one of the six difficulty types. Indicator statistics are measured as a percentage of the total universe (non-institutionalized) population using the following formula:

### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations have age and sex distributions that are very different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on demographic distribution. This is particularly true for areas with a substantial GQ population (like areas with military bases, colleges, or jails).

### **Population with Limited English Proficiency**

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

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For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Population counts for population by language proficiency and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Persons are considered to have limited English proficiency they indicated that they spoke a language other than English, and if they spoke English less than "very well". Persons are considered to live in linguistically isolated households if no one in the household over age 14 speaks English "well" or "very well". Area demographic statistics are measured as a percentage of the total population aged 5+ based on the following formula:

### Percentage = [Subgroup Population] / [Total Population Age 5+] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### Race and Ethnicity

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. The part of the group quarters population in the language universe (for example, people living in group homes or those living in agriculture workers' dormitories) may have different levels of English proficiency than the general population. Direct comparisons of the data would likely result in erroneous conclusions about the English language proficiency of all people living in the area.

### **Foreign-Born Population**

Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

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For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

### **Citizenship Status**

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

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For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### **Veteran Population**

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Counts for population subgroups and total area population data are acquired from the U.S. Census Bureau's American Community Survey (ACS). Data represent estimates for the 5 year period 2014-2019. Data are summarized to 2010 census tract boundaries. Veteran status is classified in the ACS according to yes/no responses to questions 26 and 27. ACS data define civilian veteran as a person 18 years old and over who served (even for a short time), but is not now serving on acting duty in the U.S. Army, Navy, Air Force, Marine Corps or Coast Guard, or who served as a Merchant Marine seaman during World War II. Individuals who have training for Reserves or National Guard but no active duty service are not considered veterans in the ACS. Indicator statistics are measured as a percentage of the population aged 18 years and older using the following formula:

#### Percentage = [Veteran Population] / [Total Population Age 18+] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations have age and sex distributions that are very different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on demographic distribution. This is particularly true for areas with a substantial GQ population (like areas with military bases, colleges, or jails).

#### **Trends Over Time**

Trends over time are produced using single-year data from the American Community Survey. Single-year data are only available for geographic regions with 100,000 population or more. Because many counties have less than 100,000 population, data are reported for the total United States, states, and Public Use Microdata Area (PUMA) regions. Starting in 2012, PUMA boundaries for many areas changed. To accommodate this change, single-year data for survey years prior to 2012 are disaggregated to the county level using population weighted proportions, and then re-summarized to current PUMA boundaries.

Single-year time trend estimates should not be compared to 5-year aggregate estimates.

## Income and Economics

### **Employment - Labor Force Participation Rate**

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

#### **Employment - Unemployment Rate**

### Data Background

The Bureau of Labor Statistics (BLS) is the principal Federal agency responsible for measuring labor market activity, working conditions, and price changes in the economy. Its mission is to collect, analyze, and disseminate essential economic information to support public and private decision-making. As an independent statistical agency, BLS serves its diverse user communities by providing products and services that are objective, timely, accurate, and relevant.

# Methodology

Unemployment statistics are downloaded from the US Bureau of Labor Statistics (BLS) Local Area Unemployment Statistics (LAUS) database. The LAUS is dataset consists of modelled unemployment estimates. It is described by the BLS as follows:

The concepts and definitions underlying LAUS data come from the Current Population Survey (CPS), the household survey that is the official measure of the labor force for the nation. State monthly model estimates are controlled in "real time" to sum to national monthly labor force estimates from the CPS. These models combine current and historical data from the CPS, the Current Employment Statistics (CES) program, and State unemployment insurance (UI) systems. Estimates for seven large areas and their respective balances of State are also model-based. Estimates for the remainder of the sub-state labor market areas are produced through a building-block approach known as the "Handbook method." This procedure also uses data from several sources, including the CPS, the CES program, State UI systems, and the decennial census, to create estimates that are adjusted to the statewide measures of employment and unemployment. Below the labor market area level, estimates are prepared using disaggregation techniques based on inputs from the decennial census, annual population estimates, and current UI data.

From the LAUS estimates, unemployment is recalculated as follows: Unemployment Rate = [Total Unemployed] / [Total Labor Force] \* 100

For more information, please visit the Bureau of Labor Statistics Local Area Unemployment Statistics web page.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

#### Income - Inequality (GINI Index)

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Counts of total households GINI index values are acquired from the U.S. Census Bureau's American Community Survey (ACS). Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. This indicator reports income inequality in the US using the GINI index. The Census Bureau defines the Gini index as "a statistical measure of income inequality ranging from 0 to 1. A measure of 1 indicates perfect inequality, i.e., one household having all the income and rest having none. A measure of 0 indicates perfect equality, i.e., all households having

an equal share of income."

This indicator draws directly from reported data and cannot be re-summarized to custom report areas. For multi-county areas, the average population-weighted GINI index value is reported. For more information about this source, refer to the United States Census 2019 Household Income data briefing website.

### Notes

#### Race and Ethnicity

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Income - Median Household Income

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

## Methodology

Median income data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. The median divides the income distribution into two equal parts: one-half of the cases falling below the median income and one-half above the median. For households and families, the median income is based on the distribution of the total number of households and families including those with no income. The median income for individuals is based on individuals 15 years old and over with income. Median income figures are only available for those geographic areas reported in the ACS. Due to the nature of medians, report areas based on multiple counties or custom areas will return "no data".

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### Race and Ethnicity

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics

are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Income - Per Capita Income

## Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Total income and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Per capita income is the mean money income received in the past 12 months computed for every man, woman, and child in a geographic area. It is derived by dividing the total income of all people 15 years old and over in a geographic area by the total population in that area based on the following formula:

#### Per Capita Income = [Total Income of Population Age 16+] / [Total Population]

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Trends Over Time**

The American Community Survey multi-year estimates are based on data collected over 5 years. For any given consecutive release of ACS 5-year estimates, 4 of the 5 years overlap. The Census Bureau discourages direct comparisons between estimates for overlapping periods; use caution when interpreting this data.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. The part of the group quarters population in the poverty universe (for example, people living in group homes or those living in agriculture workers' dormitories) is many times more likely to be in poverty than people living in households. Direct comparisons of the data would likely result in erroneous conclusions about changes in the poverty status of all people in the poverty universe.

#### Index of Disparity (ID)

The Index of Disparity (ID) used with this indicator was adopted by researchers at the National Center for Health Statistics (NCHS) and the National Institute of Health (NIH) for use with Healthy People 2010 and 2020 guidelines. This index measures the magnitude of variation in indicator percentages across groups - in this case racial and ethnic groups. Specifically, the index of disparity is defined as "the average of the absolute differences between rates for specific groups within a population and the overall population rate, divided by the rate for the overall population and expressed as a percentage". The ID values for the indicator displayed here are calculated from American Community Survey 2008-12 5-year estimates using the following four population subgroups: Non-Hispanic White; Hispanic or Latino; Black or African American; and Other Race. The Other Race category includes Asian, Native American / Alaskan Native, Native Hawaiian / Pacific Islander, Multiple Race, and Some Other Race populations.

The ID can be expressed using the following formula: Index of Disparity = 100.0 \* ((SUM(|r - R|) / n) / R)

...where r is the sub-group rate and R is the total population rate. Index values range from 0 (where all sub-groups are equal) to infinity. Index values are heavily dependent on the total population value (R), so comparisons should be made across geographic areas (county vs. state vs. nation), and not across indicators.

For more information on the index of disparity, please see the NIH research article A Summary Measure of Health Disparity.

#### Poverty - Children Below 100% FPL

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

## Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2008-2012. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2011 Subject Definitions.

## Notes

#### Trends Over Time

The American Community Survey multi-year estimates are based on data collected over 5 years. For any given consecutive release of ACS 5-year estimates, 4 of the 5 years overlap. The Census Bureau discourages direct comparisons between estimates for overlapping periods; use caution when interpreting this data.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. The part of the group quarters population in the poverty universe (for example, people living in group homes or those living in agriculture workers' dormitories) is many times more likely to be in poverty than people living in households. Direct comparisons of the data would likely result in erroneous conclusions about changes in the poverty status of all people in the poverty universe.

### Poverty - Children Eligible for Free/Reduced Price Lunch

## Data Background

The National Center for Education Statistics (NCES) is the primary federal entity for collecting, analyzing, and reporting data related to education in the United States and other nations. It fulfils a congressional mandate to collect, collate, analyze, and report full and complete statistics on the condition of education in the United States; conduct and publish reports and specialized analyses of the meaning and significance of such statistics; assist state and local education agencies in improving their statistical systems; and review and report on education activities in foreign countries. *Citation: Documentation to the NCES Common Core of Data Public Elementary/Secondary School Universe Survey (2013).* 

The National Center for Education Statistics releases a dataset containing detailed information about every public school in the United States in their annual Common Core of Data (CCD) files. The information from which this data is compiled is supplied by state education agency officials. The CCD reports information about both schools and school districts, including name, address, and phone number; descriptive information about students and staff demographics; and fiscal data, including revenues and current expenditures.

For more information, please visit the Common Core of Data web page.

## Methodology

The National School Lunch Program is a federally assisted meal program operating in public and nonprofit private schools and residential child care institutions. Children from families with incomes at or below 130 percent of the poverty level are eligible for free meals. Those with incomes between 130 percent and 185 percent of the poverty level are eligible for reduced-price meals, for which students can be charged no more than 40 cents.

Total student counts and counts for students eligible for free and reduced price lunches are acquired for the most recent school year from the NCES Common Core of Data (CCD) Public School Universe Survey. Point locations for schools are obtained by mapping the latitude and longitude coordinates for each school provided in the CCD file. School-level data are summarized to the county, state, and national levels for reporting purposes. For more information, please see the complete dataset documentation.

### Notes

### Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

### Poverty - Population Below 100% FPL

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

## Methodology

Population counts for demographic groups and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population based on the following formula:

Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Trends Over Time**

The American Community Survey multi-year estimates are based on data collected over 5 years. For any given consecutive release of ACS 5-year estimates, 4 of the 5 years overlap. The Census Bureau discourages direct comparisons between estimates for overlapping periods; use caution when interpreting this data.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### **Data Limitations**

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. The part of the group quarters population in the poverty universe (for example, people living in group homes or those living in agriculture workers' dormitories) is many times more likely to be in poverty than people living in households. Direct comparisons of the data would likely result in erroneous conclusions about changes in the poverty status of all people in the poverty universe.

# Education

### Access - Preschool Enrollment (Age 3-4)

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Population counts for population by educational attainment and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population aged 25+ based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population Age 25+] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Trends Over Time**

The American Community Survey multi-year estimates are based on data collected over 5 years. For any given consecutive release of ACS 5-year estimates, 4 of the 5 years overlap. The Census Bureau discourages direct comparisons between estimates for overlapping periods; use caution when interpreting this data.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### **Data Limitations**

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations may have educational attainment distributions that are different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on the educational attainment distribution. This is particularly true for areas with a substantial GQ population.

### Attainment - Bachelor's Degree or Higher

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

# *Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).*

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Population counts for population by educational attainment and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population aged 25+ based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population Age 25+] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Trends Over Time**

The American Community Survey multi-year estimates are based on data collected over 5 years. For any given consecutive release of ACS 5-year estimates, 4 of the 5 years overlap. The Census Bureau discourages direct comparisons between estimates for overlapping periods; use caution when interpreting this data.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations may have educational attainment distributions that are different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on the educational attainment distribution. This is particularly true for areas with a substantial GQ population.

### **Attainment - High School Graduation Rate**

# Data Background

EDFacts is a U. S. Department of Education (ED) initiative to collect, analyze, report on, and promote the use of high-quality, kindergarten through grade 12 (K–12) performance data for use in education planning, policymaking, and management and budget decision-making to improve outcomes for students. EDFacts centralizes data provided by state education agencies, local education agencies, and schools, and provides users with the ability to easily analyze and report on submitted data. ED collects performance data at the school and school-district levels and provides public use files containing data that have been modified to protect against the ability to determine personally identifiable information on students.

# Methodology

Graduation rates are acquired for all US school-districts in the United States from US Department of Education (ED) Ed*Facts* 2018-19 data tables. States are required to report graduation data to the US Department of Education under Title I, Part A of the Elementary and Secondary Education Act (ESEA). Specifically, states are required to report rates based on a cohort method, which would provide a more uniform and accurate measure of the high school graduation rate that improved comparability across states. The cohort graduation rate is defined as "the number of students who graduate in four years with a regular high school diploma divided by the number of students who form the adjusted cohort for the graduating class." From the beginning of 9th grade (or the earliest high school grade), students who are entering that grade for the first time form a cohort that is "adjusted" by adding any students who subsequently transfer into the cohort and subtracting any students who subsequently transfer out, emigrate to another country, or die.

