

2019 Community Health Needs Assessment



UH ELYRIA MEDICAL CENTER
AVON RH, LLC
SPECIALTY HOSPITAL OF LORAIN
Lorain County, Ohio

*Aligned with the 2019 Lorain County
Community Health Assessment*

Foreword

University Hospitals' (UH) long-standing commitment to the community spans more than 150 years. This commitment has grown and evolved through significant thought and care in considering our community's most pressing health needs. One way we do this is by conducting a periodic, comprehensive Community Health Needs Assessment (CHNA). The most current assessment was completed by an external health care consulting service working with UH and includes quantitative and qualitative data that serve to guide our community benefit planning. Through our CHNA, UH has identified the greatest health needs among each of the counties where our medical centers reside, enabling UH to ensure our resources are appropriately directed toward outreach, prevention, education and wellness opportunities where the greatest impact can be realized. The following document is a detailed joint CHNA for Avon RH, LLC ("UH Avon Rehabilitation Hospital"), University Hospitals Elyria Medical Center and Specialty Hospital of Lorain.

UH Avon Rehabilitation Hospital opened in 2016, as a freestanding, state-of-the-art acute inpatient rehabilitation hospital dedicated to the treatment and recovery of individuals who have experienced a variety of conditions. These include, but are not limited to, stroke, trauma, brain injury, spinal cord injury, neurological conditions, amputations, orthopedic injury and other rehabilitation diagnoses.

UH Elyria Medical Center was founded in 1908 and has grown to a 387-licensed bed hospital system with additional campuses in Amherst (University Hospitals Amherst Health Center), Avon (University Hospitals Avon Health Center) and Sheffield (University Hospitals Sheffield Health Center) and medical offices in North Ridgeville and Westlake, Ohio.

UH Elyria Medical Center is among 250 hospitals nationally to earn a 2018 Distinguished Hospital Award for Clinical Excellence from Healthgrades, an online consumer resource. Distinguished hospitals have the lowest risk-adjusted mortality and complication rates across at least 21 of 32 common conditions and procedures. Additionally, UH Elyria Medical Center earned "Baby-Friendly" designation by Baby-Friendly USA, Inc. which recognizes excellence in evidence-based maternity care, with the goal of optimal infant feeding outcomes and mother/baby bonding. There are only nine Baby-Friendly designated hospitals in the state of Ohio. Lastly, UH Elyria Medical Center earned the highest honor bestowed for stroke treatment from the American Heart Association/American Stroke Association and earned the American College of Cardiology's National Cardiovascular Data Registry ACTION Registry Platinum Performance Achievement Award for success in implementing a higher standard of care for heart attack patients.

Specialty Hospital of Lorain is a not for profit joint venture of Mercy Regional Health System, UH Elyria Medical Center, and Grace Hospital. It has met the long-term acute care (LTAC) needs of Lorain County since opening in 2000. It is the only long-term acute care (LTAC) facility in Lorain County. It features 28 beds for patient care and is staffed with nurses who are certified in advanced cardiac life support.

University Hospitals strives to meet the health needs of its community.

Acknowledgements

The 2019 Lorain County Community Health Assessment* was funded by:

Alcohol and Drug Addiction Services Board of Lorain County <http://www.lorainadas.org/>
Cleveland Clinic Avon Hospital <https://my.clevelandclinic.org/locations/avon-hospital>
Lorain County Board of Mental Health <https://lcbmh.org/>
Lorain County Health & Dentistry <https://www.lorainhealth-dentistry.org/>
Lorain County Public Health <https://www.loraincountyhealth.com/>
Mercy Health Lorain Hospital <https://www.mercy.com/locations/hospitals/lorain/mercy-regional-medical-center>
University Hospitals <http://www.UHhospitals.org/CHNA-IS>

The 2019 Lorain County Community Health Assessment* report was commissioned by the Lorain County Health Partners:

Alcohol and Drug Addiction Services Board of Lorain County <http://www.lorainadas.org/>
Avon RH, LLC <https://www.uhhospitals.org/locations/uh-avon-rehabilitation-hospital>
Cleveland Clinic Avon Hospital <https://my.clevelandclinic.org/locations/avon-hospital>
Lorain County Board of Mental Health <https://lcbmh.org/>
Lorain County Health & Dentistry <https://www.lorainhealth-dentistry.org/>
Lorain County Metro Parks <http://www.metroparks.cc/>
Lorain County Office on Aging <https://lcoa.org/>
Lorain County Public Health <https://www.loraincountyhealth.com/>
Mercy Health Allen Hospital <https://www.mercy.com/locations/hospitals/lorain/mercy-allen-hospital>
Mercy Health Lorain Hospital <https://www.mercy.com/locations/hospitals/lorain/mercy-regional-medical-center>
Specialty Hospital of Lorain <https://www.specialtyhospitaloflorain.org/>
United Way of Greater Lorain County <https://www.uwloraincounty.org/>
University Hospitals Elyria Medical Center <https://www.uhhospitals.org/locations/uh-elyria-medical-center>

** Organizations listed in the Acknowledgements section for the 2019 Lorain County Community Health Assessment (both the funders and Lorain County Health Partners) are the same for the aligned 2019 Avon RH, LLC-University Hospitals Elyria Medical Center-Special Hospital of Lorain Community Health Needs Assessment.*

Project Management, Secondary Data, Data Collection, and Report Development Hospital Council of Northwest Ohio

The Hospital Council of Northwest Ohio (HCNO) is a 501(c)3 non-profit regional hospital association located in Toledo, Ohio. They facilitate community health needs assessments and planning processes in 40+ counties in Ohio, Michigan, and Oregon. Since 2004, they have used a process that can be replicated in any county that allows for comparisons from county to county, as well as within the region, state, and nation. HCNO works with coalitions in each county to ensure a collaborative approach to community health improvement that includes multiple key stakeholders, such as those listed above. All HCNO project staff have their master's degree in public health, with emphasis on epidemiology and health education.

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To see the Lorain County data compared to other counties, please visit the Hospital Council of Northwest Ohio's Data Link website at:

<http://www.hcno.org/community-services/data-link/>

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Written Comments

Individuals are encouraged to submit written comments, questions, or other feedback about University Hospitals' strategies to communitybenefit@UHhospitals.org. Please make sure to include the name of the UH Facility that you are commenting about, and if possible, a reference to the appropriate section within the document.

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Executive Summary

This executive summary provides an overview of health-related data for Lorain County adults (ages 19 and older) who participated in a county-wide health needs assessment survey from September through November 2018. The findings are based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instrument used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS). The Hospital Council of Northwest Ohio (HCNO) collected the data, guided the health needs assessment process and, integrated sources of primary and secondary data into the final report. The primary data within the 2019 Lorain County Health Needs Assessment was collected and compiled in 2018. During the Fall 2018, Communities That Care (CTC) of Lorain County anonymously surveyed youth in grades 6, 8, 10, and 12 at Lorain County Public Schools, as required by the Drug Free Communities and Support Program. Pride Surveys (Bowling Green, KY) provided the graphs and tables compiled from the data collected. HCNO incorporated the youth data within the full report.

In 2019, Avon RH, LLC ("UH Avon Rehabilitation Hospital"), University Hospitals Elyria Medical Center and Specialty Hospital of Lorain conducted a joint community health needs assessment ("CHNA") in collaboration with Lorain County Public Health and other Lorain county partners. The 2019 UH Avon Rehabilitation Hospital-UH Elyria Medical Center-Special Hospital of Lorain CHNA ("2019 University Hospitals Lorain County CHNA") is aligned with the 2019 Lorain County Community Health Assessment and is compliant with the requirements set forth by Treas. Reg. §1.501(r) ("Section 501(r)") and Ohio Revised Code ("ORC") §3701.981.

The 2019 University Hospitals Lorain County CHNA will serve as a foundation for developing an implementation strategy to address the needs that (a) the hospital determines it is able to meet in whole or in part; (b) are otherwise part of its mission; and (c) are not met (or are not adequately met) by other programs and services in the hospital's service area.

Lorain County Public Health, on behalf of the Lorain County Health Partners (includes UH Avon Rehabilitation Hospital, UH Elyria Medical Center and Specialty Hospital of Lorain), hired the Hospital Council of Northwest Ohio (HCNO) to conduct the assessment and to prepare separate but aligned reports to meet the needs of hospital and public health partner requirements. Similar to the CHNAs that hospitals conduct, HCNO also prepared the 2019 Lorain County Community Health Assessment ("CHA") and will prepare the corresponding Community Health Improvement Plan ("CHIP") to meet the local health department requirements for accreditation through the Public Health Accreditation Board ("PHAB").

HCNO collected the primary survey data, guided the health needs assessment process, integrated sources of primary and secondary data from a variety of sources, and prepared the written reports.

State of Ohio Requirements

In 2016, the state of Ohio through ORC §3701.981, mandated that all tax-exempt hospitals collaborate with their local health departments on community health assessments (CHA) and community health improvement plans (CHIP). This will reduce duplication of resources and provide a more comprehensive approach to addressing health improvement. In addition, local hospitals have to align with Ohio's State Health Assessment (SHA) and State Health Improvement Plan (SHIP). This requires alignment of the CHNA/CHA process timeline and indicators beginning, January 1, 2020.

The aligned 2019 Lorain County CHA and 2019 University Hospitals Lorain County CHNA indicates the partners' desire to collaborate on health assessment planning both among partners at the local level and with state population health planning efforts – as described more fully in *Improving Population Health Planning in Ohio: Guidance for Aligning State and Local Efforts*, released by the Ohio Department of Health (ODH).

Internal Revenue Services (IRS) Requirements

Certain hospitals as set forth in the Section 501(r) regulations are required to complete a CHNA and corresponding implementation strategy at least once every three years in accordance with regulations promulgated by the Internal Revenue Service pursuant to the Patient Protection and Affordable Care Act (ACA), 2010¹. University Hospitals adopted the last UH Avon Rehabilitation Hospital CHNA on June 20, 2017 and the last joint UH Elyria Medical Center-Specialty Hospital of Lorain CHNA on September 27, 2018. Specialty Hospital of Lorain's board of directors also adopted the last joint UH Elyria Medical Center-Specialty Hospital of Lorain CHNA in September 2018.

DEFINITION OF COMMUNITY & SERVICE AREA DETERMINATION

The community has been defined as Lorain County. Most (91%) of UH Elyria Medical Center's discharges, (61%) of UH Avon's discharges and (89%) of Specialty Hospital of Lorain's discharges are residents of Lorain County. In addition, University Hospital collaborates with multiple stakeholders, most of which provide services at the county-level. In looking at the community population served by the hospital facilities and Ashtabula County as a whole, it was clear that all of the facilities and partnering organizations involved in the collaborative assessment, define their community to be the same. Defining the community as such also allows the hospitals to more readily collaborate with public health partners for both community health assessments and health improvement planning. Per Section 501(r) federal compliance, a joint CHNA is only allowable if it meets all the requirements of a separate CHNA; clearly identifies the hospital facilities involved; and if all of the collaborating hospital facilities and organizations included in the joint CHNA define their community to be the same². This assessment meets 501(r) federal compliance for UH Avon Rehabilitation Hospital, UH Elyria Medical Center and Specialty Hospital of Lorain.

INCLUSION OF VULNERABLE POPULATIONS

Lorain County Health Partners, which includes UH Avon Rehabilitation Hospital, UH Elyria Medical Center and Specialty Hospital of Lorain, intentionally elected to use a random household survey to incorporate a broad range of perspectives across the county. The data is de-identified and aggregated in such a way to show several demographic categories such as income, gender, age, geography, etc. to further identify populations experiencing adverse conditions. It is described more fully in the Primary Data Collection Methods section of this report. Additionally, the planning committee itself includes a variety of human service organizations working collaboratively to complete the assessment.

PROCESS & METHODS FOR ENGAGING COMMUNITY

This community health needs assessment process was commissioned by the Lorain County Health Partners. The names of the individual partners are listed in the Acknowledgements section at the beginning of this report. This coalition has been in existence for seven years and has approximately ten member organizations. Multiple sectors, including the general public, were asked through email list serves, social media, and public notices to participate in the process which included defining the scope of the project, choosing questions for the surveys, reviewing initial data, planning a community release of the report, and identifying and prioritizing needs. Thirteen organizations worked together to complete the assessment, with more than 100 community members attending the data-release meeting and providing qualitative feedback. Lastly, the mail survey, described more fully in the Primary Data Collection Methods section of this report, was the primary instrument used to engage and receive input from the community.

¹ The Patient Protection and Affordable Care Act (Pub. L. 111-148) added Section 501(r) to the Internal Revenue Code, which imposes new requirements on nonprofit hospitals in order to qualify for an exemption under Section 501(c)(3) and adds new reporting requirements for such hospitals under Section 6033(b) of the Internal Revenue Code. UH followed the final rule entitled "Additional Requirements for Charitable Hospitals; Community Health Needs Assessments for Charitable Hospitals"; Requirement of a Section 4959 Excise Tax Return and Time for Filing the Return, was published by the IRS on December 31, 2014, and requires compliance after December 29, 2015.

² §1.501r-3(b)(6)(v)

QUANTITATIVE & QUALITATIVE DATA ANALYSIS

Data for the 2019 University Hospitals Lorain County CHNA were obtained by independent researchers from the Toledo-based Hospital Council of Northwest Ohio and their partners at the University of Toledo, who administered surveys to a cross-sectional, randomized sample of Lorain County adults aged 19 years and older. The survey instrument contained both customized questions and a set of core questions taken from the Center for Disease Control and Prevention's Behavioral Risk Factor Surveillance System. The number of surveys completed and analyzed met the threshold for statistical significance at the 95% confidence level, with a 3.85% margin of error. Wherever possible, local findings have been compared to other local, regional, state, and national data. As we move forward with planning strategies, we continue to commit to serving those in our county who experience health and basic needs disparities. Finally, additional information was collected from Lorain County Public Health data sources (e.g. vital statistics, Ohio Disease Reporting System, etc.) to supplement findings from the survey. Detailed data collection methods are described later in this section.

IDENTIFYING & PRIORITIZING NEEDS

The Lorain County Health Partners selected the following priority needs:

1. Chronic disease
2. Maternal and child health
3. Mental health
4. Substance abuse
5. Cancer

More specifically, the UH hospitals identified the following priorities for their respective hospitals:

- UH Elyria Medical Center: Chronic disease and substance abuse
- Specialty Hospital of Lorain: Chronic disease, mental health and substance abuse
- UH Avon Rehabilitation Hospital: Chronic disease

The priorities were determined via the following process:

The Lorain County Health Partners contracted with HCNO to facilitate the CHNA/CHA process. Lorain County Public Health invited various community stakeholders to participate in the process. Data from the 2019 collaborative assessment was carefully considered and categorized into community priorities. The Lorain County Health Partners, which includes representatives from the UH hospitals mentioned above, used the Mobilizing for Action through Planning and Partnerships (MAPP) process, to identify priorities and develop corresponding implementation strategies designed to improve community health. MAPP is a community-driven strategic planning process and framework that helps communities apply strategic thinking to prioritize health issues and identify resources to address them. This process will also be used to develop the Community Health Improvement Plan/Implementation Strategy which will be implemented over the next three years at the county-level with the hope to improve population health and create lasting, sustainable change.

Based on the 2019 Lorain County collaborative assessment process, key issues were identified. The Lorain County Community Health Partners then completed a ranking exercise, giving a score for magnitude, seriousness of the consequence and feasibility of correcting, resulting in an average score for each issue identified. Overall, there were 8 key issues identified by the committee. Each organization was given 5 votes. Lorain County Community Health Partners came to a consensus on the priority areas Lorain County will focus on over the next three years. The key issues will be outlined in the 2020-2022 IS/CHIP.

There were over twenty coordinating agencies involved in the process.

POTENTIAL RESOURCES AVAILABLE TO ADDRESS NEEDS

Priorities identified through the planning process, will result in a comprehensive 2020-2022 Lorain County Community Health Improvement Plan (CHIP). The CHIP will serve as the 2020-2022 Community Health

Implementation Strategy (IS) for UH Avon Rehabilitation Hospital, UH Elyria Medical Center and Specialty Hospital of Lorain. These resources can be found in Appendix VIII.

EVALUATION OF IMPACT

The evaluation of impact is a report on the actions taken and effectiveness of strategies implemented since the last CHNA. UH Avon Rehabilitation Hospital conducted its last CHNA in 2017 and UH Elyria Medical Center and Specialty Hospital of Lorain completed a joint CHNA in 2018. It can be found on page 30 of this report.

CHNA AVAILABILITY

The 2019 University Hospitals Lorain County CHNA can be found at the following websites:

University Hospitals: <http://www.UHhospitals.org/CHNA-IS>

Specialty Hospital of Lorain: <https://www.specialtyhospitaloflorain.org/resources.html>

Hospital Council of Northwest Ohio: <http://www.hcno.org/community-services/community-health-assessments/>

ADOPTION BY BOARD

University Hospitals adopted the joint 2019 Avon RH, LLC-UH Elyria Medical Center-Special Hospital of Lorain CHNA (2019 University Hospitals Lorain County CHNA) on September 24, 2019.

Primary Data Collection Methods

DESIGN

This community needs assessment was cross-sectional in nature and included a written survey of adults within Lorain County in 2018. From the beginning, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

INSTRUMENT DEVELOPMENT

One survey instrument was designed and pilot tested for this study. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of Northwest Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults. The investigators decided to derive the majority of the adult survey items from the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS). This decision was based on being able to compare local data with state and national data.

The project coordinator from HCNO conducted a series of meetings with the Lorain County Health Partners. During these meetings, HCNO and the Lorain County Health Partners reviewed and discussed banks of potential survey questions from the BRFSS. Based on input from the Lorain County Health Partners, the project coordinator composed a draft of the survey containing 117 items for the adult survey. Health education researchers from the University of Toledo reviewed and approved the drafts.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and over living in Lorain County. There were 224,935 persons ages 19 and over living in Lorain County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error of the survey findings). A sample size of at least 384 adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Lorain County was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.

PROCEDURE | Adult Survey

Prior to mailing the survey, the project team mailed an advance letter to 2,400 adults in Lorain County. This advance letter was personalized, printed on Lorain County Health Partners stationery and listed the corresponding partners. The letter introduced the assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Three weeks following the advance letter, the project team implemented a three-wave mailing process to maximize the survey return rate. The initial mailing included a personalized hand-signed cover letter describing the purpose of the study, a questionnaire printed on white paper, a self-addressed stamped return envelope, and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging the recipient to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the entire mailing, including both groups was 29% (n=646: CI=± 3.85). The response rate for the Lorain County Urban mailing was 25% (n=272: CI= ± 5.9%). This return rate and sample size means that the responses in the health needs assessment should be representative of the entire county.

DATA ANALYSIS | Adult Survey

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using SPSS 23.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Lorain County, the adult data collected was weighted by age, gender, race, and income using Census data. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix III.

SAMPLING | Adolescent Survey

During the Fall 2018, Communities That Care (CTC) of Lorain County anonymously surveyed youth in grades 6, 8, 10, and 12 at Lorain County Public Schools, as required by the Drug Free Communities and Support Program. The Pride Surveys Questionnaire for Grades 6-12 was given to 2,765 students in these grades: 6th graders surveyed: 666 (24%), 8th graders surveyed: 859 (31%), 10th graders surveyed: 668 (24%), 12th graders surveyed: 572 (21%), which represented approximately 21% of the students in these grades throughout Lorain County. Survey questions focused on: past 30-day drug use; student's perception of risk; students' perception of parents' disapproval; age of first use; perception of availability; where and when students use cigarettes, alcohol, marijuana; and prescription drugs. Additionally, the survey gathered data about other drugs (e.g. e-cigarettes, heroin), violence indicators, school safety, and risk and protective factors. Ten additional questions were added to the survey to inquire about anxiety, depression, suicide, healthy eating, physical activity and screen time. A passive consent was disseminated to parents of students participating in the survey process.

DATA ANALYSIS | Adolescent Survey

Pride Surveys (Bowling Green, KY) provided the graphs and tables compiled from the data collected.

LIMITATIONS

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

Second, it is important to note that, although several questions were asked using the same wording as the CDC questionnaires, the adult data collection method differed. CDC adult data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than via mail survey.

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

Secondary Data Collection Methods

HCNO collected secondary data, including county-level data, from over 50 sites, whenever possible. HCNO utilized sites such as the Behavioral Risk Factor Surveillance System (BRFSS), numerous CDC websites, U.S. Census data, and Healthy People 2020, among other national and local sources. All data is included as a citation in the section of the report with which it corresponds, and the URLs are available in the references at the end of this report. All primary data collected in this report is from the 2019 Lorain County Community Health Needs Assessment. All other data is cited accordingly.

Hospital Utilization Data Collection Methods

HCNO worked with staff from University Hospitals and Cypress Research Group to incorporate county level hospital discharge and utilization data within the community health needs assessment. The hospital utilization data included within the community health needs assessment is from January 2017 through December 2017. Data is broken down into gender and age, where applicable.


Each hospital provides data to the Ohio Hospitalization Association (OHA) for statewide consolidated reporting. Those data are at the patient level, where patients are de-identified. Each data record represents a single hospital admission; hence, individuals who are hospitalized multiple times are included in the database for each time they are admitted/discharged from the hospital.

The hospital utilization data allows us to track the number of discharges for any Ohio-based acute care hospital over time. The database includes key demographic information (age, gender, race, county of residence) as well as information related to the hospitalization (primary diagnosis, and all secondary diagnoses). The data allowed us to isolate inpatients both in terms of where they were hospitalized (regardless of where they live) and where they live (regardless of where they were hospitalized).

For more information regarding hospital utilization data, see Health Care Access and Utilization.

2016 Ohio State Health Assessment (SHA)

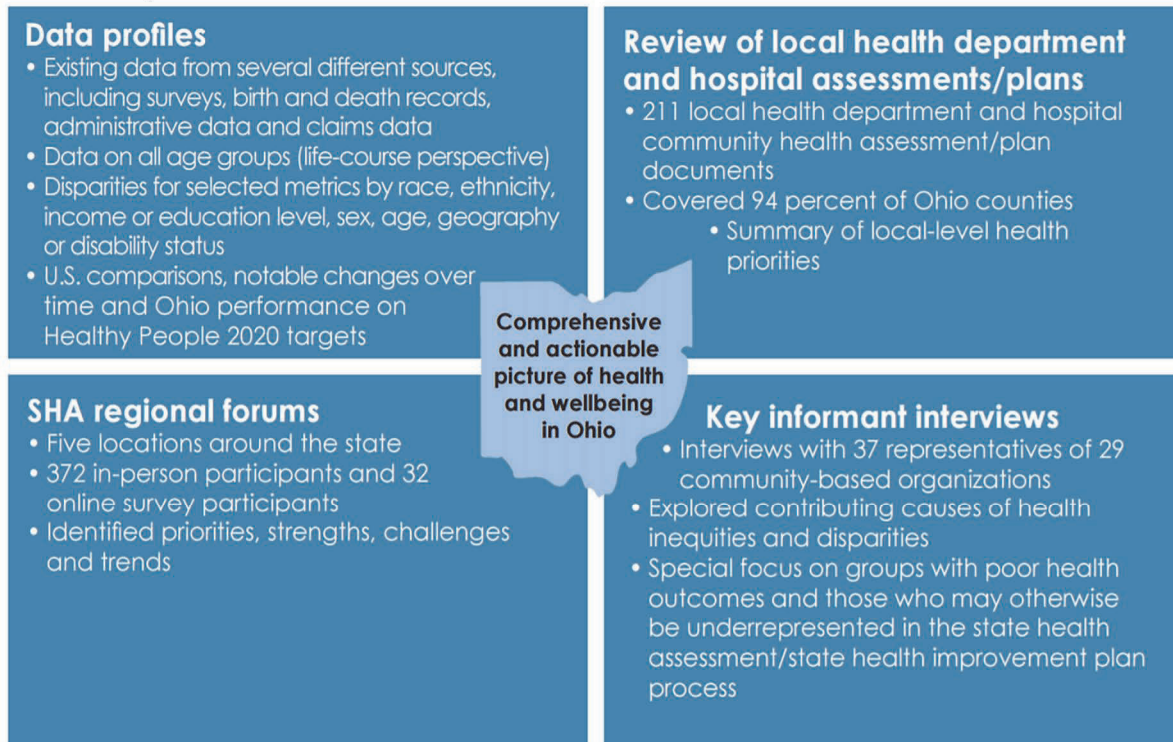
The 2016 Ohio State Health Assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, a review of local health department and hospital assessments, and plans and key informant interviews.

Similar to the 2016 Ohio SHA, the 2019 Lorain County Health Needs Assessment examined a variety of metrics from various areas of health including, but not limited to, health behaviors, chronic disease, access to health care, and social determinants of health. Additionally, the CHA studied themes and perceptions from local public health stakeholders from a wide variety of sectors. **Note: This symbol  will be displayed in the trend summary when an indicator directly aligns with the 2016 Ohio SHA.**

The interconnectedness of Ohio's greatest health challenges, along with the overall consistency of health priorities identified in this assessment, indicates many opportunities for collaboration between a wide variety of partners at and between the state and local level, including physical and behavioral health organizations and sectors beyond health. It is our hope that this CHA will serve as a foundation for such collaboration.

To view the full 2016 Ohio State Health Assessment, please visit: http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/chss/ship/SHA_FullReport_08042016.pdf?la=en

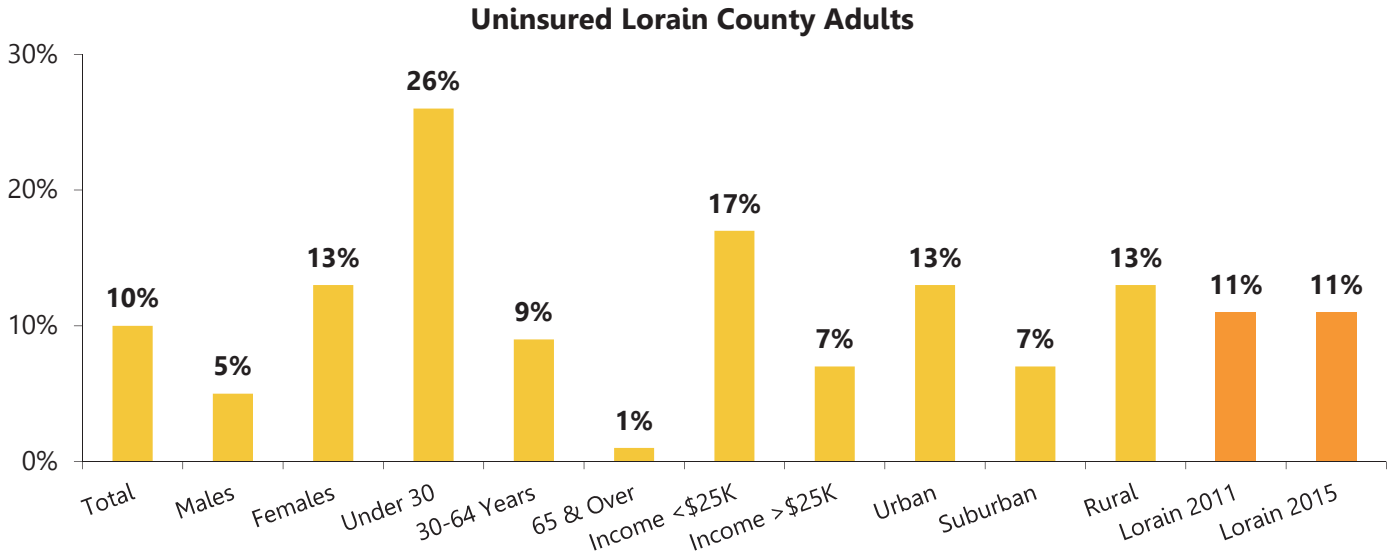
FIGURE 1.1 | State Health Assessment (SHA) Sources of Information



Data Summary | Health Care Access

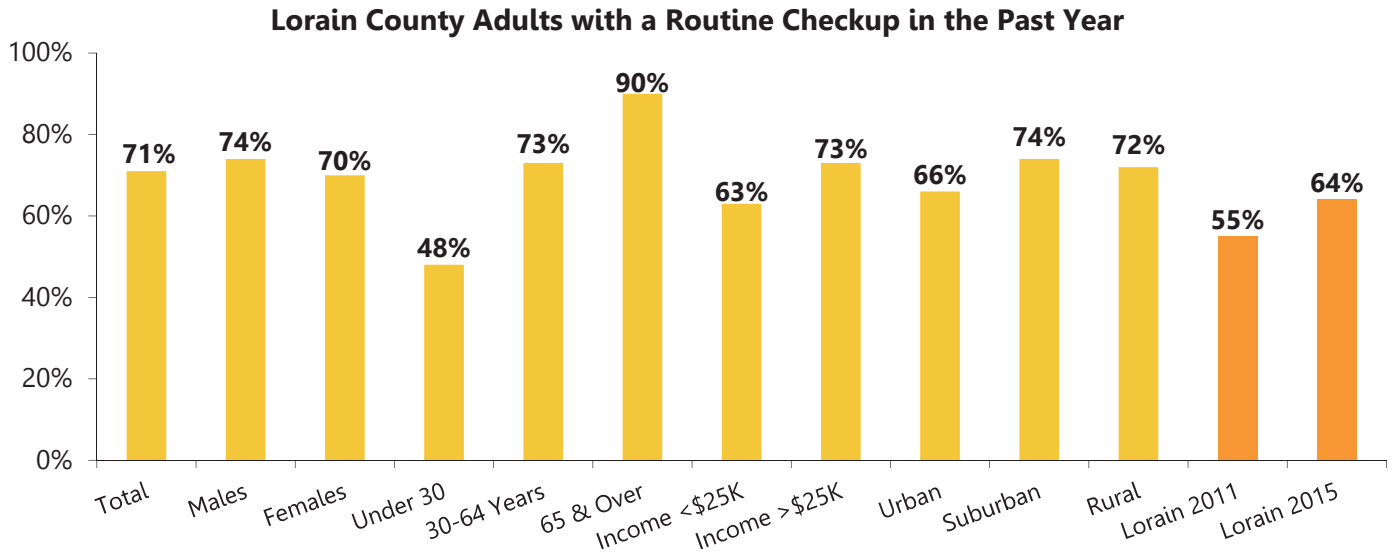
HEALTH CARE COVERAGE

In 2018, 10% of Lorain County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30 (26%).



ACCESS AND UTILIZATION

In 2018, 71% of Lorain County adults had visited a doctor for a routine checkup in the past year, increasing to 90% of those over the age of 65. Forty-two percent (42%) of adults went outside of Lorain County for health care services in the past year.



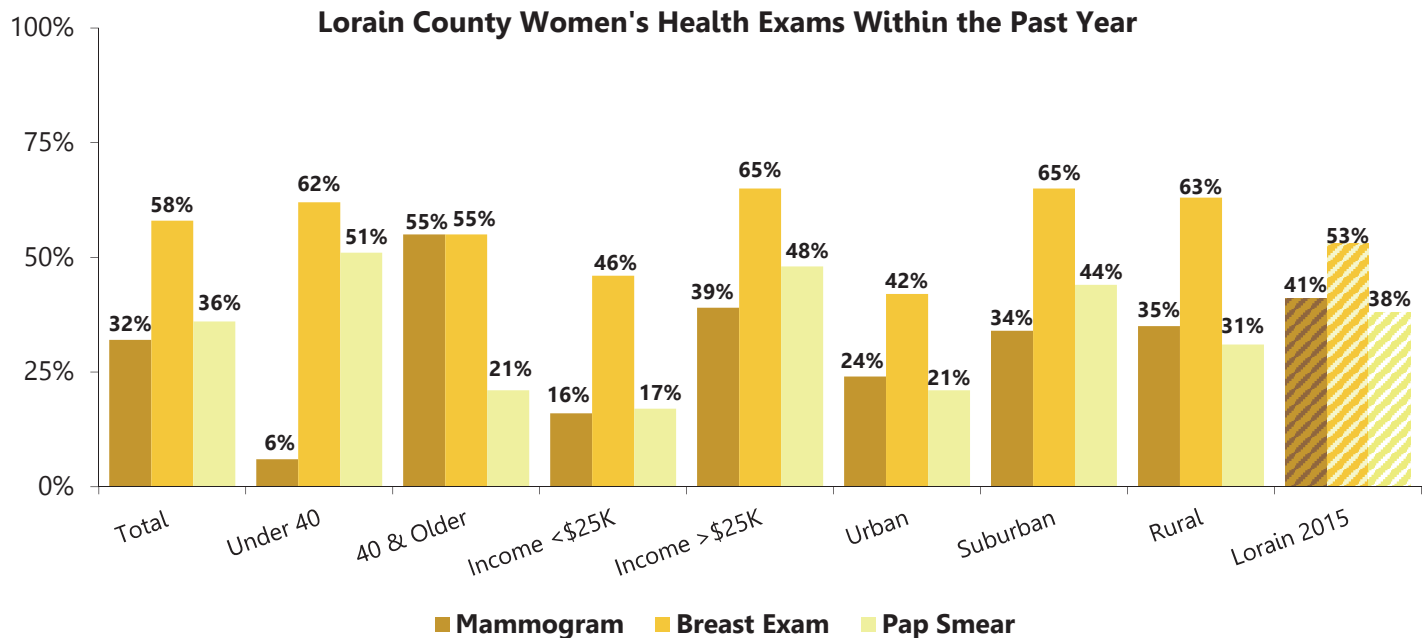
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

PREVENTIVE MEDICINE

More than three-fourths (76%) of adults ages 65 and over have had a pneumonia vaccination at some time in their life. Twenty-four percent (24%) of adults had a preventive screening for colorectal cancer in the past 2 years.

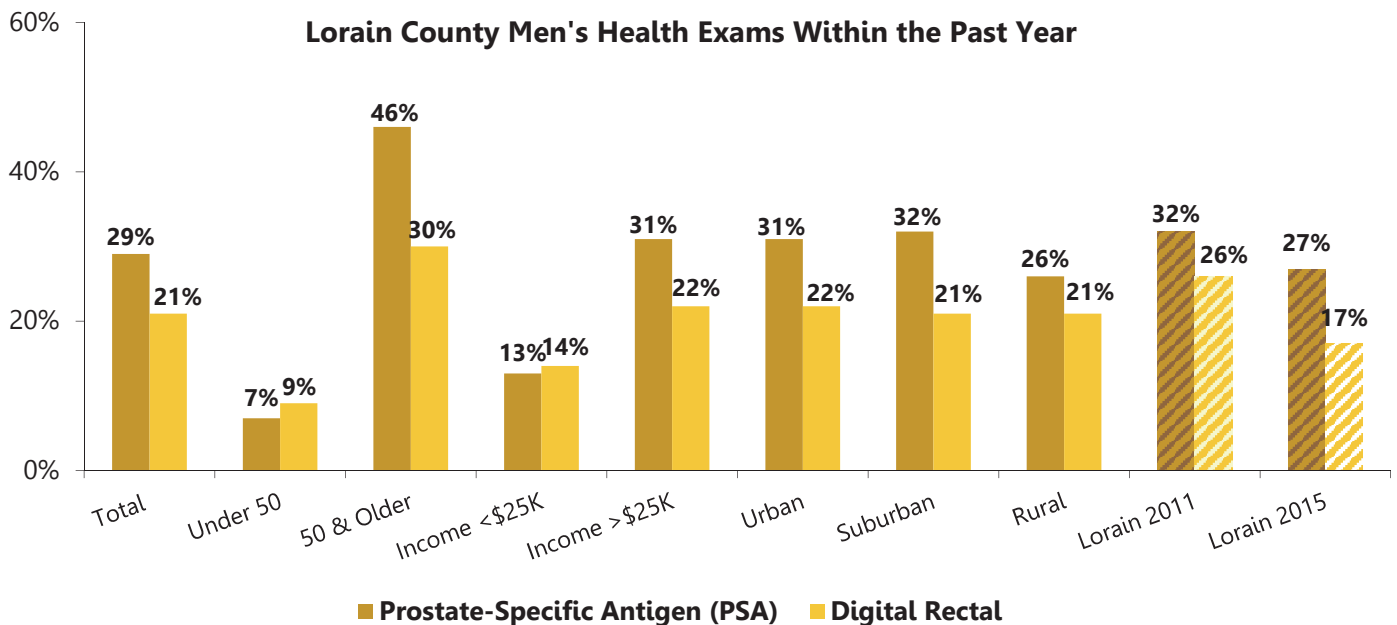
WOMEN'S HEALTH

More than half (55%) of Lorain County women over the age of 40 reported having a mammogram in the past year. Fifty-eight percent (58%) of women ages 19 and over had a clinical breast exam, and 36% had a Pap smear to detect cancer of the cervix in the past year. Three percent (3%) of women survived a heart attack and 3% survived a stroke at some time in their life. Nearly two-fifths (38%) of Lorain County women were obese, 29% had high blood pressure, 29% had high blood cholesterol, and 14% were identified as current smokers, known risk factors for cardiovascular diseases.



