# HEALTH EQUITY IN MONTGOMERY COUNTY



#### ANALYZING THE SOCIAL DETERMINANTS OF HEALTH

# WHAT IS HEALTH EQUITY?

Health equity is defined as the principle where everyone has a right to equal opportunity to attain their highest level health. The basic belief behind health equity is every person has a "right to health." An individual's level of health should not be affected by health disparities which can act as barriers. Health disparities are often referred to the differences in incidence and prevalence of health conditions and health status between groups. Most health disparities tend to impact those marginalized because of a variety of factors including: race/ethnicity, sexual orientation, gender, disability status, geographic location, or any combination of these factors [1].

## WHAT ARE THE SOCIAL DETERMINANTS OF HEALTH?

Although an individual's health may be perceived as the result of their behaviors, the World Health Organization and the Center of Disease Control and Prevention explains individual health is determined by multiple factors beyond individual behaviors and genetics. They classify these factors as the *Social Determinants of Health*. These social determinants include the place a child is born, grows up, lives, works, play, and options available to remain healthy throughout their entire life time [2].

Healthy People 2020 uses a "place-based" framework to reflect deeper and organize the Social Determinants of Health into 5 key areas:

- 1. Economic Stability
- 2. Education
- 3. Social and Community Context
- 4. Health and Health Care
- 5. Neighborhood and Built Environment

"Social determinants of health are life-enhancing resources, such as

food supply, housing, economic and social relationships, transportation,

education, and health care, whose distribution across populations

effectively determines length and quality of life [1]."

# IN THIS REPORT:

Montgomery County is a place where the social determinates of health affect individuals' overall health. Health equity in all places across America, especially in the Montgomery County community, is lacking and at a level where many individuals may have worse health outcomes and overall lower quality and length of life due to social determinates that act as barriers for the individual to achieve their highest level of health.

This report is one of the first of its kind in this community. The overall objective for this report is to gather and organize data regarding the social determinates of health in Montgomery County. Having organized data using Healthy People 2020 as a guide will allow for health equity conversations and strategies to be developed. Although there are current health improvement efforts ongoing in Montgomery County, this report is to serve as a resource for those improvement efforts. This initial report can be built upon, and used to inform plans or efforts to address social change, social customs, community policy, level of community resilience, and/or the community environment to impact on health inequalities.

# **DATA SOURCES**

Both primary and secondary data is used in this report. All secondary data used is from credible, state and/or nationally recognized entities, including Indiana Youth Institute, Robert Woods Johnson Foundation's County Health Rankings, United States Census, and the Center for Disease Control and Prevention. All data is Montgomery County data, unless otherwise stated.

The main source for primary data is the 2015 Community Health Needs Assessment Survey. This survey was co-written by Franciscan St. Elizabeth Health-Crawfordsville and the Montgomery County Health Department. Any other primary data gather from smaller surveys or in-person interviews are noted below. For any questions regarding the data used in this report please contact Amber Reed, the Montgomery County Health Department Administrator.

For more detailed explanations and descriptions of specific data see appendices.

# MONTGOMERY COUNTY DEMOGRAPHICS

## ESTIMATED POPULATION (JULY 1, 2015): 38,227

Age and Sex	Percent
Persons under 5 years, percent (July 1, 2014)	6.3%
Persons under 18 years, percent (July 1, 2014)	23.3%
Persons 65 years and over, percent (July 1, 2014)	16.6%
Female persons, percent (July 1, 2014)	49.6%

Race and Hispanic Origin	Percent
White alone, percent (July 1, 2014)	96.6%
Black or African American alone, percent (July 1, 2014)	1.0%
American Indian and Alaska Native alone, percent (July 1, 2014)	0.4%
Asian alone, percent (July 1, 2014)	0.6%
Native Hawaiian and Other Pacific Islander alone, percent (July 1, 2014)	0.0%
Two or More Races, percent (July 1, 2014)	1.3%
Hispanic or Latino, percent (July 1, 2014)	4.5%
White alone, not Hispanic or Latino, percent (July 1, 2014)	92.5%