County-level summaries are calculated by CARES using small-area estimation technique based on the proportion of the population aged 15-19 in each school district/county. The population figures for this calculation are based on data from the 2010 US Decennial Census at the census block geographic level.

For more information please consult the original data the original data or download the complete EdFacts Data Documentation.

### Notes

#### Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

#### Data Limitations

Graduation rates for some school districts are provided by EdFacts as ranges; range mid-points were calculated by CARES to facilitate data manipulation.

### **Attainment - No High School Diploma**

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American

Community Survey data users website.

# Methodology

Population counts for population by educational attainment and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population aged 25+ based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population Age 25+] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Trends Over Time**

The American Community Survey multi-year estimates are based on data collected over 5 years. For any given consecutive release of ACS 5-year estimates, 4 of the 5 years overlap. The Census Bureau discourages direct comparisons between estimates for overlapping periods; use caution when interpreting this data.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### **Data Limitations**

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations may have educational attainment distributions that are different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on the educational attainment distribution. This is particularly true for areas with a substantial GQ population.

#### **Attainment - Overview**

## Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

# *Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).*

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Population counts for population by educational attainment and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. Area demographic statistics are measured as a percentage of the total population aged 25+ based on the following formula:

#### Percentage = [Subgroup Population] / [Total Population Age 25 and up] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### Data Limitations

Beginning in 2006, the population in group quarters (GQ) was included in the ACS. Some types of GQ populations may have educational attainment distributions that are different from the household population. The inclusion of the GQ population could therefore have a noticeable impact on the educational attainment distribution. This is particularly true for areas with a substantial GQ population.

## Housing and Families

#### **Households - Overview**

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

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For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

## Methodology

Counts of households by type and relationship are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. A household includes all the people who occupy a housing unit. (People not living in households are classified as living in group quarters.) Households are classified by type according to the sex of the householder and the presence of relatives. Two types of householders are distinguished: a family householder and a nonfamily householder. A family householder is a householder living with one or more individuals related to him or her by birth, marriage, or adoption. The householder and all people in the household related to him or her are family members. A nonfamily householder is a householder living alone or with non-relatives only. Figures for this indicator are measured as a percentage of total households based on the following formula:

#### Percentage = [Households by Composition or Type] / [Total Households] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator.

### Evictions

### Data Background

The Eviction Lab is a research organization dedicated to studying the prevalence, causes, and consequences of eviction. Drawing on tens of millions of records, the Eviction Lab at Princeton University has published the first ever dataset of evictions in America, going back to 2000.

# Methodology

This indicator reports information about formal evictions based on court records from from 48 states and the District of Columbia, compiled by the Eviction Lab. Eviction records include information related to an eviction court case, such as defendant and plaintiff names, the defendant's address, monetary judgment information, and an outcome for the case.

The eviction filing rate and eviction rate are included in the Eviction Lab dataset, calculated by dividing the number of filings or evictions by the number of occupied renting households in each area. The "filing rate" is the ratio of the number of evictions filed in an area over the number of renter-occupied homes in that area. An "eviction rate" is the subset of those homes that received an eviction judgment in which renters were ordered to leave. Information on the number of renter homes in an area comes from the U.S. Census and ESRI Business Analyst demographic estimates. The data is also formatted so each observation represents a household. Details of the cleaning process can be found in the Methodology Report (PDF).

Note:

Indicator data do not include information about "informal evictions", or those that happen outside of the courtroom. Data are cleaned to standardize names and addresses; duplicate cases are dropped from the dataset.

### Housing Costs - Cost Burden (30%)

## Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

# *Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).*

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

## Methodology

Counts of total households and households by monthly housing cost are acquired from the U.S. Census Bureau's American

Community Survey (ACS). Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. The data for monthly housing costs as a percentage of household income are developed from a distribution of "Selected Monthly Owner Costs as a Percentage of Household Income" for owner-occupied and "Gross Rent as a Percentage of Household Income" for renter-occupied units. The owner-occupied categories are further separated into those with a mortgage and those without a mortgage. Indicator statistics are measured as a percentage total households using the following formula:

#### [Households with Costs Exceeding 30% of Income] / [Total Households] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### **Housing Quality - Substandard Housing**

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

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For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

## Methodology

Counts of housing units by age and condition are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2012-2016. Mapped data are summarized to 2010 census tract boundaries. Area estimates are developed at the U.S. Census Bureau, and given as a value for each geographic area. Raw counts are not provided, inhibiting the ability to produce median ages for report areas.

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2016 Code Lists, Definitions, and Accuracy.

### Housing Stock - Age

# Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically

#### different.

*Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).* 

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

### Methodology

Median year structure built data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Median year structure built divides the distribution into two equal parts: one-half of the cases falling below the median year structure built and one-half above the median. The median is rounded to the nearest calendar year.

This indicator cannot be re-summarized or re-calculated to aggregate county-level report areas, or to user-defined geographic boundaries.

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

# **Other Social & Economic Factors**

#### **Area Deprivation Index**

### Methodology

#### About the 2013 and 2015 Area Deprivation Index (ADI)

The Area Deprivation Index (ADI) allows for rankings of neighborhoods by socioeconomic status disadvantage in a region of interest (e.g. at the state or national level). It includes factors for the theoretical domains of income, education, employment, and housing quality. Index scores can be used to inform health delivery and policy, especially for the most disadvantaged neighborhood groups.

The Area Deprivation Index ranks neighborhoods relative to the all neighborhoods across the nation (National Score) or relative to other neighborhoods within just one state (State Decile). Values are assigned by ranking all census block groups from low to high and grouping the block groups/neighborhoods into bins corresponding to each 1% range. Group 1 is the lowest ADI and group 100 is the highest ADI. A block group with a ranking of 1 indicates the lowest level of "disadvantage" within the nation and an ADI with a ranking of 100 indicates the highest level of "disadvantage". The State scores are assigned at the block group level from 1 to 10. The state deciles are constructed by ranking the ADI from low to high within each state - without consideration of national ADIs. Again, group 1 is the lowest ADI (least disadvantaged) and 10 is the highest ADI (most disadvantaged).

#### **County Level Scores**

The county-level scores displayed here are population-weighted averages using the block-group level Area Deprivation Index scores and the 2010 Decennial Census total population. State decile scores are converted to a 1-100 point scale.

For more information, please visit the University of Wisconsin Neighborhood Atlas website.

#### Households with No Motor Vehicle

Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

# *Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).*

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Counts of housing units are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Mapped data are summarized to 2010 census tract boundaries. The data on vehicles available were obtained from Housing Question 11 in the 2019 American Community Survey (ACS). The question was asked at occupied housing units. These data show the number of passenger cars, vans, and pickup or panel trucks of one-ton capacity or less kept at home and available for the use of household members. Vehicles rented or leased for one month or more, company vehicles, and police and government vehicles are included if kept at home and used for non-business purposes. Dismantled or immobile vehicles are excluded. Vehicles kept at home but used only for business purposes also are excluded. For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### **Insurance - Uninsured Population (ACS)**

## Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

# *Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).*

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# Methodology

Counts of the population by health insurance status and and total area population data are acquired from the U.S. Census Bureau's American Community Survey. Data represent estimates for the 5 year period 2014-2019. Data are aggregate summaries based on 2010 Census Tract boundaries. Health insurance coverage status is classified in the ACS according to yes/no responses to questions (16a - 16h) representing eight categories of health insurance, including: Employer-based, Directly-purchased, Medicare, Medicaid/Medical Assistance, TRICARE, VA health care, Indian Health Service, and Other. An eligibility edit was applied to give Medicaid, Medicare, and TRICARE coverage to individuals based on program eligibility rules. People were considered insured if they reported at least one "yes" to Questions 16a - 16f. Indicator statistics are measured as a percentage of the universe population using the following formula:

#### Percentage = [Subgroup Population] / [Total Population] \* 100

For more information on the data reported in the American Community Survey, please see the complete American Community Survey 2019 Subject Definitions.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories in the American Community Survey (ACS) based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Indicator race and ethnicity statistics are generated from self-identified survey responses. Using the OMB standard, the available race categories in the ACS are: White, Black, American Indian/Alaskan Native, Asian, and Other. An ACS survey respondent may identify as one race alone, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races". The minimum ethnicity categories are: Hispanic or Latino, and Not Hispanic or Latino. Respondents may only choose one ethnicity. All social and economic data are reported in the ACS public use files by race alone, ethnicity alone, and for the white non-Hispanic population.

#### **Data Limitations**

The population 'universe' for most health insurance coverage estimates is the civilian noninstitutionalized population, which excludes active-duty military personnel and the population living in correctional facilities and nursing homes. Some noninstitutionalized group quarters (GQ) populations have health insurance coverage distributions that are different from the household population (e.g., the prevalence of private health insurance among residents of college dormitories is higher than the household population). The proportion of the universe that is in the noninstitutionalized GQ populations could therefore have a noticeable impact on estimates of the health insurance coverage. Institutionalized GQ populations may also have health insurance coverage distributions that are different from the civilian noninstitutionalized population, the distributions in the published tables may differ slightly from how they would look if the total population were represented.

#### **SNAP Benefits - Population Receiving SNAP (SAIPE)**

### Data Background

The U.S. Census Bureau's Small Area Income and Poverty Estimates (SAIPE) provides annual estimates at the state, county, and school district level of income and poverty statistics for the administration of federal programs. This data is used to supplement the income and poverty estimates available from the American Community Survey (ACS), which only releases single-year estimates for counties and other areas with population size of 65,000 or more. SAIPE data is modeled using estimates by combining survey data (from the American Community Survey) with population estimates and administrative records (from the SNAP Benefit Program and SSA Administration). For school districts, the SAIPE program uses the model-based county estimates and inputs from federal tax information and multi-year survey data.

For more information, please refer to the US Census Bureau's Small Area Income and Poverty Estimates website.

## Methodology

Counts of the number of persons receiving SNAP benefits are obtained for the SAIPE datasets by the Census Bureau from the United States Department of Agriculture, Food and Nutrition Service (USDA/FNS). In most states, the SNAP recipient numerator represents the total count of participants for the month of July in the estimation year. In a few cases, however, states only provided data only for other reference periods. Population estimates are obtained for the SAIPE datasets from the US Census Bureau's Population Estimates Program (PEP) and represent the poverty universe (excluding populations in group quarters, for example). Indicator percentages are summarized from the data inputs based on the following formula:

#### Percentage = SUM [SNAP Recipients] / SUM [Total Population] \* 100

For more information about the data used in these estimates, please visit the Small Area Income and Poverty Estimates

website and view the provided Information About Data Inputs.

### Notes

#### Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

### Social Vulnerability Index

### Methodology

#### About the Social Vulnerability Index (SVI)

The degree to which a community exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowdedhouseholds, may affect that community's ability to prevent human suffering and financial loss in the event of disaster. These factors describe a community's social vulnerability.

The Geospatial Research, Analysis & Services Program (GRASP) created the Centers for Disease Control and Prevention Social Vulnerability Index (CDC SVI or simply SVI, hereafter) to help public health officials and emergency response planners identify and map the communities that will most likely need support before, during, and after a hazardous event. SVI indicates the relative vulnerability of every U.S. Census tract. Census tracts are subdivisions of counties for which the Census collects statistical data. SVI ranks the tracts on 15 social factors, including unemployment, minority status, and disability, and further groups them into four related themes. Thus, each tract receives a ranking for each Census variable and for each of the four themes, as well as an overall ranking. In addition to tract-level rankings, SVI 2010, 2014, 2016, and 2018 also have corresponding rankings at the county level. Notes below that describe "tract" methods also refer to county methods. How can CDC SVI help communities be better prepared for hazardous events? SVI provides specific socially and spatially relevant information to help public health officials and local planners better prepare communities to respond to emergency events such as severe weather, floods, disease outbreaks, or chemical exposure.

### **Teen Births**

### Data Background

The Division of Vital Statistics is a branch of the Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS) responsible for maintaining birth and death records for the nation. Data are compiled for the National Vital Statistics System (NVSS) through a joint effort between the NCHS and various state and local health agencies, who are responsible for registering vital events – births, deaths, marriages, divorces, and fetal deaths. NVSS statistics are released annually in various data warehouses, including CDC WONDER, VitalStats, and the Health Indicator Warehouse.

### Violent Crime - Total

### Data Background

The Federal Bureau of Investigation (FBI) is a governmental agency belonging to the United States Department of Justice that serves to protect and defend the United States against terrorist and foreign intelligence threats, to uphold and enforce the criminal laws of the United States, and to provide leadership and criminal justice services to federal, state, municipal, and international agencies and partners. The FBI's Uniform Crime Reporting (UCR) Program has been the starting place for law enforcement executives, students of criminal justice, researchers, members of the media, and the public at large seeking information on crime in the nation. The program was conceived in 1929 by the International Association of Chiefs of Police to meet the need for reliable uniform crime statistics for the nation. In 1930, the FBI was tasked with collecting, publishing, and archiving those statistics.