MEN'S HEALTH

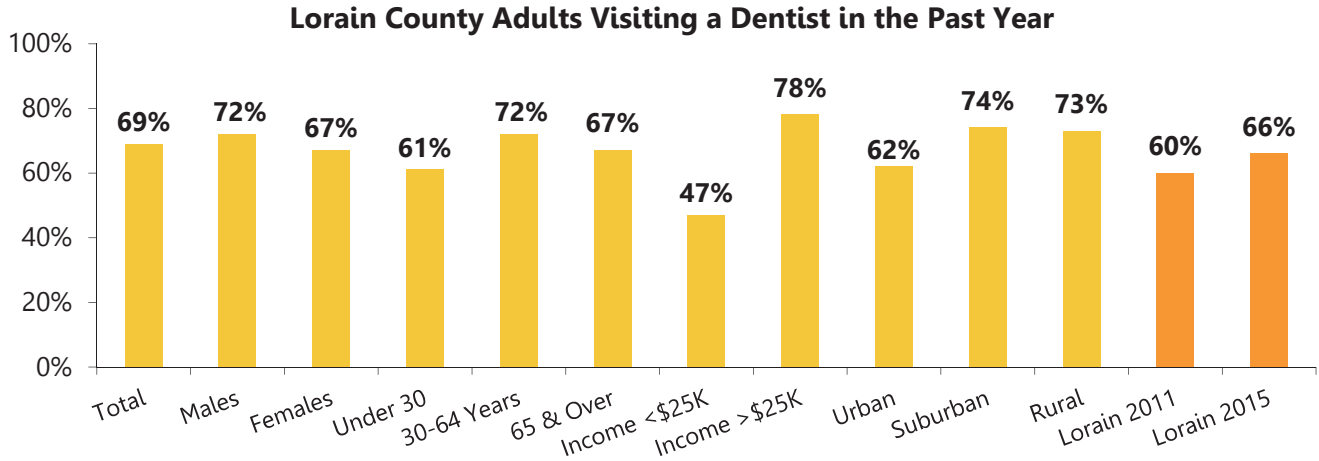
In the past year, 46% of Lorain County males over the age of 50 had a prostate-specific antigen (PSA) test. Seven percent (7%) of men survived a heart attack and 4% survived a stroke at some time in their life. Two-fifths (40%) of men had been diagnosed with high blood pressure, 40% had high blood cholesterol, and 9% were identified as smokers, which, along with obesity (38%), are known risk factors for cardiovascular diseases.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ORAL HEALTH

Sixty-nine percent (69%) of Lorain County adults had visited a dentist or dental clinic in the past year, decreasing to 47% of adults with incomes less than \$25,000. Thirty-two percent (32%) of adults indicated cost was the reason they did not visit a dentist within the past year.

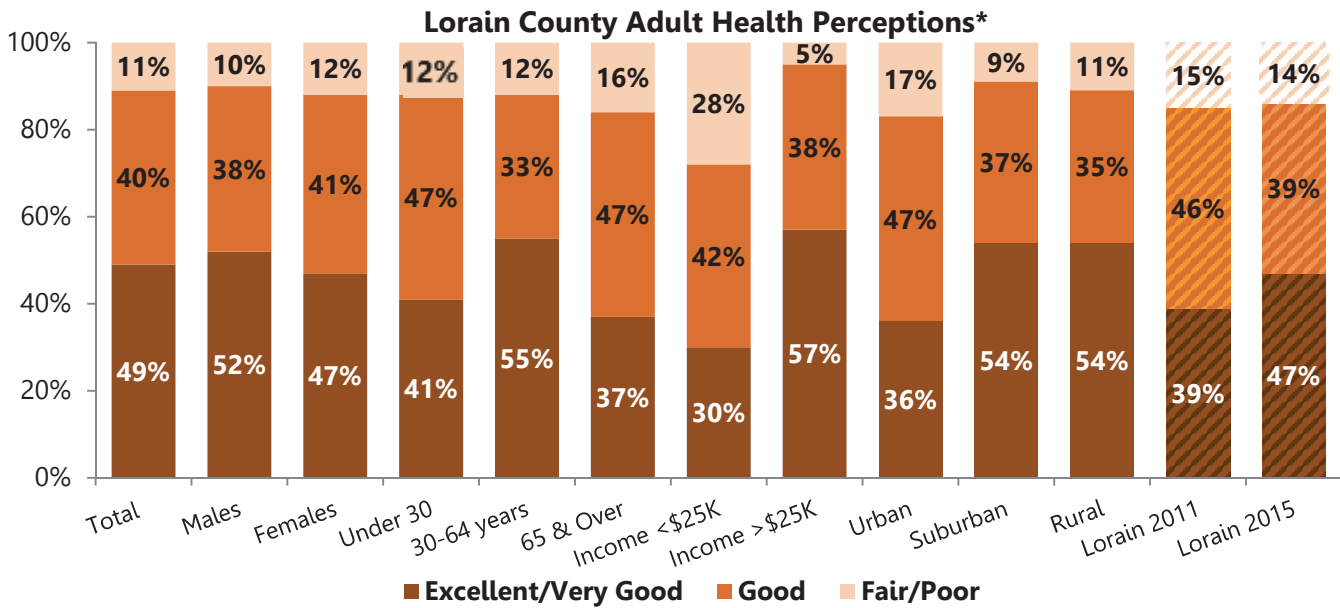


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Health Behaviors

HEALTH STATUS PERCEPTIONS

In 2018, almost half (49%) of the Lorain County adults rated their health status as excellent or very good. Conversely, 11% of adults described their health as fair or poor, increasing to 16% of those over the age of 65.

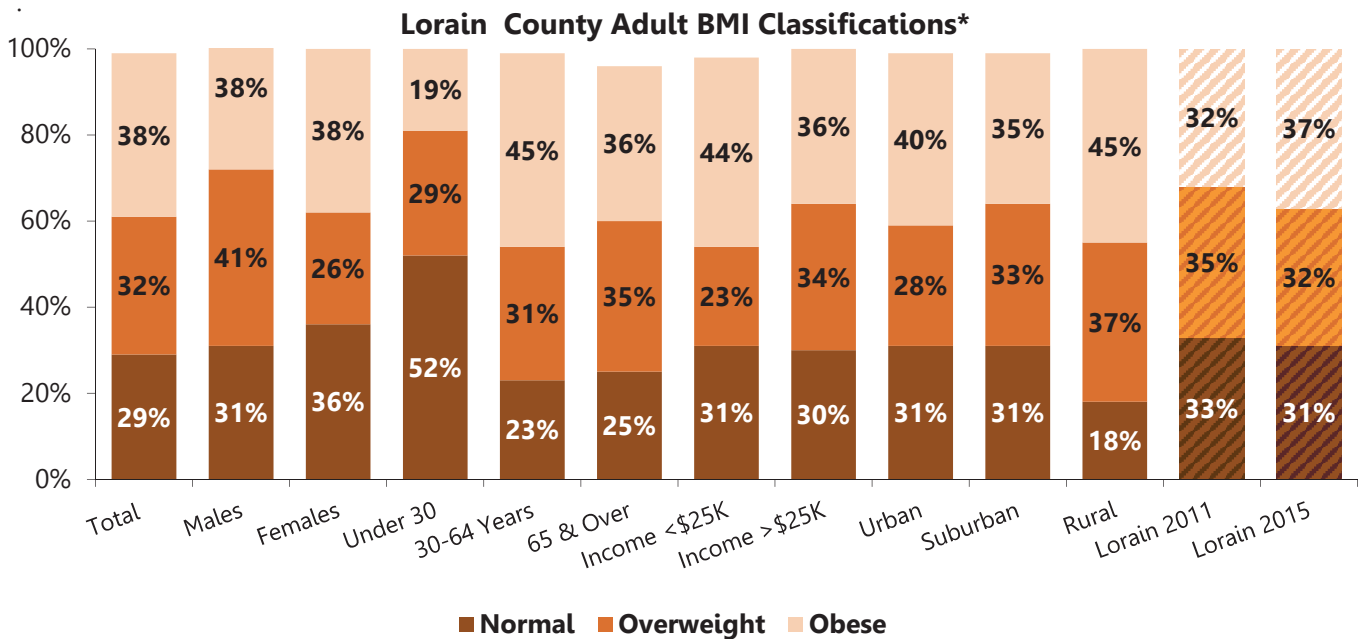


*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT WEIGHT STATUS

Seventy percent (70%) of Lorain County adults were overweight (32%) or obese (38%) based on body mass index (BMI). More than half (52%) of adults were trying to lose weight.

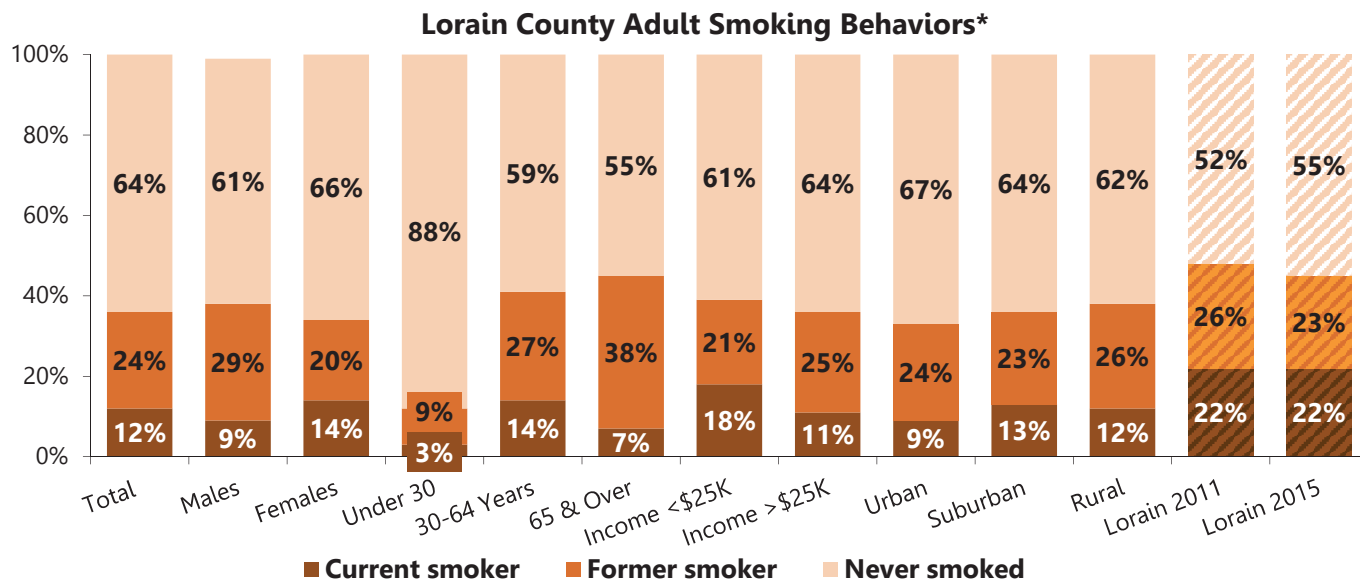


*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT TOBACCO USE

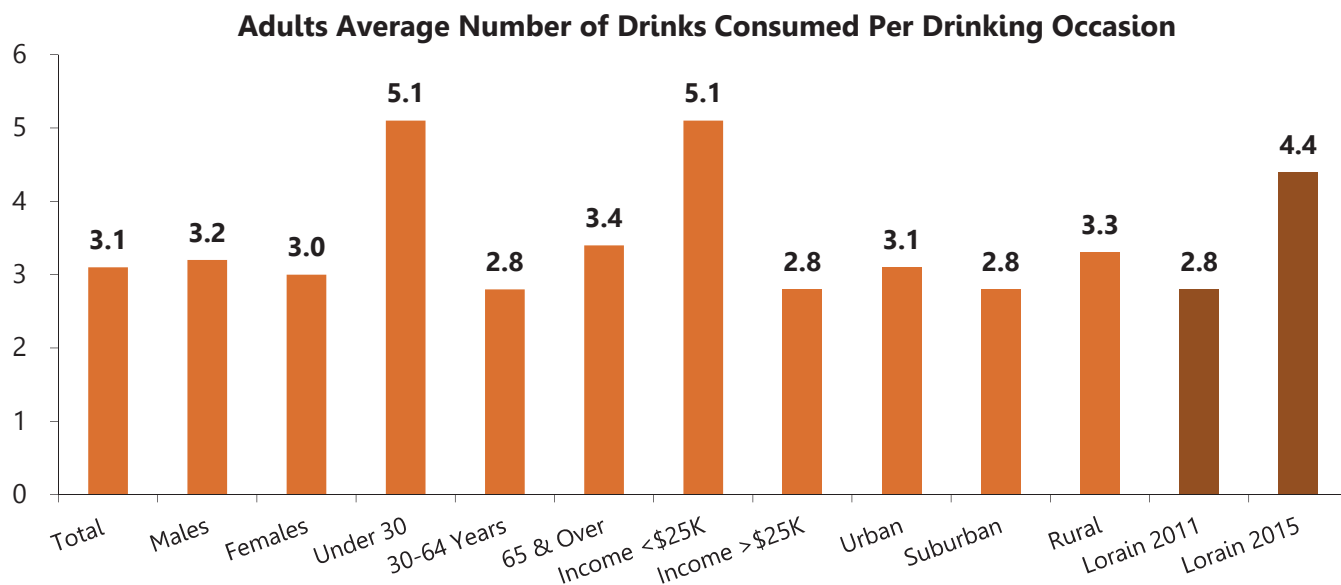
In 2018, 12% of Lorain County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days). Almost one-fourth (24%) were considered former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). Eight percent (8%) of adults had used e-cigarettes/vape pens in the past year.



**Note: Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"*

ADULT ALCOHOL CONSUMPTION

In 2018, 62% of Lorain County adults had at least one alcoholic drink in the past month. More than one-fifth (21%) of Lorain County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition.

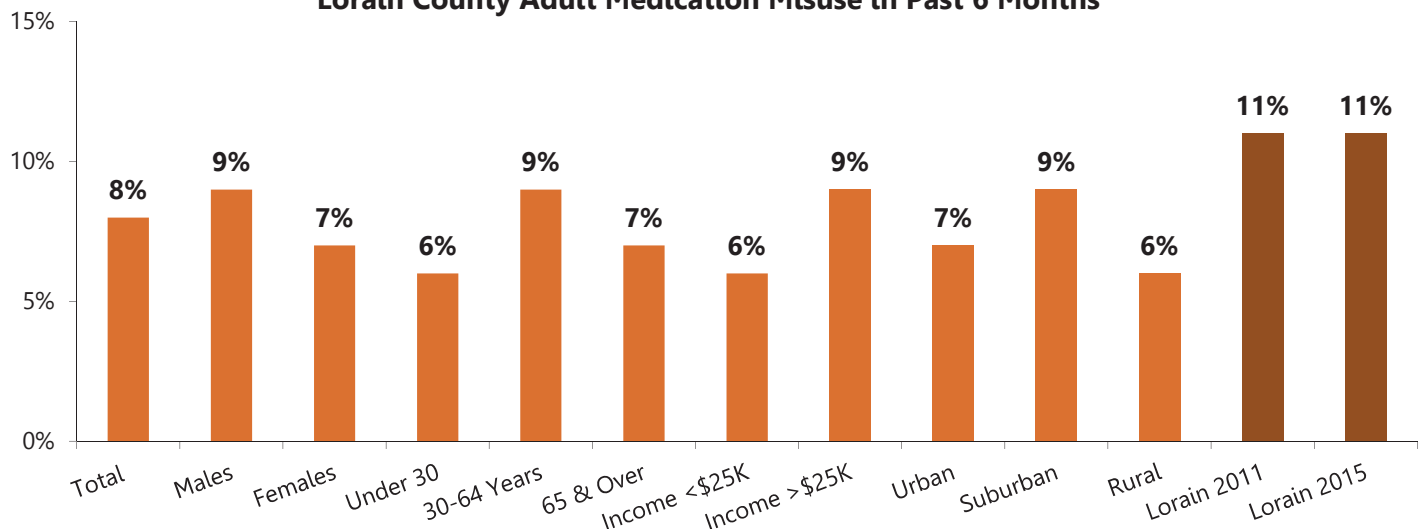


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT DRUG USE

In 2018, 10% of Lorain County adults had used recreational marijuana during the past 6 months. Eight percent (8%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

Lorain County Adult Medication Misuse in Past 6 Months



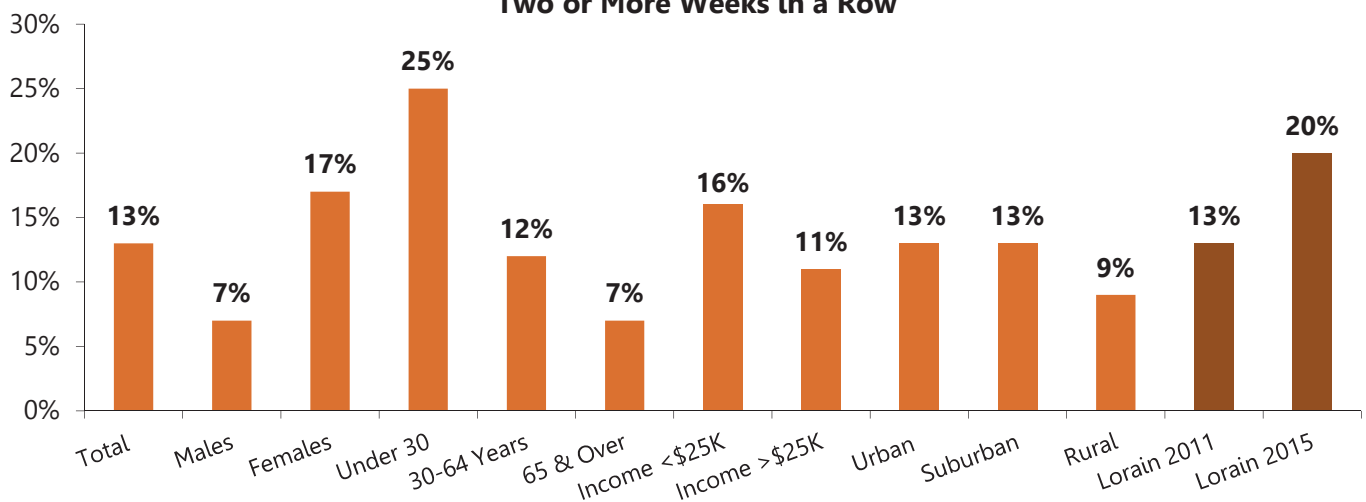
ADULT SEXUAL BEHAVIOR

In 2018, 69% of Lorain County adults had sexual intercourse. Seven percent (7%) of adults had more than one partner. Six percent (6%) of adults have been forced to have sexual intercourse when they did not want to, increasing to 10% of females.

ADULT MENTAL HEALTH

In 2018, 4% of Lorain County adults considered attempting suicide. Thirteen percent (13%) of Lorain County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems.

Lorain County Adults Feeling Sad, Blue or Depressed for Two or More Weeks in a Row

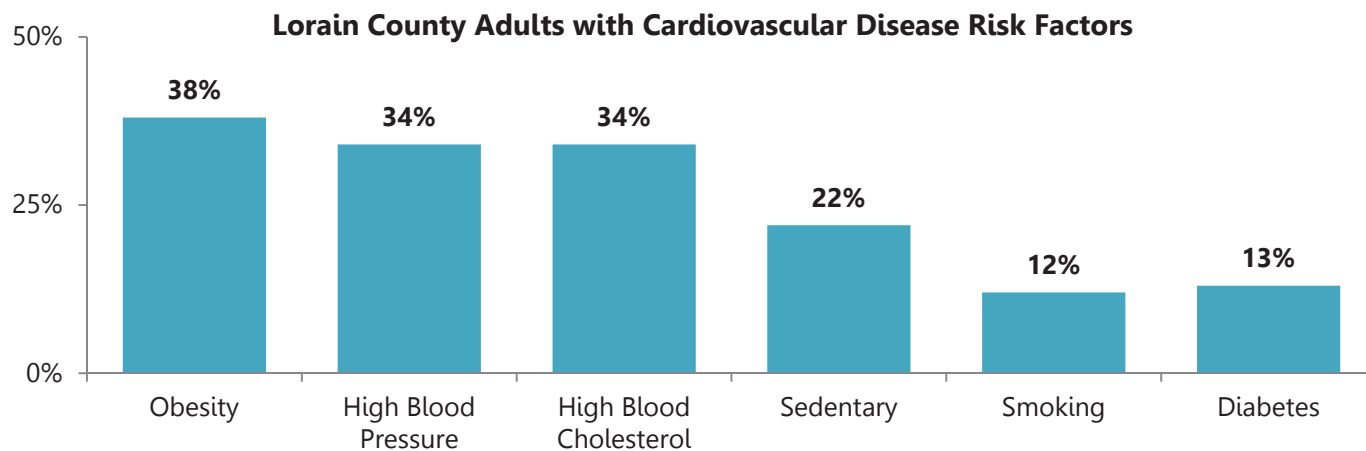


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Chronic Disease

CARDIOVASCULAR HEALTH

In 2018, 5% of adults had survived a heart attack and 3% had survived a stroke at some time in their life. Almost two-fifths (38%) of Lorain County adults were obese, 34% had high blood pressure, 34% had high blood cholesterol, and 12% were current smokers, four known risk factors for heart disease and stroke.

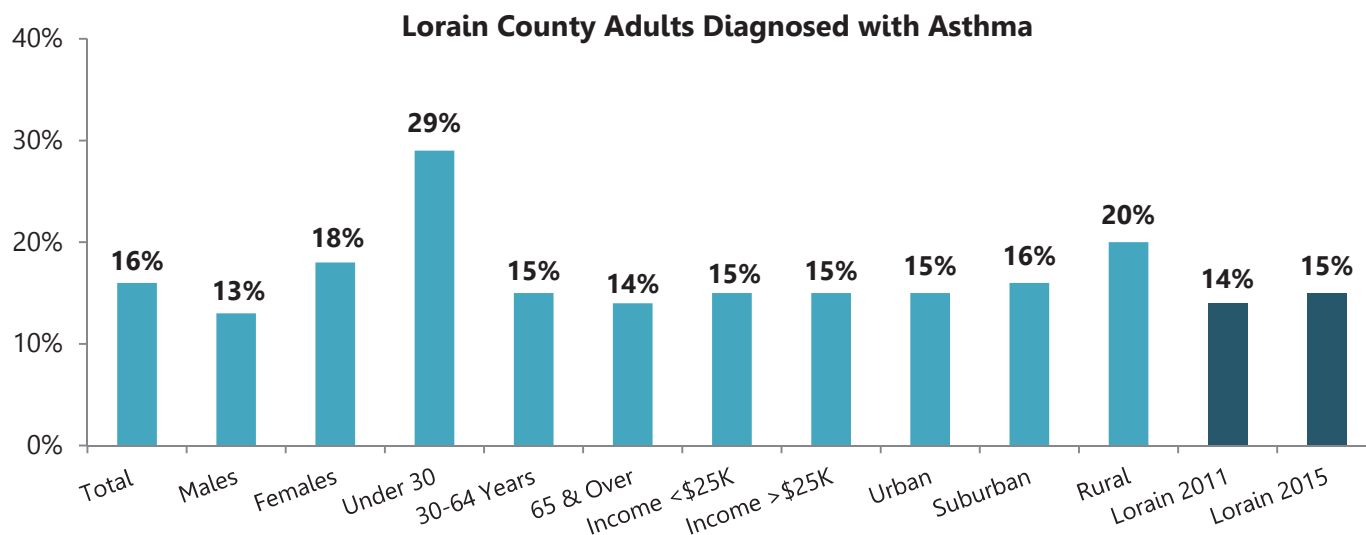


CANCER

From 2015 to 2017, cancers caused 22% (2,066 of 9,429 total deaths) of all Lorain County resident deaths (*Source: Ohio Public Health Data Warehouse, 2015-2017*).

ASTHMA

In 2018, 16% of Lorain County adults had been diagnosed with asthma, increasing to 29% of those under the age of 30.



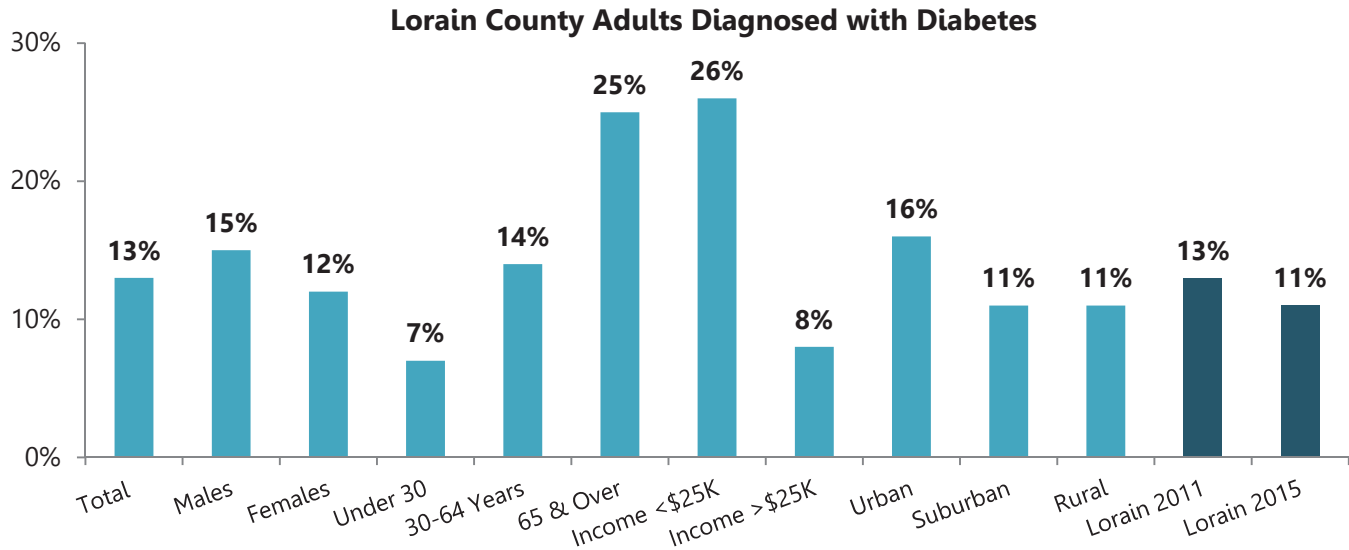
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ARTHRITIS

Thirty-six percent (36%) of Lorain County adults were told by a health professional that they had some form of arthritis.

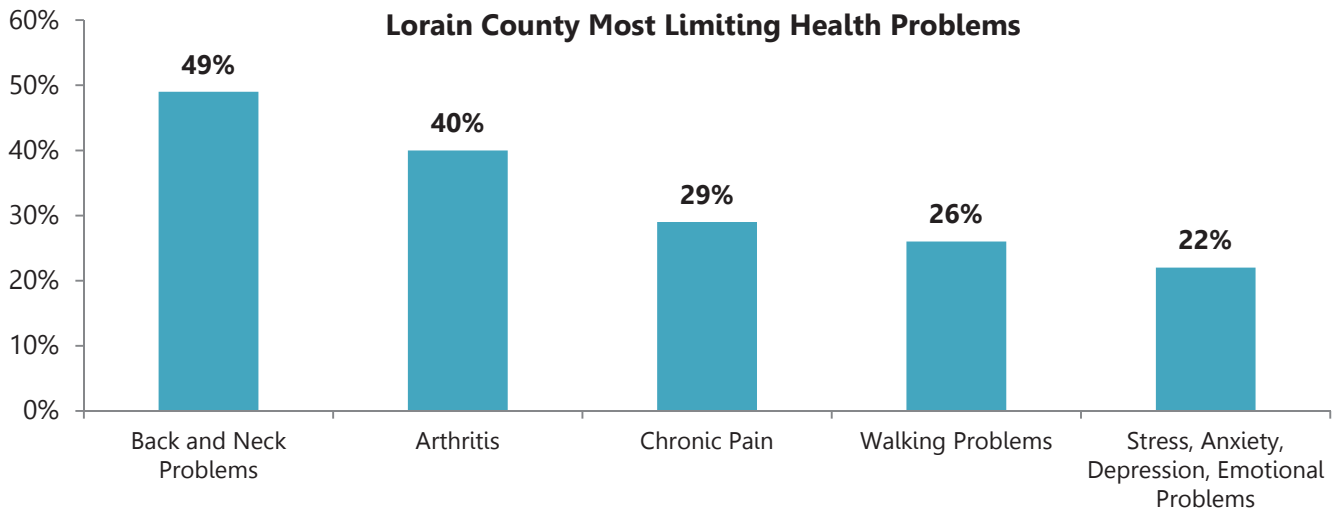
DIABETES

Thirteen percent (13%) of Lorain County adults had been diagnosed with diabetes in their lifetime. More than one-fifth (22%) of adults with diabetes rated their health as fair or poor.



QUALITY OF LIFE

In 2018, 38% of Lorain County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (49%), arthritis/rheumatism (40%), chronic pain (29%), and walking problems (26%).

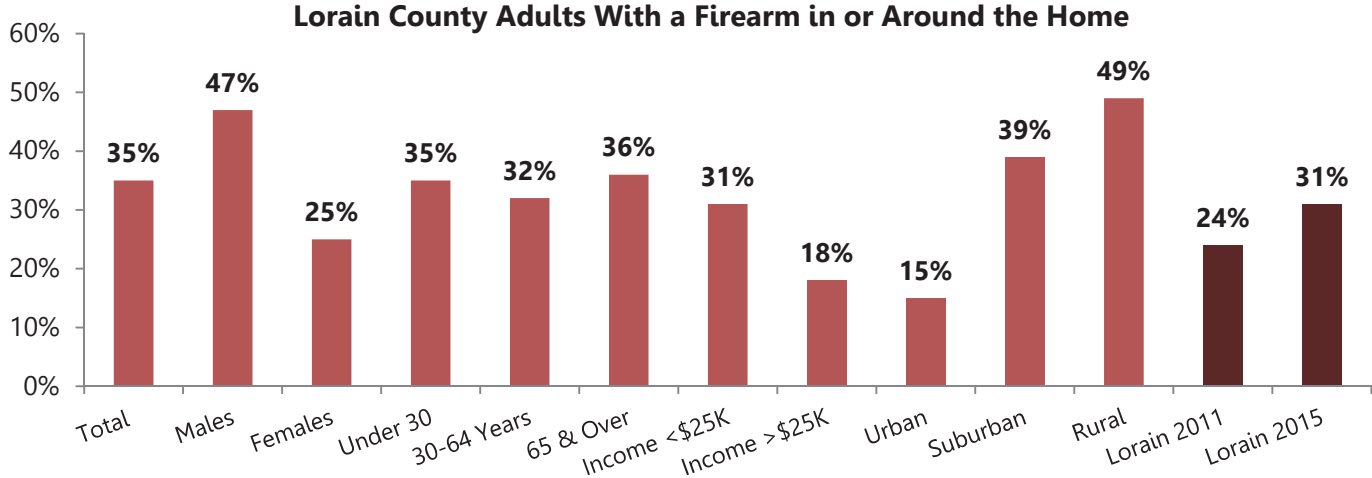


Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Social Conditions

SOCIAL DETERMINANTS OF HEALTH

In 2018, 7% of Lorain County adults were abused in the past year. Nineteen percent (19%) of Lorain County adults had four or more adverse childhood experiences (ACEs) in their lifetime, increasing to 24% of those with incomes less than \$25,000. Thirty-five percent (35%) of adults kept a firearm in or around their home.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ENVIRONMENTAL HEALTH

The top three environmental health issues for Lorain County adults were insects (10%), mold (9%), and rodents (7%). Fifty percent (50%) of adults had a 3-day supply of nonperishable food for everyone in the household in preparation for a disaster.

PARENTING

Sixty percent (60%) of parents discussed bullying with their 12-to-17-year-old in the past year. Eighty-eight percent (88%) of parents reported their child always rode in a car seat or booster seat when riding in a car.

Data Summary | Rural, Suburban, and Urban Health

RURAL HEALTH

In 2018, 13% of rural Lorain County adults did not have health care coverage. Forty-two percent (42%) of rural women had a mammogram in the past year. Forty-nine percent (49%) of adults keep firearms in and around their household.

SUBURBAN HEALTH

Seven percent (7%) of suburban adults did not have health care coverage. More than one-fourth (29%) of adults had high blood pressure. Thirteen percent (13%) were current smokers. Eighty-one percent (81%) consider their neighborhood to be extremely or quite safe.

URBAN HEALTH

Thirteen percent (13%) of Elyria and Lorain City adults did not have health care coverage. More than one-third (34%) of adults had high blood cholesterol. Nine percent (9%) were classified as overweight or obese, and 27% were current smokers.

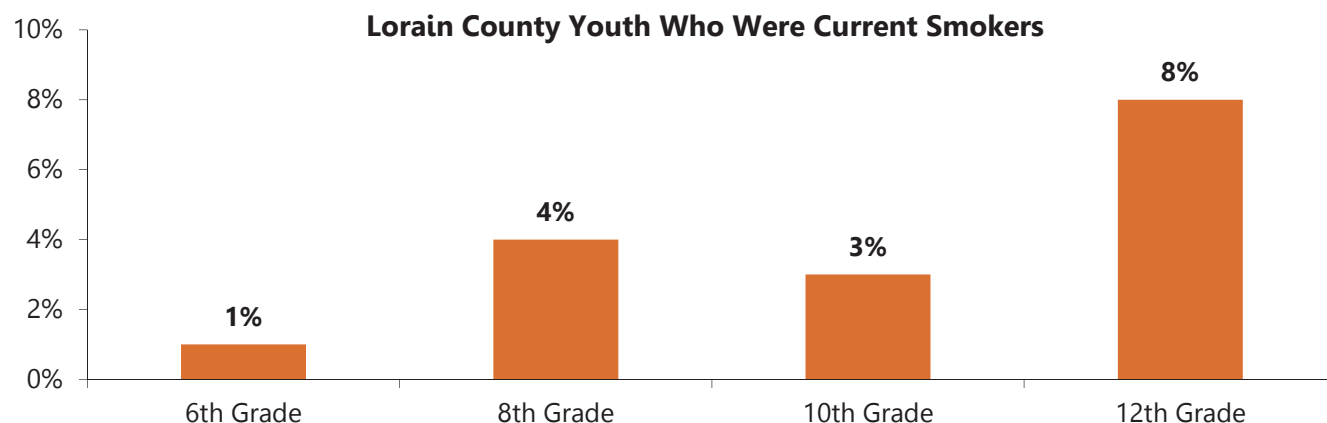
Data Summary | Youth Health

YOUTH WEIGHT STATUS

During Fall 2018, Communities That Care of Lorain County conducted the Pride Survey in 6th, 8th, 10th, and 12th grades throughout fourteen districts in the county. Seventeen percent (17%) of Lorain County 6th grade youth ate four or more servings of fruits and/or vegetables per day. More than four-fifths (81%) of Lorain County 8th grade youth participated in at least 60 minutes of physical activity on three or more days in the past week. Thirty-one percent (31%) of 10th grade youth reported they were overweight.

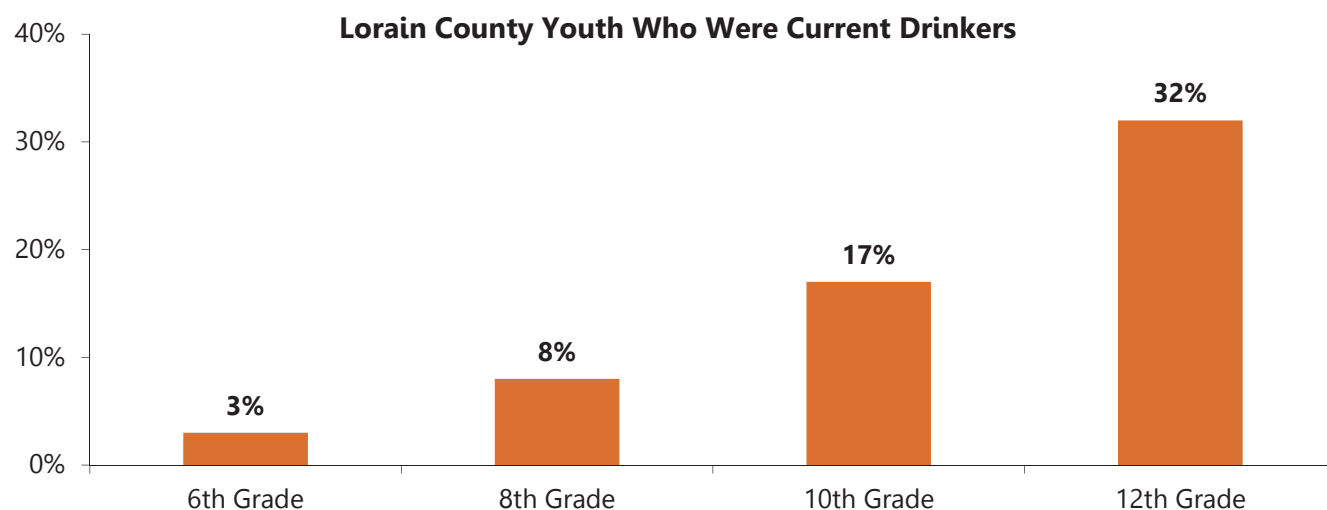
YOUTH TOBACCO USE

The 2018 Pride Survey Report indicated that 4% of Lorain County 8th grade youth and 8% of 12th grade youth had smoked cigarettes in the past month. Thirty-seven percent (37%) of 12th grade youth used an e-cigarette, vape pen, or e-liquid rig in the past 30 days.



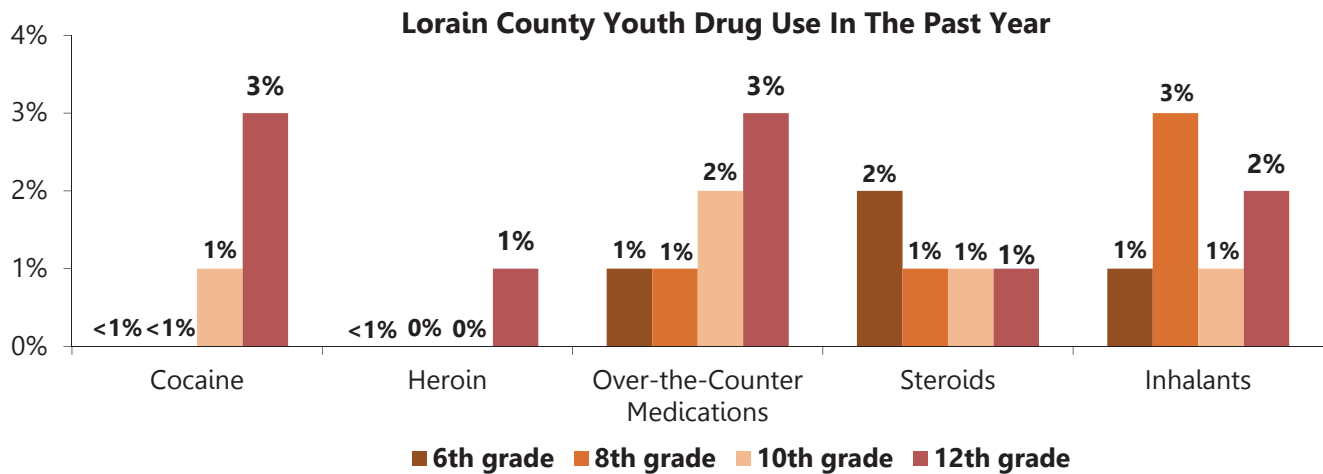
YOUTH ALCOHOL USE

Three percent (3%) of Lorain County 6th grade youth were current drinkers, having had a drink at some time in the past 30 days. The 2018 Pride Survey Report indicated that 17% of Lorain County 8th grade youth had alcohol in the past year.