Population Characteristics	
Veterans, estimated total, 2010-2014	2,840
Foreign born persons, percent, 2010-2014	2.8%
Language other than English spoken at home, percent age 5 years+, (2010-2014)*	5.2%

Child Population Under Age 18: Calendar Year 2014 [4]							
	Females	%	Males	%	Total	%	
White	3,922	89.2%	4,031	89.4%	7,953	89.3%	
Black	93	2.1%	119	2.6%	212	2.4%	
American Indian	10	0.2%	13	0.3%	23	0.3%	
Asian	34	0.8%	20	0.4%	54	0.6%	
Hispanic, of any Race	336	7.6%	324	7.2%	660	7.4%	
Total	4,507 4,395 8,902						

\*The two most common languages spoken in Montgomery County is first, overwhelmingly English, and the second is Spanish. This is evident in the breakdown of race and ethnicity above. As Hispanics make up nearly 5% of Montgomery County residents.

# IMPACT OF SOCIAL DETERMINATES OF HEALTH

## **ECONOMIC STABILITY**

Individuals with adverse economic conditions, like unemployment, have been shown to have worse health and higher rates of mortality than the employed, and populations more stable economically [5]. Limited economic stability can produce complications in obtaining healthy foods, and stable homes. Lacking constant access to food has been shown to increase negative outcomes, for example weight gain and early death [5]. Factors that contribute to economic stability or instability are intertwined with other social determinates of health and their effects on an individual's health.

## **EDUCATION**

Education level affects health and has been shown to affect generations of offspring, especially when looking at maternal education. Parents' level of education has been shown to directly affect their children's health by having increased access to resources, and has been shown to indirectly affect health and development through the quality of schools that their children can attend [5]. According to County Health Rankings, "The relationship between higher education and improved health outcomes is well known, with years of formal education correlating strongly with improved work and economic opportunities, reduced psychosocial stress, and healthier lifestyles" [5].

## SOCIAL AND COMMUNITY CONTEXT

Lacking family support, decreased contact with others, and limited involvement in the community are associated with increased morbidity (general feeling of unhealthiness) and early mortality [5]. Additionally, "social support networks have been identified as powerful predictors of health behaviors", this suggests that individuals who don't not have a strong social network are less likely to make healthy lifestyle choices than individuals with a stronger social network [5]. Understanding how individuals live, work, and play within a community is vital in determining factors that contribute to poor health outcomes.

## HEALTH AND HEALTH CARE

Having access to quality health care, including primary care, and being able to understand, process, and act on health information are important aspects that determine health outcomes. Access to health care requires multiple aspects including Health care coverage including the ability to pay for services, and the availability to access those providers of health services. Access and availability of health care treatment options can directly impact an individual's health and can allow for increased preventative screenings.

#### NEIGHBORHOOD AND BUILT ENVIRONMENT

The neighborhood in which an individual lives and the environment that surrounds him or her can have direct impacts on their health. This includes the neighborhoods one lives, their proximity to grocery stores, the quality of the home, and amount of exposure to environmental hazards. Research has shown neighborhoods closer to grocery stores (access to healthy foods) correlates to lower blood pressure and body weight. In contrast, neighborhoods close to fast food establishment have shown correlation to higher body mass index [9]. Neighborhoods and environments conducive to walking and physical activity, like bike paths, walking paths, and parks corresponds to better health [10].

# SOCIAL DETERMINATES OF HEALTH IN MONTGOMERY COUNTY

## **ECONOMIC STABILITY:**

## **POVERTY**

- Median household income (in 2014 dollars), 2010-2014: \$46,286 (United States: \$53,482) [3]
- Per capita income in past 12 months (in 2014 dollars), 2010-2014: \$22,392 (United States: \$28,555) [3]
- Persons in poverty, percent: 12.3% [3]
- Percent of Children in Poverty, Age 0-17 (2014 Calendar Year): 18.5% [4]

## **EMPLOYMENT**

2015 Community Health Needs Assessment						
Employed Full Time	58.7%					
Employed Part Time	11.8%					
Employed Part Time, Seeking Full Time Employment	1.0%					
Unemployed by Choice	4.1%					
Unemployed but Looking	1.5%					
Unemployed, disabled	3.6%					
Retired	19.3%					