Today, four annual publications, Crime in the United States, National Incident-Based Reporting System, Law Enforcement Officers Killed and Assaulted, and Hate Crime Statistics are produced from data received from over 18,000 city, university/college, county, state, tribal, and federal law enforcement agencies voluntarily participating in the program. The

crime data are submitted either through a state UCR Program or directly to the FBI's UCR Program. For more information, please visit the FBI's Uniform Crime Reports website.

# Methodology

Crime totals, population figures, and crime rates are multi-year county-level estimates created by the National Archive of Criminal Justice Data (NACJD) based on agency-level\* records in a file obtained from the FBI, which also provides aggregated county totals. NACJD imputes missing data and then aggregates the data to the county-level. Violent crimes consist of homicide, forcible rape, robbery, and aggravated assault. Rates are reported as the number of crimes per 100,000 population using the following formula:

#### Crime Rate = [Number Violent Crimes] / [Total Population] \*100,000

\*Police jurisdictions may be defined by the boundary of a county, county subdivision, or city. Regional police departments may consist of multiple cities or subdivisions.

Access to the complete methodology is available through the Inter-university Consortium for Political and Social Research (IPSCOR), a repository for the NAJDC Uniform Crime Reporting Program Data Series.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

#### **Data Limitations**

1. Participation by law enforcement agencies in the UCR program is voluntary. Sub-state data and maps do not necessarily represent an exhaustive list of crimes due to gaps in reporting.

2. Data for forcible rape was not consistenly reported by city and county agencies in the state of Minnesota. Forcible rapes are not included in the violent crime summaries for cities and counties in that state.

3. Some institutions of higher education have their own police departments, which handle offenses occurring within campus grounds. These offenses are not included in the violent crime statistics, but can be obtained from the Uniform Crime Reports Universities and Colleges data tables.

#### **Data Suppression**

Suppression is used to avoid misinterpretation when rates are unreliable or unstable. When the FBI determines that an agency's data collection methodology does not comply with national UCR guidelines, the figure(s) for that agency's offense(s) are not be included. For further details please see the original data tables available online through the FBI Crime in the US website.

### **Property Crime - Total**

### Data Background

The Federal Bureau of Investigation (FBI) is a governmental agency belonging to the United States Department of Justice that serves to protect and defend the United States against terrorist and foreign intelligence threats, to uphold and enforce the criminal laws of the United States, and to provide leadership and criminal justice services to federal, state, municipal, and international agencies and partners. The FBI's Uniform Crime Reporting (UCR) Program has been the starting place for law enforcement executives, students of criminal justice, researchers, members of the media, and the public at large seeking information on crime in the nation. The program was conceived in 1929 by the International Association of Chiefs of Police to meet the need for reliable uniform crime statistics for the nation. In 1930, the FBI was tasked with collecting, publishing, and archiving those statistics.

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# Methodology

Crime totals, population figures, and crime rates are multi-year county-level estimates created by the National Archive of Criminal Justice Data (NACJD) based on agency-level\* records in a file obtained from the FBI, which also provides aggregated county totals. NACJD imputes missing data and then aggregates the data to the county-level. Violent crimes consist of homicide, forcible rape, robbery, and aggravated assault. Rates are reported as the number of crimes per 100,000 population using the following formula:

#### Crime Rate = [Number Violent Crimes] / [Total Population] \*100,000

\*Police jurisdictions may be defined by the boundary of a county, county subdivision, or city. Regional police departments may consist of multiple cities or subdivisions.

Access to the complete methodology is available through the Inter-university Consortium for Political and Social Research (IPSCOR), a repository for the NAJDC Uniform Crime Reporting Program Data Series.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

#### Data Limitations

1. Participation by law enforcement agencies in the UCR program is voluntary. Sub-state data and maps do not necessarily represent an exhaustive list of crimes due to gaps in reporting.

2. Data for forcible rape was not consistenly reported by city and county agencies in the state of Minnesota. Forcible rapes are not included in the violent crime summaries for cities and counties in that state.

3. Some institutions of higher education have their own police departments, which handle offenses occurring within campus grounds. These offenses are not included in the violent crime statistics, but can be obtained from the Uniform Crime Reports Universities and Colleges data tables.

#### Data Suppression

Suppression is used to avoid misinterpretation when rates are unreliable or unstable. When the FBI determines that an agency's data collection methodology does not comply with national UCR guidelines, the figure(s) for that agency's offense(s) are not be included. For further details please see the original data tables available online through the FBI Crime in the US website.

### Voter Participation Rate

# Data Background

Townhall's Election 2020 section breaks down votes cast by political party for all reporting counties in the United States. The election results obtained from this source are current as of December 14, 2020.

# Methodology

Voter participate rates for the 2020 Presidential election are calculated by dividing total votes cast for Presidential candidates by the total citizen voting age population. Votes cast are obtained from Townhall.com using a GitHub data API. Downloaded data include total votes cast and votes cast for the two major party candidates. Citizen age 18+ figures are obtained from the U.S. Census Bureau's 2015-19 American Community Survey. Because not all eligible citizens are registered voters, the values may be systematically lower than actual participation rates.

### Young People Not in School and Not Working

### Data Background

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely social, economic, housing, and demographic data every year. The ACS has an annual sample size of about 3.5 million

addresses, with survey information collected nearly every day of the year. Data are pooled across a calendar year to produce estimates for that year. As a result, ACS estimates reflect data that have been collected over a period of time rather than for a single point in time as in the decennial census, which is conducted every 10 years and provides population counts as of April 1. The Census Bureau combines 5 consecutive years of ACS data to produce estimates for geographic areas with fewer than 65,000 residents. These 5-year estimates represent data collected over a period of 60 months. Because the ACS is based on a sample, rather than all housing units and people, ACS estimates have a degree of uncertainty associated with them, called sampling error. In general, the larger the sample, the smaller the level of sampling error. Data users should be careful in drawing conclusions about small differences between two ACS estimates because they may not be statistically different.

Citation: Citation: U.S. Census Bureau: UNDERSTANDING AND USING AMERICAN COMMUNITY SURVEY DATA: WHAT ALL DATA USERS NEED TO KNOW (2018).

For more information about this source, including data collection methodology and definitions, refer to the American Community Survey data users website.

# **Physical Environment**

### Air & Water Quality - Particulate Matter 2.5

### Data Background

The National Environmental Public Health Tracking Network (Tracking Network) is a system of integrated health, exposure, and hazard information and data from a variety of national, state, and city sources. The Tracking Network provides information about the following types of data:

Health effect data: Data about health conditions and diseases, such as asthma and birth defects.

**Environmental hazard data:** Data about chemicals or other substances such as carbon monoxide and air pollution in the environment. **Exposure data:** Data about the amount of a chemical in a person's body, such as lead in blood. **Other data:** Data that helps us learn about relationships between exposures and health effects. For example, information about age, sex, race, and behavior or lifestyle choices that may help us understand why a person has a particular health problem.

State and county level Tracking Network data is available to view or download through the Map Viewer or through the Indicators and Data web page.

## Methodology

Indicator data are acquired from the Centers for Disease Control and Prevention (CDC) and Environmental Protection Agency (EPA) National Environmental Public Health Tracking Network (NEPHTN) Air Quality Data program. Data elements include the number and percentage of days with maximum 8-hour average ozone or particulate matter concentration over the National Ambient Air Quality Standard (75 ppb and 35 μg/L, respectively).

EPA provides modeled estimates of air quality using the Downscaler (DS) model, which uses a statistical approach to fuse monitoring data in areas where monitors exist, and relies on Community Multiscale Air Quality (CMAQ) modeled output in areas without monitors. DS modeled estimates are available by census tract centroid (the geographic center of the census tract). The county level estimates displayed here are crude and/or population weighted (Census 2010) averages created by aggregating the modeled census-tract level estimates. These county-level estimates may differ from the estimates available through the NEPHTN, which use actual monitor data when available, or the *maximum* value of the census tract modeled estimates for days and locations without monitors.

For more information on the data reported here, please visit the CDC's Environmental Public Health Tracking Network: Ozone - Days Above Regulatory Standard or PM2.5 - Days Above Regulatory Standard Indicator Details web pages.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator.

### **Built Environment - Broadband Access**

# Data Background

The National Broadband Map (NBM) is a searchable and interactive website that allows users to view broadband availability across every neighborhood in the United States. First published in February 2011, the NBM was updated every six months through April 2015 with data from the <u>State Broadband Initiative</u>. The NBM was created by the National Telecommunications and Information Administration (NTIA), in collaboration with the Federal Communications Commission (FCC), and in partnership with 50 states, five territories and the District of Columbia. Broadband deployment data is now collected biannually from service providers by the FCC through the Form 477 Data Program.

# Methodology

Internet Service Providers (ISPs) provide data to the FCC about which census blocks they serve, the type of service, and the speeds available to that block through FCC Form 477. Broadband is currently defined as having download speeds greater than or equal to 25 megabits per second (Mbps) and an upload speed of greater than or equal to 3 Mbps. If an ISP serves, or has the ability to serve, a single house on a block with internet capable of broadband speed, the block is considered to have 100% broadband access. CARES aggregates the FCC block level service data and population data from the American Community Survey to calculate broadband access and provider statistics at other geographies.

### **Built Environment - Liquor Stores**

### Data Background

County Business Patterns (CBP) is an annual series that provides sub-national economic data by industry. Data for establishments are presented by geographic area, 6-digit NAICS industry, legal form of organization (U.S. and state only), and employment size class. Information is available on the number of establishments, employment during the week of March 12, first quarter payroll, and annual payroll. ZIP Code Business Patterns (ZBP) data are available shortly after the release of County Business Patterns.

County Business Patterns basic data items are extracted from the Business Register (BR), a database of all known single and multi-establishment employer companies maintained and updated by the U.S. Census Bureau. The BR contains the most complete, current, and consistent data for business establishments. The annual Company Organization Survey provides individual establishment data for multi-establishment companies. Data for single-establishment companies are obtained from various Census Bureau programs, such as the Economic Census, Annual Survey of Manufactures and Current Business Surveys, as well as from administrative record sources.

#### Citation: U.S. Census Bureau: County Business Patterns (2017).

For more information about this source, including data collection methodology and definitions, refer to the County Business Patterns website.

## Methodology

Population figures are acquired for this indicator from the U.S. Census Bureau, 2010 Decennial Census, Summary File 1. Industry counts are acquired from the U.S. Census Bureau, County Business Patterns (CBP) data file. Industries are stratified based on the 2017 North American Industry Classification System (NAICS) a coding system used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. Establishment rates for each county are derived using the following formula:

#### Rate = [Establishment Count] / [Population] \* 100,000

Prior to reference year 2017, the number of establishments in a particular county was not considered sensitive; therefore, counts of establishments were released without any disclosure avoidance methods applied. Beginning with reference year 2017, counties with fewer than 3 establishments have been omitted from the release. This change to the level of information released causes many low population counties to be excluded and prevents comparison with previous CBP data releases.

The specific NAICS codes used to identify establishment categories within the County Business Patterns (CBP) are listed below.

- Banking institutions: 522110, 522130, and 522120
   Establishments primarily engaged in accepting deposits and making loans, including Commercial Banking, Credit Unions, and Savings Institutions.
- Fast food restaurants: 722513 (formerly 722211) Any "limited service" establishments where the customer typically orders or selects items and pay before eating. Establishments may include carryout restaurants, delicatessens, drive-ins, pizza delivery shops, sandwich shops, and other fast food restaurants
- Grocery stores and supermarkets: 445110 Grocery stores are establishments engaged in selling a "general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry". Examples include supermarkets, commissaries and food stores. Convenience stores are excluded.
- Liquor stores: 445310 Establishments engaged in "retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor". Bars and other venues serving alcoholic beverages intended for immediate consumption on the premises are not included.
- Recreational facilities: 713940 Establishments engaged in operating facilities which offer "exercise and other active physical fitness conditioning or recreational sports activities". Examples include athletic clubs, gymnasiums, dance centers, tennis clubs, and swimming pools.
- Social associations: 711211, 713910, 713940, 713950, 813110, 813410, 813990, 813910, 813920, 813930, and 813940
  This industry comprises establishments primarily engaged in promoting the civic and social interests of their members,
  promoting organized labor, political organizations, business associations, sporting associations, fitness clubs, and
  country clubs.

A complete list of NAICS codes and definitions is available using the NAICS Association's free lookup service .

### Notes

#### Data Limitations

1. Data are reported based on the primary NAICS code of the establishment. By definition, the primary NAICS code should reflect 50% or more of the establishment's activity. This definition may exclude some establishments from a particular industry classification. For example, a convenience store which also sells liquor may be classified only as a convenience store (445120) and not a beer, wine and liquor store (445310).

#### Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

#### Data Limitations

Reported data represent summaries limited by county boundaries. When comparing rates, consider the following:

1) Rates assume uniform distribution of both establishments and populations throughout the county and may not detect disparities in access for rural or minority populations.

2) Summaries may over-represent or under-represent county rates when populations or establishments are highly concentrated on county border lines.

3) Rates do not describe quality of the establishment or utilization frequency.

### Data Limitations

The custom area estimates of the establishment counts are rounded to the nearest whole number, thereby generating the rounding error. It's possible that the aggregation of establishments of all the census tracts within a county might not exactly equal the count of the county.

### **Built Environment - Recreation and Fitness Facility Access**

## Data Background

County Business Patterns (CBP) is an annual series that provides sub-national economic data by industry. Data for establishments are presented by geographic area, 6-digit NAICS industry, legal form of organization (U.S. and state only),

and employment size class. Information is available on the number of establishments, employment during the week of March 12, first quarter payroll, and annual payroll. ZIP Code Business Patterns (ZBP) data are available shortly after the release of County Business Patterns.

County Business Patterns basic data items are extracted from the Business Register (BR), a database of all known single and multi-establishment employer companies maintained and updated by the U.S. Census Bureau. The BR contains the most complete, current, and consistent data for business establishments. The annual Company Organization Survey provides individual establishment data for multi-establishment companies. Data for single-establishment companies are obtained from various Census Bureau programs, such as the Economic Census, Annual Survey of Manufactures and Current Business Surveys, as well as from administrative record sources.

Citation: U.S. Census Bureau: County Business Patterns (2017).

For more information about this source, including data collection methodology and definitions, refer to the County Business Patterns website.

# Methodology

Population figures are acquired for this indicator from the U.S. Census Bureau, 2010 Decennial Census, Summary File 1. Industry counts are acquired from the U.S. Census Bureau, County Business Patterns (CBP) data file. Industries are stratified based on the 2017 North American Industry Classification System (NAICS) a coding system used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. Establishment rates for each county are derived using the following formula:

#### Rate = [Establishment Count] / [Population] \* 100,000

Prior to reference year 2017, the number of establishments in a particular county was not considered sensitive; therefore, counts of establishments were released without any disclosure avoidance methods applied. Beginning with reference year 2017, counties with fewer than 3 establishments have been omitted from the release. This change to the level of information released causes many low population counties to be excluded and prevents comparison with previous CBP data releases.

The specific NAICS codes used to identify establishment categories within the County Business Patterns (CBP) are listed below.

- Banking institutions: 522110, 522130, and 522120 Establishments primarily engaged in accepting deposits and making loans, including Commercial Banking, Credit Unions, and Savings Institutions.
- Fast food restaurants: 722513 (formerly 722211) Any "limited service" establishments where the customer typically orders or selects items and pay before eating. Establishments may include carryout restaurants, delicatessens, drive-ins, pizza delivery shops, sandwich shops, and other fast food restaurants
- Grocery stores and supermarkets: 445110 Grocery stores are establishments engaged in selling a "general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry". Examples include supermarkets, commissaries and food stores. Convenience stores are excluded.
- Liquor stores: 445310 Establishments engaged in "retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor". Bars and other venues serving alcoholic beverages intended for immediate consumption on the premises are not included.
- Recreational facilities: 713940 Establishments engaged in operating facilities which offer "exercise and other active physical fitness conditioning or recreational sports activities". Examples include athletic clubs, gymnasiums, dance centers, tennis clubs, and swimming pools.
- Social associations: 711211, 713910, 713940, 713950, 813110, 813410, 813990, 813910, 813920, 813930, and 813940
  This industry comprises establishments primarily engaged in promoting the civic and social interests of their members,
  promoting organized labor, political organizations, business associations, sporting associations, fitness clubs, and
  country clubs.

A complete list of NAICS codes and definitions is available using the NAICS Association's free lookup service .

## Notes

#### Data Limitations

1. Data are reported based on the primary NAICS code of the establishment. By definition, the primary NAICS code should reflect 50% or more of the establishment's activity. This definition may exclude some establishments from a particular industry classification. For example, a convenience store which also sells liquor may be classified only as a convenience store (445120) and not a beer, wine and liquor store (445310).

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator.

#### Data Limitations

Reported data represent summaries limited by county boundaries. When comparing rates, consider the following: 1) Rates assume uniform distribution of both establishments and populations throughout the county and may not detect disparities in access for rural or minority populations.

2) Summaries may over-represent or under-represent county rates when populations or establishments are highly concentrated on county border lines.

3) Rates do not describe quality of the establishment or utilization frequency.

#### Data Limitations

The custom area estimates of the establishment counts are rounded to the nearest whole number, thereby generating the rounding error. It's possible that the aggregation of establishments of all the census tracts within a county might not exactly equal the count of the county.

### **Climate & Health - Drought Severity**

### Data Background

The U.S. Drought Monitor, established in 1999, is a weekly map of drought conditions that is produced jointly by the National Oceanic and Atmospheric Administration, the U.S. Department of Agriculture, and the National Drought Mitigation Center (NDMC) at the University of Nebraska-Lincoln. The U.S. Drought Monitor website is hosted and maintained by the NDMC. The map is based on measurements of climatic, hydrologic and soil conditions as well as reported impacts and observations from more than 350 contributors around the country. The U.S. Drought Monitor, a composite index that includes many indicators, is the drought map that policymakers and media use in discussions of drought and in allocating drought relief. For more about this source, please visit the United States Drought Monitor web page.

# Methodology

This indicator reports the percentage of weeks in drought, by drought severity level. Data are based on analysis of weekly Drought Monitor shapefiles, where drought is defined as a moisture deficit bad enough to have social, environmental or economic effects. This Drought Monitor weekly analysis reports the area of the United States experiencing drought, by drought severity level. D1 is the least intense level and D4 the most intense. D0 areas are not in drought, but are experiencing abnormally dry conditions that could turn into drought or are recovering from drought but are not yet back to normal.

156 weeks of data presented in this format were analyzed by CARES to generate the 3-year average drought statistics shown here. Analysis involved intersecting census block group centroids with each of the weekly US Drought Monitor shapefiles. Resulting figures show the percentage of weeks that the report areas experience drought at each of the Drought Monitor levels. The percentage of weeks in *Any Drought* includes levels D1 through D4. Report area figures are population-weighted based on the following formula:

#### Percentage = [SUM(Number of Weeks at $D_x * P$ ) / SUM(Total Weeks \* P)] \* 100.

Where  $D_x$  is the drought severity level and P is the population of each census block group.

For more information about the original data used in this calculation, please see the US Drought Monitor US Drought Monitor GIS Data Archive web page.

# Data Background

County Business Patterns (CBP) is an annual series that provides sub-national economic data by industry. Data for establishments are presented by geographic area, 6-digit NAICS industry, legal form of organization (U.S. and state only), and employment size class. Information is available on the number of establishments, employment during the week of March 12, first quarter payroll, and annual payroll. ZIP Code Business Patterns (ZBP) data are available shortly after the release of County Business Patterns.

County Business Patterns basic data items are extracted from the Business Register (BR), a database of all known single and multi-establishment employer companies maintained and updated by the U.S. Census Bureau. The BR contains the most complete, current, and consistent data for business establishments. The annual Company Organization Survey provides individual establishment data for multi-establishment companies. Data for single-establishment companies are obtained from various Census Bureau programs, such as the Economic Census, Annual Survey of Manufactures and Current Business Surveys, as well as from administrative record sources.

Citation: U.S. Census Bureau: County Business Patterns (2017).

For more information about this source, including data collection methodology and definitions, refer to the County Business Patterns website.

# Methodology

Population figures are acquired for this indicator from the U.S. Census Bureau, 2010 Decennial Census, Summary File 1. Industry counts are acquired from the U.S. Census Bureau, County Business Patterns (CBP) data file. Industries are stratified based on the 2017 North American Industry Classification System (NAICS) a coding system used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. Establishment rates for each county are derived using the following formula:

#### Rate = [Establishment Count] / [Population] \* 100,000

Prior to reference year 2017, the number of establishments in a particular county was not considered sensitive; therefore, counts of establishments were released without any disclosure avoidance methods applied. Beginning with reference year 2017, counties with fewer than 3 establishments have been omitted from the release. This change to the level of information released causes many low population counties to be excluded and prevents comparison with previous CBP data releases.

The specific NAICS codes used to identify establishment categories within the County Business Patterns (CBP) are listed below.

- Banking institutions: 522110, 522130, and 522120 Establishments primarily engaged in accepting deposits and making loans, including Commercial Banking, Credit Unions, and Savings Institutions.
- Fast food restaurants: 722513 (formerly 722211) Any "limited service" establishments where the customer typically orders or selects items and pay before eating. Establishments may include carryout restaurants, delicatessens, drive-ins, pizza delivery shops, sandwich shops, and other fast food restaurants
- Grocery stores and supermarkets: 445110 Grocery stores are establishments engaged in selling a "general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry". Examples include supermarkets, commissaries and food stores. Convenience stores are excluded.
- Liquor stores: 445310 Establishments engaged in "retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor". Bars and other venues serving alcoholic beverages intended for immediate consumption on the premises are not included.
- Recreational facilities: 713940 Establishments engaged in operating facilities which offer "exercise and other active physical fitness conditioning or recreational sports activities". Examples include athletic clubs, gymnasiums, dance centers, tennis clubs, and swimming pools.
- Social associations: 711211, 713910, 713940, 713950, 813110, 813410, 813990, 813910, 813920, 813930, and 813940
  This industry comprises establishments primarily engaged in promoting the civic and social interests of their members,

promoting organized labor, political organizations, business associations, sporting associations, fitness clubs, and country clubs.

A complete list of NAICS codes and definitions is available using the NAICS Association's free lookup service .

### Notes

#### Data Limitations

1. Data are reported based on the primary NAICS code of the establishment. By definition, the primary NAICS code should reflect 50% or more of the establishment's activity. This definition may exclude some establishments from a particular industry classification. For example, a convenience store which also sells liquor may be classified only as a convenience store (445120) and not a beer, wine and liquor store (445310).

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator.

#### **Data Limitations**

Reported data represent summaries limited by county boundaries. When comparing rates, consider the following: 1) Rates assume uniform distribution of both establishments and populations throughout the county and may not detect disparities in access for rural or minority populations.

2) Summaries may over-represent or under-represent county rates when populations or establishments are highly concentrated on county border lines.

3) Rates do not describe quality of the establishment or utilization frequency.

#### Data Limitations

The custom area estimates of the establishment counts are rounded to the nearest whole number, thereby generating the rounding error. It's possible that the aggregation of establishments of all the census tracts within a county might not exactly equal the count of the county.

#### Food Environment - Food Desert Census Tracts

### Data Background

The Food Access Research Atlas (FARA) presents a spatial overview of food access indicators for populations using different measures of supermarket accessibility. The FARA is a compliment to the USDA's Food Environment Atlas, which houses county-level food-related data. The FARA provides census-tract level detail of the food access measures, including food desert census tracts. Estimates in the latest version of the Food Access Research Atlas draw from various sources, including the 2019 STARS (Store Tracking and Redemption System) directory of stores authorized to accept SNAP benefits and the 2019 Trade Dimensions TDLinx directory of stores, the 2010 Decennial Census, and the 2014-18 American Community Survey. FARA estimates are released approximately every 5 years, allowing for comparisons of the food environment for years 2010, 2015, and 2019.

For more information about this source, including the methodology and data definitions please visit the Food Access Research Atlas web page.

### Methodology

This indicator reports the number of food deserts in the report area, the the total and percentage of the population living in a food desert. A food desert is defined as a low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store. Furthermore, to qualify as a food desert tract, at least 33 percent of the tract's population or a minimum of 500 people in the tract must have low access to a supermarket or large grocery store. A low-income census tract is defined as any census tract where the poverty rate for that tract is at least 20 percent, or for tracts not located within a metropolitan area, the median family income for the tract does not exceed 80 percent of statewide median family income. Some census tracts that contain supermarkets or large grocery stores may meet the criteria of a food desert if a substantial number or share of people within that census tract is more than 1 mile (urban areas) or 10 miles (rural areas) from the nearest supermarket. Furthermore, some residents of food desert census tracts may live within 1 or 10 miles of a supermarket; these residents are not counted as low access and thus not counted in the total. Census tract-level data used in this indicator were acquired from the USDA Food Access Research Atlas (FARA) and

aggregated to generate county and state-level estimates.

