

Primary Language Spoken in the Home: An Analysis of a Field Added to the Kansas Birth Certificate

The Kansas Office of Vital Statistics (OVS) began collecting data about the primary language spoken in the home in the 2005 revision of the Certificate of Live Birth. While the layout of the 2005 birth certificate largely followed the national 2003 Standard Birth Certificate, several questions, including one about language spoken in the home, were added by OVS after consultation with other parties concerned with the collection and analysis of Kansas birth data.

The 2005 certificate allowed birth clerks to select a single check box for one of ten specified languages (English, Spanish, Vietnamese, German, French, Russian, Ukrainian, Mandarin, Cantonese and Sign Language), or to select a check box for “Other” and enter language information in a free-form text field. The Office of Vital Statistics consulted with agency program staff, researchers and epidemiologists to identify the 10 languages included on the certificate based on the historical importance to Kansas communities.

During the 2005-2015 period, English (390,214 births), Spanish (30,775 births), Vietnamese (881 births), and German (778 births) have been most frequently reported as the primary language spoken in the home; Mandarin (427 births) took sixth place, after Arabic (643 births), which was entered via the free-form text field. The remaining languages on the list selected for check box status (Sign Language, 145 births; French, 110 births; Russian, 76 births; Cantonese, 49 births; and Ukrainian, 14 births) have been less common than several other languages that have been reported via the free-form text field. In addition to Arabic, three languages entered via the free-form text field had over two hundred births in the period: Somali (248 births), Burmese (243 births), and Telugu (226 births).

Language names entered through the free-form text field vary widely in spelling, and any analysis involves analyst judgment about misspelling, as well as some knowledge of language synonyms or access to a table of such. In the future, it may be necessary to provide check boxes for additional languages and to remove the check boxes for languages which are rarely reported.

Since 2005, English and Spanish have been the languages most frequently selected (88.0% and 6.9%, respectively, of all births to Kansas residents in the 2005-2015 period). In the same period, no language information was provided for 3.5 percent of

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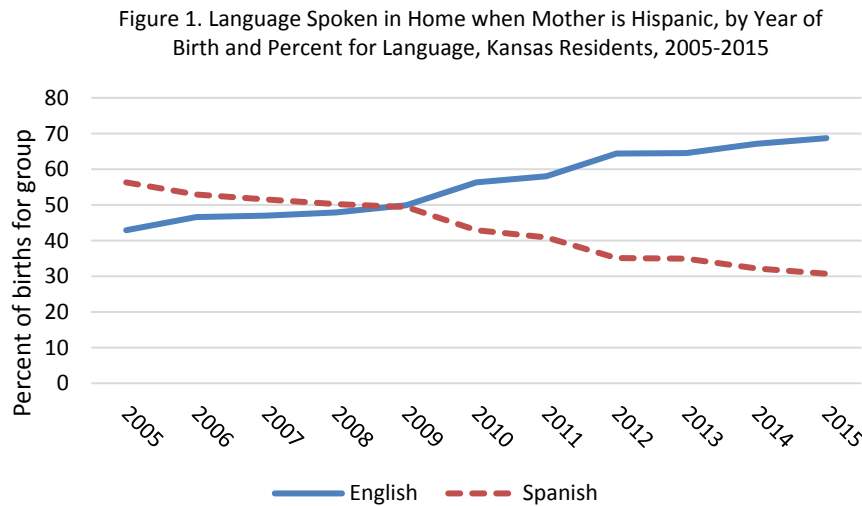
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births, and all other languages, whether selected by check box or by free-form text field, combined for 1.6 percent of births.

The percentage of births for which English was reported as the primary language spoken in the home increased from 85.7 percent in 2005 to 90.1 percent in 2015. The percentage of births for which Spanish was reported as the primary language spoken in the home decreased from 8.6 percent in 2005 to 4.9 percent in 2015.

The decline of Spanish as the primary language spoken in the home is not due to a decline in births by Hispanic mothers—the percentage of births to Hispanic mothers has varied within a fairly narrow range (15.6-16.5% of all births) over the 2005-2015 period. Instead, it appears to be associated with the rise of English as the primary language spoken



in the home by mothers who identify themselves as Hispanic. In 2005, Spanish was the primary language spoken in the home for 56.3 percent of Hispanic mothers, compared to 42.9 percent for whom English was the primary language. By 2015, Spanish was the primary language spoken in the home for

30.7 percent of Hispanic mothers, compared to 68.7 percent for whom English was the primary language (see Figure 1 for trends).

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The Effect of Postsecondary Students on County Poverty Rates in Kansas

Background

Poverty measures are commonly used as a proxy for deprivation in well-being [1] in Community Health Assessments and other public health publications. Poverty statistics are important because they are readily available and are frequently used to estimate vulnerability and/or the need for health care or social service programs for underserved populations. Planners and policy makers also use poverty rates as a key economic indicator to evaluate trends and current economic conditions within the community, or to make comparisons between sectors of the population [2]. For some communities, however, readily available U.S. Census data may not tell the whole story. Communities with colleges or universities, for example, may have poverty rates that are inflated by the

presence of postsecondary students. In college towns, some decision makers may discount available poverty statistics because it is unclear if these statistics are skewed by the presence of students. When poverty measures are discounted; however, pervasive and persistent poverty may go unrecognized and/or be under-addressed.

Poverty status in the American Community Survey (ACS) is determined by comparing annual income to a set of dollar values, called poverty thresholds, which vary by family size, number of children, and the age of the householder. By design, this poverty measure only includes household populations living on household resources. People not living in households are excluded from poverty estimates, so individuals living in group settings such as dormitories, nursing homes, hospitals, correctional facilities, shelters, group homes, or military barracks are excluded.