Unemployment Rate: 5.5% [5]

• Underemployment (A): 15.3% [6]

## FOOD SECURITY

- Food Environment Index (B): Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) [5]
  - o Montgomery County: 7.5
  - o Indiana: 7.2 (range: 6.2-8.6)
- Food Insecurity, Percentage of population who lack adequate access to food (C): 14% [5]

Indiana Youth Institute-Kids Count in Indiana 2016 Data Book								
2011 2012 2013 2014								
% of Public School Students Receiving Free Lunches (SY)	35.4%	37.5%	39.1%	38.4%				
% of Public School Students Receiving Reduced Price Lunches (SY)	7.6%	7.7%	7.8%	8.8%				
% of Food Insecure Children	22.6%	24.3%	24.6%	N.A.				

## HOUSING STABILITY

2015 United States Census Bureau-QuickFacts-Montgomery County, Indiana				
Housing units, July 1, 2014	16,540			
Owner-occupied housing unit rate, 2010-2014	71.4%			
Median value of owner-occupied housing units, 2010-2014	\$108,200			
Median selected monthly owner costs -with a mortgage, 2010-2014	\$985			
Median selected monthly owner costs -without a mortgage, 2010-2014	\$339			
Median gross rent, 2010-2014	\$672			

2015 Community Health Needs Assessment Survey-Percent of All Personal Housing/Shelter Needs					
Homeless Shelters 16.4%					
Temporary Housing Assistance(Up to one month)	16.4%				
Subsidized Housing Assistance	61.8%				

## **EDUCATION:**

## HIGH SCHOOL GRADUATION

Public Education, Grades Pre-K-12+ [4]								
2012 2013 2014 2015								
School Enrollment Pre-K-12+ (SY) (Includes Charters)	6,168	6,115	6,134	6,086				
% English Language Learner Students	3.4	3.5	3.8	4.2				
% Special Education Students	15.6	16.1	17.4	18.7				
High School Graduation Rate (4-Year Cohort %)	96.9	96.2	97.8	N.A.				

## **ENROLLMENT IN HIGHER EDUCATION**

- High school graduate or higher, percent of persons age 25 years+, 2010-2014: 88.6%
- Bachelor's degree or higher, percent of persons age 25 years+, 2010-2014: 16.8%
- Percentage of adults ages 25-44 with some post-secondary education (D): 50% (Margin of Error: 45-54%)

Education of Adults in Montgomery County [6]						
Did not graduate high school 4.8%						
High School Diploma/GED	33.9%					
Technical School	10.8%					
Current College Student	2.3%					
College Graduate	30.8%					
Post Graduate	17.4%					

## LANGUAGE AND LITERACY

	SY 15 ISTEP+ Passing [4]				SY 15 ECA Passing [4]		
	4th Grade Math	4th Grade ELA	8th Grade Math	8th Grade ELA	Algebra 1	English 10	
Crawfordsville Com Schools	69.4	65.9	43.9	64.6	66.1	74.9	
North Montgomery Com Schools	54.1	63.4	33.5	59.1	61.5	86.4	
South Montgomery Com Schools	72.1	66.9	62.7	60.9	70.9	76.5	
Indiana Rate	64.5	69.6	53.4	62.6	68.8	78	

## EARLY CHILDHOOD EDUCATION AND DEVELOPMENT

Indiana Youth Institute-Kids Count in Indiana 2016 Data Book [4]						
	2011	2012	2013	2014		
# of Children Served by First Steps (SFY)	126	106	105	128		
# of Early Head Start & Head Start Funded Enrollment Slots	87	87	87	N.A		
# of Licensed Child Care Centers	2	2	2	1		
# of Licensed Child Care Homes	11	12	10	10		
# of Registered Child Care Ministries	5	5	5	5		
# of Licensed Child Care Slots per 100 Children, Age 0-5	11.3	11.7	11.6	6.4		
# of Children Receiving CCDF Child Care Vouchers	185	179	152	152		
Monthly Avg # of Children on Wait List for CCDF Vouchers	37	22	28	11		

## SOCIAL AND COMMUNITY CONTEXT:

## SOCIAL COHESION

Social Associations: Number of membership associations per 10,000 population (E) [5].