For more information, please refer to the Food Access Research Atlas Documentation.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

### Food Environment - Grocery Stores

# Data Background

County Business Patterns (CBP) is an annual series that provides sub-national economic data by industry. Data for establishments are presented by geographic area, 6-digit NAICS industry, legal form of organization (U.S. and state only), and employment size class. Information is available on the number of establishments, employment during the week of March 12, first quarter payroll, and annual payroll. ZIP Code Business Patterns (ZBP) data are available shortly after the release of County Business Patterns.

County Business Patterns basic data items are extracted from the Business Register (BR), a database of all known single and multi-establishment employer companies maintained and updated by the U.S. Census Bureau. The BR contains the most complete, current, and consistent data for business establishments. The annual Company Organization Survey provides individual establishment data for multi-establishment companies. Data for single-establishment companies are obtained from various Census Bureau programs, such as the Economic Census, Annual Survey of Manufactures and Current Business Surveys, as well as from administrative record sources.

Citation: U.S. Census Bureau: County Business Patterns (2017).

For more information about this source, including data collection methodology and definitions, refer to the County Business Patterns website.

# Methodology

Population figures are acquired for this indicator from the U.S. Census Bureau, 2010 Decennial Census, Summary File 1. Industry counts are acquired from the U.S. Census Bureau, County Business Patterns (CBP) data file. Industries are stratified based on the 2017 North American Industry Classification System (NAICS) a coding system used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. Establishment rates for each county are derived using the following formula:

#### Rate = [Establishment Count] / [Population] \* 100,000

Prior to reference year 2017, the number of establishments in a particular county was not considered sensitive; therefore, counts of establishments were released without any disclosure avoidance methods applied. Beginning with reference year 2017, counties with fewer than 3 establishments have been omitted from the release. This change to the level of information released causes many low population counties to be excluded and prevents comparison with previous CBP data releases.

The specific NAICS codes used to identify establishment categories within the County Business Patterns (CBP) are listed below.

- Banking institutions: 522110, 522130, and 522120 Establishments primarily engaged in accepting deposits and making loans, including Commercial Banking, Credit Unions, and Savings Institutions.
- Fast food restaurants: 722513 (formerly 722211) Any "limited service" establishments where the customer typically orders or selects items and pay before eating. Establishments may include carryout restaurants, delicatessens, drive-ins, pizza delivery shops, sandwich shops, and other fast food restaurants
- Grocery stores and supermarkets: 445110

Grocery stores are establishments engaged in selling a "general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry". Examples include supermarkets, commissaries and food stores. Convenience stores are excluded.

- Liquor stores: 445310 Establishments engaged in "retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor". Bars and other venues serving alcoholic beverages intended for immediate consumption on the premises are not included.
- Recreational facilities: 713940 Establishments engaged in operating facilities which offer "exercise and other active physical fitness conditioning or recreational sports activities". Examples include athletic clubs, gymnasiums, dance centers, tennis clubs, and swimming pools.
- Social associations: 711211, 713910, 713940, 713950, 813110, 813410, 813990, 813910, 813920, 813930, and 813940
  This industry comprises establishments primarily engaged in promoting the civic and social interests of their members,
  promoting organized labor, political organizations, business associations, sporting associations, fitness clubs, and
  country clubs.

A complete list of NAICS codes and definitions is available using the NAICS Association's free lookup service .

### Notes

#### Data Limitations

1. Data are reported based on the primary NAICS code of the establishment. By definition, the primary NAICS code should reflect 50% or more of the establishment's activity. This definition may exclude some establishments from a particular industry classification. For example, a convenience store which also sells liquor may be classified only as a convenience store (445120) and not a beer, wine and liquor store (445310).

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator.

#### Data Limitations

Reported data represent summaries limited by county boundaries. When comparing rates, consider the following: 1) Rates assume uniform distribution of both establishments and populations throughout the county and may not detect disparities in access for rural or minority populations.

2) Summaries may over-represent or under-represent county rates when populations or establishments are highly concentrated on county border lines.

3) Rates do not describe quality of the establishment or utilization frequency.

#### Data Limitations

The custom area estimates of the establishment counts are rounded to the nearest whole number, thereby generating the rounding error. It's possible that the aggregation of establishments of all the census tracts within a county might not exactly equal the count of the county.

### Food Environment - SNAP-Authorized Food Stores

## Data Background

The Food and Nutrition Service (FNS) is an agency of USDA's Food, Nutrition, and Consumer Services. FNS works to end hunger and obesity through the administration of 15 federal nutrition assistance programs including WIC, Supplemental Nutrition Assistance Program (SNAP), and school meals. In partnership with State and Tribal governments, FNS' pograms serve one in four Americans during the course of a year. The FNS mission is to increase food security and reduce hunger by providing children and low-income people access to food, a healthful diet and nutrition education in a way that supports American agriculture and inspires public confidence.

# Methodology

Locations of SNAP-Authorized retailers are acquired from the US Department of Agriculture (USDA) Food and Nutrition Service (FNS) SNAP Retailers Locator. These data were processed and each retailer was assigned to the census tract which it fell entirely within. Counts of retailers per each census tract were generated. SNAP-retailer access rates were then calculated for each tract based on the number of stores per 10,000 population. Locations of SNAP-authorized retailers are compiled by the USDA's Food and Nutrition Service, SNAP Benefits Redemption Division. This data are updated periodically and was last current as of April 4, 2019. Population data are from the U.S. Census Bureau 2010 Decennial Census. Indicator data are presented as a rate per 10,000 population based on the following formula:

#### Rate = [SNAP-Authorized Retailers] / [Total Population] \* 10,000

For more information, please refer to the SNAP Retailer Locator documentation.

### Notes

#### Data Limitations

Reported data represent summaries limited by census tract boundaries. When comparing rates, consider the following: 1) Rates assume uniform distribution of both establishments and populations throughout the tract and may not detect disparities in access for rural or minority populations.

2) Summaries may over-represent or under-represent tract rates when populations or establishments are highly concentrated near tract borders.

3) Rates do not describe quality of the establishment or utilization frequency.

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator.

# **Clinical Care and Prevention**

#### Cancer Screening - Mammogram (Medicare)

### Data Background

The Mapping Medicare Disparities (MMD)Tool is an interactive web-based map identifying and understanding geographic areas of disparities in chronic diseases between subgroups of Medicare beneficiaries. The MMD Tool identifies disparities between sub-populations (e.g., racial and ethnic groups) in health outcomes, utilization, and spending. The MMD Tool also allows quality measure comparisons between different hospitals at the national, state/territory, or county level. The MMD Tool offers data on hospitalization, readmission, mortality, emergency department visit rates of various chronic conditions such as Alzheimer, dementia, asthma, breast, lung and prostate cancer, kidney disease, depression and more. For more information about the tool and data, please see the Mapping Medicare Disparities Technical Documentation.

### Methodology

Data for this indicator are obtained from the Mapping Medicare Disparities data tool. The analysis population for calculating the preventive services uptake rates is 100 percent of Medicare beneficiaries who have at least one month of enrollment in Medicare FFS Part B for the selected year (i.e., 2012, 2013, 2014, 2015, 2016, or 2017). Excluded from the analysis are beneficiaries who were enrolled at any point during the year in a MA plan. The analysis populations for a few preventive services exclude certain age groups and/or sex.

The uptake (or usage) rates for preventive services represent how often Medicare beneficiaries utilize preventive services (i.e., percentage of population) such as screenings, tests, exams, and immunizations. The calculations are based on the inpatient, outpatient, and carrier files. The uptake rates are calculated for 27 specific services that are covered by Medicare. The Population View of the MMD Tool provides the update rates by beneficiary characteristics (i.e., every combination of state/territory and county of residence, sex, age group, race and ethnicity, and dual eligibility).

Screening Mammography is a preventive service for Medicare beneficiaries and limited to women aged 35 or older. The rate includes a derivation of the study population for Mammogram Screening at the national level for the years 2012, 2013, 2014, 2015, 2016, and 2017. The following populations were excluded from the Total Medicare Enrollees to create the analysis population for this indicator: Beneficiaries without Part B enrollment for at least one month, beneficiaries with enrollment in medicare advantage, male beneficiaries, female beneficiaries aged less than 35.

### **Diabetes Management - Hemoglobin A1c Test**

# Data Background

The Dartmouth Atlas of Healthcare is an online repository of health data and maps based on information included in the massive Medicare database maintained by the Center for Medicare and Medicaid Services (CMS). The project uses Medicare claims data in conjunction with other demographic data to provide information and analysis about national, regional, and local markets, as well as hospitals and their affiliated physicians. The Dartmouth Atlas of Health Care is produced and maintained by The Dartmouth Institute for Health Policy and Clinical Practice.

For more information about this source, including methodologies and definitions, refer to the Dartmouth Atlas of Healthcare website.

# Methodology

The Dartmouth Institute analyzes data drawn from enrollment and claims files from the Medicare program. Analysis is restricted to the fee-for-service population over age 65; HMO patients are not included. Indicator data include measures of primary care utilization, quality of care for diabetes, mammography, leg amputation and preventable hospitalizations. When appropriate, statistical adjustments are carried out to account for differences in age, race and sex.

More information can be found in *Regional and Racial Variation in Primary Care and the Quality of Care among Medicare Beneficiaries*.

### **Hospitalizations - Preventable Conditions**

# Data Background

The Mapping Medicare Disparities (MMD)Tool is an interactive web-based map identifying and understanding geographic areas of disparities in chronic diseases between subgroups of Medicare beneficiaries. The MMD Tool identifies disparities between sub-populations (e.g., racial and ethnic groups) in health outcomes, utilization, and spending. The MMD Tool also allows quality measure comparisons between different hospitals at the national, state/territory, or county level. The MMD Tool offers data on hospitalization, readmission, mortality, emergency department visit rates of various chronic conditions such as Alzheimer, dementia, asthma, breast, lung and prostate cancer, kidney disease, depression and more. For more information about the tool and data, please see the Mapping Medicare Disparities Technical Documentation.

## Methodology

The preventable hospitalization rate is obtained from the Mapping Medicare Disparities data tool. According to the site documentation, preventable hospitalizations are calculated using the Prevention Quality Indicators (PQI) technical specifications from the Agency for Healthcare Research and Quality (AHRQ). PQIs are population based and adjusted for age and sex. They are adopted for Medicare FFS beneficiaries by using the Medicare population instead of the entire population. The types of preventable hospitalizations included in the composite definition are: Diabetes Short-term Complications Admission Rate (PQI 01), Perforated Appendix Admission Rate (PQI 02), Diabetes Long-term Complications Admission Rate (PQI 03), Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate (PQI 05), Hypertension Admission Rate (PQI 07), Heart Failure Admission Rate (PQI 08), Dehydration Admission Rate (PQI 10), Bacterial Pneumonia Admission Rate (PQI 11), Urinary Tract Infection Admission Rate (PQI 12), Uncontrolled Diabetes Admission Rate (PQI 14), Lower-Extremity Amputation among Patients with Diabetes Rate (PQI 16). Technical details for each can be found here.

The analysis population (denominator) for this indicator includes 100 percent of Medicare beneficiaries continuously enrolled in Medicare FFS Parts A for the selected year (i.e., 2012, 2013, 2014, 2015, 2016, or 2017). These beneficiaries are 18 years old or older and are enrolled in Medicare Part A. Additionally, beneficiaries who died during the year, but otherwise were continuously enrolled up until the date of death, as well as beneficiaries who became eligible for enrollment following the first of the year, but were continuously enrolled from that date to the end of the year, are included in the analysis population. Excluded from the analysis are beneficiaries who were enrolled at any point during the year in an MA plan.

Note: Counts of beneficiaries are obtained from CMS geographic variation reports. Rates for multi-county and custom report areas are back-calculated using the MMD tool rate and the CMS beneficiary populations.

### **Alcohol - Heavy Alcohol Consumption**

### Data Background

The County Health Rankings & Roadmaps program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The County Health Rankings measures the health of nearly all counties in the nation and ranks them within states. CHR has been published for the nation's counties annually since 2010, expanding on similar work specific to Wisconsin since 2003. Rankings are compiled using county-level measures from a variety of national and state data sources. These measures are standardized and combined using scientifically-informed weights. County Health Rankings is a free public service, providing their wealth of their rankings and source data to the public for download.

For more information and to explore the original data, please visit the County Health Rankings website.

### **Alcohol - Binge Drinking**

### Data Background

The Behavioral Risk Factor Surveillance System (BRFSS) is a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS, administered and supported by CDC's Behavioral Risk Factor Surveillance Branch, is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age or older) living in households. The health characteristics estimated from the BRFSS include data pertaining to health behaviors, chronic conditions, access and utilization of healthcare, and general health. Surveys are administered to populations at the state level and then delivered to the CDC. BRFSS annual survey data are publicly available and maintained on the CDC's BRFSS Annual Survey Data web page.