If all postsecondary students lived in dormitories, reported poverty statistics would not be affected by the presence of students. However, in some college towns many students live off-campus in rented apartments or houses and account for a large proportion of the household population. Many of these students report very low incomes that would technically place them below the poverty level. In general, poverty among undergraduate and graduate students is assumed to be qualitatively different from the poverty experienced by other residents in poverty. Students may have access to other resources such as student loans or savings, or have safety nets; e.g., parents who pay for housing or insurance that is not captured as income by the ACS. It is also assumed that student poverty is time-limited and that acquiring a degree from college will result in increased earning power. Recognizing that college or graduate student poverty may mean something very different from poverty among other groups such as the pervasively underemployed or unemployed, there may be a need to adjust the reported poverty rate for it to be actionable information.

Objective

The objective of this analysis is to suggest a method for adjusting poverty estimates for counties with a relatively high proportion of students and to illustrate when this analysis may be important.

Methods

Data from the American Community Survey (ACS) 5-year dataset for 2011-2015 was used for this analysis. Using a method described by Rorem & Juday, a modified poverty rate was computed and compared with the overall poverty estimate [3]. Overall poverty estimates were measured as *percent below the poverty level* for the population for whom poverty is determined in Table S1701. Poverty estimates without college students was computed using numbers found in Table B14006. This table breaks down populations with income in the past 12 months *below the poverty level* and *at or above the poverty level* by school enrollment categories. The denominator for the poverty estimate without college students, was the sum of the *non-college student* population at both *at or above the poverty*

level and below the poverty level. The “non-college student” population is comprised as those enrolled in nursery school, kindergarten, grades 1-4, grades 5-8, grades 9-12, and those not enrolled in school. The numerator are non-college students *below the poverty level* only.

For percent of the population enrolled in postsecondary education for each county, the numerator was computed as “all students in undergraduate college or graduate school” regardless of poverty status (Table S1401) divided by the population for the county.

Results

Tables 1 and 2 show that, in most Kansas counties, removing students from the poverty measure results in a lower poverty rate; however, the impact of students on the poverty level is not uniform across localities. Table 2 shows the overall ACS poverty measure and the modified poverty rate (poverty rate without undergraduate or graduate students) for those Kansas counties with the largest proportion of postsecondary students (>10%).

In all of these counties, removing students from the poverty measure results in a lower poverty rate. However, the degree to which the poverty rate drops varies even among this group of counties. For example, removing students from the poverty measure does not

County	Population Enrolled in Postsecondary Education ¹ (%)	ACS Poverty Rate ^{1,3} (%)	Poverty Rate Without College Students ^{2,3} (%)	Largest College or University in County
Riley	28.6	22.5	9.6	Kansas State University
Douglas	23.4	19.0	11.6	University of Kansas
Ellis	16.2	15.6	10.4	Fort Hays State University
Crawford	15.6	22.0	16.2	Pittsburg State University
Lyon	13.6	21.5	16.6	Emporia State University
Atchison	10.8	19.2	16.9	Benedictine College
Doniphan	10.1	12.4	11.5	Highland Community College
Thomas	10.1	9.7	7.3	Colby Community College

1 ACS 2011-2015 estimates

2 The poverty rate without college students (non-postsecondary student poverty rate) includes residents ages 3 and up.

3 The overall poverty rate includes all residents living in households

seem to change the poverty rate significantly for Doniphan or Thomas counties. Thus, the official poverty measure may be a good indicator of residents’ needs in these counties. On the other hand, in Riley, Douglas, Ellis, Crawford and Lyon counties, students account for many of those in poverty. In these locations the poverty rate without college students is considerably lower than the official overall estimates by the ACS.

The overall poverty rate for Kansas for 2011-2015 was 13.6% and 12.1% without college students. Comparing counties to the official state poverty rate of 13.6%, all counties listed in Table 1 except for Doniphan and Thomas have official poverty rates higher than the State. When college students are excluded, however, Riley, Douglas and Ellis Counties have lower poverty rates than the State, while Crawford, Lyon, and Atchison counties continue to have higher poverty rates than the State.

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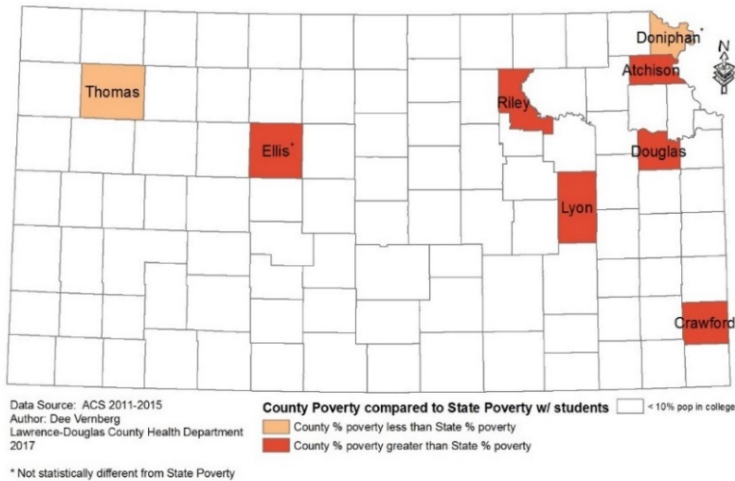
Table 2. Population in Higher Education and Overall and Modified Poverty Rate, Kansas Counties, ACS, 2011-2015