Montgomery County: 14.1 Indiana: 12.6 Top U.S. Performers (90th Percentile): 22.1

## CIVIC PARTICIPATION

Montgomery County Voter Counts by Status (As of 4/5/2016) [8]					
	Active	Inactive	Total	Pending	
2016	20,739	2,551	23,290	455	

Indiana Election Division-Voter Registration And Turnout Statistics-Montgomery County [9]				
	Registered Voters	Voters Voting	%	
2014 General Election	22,945	8,850	39%	
2014 Primary Election	22,844	5,261	23%	
2012 General Election	24,223	14,744	61%	
2012 Primary Election	23,674	8,073	34%	
2010 General Election	23,258	11,031	47%	
2010 Primary Election	22,946	7,032	31%	

#### DISCRIMINATION

**Residential segregation**, is the index of dissimilarity where higher values indicate greater residential segregation between non-white and white county residents. The residential segregation index ranges from 0 (complete integration) to 100 (complete segregation) [5].

Montgomery County: 53 Montgomery County ranks in the bottom 10 counties in Indiana

**Income Inequality:** Ratio of household income at the 80th percentile to income at the 20th percentile. A higher inequality ratio indicates greater division between the top and bottom ends of the income spectrum [5].

Montgomery County: 3.7 Indiana: 4.4 (Range 3.3-6.4)

#### INCARCERATION

	Indiana Department of Correction							
Montgomery County-Adult New Admissions (by County of Commit) [7]								
	2012 2013 2014 2015							
Male	92	77	103	99				
Female	24	42	26	32				
Total	116	119	129	131				

## **Health and Health Care:**

#### ACCESS TO HEALTH CARE

Uninsured, percentage of population under age 65 without health insurance: 17% (Margin of Error: 15-19%) [5]

Indiana Youth Institute-Kids Count in Indiana 2016 Data Book [4]				
	2010	2011	2012	2013
% of Mothers Who Received First Trimester Prenatal Care	67.6	65.2	71.1	69.3
% of Children Under Age 19 Who Are Uninsured	9.9	8.3	8.9	9.4

2015 Community Health Needs Assessment				
	White/Caucasian*	Hispanic/Latino*		
Percent with no insurance	5%	65%		

<sup>\*</sup>The number of Hispanic/Latino survey respondents is much less then white/Caucasian for the 2015 CHNA, and some biases are presented through the recruitment process for survey respondents through employer list serves. Therefore, it can be problematic to directly compare uninsured rates between Whites/Caucasians and Hispanic/Latinos. Targeting persons through employers can present an underreporting of uninsured rates due to employee provider insurance. However, with additional surveying of Hispanic/Latinos in the Montgomery County community, estimates for the uninsured rate for Hispanic/Latinos could be upwards of 50% and could possibly be slightly over 60%.

### ACCESS TO PRIMARY CARE

Primary Care Physicians, ratio of population to primary care physicians [5]:

Montgomery County: 2,250:1 Indiana: 1,490:1

Other primary care providers, Ratio of population to primary care providers other than physicians (F) [5]:

Montgomery County: 3,468:1 Indiana: 1,661:1

2015 Community Health Needs Assessment						
	White/Caucasian**		Hispanic/Latino**			
Do you have a family physician	Yes	92%	Yes	31%		
that you go to for family care?	No	7%	No	67%		
	I Don't Know	1%	I Don't Know	3%		

<sup>\*</sup>See note above, numbers might not add up to 100 due to rounding.