In 2015, The Robert Wood Johnson Foundation and CDC Foundation launched the 500 Cities Project in partnership with the Centers for Disease Control and Prevention (CDC). The 500 city project seeks to identify, analyze, and report city and census tract-level data, obtained using small area estimation methods, for 27 chronic disease measures for the 500 largest American cities.

### **Physical Inactivity**

### Data Background

The Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion monitors the health of the Nation and produces publically available data to promote general health. The division maintains the Diabetes Data and Trends data system, which includes the National Diabetes Fact Sheet and the National Diabetes Surveillance System. These programs provide resources documenting the public health burden of diabetes and its complications in the United States. The surveillance system also includes county-level estimates of diagnosed diabetes and selected risk factors for all U.S. counties to help target and optimize the resources for diabetes control and prevention.

Citation: Centers for Disease Control and Prevention, Diabetes Data & Trends: Frequently Asked Questions (FAQ). (2012).

## Methodology

Data for the total adult population and the estimated population with inadequate physical activity are acquired from the County Level Estimates of Diagnosed Diabetes, a service of the Centers for Disease Control and Prevention's National Diabetes Surveillance Program. Diabetes and other risk factor prevalence is estimated using the following formula:

#### Percent Prevalence = [Risk Factor Population] / [Total Population] \* 100.

All data are estimates modelled by the CDC using the methods described below:

The National Diabetes Surveillance system produces data estimating the prevalence of diagnosed diabetes and population obesity by county using data from CDC's Behavioral Risk Factor Surveillance System (BRFSS) and data from the U.S. Census Bureau's Population Estimates Program. The BRFSS is an ongoing, monthly, state-based telephone survey of the adult population. The survey provides statespecific information on behavioral risk factors and preventive health practices. Respondents were considered to have diabetes if they responded "yes" to the question, "Has a doctor ever told you that you have diabetes?" Women who indicated that they only had diabetes during pregnancy were not considered to have diabetes. Respondents were considered obese if their body mass index was 30 or greater. Body mass index (weight [kg]/height [m]2) was derived from self-report of height and weight. Respondents were considered to be physically inactive if they answered "no" to the question, "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?"

Three years of data were used to improve the precision of the year-specific county-level estimates of diagnosed diabetes and selected risk factors. For example, 2003, 2004, and 2005 were used for the 2004 estimate and 2004, 2005, and 2006 were used for the 2005 estimate. Estimates were restricted to adults 20 years of age or older to be consistent with population estimates from the U.S. Census Bureau. The U.S. Census Bureau provides year-specific county population estimates by demographic characteristics—age, sex, race, and Hispanic origin.

The county-level estimates were based on indirect model-dependent estimates. The model-dependent approach employs a statistical model that "borrows strength" in making an estimate for one county from BRFSS data collected in other counties. Bayesian multilevel modeling techniques were used to obtain these estimates. Separate models were developed for each of the four census regions: West, Midwest, Northeast and South. Multilevel Poisson regression models with random effects of demographic variables (age 20–44, 45–64, 65+; race; sex) at the county-level were developed. State was included as a county-level covariate.

Citation: Centers for Disease Control and Prevention, Diabetes Data & Trends: Methods and References for County-Level Estimates and Ranks. (2012).

Rates are age adjusted by the CDC for the following three age groups: 20-44, 45-64, 65+. Additional information, including the complete methodology and data definitions, can be found at the CDC's Diabetes Data and Statistics website.

### Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

### STI - Chlamydia Incidence

## Data Background

The National Center for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Disease (STD), and Tuberculosis (TB) Prevention (NCHHSTP) is the branch of the Centers for Disease Control and Prevention (CDC) responsible for public health surveillance, prevention research, and programs to prevent and control HIV and AIDS, other STDs, viral hepatitis, and TB. NCHHSTP developed a set of indicators to monitor the prevalence and track its progress toward ending these diseases in each state, and regularly reports its progress. The NCHHSTEP program includes data from new patient case reports from 56 areas (all 50 states, the District of Columbia, American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands).

# Methodology

Cases of a given STD refer to confirmed diagnoses during a given time period. For example, the 2010 data on gonorrhea infection would include persons with laboratory-confirmed infection diagnosed between January 1, 2010 and December 31, 2010, and reported to CDC through June 8, 2011. Rates per 100,000 population were calculated for each STD. The population denominators used to compute these rates for the 50 states and the District of Columbia were based on the National Center for Health Statistics (NCHS) bridged-race population counts for the 2000–2010. These estimates are a modification of the U.S. Census Bureau population estimates in which the 31 race categories used by the Census Bureau are bridged into the five race/ethnicity groups that have been historically used to report race data for STD cases. Each rate was calculated by dividing the number of cases for the calendar year by the population for that calendar year and then multiplying the number by 100,000.

For more information, visit the NCHHSTP Atlas and click on the "About these data and footnotes" link.

## Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories by state departments of health based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Data reported from the CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) is available by combined race and ethnicity, and is

reported only for state and national data summaries. County level statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available from a local source.

### STI - Gonorrhea Incidence

# Data Background

The National Center for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Disease (STD), and Tuberculosis (TB) Prevention (NCHHSTP) is the branch of the Centers for Disease Control and Prevention (CDC) responsible for public health surveillance, prevention research, and programs to prevent and control HIV and AIDS, other STDs, viral hepatitis, and TB. NCHHSTP developed a set of indicators to monitor the prevalence and track its progress toward ending these diseases in each state, and regularly reports its progress. The NCHHSTEP program includes data from new patient case reports from 56 areas (all 50 states, the District of Columbia, American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands).

# Methodology

Cases of a given STD refer to confirmed diagnoses during a given time period. For example, the 2010 data on gonorrhea infection would include persons with laboratory-confirmed infection diagnosed between January 1, 2010 and December 31, 2010, and reported to CDC through June 8, 2011. Rates per 100,000 population were calculated for each STD. The population denominators used to compute these rates for the 50 states and the District of Columbia were based on the National Center for Health Statistics (NCHS) bridged-race population counts for the 2000–2010. These estimates are a modification of the U.S. Census Bureau population estimates in which the 31 race categories used by the Census Bureau are bridged into the five race/ethnicity groups that have been historically used to report race data for STD cases. Each rate was calculated by dividing the number of cases for the calendar year by the population for that calendar year and then multiplying the number by 100,000.

For more information, visit the NCHHSTP Atlas and click on the "About these data and footnotes" link.

### Notes

### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories by state departments of health based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Data reported from the CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) is available by combined race and ethnicity, and is reported only for state and national data summaries. County level statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available from a local source.

### STI - HIV Prevalence

### Data Background

The National Center for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Disease (STD), and Tuberculosis (TB) Prevention (NCHHSTP) is the branch of the Centers for Disease Control and Prevention (CDC) responsible for public health surveillance, prevention research, and programs to prevent and control HIV and AIDS, other STDs, viral hepatitis, and TB. NCHHSTP developed a set of indicators to monitor the prevalence and track its progress toward ending these diseases in each state, and regularly reports its progress. The NCHHSTEP program includes data from new patient case reports from 56 areas (all 50 states, the District of Columbia, American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands).

# Methodology

Cases of a given STD refer to confirmed diagnoses during a given time period. For example, the 2010 data on gonorrhea infection would include persons with laboratory-confirmed infection diagnosed between January 1, 2010 and December 31, 2010, and reported to CDC through June 8, 2011. Rates per 100,000 population were calculated for each STD. The population denominators used to compute these rates for the 50 states and the District of Columbia were based on the National Center for Health Statistics (NCHS) bridged-race population counts for the 2000–2010. These estimates are a

modification of the U.S. Census Bureau population estimates in which the 31 race categories used by the Census Bureau are bridged into the five race/ethnicity groups that have been historically used to report race data for STD cases. Each rate was calculated by dividing the number of cases for the calendar year by the population for that calendar year and then multiplying the number by 100,000.

For more information, visit the NCHHSTP Atlas and click on the "About these data and footnotes" link.

### Notes

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories by state departments of health based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Data reported from the CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) is available by combined race and ethnicity, and is reported only for state and national data summaries. County level statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available from a local source.

### **Tobacco Usage - Current Smokers**

### Data Background

The Behavioral Risk Factor Surveillance System (BRFSS) is a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS, administered and supported by CDC's Behavioral Risk Factor Surveillance Branch, is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age or older) living in households. The health characteristics estimated from the BRFSS include data pertaining to health behaviors, chronic conditions, access and utilization of healthcare, and general health. Surveys are administered to populations at the state level and then delivered to the CDC. BRFSS annual survey data are publicly available and maintained on the CDC's BRFSS Annual Survey Data web page.

In 2015, The Robert Wood Johnson Foundation and CDC Foundation launched the 500 Cities Project in partnership with the Centers for Disease Control and Prevention (CDC). The 500 city project seeks to identify, analyze, and report city and census tract-level data, obtained using small area estimation methods, for 27 chronic disease measures for the 500 largest American cities.

## Health Outcomes

### **Cancer Incidence - All Sites**

### Data Background

The State Cancer Profiles website provides statistics to help guide and prioritize cancer control activities at the state and local levels. State Cancer Profiles are a collaborative effort of the National Cancer Institute (NCI) and the Centers for Disease Control and Prevention (CDC). The incidence rates tables accessed through the State Cancer Profiles website provide incidence statistics compiled from state and local cancer registries. Statistics are available for those states with cancer registries whose data have met the criteria required for inclusion in the US Cancer Statistics. Data is provided for use in assessing the burden and risk for a major cancer site for the US overall or for a selected state and its counties.

State-based cancer registries are data systems that collect, manage, and analyze data about cancer cases and cancer deaths. In each state, medical facilities (including hospitals, physicians' offices, therapeutic radiation facilities, freestanding surgical centers, and pathology laboratories) report these data to a central cancer registry. State cancer registries receive funding and program guidance through the CDC's National Program of Cancer Registries and the National Cancer Institute's Surveillance, Epidemiology and End Results (SEER) program.

For more information, please visit the State Cancer Profiles website.

## Methodology

Annual incidence rates are acquired for all US states and counties as an average for years 2014-2018 from the State Cancer

Profiles Incidence Rates Tables. This source provides the average annual incidence of new cancer cases, as well as incidence rates, age adjusted to the 2000 US standard population. The new case counts (incidence) used to generate the State Cancer Profiles data tables are provided by the National Program of Cancer Registries Cancer Surveillance System (NPCR-CSS), the Centers for Disease Control and Prevention, CDC's National Program of Cancer Registries Cancer Surveillance System (NPCR-CSS), and by the National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) Program.

In order to perform aggregate (multi-county or service area) incidence rate estimates with the data provided, age-adjusted total populations are first back-calculated using the following formula:

Adj. Population = ([Cancer Incidence] / ([Adj. Incidence Rate] / 100,000) )

This estimated population figure is then used in the formula to re-calculate age-adjusted cancer rates as follows: **Adj. Incidence Rate** = 100,000 \* ([Cancer Incidence] / [*Adj. Population*])

For more information about the State Cancer Profiles data, including age-adjustment and data suppression, please visit the SEER\*Stat website.

## Notes

### Data Limitations

1. County-level data are not available for the states of Kansas and Minnesota because of state legislation and regulations which prohibit the release of county level data to outside entities.

2. Hispanic incidence data has been excluded for the following states/registries: Delaware, Illinois, Kansas, Kentucky, Massachusetts, and Pennsylvania (see Technical Notes section of the USCS).

3. Data for some race/ethnicity groups have been excluded for Delaware, Illinois, Kansas, Kentucky, New Jersey, and New York.

#### **Race and Ethnicity**

Cancer statistics from the State Cancer Profiles database are reported by race alone (White, Black, Amer. Indian/AK Native, and Asian) or by ethnicity alone (Hispanic), or for the white Hispanic and white non-Hispanic population. NHIA (NAACCR Hispanic Identification Algorithm) was used to determine Hispanic ethnicity. See the *Data Visualizations Technical Notes document* in the United States Cancer Statistics (USCS) webpage for more information.

#### **Data Suppression**

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the number of cases is less than 16 (for each county/cancer/population group combination) over the time period monitored, or when the total population (per race-ethnicity-sex grouping) of the report area is less than 50,000.

### **Chronic Conditions - Asthma (Medicare Population)**

## Data Background

The Centers for Medicare & Medicaid Services (CMS), a branch of the Department of Health and Human Services (HHS), is the federal agency that runs the Medicare Program and monitors Medicaid programs offered by each state. Medicare is a type of federally-funded health insurance available to disabled persons and the population age 65 and older. The Office of Enterprise Data and Analytics within the Centers for Medicare & Medicaid Services (CMS) developed a public use file to support further analysis of the geographic variation in the amount and quality of the health care services that Medicare beneficiaries receive. For more information, please see the Geographic Variation Public Use File Methodology document.