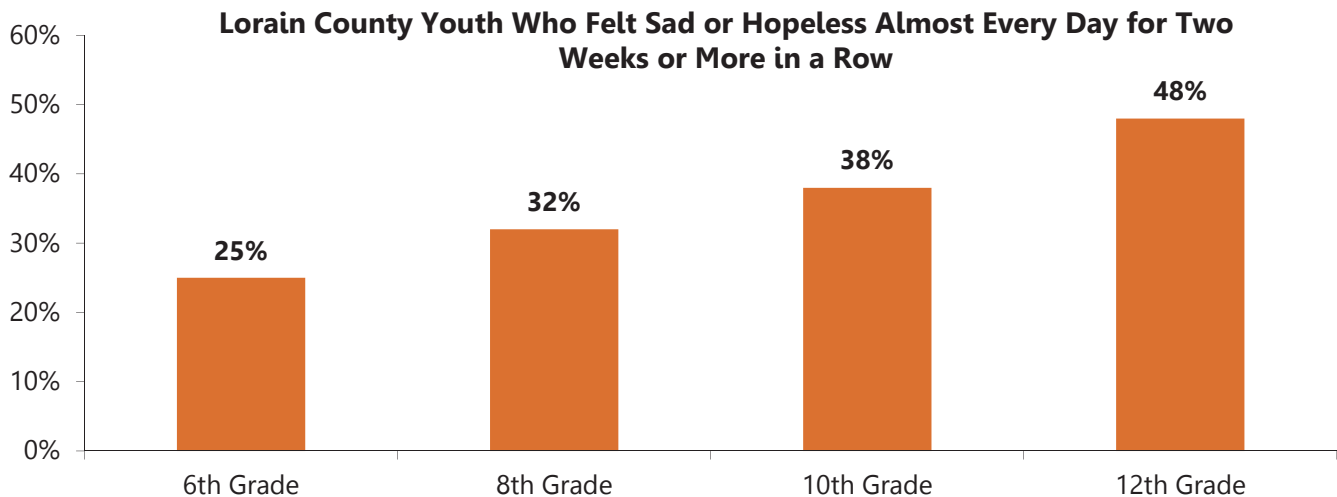
YOUTH DRUG USE

The 2018 Pride Survey Report indicated that 4% of Lorain County 6th grade youth had used illicit drugs in the past year. Five percent (5%) of Lorain County 8th grade youth used marijuana or hashish in the past 30 days. Six percent (6%) of 12th grade youth used prescription drugs not prescribed for them in the past 30 days.



YOUTH MENTAL HEALTH

One-fourth (25%) of Lorain County 6th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. More than one-fourth (28%) of 12th grade youth reported they had seriously considered attempting suicide in the past 12 months.










YOUTH SAFETY AND VIOLENCE ISSUES

Twenty-five percent (25%) of Lorain County 8th grade youth had threatened to hurt another student by hitting, slapping or kicking. Sixteen percent (16%) of 6th grade youth hurt another student by hitting, slapping or kicking. In 2018, 7% of 12th graders carried a knife, club or other weapon at school.

YOUTH PERCEPTIONS

Fifty-nine percent (59%) of Lorain County 6th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Less than one-third (29%) of Lorain County 12th grade youth reported their peers would feel it was very wrong for them to smoke tobacco.


Adult Trend Summary






Adult Variables	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Health Status					
Rated general health as good, very good, or excellent	88%	86%	89%	81%	83%
Rated health as excellent or very good	48%	47%	49%	49%	51%
Rated health as fair or poor 	12%	14%	11%	19%	18%
Rated physical health as not good on four or more days (in the past 30 days)	18%	21%	18%	22%*	22%*
Rated mental health as not good on four or more days (in the past 30 days)	20%	27%	29%	24%*	23%*
Average days that physical health not good (in the past 30 days) 	N/A	3.1	3.6	4.0 [†]	3.7 [†]
Average days that mental health not good in past month 	N/A	4.1	4.7	4.3 [†]	3.8 [†]
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past 30 days)	18%	27%	25%	22%*	22%*
Health Care Access and Utilization					
Visited the doctor's office when needed health care services or advice	75%	80%	73%	N/A	N/A
Had one or more persons they thought of as their personal doctor or health care provider	83%	81%	84%	81%	77%
Did not see a doctor in the past year due to cost 	20%	18%	14%	11%	13%
Visited a doctor for a routine checkup (in the past 12 months) 	55%	64%	71%	72%	70%
Visited a doctor for a routine checkup (5 or more years ago)	12%	10%	7%	7%	8%
Health Care Coverage					
Uninsured	11%	11%	10%	9%	11%
Arthritis, Asthma & Diabetes					
Ever diagnosed with some form of arthritis	35%	34%	36%	29%	25%
Had ever been told they have asthma 	14%	15%	16%	14%	14%
Ever been told by a doctor they have diabetes (not pregnancy-related) 	13%	11%	13%	11%	11%
Ever been diagnosed with pregnancy-related diabetes	2%	3%	1%	1%	1%
Ever been diagnosed with pre-diabetes or borderline diabetes	N/A	6%	6%	2%	2%

N/A - Not Available

*2016 BRFSS

**2016 BRFSS Data as compiled by 2018 County Health Rankings


 Indicates alignment with the Ohio State Health Assessment

Adult Variables	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Cardiovascular Health					
Ever diagnosed with angina or coronary heart disease 	6%	6%	5%	5%	4%
Ever diagnosed with a heart attack, or myocardial infarction	6%	3%	5%	6%	4%
Ever diagnosed with a stroke	2%	4%	3%	4%	3%
Had been told they had high blood pressure 	35%	36%	34%	35%	32%
Had been told their blood cholesterol was high	36%	33%	34%	33%	33%
Had their blood cholesterol checked within the past five years	N/A	82%	80%	85%	86%
Alcohol Consumption					
Current drinker (drank alcohol at least once in the past month)	59%	61%	62%	54%	55%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days) 	23%	11%	21%	19%	17%
Drinking and driving in the past month (had driven after drinking too much)	4%	1%	8%	4%*	4%*
Tobacco Use					
Current smoker (smoked on some or all days) 	22%	22%	12%	21%	17%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	26%	23%	24%	24%	25%
Drug Use					
Adults who used marijuana in the past 6 months	7%	10%	10%	N/A	N/A
Adults who used heroin in the past 6 months	1%	<1%	<1%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	11%	11%	8%	N/A	N/A
Sexual Behavior					
Had more than one sexual partner in past year	6%	8%	7%	N/A	N/A
Weight Status					
Normal Weight (BMI of 18.5 – 24.9)	33%	31%	29%	30%	32%
Overweight (BMI of 25.0 – 29.9)	35%	32%	32%	34%	35%
Obese (includes severely and morbidly obese, BMI of 30.0 and above) 	32%	37%	38%	34%	32%

N/A - Not Available

*2016 BRFSS

**2015 BRFSS


 Indicates alignment with the Ohio State Health Assessment

Adult Variables	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Quality of Life					
Limited in some way because of physical, mental or emotional problem	20%	36%	38%	21%*	21%*
Mental Health					
Considered attempting suicide (in the past 12 months)	4%	3%	4%	N/A	N/A
Attempted suicide (in the past 12 months)	<1%	1%	1%	N/A	N/A
Two or more weeks in a row felt sad, blue or depressed	13%	20%	13%	N/A	N/A
Oral Health					
Visited a dentist or a dental clinic (within the past year)	60%	66%	69%	68%*	66%*
Visited a dentist or a dental clinic (5 or more years ago)	14%	12%	10%	11%*	10%*
Had any permanent teeth extracted	N/A	N/A	47%	45%*	43%*
Had all their natural teeth extracted (ages 65 and older)	N/A	N/A	9%	17%*	14%*
Preventive Medicine					
Ever had a pneumonia vaccination (age 65 and older)	68%	82%	76%	76%	75%
Had a flu shot within the past year (age 65 and older)	68%	82%	80%	63%	60%
Ever had a shingles or zoster vaccine	N/A	13%	22%	29%	29%
Had a clinical breast exam in the past two years (age 40 & over)	N/A	69%	74%	N/A	N/A
Had a mammogram within the past two years (age 40 and older)	79%	75%	77%	74%*	72%*
Had a Pap smear in the past three years (ages 21-65)	N/A	68%**	70%	82%*	80%*
Had a PSA test within the past year	32%	27%	29%	N/A	N/A
Had a digital rectal exam within the past year	26%	17%	21%	N/A	N/A
Social Determinants of Health					
Firearms kept in or around their home	24%	31%	35%	N/A	N/A

N/A - Not available

*2016 BRFSS

**2015 BRFSS

 Indicates alignment with the Ohio State Health Assessment

Youth Trend Summary

Youth Variables	Lorain County 2018 6 th grade	Lorain County 2018 8 th grade	Lorain County 2018 10 th grade	Lorain County 2018 12 th grade
Weight Control				
Physically active at least 60 minutes per day on every day in past week	27%	32%	25%	18%
Physically active at least 60 minutes per day on 5 or more days in past week	48%	56%	53%	38%
Did not participate in at least 60 minutes of physical activity on at least 1 day	10%	9%	7%	14%
Tobacco Use				
Used tobacco in the past year	1%	7%	11%	26%
Current smokers	1%	4%	3%	8%
Alcohol Consumption				
Youth who had alcohol in the past year	8%	17%	36%	59%
Current drinker	3%	8%	17%	32%
Rode with someone who was drinking	11%	12%	11%	11%
Drank and drove (of youth drivers)	N/A	N/A	1%	5%
Drug Use				
Used marijuana in the past month	1%	5%	13%	31%
Used methamphetamines in the past year	<1%	<1%	<1%	1%
Used cocaine in the past year	<1%	<1%	1%	3%
Used heroin in the past year	<1%	0%	0%	1%
Used steroids in the past year	2%	1%	1%	1%
Used inhalants in the past year	1%	3%	1%	2%
Used ecstasy/MDMA in the past year	<1%	1%	1%	3%
Used prescription drugs not prescribed for them in the past month	1%	2%	2%	6%
Mental Health				
Youth who had seriously considered attempting suicide in the past year	19%	20%	22%	28%
Youth who had attempted suicide in the past year	12%	13%	10%	12%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	25%	32%	38%	48%
Safety and Violence				
Youth who carried a knife, club or other weapon at school	5%	8%	8%	7%
Youth who had been threatened with a handgun, knife or club	4%	6%	5%	3%
Youth who threatened to hurt another student by hitting, slapping or kicking	17%	25%	22%	16%
Youth who always wore a seatbelt when driving a car	N/A	N/A	43%	71%

N/A - Not available

Evaluation of Impact

Avon RH, LLC (University Hospitals Avon Rehabilitation Hospital)

UH Avon Rehabilitation Hospital Implementation Strategy: Impact Assessment

UH Avon Rehabilitation Hospital opened in 2016. Its mission is “to improve the health, function and quality of life of the people in the communities we serve.” Its service area includes the far north western area of Cuyahoga County and most of the northern part of Lorain County. Located in Avon, Ohio, this rehabilitation hospital has rehabilitation specialties in orthopedic trauma and joint replacement; stroke and neurological rehabilitation; brain injury rehabilitation; spinal cord rehabilitation; and amputee rehabilitation. Its team of physical medicine and rehabilitation physicians; consulting physicians in internal medicine, orthopedics, neurology, nephrology, infectious disease, and pulmonology; rehabilitation nurses; physical and occupational therapists; speech/language pathologists; nutritionists; and case managers use a team approach to address the special set of needs of those whose injury or illness requires inpatient therapy prior to transition to home.

Upon review of the 2017 Community Health Needs Assessment, hospital leadership for the UH Avon Rehabilitation Hospital isolated the community health priority of wellness, and in particular weight-control. Within this area, in consideration of the hospital’s expertise, its state-of-the-art facilities, and its being a specialty hospital, the following goals were established:

1. Develop and launch a wellness program emphasizing weight issues
2. Increase the awareness of, access to, and participation in this wellness program

Below we describe the actions specific to those goals, along with their outcomes through the end of 2018.

1. Develop and launch a wellness program emphasizing weight issues

In late 2017, design and development of the wellness program was completed and was launched. Program leadership had the following goals for the program through 2018:

- a. Offer one wellness program per quarter

This goal was met, as a wellness program was offered and delivered to community members, once a quarter, from Q4, 2017 through Q4, 2018.

- b. Promote the program through targeted, niche communication channels.

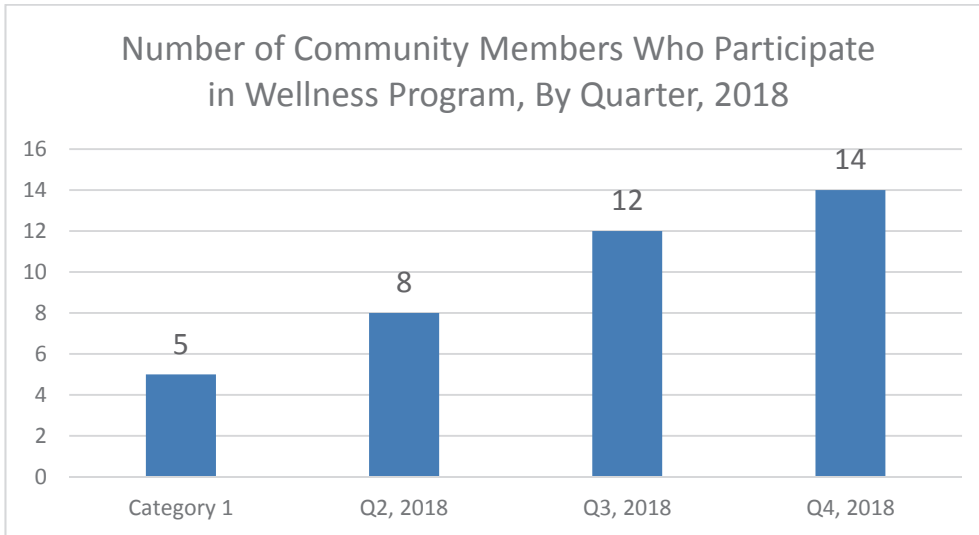
Hospital leadership and staff have a deep expertise working with patients who have suffered an injury or illness which led to physical limitations which negatively impact their quality of life. Hence, their community benefit efforts are best targeted at those who have ongoing quality of life issues due to one or more physical limitations.

Stroke victims are the most numerous community members who have ongoing physical limitations. Therefore, UH Avon Rehabilitation Hospital focused its marketing and communications efforts on existing channels which reach stroke victims throughout the community. In both 2017 and 2018, promotional materials (brochures, posters, etc.) were distributed to the four closest acute-care hospitals, to be distributed to stroke patients and their families. In addition, the hospital nurtured relationships with community-based associations which focus on stroke victims (e.g., the Ohio Stroke Association; community-based stroke support groups) in order to integrate the wellness program into those organizations’ marketing materials and website communications.

Through this, access to patients likely to benefit from this program grew to 131 in 2018.

- c. Increase the number of community members participating in UH Avon Rehabilitation Hospital's wellness program by 100% from the first to the last class.

Through its promotional efforts, participation in the program grew steadily each quarter in 2018, finishing the year with a 200% increase in participation per quarter. As awareness of the program grows, and the number of community members who have benefitted from it also grows, participation in this program is also expected to expand through 2019 and beyond.



In the first two quarters of 2019, 30 people participated in the support group which is now offered monthly. Staff plans to develop strategies to expand awareness of the group and determine the feasibility of additional offerings such as physician talks offered to the community.

UH Elyria Medical Center

UH Elyria Medical Center Implementation Strategy: Impact Assessment

UH Elyria Medical Center is a community-based hospital with 387 licensed beds. It is located in Elyria, Ohio, which is the second largest city in Lorain County, with the city of Lorain being the largest. Elyria is located in the center of Lorain County, which is a very diverse county in terms of its geography and make-up of its communities. For the most part, Lorain County is rural. However, the cities of Lorain and Elyria have urban characteristics. The county includes agricultural and industrial areas, as well as some tourism along its northern section which borders Lake Erie. The eastern suburbs of Lorain County are among northeast Ohio's fastest growing and affluent communities. In sharp contrast, the cities of Elyria and Lorain both have significant pockets of socioeconomically disadvantaged residents who face locational, social and economic barriers to care. Finally, Lorain County includes a strong immigrant community, mainly of Hispanic/Latino descent.

UH Elyria Medical Center is a full-service acute care hospital, with a 24/7 emergency department, cardiac/vascular care, full array of surgical services, a labor and delivery unit and mental health care. Its satellite campuses are located in Amherst, Avon, Sheffield, North Ridgeville and Westlake.

The last assessment conducted by UH Elyria Medical Center was adopted by University Hospitals in September, 2018. The corresponding Implementation Strategy was adopted in March, 2019, while simultaneously conducting the 2019 collaborative CHNA with Lorain County Public Health. This one-year consecutive process is atypical, in that there is usually a three-year period between assessments. This was done to fulfill State of Ohio requirements to align hospitals and public health departments on the same three-year planning cycle by 2020. As such, the reporting period covers 2018 and the first two quarters of 2019.

Upon review of the 2018 Community Health Needs Assessment, hospital leadership for UH Elyria Medical Center isolated two top priority community health needs in alignment with the Lorain County Health Assessment:

1. Chronic Disease
2. Mental Health & Addiction

In the first two quarters of 2019, UH Elyria Medical Center promoted the Crisis Text Line in several local publications, reaching at least 40,800 people. Additionally, fifteen individuals were enrolled in diabetes prevention classes through UH Elyria Medical Center based on screenings and referral of 68 people with a prediabetes diagnosis.

Regarding mental health and addiction, UH Elyria Medical Center began planning and recruiting members for a new Hospital Opiate Coalition by 2020. This entails compiling comprehensive baseline data regarding the programs and services offered within Lorain county and addressing gaps in care coordination. The plan is to invite faith-based leaders, local businesses, community organizations, justice system liaisons, mental health/substance abuse service providers, health care providers, and other organizations for a roundtable discussion surrounding mental health and substance abuse in Lorain County.

This work builds upon its previous strategies to address: 1) **obesity** 2) **access to primary care** 3) **lack of access to successful preventative programs**, and 4) **high death rates for heart disease, stroke & diabetes**. Within those areas, in consideration of the hospital's expertise and its being a community-based hospital, the following goals were established:

- Reduce the rate of obesity among adults in Lorain County
- Improve the network of primary care physicians and reduce access to care barriers
- Increase access to successful preventative health programs and information in the community
- Provide targeted programming to reduce the death rate for leading causes of death: Cancer, Heart Disease, Stroke, Diabetes

With these goals in-hand, action plans were created to lend the hospitals' staff expertise and resources to combat each community health issue. Below we outline what actions were taken and provide an assessment of the impact of those actions.

1) **Obesity**

Reduce the rate of obesity among adults in Lorain County

- a. Increase participation in weight loss programs

UH Elyria Medical Center's staff has developed an expertise in programming successful weight loss programs for its patients. It has leveraged this ability in building community-based programs to increase access to weight loss programs for all community members. Its Better Body Challenge program showed an increase in participation through 2018, with 42 participants in Q1 and 86 in Q4. A total of 292 participants benefits from this program (which showed successful weight loss for a majority of participants) in 2018

- b. Increase knowledge (about importance of and dynamics of weight loss) of program participants

100% of program participants received education materials and instruction through their weight loss program. All increased their level of understanding on the topics presented.

- c. Increase the percentage of participants losing weight

In total, 60% of participants were successful in their weight loss goal in the program. This varied tremendously through the year, with a low quarterly rate of 42% and a high of 77%. Hospital staff continue to experiment with program details and strategies to maximize the program's success rate.

2) **Access to primary care**

Many areas in Northeast Ohio have struggled with shrinking primary care provider networks. The University Hospitals system has focused on building a stronger network throughout its footprint, which includes the recruitment of physicians and also better leveraging of other provider types (Advance Practice Nurses, Physician's Assistants).

Improve the network of primary care physicians and reduce access to care barriers

- a. Reduce the number of patients that present to the ED without primary care physicians from 20% in 2016, 17% in 2017 and 18% in 2018.

The efforts to reduce emergency department patients who present without a primary care physician have not been successful, as measured within the UH Elyria Medical Center emergency department. In 2018, the proportion of patients without a PCP presenting in the emergency department held steady at 20.75% overall.

3) **Lack of access to successful preventative programs**

Increase access to successful preventative health programs and information in the community

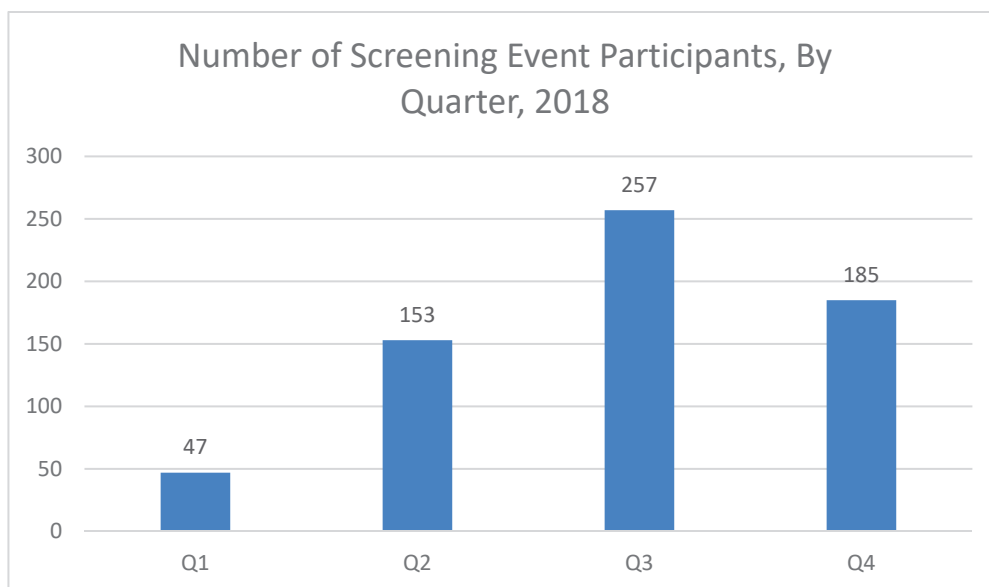
Through its community outreach programs, hospital staff have discovered that outreach efforts which include immediate benefits to participants (e.g., screening events) are very effective ways to provide health education and also to educate community members on the various programs available to help improve their health. Hospital staff focused heavily on these outreach efforts in 2018.

- a. Provide or sponsor at least four educational events/programs.

This effort was highly successful and the goal was exceeded. A total of 32 different events were held in 2018 (a minimum of five in a quarter). Hospital staff found potential community partners to be very receptive to hosting events. This tactic is expected to expand and broaden in 2019 and beyond.

- b. Increase in the number of participants screened each year.

Reflective of the increasing number of events, in 2018 a total of 642 community members obtained health screenings. This grew from 47 participants in Q1, to 185 in Q4. Screening types included blood pressure, glucose, cholesterol and bone density.



4) High death rates for heart disease, stroke & diabetes

Provide targeted programming to reduce the death rate for leading causes of death: Cancer, Heart Disease, Stroke, Diabetes

- a. Increase participation rates in the Diabetes and Lung Education Programs

These programs targeted patients with diabetes or lung disease, and were designed to increase patients' understanding of their conditions, what they can do to best self-manage their condition and improve their health status, and increase awareness of community-based support programs in the county which can buttress their efforts.

A total of 584 patients participated in these programs in 2018.

- b. Increase the number of those who completed the program who show significant health improvements.

The diabetes education program was the more successful one. In 2018, 25 diabetic patients persisted in their improved self-management and showed significant improvement in their health status, measured after the program was completed.

Specialty Hospital of Lorain

Specialty Hospital of Lorain Implementation Strategy: Impact Assessment

The Specialty Hospital of Lorain is a Long Term Acute Care Hospital. It resides within Amherst Hospital and has 28 beds. A Long Term Acute Care Hospital ("LTCH") is a specialty hospital that provides acute care services for patients who are medically complex, critically ill, and require an extended period of hospitalization.

Almost all of the Specialty Hospital of Lorain's patients are transferred from one of the two hospitals in Lorain County. The volume of patients transferred from those hospitals has been fairly stable over the past several years. The Specialty Hospital of Lorain is the only LTCH in Lorain County. It provides specialized care for patients who suffer from respiratory conditions, cardiac related disorders, trauma, wounds, cancer and other illnesses requiring acute, long-term care. Specific diagnoses for Specialty Hospital of Lorain patients include:

- Respiratory failure requiring ventilator management
- Cardiopulmonary or cardiovascular disease
- Respiratory disorders
- Post-surgical complications
- Wound care
- Infectious disease
- Neurological conditions
- Musculoskeletal disease
- Congestive heart failure
- Stroke or a cerebral vascular accident
- Multi-symptom disorders
- Nutrition therapy

The last assessment conducted by Specialty Hospital of Lorain, was the joint UH Elyria Medical Center-Specialty Hospital of Lorain plan which was adopted in September, 2018. The corresponding Implementation Strategy was adopted in March, 2019, while simultaneously conducting the 2019 collaborative CHNA with Lorain County Public Health. This one-year consecutive process is atypical, in that there is usually a three-year period between assessments. This was done to fulfill State of Ohio requirements to align hospitals and public health departments on the same three-year planning cycle by 2020. As such, the reporting period covers 2018 and the first two quarters of 2019.

Upon review of the 2018 Community Health Needs Assessment, hospital leadership for Specialty Hospital of Lorain isolated two top priority community health needs in alignment with the Lorain County Health Assessment:

1. Chronic Disease
2. Mental Health & Addiction

In the 2019 Community Health Implementation Strategy, Specialty Hospital of Lorain is working with UH Elyria Medical Center to create a hospital opiate coalition with mental health/substance abuse partners by 2020. This entails compiling comprehensive baseline data regarding the programs and services offered within Lorain county and addressing gaps in care coordination. The plan is to invite faith-based leaders, local businesses, community organizations, justice system liaisons, mental health/substance abuse service providers, health care providers, and other organizations for a roundtable discussion surrounding mental health and substance abuse in Lorain County.

Additionally, Specialty Hospital of Lorain continues to address chronic disease. Because of the specialized care provided by the hospital, the primary focus for chronic disease was on respiratory related disease and diabetes. Strategies and interventions in these two areas centered on community screening and education. Additionally, Specialty Hospital of Lorain partnered with referral sources and medical equipment companies to provide new and less invasive respiratory technology to treat end stage respiratory disease. As part of this initiative, Specialty Hospital of Lorain reached out to area nursing facilities to assist in continued provision and support of the less invasive care as well as continued support to chronic ventilator care in nursing facilities.

Access to care initiatives were related to care coordination post-acute care. Specialty Hospital of Lorain actively participated in the Post-Acute Collaborative at University Hospitals and Mercy Regional Health Center. As an active participant in the collaborative, Specialty Hospital of Lorain monitors quality indicators and return-to-acute care statistics. Clinical Liaisons and Case Managers have worked to establish systems and networks for ease of transition between the post-acute care providers to ensure that the patient receives the appropriate level of care at the appropriate time within the financial provisions.

Health Care Access: Health Care Coverage

Key Findings

In 2018, 10% of Lorain County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30 (26%).

General Health Coverage

- In 2018, 90% of Lorain County adults had health care coverage, leaving 10% who were uninsured.
- The following types of health care coverage were used: employer (48%); Medicare (20%); Medicaid or medical assistance (11%); someone else's employer (10%); self-paid plan (3%); multiple-including private sources (2%); Health Insurance Marketplace (2%); military, CHAMPUS, TriCare, or VA (1%); and other (3%).

22,494 of Lorain County adults were uninsured.

- Lorain County adult health care coverage included the following: medical (96%), prescription coverage (94%), immunizations (86%), preventive health (78%), outpatient therapy (75%), dental (70%), vision/eyeglasses (69%), mental health (65%), durable medical equipment (45%), alcohol and drug treatment (37%), home care (34%), skilled nursing/assisted living (34%), hospice (31%), and transportation (17%).
- Lorain County adults had the following issues regarding their health care coverage: cost (37%), opted out of certain coverage because they could not afford it (9%), could not understand their insurance plan (7%), working with their insurance company (6%), service not deemed medically necessary (6%), limited visits (5%), opted out of certain coverage because they did not need it (3%), provider no longer covered (3%), service no longer covered (3%), and pre-existing conditions (2%).
- The top five reasons uninsured adults gave for being without health care coverage were:
 - They could not afford to pay the insurance premiums (43%)
 - They lost their job or changed employers (40%)
 - Their employer does not/stopped offering coverage (15%)
 - They became ineligible (11%)
 - They became a part-time/temporary employee (10%)

Note: Percentages do not equal 100% because respondents could select more than one reason

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Uninsured	11%	11%	10%	9%	11%

Hospital Discharges for Patients without Medical Insurance, 2017*

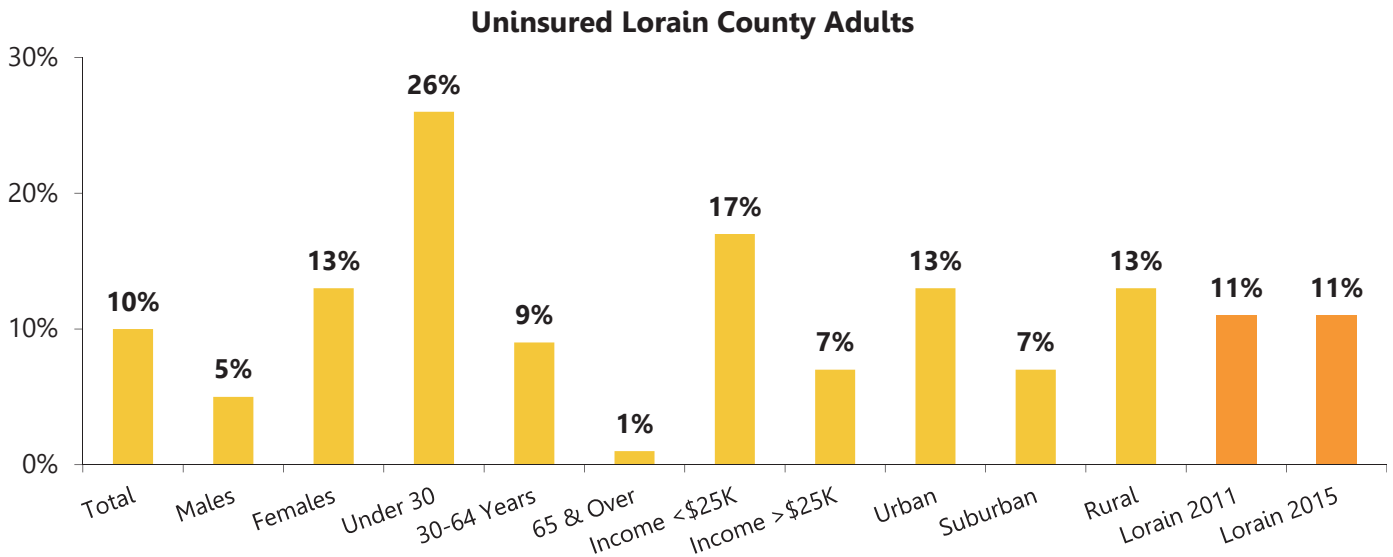
- Of the 41,451 acute care inpatient hospitalizations of Lorain County residents in 2017, 818, or 1.6% had no health insurance coverage. This differed by age group, in that almost all of those age 65 and older had coverage (all but .08%), but 3.3% of those aged 18-64 and 3.1% of those aged 17 and younger were "self-pay" or categorized as charity care. Note that proportionately, very few of these hospitalizations were categorized by their hospitals as charity care (.04%).

	Patients Age 0-17 Years	Patients Age 18-64 Years	Patients Age 65 Years and Older
Patients without Medical Insurance at Discharge	151 of 4,938 (3.1%)	654 of 19,610 (3.3%)	13 of 16,903 (.08%)

*Patients who were categorized as either 'self-pay' or 'charity care.'

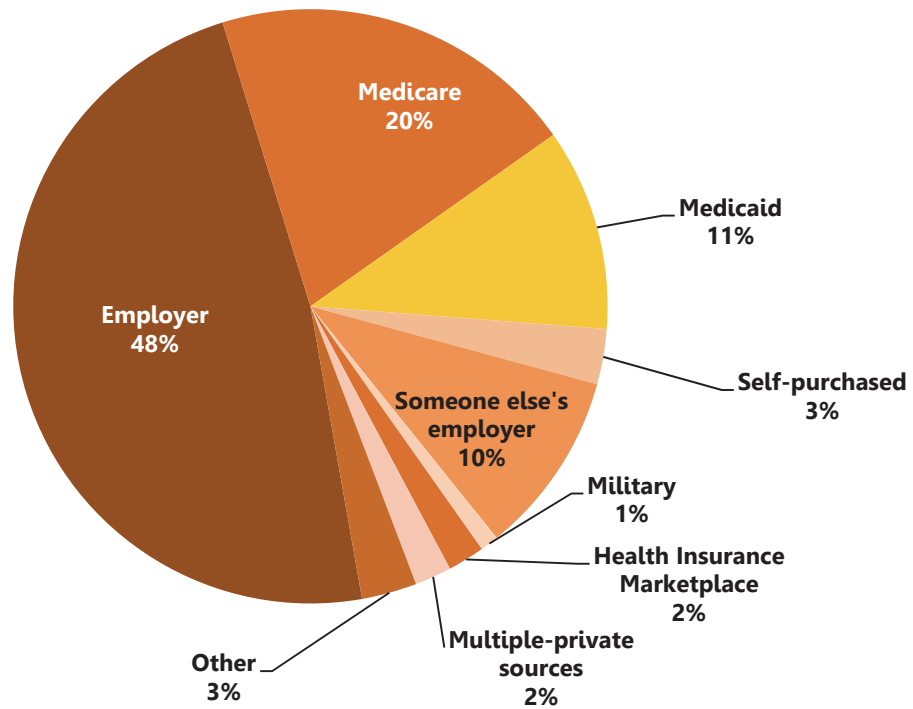
(Source: Hospital Discharge Data, 2017, as analyzed and reported by Cypress Research)

The following graph shows the percentages of Lorain County adults who were uninsured. Examples of how to interpret the information in the graph include: 10% of all Lorain County adults were uninsured, including 17% of those with incomes less than \$25,000 and 26% of those under age 30. The pie chart shows sources of Lorain County adults' health care coverage.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Source of Health Coverage for Lorain County Adults



The following chart shows what is included in Lorain County adults' insurance coverage.

Health Coverage Includes:	Yes	No	Don't Know
Medical	96%	1%	3%
Prescription Coverage	94%	3%	3%
Immunizations	86%	3%	11%
Preventive Health	78%	2%	20%
Outpatient Therapy	75%	3%	22%
Dental	70%	27%	3%
Vision/Eyeglasses	69%	26%	5%
Mental Health	65%	2%	33%
Durable Medical Equipment	45%	4%	51%
Alcohol and Drug Treatment	37%	5%	58%
Home Care	34%	7%	59%
Skilled Nursing/Assisted Living	34%	5%	61%
Hospice	31%	4%	65%
Transportation	17%	21%	62%

Healthy People 2020 Access to Health Services (AHS)

Objective	Lorain County 2018	Ohio 2017	U.S. 2016*	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health care insurance	80% age 20-24	87% age 18-24	85% age 18-24	100%
	79% age 25-34	90% age 25-34	84% age 25-34	
	89% age 35-44	90% age 35-44	87% age 35-44	
	94% age 45-54	91% age 45-54	90% age 45-54	
	91% age 55-64	93% age 55-64	93% age 55-64	

*U.S. baseline is age-adjusted to the 2000 population standard

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

(Sources: Healthy People 2020 Objectives, 2016 U.S. BRFSS, 2017 Ohio BRFSS, 2018 Lorain County Health Assessment)

Key Facts about the Uninsured Population

- Studies repeatedly demonstrate that the uninsured are less likely than those with insurance to receive preventive care and services for major health conditions and chronic diseases.
- Part of the reason for poor access among uninsured is that 50% do not have a regular place to go when they are sick or need medical advice.
- One-in-five (20%) nonelderly adults without coverage say that they went without care in the past year because of cost compared to 3% of adults with private coverage and 8% of adults with public coverage.
- In 2017, uninsured nonelderly adults were three or more times as likely as adults with private coverage to say that they postponed or did not get a needed prescription drug due to cost.
- Because people without health coverage are less likely than those with insurance to have regular outpatient care, they are more likely to be hospitalized for avoidable health problems and to experience declines in their overall health.

(Source: The Henry Kaiser Family Foundation, Key Facts about the Uninsured Population, December 2018)

Health Care Access: Access and Utilization

Key Findings

In 2018, 71% of Lorain County adults had visited a doctor for a routine checkup in the past year, increasing to 90% of those over the age of 65. Forty-two percent (42%) of adults went outside of Lorain County for health care services in the past year.