#### HEALTH LITERACY

2015 Community Health Needs Assessment - Health and Wellness Services		
	Percent of Personal Needs	
Nutrition Education for Adults	9%	
Nutrition Education for Chronic Diseases	10%	
Weight Management Education	14%	

#### Nearly 40% of Hispanics served said they have a personal need for Translation and Interpreting Resources [6]

2015 Community Health Needs Assessment			
Which do you use to find information about Health Issues? Top 5 Responses:	Percent %		
A health professional	73%		
Internet-Health related websites	72%		
Television	51%		
Family and Friends	49%		
Local Newspaper	37%		

## **NEIGHBORHOOD AND BUILT ENVIRONMENT:**

## ACCESS TO HEALTHY FOODS

**Limited access to healthy foods,** percentage of population who are low-income and do not live close to a grocery store (G) [5]:

Montgomery County: 4% Indiana: 6% Top U.S. Performers (90th Percentile): 2%

## QUALITY OF HOUSING

**Severe housing problems**, percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (H) [5]:

Montgomery County: 11% Indiana: 14% (Range 7-24%) Top U.S. Performers (90th Percentile): 9%

#### CRIME AND VIOLENCE

Violent Crime, number of reported violent crime offenses per 100,000 population (I) [5].

Montgomery County: 168 Indiana: 334 (Range 14-1,124) Top U.S. Performers (90th Percentile): 59

Indiana Youth Institute-Kids Count in Indiana 2016 Data Book [4]					
	2011	2012	2013	2014	
# of Children in Need of Services (CHINS) Identified by DCS	75	93	82	92	
Child Abuse/Neglect Rate per 1,000 Children Under Age 18	18.3	9.3	10.3	12.2	
# of Child Neglect Cases Substantiated by DCS	113	48	74	84	
# of Child Sexual Abuse Cases Substantiated by DCS	37	20	13	8	
# of Child Physical Abuse Cases Substantiated by DCS	17	17	5	16	
# of Termination of Parental Rights Case Filings	22	10	19	20	
# of Juvenile Delinquency Case Filings	63	67	64	37	
# of Juvenile Status Case Filings	0	0	0	0	
# of Juveniles Committed to the Department of Correction	6	8	10	5	

#### **ENVIRONMENTAL CONDITIONS**

**Air Pollution,** Air Pollution - Particulate Matter is the average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) in a county (J) [5]:

Montgomery County: 13.6 Indiana: 13.5 Top U.S. Performers (90th Percentile): 2%

## REFERENCES

- Brennan Ramirez LK, Baker EA, Metzler M. Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2008. Accessible at:
  - http://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/pdf/sdoh-workbook.pdf
- 2. Healthy People 2020. Office of Disease Prevention and Health Promotion. Accessible at: https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health
- 3. 2015 Census QuickFacts Montgomery County, Indiana. United States Census Bureau. Accessible at: https://www.census.gov/quickfacts/table/HSG495214/18107,00
- 4. 2016 Montgomery County Data Book. Kids Count in Indiana. Indiana Youth Institute. Accessible at: <a href="https://s3.amazonaws.com/iyi-website/county-snapshots/County-Snapshots-Montgomery.pdf?mtime=20160210095643">https://s3.amazonaws.com/iyi-website/county-snapshots/County-Snapshots-Montgomery.pdf?mtime=20160210095643</a>
- 5. 2016 County Health Rankings & Roadmaps. University of Wisconsin Population Health Institute and Robert Woods Johnson Foundation. Accessible at: http://www.countyhealthrankings.org/
- 6. 2015 Community Health Needs Assessment Survey. Montgomery County Health Department. Montgomery County, Indiana. For more information visit: http://www.montgomeryco.net/department/?fDD=8-0
- 7. Indiana Department of Corrections. Data & Statistics, Statistical Data. Accessible at: <a href="http://www.in.gov/idoc/2376.htm">http://www.in.gov/idoc/2376.htm</a>.
- 8. Voter Registration and Turnout Statistics. Indiana Election Division. Accessible at: <a href="http://www.in.gov/sos/elections/2983.htm">http://www.in.gov/sos/elections/2983.htm</a> and <a href="http://www.in.gov/sos/elections/2393.htm">http://www.in.gov/sos/elections/2393.htm</a>.
- 9. Hill, D. A Neighborhood's Built Environment May Have Numerous Effects on Its Residents' Health. Robert Wood Johnson Foundation. January 14, 2014. Accessible at: <a href="http://www.rwjf.org/en/library/research/2014/01/a-neighborhood-s-built-environment-may-have-numerous-effects-on-.html">http://www.rwjf.org/en/library/research/2014/01/a-neighborhood-s-built-environment-may-have-numerous-effects-on-.html</a>
- 10. Wineman, J.D., Marans, R.W., Schulz, A.J., Westhuizen, D., Mentz, G., and P. Max. (2012). Neighborhood Design and Health: Characteristics of the Built Environment and Health Related Outcomes for Residents of Detroit Neighborhoods. Active Living Research: University of California, San Diego and Robert Wood Johnson Foundation. Accessible at: <a href="http://activelivingresearch.org/neighborhood-design-and-health-characteristics-built-environment-and-health-related-outcomes">http://activelivingresearch.org/neighborhood-design-and-health-characteristics-built-environment-and-health-related-outcomes</a>