## Methodology

Indicator percentages are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Chronic Conditions Warehouse. The data used in the chronic condition reports are based upon CMS administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program. Beneficiaries who died during the year are included up to their date of death if they meet the other inclusion criteria. Chronic condition prevalence estimates are calculated by CMS by taking the beneficiaries with a particular condition divided by the total number of beneficiaries in our fee-for-service population, expressed as a percentage. For more information and to view the original data, please visit the CMS Chronic Conditions web page.

Enrollment data are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Medicare Geographic Variation Public Use File. This CMS table has developed data that enables researchers and policy-makers to evaluate geographic variation in the utilization and quality of health care services for the Medicare fee-for-service population. data are aggregated into a Geographic Variation Public Use File that has demographic, spending, utilization, and quality indicators at the state level (including the District of Columbia, Puerto Rico, and the Virgin Islands), hospital referral region (HRR) level, and county level. For more information and to view the original data, please visit the CMS Medicare Geographic Variation web page.

## **Chronic Conditions - Diabetes (Adult)**

## Data Background

The Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion monitors the health of the Nation and produces publically available data to promote general health. The division maintains the Diabetes Data and Trends data system, which includes the National Diabetes Fact Sheet and the National Diabetes Surveillance System. These programs provide resources documenting the public health burden of diabetes and its complications in the United States. The surveillance system also includes county-level estimates of diagnosed diabetes and selected risk factors for all U.S. counties to help target and optimize the resources for diabetes control and prevention.

Citation: Centers for Disease Control and Prevention, Diabetes Data & Trends: Frequently Asked Questions (FAQ). (2012).

## Methodology

Data for total population and estimated obese population data are acquired from the County Level Estimates of Diagnosed Diabetes, a service of the Centers for Disease Control and Prevention's National Diabetes Surveillance Program. Diabetes and other risk factor prevalence is estimated using the following formula:

### Percent Prevalence = [Risk Factor Population] / [Total Population] \* 100.

#### All data are estimates modelled by the CDC using the methods described below:

The National Diabetes Surveillance system produces data estimating the prevalence of diagnosed diabetes and population obesity by county using data from CDC's Behavioral Risk Factor Surveillance System (BRFSS) and data from the U.S. Census Bureau's Population Estimates Program. The BRFSS is an ongoing, monthly, state-based telephone survey of the adult population. The survey provides statespecific information on behavioral risk factors and preventive health practices. Respondents were considered to have diabetes if they responded "yes" to the question, "Has a doctor ever told you that you have diabetes?" Women who indicated that they only had diabetes during pregnancy were not considered to have diabetes. Respondents were considered obese if their body mass index was 30 or greater. Body mass index (weight [kg]/height [m]2) was derived from self-report of height and weight. Respondents were considered to be physically inactive if they answered "no" to the question, "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?"

Three years of data were used to improve the precision of the year-specific county-level estimates of diagnosed diabetes and selected risk factors. For example, 2003, 2004, and 2005 were used for the 2004 estimate and 2004, 2005, and 2006 were used for the 2005 estimate. Estimates were restricted to adults 20 years of age or older to be consistent with population estimates from the U.S. Census Bureau. The U.S. Census Bureau provides year-specific county population estimates by demographic characteristics—age, sex, race, and Hispanic origin.

The county-level estimates were based on indirect model-dependent estimates. The model-dependent approach employs a statistical model that "borrows strength" in making an estimate for one county from BRFSS data collected in other counties. Bayesian multilevel modeling techniques were used to obtain these estimates. Separate models were developed for each of the four census regions: West, Midwest, Northeast and South. Multilevel Poisson regression models with random effects of demographic variables (age 20–44, 45–64, 65+; race; sex) at the county-level were developed. State was included as a county-level covariate.

Citation: Centers for Disease Control and Prevention, Diabetes Data & Trends: Methods and References for County-Level Estimates and Ranks. (2012).

Rates are age adjusted by the CDC for the following three age groups: 20-44, 45-64, 65+. Additional information, including the complete methodology and data definitions, can be found at the CDC's Diabetes Data and Statistics website.

## Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

## **Chronic Conditions - Diabetes (Medicare Population)**

# Data Background

The Centers for Medicare & Medicaid Services (CMS), a branch of the Department of Health and Human Services (HHS), is the federal agency that runs the Medicare Program and monitors Medicaid programs offered by each state. Medicare is a type of federally-funded health insurance available to disabled persons and the population age 65 and older. The Office of Enterprise Data and Analytics within the Centers for Medicare & Medicaid Services (CMS) developed a public use file to support further analysis of the geographic variation in the amount and quality of the health care services that Medicare beneficiaries receive. For more information, please see the Geographic Variation Public Use File Methodology document.

# Methodology

Indicator percentages are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Chronic Conditions Warehouse. The data used in the chronic condition reports are based upon CMS administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program. Beneficiaries who died during the year are included up to their date of death if they meet the other inclusion criteria. Chronic condition prevalence estimates are calculated by CMS by taking the beneficiaries with a particular condition divided by the total number of beneficiaries in our fee-for-service population, expressed as a percentage. For more information and to view the original data, please visit the CMS Chronic Conditions web page.

Enrollment data are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Medicare Geographic Variation Public Use File. This CMS table has developed data that enables researchers and policy-makers to evaluate geographic variation in the utilization and quality of health care services for the Medicare fee-for-service population. data are aggregated into a Geographic Variation Public Use File that has demographic, spending, utilization, and quality indicators at the state level (including the District of Columbia, Puerto Rico, and the Virgin Islands), hospital referral region (HRR) level, and county level. For more information and to view the original data, please visit the CMS Medicare Geographic Variation web page.

## **Chronic Conditions - Heart Disease (Medicare Population)**

## Data Background

The Centers for Medicare & Medicaid Services (CMS), a branch of the Department of Health and Human Services (HHS), is the federal agency that runs the Medicare Program and monitors Medicaid programs offered by each state. Medicare is a type of federally-funded health insurance available to disabled persons and the population age 65 and older. The Office of Enterprise Data and Analytics within the Centers for Medicare & Medicaid Services (CMS) developed a public use file to support further analysis of the geographic variation in the amount and quality of the health care services that Medicare beneficiaries receive. For more information, please see the Geographic Variation Public Use File Methodology document.

# Methodology

Indicator percentages are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Chronic Conditions Warehouse. The data used in the chronic condition reports are based upon CMS administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program. Beneficiaries who died during the year are included up to their date of death if they meet the other inclusion criteria. Chronic condition prevalence estimates are calculated by CMS by taking the beneficiaries with a particular condition divided by the total number of beneficiaries in our fee-for-service population, expressed as a percentage. For more information and to view the original data, please visit the CMS Chronic Conditions web page.

Enrollment data are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Medicare Geographic Variation Public Use File. This CMS table has developed data that enables researchers and policy-makers to evaluate geographic variation in the utilization and quality of health care services for the Medicare fee-for-service population. data are aggregated into a Geographic Variation Public Use File that has demographic, spending, utilization, and quality indicators at the state level (including the District of Columbia, Puerto Rico, and the Virgin Islands), hospital referral region (HRR) level, and county level. For more information and to view the original data, please visit the CMS Medicare Geographic Variation web page.

## **Chronic Conditions - High Blood Pressure (Medicare Population)**

# Data Background

The Centers for Medicare & Medicaid Services (CMS), a branch of the Department of Health and Human Services (HHS), is the federal agency that runs the Medicare Program and monitors Medicaid programs offered by each state. Medicare is a type of federally-funded health insurance available to disabled persons and the population age 65 and older. The Office of Enterprise Data and Analytics within the Centers for Medicare & Medicaid Services (CMS) developed a public use file to support further analysis of the geographic variation in the amount and quality of the health care services that Medicare beneficiaries receive. For more information, please see the Geographic Variation Public Use File Methodology document.

# Methodology

Indicator percentages are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Chronic Conditions Warehouse. The data used in the chronic condition reports are based upon CMS administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program. Beneficiaries who died during the year are included up to their date of death if they meet the other inclusion criteria. Chronic condition prevalence estimates are calculated by CMS by taking the beneficiaries with a particular condition divided by the total number of beneficiaries in our fee-for-service population, expressed as a percentage. For more information and to view the original data, please visit the CMS Chronic Conditions web page.

Enrollment data are acquired for 2007 - 2018 from Centers for Medicare and Medicaid Services (CMS) Medicare Geographic Variation Public Use File. This CMS table has developed data that enables researchers and policy-makers to evaluate geographic variation in the utilization and quality of health care services for the Medicare fee-for-service population. data are aggregated into a Geographic Variation Public Use File that has demographic, spending, utilization, and quality indicators at the state level (including the District of Columbia, Puerto Rico, and the Virgin Islands), hospital referral region (HRR) level, and county level. For more information and to view the original data, please visit the CMS Medicare Geographic Variation web page.

## Low Birth Weight (CDC)

## Data Background

The County Health Rankings & Roadmaps (CHR&R) program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. CHR&R provides data, evidence, guidance, and examples in order to build awareness of the multiple factors that influence health and connect community leaders working to improve health and equity. The annual County Health Rankings measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income inequality, and teen births in nearly every U.S. county. The annual Rankings provide a revealing snapshot of how health is influenced by where we live, learn, work and play. CHR&R offers many pathways for self-directed and peer learning, web-based content, and virtual interactive forums that are designed to accelerate learning and action in communities to help build healthier communities and advance equity. To learn more, visit countyhealthrankings.org.

## **Mortality - Cancer**

## Data Background

The Division of Vital Statistics is a branch of the Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS) responsible for maintaining birth and death records for the nation. Data are compiled for the National Vital Statistics System (NVSS) through a joint effort between the NCHS and various state and local health agencies, who are responsible for registering vital events – births, deaths, marriages, divorces, and fetal deaths. NVSS statistics are released annually in various data warehouses, including CDC WONDER, VitalStats, and the Health Indicator Warehouse.

# Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death

database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease: 120-125
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

## Notes

#### **Data Suppression**

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the total number of cases is less than 10 (for each county/cause of death/population group) over the time period monitored. Rates should be considered unreliable when calculated with a numerator (number of cases) less than 20.

#### **Trends Over Time**

Trends over time are produced using single-year mortality data from the CDC WONDER query system. Use caution when comparing single-year mortality rates with 5-year aggregate mortality rates. Trend data are available for states and for the total US; county-level data are not provided due to data suppression / low numerator counts.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories by state vital statistics registries based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. All mortality statistics from the CDC WONDER databases are available by race alone (White, Black, Amer. Indian/AK Native, and Asian) ethnicity alone (Hispanic, Non-Hispanic), or by combined race and ethnicity. Data are reported here in combination, and thus may be subject to higher suppression than if reported separately.

### **Mortality - Coronary Heart Disease**

## Data Background

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## Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable,

detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease:I20-I25
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

## Notes

### **Data Suppression**

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the total number of cases is less than 10 (for each county/cause of death/population group) over the time period monitored. Rates should be considered unreliable when calculated with a numerator (number of cases) less than 20.

### **Trends Over Time**

Trends over time are produced using single-year mortality data from the CDC WONDER query system. Use caution when comparing single-year mortality rates with 5-year aggregate mortality rates. Trend data are available for states and for the total US; county-level data are not provided due to data suppression / low numerator counts.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories by state vital statistics registries based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. All mortality statistics from the CDC WONDER databases are available by race alone (White, Black, Amer. Indian/AK Native, and Asian) ethnicity alone (Hispanic, Non-Hispanic), or by combined race and ethnicity. Data are reported here in combination, and thus may be subject to higher suppression than if reported separately.

### **Mortality - Poisoning**

## Data Background

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## Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted

mortality rates for unique service areas and aggregated county groupings, the following formula was used:

### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease:I20-I25
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

### Notes

#### **Data Suppression**

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the total number of cases is less than 10 (for each county/cause of death/population group) over the time period monitored. Rates should be considered unreliable when calculated with a numerator (number of cases) less than 20.

#### **Trends Over Time**

Trends over time are produced using single-year mortality data from the CDC WONDER query system. Use caution when comparing single-year mortality rates with 5-year aggregate mortality rates. Trend data are available for states and for the total US; county-level data are not provided due to data suppression / low numerator counts.

#### Race and Ethnicity

Race and ethnicity (Hispanic origin) are collected as two separate categories by state vital statistics registries based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. All mortality statistics from the CDC WONDER databases are available by race alone (White, Black, Amer. Indian/AK Native, and Asian) ethnicity alone (Hispanic, Non-Hispanic), or by combined race and ethnicity. Data are reported here in combination, and thus may be subject to higher suppression than if reported separately.