Kansas County	Population Enrolled in Higher Education (%)	ACS Poverty Rate (%)	Poverty Rate Without College Students (%)	Kansas County	Population Enrolled in Higher Education (%)	ACS Poverty Rate (%)	Poverty Rate Without College Students (%)
Allen	6.0	18.0	17.9	Linn	2.4	13.2	13.0
Anderson	2.7	17.5	16.9	Logan	2.8	8.4	8.3
Atchison	10.8	19.2	16.9	Lyon	13.6	21.5	16.6
Barber	2.8	10.9	10.6	Marion	6.6	11.4	11.0
Barton	3.6	15.9	15.0	Marshall	1.8	11.1	10.5
Bourbon	5.5	19.2	18.1	McPherson	6.2	7.2	6.8
Brown	3.8	16.4	16.1	Meade	1.8	11.3	10.3
Butler	6.9	10.4	9.5	Miami	4.8	9.2	9.0
Chase	2.5	13.8	12.9	Mitchell	6.1	10.4	9.4
Chautauqua	3.3	16.8	15.9	Montgomery	5.7	19	17.5
Cherokee	3.9	17.0	16.9	Morris	2.5	8.9	8.6
Cheyenne	1.5	8.1	7.4	Morton	3.2	10.8	10.0
Clark	3.7	14.9	14.4	Nemaha	2.7	11.4	10.6
Clay	3.6	11.4	11.6	Neosho	5.1	18.6	17.4
Cloud	6.9	13.5	11.9	Ness	2.7	11.7	11.5
Coffey	3.0	10.0	9.4	Norton	3.9	8.5	7.2
Comanche	3.0	7.2	7.8	Osage	3.2	12.6	12.4
Cowley	7.4	17.6	15.8	Osborne	3.7	15.4	15.1
Crawford	15.6	22.0	16.2	Ottawa	3.0	7.9	7.9
Decatur	3.3	11.2	10.1	Pawnee	5.7	7.8	7.7
Dickinson	4.9	10.5	10.6	Phillips	2.5	9.2	8.9
Doniphan	10.1	12.4	11.5	Pottawatomie	5.6	8.9	8.1
Douglas	23.4	19.0	11.6	Pratt	5.7	12.3	12.2
Edwards	3.3	11.7	12.0	Rawlins	2.9	10	9.7
Elk	2.6	18.3	18.6	Reno	5.1	12.2	11.7
Ellis	16.2	15.6	10.4	Republic	3.3	12.8	12.7
Ellsworth	3.7	9.0	8.1	Rice	8.1	14.7	13.6
Finney	4.8	17.0	16.9	Riley	28.6	22.5	9.6
Ford	4.2	18.2	16.8	Rooks	2.4	14.4	14.3
Franklin	5.2	13.1	12.5	Rush	3.3	9.4	9.0
Geary	8.8	12.4	12.2	Russell	4.1	12.9	12.0
Gove	2.9	8.2	7.7	Saline	6.9	16.1	14.3
Graham	3.0	11.2	9.7	Scott	2.4	6.6	7.1
Grant	2.0	10.3	9.9	Sedgwick	7.5	15.1	14.3
Gray	3.7	10.0	9.8	Seward	6.3	19.1	18.1
Greeley	5.5	8.1	7.4	Shawnee	6.8	15.2	13.8
Greenwood	3.7	15.1	13.7	Sheridan	1.5	6.6	6.5
Hamilton	1.7	14.3	12.8	Sherman	4.3	19	19.2
Harper	2.6	16.4	16.1	Smith	3.2	14.8	13.7
Harvey	6.7	13.2	12.8	Stafford	3.4	16.1	15.9
Haskell	2.1	13.8	13.6	Stanton	3.6	5.3	5.4
Hodgeman	2.2	4.6	4.6	Stevens	1.7	18.2	17.5
Jackson	3.3	9.1	8.9	Sumner	4.7	12.4	11.8
Jefferson	3.7	7.5	7.2	Thomas	10.1	9.7	7.3
Jewell	2.7	15.5	14.8	Trego	4.2	4.1	3.7
Johnson	6.5	6.2	5.6	Wabaunsee	3.5	5.9	5.8
Kearny	4.0	10.7	10.6	Wallace	1.1	8.2	8.7
Kingman	3.3	10.7	10.5	Washington	2.9	11.7	10.8
Kiowa	9.2	15.5	13.4	Wichita	2.9	9.9	10.7
Labette	4.7	17.8	16.7	Wilson	3.1	18.6	17.5
Lane	3.2	9.0	9.1	Woodson	3.0	22.8	22.6
Leavenworth	7.8	11.4	10.9	Wyandotte	5.2	23.9	23.0
Lincoln	2.0	11.0	10.5				

Conclusion

Although there are several measures of poverty that are reported by the ACS, percent poverty for households is a standard indicator in many health assessments and is a frequently-used economic indicator. This analysis shows that the overall poverty rate is a valid measure for most Kansas counties, but it may or may not be a good measure for

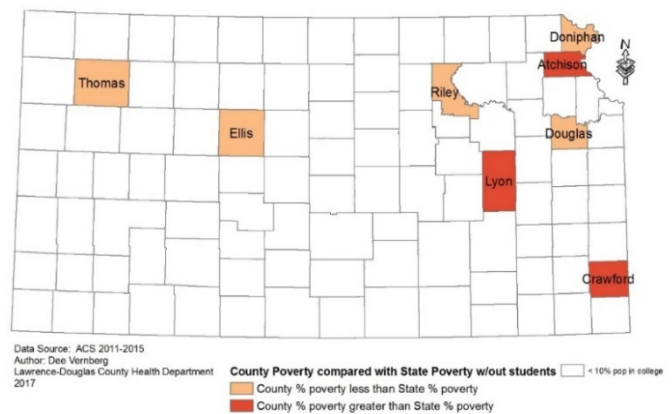
Figure 1. Counties with High Percentages of College Students (>10%): Comparison of County & State Poverty Rates with Students



towns with large colleges or universities. For the time period 2011-2015, Figures 1 & 2 show for Riley, Douglas and Ellis counties that the point estimates for overall poverty were higher than the state, but when students were excluded, these counties had lower poverty rates than the state. On the other hand, poverty rates for Crawford and Lyon counties were consistently higher than the state whether or not students were excluded. Likewise, the point estimates for poverty for Doniphan and

Thomas counties were consistently lower than the state whether or not students were excluded. However, the presence of a large university does not always predict substantial changes in poverty rates when excluding students. For example, despite the presence of Wichita State University (and several other colleges and universities) in Sedgwick County, the percent of poverty with and without students is very similar in that county (Table 2).