Health Care Access

- Seventy-one percent (71%) of Lorain County adults visited a doctor for a routine checkup in the past year, increasing to 90% of those over the age of 65.
- Half (50%) of Lorain County adults reported they had one person they thought of as their personal doctor or health care provider. Thirty-four percent (34%) of adults had more than one person they thought of as their personal health care provider, and 15% did not have one at all.
- Adults usually visited the following places for health care services or advice: doctor's office (62%); Internet (8%); urgent care center (7%); hospital emergency room (3%); in-store health clinic (2%); department of veterans affairs (VA) (1%); a public health clinic or community health clinic (1%); chiropractor (<1%); alternative therapies (<1%), and multiple places, including a doctor's office (11%). Three percent (3%) of adults indicated they had no usual place for health care services.
- Forty-two percent (42%) of adults went outside of Lorain County for the following health care services in the past year: specialty care (42%); primary care (42%); dental services (32%); female health services (21%); obstetrics/gynecology/NICU (14%); pediatric care (11%); dermatological care (10%); mental health care/counseling services (9%); cardiac care (8%); ear, nose, and throat care (7%); orthopedic care (5%); cancer care (5%); podiatry care (3%); hospice/palliative care (2%); pediatric therapies (1%); bariatric care (<1%); and other services (14%).
- Fourteen percent (14%) of adults needed to see a doctor in the past year but could not because of cost, increasing to 24% of those with incomes less than \$25,000.
- The following might prevent Lorain County adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (30%), difficult to get an appointment (12%), doctor would not take their insurance (11%), could not get time off work (8%), hours not convenient (7%), worried they might find something wrong (6%), frightened of the procedure or doctor (3%), difficult to find/no transportation (2%), do not trust or believe doctors (2%), no childcare (2%), discrimination (1%), and some other reason (5%).
- Lorain County adults preferred to obtain information about their health or health care services from the following:
 - Their doctor (90%)
 - Internet searches (38%)
 - A family member or friend (34%)
 - Medical portal (30%)
 - Newspaper articles or radio/television news stories (13%)
 - Advertisings or mailings from hospitals, clinics or doctor's offices (12%)
 - Text messages (8%)
 - Social media (4%)
 - Billboards (2%)

Availability of Services

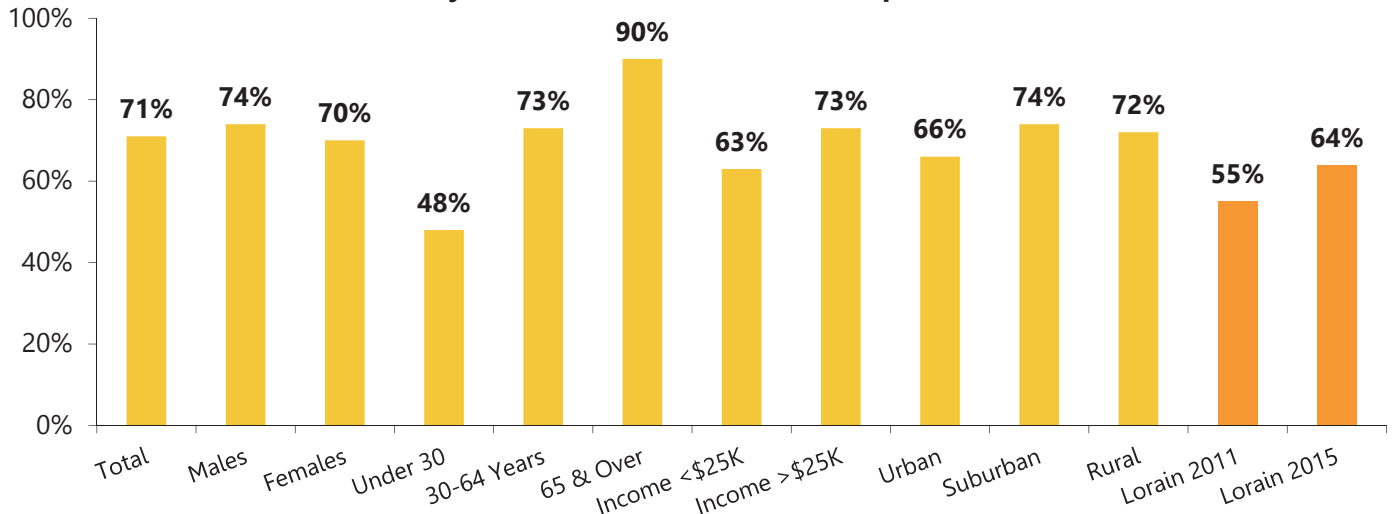
- More than one-fourth (27%) of adults did not get their prescriptions from their doctor filled in the past year. Of those who did not get their prescriptions filled, they gave the following reasons: too expensive (22%), they did not have insurance (14%), they did not think they needed it (12%), there was no generic equivalent (8%), side effects (5%), they stretched their current prescription by taking less than prescribed (4%), fear of addiction (2%), transportation (2%), and they were taking too many medications (2%). Fifty-five percent (55%) of adults had no prescriptions to be filled.
- Lorain County adults reported they had looked for the following programs for themselves or a loved one: depression, anxiety or mental health (25%); weight problems (14%); disability (10%); family planning (6%); marital/family problems (5%); smoking cessation (4%); alcohol abuse (4%); drug abuse (3%); detoxification for opiates/heroin (2%); gambling abuse (2%); and cancer support group/counseling (1%).

Lorain County Adults Able to Access Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Lorain County adults who have looked but have <u>NOT</u> found a specific program	Lorain County adults who have looked and have found a specific program
Depression or Anxiety (25% of all adults looked)	23%	77%
Weight Problems (14% of all adults looked)	38%	62%
Disability (10% of all adults looked)	22%	78%
Family Planning (6% of all adults looked)	3%	97%
Marital/Family Problems (5% of all adults looked)	20%	80%
Tobacco Cessation (4% of all adults looked)	46%	54%
Alcohol Abuse (4% of all adults looked)	55%	45%
Drug Abuse (3% of all adults looked)	59%	41%
Detoxification for Opiates/Heroin (2% of all adults looked)	69%	31%
Gambling Abuse (2% of all adults looked)	75%	25%
Cancer Support Group/Counseling (1% of all adults looked)	29%	71%

The following graph shows the percentage of Lorain County adults who had a routine check-up in the past year. Examples of how to interpret the information include: 71% of all Lorain County adults had a routine check-up in the past year, including 90% of those 65 years and older and 63% of those with incomes less than \$25,000.

Lorain County Adults with a Routine Checkup in the Past Year



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

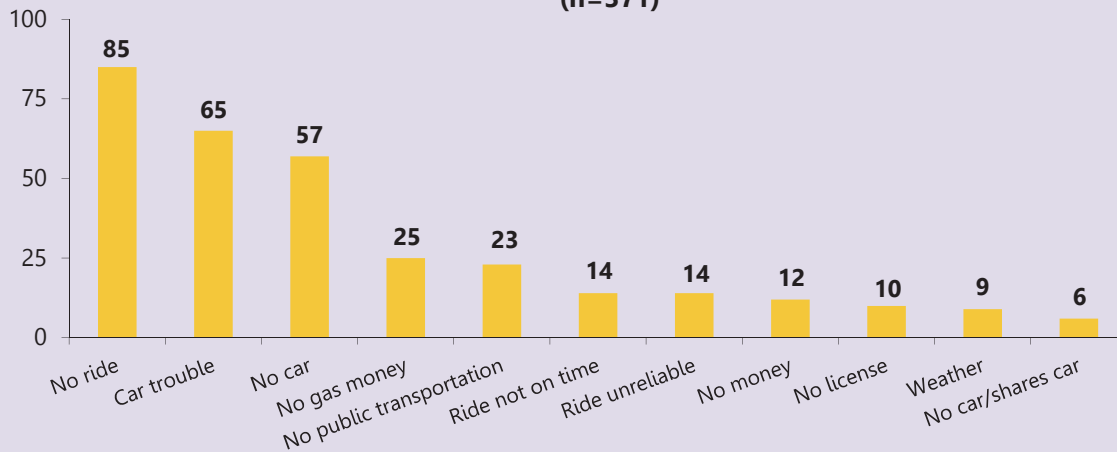
Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Visited the doctor's office when needed health care services or advice	75%	80%	73%	N/A	N/A
Had one or more person they thought of as their personal doctor or health care provider	83%	81%	84%	81%	77%
Visited a doctor for a routine checkup (in the past 12 months)	55%	64%	71%	72%	70%
Visited a doctor for a routine checkup (5 or more years ago)	12%	10%	7%	7%	8%
Did not see a doctor in the past year due to cost	20%	18%	14%	11%	13%

N/A- Not Available

Lorain County Patient Transportation Barriers

- **Patients with transportation issues:**
 - Carry a disproportionate amount of the health care burden
 - Have more missed or delayed medical appointments
 - Have increased use of emergency services
 - Are less likely to use preventive or primary care
 - Are more likely to have multiple health conditions
- **Disparities in patient transportation existed for individuals who:**
 - Were Hispanic/Latino
 - Had less than high school education
 - Did not have a driver's license
 - Were on Medicare
 - Were uninsured
- **Recommendations:**
 - Provide more awareness about transportation options to patients
 - Provide more useful materials to health care providers to give to patients
 - Health care providers scheduling being more proactive in asking if transportation will be an issue

Lorain County Top Transportation Issues
(n=371)



(Source: Lorain County Transportation Barriers Assessment, 2015)

Trend of Hospital Discharges for Lorain County Residents, 2011- 2017

- The number of inpatient hospitalizations (acute care) for Lorain County residents (within any Ohio hospital) increased by 2.2% from 2016 to 2017.

2011	2012	2013	2016	2017
47,938	45,680	45,056	40,553	41,451

(Source: Hospital Discharge Data, 2017, as analyzed and reported by Cypress Research)

Number of Hospital Discharges for Lorain County Residents, by Age Group and Gender, 2017

- In 2017, there were 41,451 hospitalizations of Lorain County residents. Relatively few (11.9%) of those were under age 18 (and of those, 7.5% were newborns). The adult admissions were almost evenly split between adults aged 17-64 (47.3%, but 7.9% were due to childbirth) and adults aged 65 and older (40.8%).

	Patients Age 0-17 Years		Patients Age 18-64 Years		Patients Age 65 Years and Older	
	Male	Female	Male	Female	Male	Female
	11.9% of Total Discharges		47.3% of Total Discharges		40.8% % of Total Discharges	
2017 Total	2,536	2,402	8,499	11,111	7,839	9,064

(Source: Hospital Discharge Data, 2017, as analyzed and reported by Cypress Research)

Hospital Discharge Data for Youth 0-17 Years of Age, 2017

- The data have been separated into three age groups (0-17 years; 18-64 years; and 65 or more years) and by gender. This is how the federal government typically reports discharge data.
- There were 740 hospitalizations of Lorain County aged 0-17 year (including newborns). The table below indicates that the three most frequent discharge conditions for hospitalized newborns, children and youth were: diseases of the respiratory system (mostly asthma) (7.3%); and diseases of the digestive system (4.2%) and conditions originating in the perinatal period (3.5%).

Disease Grouping	ICD-10 Codes	Total	Males	Females
Total		4,938 (100%)	2,536 (51.4%)	2,402 (48.6.0%)
Diseases of the respiratory system	J00-J98	361 (7.3%)	199 (7.8%)	162 (6.7%)
Diseases of the digestive system	K00-K92	205 (4.2%)	133 (5.2%)	72 (3.0%)
Certain conditions originating in the perinatal period	P00-P96	174 (3.5%)	107 (4.2%)	67 (2.8%)
Mental and behavioral disorders	F01-F99	142 (2.9%)	54 (2.1%)	88 (3.7%)
Diseases of the nervous system and sense organs	G00-G98	130 (2.6%)	64 (2.5%)	66 (2.7%)
Endocrine, nutritional and metabolic diseases	E00-E88	122 (2.5%)	65 (2.6%)	57 (2.4%)
Congenital malformations, deformations and chromosomal abnormalities	Q00-Q99	78 (1.6%)	46 (1.8%)	32 (1.3%)
Infectious and parasitic diseases	A00-B99	64 (1.3%)	33 (1.3%)	31 (1.3%)
Diseases of the genitourinary system	N00-N98	54 (1.1%)	19 (0.7%)	35 (1.5%)

(Source: Hospital Discharge Data, 2017, as analyzed and reported by Cypress Research)

* Fewer than 5 cases were not reported to protect privacy

Hospital Discharge Data for Adults 18-64 Years of Age, 2017

- There were 19,610 Lorain County residents 18-64 years old who were discharged from an acute care facility in 2017.
- The table for adults 18-64 years of age indicates that the three most frequent discharge conditions were: complications related to pregnancy, childbirth, and the puerperium (29.0% of females); mental and behavioral disorders (13.6%), and diseases of the circulatory system (11.8%).

Disease Grouping	ICD-10 Codes	Total	Males	Females
Total		19,610 (100%)	8,499 (43.3%)	11,111 (56.7%)
Complications of pregnancy, childbirth, and the puerperium	O00-O99	3,218 (16.4%)	0 (0.0%)	3,218 (29.0%)
Mental and behavioral disorders	F01-F99	2,669 (13.6%)	1,493 (17.6%)	1,176 (10.6%)
Diseases of the circulatory system	I00-I99	2,305 (11.8%)	1,430 (16.8%)	875 (7.9%)
Diseases of the digestive system	K00-K92	1,943 (9.9%)	960 (11.3%)	983 (8.8%)
Diseases of the respiratory system	J00-J98	1,477 (7.5%)	686 (8.1%)	791 (7.1%)
Diseases of the nervous system and sense organs	G00-G98	533 (2.7%)	242 (2.8%)	291 (2.6%)
Injury and poisoning	S00-T34	1,338 (6.8%)	773 (9.1%)	565 (5.1%)
Diseases of the musculoskeletal system and connective tissue	M00-M99	1,319 (6.7%)	645 (7.6%)	674 (6.1%)
Infectious and parasitic diseases	A00-B99	1,053 (5.4%)	503 (5.9%)	550 (5.0%)
Endocrine, nutritional and metabolic diseases	E00-E88	928 (4.7%)	401 (4.7%)	527 (4.7%)
Diseases of the genitourinary system	N00-N98	702 (3.6%)	288 (3.4%)	414 (3.7%)
Cancers (neoplasms)	C00-D48	627 (3.2%)	313 (3.7%)	314 (2.8%)
Diseases of the skin and subcutaneous tissue	L00-L98	541 (2.8%)	312 (3.7%)	229 (2.1%)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50-D89	237 (1.2%)	108 (1.3%)	129 (1.2%)

** Fewer than 5 cases were not reported to protect privacy.*

(Source: Hospital Discharge Data, 2017, as analyzed and reported by Cypress Research)

Hospital Discharge Data for Adults 65 Years of Age and Older, 2017

- There were 16,903 Lorain County residents 65 years of age and older who were discharged from an acute care facility in 2017.
- For adults 65 years of age and older we see (below) that the three most frequent discharge conditions were: diseases of circulatory system (25.8%), diseases of the respiratory system (12.8%), and diseases of the digestive system (9.7%).
- There were not large differences between males and females on most diagnostic categories frequency. The exceptions were that males were notably more likely than females to have a primary diagnosis for circulatory disease (28.5% vs. 23.5%). In contrast, females were more likely to have a disease of the musculoskeletal system or connective tissues (9.9% for females vs. 7.5% for males).

Disease Grouping	ICD-10 Codes	Total	Males	Females
Total		16,903 (100%)	7,839 (46.3%)	9,064 (53.6%)
Diseases of the circulatory system	I00-I99	4,362 (25.8%)	2,235 (28.5%)	2,127 (23.5%)
Diseases of the respiratory system	J00-J98	2,160 (12.8%)	1,020 (13.0%)	1,140 (12.6%)
Diseases of the digestive system	K00-K92	1,640 (9.7%)	706 (9.0%)	934 (10.3%)
Diseases of the musculoskeletal system and connective tissue	M00-M99	1,490 (8.8%)	591 (7.5%)	899 (9.9%)
Injury and poisoning	S00-T34	1,482 (8.8%)	653 (8.3%)	829 (9.1%)
Infectious and parasitic diseases	A00-B99	1,399 (8.3%)	636 (8.1%)	763 (8.4%)
Diseases of the genitourinary system	N00-N98	1,131 (6.7%)	496 (6.3%)	635 (7.0%)
Cancers (neoplasms)	C00-D48	708 (4.2%)	389 (5%)	319 (3.5%)
Diseases of the nervous system and sense organs	G00-G98	470 (2.8%)	205 (2.6%)	265 (2.9%)
Endocrine, nutritional and metabolic diseases	E00-E88	541 (3.2%)	238 (3.0%)	303 (3.3%)
Diseases of the nervous system and sense organs	T36-T50	470 (2.8%)	205 (2.6%)	265 (2.9%)
Mental and behavioral disorders	R00-R99	207 (1.2%)	90 (1.1%)	117 (1.3%)
Diseases of the skin and subcutaneous tissue	L00-L98	337 (2.0%)	150 (1.9%)	187 (2.1%)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50-D89	251 (1.5%)	112 (1.4%)	139 (1.5%)

(Source: Hospital Discharge Data, 2017, as analyzed and reported by Cypress Research)

**Ambulatory Care Sensitive (ACS) Discharges (Primary Diagnosis), Lorain County Residents
(Hospitalized Anywhere), 2017
and Lorain County Residents Hospitalized in UH Elyria Medical Center, 2017**

- **Ambulatory Care Sensitive (ACS)** conditions are those for which hospital admission could often be prevented by interventions in primary care. A relatively large proportion of ACSs within a geographic area is a signal that the primary care/prevention system has room for improvement, in particular a shortage of primary care providers.
- In 2017, there were 41,451 Lorain County residents who were discharged from an inpatient acute care hospital. Of those, 9,467 (22.8% of all Lorain County resident hospitalizations) were hospitalized in UH Elyria Medical Center.
- Below we show the frequency of ACS cases for both all Lorain County resident hospitalizations and also Lorain County residents who were hospitalized at UH Elyria Medical Center.
- Overall, 16.4% of the hospitalizations of Lorain County residents were due to an ACS condition. If we look at those hospitalized in UH Elyria Medical Center, we see significantly more (21.2%) ACS cases. We see this commonly as those who have an ACS condition can usually be treated at a community hospital, while those with more serious or life threatening conditions (usually are not ACS conditions) are treated at a higher level regional medical center.
- The most common ACS condition among hospitalized Lorain County residents in 2017 was Chronic Obstructive Pulmonary Disease, which comprised 4.0% of all Lorain County residents hospitalized, and 1.7% of UH Elyria Medical Center inpatients. The second and third most common ACS conditions were Bacterial Pneumonia and Congestive Heart Failure (1.7% each of county residents).
- In 2017, a significant proportion (7.1%) of all UH Elyria Medical Center inpatient admissions who were Lorain County residents were hospitalized due to COPD, a condition considered to be one where hospitalization can often be prevented with routine primary care.

	Inpatient in Any Hospital: Lorain County Resident		Inpatient in UH Elyria Medical Center	
	Number	Percent*	Number	Percent*
Total	41,451	100.0%	9,467	100.0%
Total ACS Cases	6,808	16.4%	2,005	21.2%
<i>Specific Ambulatory Care Sensitive Conditions:</i>				
Chronic Obstructive Pulmonary Disease	1,646	4.0%	670	7.1%
Bacterial Pneumonia	719	1.7%	254	2.7%
Congestive Heart Failure	716	1.7%	231	2.4%
Cellulitis	653	1.6%	165	1.7%
Diabetes	578	1.4%	153	1.6%
Hypertension	525	1.3%	152	1.6%
Hip/Femur Fracture (age 45 and older)	388	0.9%	112	1.2%
Grand Mal Seizure and Other Convulsions	332	0.8%	33	0.3%
Dehydration	305	0.7%	32	0.3%
Asthma	193	0.5%	31	0.3%
Myocardial Infarction	193	0.5%	68	0.7%
Gastroenteritis	115	0.3%	38	0.4%
Convulsions/epilepsy (age 6 and older)	98	0.2%	12	0.1%
Kidney/Urinary Tract Infection	70	0.2%	22	0.2%
Anemia	53	0.1%	11	0.1%

Dental Conditions	32	0.1%	9	0.1%
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Fewer than 5 cases were omitted to ensure confidentiality.

(Source: Hospital Ambulatory Care Sensitive Data, 2016, as analyzed and reported by Cypress Research)

**More than one ACS conditions is possible for any single admission; Total may be more than 100%*

**Ambulatory Care Sensitive (ACS) Discharges (Primary Diagnosis), Lorain County Residents
(Hospitalized Anywhere), 2017
and Lorain County Residents Hospitalized in UH Elyria Medical Center, 2017 (continued...)**

	Inpatient in Any Hospital: Lorain County Resident		Inpatient in UH Elyria Medical Center	
	Number	Percent*	Number	Percent*
Total	41,451	100.0%	9,467	100.0%
Total ACS Cases	6,808	16.4%	2,005	21.2%
<i>Specific Ambulatory Care Sensitive Conditions:</i>				
Angina	22	0.1%	6	0.1%
Severe Ear, Nose and Throat Infections	18	0.04%	6	0.1%
Nutritional Deficiencies	16	0.03%		
Convulsions/epilepsy (age 5 and younger)	11	0.01%		
Failure To Thrive (Infants Only)	8	0.01%		
Hypoglycemia	6	<0.01%		

Fewer than 5 cases were omitted to ensure confidentiality.

(Source: Hospital Ambulatory Care Sensitive Data, 2016, as analyzed and reported by Cypress Research)

**More than one ACS conditions is possible for any single admission; Total may be more than 100%*

Most Common* Ambulatory Care Sensitive (ACS) Discharges (Primary Diagnosis), 2017
All Lorain County Residents (Hospitalized Anywhere),
By Major Age Group (Adults Only, Age 18+)
 *(Minimum of 1% of cases shown)

- The incidence of ACS cases among Lorain County residents in 2017 increased with age. Only 7.8% of those hospitalized adults under age 40 had an ACS condition, less than one-half that of those aged 40-64 (17.8%). About one in five seniors (20.9%) were hospitalized due to an ACS condition in 2017.
- The most common ACS condition (primary diagnosis) associated with hospitalization for younger adult (under 40 years) Lorain County residents in 2017 were bacterial pneumonia (1.9%), cellulitis (1.8%) and diabetes (1.6%).
- Middle-aged adults (age 40-64) showed a somewhat different pattern of ACS conditions. The most common condition, by far, was chronic obstructive pulmonary disease (COPD) (9.2%).
- For the oldest hospitalized group (age 65+), the most common ACS conditions were COPD (8.6%), congestive heart failure (4.0%), and bacterial pneumonia (3.3%).

	Adult Under 40	Adults Ages 40-64	Adults Age 65+
Total:	1,414 (100.0%)	2,937 (100.0%)	4,508 (100.0%)
Any ACS Condition:	(7.8%)	(17.8%)	(20.9%)
<i>Specific Ambulatory Care Sensitive Conditions:</i>			
Chronic Obstructive Pulmonary Disease	10 (.7%)	271 (9.2%)	389 (8.6%)
Congestive Heart Failure	3 (.2%)	48 (1.6%)	180 (4.0%)
Bacterial Pneumonia	27 (1.9%)	77 (2.6%)	150 (3.3%)
Cellulitis	26 (1.8%)	61 (2.1%)	78 (1.7%)
Diabetes	23 (1.6%)	22 (.7%)	45 (1.0%)
Hypertension	26 (1.8%)	61 (2.1%)	78 (1.7%)
Acute Myocardial Infarction	1 (.1%)	22 (.7%)	45 (1.0%)
Hip/Femur Fracture (age 45 and older)	-	17 (.6%)	95 (2.1%)
Asthma	14 (1.0%)	48 (1.6%)	9 (.2%)

**Only those ACS conditions associated with at least 1% of the group are shown.
 (Source: Hospital Ambulatory Care Sensitive Data, 2017, as analyzed and reported by Cypress Research)*

Lorain County Residents, Primary & Secondary Diagnoses, 2017 Hospitalizations

Below are the diagnosis specifics for the 29,237 hospitalizations of Lorain County adults aged 40+ in 2017, regardless of where they were hospitalized (in or out of the county). Both the diagnostic category, and the most common specific diagnoses are shown. Information for both primary diagnosis and for secondary diagnoses is shown; while the primary diagnosis is related to the primary reason for hospitalizations, understanding the incidence of various diagnoses which are secondary is often more telling of the chronic health conditions facing the community in general.

Some noteworthy findings for Lorain County:

- As highlighted previously, the most common diagnostic categories for the primary diagnoses were **diseases of the circulatory system** (22.1% of all hospitalizations), **diseases of the digestive system** (10.7%), and **diseases of the respiratory system** (11.7%) and. These three general categories comprise nearly half hospitalizations for Lorain County residents in 2017.
- Within each of those major diagnostic categories, we see several specific conditions which are found are far more commonly than others among Lorain county residents hospitalized in 2017:

Diseases of the Circulatory System:

- Hypertensive heart and/or kidney disease was the primary reason for hospitalization for 4.8% of inpatient acute care admissions in 2017. Significantly more (27.5%) of those hospitalized has a secondary diagnosis of hypertensive heart or kidney disease.
- Myocardial Infarction (2.9%), Atrial Fibrillation (3.0%) and Cerebral infarction (stroke) (2.2%) were the other most common primary diagnoses.
- The secondary diagnoses of patients were very telling; these comorbidities, all associated with circulatory disease, were very common among all hospitalizations: essential hypertension (45.0%); atherosclerotic heart disease of the native coronary artery (33.5%); and, congestive heart failure (23.7%).

Diseases of the Respiratory System:

- Chronic obstructive pulmonary disease (COPD) (5.5%), pneumonia (viral and/or bacterial) (.2%), and respiratory failure (1.5%) and were the most common primary respiratory system diagnoses.
- However, COPD (32.2%), respiratory failure (16.1%), and pneumonia (10.6%) were very common secondary diagnoses among those hospitalized in 2017. Over half of the acute care inpatients had one or more of these comorbidities.

Diseases of the Digestive System:

- Specific conditions related to the digestive system which were primary diagnoses were very diverse, with diverticulitis being the most common, but only associated with 1.3% of the primary reasons for hospitalizations.
- Gastro-esophageal reflux disease was extremely common among the hospitalized adults in 2017 (26.8%).
- The other notable diagnoses (primary or secondary) are below. It is important to keep in mind that these are not necessarily a reflection of the true incidence of these afflictions within the general population; rather, they should be informative only in terms of how they relate to hospitalization levels and/or the care patients need while inpatients in acute care hospitals.
 - Osteoarthritis (21.3%, primary or secondary diagnosis)
 - One-in-five hospitalized adults had acute kidney failure as a secondary diagnosis (19.3%). Another 23.4% had chronic kidney disease.
 - One in four of these hospitalized adults had Type II Diabetes. Over half (51.6%) had hyperlipidemia.
 - Fourteen percent (14.0%) suffered from sleep apnea, and 9.7% reported living with chronic pain.
 - Sepsis (11.2%, primary or secondary diagnosis)

Lorain County Residents, Primary & Secondary Diagnoses, 2017 Hospitalizations, Continued...

- While mental/behavior related issues were only a primary diagnosis in one in twenty admissions, they were very commonly a secondary diagnosis: nicotine dependence (21.1%), anxiety disorder (13.2%), and major depressive order episode (16.7%) were the most common secondary diagnoses. These total to over one-half of inpatients in acute care settings.
- While cancer is a leading cause of death in Lorain County, it is not a common reason for hospitalization (4.2% primary diagnosis for 2016 inpatients). Cancer is generally treated primary on an out-patient basis.

Lorain County Residents, Primary & Secondary Diagnoses, 2017 Hospitalizations Adults, Aged 40+

	Primary Diagnosis (Reason for Hospitalization)		Secondary Diagnosis (Patients can have multiple secondary diagnoses)	
Total Lorain County Adult (Age 40+) Inpatients	29,237			
Diseases of the circulatory system	6,450	22.1%	N/A	N/A
Hypertensive heart disease /or hypertensive kidney disease	1,390	4.8%	8,033	27.5%
Atrial fibrillation or flutter	867	3.0%	7,799	26.7%
Myocardial Infarction	860	2.9%	1,328	4.5%
Cerebral infarction	637	2.2%	581	2.0%
Atherosclerotic heart disease of native coronary	419	1.4%	9,806	33.5%
Heart failure	292	1.0%	6,940	23.7%
Pulmonary embolism	237	0.8%	347	1.2%
Nonrheumatic valve insufficiency/prolapse/stenosis	132	0.5%	1,890	6.5%
Hypertensive urgency/emergency	116	0.4%	496	1.7%
Sick sinus syndrome	90	0.3%	356	1.2%
Essential (primary) hypertension			13,160	45.0%
Old myocardial infarction			2,954	10.1%
Hypotension			2,850	9.8%
Cardiac block (any location); conduction disorders			1,748	6.0%
Peripheral vascular disease (general)			1,684	5.8%
Primary and secondary pulmonary hypertension			1,551	5.3%
Cardiomyopathy			1,390	4.8%
Ischemic cardiomyopathy			1,315	4.5%
Tachycardia			1,128	3.9%
Rheumatic valve disease			1,100	3.8%
Chronic or acute Embolism & thrombosis, veins			1,001	3.4%
Occlusion and stenosis of peripheral artery			930	3.2%
Hemi/para/quadrilegia after cerebral infarction			833	2.8%
Non-cerebral aneurysm			549	1.9%
Venous insufficiency (chronic/peripheral)			469	1.6%
Atherosclerosis of aorta			414	1.4%
Diseases of the respiratory system	3,410	11.7%	N/A	N/A
Chronic obstructive pulmonary disease	1598	5.5%	9426	32.2%
Non-Bacterial (or unknown agent) Pneumonia	527	1.8%	2568	8.8%
Bacterial Pneumonia	117	0.4%	535	1.8%
Acute or chronic respiratory failure	456	1.5%	4692	16.1%
Pneumonitis due to inhalation of food & vomit	219	0.7%	701	2.4%
Asthma			2358	8.1%
Atelectasis			1014	3.5%
Acute bronchitis			860	2.9%
Pleural effusion, not elsewhere classified			665	2.3%

N/A – Multiple diagnoses possible; proportion is not applicable.
(Source: annual Hospital Discharge Data Analysis, 2017, as analyzed and reported by Cypress Research)

**Lorain County Residents, Primary & Secondary Diagnoses, 2017 Hospitalizations
Adults, Aged 40+**

	Primary Diagnosis (Reason for Hospitalization)		Secondary Diagnosis (Patients can have multiple secondary diagnoses)	
Total Lorain County Adult (Age 40+) Inpatients	29,237			
Diseases of the digestive system	3,129	10.7%	N/A	N/A
Diverticulitis of intestine	394	1.3%	1037	3.5%
Gastrointestinal hemorrhage	262	0.9%	783	2.7%
Intestinal obstruction	219	0.7%	460	1.6%
Acute pancreatitis	128	0.4%		
Alcoholic cirrhosis/other disease of liver	81	0.3%	527	1.8%
Gastro-esophageal reflux disease			7834	26.8%
Diaphragmatic hernia			801	2.7%
Gastroenteritis and colitis			593	2.0%
Gastritis			489	1.7%
Cirrhosis of the liver			488	1.7%
Irritable bowel syndrome			426	1.5%
Acute & subacute hepatic failure			373	1.3%
Gastroparesis			342	1.2%
Diseases of the musculoskeletal system and connective tissue	463	8.3%	N/A	N/A
Primary osteoarthritis	598	2.0%	5,765	19.7%
Spinal stenosis	295	1.0%	964	3.3%
Grout			1,335	4.6%
Age-related osteoporosis			1,190	4.1%
Dorsalgia			1,073	3.7%
Rheumatoid arthritis			916	3.1%
Fibromyalgia			836	2.9%
Polyosteoarthritis			587	2.0%
Injury & poisoning	408	7.3%	N/A	N/A
Infectious and parasitic diseases	620	6.9%	N/A	N/A
Sepsis (streptococcus, group B; streptococcus pneumoniae; Methicillin susceptible or resistant Staphylococcus aureus, other Staphylococcus; Hemophilus influenzae; anaerobes; E. coli; pseudomonas; Enterococcus; but mostly unspecified organisms)	1912	6.5%	1375	4.71%
Enterocolitis due to Clostridium difficile	138	0.5%		
Streptococcus, group A or B, as the cause of diseases classified elsewhere			822	2.8%
Escherichia coli [E. coli] as the cause of diseases classified elsewhere			679	2.3%
Hepatitis (A, B, C or unspecified)			527	1.8%
Candidiasis (various)			472	1.6%
Klebsiella pneumoniae [K. pneumoniae] as the cause of diseases classified elsewhere			294	1.0%
Enterococcus as the cause of diseases classified elsewhere			279	1.0%
Tinea			252	1.0%

*N/A – Multiple diagnoses possible; proportion is not applicable.
(Source: annual Hospital Discharge Data Analysis, 2017, as analyzed and reported by Cypress Research)*

**Lorain County Residents, Primary & Secondary Diagnoses, 2017 Hospitalizations
Adults, Aged 40+**

	Primary Diagnosis (Reason for Hospitalization)		Secondary Diagnosis (Patients can have multiple secondary diagnoses)	
Diseases of the genitourinary system	1,664	5.7%	N/A	N/A
Acute kidney failure	731	2.5%	5649	19.3%
Urinary tract infection	391	1.3%	3211	11.0%
Chronic kidney disease			6846	23.4%
Benign prostatic hyperplasia			2423	8.3%
Mental and behavioral disorders	1,512	5.2%	N/A	N/A
Major Depressive Disorder	377	1.3%	4876	16.7%
Bipolar Disorder	297	1.0%	823	2.8%
Alcohol abuse/dependence	277	0.9%	2344	8.0%
Schizoaffective Disorder	207	0.7%	193	0.7%
Schizophrenia	137	0.5%	317	1.1%
Nicotine dependence			6125	21.0%
Anxiety disorder			3853	13.2%
Generalized anxiety disorder			1028	3.5%
Adjustment disorder			590	2.0%
Post-traumatic stress disorder			386	1.3%
Cannabis abuse/dependence			518	1.8%
Opioid abuse/dependence			466	1.6%
Cocaine abuse/dependence			438	1.5%
Unspecified dementia			1380	4.7%
Dementia in other diseases classified elsewhere			702	2.4%
Cancers (malignant neoplasms)	1,238	4.2%	N/A	N/A
Neoplasm of bronchus or lung	169	0.6%	467	1.6%
Secondary malignant neoplasm of lung			264	0.9%
Secondary malignant neoplasm of liver & intrahepatic bile duct			399	1.4%
Secondary malignant neoplasm of bone			367	1.3%
Leukemia (ALL or AML)			260	0.9%
Secondary malignant neoplasm of brain			150	0.5%
Endocrine, nutritional and metabolic diseases	167	3.0%	N/A	N/A
Type I diabetes mellitus	103	0.4%		
Type II diabetes	486	1.7%	7,800	26.7%
Obesity	102	0.3%	5,921	20.3%
Dehydration	115	0.4%	3,222	11.0%
Hypo-osmolality & hyponatremia	154	0.5%	616	2.1%
Hyperlipidemia			15,070	51.6%
Hypokalemia			3,934	13.5%
Hypo-osmolality & hyponatremia			3,333	11.4%
Protein-calorie malnutrition (mild to severe)			2,692	9.2%
Acidosis			2,213	7.6%
Hyperkalemia			1,722	5.9%
Pure hypercholesterolemia			1,561	5.3%
Vitamin D deficiency			1,430	4.9%
Hypomagnesemia			1,267	4.3%
Disorders of phosphorus metabolism			610	2.1%
Fluid overload, unspecified			583	2.0%
Hypovolemia			474	1.6%
Deficiency B group vitamins			424	1.5%
Hypocalcemia			411	1.4%

*N/A – Multiple diagnoses possible; proportion is not applicable.
(Source: annual Hospital Discharge Data Analysis, 2017, as analyzed and reported by Cypress Research)*

**Lorain County Residents, Primary & Secondary Diagnoses, 2017 Hospitalizations
Adults, Aged 40+**

	Primary Diagnosis (Reason for Hospitalization)		Secondary Diagnosis (Patients can have multiple secondary diagnoses)	
Diseases of the nervous system and sense organs	856	2.9%	N/A	N/A
Epilepsy	166	0.6%	821	2.8%
Transient Cerebral Ischemic Attacks & related syndromes	155	0.5%	193	0.7%
Sleep apnea			4,095	14.0%
Chronic pain			2,842	9.7%
Metabolic encephalopathy			1,290	4.4%
Insomnia			962	3.3%
Polyneuropathy			909	3.1%
Encephalopathy, unspecified			756	2.6%
Hemiplegia/paraplegia/quadruplegia			651	2.2%
Migraine			572	2.0%
Parkinson's disease			537	1.8%
Restless legs syndrome			525	1.8%
Alzheimer's Disease			493	1.7%
Diseases of the skin and subcutaneous tissue	710	2.4%	N/A	N/A
Cellulitis	461	1.6%	1972	6.7%
Pressure ulcer of sacral region			569	1.9%
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	391	1.3%	N/A	N/A
Anemia	238	0.8%	5182	17.7%
Thrombocytopenia			1822	6.2%
Elevated white blood cell count			1403	4.8%
Pancytopenia			503	1.70%
Coagulation defect			271	0.9%
Pregnancy, childbirth & and puerperium	66	.2%	N/A	N/A
Diseases of the ear and mastoid process	41	.1%		
Hearing loss			718	2.5%
Diseases of the eye	30	.1%	N/A	N/A
Unspecified macular degeneration			272	0.9%
Glaucoma			465	1.6%
Congenital malformations, deformations and chromosomal abnormalities	25	.1%	N/A	N/A

*N/A – Multiple diagnoses possible; proportion is not applicable.
(Source: annual Hospital Discharge Data Analysis, 2017, as analyzed and reported by Cypress Research)*

Health Care Access: Preventive Medicine

Key Findings

More than three-fourths (76%) of adults ages 65 and over have had a pneumonia vaccination at some time in their life. Twenty-four percent (24%) of adults had a preventive screening for colorectal cancer in the past 2 years.

Preventive Medicine

- More than half (58%) of Lorain County adults had a flu vaccine during the past 12 months.
- Eighty percent (80%) of Lorain County adults ages 65 and over had a flu vaccine in the past 12 months.
- Over one-third (35%) of adults had a pneumonia shot in their life, increasing to 76% of those ages 65 and over.

179,948 adults had a flu vaccine during the past year.