## **APPENDICES**

A. Underemployment: (for those that the question applied to themselves)-2015 CHNA

Underemployment includes those workers that are highly skilled but working in low paying jobs, workers that are highly skilled but work in low skill jobs and part-time workers that would prefer to be full-time.

#### B. Food Environment Index:

#### http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/133/description

- 1) Limited access to healthy foods estimates the percentage of the population who are low income and do not live close to a grocery store. Living close to a grocery store is defined differently in rural and non-rural areas; in rural areas, it means living less than 10 miles from a grocery store whereas in non-rural areas, it means less than 1 mile. Low income is defined as having an annual family income of less than or equal to 200 percent of the federal poverty threshold for the family size.
- 2) Food insecurity estimates the percentage of the population who did not have access to a reliable source of food during the past year. A 2-stage fixed effect model was created using information from the Community Population Survey, Bureau of Labor Statistics, and American Community Survey.
- C. Food Insecurity: <a href="http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/139/description">http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/139/description</a>
  Food Insecurity is the percentage of the population who did not have access to a reliable source of food during the past year.[1] This measure was modeled using information from the Community Population Survey, Bureau of Labor Statistics, and American Community Survey. More detailed information can be found here. This is one of two measures that are used to construct the Food Environment Index.

#### D. Some Post-Secondary Education:

 $\underline{\text{http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/69/description}}$ 

Some College is the percentage of the population ages 25-44 with some post-secondary education, such as enrollment in vocational/technical schools, junior colleges, or four-year colleges. It includes individuals who pursued education following high school but did not receive a degree.

- E. Social Associations: <a href="http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/140/description">http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/140/description</a>
  Social Associations is the number of associations per 10,000 population. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations. These associations are identified by NAICS codes 813410,713950,713910,713940,711211,813110,813940,813930,813910 and 813920.
- F. Other Primary Care Providers:

http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/131/description

The number of other primary care providers per the population of a county. Other primary care providers include nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists.

G. Limited Access to Healthy Foods:

http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/83/description

Limited Access to Healthy Foods is the percentage of the population who are low income and do not live close to a grocery store. Living close to a grocery store is defined differently in rural and non-rural areas; in rural areas, it means living less than 10 miles from a grocery store; in non-rural areas, less than 1 mile. Low income is defined as having an annual family income of less than or equal to 200 percent of the federal poverty threshold for the family size.

H. Severe Housing Problems:

http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/136/description

Severe overcrowding is defined as more than 1.5 persons per room. Severe cost burden is defined as monthly housing costs (including utilities) that exceed 50% of monthly income.

- I. Violent Crime: <a href="http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/43/description">http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/43/description</a>
  Violent Crime is the number of violent crimes reported per 100,000 population. Violent crimes are defined as offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery, and aggravated assault.
- J. Air Pollution: <a href="http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/125/description">http://www.countyhealthrankings.org/app/indiana/2016/measure/factors/125/description</a>
  Air Pollution Particulate Matter is the average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) in a county. Fine particulate matter is defined as particles of air pollutants with an aerodynamic diameter less than 2.5 micrometers. These particles can be directly emitted from sources such as forest fires, or they can form when gases emitted from power plants, industries and automobiles react in the air.

\*All descriptions of County Health Ranking Statistics are taken directly from the links provided and all content is that of the Robert Woods Johnson Foundation and the University of Wisconsin Population Health Institute. For more information regarding individual statistics click the links above, or visit <a href="http://www.countyhealthrankings.org/">http://www.countyhealthrankings.org/</a>