Figure 2. Counties with High Percentages of College Students (>10%): Comparison of County & State Poverty Rates Without Students



It is important to recognize the modified poverty rate should be interpreted as an underestimate of true poverty, because it excludes students who truly may lack access to resources during the time they are in school. This analysis also only considers point estimates from the ACS. Maps that use ACS data commonly do not consider margins of error, but a method suggested by the US Census Bureau

does allow for statistical comparison between two geographic areas [4]. When this method is applied to the overall poverty measure, the picture changes slightly as Doniphan and Ellis Counties are not statistically different from the State poverty. Unfortunately, the simple method described in this article that allows students to be excluded does not include a method for calculating a margin of error so statistical comparisons with the state are not possible.

Nevertheless, the method described in this analysis for calculating a modified poverty rate may help officials describe how much of the poverty in their community can be explained by college students and may help them to better describe poverty in their community.

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Environmental Health Surveillance System: Mortality Due to Heat Exposure and Hypothermia, Kansas 2006-2015

Each year, many Kansas residents die of heat stress or hypothermia following exposure to excessive outdoors temperature. Starting in 2011, the Environmental Public Health Tracking (EPHT) program at the Kansas Department of Health and Environment (KDHE) established a surveillance system to monitor morbidity and mortality associated with severe weather. This report provides a brief summary of deaths due to heat stress and hypothermia that occurred from 2006 to 2015 and outlines a few initiatives to prevent injuries and deaths during extreme weather events.

The surveillance data is provided by the KDHE Office of Vital Statistics and is updated on a monthly basis as new death certificates are added to the system. Deaths due to man-made heat or cold are excluded from this data. As a note of caution, the number of deaths reported below is likely to be an undercount since it relies on information available on death certificates alone. Some cases may have been missed if not enough details about the cause of death are provided by the certifier.

Table 1 provides a raw count of deaths occurring over the 2006 to 2015 period. Based on this data, it appears that the number of deaths due to natural heat and cold vary from year to year. However, at least over this period, more people died from hypothermia than from heat stress and the range of the annual number of death is wider for heat stress than for hypothermia.

In addition to the severity of the weather events, many factors may increase the risk of dying from heat stress or hypothermia. This includes old age, being male, low socioeconomic status, social isolation, chronic illness, substance abuse, and mental illness.

Table 1. Deaths Due to Accidental Exposure to Natural Heat or Cold (hypothermia) by Sex, by Year Kansas, 2006-2015						
Year	Heat Stress			Hypothermia		
	Male	Female	Total	Male	Female	Total
2006	16	4	20	3	0	3
2007	8	3	11	3	3	6
2008	5	3	8	10	3	13
2009	5	5	10	5	5	10
2010	3	1	4	7	7	14
2011	29	8	37	11	5	16
2012	6	3	9	7	3	10
2013	3	1	4	12	5	17
2014	2	3	5	12	7	19
2015	5	0	5	8	2	10

Notes:

1. Only Kansas resident deaths are included in these statistics.
2. Heat-related deaths are included in these statistics if they occur between May 1st and September 30th of each year.
3. Cold (hypothermia)-related deaths are included if they occur between October 1st and April 30th of the following

This report is submitted in preparation of the upcoming summer season as a reminder of the dangers associated with prolonged heat exposure.

It is important to note that the number of deaths from exposure to natural heat or cold in Kansas exceeds the number of deaths caused by tornado, lightning, and floods combined. Fortunately, these deaths are highly preventable. Hot and cold weather forecasts have become more and more reliable and prevention of exposure does not require a lot of resources. Since 2011, a group of stakeholders internal and external to KDHE have collaborated in the Extreme Weather Events Work Group (EWEWG) on weather-related prevention activities. This collaboration led to the creation of toolkits for extreme heat and

extreme cold events to facilitate decision making for emergency managers, hospital administrators, and county health department officials. In partnership with the Kansas and Missouri EPHT programs, the group has launched in 2016 another project called the Extreme Weather Shelter Project. This project aims at increasing the availability of cooling and warming shelters to protect those in need in the event of very hot or very cold days. A web page with a map of available shelters is hosted on the EPHT web portal at: <https://keap.kdhe.state.ks.us/Ephtm/PortalPages/ContentData>.

As mentioned above, severe weather events in Kansas can be very dangerous, especially if caught unprepared. Many programs are currently collaborating to increase the level of awareness and preparedness in the population. The Kansas EPHT program is committed to supporting those efforts by conducting surveillance and learning from the data how best to protect the population during severe weather events. For more information please visit: <https://keap.kdhe.state.ks.us/Ephtm>.

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Census Bureau Estimates of 2016 Kansas Population Down From Estimates of 2015 Kansas Population Released Last Year. Did the Population of Kansas Actually Decline?

In early 2017, the United States Census Bureau (USCB) released its first population estimates for July 1, 2016. Kansas total population was estimated at 2,907,289, down 4,352 from the estimate of Kansas total population for 2015 (2,911,641) released in 2016. Despite appearances, the USCB did *not* estimate that the population of Kansas declined from 2015 to 2016.