- Lorain County adults have had the following vaccines: MMR in their lifetime (71%), tetanus booster (including Tdap) in the past 10 years (64%), chicken pox in their lifetime (49%), hepatitis B vaccine in their lifetime (37%), hepatitis A vaccine in their lifetime (30%), Zoster (shingles) vaccine in their lifetime (22%), pertussis vaccine in the past 10 years (20%), and human papillomavirus vaccine in their lifetime (12%).
- Lorain County adults indicated a doctor or health professional talked to them about following topics: immunizations (44%); weight control (diet, physical activity) (43%); family history (38%); safe use of prescription medication (27%); depression, anxiety or emotional problems (27%); tobacco use (16%); falls (15%); bone density (14%); injury prevention such as safety belt use, helmet use, or smoke detectors (14%); alcohol use (12%); safe use of opiate-based pain medication (11%); family planning (11%); sexually transmitted diseases (STDs) (10%); self-testicular exams (7%); illicit drug abuse (6%); domestic violence (4%); substance abuse treatment options (3%); and firearm safety (2%).

Preventive Health Screenings and Exams

- Lorain County adults had the following preventive screenings or exams in the past 2 years: vision (72%), breast cancer (33%), hearing (25%), colorectal cancer (24%), skin cancer (20%), prostate cancer (19%), osteoporosis (9%), and memory screening (5%).
- Fifty-five percent (55%) of Lorain County females over the age of 40 had a mammogram in the past year.
- More than half (51%) of Lorain County males had a prostate-specific antigen (PSA) test at some time in their life, and 29% had one in the past year.
- See the Women and Men’s Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening information for Lorain County adults.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Ever had a pneumonia vaccination (age 65 and over)	68%	82%	76%	76%	75%
Had a flu shot within the past year (age 65 and over)	68%	82%	80%	63%	60%
Ever had a shingles or zoster vaccine	N/A	13%	22%	29%	29%

N/A- Not Available

**Healthy People 2020
Immunization and Infectious Diseases (IID)**

Objective	Lorain County 2018	Ohio 2017	U.S. 2017	Healthy People 2020 Target
IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease	76%	63%	60%	90%

*Note: U.S. baseline is age-adjusted to the 2000 population standard
(Sources: Healthy People 2020 Objectives, 2017 BRFSS, 2018 Lorain County Health Assessment)*

**Lorain County Adults Having Discussed Health Care Topics
With Their Health Care Professional in the Past 12 Months**

Health Care Topics	Total 2011	Total 2015	Total 2018
Immunizations	23%	26%	44%
Weight Control (diet, physical activity)	N/A	N/A	43%
Significance of Family History	21%	22%	38%*
Depression, Anxiety, or Emotional Problems	18%	17%	27%
Safe Use of Prescription Medication	4%	16%	27%
Tobacco Use	N/A	N/A	16%
Falls	N/A	N/A	15%
Bone Density	N/A	N/A	14%
Injury Prevention (safety belt use, helmet use, or smoke detectors)	8%	6%	14%*
Alcohol Use	7%	7%	12%
Family Planning	N/A	N/A	11%
Safe use of Opiate Based Pain Medication	N/A	N/A	11%
Sexually Transmitted Diseases	N/A	N/A	10%
Self-Testicular Exams	N/A	N/A	7%
Illicit Drug Abuse	4%	3%	6%
Domestic Violence	3%	5%	4%
Substance Abuse Treatment Options	N/A	N/A	3%
Firearm Safety	N/A	N/A	2%

N/A – Not Available

**Question worded slightly different in 2018. Use data with caution.*

Health Care Access: Women's Health

Key Findings

More than half (55%) of Lorain County women over the age of 40 reported having a mammogram in the past year. Fifty-eight percent (58%) of women ages 19 and over had a clinical breast exam and 36% had a Pap smear to detect cancer of the cervix in the past year. Nearly two-fifths (38%) of Lorain County women were obese, 29% had high blood pressure, 29% had high blood cholesterol, and 14% were identified as current smokers, known risk factors for cardiovascular diseases.

Women's Health Screenings

- Sixty percent (60%) of women had a mammogram at some time in their life, and 32% had this screening in the past year.
- More than half (55%) of women ages 40 and over had a mammogram in the past year, and 77% had one in the past two years.
- Ninety-one percent (91%) of Lorain County women have had a clinical breast exam at some time in their life, and 58% had one within the past year. Almost three-fourths (74%) of women ages 40 and over had a clinical breast exam in the past two years.
- Ninety percent (90%) of Lorain County women ages 21-65 have had a Pap smear, and 36% reported having had the exam in the past year. Seventy percent (70%) of women ages 21-65 had a Pap smear in the past three years.

Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (49%), general or family physician (24%), family planning clinic (4%), midwife (2%), health department clinic (2%), community health center (1%), and nurse practitioner/physician's assistant (1%). Ten percent (10%) of women indicated they did not have a usual source of services for female health concerns.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. The assessment identified that:
 - 64% of women were overweight or obese (2017 BRFSS reported 64% for Ohio and 2016 BRFSS reported 59% for the U.S.)
 - 29% were diagnosed with high blood cholesterol (2017 BRFSS reported 33% for Ohio and 2016 BRFSS reported 35% for the U.S.)
 - 29% were diagnosed with high blood pressure (2017 BRFSS reported 33% for Ohio and 2016 BRFSS reported 30% for the U.S.)
 - 14% of all women were current smokers (2017 BRFSS reported 20% for Ohio and 2016 BRFSS reported 14% for the U.S.)
 - 12% had been diagnosed with diabetes (2017 BRFSS reported 11% for Ohio and 2016 BRFSS reported 11% for the U.S.)

Lorain County Female Leading Causes of Death, 2015–2017

Total female deaths: 4,626

1. Cancers (21% of all deaths)
2. Heart Diseases (20%)
3. Chronic Lower Respiratory Diseases (7%)
4. Alzheimer's Disease (6%)
5. Stroke (6%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

Ohio Female Leading Causes of Death, 2015–2017

Total Female Deaths: 180,539

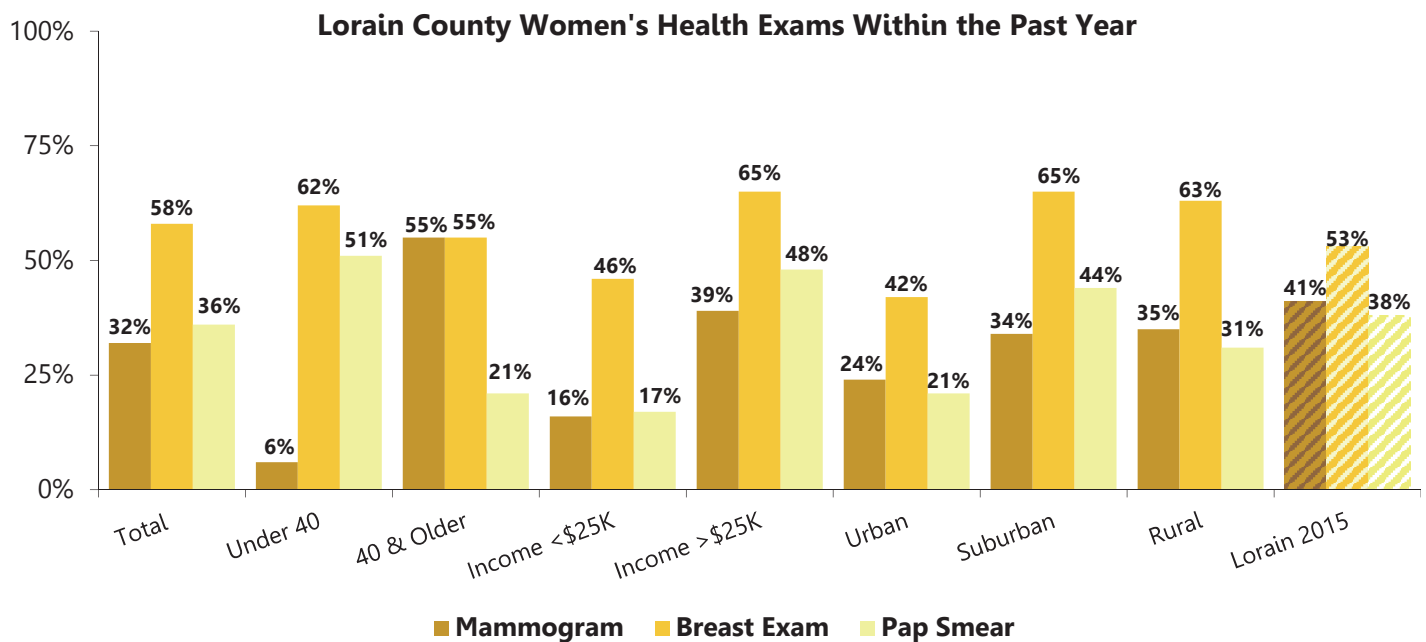
1. Heart Diseases (22% of all deaths)
2. Cancers (20%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (6%)
5. Alzheimer's Disease (6%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

Pregnancy

- Twenty-seven percent (27%) of Lorain County women had been pregnant in the past five years.
- During their last pregnancy within the past five years, Lorain County women took a multi-vitamin with folic acid during pregnancy (63%), had a prenatal appointment in the first three months (61%), took folic acid/prenatal vitamins (51%), took a multi-vitamin with folic acid pre-pregnancy (49%), had a dental exam (38%), took folic acid during pregnancy (38%), received WIC services (28%), took folic acid pre-pregnancy (23%), experienced depression (9%), looked for options for an unwanted pregnancy (9%), used marijuana (2%), consumed alcoholic beverages (2%), and smoked cigarettes or used other tobacco products (2%).

The following graph shows the percentage of Lorain County females who had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 32% of Lorain County females had a mammogram within the past year, 58% had a clinical breast exam, and 36% had a Pap smear.



**2015 Pap smear data reported for women of all ages*

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Had a clinical breast exam in the past two years (age 40 & over)	N/A	69%	74%	N/A	N/A
Had a mammogram in the past two years (age 40 & over)	79%	75%	77%	74%*	72%*
Had a Pap smear in the past three years (age 21-65)	N/A	68%**	70%	82%*	80%*

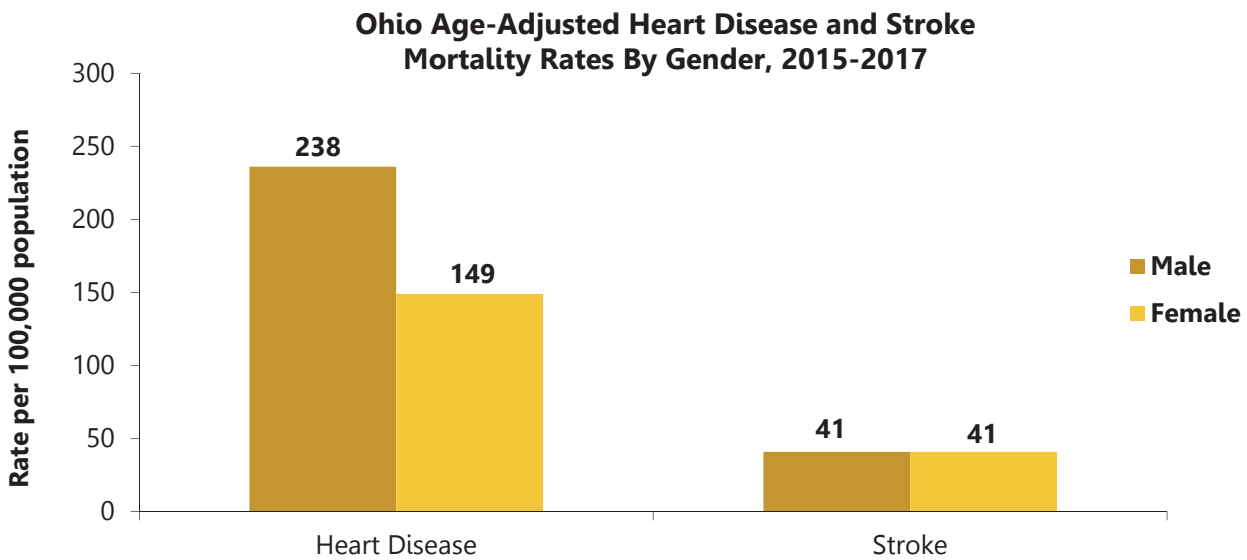
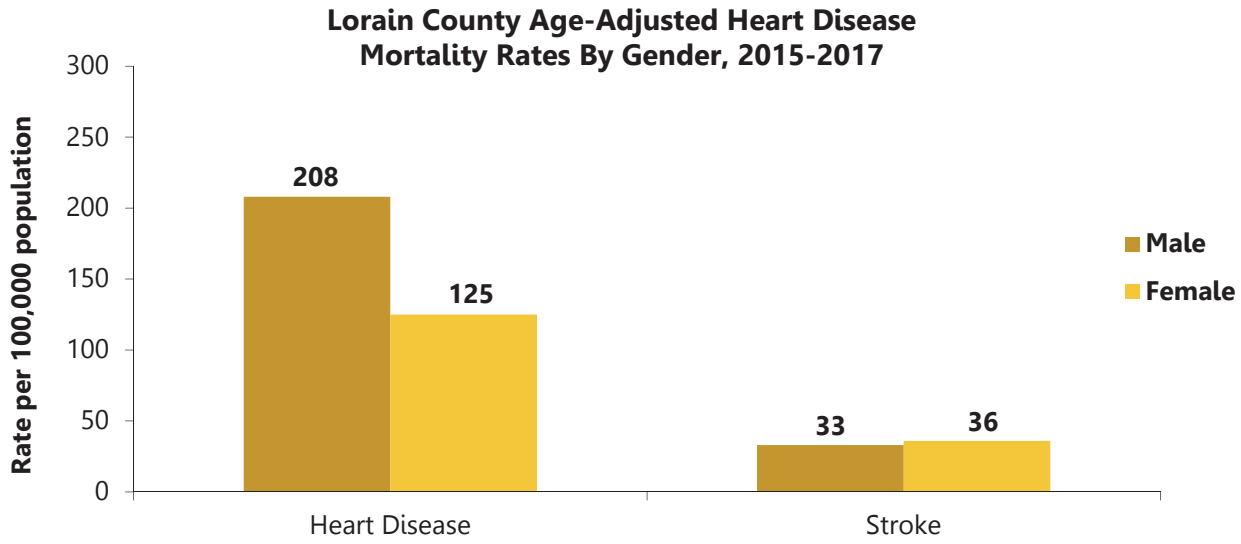
N/A- Not Available

*2016 BRFSS

**2015 data was reported for women of all ages

The following graphs show the Lorain County and Ohio age-adjusted mortality rates per 100,000 population for cardiovascular diseases. The graphs show:

- From 2015 to 2017, the Lorain County and Ohio male age-adjusted mortality rates were higher than the female age-adjusted mortality rate for heart disease.
- The Lorain County female age-adjusted stroke mortality rate was higher than the Lorain County male stroke mortality rate, while the male and female stroke mortality rates for Ohio were equal.



(Source: Ohio Public Health Data Warehouse, 2015-2017)

Health Care Access: Men's Health

Key Findings

In the past year, 46% of Lorain County males over the age of 50 had a prostate-specific antigen (PSA) test. Two-fifths (40%) of men had been diagnosed with high blood pressure, 40% had high blood cholesterol, and 9% were identified as smokers, which, along with obesity (38%), are known risk factors for cardiovascular diseases.

Men's Health Screenings and Concerns

- More than half (51%) of Lorain County males had a prostate-specific antigen (PSA) test at some time in their life, and 29% had one in the past year.
- In the past year, 46% of Lorain County males over the age of 50 had a prostate-specific antigen (PSA) test.
- Fifty-eight percent (58%) of men had a digital rectal exam in their lifetime, and 21% had one in the past year.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. The assessment identified that:
 - 79% of men were overweight or obese (2017 BRFSS reported 72% for Ohio and 2016 BRFSS reported 71% for the U.S.)
 - 40% were diagnosed with high blood pressure (2017 BRFSS reported 37% for Ohio and 2016 BRFSS reported 34% for the U.S.)
 - 40% were diagnosed with high blood cholesterol (2017 BRFSS reported 34% for Ohio and 2016 BRFSS reported 38% for the U.S.)
 - 15% had been diagnosed with diabetes (2017 BRFSS reported 11% for Ohio and 2016 BRFSS reported 11% for the U.S.)
 - 9% of all men were current smokers (2017 BRFSS reported 22% for Ohio and 2016 BRFSS reported 19% for the U.S.)

Lorain County Male Leading Causes of Death, 2015–2017

Total Male Deaths: 4,803

1. Cancers (23% of all deaths)
2. Heart Diseases (22%)
3. Accidents, Unintentional Injuries (10%)
4. Chronic Lower Respiratory Diseases (7%)
5. Stroke (3%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

Ohio Male Leading Causes of Death, 2015–2017

Total Male Deaths: 180,695

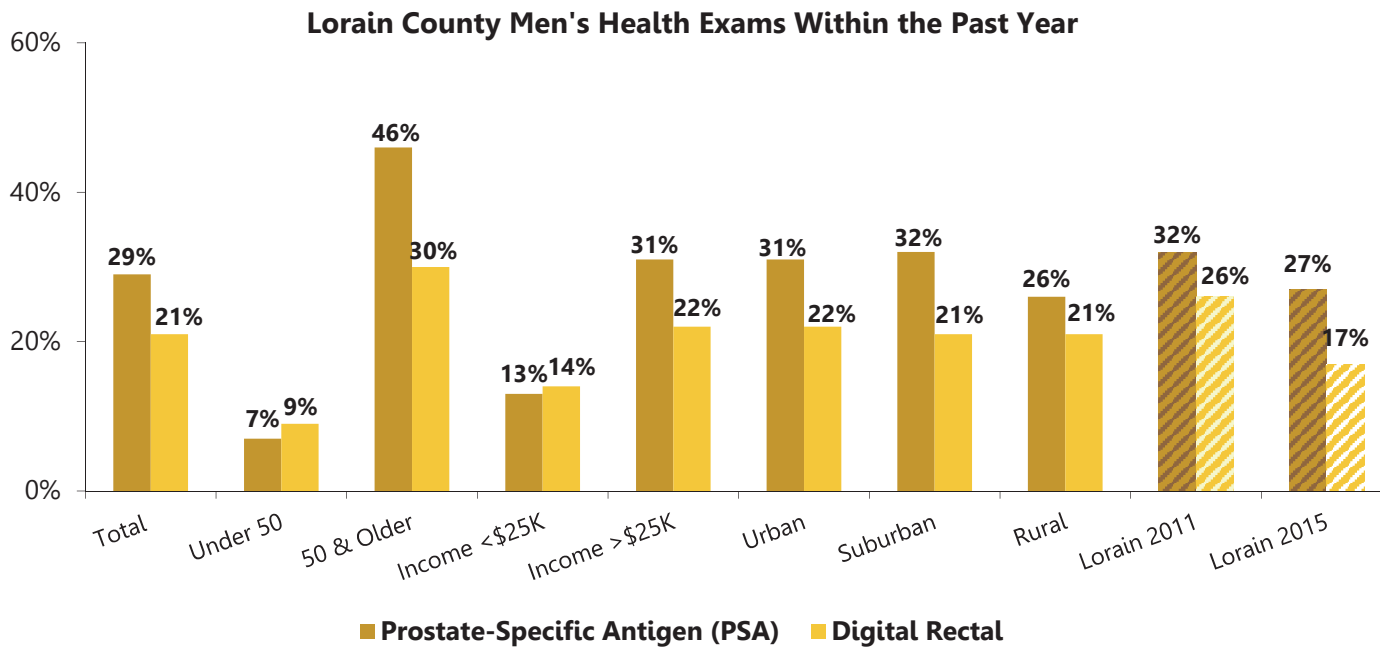
1. Heart Diseases (24% of all deaths)
2. Cancers (22%)
3. Accidents, Unintentional Injuries (8%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (4%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Had a PSA test within the past year	32%	27%	29%	N/A	N/A
Had a digital rectal exam within the past year	26%	17%	21%	N/A	N/A

N/A- Not Available

The following graph shows the percentage of Lorain County males who had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 29% of Lorain County males had a PSA test within the past year, and 21% had a digital rectal exam.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

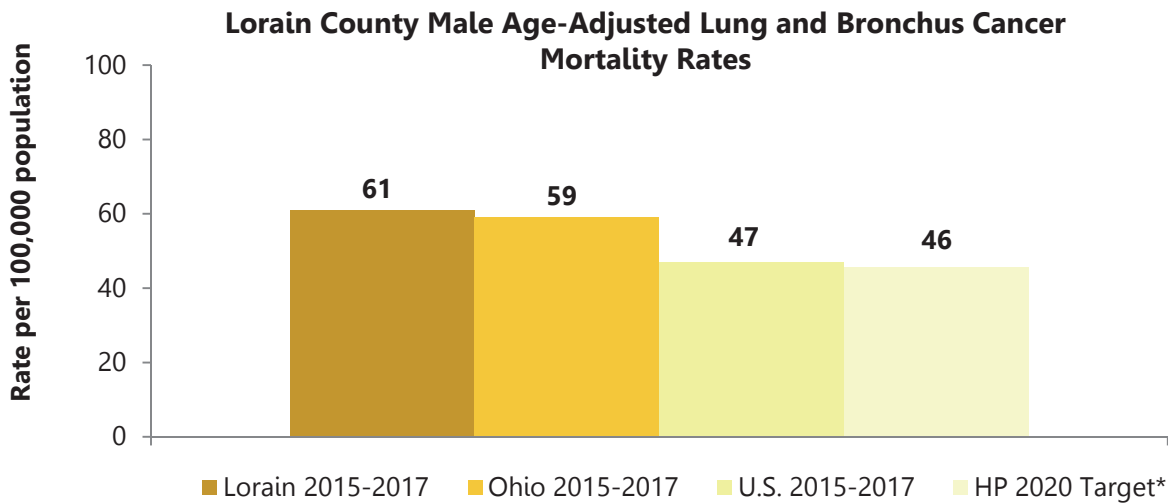
Prostate Cancer Awareness

- Prostate cancer is the most common cancer among American men. Most prostate cancers grow slowly and don't cause any health problems in men who have them.
- Men can have different symptoms for prostate cancer. Some men do not have symptoms at all. Some symptoms of prostate cancer are difficulty starting urination, frequent urination (especially at night), weak or interrupted flow of urine, and blood in the urine or semen.
- There is no way to know for sure if you will get prostate cancer. Men have a greater chance of getting prostate cancer if they are 50 years old or older, are African-American, or have a father, brother, or son who has had prostate cancer.
- Two tests are commonly used to screen for prostate cancer:
 - **Digital rectal exam (DRE):** A doctor, nurse, or other health care professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland.
 - **Prostate specific antigen test (PSA):** PSA is a substance made by the prostate. The PSA test measures the level of PSA in the blood, which may be higher in men who have prostate cancer. However, other conditions such as an enlarged prostate, prostate infection and certain medical procedures also may increase PSA levels.

(Source: Centers for Disease Control and Prevention, Prostate Cancer Awareness, September 17, 2018)

The following graph shows the Lorain County, Ohio and U.S. age-adjusted lung cancer mortality rates per 100,000 population for men with comparison to the Healthy People 2020 objective. The graph shows:

- From 2015 to 2017, the Lorain County age-adjusted mortality rate for male lung cancer was higher than the Ohio rate, U.S. rate, and the Healthy People 2020 objective.



Note: The Healthy People 2020 target rates are not gender specific
 (Sources: Ohio Public Health Data Warehouse, 2015-2017, CDC Wonder 2015-2017, and Healthy People 2020)

U.S. Men’s Health Data

- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- Eighteen percent (18%) of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 31% had 5 or more drinks in 1 day at least once in the past year.
- Only 58% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- Thirty-seven percent (37%) of men 18 years and over are obese.
- There are 12% of males under the age of 65 without health care coverage.
- The leading causes of death for males in the United States are heart disease, cancer and accidents (unintentional injuries).

(Source: CDC, National Center for Health Statistics, Men’s Health, Fast Stats, January 20, 2017)

Health Care Access: Oral Health

Key Findings

Sixty-nine percent (69%) of Lorain County adults had visited a dentist or dental clinic in the past year, decreasing to 47% of adults with incomes less than \$25,000. Thirty-two percent (32%) of adults indicated cost was the reason they did not visit a dentist within the past year.

Access to Dental Care

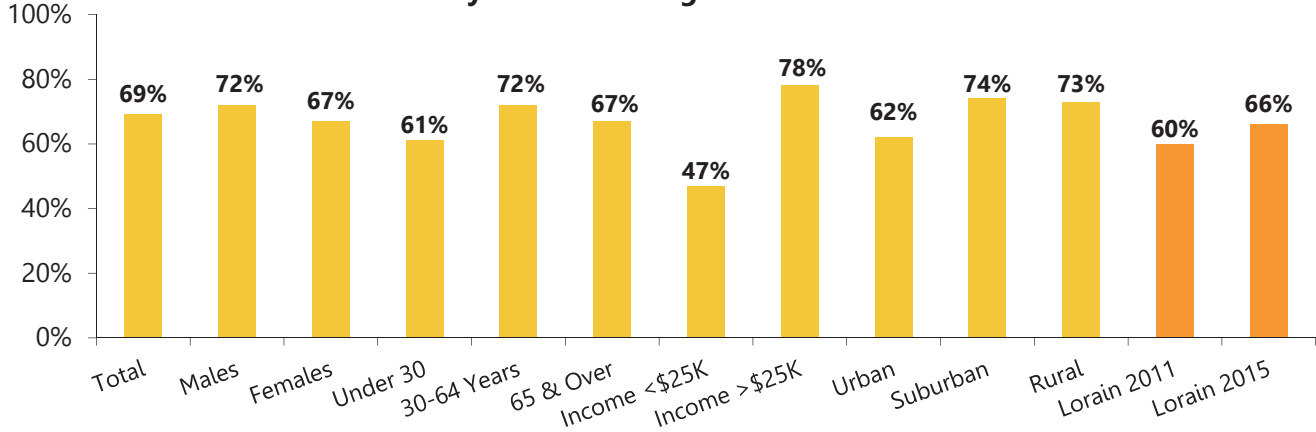
- In 2018, 69% of Lorain County adults had visited a dentist or dental clinic, decreasing to 47% of adults with annual household incomes less than \$25,000.
- Seventy-two percent (72%) of adults with dental insurance had been to the dentist in the past year, compared to 48% of those without dental insurance.
- Adults indicated the following reasons for not visiting the dentist in the past year:
 - Cost (32%)
 - Fear, apprehension, nervousness, pain, and dislike going (13%)
 - Had dentures (13%)
 - No reason to go/had not thought of it (11%)
 - Did not have/know a dentist (5%)
 - Their dentist did not accept their medical coverage (5%)
 - Could not find a dentist to who took Medicaid (4%)
 - Some other reason (9%)
- Forty-four percent (44%) of adults had one or more of their permanent teeth removed, increasing to 73% of those ages 65 and over.
- Nine percent (9%) Lorain County adults ages 65 and over had all of their permanent teeth removed.
- Lorain County adults had the following oral health issues: pain (7%), difficulty eating/chewing (7%), oral bleeding (5%), problems with dentures (3%), no teeth (3%), loose teeth (2%), skipped meals due to pain (1%), and missed work due to mouth pain (1%).
- Lorain County adults did the following at least daily: brushed their teeth (96%), flossed their teeth (46%), and used mouthwash (43%). Three percent (3%) of adults indicated they do none of the above daily.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Visited a dentist or a dental clinic (within the past year)	60%	66%	69%	68%*	66%*
Visited a dentist or a dental clinic (5 or more years ago)	14%	12%	10%	11%*	10%*
Had any permanent teeth extracted	N/A	N/A	47%	45%*	43%*
Had all their natural teeth extracted (ages 65 and older)	N/A	N/A	9%	17%*	14%*

*2016 BRFSS

The following graph provides information about the frequency of Lorain County adult dental visits. Examples of how to interpret the information include: 69% of all Lorain County adults had been to the dentist or dental clinic in the past year, including 72% of males and 47% of those with incomes less than \$25,000.

Lorain County Adults Visiting a Dentist in the Past Year



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Oral Health	Within the Past Year	Within the Past 5 Years	5 or More years	Never
Time Since Last Visit to Dentist/Dental Clinic				
Males	72%	5%	9%	1%
Females	67%	11%	11%	1%
Total	69%	8%	10%	1%

Facts About Adult Oral Health

- The baby boomer generation is the first where most people will keep their natural teeth over their entire lifetime. This is largely because of the benefits of water fluoridation and fluoride toothpaste. However, threats to oral health, including tooth loss, continue throughout life.
- The major risks for tooth loss are tooth decay and gum disease that may increase with age because of problems with saliva production; receding gums that expose “softer” root surfaces to decay-causing bacteria; or difficulties flossing and brushing because of poor vision, cognitive problems, chronic disease, and physical limitations.
- Although more adults are keeping their teeth, many continue to need treatment for dental problems. This need is even greater for members of some racial and ethnic groups—about 3 in 4 Hispanics and non-Hispanic black adults have an unmet need for dental treatment, as do people who are poor. These individuals are also more likely to report having poor oral health.
- In addition, some adults may have difficulty accessing dental treatment. For every adult aged 19 years or older without medical insurance, there are three who don’t have dental insurance.
- Oral health problems include the following: untreated tooth decay, gum disease, tooth loss, oral cancer, and chronic diseases such as arthritis, heart disease, and strokes.

(Source: Centers for Disease Control and Prevention, Division of Oral Health, Adult Oral Health, October 23, 2017)

Health Behaviors: Health Status Perceptions

Key Findings

In 2018, 49% of the Lorain County adults rated their health status as excellent or very good. Conversely, 11% of adults described their health as fair or poor, increasing to 16% of those over the age of 65.

General Health Status

- In 2018, 49% of adults rated their health as excellent or very good. Lorain County adults with higher incomes (57%) were most likely to rate their health as excellent or very good, compared to 30% of those with incomes less than \$25,000.
- Eleven percent (11%) of adults rated their health as fair or poor, increasing to 16% of those over the age of 65.
- One-quarter (25%) adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.
- Lorain County adults were most likely to rate their health as fair or poor if they:
 - Had an annual household income under \$25,000 (28%)
 - Had been diagnosed with diabetes (22%)
 - Were divorced (21%)

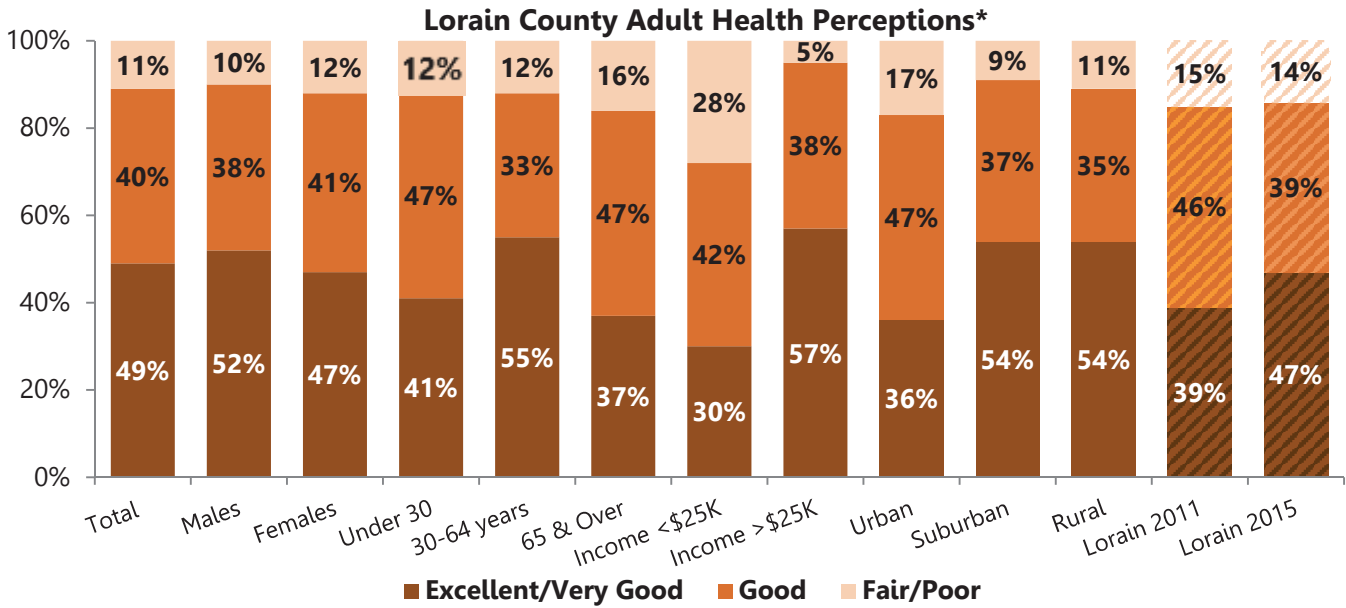
Physical Health Status

- In 2018, 18% of Lorain County adults rated their physical health as not good on four or more days in the previous month.
- Lorain County adults reported their physical health as not good on an average of 3.6 days in the previous month.
- Lorain County adults were most likely to rate their physical health as not good if they:
 - Lived in a rural area (43%)
 - Were 65 and older (42%)
 - Had an annual household income under \$25,000 (36%)

Mental Health Status

- In 2018, 29% of Lorain County adults rated their mental health as not good on four or more days in the previous month.
- Lorain County adults reported their mental health as not good on an average of 4.7 days in the previous month.
- Lorain County adults were most likely to rate their mental health as not good if they:
 - Had an annual household income under \$25,000 (65%)
 - Lived in a suburban area (51%)
 - Were female (48%)

The following graph shows the percentage of Lorain County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 49% of all Lorain County adults, 41% of those under the age of 30, and 37% of those ages 65 and older rated their health as excellent or very good. The table shows the percentage of adults with poor physical and mental health in the past 30 days.



*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"
 Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
Physical Health Not Good in Past 30 Days*					
Males	47%	19%	7%	2%	11%
Females	51%	16%	4%	2%	11%
Total	49%	17%	5%	2%	11%
Mental Health Not Good in Past 30 Days*					
Males	49%	15%	11%	1%	13%
Females	39%	15%	6%	6%	21%
Total	43%	15%	8%	4%	17%

*Totals may not equal 100% as some respondents answered, "Don't know/Not sure".

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Rated general health as good, very good, or excellent	88%	86%	89%	81%	83%
Rated health as excellent or very good	48%	47%	49%	49%	51%
Rated health as fair or poor	12%	14%	11%	19%	18%
Rated physical health as not good on four or more days (in the past 30 days)	18%	21%	18%	22%*	22%*
Rated mental health as not good on four or more days (in the past 30 days)	20%	27%	29%	24%*	23%*
Average days that physical health not good (in the past 30 days)	N/A	3.1	3.6	4.0 [†]	3.7 [†]
Average days that mental health not good in past month	N/A	4.1	4.7	4.3 [†]	3.8 [†]
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past 30 days)	18%	27%	25%	22%*	22%*

*2016 BRFSS

[†]2016 BRFSS Data as compiled by 2018 County Health Rankings

N/A – Not Available

Common Signs of Mental Illness in Adults

- Trying to tell the difference between what expected behaviors are and what might be the signs of a mental illness isn't always easy. There's no easy test that can let someone know if there is mental illness or if actions and thought might be typical behaviors of a person or the result of a physical illness.
- Each illness has its own symptoms, but common signs of mental illness in adults can include:
 - Excessive worrying or fear
 - Feeling excessively sad or low
 - Extreme mood changes
 - Avoiding friends and social activities
 - Changing in sleeping habits or feeling tired and low energy
 - Abuse of substances like alcohol or drugs
 - Inability to carry out daily activities or handle daily problems and stress

(Source: National Alliance on Mental Illness, *Know the Warning Signs*, Updated 2019)

Health Behaviors: Adult Weight Status

Key Findings

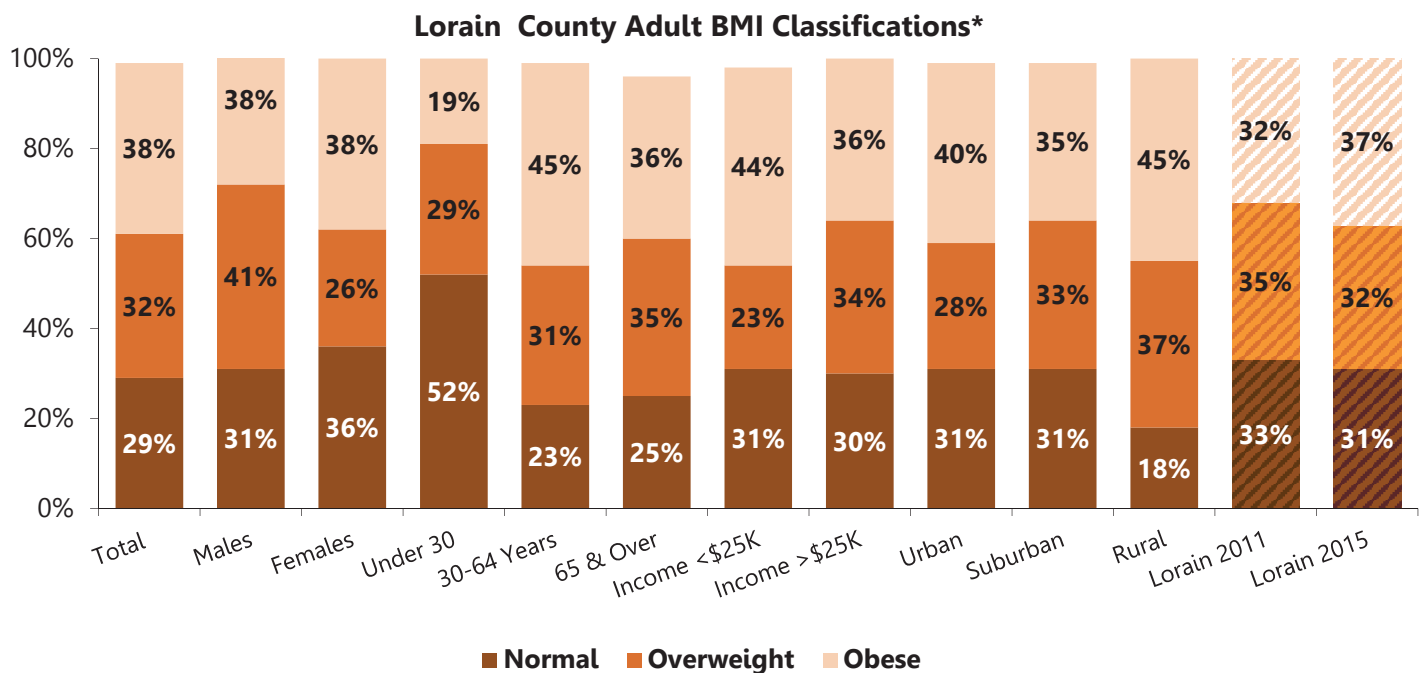
Seventy percent (70%) of Lorain County adults were overweight (32%) or obese (38%) based on body mass index (BMI). More than half (52%) of adults were trying to lose weight. Twenty-two percent (22%) of adults did not participate in any physical activity in the past week, including 2% who were unable to exercise.