### **Mortality - Homicide**

## Data Background

The Division of Vital Statistics is a branch of the Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS) responsible for maintaining birth and death records for the nation. Data are compiled for the National Vital Statistics System (NVSS) through a joint effort between the NCHS and various state and local health agencies, who are responsible for registering vital events – births, deaths, marriages, divorces, and fetal deaths. NVSS statistics are released annually in various data warehouses, including CDC WONDER, VitalStats, and the Health Indicator Warehouse.

## Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease: 120-125
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

## Notes

#### **Data Suppression**

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the total number of cases is less than 10 (for each county/cause of death/population group) over the time period monitored. Rates should be considered unreliable when calculated with a numerator (number of cases) less than 20.

### **Trends Over Time**

Trends over time are produced using single-year mortality data from the CDC WONDER query system. Use caution when comparing single-year mortality rates with 5-year aggregate mortality rates. Trend data are available for states and for the total US; county-level data are not provided due to data suppression / low numerator counts.

#### Race and Ethnicity

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### **Mortality - Lung Disease**

## Data Background

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## Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

#### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease:I20-I25
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

### Notes

#### **Data Suppression**

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#### **Trends Over Time**

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#### **Race and Ethnicity**

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### **Mortality - Motor Vehicle Crash**

## Data Background

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## Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): 160-169
- Coronary (Ischaemic) heart disease:I20-I25

- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

### Notes

#### **Data Suppression**

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#### **Trends Over Time**

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#### **Race and Ethnicity**

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### **Mortality - Premature Death**

## Data Background

The County Health Rankings & Roadmaps program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The County Health Rankings measures the health of nearly all counties in the nation and ranks them within states. CHR has been published for the nation's counties annually since 2010, expanding on similar work specific to Wisconsin since 2003. Rankings are compiled using county-level measures from a variety of national and state data sources. These measures are standardized and combined using scientifically-informed weights. County Health Rankings is a free public service, providing their wealth of their rankings and source data to the public for download.

For more information and to explore the original data, please visit the County Health Rankings website.

# Methodology

Years of potential life lost (YPLL) data are acquired from the University of Wisconsin's County Health Rankings (CHR). Potential life lost is defined by CHR as a death occurring before the age of 75. CHR uses 2016 - 2018 three year averages from the National Vital Statistic System (NVSS) as the basis for their calculation. NVSS data are compiled from state death records and maintained by the Centers for Disease Control and Prevention. Age-stratified NVSS data are used to calculate the total years of potential life lost to all persons under age 75, by county, using the following formula:

### YPLL = [ 75 \* (Number of Deaths Under Age 75) ] - [ SUM (Age at Death) ]

To further illustrate, a person dying at age 50 would contribute 25 years of life lost to the YPLL index. YPLL is age-adjusted to the 2000 U.S. population to allow comparison between counties and is reported as a rate per 100,000 people. For more information, please review the County Health Rankings Premature Death indicator information.

## Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be

available at a broader geographic level, or from a local source.

### **Mortality - Stroke**

# Data Background

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# Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease: 120-125
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

## Notes

#### Data Suppression

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the total number of cases is less than 10 (for each county/cause of death/population group) over the time period monitored. Rates should be considered unreliable when calculated with a numerator (number of cases) less than 20.

#### **Trends Over Time**

Trends over time are produced using single-year mortality data from the CDC WONDER query system. Use caution when comparing single-year mortality rates with 5-year aggregate mortality rates. Trend data are available for states and for the total US; county-level data are not provided due to data suppression / low numerator counts.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories by state vital statistics registries based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. All mortality statistics from the CDC WONDER databases are available by race alone (White, Black, Amer. Indian/AK Native, and Asian) ethnicity alone (Hispanic, Non-Hispanic), or by combined race and ethnicity. Data are reported here in combination, and thus may be subject to higher suppression than if reported separately.

### **Mortality - Suicide**

## Data Background

The Division of Vital Statistics is a branch of the Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS) responsible for maintaining birth and death records for the nation. Data are compiled for the National Vital Statistics System (NVSS) through a joint effort between the NCHS and various state and local health agencies, who are responsible for registering vital events – births, deaths, marriages, divorces, and fetal deaths. NVSS statistics are released annually in various data warehouses, including CDC WONDER, VitalStats, and the Health Indicator Warehouse.

## Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease: 120-125
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

### Notes

#### Data Suppression

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the total number of cases is less than 10 (for each county/cause of death/population group) over the time period monitored. Rates should be considered unreliable when calculated with a numerator (number of cases) less than 20.

#### **Trends Over Time**

Trends over time are produced using single-year mortality data from the CDC WONDER query system. Use caution when comparing single-year mortality rates with 5-year aggregate mortality rates. Trend data are available for states and for the total US; county-level data are not provided due to data suppression / low numerator counts.

#### Race and Ethnicity

Race and ethnicity (Hispanic origin) are collected as two separate categories by state vital statistics registries based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. All mortality statistics from the CDC WONDER databases are available by race alone (White, Black, Amer. Indian/AK Native, and Asian) ethnicity alone (Hispanic, Non-Hispanic), or by combined race and ethnicity. Data are reported here in combination, and thus may be subject to higher suppression than if reported separately.

### Mortality - Unintentional Injury (Accident)

Data Background

The Division of Vital Statistics is a branch of the Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS) responsible for maintaining birth and death records for the nation. Data are compiled for the National Vital Statistics System (NVSS) through a joint effort between the NCHS and various state and local health agencies, who are responsible for registering vital events – births, deaths, marriages, divorces, and fetal deaths. NVSS statistics are released annually in various data warehouses, including CDC WONDER, VitalStats, and the Health Indicator Warehouse.

# Methodology

County population figures and death statistics are acquired using CDC WONDER from the Underlying Cause of Death database. Conditions were queried for years 2015-2019 based on a selection of codes from the International Classification of Diseases (ICD) 10th revision. The ICD-10 is the current global health information standard for mortality and morbidity statistics. The ICD has been maintained by the World Health Organization since its conception in 1948. A searchable, detailed list of current ICD-10 Codes (Version 2019) is available from the World Health Organization.

Mortality rates were acquired from the source age-adjusted to the year 2000 U.S. standard. To recalculate age-adjusted mortality rates for unique service areas and aggregated county groupings, the following formula was used:

### Mortality Rate = 100,000 \* SUM [(Total Population) \* ((Age-Adjusted Rate)/100,000)] / SUM(Total Population).

The specific codes used for reported mortality indicators are listed below (notice that motor vehicle crash, firearm, and poisoning are listed as part of the injury mechanism for all kinds of deaths and thus are not related with any specific codes).

- Assault (homicide): U01-U02, X85-Y09, Y87.1
- Cerebrovascular disease (stroke): I60-I69
- Coronary (Ischaemic) heart disease: 120-125
- Chronic lower respiratory disease (lung disease): J40-J47
- Heart disease: I00-I09, I11, I13, I20-I51
- Intentional self-harm (suicide): U03, X60-X84, Y87.0
- Malignant neoplasm (cancer): C00-C97
- Unintentional injury (accident): V01-X59, Y85-Y86
- Influenza and pneumonia: J09-J18
- Opioid overdose: T40.0-T40.4

## Notes

#### **Data Suppression**

Suppression is used to avoid misinterpretation when rates are unstable. Data are suppressed when the total number of cases is less than 10 (for each county/cause of death/population group) over the time period monitored. Rates should be considered unreliable when calculated with a numerator (number of cases) less than 20.

#### **Trends Over Time**

Trends over time are produced using single-year mortality data from the CDC WONDER query system. Use caution when comparing single-year mortality rates with 5-year aggregate mortality rates. Trend data are available for states and for the total US; county-level data are not provided due to data suppression / low numerator counts.

#### **Race and Ethnicity**

Race and ethnicity (Hispanic origin) are collected as two separate categories by state vital statistics registries based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. All mortality statistics from the CDC WONDER databases are available by race alone (White, Black, Amer. Indian/AK Native, and Asian) ethnicity alone (Hispanic, Non-Hispanic), or by combined race and ethnicity. Data are reported here in combination, and thus may be subject to higher suppression than if reported separately.

### Obesity

## Data Background

The Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion monitors the health of the Nation and produces publically available data to promote general health. The division maintains the Diabetes Data and Trends data system, which includes the National Diabetes Fact Sheet and the National Diabetes

Surveillance System. These programs provide resources documenting the public health burden of diabetes and its complications in the United States. The surveillance system also includes county-level estimates of diagnosed diabetes and selected risk factors for all U.S. counties to help target and optimize the resources for diabetes control and prevention.

Citation: Centers for Disease Control and Prevention, Diabetes Data & Trends: Frequently Asked Questions (FAQ). (2012).

## Methodology

Data for total population and estimated obese population data are acquired from the County Level Estimates of Diagnosed Diabetes, a service of the Centers for Disease Control and Prevention's National Diabetes Surveillance Program. Diabetes and other risk factor prevalence is estimated using the following formula:

#### Percent Prevalence = [Risk Factor Population] / [Total Population] \* 100.

#### All data are estimates modelled by the CDC using the methods described below:

The National Diabetes Surveillance system produces data estimating the prevalence of diagnosed diabetes and population obesity by county using data from CDC's Behavioral Risk Factor Surveillance System (BRFSS) and data from the U.S. Census Bureau's Population Estimates Program. The BRFSS is an ongoing, monthly, state-based telephone survey of the adult population. The survey provides statespecific information on behavioral risk factors and preventive health practices. Respondents were considered to have diabetes if they responded "yes" to the question, "Has a doctor ever told you that you have diabetes?" Women who indicated that they only had diabetes during pregnancy were not considered to have diabetes. Respondents were considered obese if their body mass index was 30 or greater. Body mass index (weight [kg]/height [m]2) was derived from self-report of height and weight. Respondents were considered to be physically inactive if they answered "no" to the question, "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?"

Three years of data were used to improve the precision of the year-specific county-level estimates of diagnosed diabetes and selected risk factors. For example, 2003, 2004, and 2005 were used for the 2004 estimate and 2004, 2005, and 2006 were used for the 2005 estimate. Estimates were restricted to adults 20 years of age or older to be consistent with population estimates from the U.S. Census Bureau. The U.S. Census Bureau provides year-specific county population estimates by demographic characteristics—age, sex, race, and Hispanic origin.

The county-level estimates were based on indirect model-dependent estimates. The model-dependent approach employs a statistical model that "borrows strength" in making an estimate for one county from BRFSS data collected in other counties. Bayesian multilevel modeling techniques were used to obtain these estimates. Separate models were developed for each of the four census regions: West, Midwest, Northeast and South. Multilevel Poisson regression models with random effects of demographic variables (age 20–44, 45–64, 65+; race; sex) at the county-level were developed. State was included as a county-level covariate.

Citation: Centers for Disease Control and Prevention, Diabetes Data & Trends: Methods and References for County-Level Estimates and Ranks. (2012).

Rates are age adjusted by the CDC for the following three age groups: 20-44, 45-64, 65+. Additional information, including the complete methodology and data definitions, can be found at the CDC's Diabetes Data and Statistics website.

## Notes

#### **Race and Ethnicity**

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

### **Poor or Fair Health**

## Data Background

The Behavioral Risk Factor Surveillance System (BRFSS) is

"... a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS, administered and supported by CDC's Behavioral Risk Factor Surveillance Branch, is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age or older) living in households. "

Citation: Centers for Disease Control and Prevention, Office of Surveillance, Epidemiology, and Laboratory Services. Overview: BRFSS 2010.

The health characteristics estimated from the BRFSS include data pertaining to health behaviors, chronic conditions, access and utilization of healthcare, and general health. Surveys are administered to populations at the state level and then delivered to the CDC and tabulated into county estimates by the BRFSS analysis team. Beginning with the 2016 County

Health Rankings, the CDC produces county estimates using single-year BRFSS data and a multilevel modeling approach based on respondent answers and their age, sex, and race/ethnicity, combined with county-level poverty, as well as county-and state-level contextual effects. To produce estimates for those counties where there were no or limited data, the modeling approach borrowed information from the entire BRFSS sample as well as Census Vintage 2014 population estimates. CDC used a parametric bootstrapping method to produce standard errors and confidence intervals for those point estimates. This estimation methodology was validated for all U.S. counties, including those with no or small (<50 respondents) samples.

## Methodology

Indicator percentages are acquired for year 2015 from Behavioral Risk Factor Surveillance System (BRFSS) prevalence data, accessible through the University of Wisconsin's County Health Rankings. Data are based on the percentage of respondents answering the following question: "Would you say that in general your health is— Excellent, Very good, Good, Fair, Or Poor?" Percentages are age-adjusted and only pertain to the non-institutionalized population aged 18 and up. Additional detailed information about the BRFSS, including questionnaires, data collection procedures, and data processing methodologies are available on the BRFSS web site. For additional information about the single-year estimates displayed here, please visit the County Health Rankings website.

https://sparkmap.org, 11/3/2021