When the USCB releases a new population estimate, it also reviews its population estimates for earlier years, and revises them based on additional data received since the original estimate was released. Population estimates are based on counts of births and deaths as reported by the states (these don't change much once the reporting year is over), and on estimates of population migration, which are much less reliable, at least on first release.

Year	Original Estimate	Estimate released in 2017
2012	2,885,905	2,885,262
2013	2,893,957	2,892,821
2014	2,904,021	2,899,360
2015	2,911,641	2,906,721
2016	2,907,289	2,907,289

Original USCB estimates of Kansas population would indicate a decrease from 2015 to 2016 (Table 1). However, the revised estimates indicate USCB had overestimated the increases in Kansas population in previous years. The USCB revised estimates still show that the population of Kansas has increased each year since 2012, just not as quickly as originally estimated. Census estimates for counties are in Table 2.

Population counts and population-based rates in VSDA's *Annual Summary of Vital Statistics* are always based on the population estimates available at the time the report was prepared. Any counts or rates in the *Annual Summary* based on earlier years (as in 5-year tables) are *not* revised to reflect newer population estimates for those years—it would confuse many users if they compared the rates for 2015 as released in the 2015 *Annual Summary* to the rates for 2015 found in a 5-year table in the 2016 *Annual Summary* and saw different numbers.

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Table 2. Population Estimates and Change by County, Kansas 2015 and 2016

Geography	Population Estimate (as of July 1)		Change 2015 to 2016		Geography	Population Estimate (as of July 1)		Change 2015 to 2016	
	2015	2016	N	% [1]		2015	2016	N	% [1]
Kansas	2,911,641	2,907,289	-4,352	-0.1	Lincoln	3,105	3,073	-32	-1.0
Allen	12,717	12,714	-3	0.0	Linn	9,536	9,558	22	0.2
Anderson	7,808	7,827	19	0.2	Logan	2,825	2,831	6	0.2
Atchison	16,398	16,380	-18	-0.1	Lyon	33,339	33,510	171	0.5
Barber	4,823	4,688	-135	-2.8	McPherson	28,941	28,804	-137	-0.5
Barton	27,103	26,775	-328	-1.2	Marion	12,103	12,112	9	0.1
Bourbon	14,712	14,617	-95	-0.6	Marshall	9,936	9,836	-100	-1.0
Brown	9,776	9,684	-92	-0.9	Meade	4,330	4,216	-114	-2.6
Butler	66,741	67,025	284	0.4	Miami	32,553	32,964	411	1.3
Chase	2,679	2,669	-10	-0.4	Mitchell	6,282	6,243	-39	-0.6
Chautauqua	3,402	3,374	-28	-0.8	Montgomery	33,314	32,746	-568	-1.7
Cherokee	20,533	20,246	-287	-1.4	Morris	5,645	5,573	-72	-1.3
Cheyenne	2,679	2,661	-18	-0.7	Morton	3,007	2,848	-159	-5.3
Clark	2,096	2,072	-24	-1.1	Nemaha	10,227	10,241	14	0.1
Clay	8,347	8,143	-204	-2.4	Neosho	16,346	16,146	-200	-1.2
Cloud	9,219	9,150	-69	-0.7	Ness	3,005	2,962	-43	-1.4
Coffey	8,384	8,433	49	0.6	Norton	5,550	5,493	-57	-1.0
Comanche	1,843	1,862	19	1.0	Osage	15,847	15,843	-4	0.0
Cowley	35,788	35,753	-35	-0.1	Osborne	3,683	3,642	-41	-1.1
Crawford	39,217	39,164	-53	-0.1	Ottawa	5,975	5,920	-55	-0.9
Decatur	2,932	2,832	-100	-3.4	Pawnee	6,838	6,743	-95	-1.4
Dickinson	19,303	19,064	-239	-1.2	Phillips	5,428	5,428	0	0.0
Doniphan	7,797	7,664	-133	-1.7	Pottawatomie	23,298	23,661	363	1.6
Douglas	118,053	119,440	1,387	1.2	Pratt	9,691	9,584	-107	-1.1
Edwards	2,968	2,938	-30	-1.0	Rawlins	2,506	2,549	43	1.7
Elk	2,605	2,547	-58	-2.2	Reno	63,718	63,220	-498	-0.8
Ellis	29,029	28,893	-136	-0.5	Republic	4,725	4,699	-26	-0.6
Ellsworth	6,343	6,328	-15	-0.2	Rice	9,977	9,831	-146	-1.5
Finney	37,118	36,722	-396	-1.1	Riley	75,247	73,343	-1,904	-2.5
Ford	34,536	33,971	-565	-1.6	Rooks	5,174	5,076	-98	-1.9
Franklin	25,609	25,560	-49	-0.2	Rush	3,130	3,058	-72	-2.3
Geary	37,030	35,586	-1,444	-3.9	Russell	7,039	6,988	-51	-0.7
Gove	2,640	2,589	-51	-1.9	Saline	55,691	55,142	-549	-1.0
Graham	2,591	2,564	-27	-1.0	Scott	4,964	5,032	68	1.4
Grant	7,733	7,646	-87	-1.1	Sedgwick	511,574	511,995	421	0.1
Gray	6,133	6,034	-99	-1.6	Seward	23,152	22,709	-443	-1.9
Greeley	1,330	1,296	-34	-2.6	Shawnee	178,725	178,146	-579	-0.3
Greenwood	6,244	6,151	-93	-1.5	Sheridan	2,512	2,509	-3	-0.1
Hamilton	2,474	2,536	62	2.5	Sherman	5,983	5,965	-18	-0.3
Harper	5,817	5,685	-132	-2.3	Smith	3,704	3,632	-72	-1.9
Harvey	35,073	34,913	-160	-0.5	Stafford	4,236	4,208	-28	-0.7
Haskell	4,064	4,006	-58	-1.4	Stanton	2,072	2,062	-10	-0.5
Hodgeman	1,893	1,870	-23	-1.2	Stevens	5,806	5,584	-222	-3.8
Jackson	13,338	13,291	-47	-0.4	Sumner	23,535	23,272	-263	-1.1
Jefferson	18,930	18,897	-33	-0.2	Thomas	7,904	7,892	-12	-0.2
Jewell	2,970	2,901	-69	-2.3	Trego	2,927	2,872	-55	-1.9
Johnson	580,159	584,451	4,292	0.7	Wabaunsee	6,951	6,891	-60	-0.9
Kearny	3,956	3,917	-39	-1.0	Wallace	1,518	1,497	-21	-1.4
Kingman	7,687	7,467	-220	-2.9	Washington	5,598	5,546	-52	-0.9
Kiowa	2,564	2,483	-81	-3.2	Wichita	2,157	2,112	-45	-2.1
Labette	20,803	20,444	-359	-1.7	Wilson	8,856	8,723	-133	-1.5
Lane	1,670	1,636	-34	-2.0	Woodson	3,115	3,165	50	1.6
Leavenworth	79,315	80,204	889	1.1	Wyandotte	163,369	163,831	462	0.3