Adult Weight Status

- In 2018, 70% of Lorain County adults were either overweight (32%) or obese (38%) by body mass index (BMI), putting them at elevated risk for developing a variety of diseases.
- More than half (52%) of adults were trying to lose weight, 29% were trying to maintain their current weight or keep from gaining weight, and 2% were trying to gain weight.
- Lorain County adults did the following to lose weight or keep from gaining weight: drank more water (50%); ate less food, fewer calories, or foods low in fat (47%); exercised (39%); ate a low-carb diet (14%); went without eating for long periods of time (7%); used a weight loss program (3%); smoked cigarettes (2%); took diet pills, powders or liquids without a doctor's advice (2%); took prescribed medications (1%); received health coaching (1%); participated in a prescribed dietary or fitness program (1%); bariatric surgery (<1%); and took laxatives (<1%).

85,475 Lorain County adults were obese.

The following graph shows the percentage of Lorain County adults who were overweight or obese by body mass index (BMI). Examples of how to interpret the information include: 29% of all Lorain County adults were classified as normal weight, 32% were overweight, and 38% were obese.



*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Normal Weight (BMI of 18.5 – 24.9)	33%	31%	29%	30%	32%
Overweight (BMI of 25.0 – 29.9)	35%	32%	32%	34%	35%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	32%	37%	38%	34%	32%

Physical Activity

- In Lorain County, 54% of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. More than one-fourth (26%) of adults were exercising 5 or more days per week. Twenty-two percent (22%) of adults did not participate in any physical activity in the past week, including 2% who were unable to exercise.
- The U.S. Department of Health and Human Services recommends that adults participate in at least 150 minutes (2 hours and 30 minutes) to 300 minutes (5 hours) a week of moderate-intensity, or 75 minutes (1 hour and 15 minutes) to 150 minutes (2 hours and 30 minutes) a week of vigorous-intensity aerobic physical activity, or an equivalent combination of moderate- and vigorous-intensity aerobic activity (*Source: U.S. Department of Health and Human Services, Physical Activity Guidelines for Americans, 2018*).
- Reasons for not exercising included the following: time (34%), too tired (25%), laziness (20%), weather (15%), pain/discomfort (15%), do not like to exercise (13%), poorly maintained or no sidewalks (7%), could not afford a gym membership (7%), neighborhood safety (5%), no exercise partner (4%), no childcare (3%), did not know what activity to do (2%), lack of opportunities for those with physical impairments or challenges (5%), transportation issues (1%), doctor advised them not to exercise (1%), no gym available (1%), and no walking/biking trails (1%).
- Lorain County adults described their work as mostly sitting (22%), mostly walking (11%), mostly standing (10%), and mostly heavy labor or physically demanding work (4%). Twenty-nine percent (29%) of adults were not employed, and 25% said their type of work varied.
- Adults reported the following would help them use community parks, bike trails, and walking paths more frequently: more accessible parks, bike trails, and walking paths (36%); better promotion and advertising of existing parks, trails and paths (34%); designated safe routes (25%); improvements to existing parks, trails, and paths (22%); and more public events and programs involving parks, trails, and paths (15%).

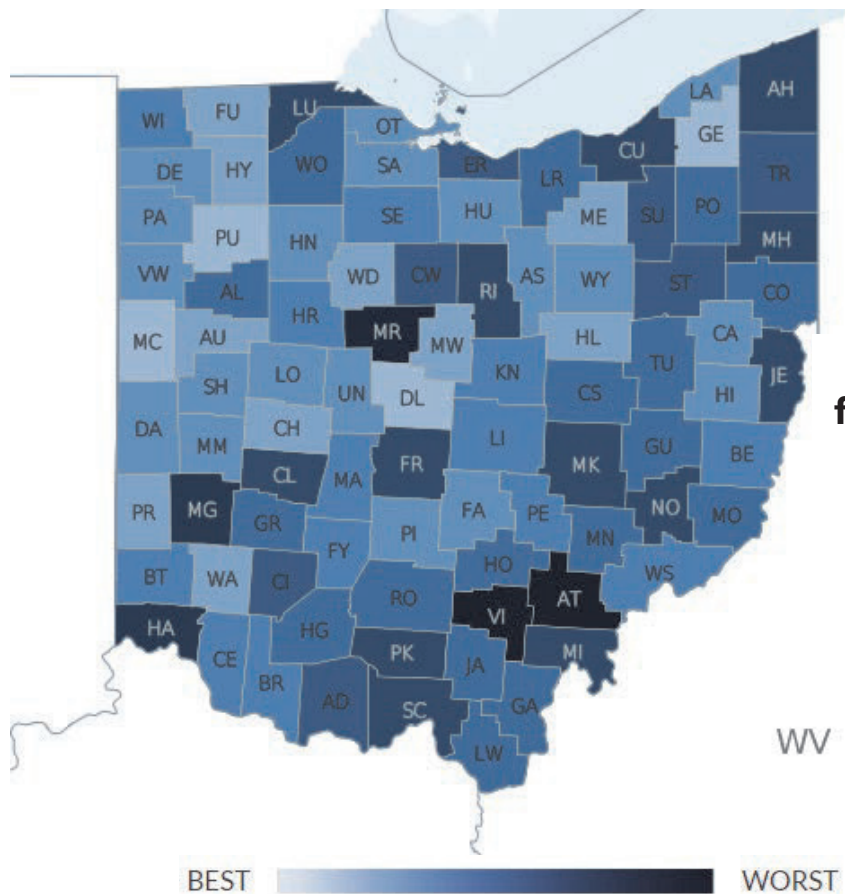
Nutrition

- In 2018, 3% of adults ate 5 or more servings of fruits and vegetables per day. Ninety-one percent (91%) of adults ate between 1 and 4 servings per day. Three percent (3%) of adults ate zero servings of fruits and vegetables per day because they could not afford fruits or vegetables, 2% ate zero servings per day because they do not like fruits and vegetables, and 1% ate zero servings per day because that did not have access to fruits and vegetables.
- The American Cancer Society recommends that adults eat at least 2½ cups of fruits and vegetables per day to reduce the risk of cancer and to maintain good health (*Source: American Cancer Society, 2017*).
- Lorain County adults obtained their fruits and vegetables from the following places: large grocery store (86%); farmer’s market (38%); local grocery store (37%); garden/grew their own (23%); food pantry (4%); corner/convenience stores (3%); Dollar General/general store (3%); veggie mobile/mobile produce (2%); community garden (2%); Group Purchasing; Community Supported Agriculture (1%); and other places (4%).

- Adults reported the following barriers to consuming fruits and vegetables: too expensive (20%), did not like the taste (7%), did not know how to prepare (5%), no variety (3%), no access (1%), stores do not take EBT (1%), transportation issues (1%), and other barriers (5%).
- Adults drank an average of 5.3 beverages containing sugar in the past week.
- Lorain County adults reported the following reasons they chose the types of food they ate: taste (68%), healthiness of food (51%), cost (47%), ease of preparation/time (44%), food they were used to (42%), what their family prefers (35%), availability (30%), nutritional content (24%), calorie content (21%), if it is organic (11%), if it is genetically modified (8%), artificial sweetener content (7%), lactose free (6%), health care provider's advice (5%), other food sensitivities (3%), gluten free (3%), limitations due to dental issues (2%), limitations set by WIC (1%), and other reasons (4%).

The Food Environment Index measures the quality of the food environment in a county on a scale from zero to ten (zero being the worst value in the nation, and ten being the best). The two variables used to determine the measure are limited access to healthy foods (i.e., the percentage of the population who are low income and do not live close to a grocery store) & food insecurity (i.e., the percentage of the population who did not have access to a reliable source of food during the past year).

- The food environment index in Lorain County is 7.6.
- The food environment index in Ohio is 6.7.



Lorain County had a food index measure of:
7.6

(Source: USDA Food Environment Atlas, as compiled by County Health Rankings 2019)

Health Behaviors: Adult Tobacco Use

Key Findings

In 2018, 12% of Lorain County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days). Almost one-fourth (24%) were considered former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). Eight percent (8%) of adults had used e-cigarettes/vape pens in the past year.

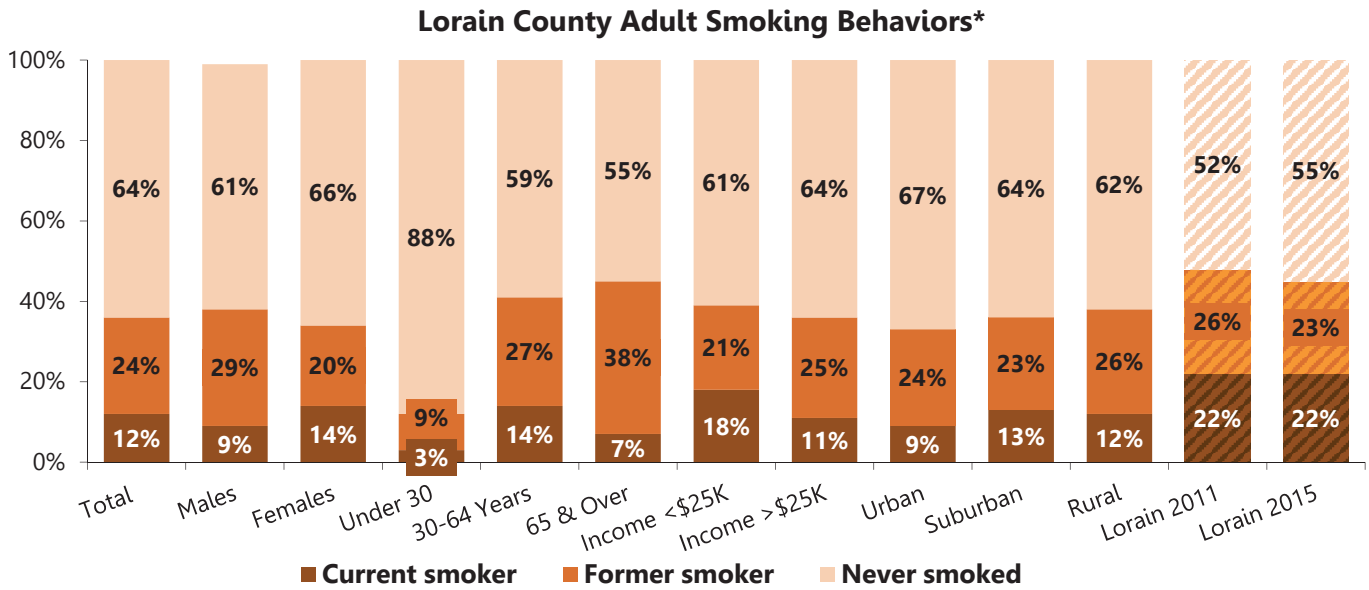
In 2018, 26,992 Lorain County adults were current smokers.

Adult Tobacco Use Behaviors

- In 2018, 12% of Lorain County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days).
- Almost one-quarter (24%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
- Lorain County adult smokers were more likely to:
 - Have rated their overall health as poor (24%)
 - Have incomes more than \$25,000 (18%)
 - Be female (14%)
 - Be ages 30-64 (14%)
- Lorain County adults used the following tobacco products in the past year: cigarettes (17%), cigars (9%), e-cigarettes/vape pens (8%), little cigars (4%), cigarillos (3%), hookah (3%), chewing tobacco (2%), and pipes (1%).
- Lorain County adults indicated they had tried the following methods in the past 12 months to quit smoking: cold turkey (34%), e-cigarette (17%), nicotine gum (13%), nicotine patch (9%), prescribed Chantix (9%), Wellbutrin (9%), hypnosis (5%), acupuncture (5%), quit line (1%), and substitute behaviors (1%).
- Lorain County adults indicated they would support an ordinance to ban smoking in the following places: vehicle with a minor present (76%), parks or ball fields (56%), college/university campuses (54%), multi-unit housing (53%), and fairgrounds (50%). Twenty-one percent (21%) would not support an ordinance for any of the above.
- Half (50%) of adults believed e-cigarette vapor was harmful to themselves, and 43% believed it was harmful to others. Four percent (4%) of adults did not believe e-cigarette vapor was harmful to anyone. Forty-six percent (46%) of adults did not know if e-cigarette vapor was harmful to themselves or others.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Current smoker	22%	22%	12%	21%	17%
Former smoker	26%	23%	24%	24%	25%

The following graph shows the percentage of Lorain County adults who smoked cigarettes. Examples of how to interpret the information include: 12% of all Lorain County adults were current smokers, 24% of all adults were former smokers, and 64% had never smoked.

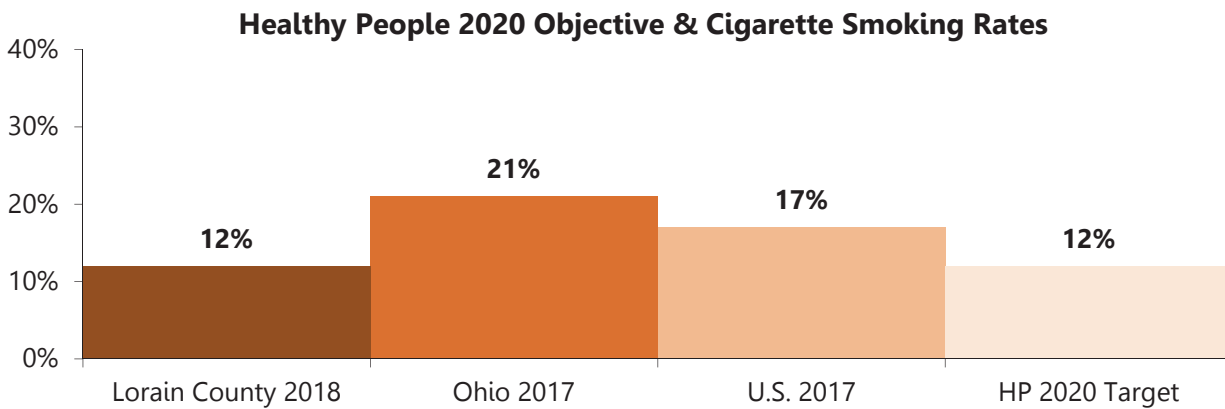


*Note: Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows Lorain County, Ohio, and U.S. adult cigarette smoking rates in comparison with Healthy People 2020. The BRFSS rates shown for Ohio and the U.S. were for adults 18 years and older. This graph shows:

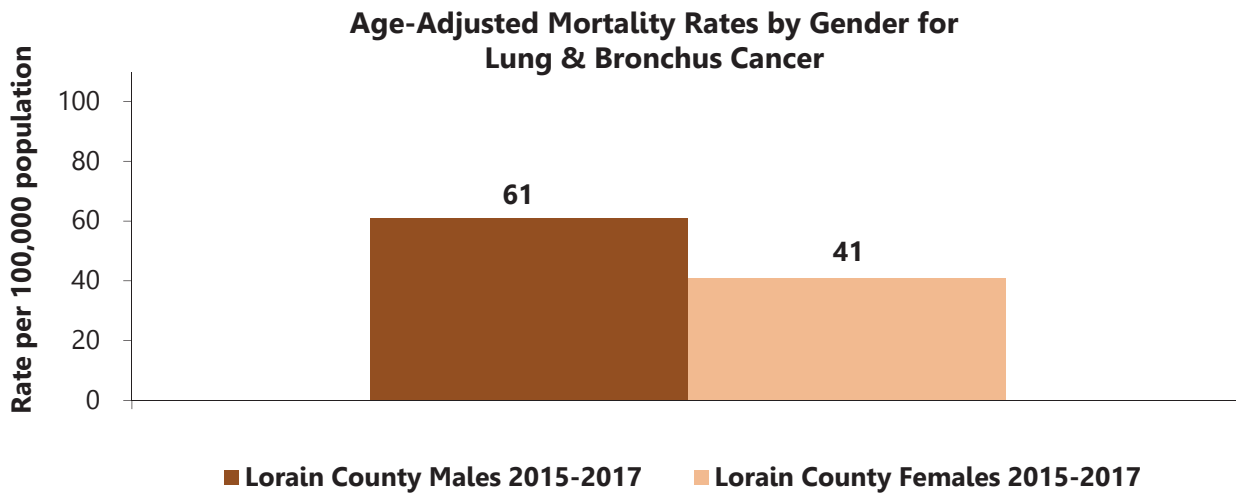
- The Lorain County adult cigarette smoking rate was lower than the Ohio and U.S. rates and equal to the Healthy People 2020 target objective.



(Source: 2018 Lorain County Health Assessment, 2017 BRFSS and Healthy People 2020)

The following graph shows the Lorain County age-adjusted mortality rates for lung and bronchus cancer by gender. The graph shows:

- Disparities existed by gender for Lorain County lung and bronchus cancer age-adjusted mortality rates. The 2015 to 2017 Lorain County male rate was substantially higher than the Lorain County female rate.



(Source: Ohio Public Health Data Warehouse, 2015-2017)

Smoking and Other Health Risks

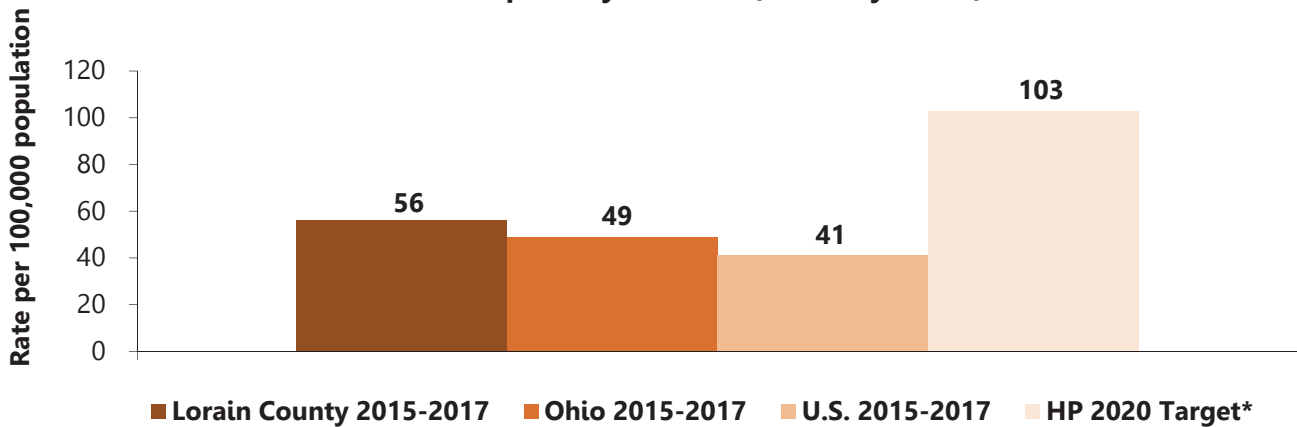
- Smoking can make it harder for a woman to become pregnant and can affect her baby's health before and after birth. Smoking increases risks for:
 - Preterm (early) delivery
 - Stillbirth (death of the baby before birth)
 - Low birth weight
 - Sudden infant death syndrome (known as SIDS or crib death)
 - Ectopic pregnancy
 - Orofacial clefts in infants
- Smoking can also affect men's sperm, which can reduce fertility and increase risks for birth defects and miscarriage (loss of the pregnancy).
- Smoking can affect bone health.
 - Women past childbearing years who smoke have lower bone density (weaker bones) than women who never smoked and are at greater risk for broken bones.
- Smoking affects the health of your teeth and gums and can cause tooth loss.
- Smoking can increase your risk for cataracts (clouding of the eye's lens that makes it hard for you to see) and age-related macular degeneration (damage to a small spot near the center of the retina, the part of the eye needed for central vision).
- Smoking is a cause of type 2 diabetes mellitus and can make it harder to control. The risk of developing diabetes is 30-40% higher for active smokers than nonsmokers.
- Smoking causes general adverse effects on the body, including inflammation and decreased immune function.
- Smoking is a cause of rheumatoid arthritis.

(Source: CDC, *Effects of Cigarette Smoking, Smoking and Other Health Risks*, updated January 17, 2018)

The following graphs show Lorain County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD), as well as lung and bronchus cancer in comparison with the Healthy People 2020 objective. These graphs show:

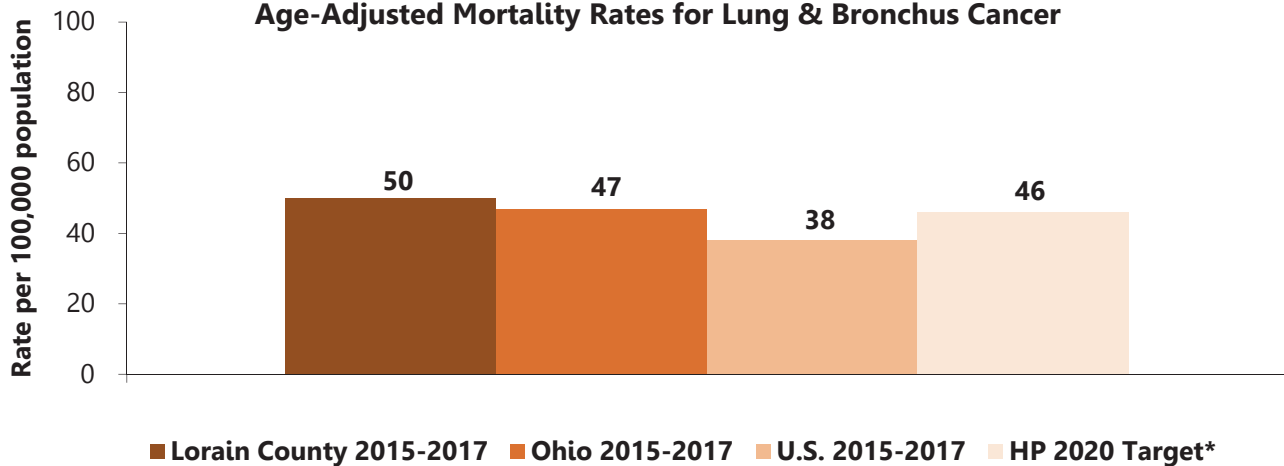
- From 2015 to 2017, Lorain County’s age-adjusted mortality rate for chronic lower respiratory disease was higher than the Ohio and U.S. rate, but lower than the Healthy People 2020 target objective.
- Lorain County’s age-adjusted mortality rate for lung and bronchus cancer was higher than Ohio rate, U.S. rate, and the Healthy People 2020 target objective.

Age-Adjusted Mortality Rates for Chronic Lower Respiratory Diseases (Formerly COPD)



(Source: Ohio Public Health Data Warehouse, 2015-2017, CDC Wonder 2015-2017, and Healthy People 2020)
 *Note: Healthy People 2020’s target rate and the U.S. rate is for adults aged 45 years and older.

Age-Adjusted Mortality Rates for Lung & Bronchus Cancer



(Sources: Ohio Public Health Data Warehouse, 2015-2017, CDC Wonder, 2015-2017, and Healthy People 2020)
 *The Health People 2020 target objective only includes the age-adjusted lung cancer death rate

Health Behaviors: Adult Alcohol Consumption

Key Findings

In 2018, 62% of Lorain County adults had at least one alcoholic drink in the past month. More than one-fifth (21%) Lorain County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition.

Adult Alcohol Consumption

- In 2018, 62% of the Lorain County adults had at least one alcoholic drink in the past month, increasing to 72% of those with incomes more than \$25,000.
- Of those who drank, Lorain County adults drank 3.1 drinks on average, increasing to 5.1 drinks for those with incomes less than \$25,000.
- More than one-fifth (21%) Lorain County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition. Of those who drank in the past month, 32% had at least one episode of binge drinking.
- In the past month, 8% of adults reported driving after having perhaps too much to drink.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Current drinker (drank alcohol at least once in the past month)	59%	61%	62%	54%	55%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days)	23%	11%	21%	19%	17%
Drinking and driving in the past month (had driven after drinking too much)	4%	1%	8%	4%*	4%*

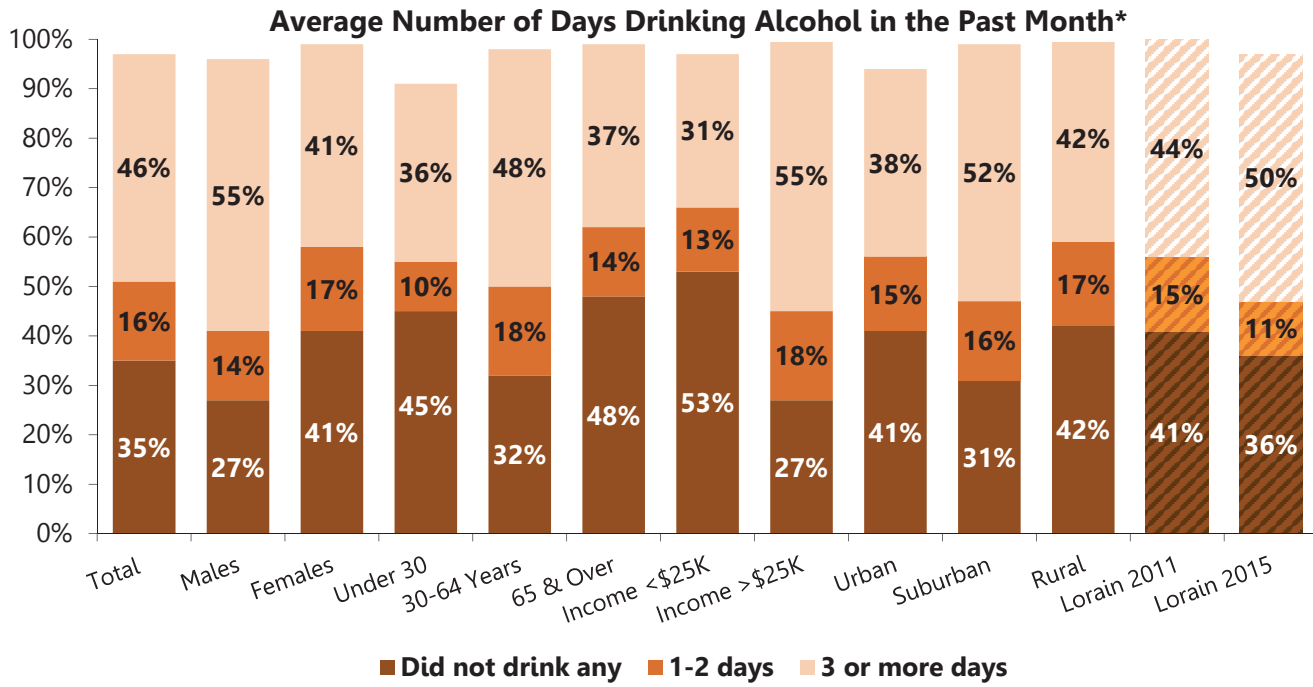
*2016 BRFSS

Economic Costs of Excessive Alcohol Use

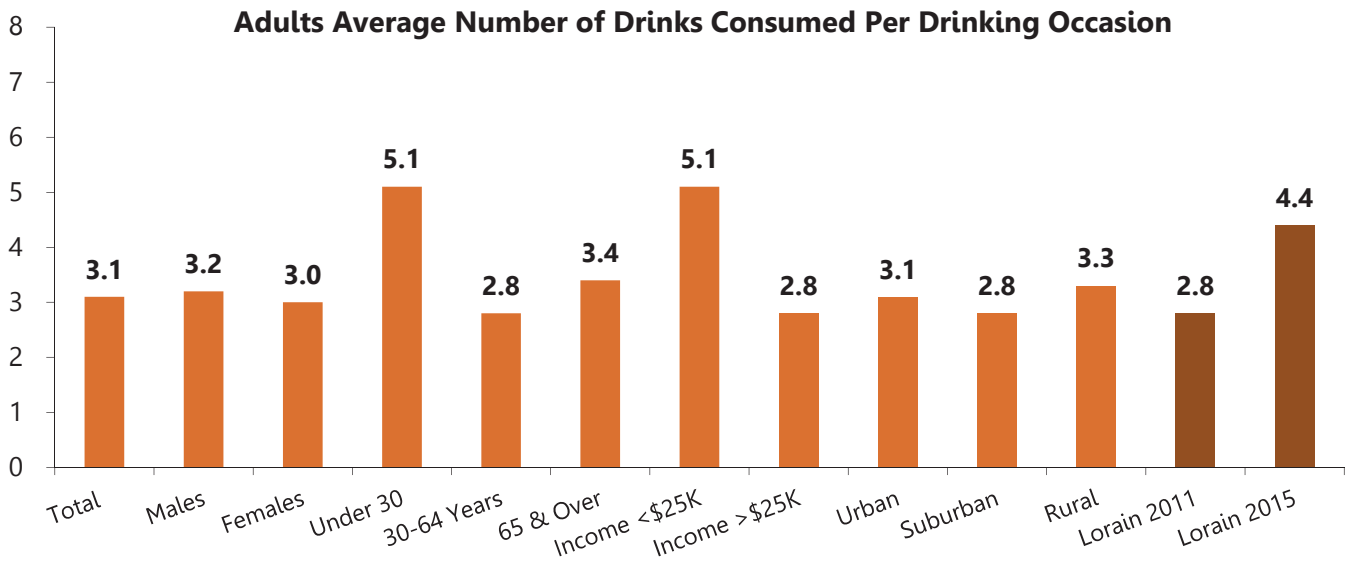
- Excessive alcohol consumption cost the United States \$249 billion in 2010. This cost amounts to about \$2.05 per drink, or about \$807 per person.
- Costs due to excessive drinking largely resulted from losses in workplace productivity (72% of the total cost), health care expenses (11%), and other costs due to a combination of criminal justice expenses, motor vehicle crash costs, and property damage.
- Excessive alcohol use cost states and DC a median of 3.5 billion in 2010, ranging from \$488 million in North Dakota to \$35 billion in California.
 - Excessive alcohol consumption cost Ohio \$8.5 billion in 2010. This cost amounts to \$2.10 per drink or \$739 per person.
- Binge drinking, defined as consuming four or more drinks per occasion for women or five or more drinks per occasion for men, was responsible for 77% of the cost of excessive alcohol use in all states and DC.
- About \$2 of every \$5 of the economic costs of excessive alcohol use were paid by federal, state, and local governments.

(Source: CDC, Alcohol and Public Health – Excessive Drinking, updated January 2018)

The following graphs show the percentage of Lorain County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 35% of all adults did not drink alcohol, 27% of males did not drink, and 41% of females reported they did not drink.



*Percentages may not equal 100% as some respondents answered, "don't know"



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Health Behaviors: Adult Drug Use

Key Findings

In 2018, 10% of Lorain County adults had used recreational marijuana during the past 6 months. Eight percent (8%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

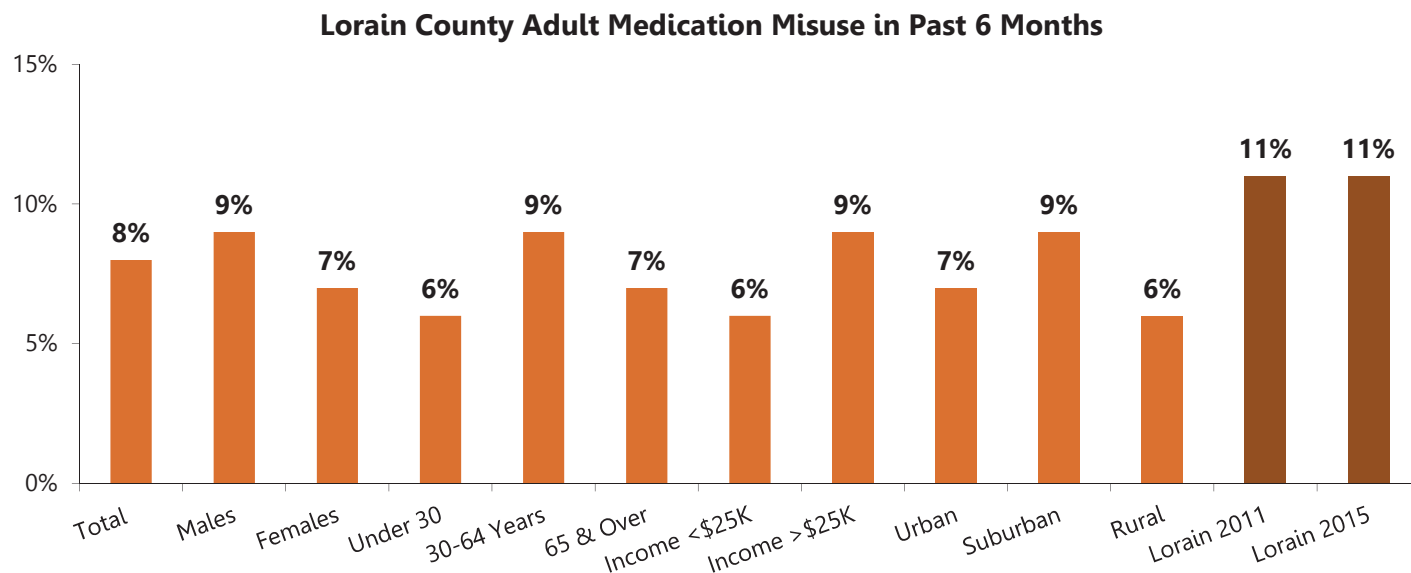
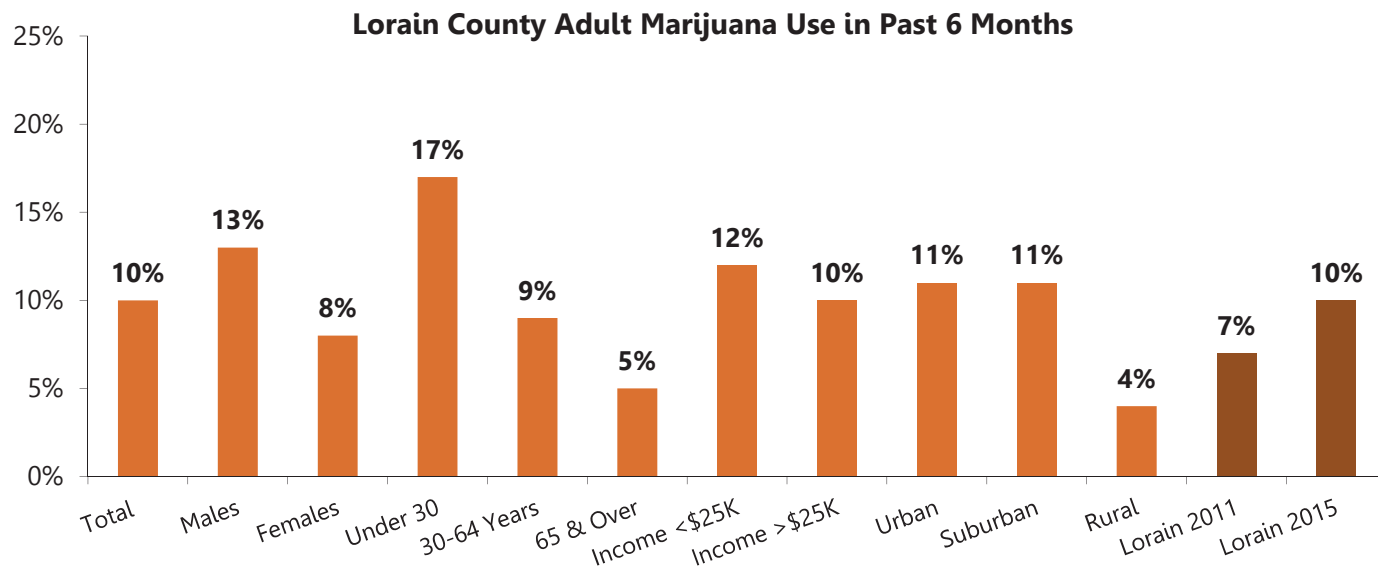
Adult Drug Use

- Ten percent (10%) of Lorain County adults had used recreational marijuana in the past 6 months, increasing to 17% of those under the age of 30.
- Eight percent (8%) of Lorain County adults reported using other recreational drugs such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- Eight percent (8%) of adults had used medication not prescribed for them or they took more than prescribed to feel good or high and/or more active or alert during the past 6 months, increasing to 12% of males.
- Lorain County adults indicated they did the following with their unused prescription medication:
 - Took as prescribed (23%)
 - Took it to the medication collection program (22%)
 - Threw it in the trash (16%)
 - Kept it (16%)
 - Flushed it down the toilet (10%)
 - Take it in on drug take back days (7%)
 - Take it to the sheriff's office (6%)
 - Kept it in a locked cabinet (2%)
 - Gave it away (2%)
 - Trade it (1%)
 - Sold it (1%)
 - Drugs were stolen (<1%)
 - Mailer to ship back to pharmacy (<1%)
 - Used drug deactivation pouches (<1%)
 - Some other destruction method (2%)
- Two percent (2%) of Lorain County adults have used a program or service to help with alcohol or drug problems for either themselves or a loved one. Reasons for not using such a program included the following: had not thought of it (3%), could not afford to go (3%), stigma of seeking drug or alcohol services (1%), did not want to miss work (1%), did not know how to find a program (1%), did not have any openings (1%), fear (1%), insurance won't cover it (1%), did not want to get in trouble (<1%), transportation (<1%), and other reasons (3%). Ninety-three percent (93%) of adults indicated they did not need a program or service to help with drug problems.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Adults who used marijuana in the past 6 months	7%	10%	10%	N/A	N/A
Adults who used heroin in the past 6 months	1%	<1%	<1%	N/A	N/A
Adults who misused medications in the past 6 months	11%	11%	8%	N/A	N/A

N/A- Not Available

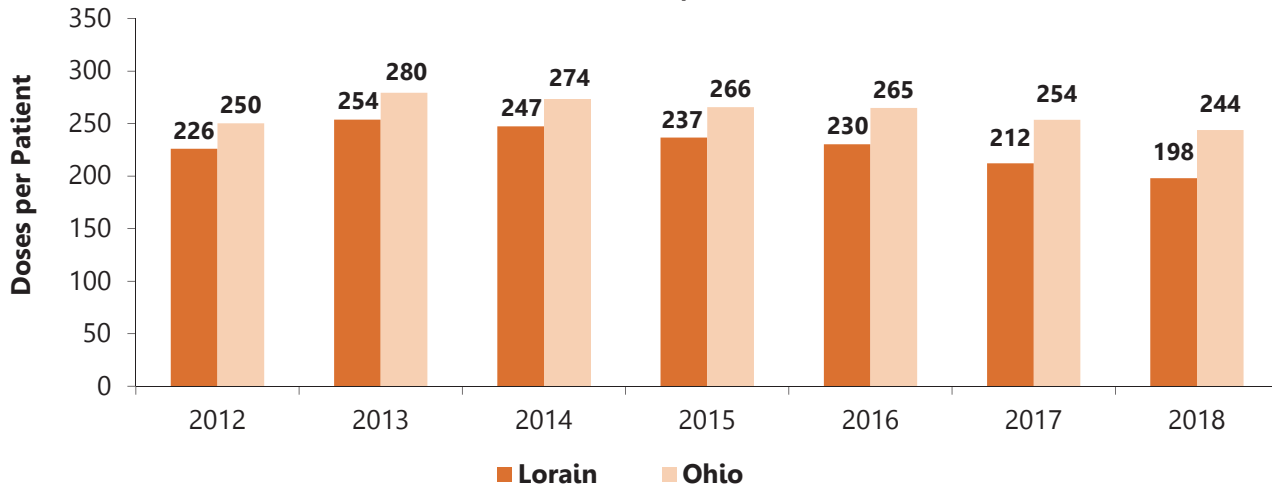
The following graphs indicate adult marijuana use and medication misuse in the past six months. Examples of how to interpret the information include: 10% of all Lorain County adults used marijuana in the past six months, including 13% of males and 17% of those under the age of 30.