1] Some values are zero due to rounding.

Note: The estimates are based on the 2010 Census and reflect changes to the April 1, 2010 population due to the Count Question Resolution program and geographic program revisions. All geographic boundaries for the 2016 population estimates series except statistical area delineations are as of January 1, 2016

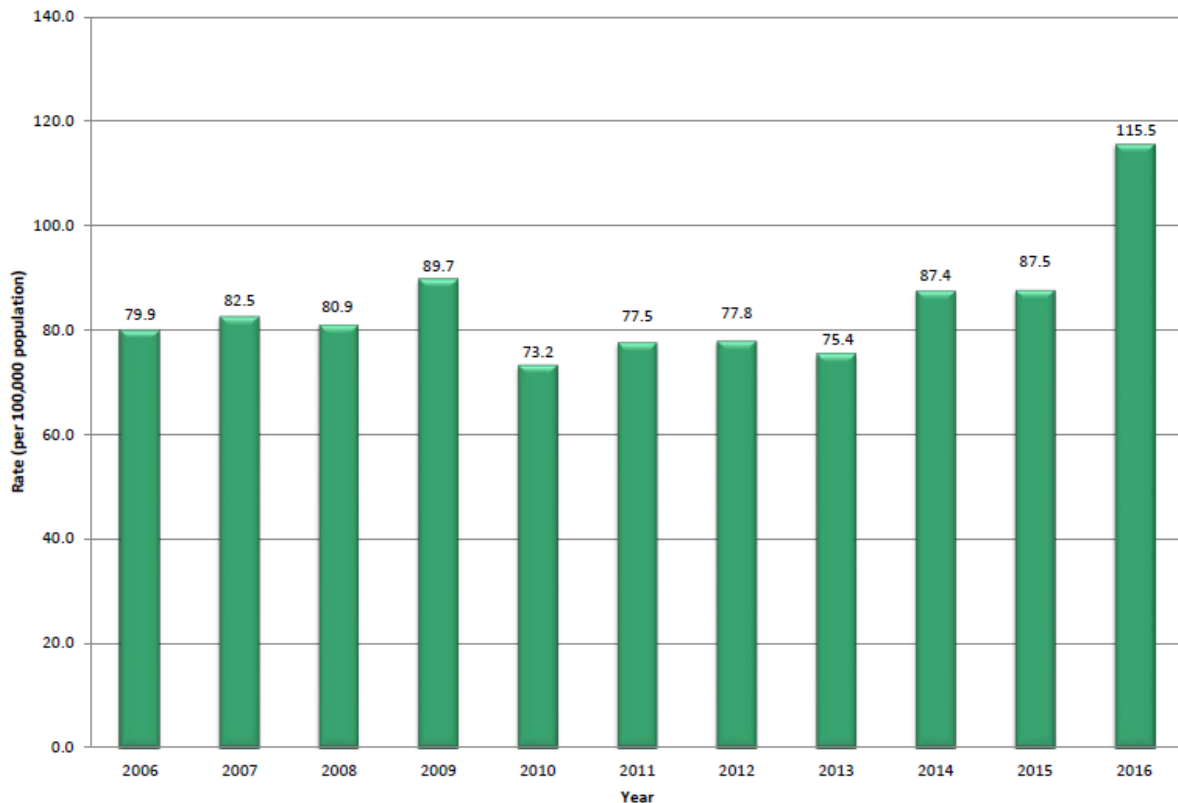
Source: U.S. Census Bureau, American Factfinder, accessed from <https://www.census.gov/data/tables/2016/demo/popest/counties-total.html>, on March 23, 2017.

Announcements

Increase in Gonorrhea Cases

The Kansas gonorrhea case rate has increased from 2015 to 2016. The Kansas Department of Health and Environment (KDHE) Bureau of Disease Control and Prevention is reporting a 32.7 percent increase in incidence rates, from 87.5 cases per 100,000 population in 2015 to 115.5 cases per 100,000 population in 2016. The statistics are

Figure 1. Crude Incidence Rates, Gonorrhea, by Year, Kansas 2006-2016



contained in the Bureau’s report of sexually transmitted infections (STIs) updated for 2016.

There were 3,362 cases of gonorrhea reported to KDHE during calendar year 2016 compared to 2,542 reported cases in 2015. Increased case counts have been noted for the 25-29 age group (49%), African American population (59%), and White population (46%). The full report is available at: http://www.kdheks.gov/sti_hiv/download/std_reports/Kansas_STI_Case_Rate_Report_Calendar_Year_2006_2016.pdf.

In response to the increase, KDHE is reminding health care providers of the importance of screening all sexually active clients for gonorrhea at least once per year and to screen those at higher risk more frequently. All positive tests, diagnoses, or treatment for gonorrhea should be reported to KDHE.

For more information on gonorrhea, visit the CDC website: <https://www.cdc.gov/std/Gonorrhea/>. CDC gonorrhea treatment guidelines are at: <https://www.cdc.gov/std/tg2015/default.htm>. If you have questions or concerns, contact the Bureau's STI/HIV Section at 785-296-5596.

KDHE Bureau of Disease Control and Prevention

BRFSS Website Updated

The website for the Kansas Behavioral Risk Factor Surveillance System (BRFSS), Local Data, 2011-2015, has been updated. The health risk indicators are presented in an interactive format with data in the form of tables, graphs, maps and trend lines. It allows the user to effectively access, navigate and visualize the multi-year data from the 2011, 2013 and 2015 KS BRFSS surveys. These data can be accessed at: <http://www.kdheks.gov/brfss/BRFSS2015/index.html>. It can also be accessed from the BRFSS Homepage: <http://www.kdheks.gov/brfss/index.html>. These estimates highlight health risk statistics for local geographic areas that have been compiled through detailed analysis of BRFSS data. More than 20,000 adult Kansans participated in the 2015 survey, comprising a sample large enough to provide reliable information for 42 of the state's 105 counties and for 16 Public Health Preparedness Regions. Information for 42 health risk indicators, analyzed at the subpopulation level, is available in these reports. The Kansas BRFSS is a random digit-dial telephone survey conducted among non-institutionalized adults age 18 years and older residing in a private residence and college housing with a landline or cell-phone. KDHE's Bureau of Health Promotion has conducted the BRFSS survey continuously since 1992, enabling public health officials the ability to detect and monitor the trends in risk factors and health behaviors of adult Kansans (18 years and older). The data are used extensively for monitoring the contributors to morbidity and premature death; tracking health status and assessing trends; measuring knowledge, attitudes, and opinions; policy development; providing measures for program evaluation; and conducting program planning.

This tool, featuring local level data from the BRFSS, designed for use by local and regional public health officials, community leaders and policy makers in identifying health conditions and behaviors related to chronic and communicable diseases, disability and injury. The information is unique to your county or region and provides the ability to compare your data with state statistics.

The statistics may be shared with community groups.

Also available is *Kansas Behavioral Risk Factor Surveillance System (BRFSS) - Local Data, 2015 Reports*: http://www.kdheks.gov/brfss/HRSReports/local_hrs_reports_index.htm, and State data report on the *Health Risk Behaviors of Kansas, 2015 Kansas BRFSS* at http://www.kdheks.gov/brfss/PDF/2015_Kansas_BRFSS_report.pdf.

For assistance in website navigation or interpretation contact Pratik.Pandya@ks.gov or Ghazala.Perveen@ks.gov.

KDHE Bureau of Health Promotion

Employment-Population Ratio Remains below Pre-Recession Levels

In both Kansas and the United States, both the employment-population ratio and labor force participation rate have declined sharply during the recession in 2008, and the ratio has remained well below pre-recession levels for both geographies (Figure 1). The information was reported by the Wichita State University Center for Economic Development and Business Research.

Report findings included:

- The age-reweighted employment-population ratio for Kansas fell by 1.9 percent from 2005 to 2015.
- Almost all of the decline in the U.S. employment-population ratio from 2005 to 2015 can be explained by changing age demographics, while changing age demographics can only explain half of the decline in Kansas' employment-population ratio.
- The reweighted employment-population ratio of other Midwestern states such as Iowa and Nebraska tended to outperform the national average from 2005 to 2015, while Kansas' did not.

Figure 1. Kansas Employment-Population Ratio



The employment-population ratio is calculated as the fraction of population 16 and over that is currently employed. The ratio is reported as a percentage. This measure of economic health provides a broader perspective than the unemployment rate, which only measures the fraction of those workers in the labor force who are unemployed and actively looking for work.

The full report can be accessed at: <http://www.cedbr.org/component/content/article/156-labor/1257-kansas-age-reweighted-employment-population-ratio?Itemid=238>

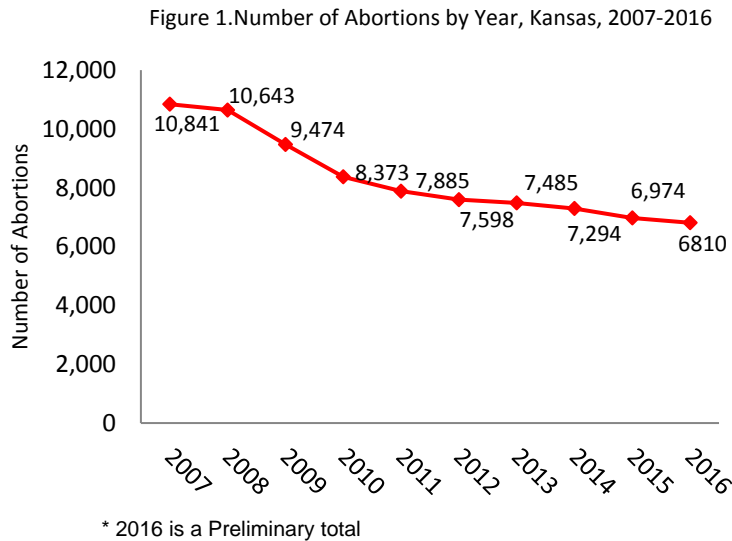
WSU Center for Economic Development and Business Research

Preliminary 2016 Abortion Report Issued

There were 6,810 abortions reported in Kansas during 2016, a decrease of 2.4 percent from the final 2015 report (164 fewer). The preliminary total represents a 37.2 percent decrease in abortions reported in Kansas since 2007 (Figure 1).