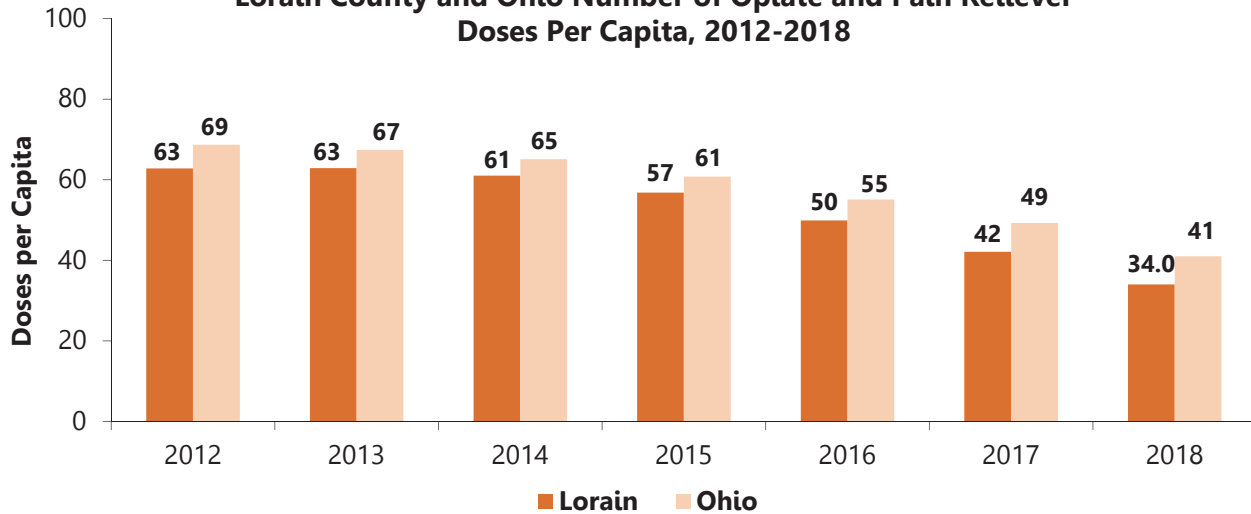
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show Lorain County and Ohio opiate and pain reliever doses per patient and doses per capita.

Lorain County and Ohio Number of Opiate and Pain Reliever Doses Per Patient, 2012-2018



Lorain County and Ohio Number of Opiate and Pain Reliever Doses Per Capita, 2012-2018



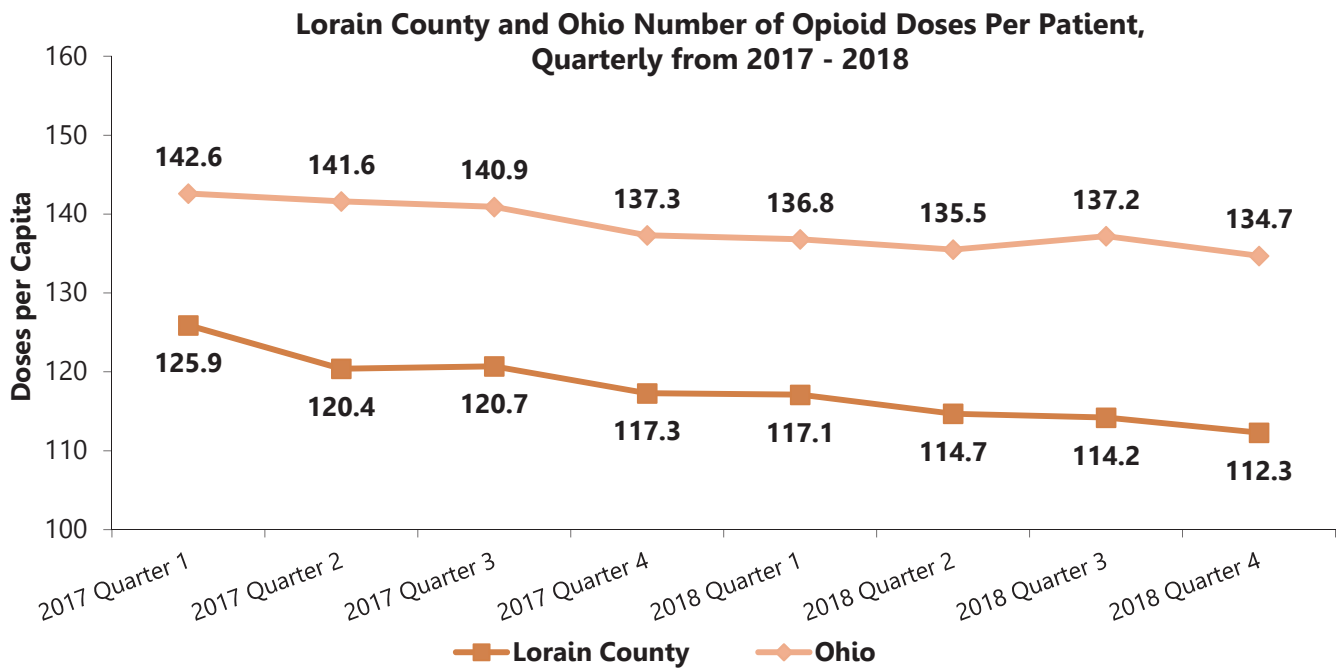
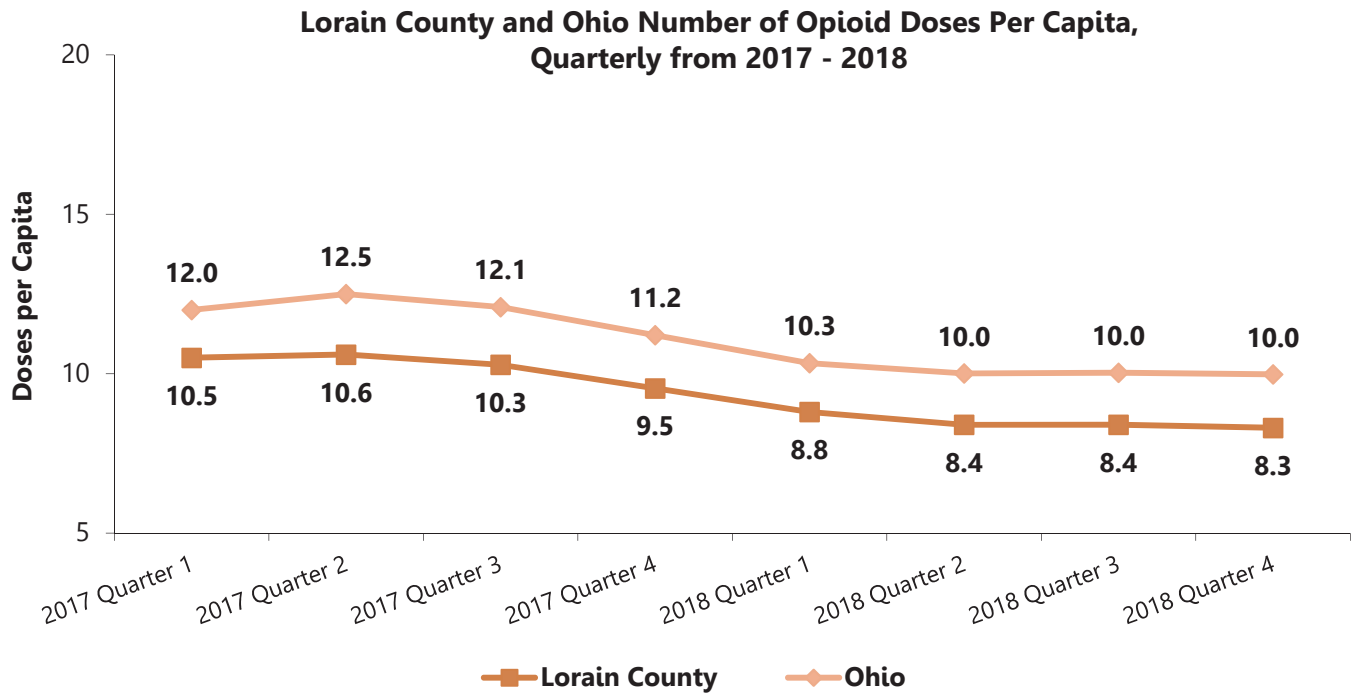
(Source for graphs: Ohio's Automated Rx Reporting System, 2012-2017, retrieved on 7/30/18)

Ohio Automated Rx Reporting System (OARRS)

- OARRS has been collecting information from all Ohio-licensed pharmacies and Ohio personal licensed prescribers regarding outpatient prescriptions for controlled substance since 2006.
 - All data reported is updated every 24 hours and is maintained in a secure database.
- OARRS aims to be a reliable tool in addressing prescription drug diversion and abuse.
- With many features such as a patient care tool, epidemic early warning system, drug diversion and insurance fraud investigation tool, OARRS is the only statewide electronic database that helps prescribers and pharmacists avoid potential life-threatening drug interactions.
 - OARRS also works in limiting patients who "doctor shop" which refers to individuals fraudulently obtaining prescriptions from multiple health care providers for the same or multiple prescription for abuse or illegal distribution.
- Additionally, OARRS is also used for investigating and identifying health care professionals with continual inappropriate prescribing and dispensing to patients, and then aids in law enforcement cases against such acts.

(Source: Ohio Automated RX Reporting System; What is OARRS?, updated August 2017)

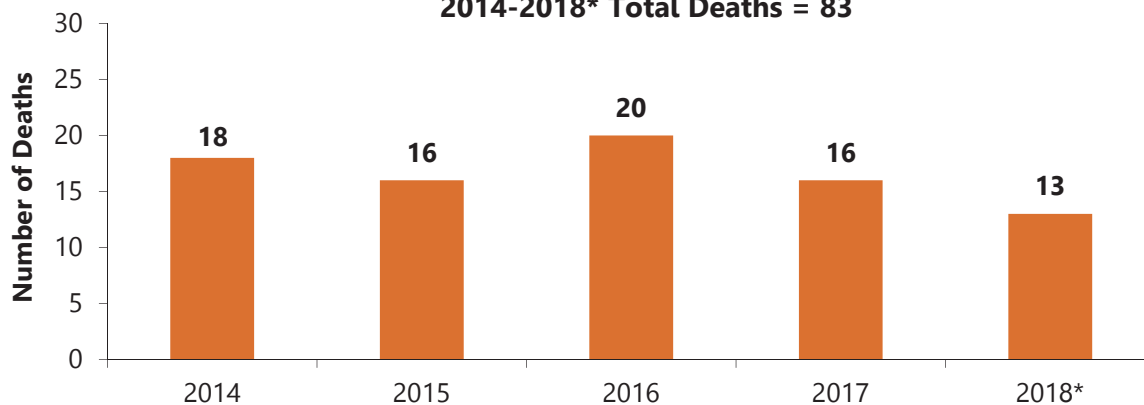
The following graph shows Lorain County and Ohio quarterly opioid doses per capita and opioid doses per patient.



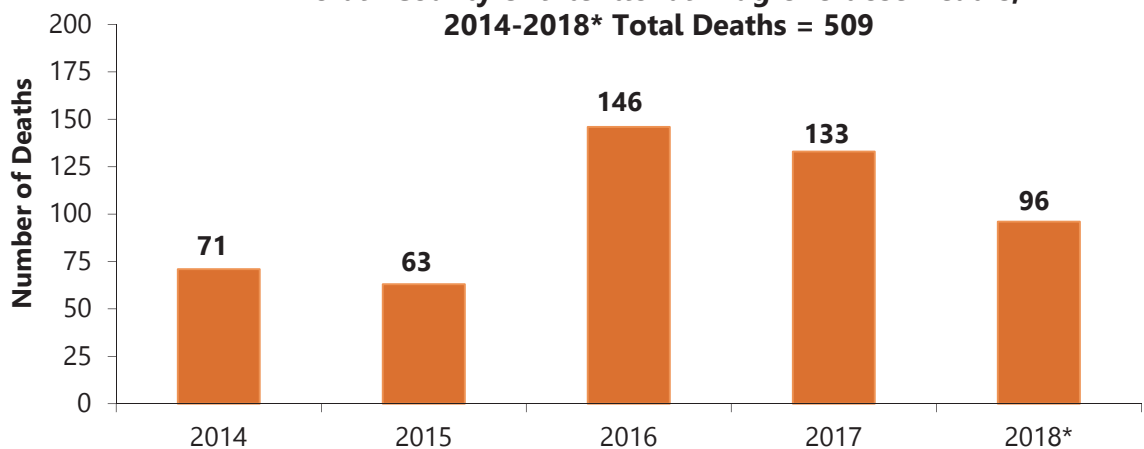
(Source for graphs: Ohio's Automated Rx Reporting System, 2017-2018, retrieved on 3/22/19)

The first two graphs show the prescription opiate related drug overdose deaths in Lorain County and the number of unintentional drug overdose deaths in Lorain County from 2014 to 2018. The third graph indicates unintentional fentanyl related deaths in Lorain County during the same time period.

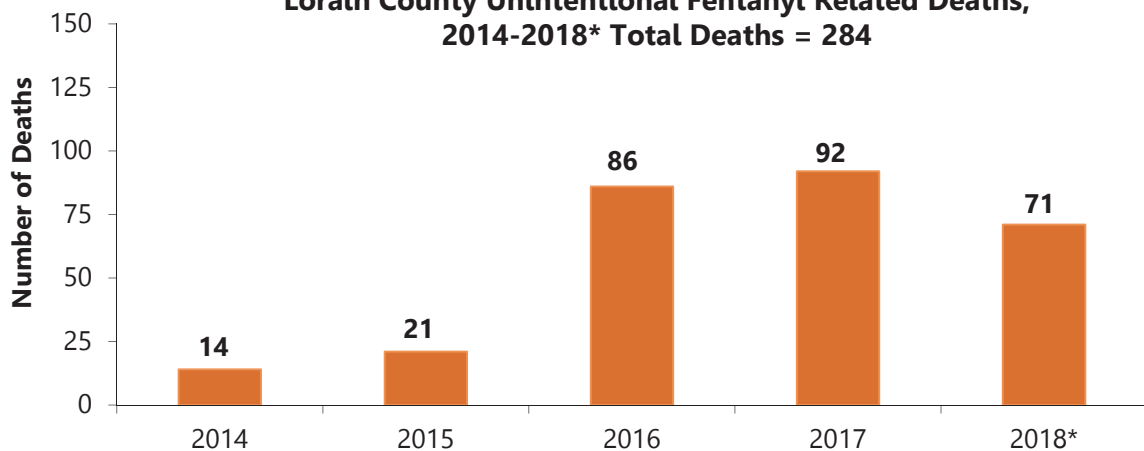
Lorain County Prescription Opiate Related Drug Overdose Deaths, 2014-2018* Total Deaths = 83



Lorain County Unintentional Drug Overdose Deaths, 2014-2018* Total Deaths = 509



Lorain County Unintentional Fentanyl Related Deaths, 2014-2018* Total Deaths = 284



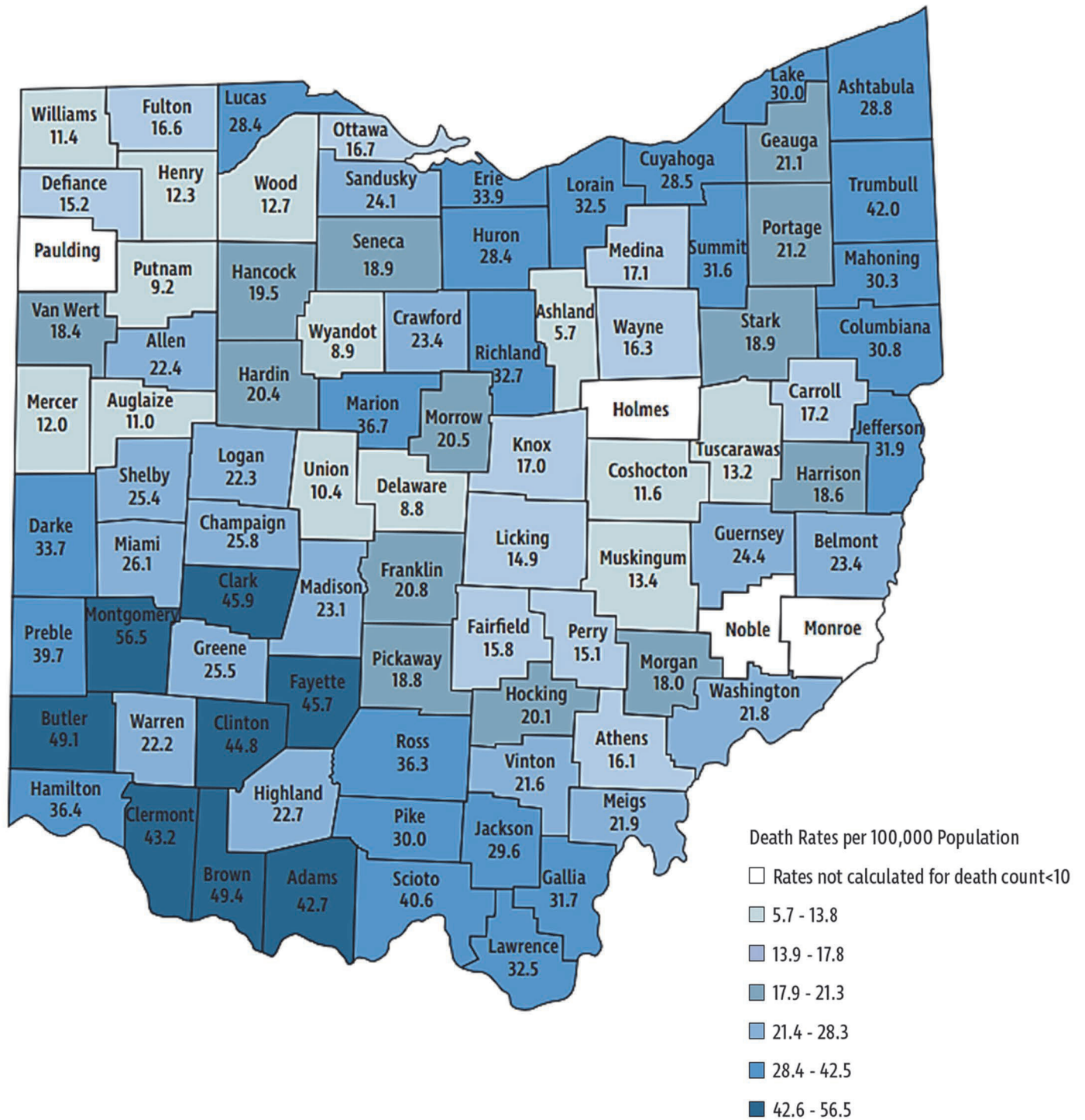
**Years with * are considered partial and may be incomplete*

(Source for graphs: Ohio Public Health Data Warehouse, 2014-2018)

Note: Resident deaths include individuals that resided in Lorain at the time of death regardless of where the death occurred

Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population, by County, 2012-2017

- Lorain County's age-adjusted unintentional drug overdose death rate for 2012-2017 was 32.5 deaths per 100,000 population.



(Source: Ohio Department of Health, 2017 Ohio Drug Overdose Data: General Findings)

Health Behaviors: Adult Sexual Behavior

Key Findings

In 2018, 69% of Lorain County adults had sexual intercourse. Seven percent (7%) of adults had more than one partner. Six percent (6%) of adults have been forced to have sexual intercourse when they did not want to, increasing to 10% of females.

Adult Sexual Behavior

- Over two-thirds (69%) of Lorain County adults had sexual intercourse in the past year.
- Seven percent (7%) of adults reported they had intercourse with more than one partner in the past year, increasing to 12% of those under the age of 30.
- Lorain County adults used the following methods the last time they had sex to keep from getting pregnant: no partner/not sexually active (abstinence) (20%); they or their partner were too old (16%); condoms (15%); vasectomy (12%); birth control pill (11%); hysterectomy (8%); tubes tied (7%); withdrawal (7%); infertility (4%); IUD (4%); ovaries or testicles removed (3%); having sex only at certain times (rhythm) (2%); diaphragm, cervical ring or cap (2%); contraceptive implants (1%); and other method (1%).
- Eleven percent (11%) of Lorain County adults did not use any method of birth control.
- The following situations applied to Lorain County adults in the past year:
 - Had sex with someone they met on social media (4%)
 - Had anal sex without a condom (2%)
 - Had sex with someone they did not know (2%)
 - Had four or more sexual partners (2%)
 - Had sexual activity with someone of the same gender (2%)
 - Were forced to have sex (1%)
 - Were given or received money or drugs in exchange for sex (1%)
- Six percent (6%) of adults have been forced to have sexual intercourse when they did not want to, increasing to 10% of females and 12% of those with incomes less than \$25,000.

Contraceptive Use in the United States (women aged 15-44)

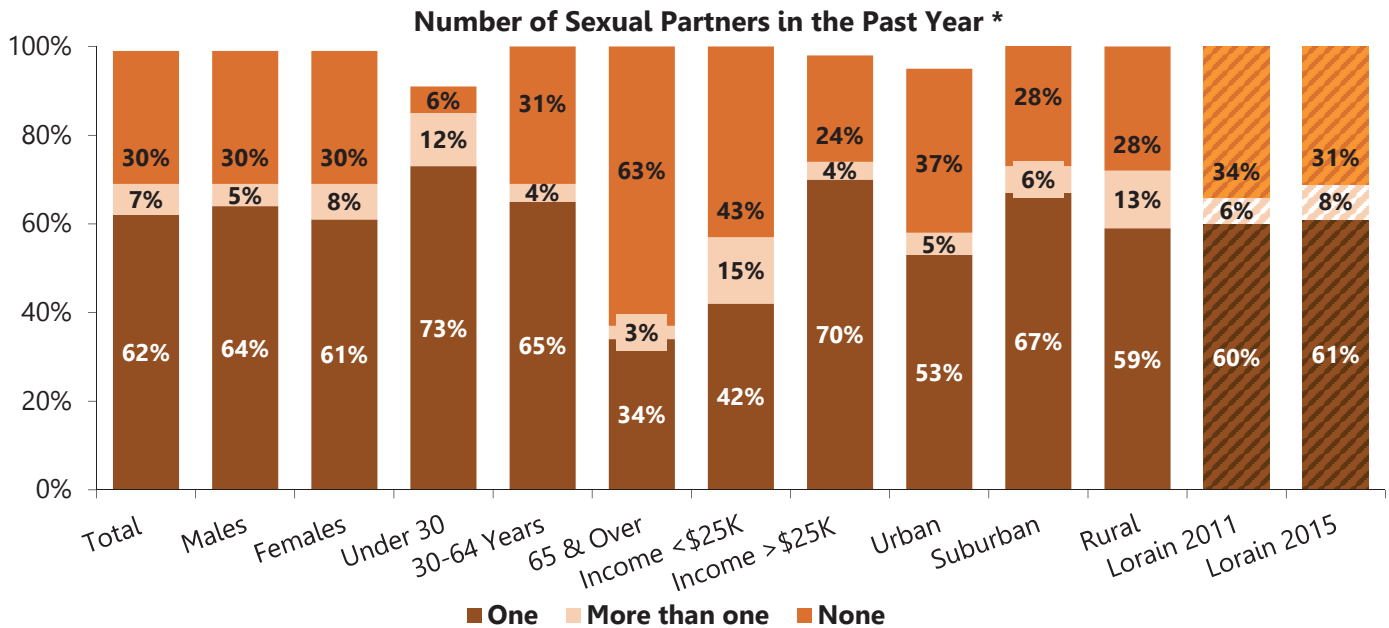
- Sixteen percent (16%) of women are currently using birth control pills.
- Eight percent (8%) of women are currently using long-acting reversible contraception such as an Intrauterine device or contraceptive implant.
- Fourteen percent (14%) of women are currently using female sterilization.
- Five percent (5%) of women are currently using male sterilization.

(Source: CDC, National Center for Health Statistics, Contraceptive Use, Last Updated July 15, 2016)

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Had more than one sexual partner in past year	6%	8%	7%	N/A	N/A

N/A – Not Available

The following graph shows the number of sexual partners of Lorain County adults. Examples of how to interpret the information in the graph include: 62% of all Lorain County adults had one sexual partner in the last 12 months, and 7% had more than one.



*Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"

Note: Percentages may not equal 100% as some respondents answered, "don't know"

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

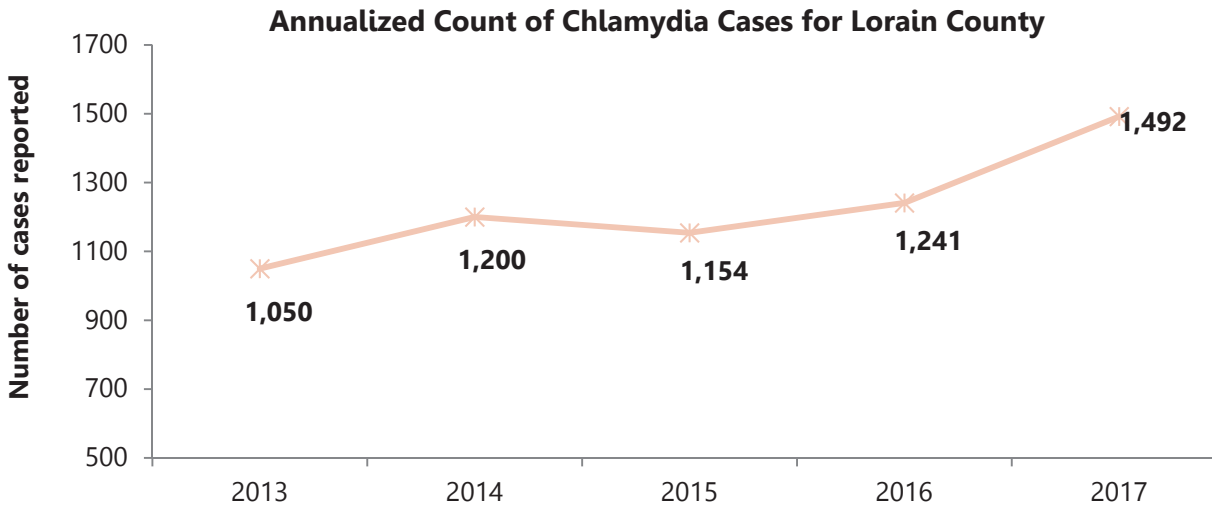
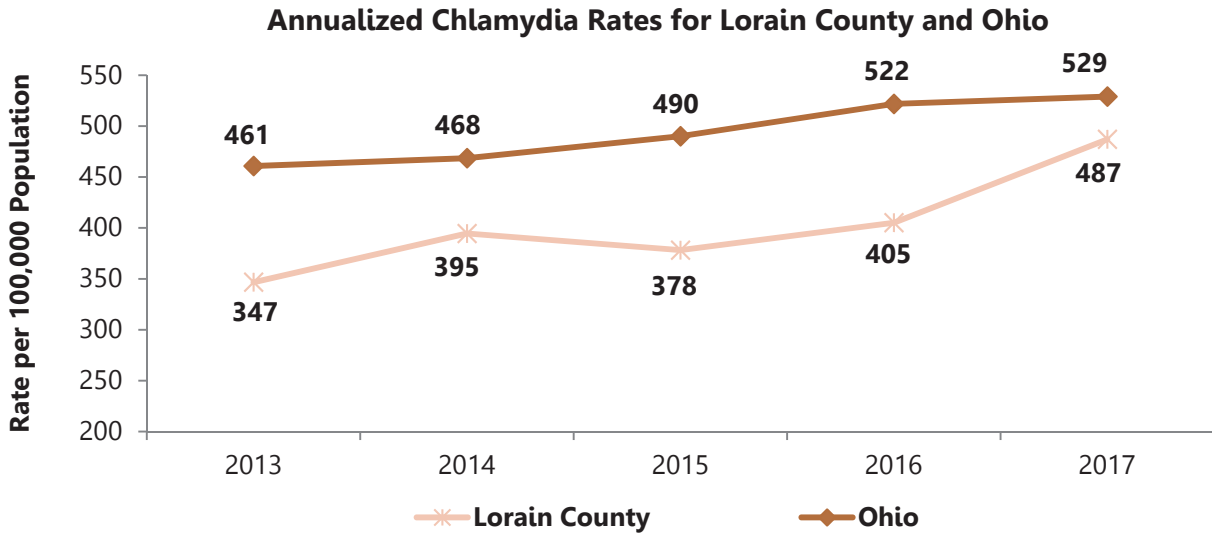
Understanding Sexual Violence

- Sexual violence is a very serious public health problem that affects millions of women and men. In the United States, 1 in 5 women have experienced completed or attempted rape, and about 1 in 15 men have been made to penetrate someone in their lifetime. Most victims first experienced sexual violence before the age of 25.
- Statistics underestimate the problem because many victims do not tell the police, family, or friends about the violence.
- Sexual violence is any sexual activity where consent is not freely given. This includes completed or attempted sex acts that are against the victims will or involve a victim who is unable to consent. Sexual violence also includes:
 - Unwanted sexual contact or
 - Non-contact, unwanted sexual experiences (such as verbal sexual harassment)
- Sexual violence can be committed by anyone including:
 - A current or former intimate partner
 - A family member
 - A person in position of power or trust
 - A friend or acquaintance
 - A stranger, or someone known only by sight
- Sexual violence impacts health in many ways and can lead to long-term physical and mental health problems. For example, victims may experience chronic pain, headaches, and sexually transmitted diseases. They are often fearful or anxious and may have problems trusting others. Anger and stress can lead to eating disorders, depression, and even suicidal thoughts.

(Source: CDC, Sexual Violence, Updated April 2018)

The following graphs show the Lorain County chlamydia rates per 100,000 population and the number of chlamydia cases. The graphs show:

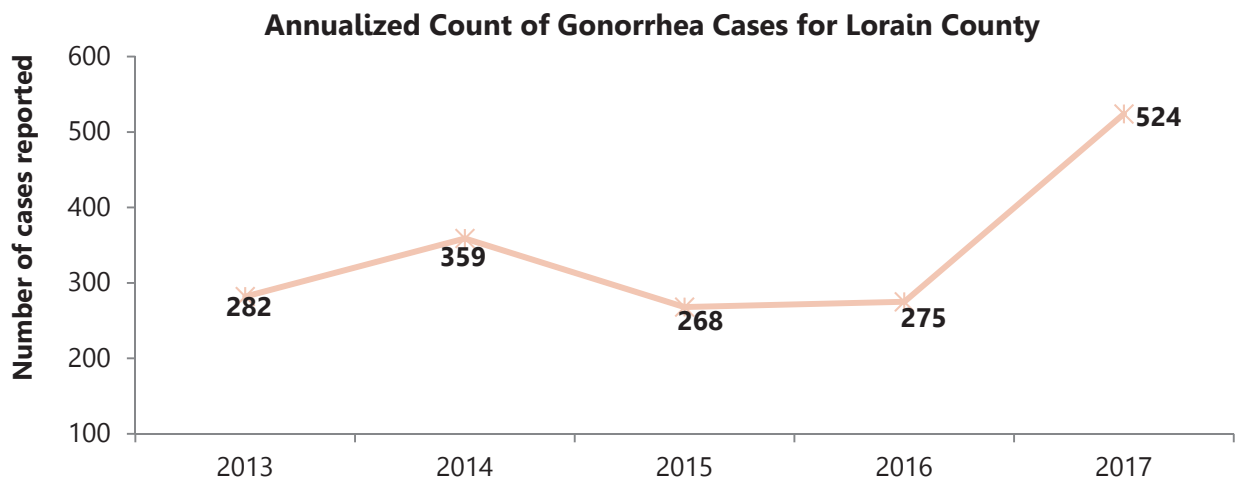
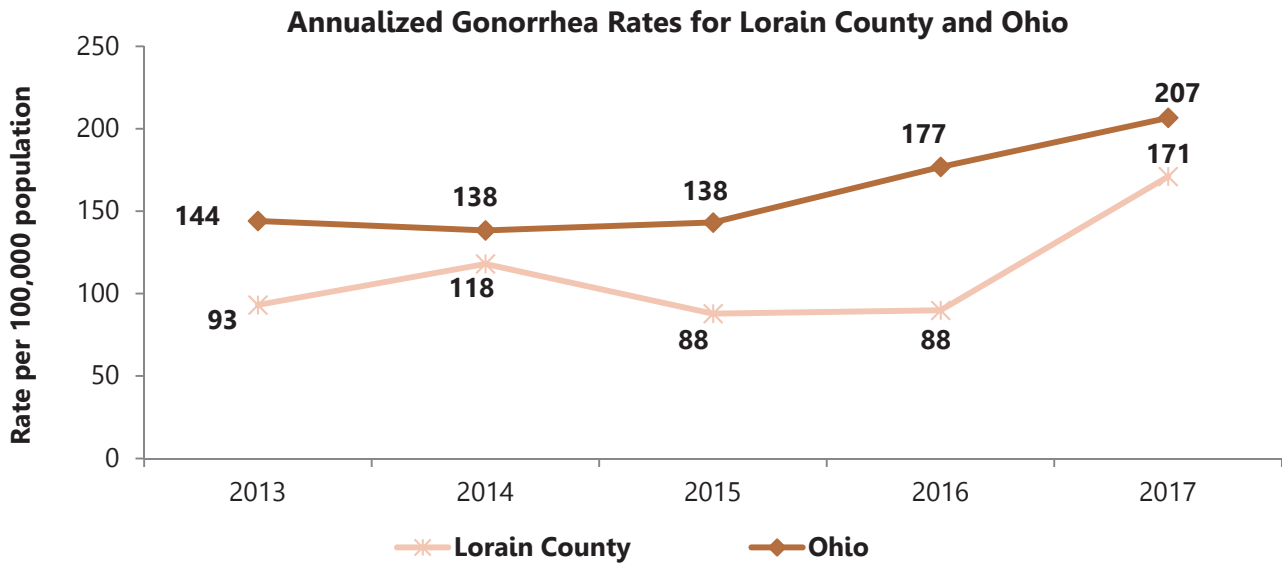
- Lorain County chlamydia rates fluctuated from 2013 to 2017.
- The number of chlamydia cases in Lorain County increased from 2015 to 2017.