Of the abortions reported in Kansas during 2016, a total of 3,429 (50.4%) occurred to Kansas residents. The number of Kansas residents obtaining abortions decreased by 4.2

percent compared to 2015. Of the 3,381 out-of-state residents who obtained abortions in Kansas, 3,041 (89.9%) were Missouri residents.



Women 20-24 years of age comprised the largest age-group seeking abortions (30.6%) followed by those aged 25-29 years (27.8%). There were 14 abortions to women under age 15 reported in 2016, 7.7 percent more than in 2015.

In 2016, White non-Hispanic women accounted for over half (55.6%) of reported abortions. Black non-Hispanic women accounted for about one out of five (21.3%) reported abortions and

Hispanic women of any race accounted for about one out of 10 (13.0%) reported abortions. The percentage of abortions reported among Black non-Hispanic women was unchanged in 2016 (21.3%) compared to the percentage in 2015 (21.2%).

Other findings from the 2016 preliminary report:

- Over four out of five Kansas-reported abortions occurred to unmarried women (83.7%), 0.3 percent fewer than in 2015 (84.0%).
- In 2016, about three out of five (4,481 or 65.8%) women who reported never having a previous abortion was up slightly from 2015 (64.8%).
- About one in four women reported having one previous abortion (1,509 or 22.2%). A total of 109 women (1.6%) indicated they had previously had four or more abortions.
- More than three out of five (64.3%) of all reported abortions occurred prior to nine completed weeks of gestation. The change was an increase from 2015 (62.6%).

The 2016 Preliminary abortion Report is available at <http://www.kdheks.gov/hci/absumm.html>. The final tally of Kansas abortions will be available in the *2016 Annual Summary of Vital Statistics*.

KDHE Bureau of Epidemiology and Public Health Informatics

Fast Stats

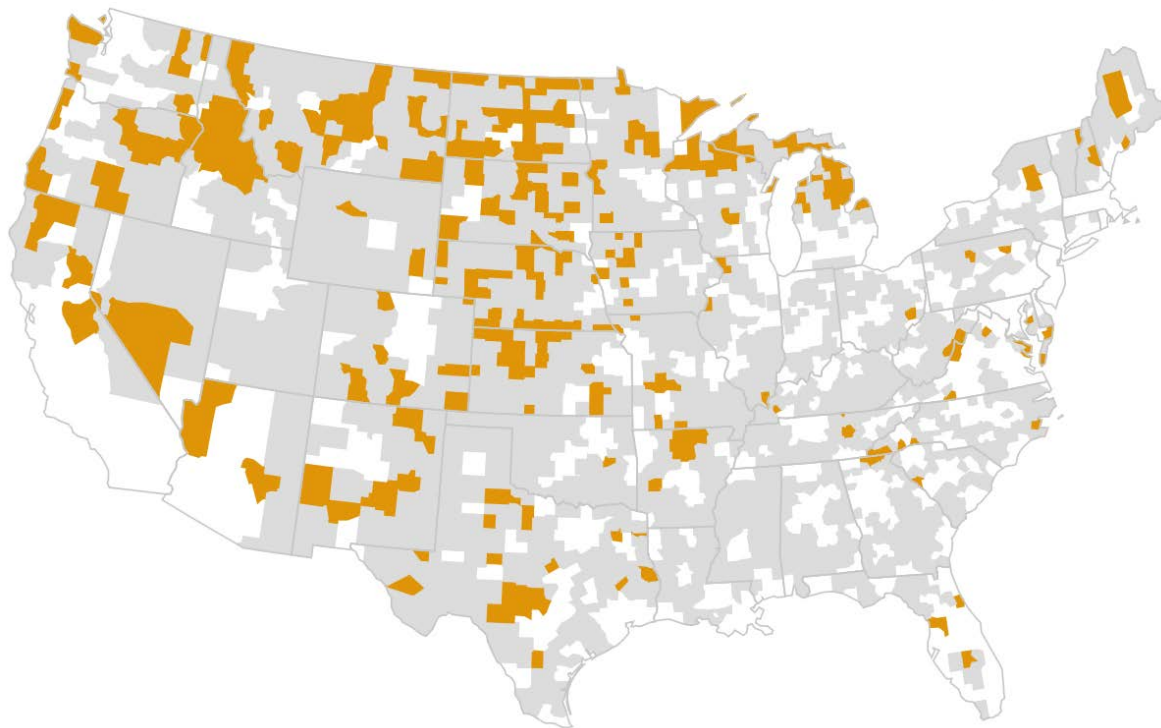
Kansas Non-Metropolitan Counties Impacted by High Median Age


Kansas has 21 of the 327 non-metropolitan counties in the United States where aging is diminishing access to services in Rural America. Extreme aging is defined as where the median age of the county's population is 46.5+. The report, prepared by the University of Wisconsin, Applied Population Lab, is available at http://w3001.apl.wisc.edu/b04_16.

Findings include:

- The number of service-providing establishments in nonmetropolitan counties declines as local populations become increasingly old.
- Services tend to increase during the initial transition from a young to moderately-old county population but decline during later stages of "extreme population aging", which is currently affecting many rural communities.
- Loss of services is geographically clustered and more severe in remote rural counties that are not adjacent to a metropolitan area.
- Loss of services tends to also occur in counties with declining populations, whether or not they are also aging.

University of Wisconsin-Madison



Nonmetropolitan extreme aging (median age 46.5+) 

Nonmetropolitan 

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