(Source for graphs: ODH, STD Surveillance, data reported through 5/24/18)

The following graphs show the Lorain County gonorrhea rates per 100,000 population and the number of gonorrhea cases. The graphs show:

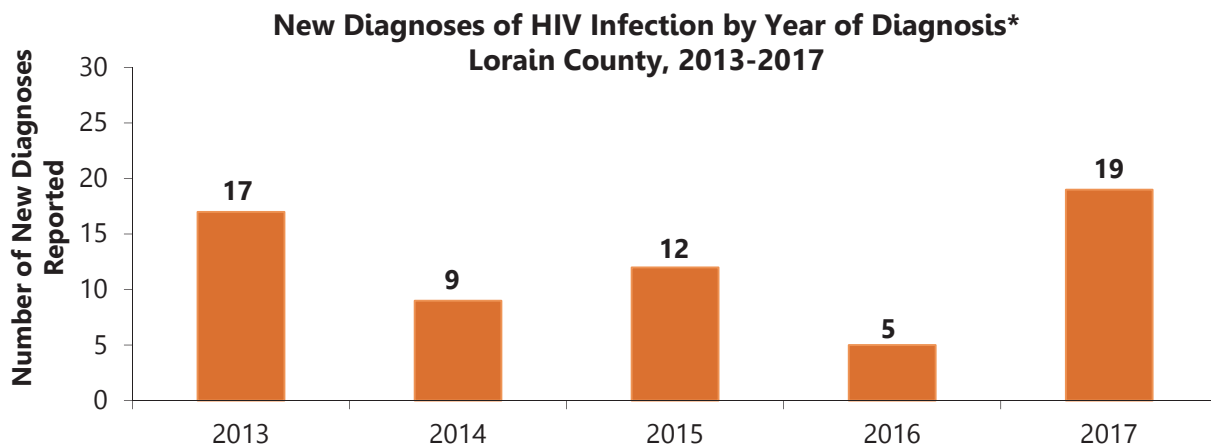
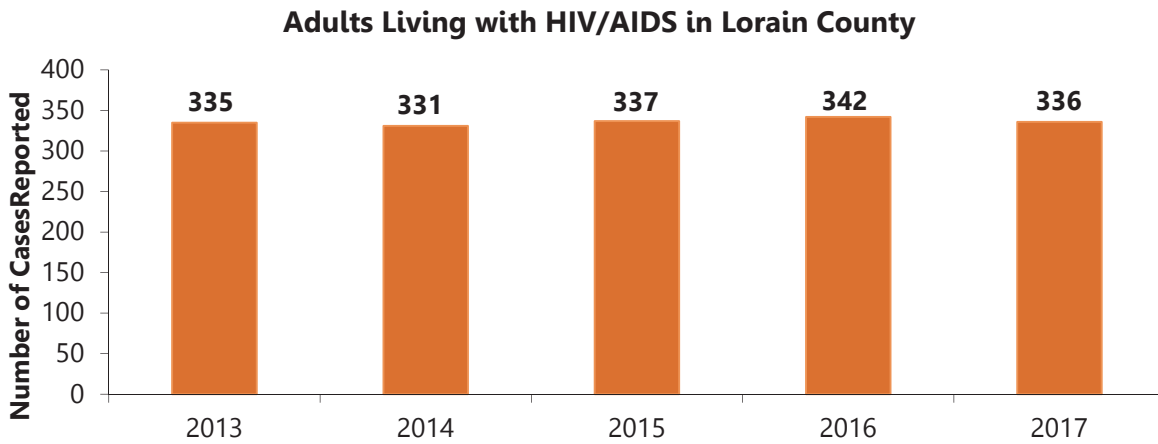
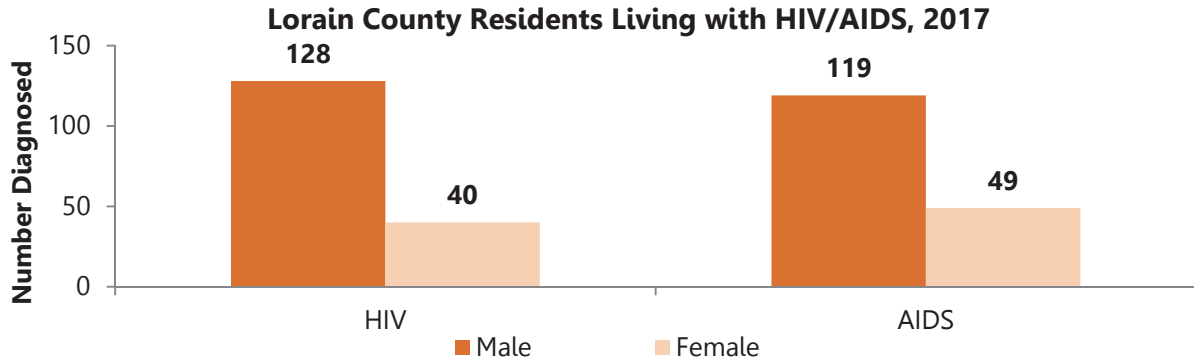
- The Lorain County gonorrhea rate fluctuated from 2013 to 2017.
- The number of gonorrhea cases in Lorain County increased from 2015 to 2016.



(Source for graphs: ODH, STD Surveillance, data reported through 5-24-18)

The first two graphs show the number of Lorain County residents living with HIV/AIDS by gender and year. The third graph indicates new diagnoses of HIV infection by year of diagnosis. The graphs show:

- In 2017, the number of Lorain County males living with HIV/AIDS was higher than Lorain County females.
- From 2013 to 2017, the number of people living with HIV/AIDS in Lorain County has relatively remained constant.



(Source for graphs: ODH, HIV Infections Annual Surveillance Statistics, updated June 30, 2018)

*Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnoses within 12 months (HIV & later AIDS), and a diagnosis of HIV and AIDS who were residents of Lorain County at time of initial diagnoses

Health Behaviors: Adult Mental Health

Key Findings

In 2018, 4% of Lorain County adults considered attempting suicide. Thirteen percent (13%) of Lorain County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems.

Adult Mental Health

- In the past year, 13% of Lorain County adults felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- Four percent (4%) of Lorain County adults considered attempting suicide in the past year.
- One percent (1%) of adults reported attempting suicide in the past year.
- Lorain County adults indicated that if they knew someone who was suicidal they would do the following: talk to them (71%), try to calm them down (58%), call 911 (52%), call a crisis line (HOPE Line or HELP Line) (50%), take them to the ER (25%), call their spiritual leader (16%), call a friend (14%), and text a crisis line (8%). Two percent (2%) of adults said they would do nothing.
- Lorain County adults indicated the following caused them anxiety, stress or depression: job stress (40%), financial stress (37%), poverty/no money (22%), marital/dating relationship (18%), death of close family member or friend (18%), other stress at home (16%), sick family member (15%), fighting at home (11%), caring for parents (10%), family member with a mental illness (9%), unemployment (7%), not having enough to eat (5%), not feeling safe in the community (3%), not having a place to live (2%), sexual orientation/gender identity (2%), divorce/separation (2%), not feeling safe at home (2%), and other (15%).
- Lorain County adults dealt with their stress in the following ways: talking to someone they trust (52%), listening to music (40%), prayer/meditation (36%), exercising (35%), eating more or less than normal (33%), sleeping (29%), working (25%), working on a hobby (23%), drinking alcohol (16%), smoking tobacco (8%), taking it out on others (7%), use prescription drugs as prescribed (5%), call a professional (3%), using illegal drugs (3%), misuse prescription drugs (1%), self-harm (<1%), and others ways (10%).
- Thirteen percent (13%) of Lorain County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems. Reasons for not using such a program included the following: other priorities (7%), stigma of seeking mental health services (5%), did not know how to find a program (5%), fear (5%), co-pay/deductible too high (5%), had not thought of it (4%), could not afford to go (3%), took too long to get in to see a doctor (2%), transportation (1%), could not get to the office (1%), and other reasons (4%). Eighty-one percent (81%) of adults indicated they did not need such a program.

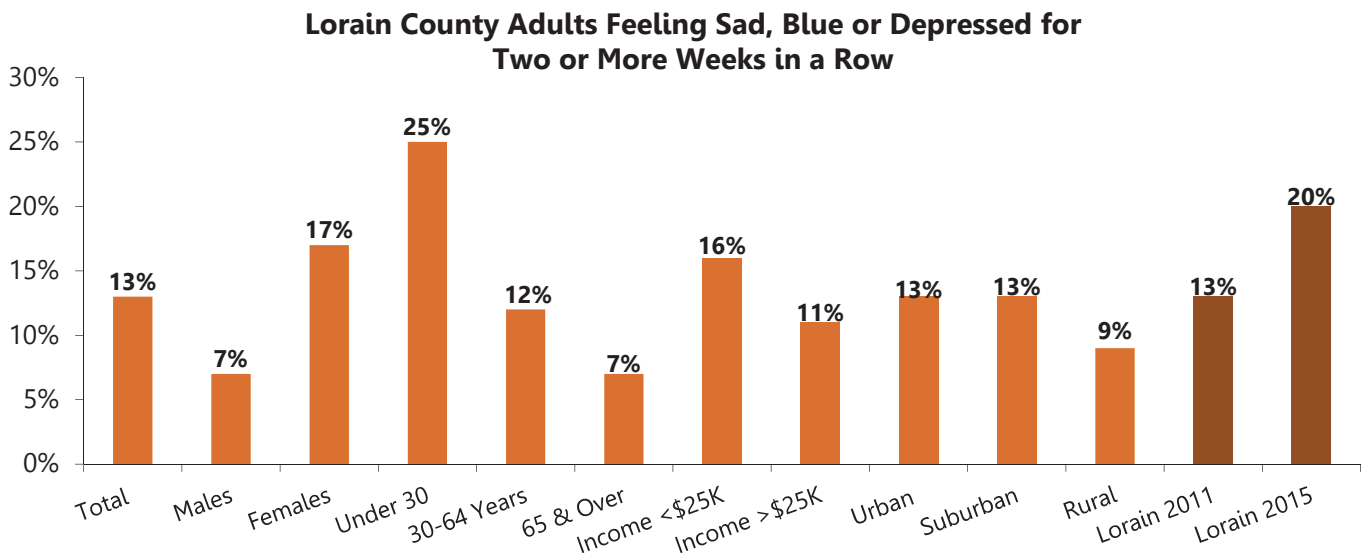
National Suicide Statistics

- 47,173 people in the U.S. died from suicide, and 1,179,325 people attempted suicide in 2017.
- An average of one person killed themselves every 11.1 minutes.
- Suicide is the 10th ranking cause of death in the U.S.
- For every female death by suicide, there are 3.5 male deaths.
- In 2017, there were 1,740 suicide deaths in Ohio.
- The leading suicide methods included:
 - Firearm suicides (50.6%)
 - Suffocation/Hanging (27.7%)
 - Poisoning (13.9%)
 - Cutting/Piercing (1.8%)
 - Drowning (1.0%)

(Source: American Association of Suicidology, Facts & Statistics, 2017, Updated December 2018)

- Lorain County adults reported they or a family member were diagnosed with, or treated for, the following mental health issues:
 - Depression (22%)
 - Anxiety disorder (i.e., panic attacks, phobia, obsessive compulsive disorder) (20%)
 - Anxiety or emotional problems (18%)
 - Attention deficit disorder (ADD/ADHD) (9%)
 - Bipolar disorder (8%)
 - Post-traumatic stress disorder (PTSD) (5%)
 - Alcohol use disorder (5%)
 - Developmental disability (5%)
 - Substance abuse disorder (5%)
 - Autism spectrum (5%)
 - Other mental health disorder (5%)
 - Eating disorder (3%)
 - Psychotic disorder (i.e., schizophrenia, schizoaffective disorder) (3%)
 - Other trauma (3%)
 - Life-adjustment disorder (2%)
 - Problem gambling (2%)
 - Personality disorder (2%)
- More than one-fifth (21%) of adults indicated they or a family member had taken medication for one or more mental health issues.

The following graph shows the percentage of Lorain County adults who felt sad or depressed for two or more weeks in a row in the past year. Examples of how to interpret the information include: 13% of all Lorain County adults felt sad or depressed for two or more weeks in a row, including 25% of those under 30 years old, and 16% of those with incomes less than \$25,000.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey

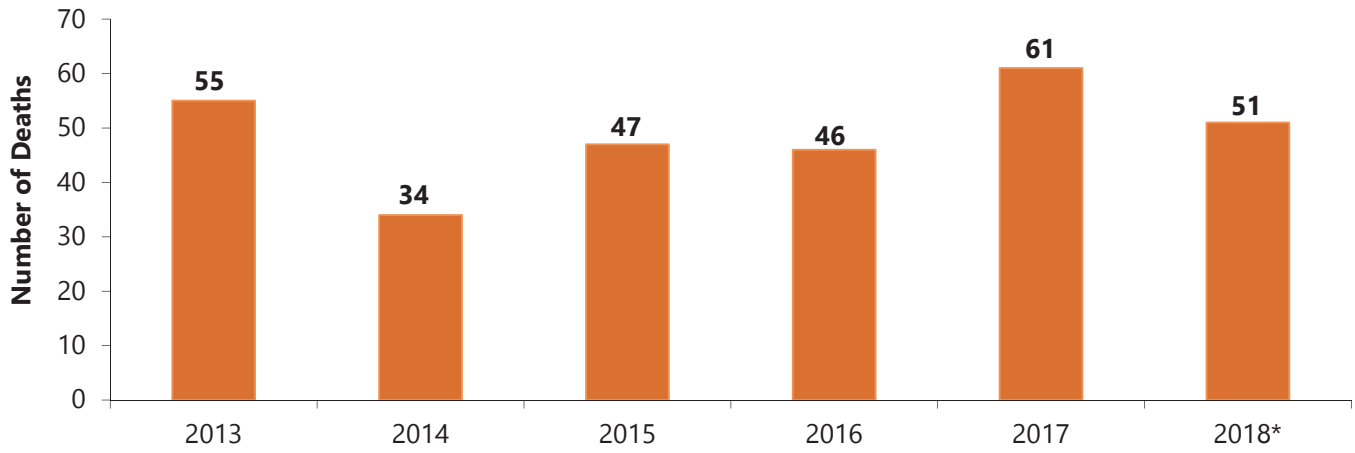
Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Considered attempting suicide (in the past 12 months)	4%	3%	4%	N/A	N/A
Attempted suicide (in the past 12 months)	<1%	1%	1%	N/A	N/A
Two or more weeks in a row felt sad, blue or depressed	13%	20%	13%	N/A	N/A

N/A- Not Available

The graph below shows the Lorain County suicide counts by year. The graph shows:

- From 2013 to 2018, there was an average of 49 suicides per year in Lorain County.

Lorain County Number of Suicide Deaths By Year, 2013-2018*
Total Deaths= 294



** Data for 2018 is partial and incomplete, and should be used with caution
(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 1/9/19)*

National Suicide Statistics

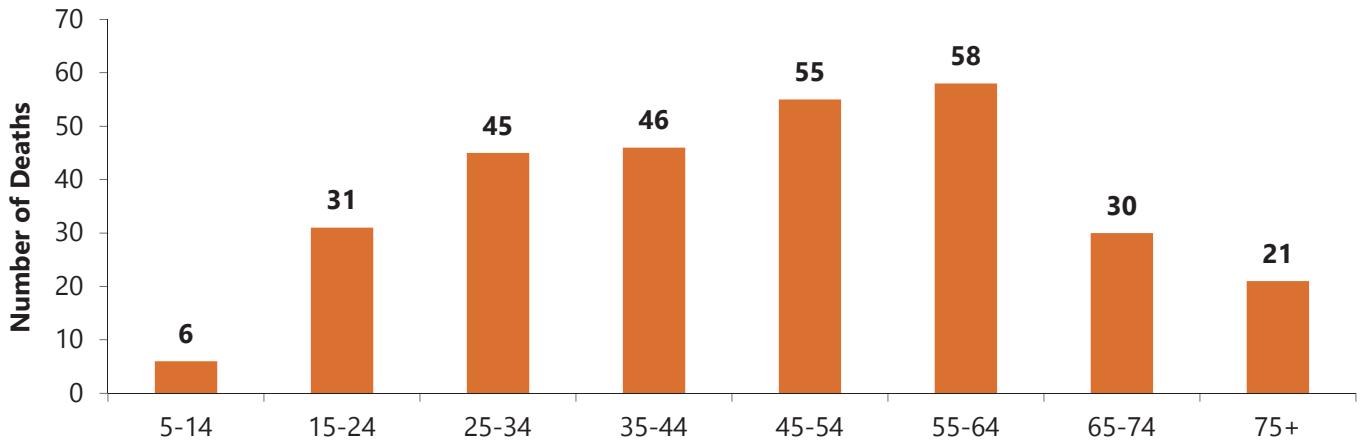
- Suicide is the 10th leading cause of death in the United States
- In 2017, 47,173 Americans died by suicide
 - The age adjusted rate in 2017 was 14.0 per 100,000 individuals
 - Men died from suicide 3.54x more often than women in 2017
 - White males accounted for 69.67% of suicide deaths in 2017
 - In particular, the highest rate of suicide is within middle-aged white men
- Firearms accounted for 50.57% of all suicide deaths in 2017. The second most common method was suffocation at 27.72%
- In 2017, there was an estimated 1,400,000 suicide attempts
- In 2015, suicide and self-injury cost the United States \$69 billion

(Sources: American Association of Suicidology, Facts & Statistics, 2017 retrieved May 2019)

The graphs below show the Lorain County suicide counts by age group and gender. The graphs show:

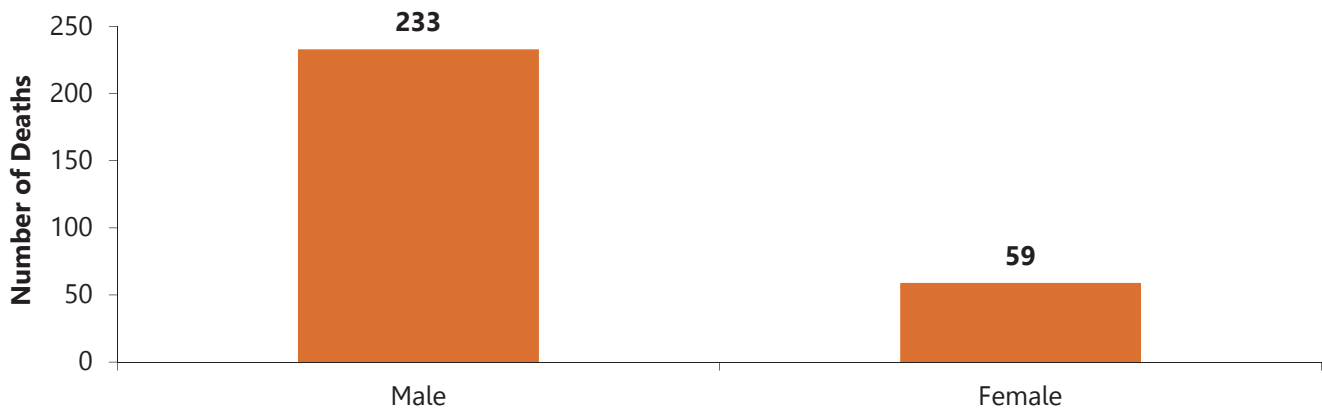
- From 2013 to 2018, 38% of all suicide deaths occurred in those ages 45 to 64 years old.
- From 2013 to 2018, the number of male suicide deaths in Lorain County was nearly four times higher than females.

Lorain County Number of Suicide Deaths By Age Group, 2013-2018*
Total Deaths = 294



** Data for 2018 are partial and incomplete, and should be used with caution*

Lorain County Number of Suicide Deaths By Gender, 2013-2018*
Total Deaths = 294



**Data for 2018 are partial and incomplete, and should be used with caution
(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 1/9/19)*

Chronic Disease: Cardiovascular Health

Key Findings

Five percent (5%) of adults had survived a heart attack and 3% had survived a stroke at some time in their life. Almost two-fifths (38%) of Lorain County adults were obese, 34% had high blood pressure, 34% had high blood cholesterol, and 12% were current smokers, four known risk factors for heart disease and stroke.

Heart Disease and Stroke

- Five percent (5%) of Lorain County adults reported they had survived a heart attack or myocardial infarction, increasing to 10% of those over the age of 65.
- Three percent (3%) of adults reported they had survived a stroke, increasing to 8% of those over the age of 65.
- Five percent (5%) of adults reported they had angina or coronary heart disease, increasing to 13% of those over the age of 65.
- One percent (2%) of adults reported they had congestive heart failure, increasing to 4% of those over the age of 65.

High Blood Pressure (Hypertension)

- More than one-third (34%) of adults had been diagnosed with high blood pressure.
- Eighty-nine percent (89%) of adults had their blood pressure checked within the past year.
- Lorain County adults diagnosed with high blood pressure were more likely to:
 - Have been age 65 years or older (63%)
 - Have annual household incomes of less than \$25,000 (44%)
 - Live in an urban area (44%)
 - Be male (40%)

High Blood Cholesterol

- Thirty-four percent (34%) of adults had been diagnosed with high blood cholesterol.
- Eighty percent (80%) of adults had their blood cholesterol checked within the past 5 years.
- Lorain County adults with high blood cholesterol were more likely to:
 - Have been age 65 years or older (56%)
 - Have been classified as obese by body mass index (BMI) (42%)
 - Be male (40%)
 - Live in an urban area (36%)

Lorain County Leading Causes of Death, 2015-2017

Total Deaths: 9,429

1. Cancers (22% of all deaths)
2. Heart Diseases (21%)
3. Accidents, Unintentional Injury (8%)
4. Chronic Lower Respiratory Diseases (7%)
5. Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

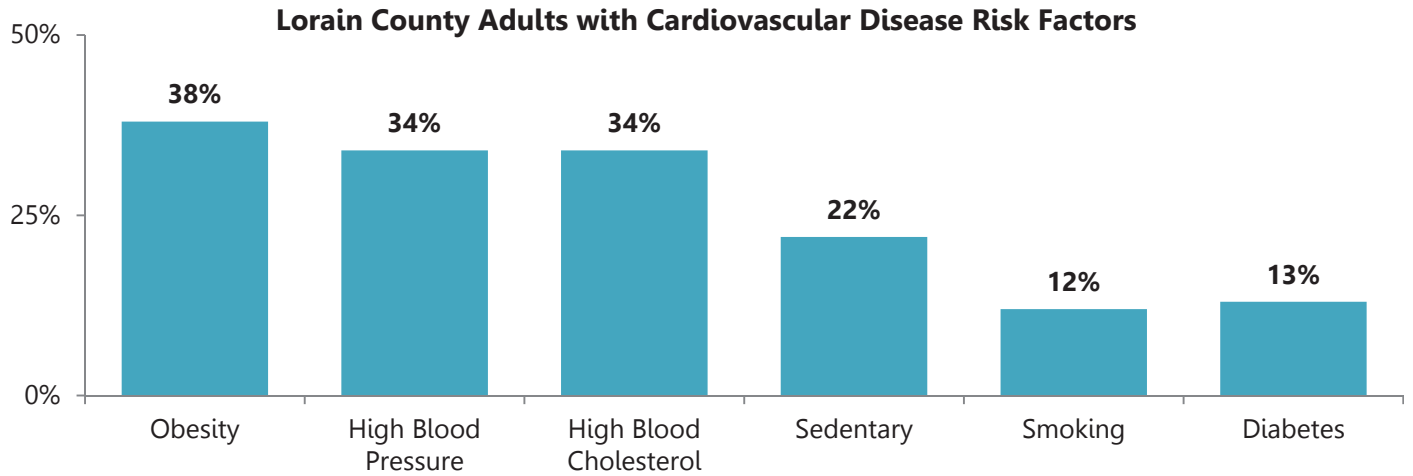
Ohio Leading Causes of Death, 2015-2017

Total Deaths: 361,238

1. Heart Diseases (23% of all deaths)
2. Cancers (21%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2015-2017)

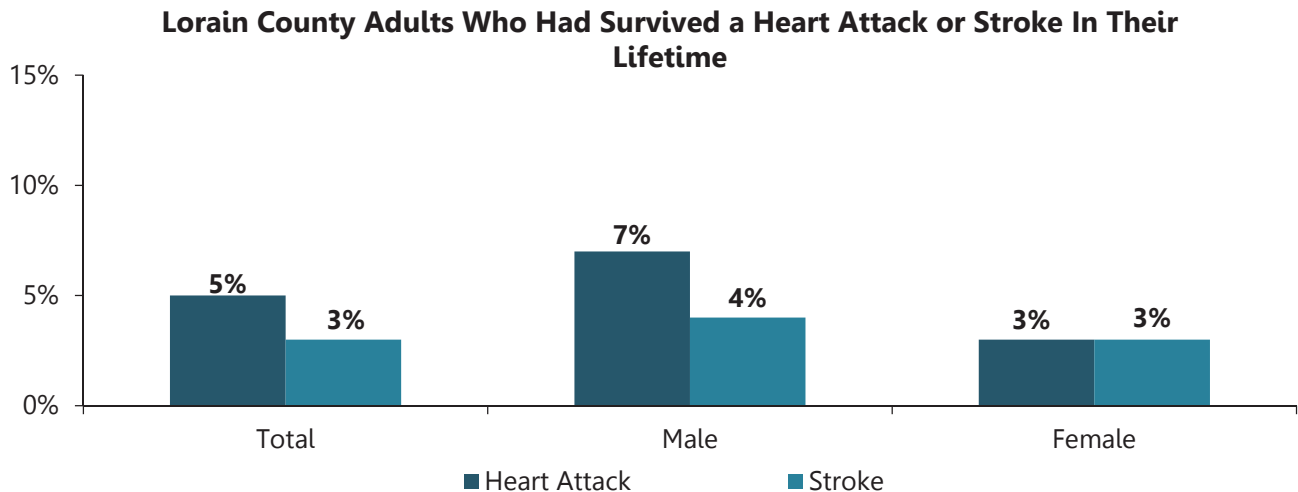
The following graph demonstrates the percentage of Lorain County adults who had major risk factors for developing cardiovascular disease (CVD).



Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Ever diagnosed with angina or coronary heart disease	6%	6%	5%	5%	4%
Ever diagnosed with a heart attack, or myocardial infarction	6%	3%	5%	6%	4%
Ever diagnosed with a stroke	2%	4%	3%	4%	3%
Had been told they had high blood pressure	35%	36%	34%	35%	32%
Had been told their blood cholesterol was high	36%	33%	34%	33%	33%
Had blood cholesterol checked within the past 5 years	N/A	82%	80%	85%	86%

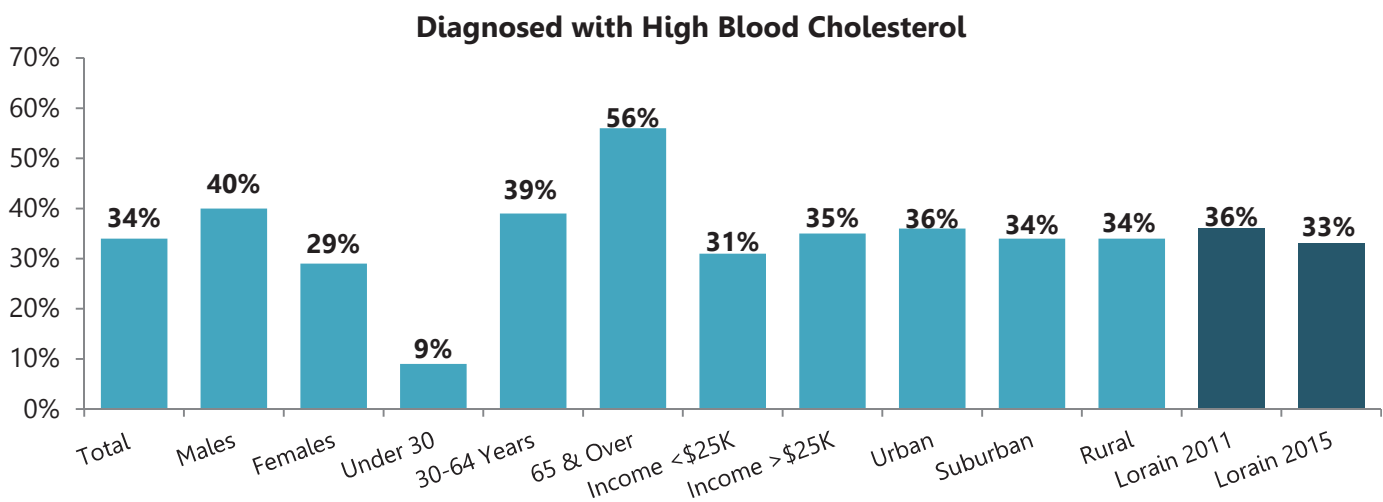
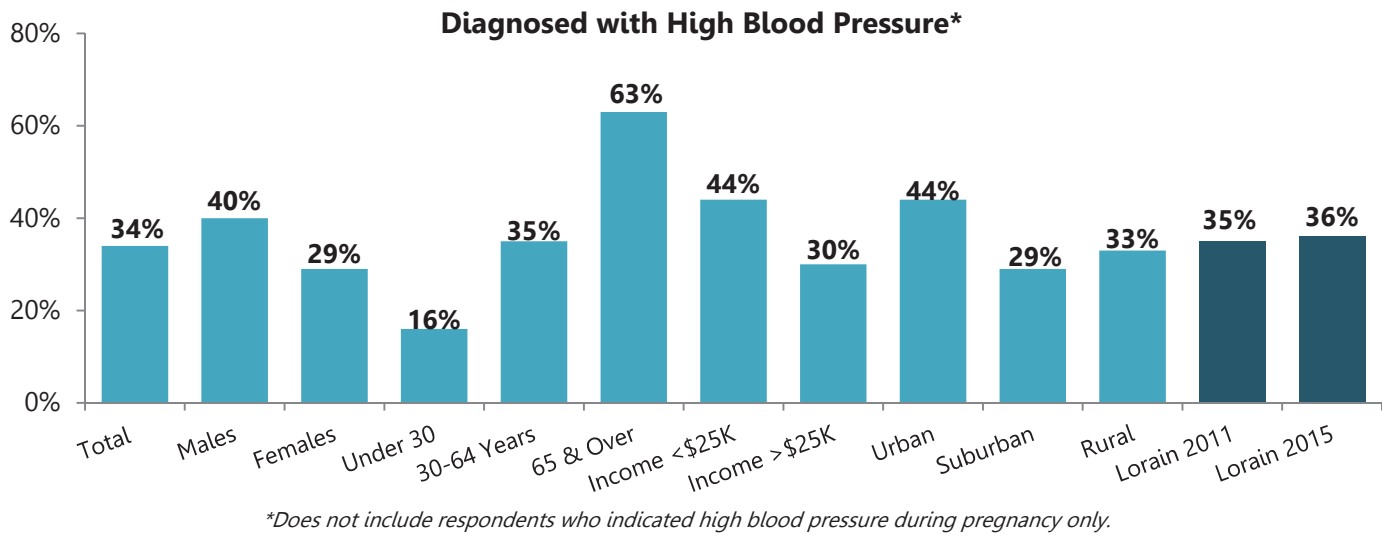
N/A- Not Available

The following graph shows the percentage of Lorain County adults who had survived a heart attack or stroke in their lifetime by gender. An example of how to interpret the information includes: 7% of Lorain County males survived a heart attack compared to 3% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs show the percent of Lorain County adults who had been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 34% of all Lorain County adults had been diagnosed with high blood pressure, including 40% of males and 63% of those 65 years and older.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

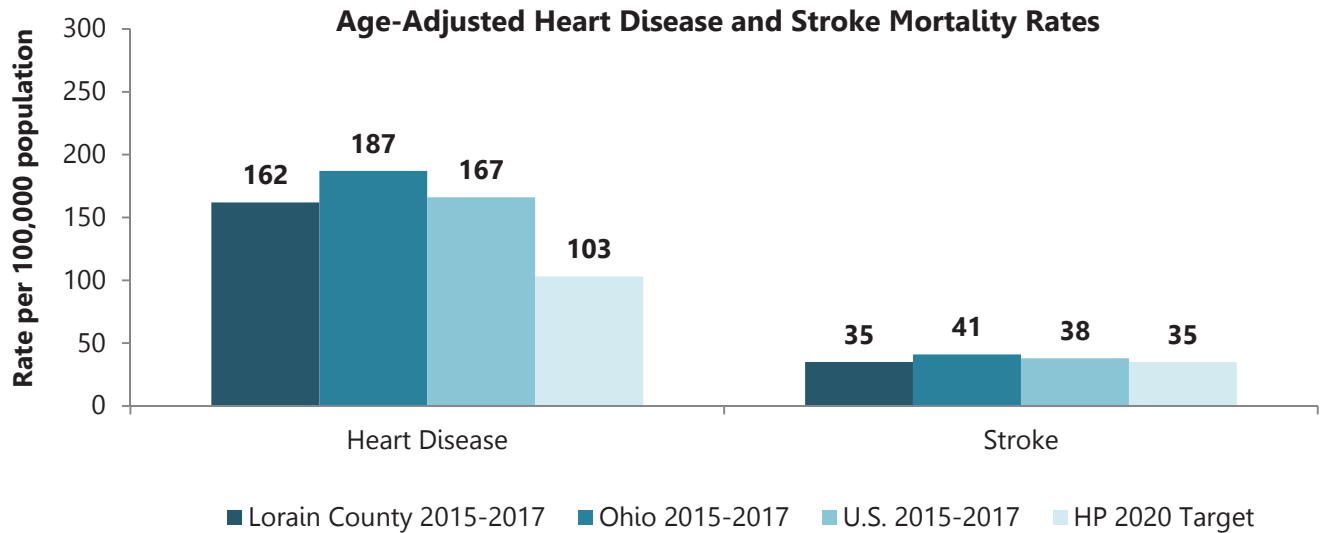
Lorain County Adult Health Screening Results*

General Screening Results	Total
Diagnosed with High Blood Cholesterol	34%
Diagnosed with High Blood Pressure	34%
Diagnosed with Diabetes	13%
Survived a Heart Attack	5%
Survived a Stroke	3%

*Note: Percentages based on all Lorain County adults surveyed

The following graph shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- When age differences are accounted for, the statistics indicate that from 2015 to 2017, the Lorain County heart disease mortality rate was lower than the Ohio rate and U.S. rate. However, the Lorain County heart disease rate was significantly higher than the Healthy People 2020 target objective.
- The Lorain County age-adjusted stroke mortality rate from 2015 to 2017 was lower than the state rate, the U.S. rate, and equal to the Healthy People 2020 target objective.



(Source: Ohio Public Health Data Warehouse, 2015-2017, CDC Wonder, 2015-2017 and Healthy People 2020)

Healthy People 2020 Objectives Heart Disease and Stroke

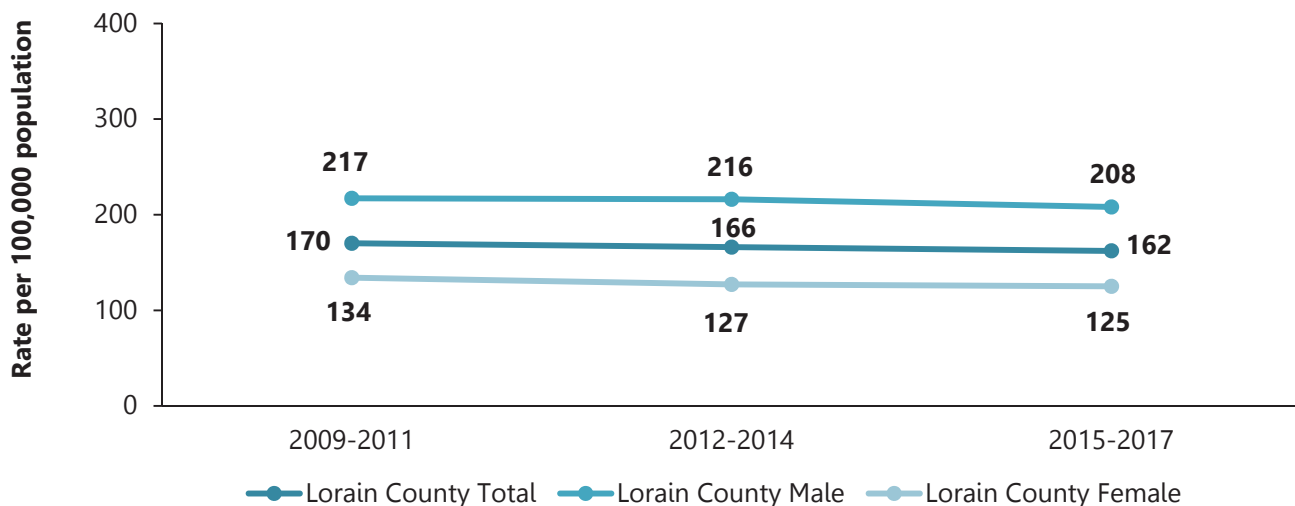
Objective	2018 Lorain Survey Population Baseline	2017 U.S. Baseline	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	36% (2018)	32% Adults age 18 and up	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	82% (2018)	86% Adults age 18 and up	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	33% (2018)	33% Adults age 20+ with TBC > 240 mg/dl	14%

Note: All U.S. figures age-adjusted to 2000 population standard
*2015 BRFSS data
(Source: Healthy People 2020, 2017 BRFSS, 2018 Lorain County Health Assessment)

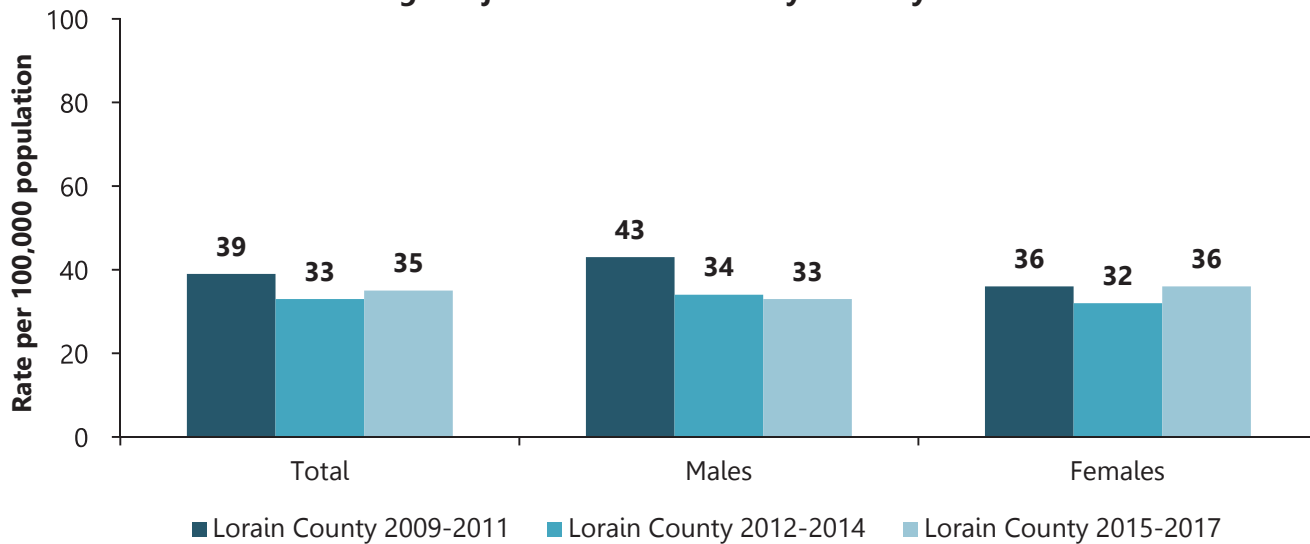
The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender.

- From 2009 to 2017, the total Lorain County age adjusted heart disease mortality rate, as well as the female and male heart disease mortality rate, all decreased.
- From 2015 to 2017, the Lorain County stroke mortality rate was higher for females in comparison to males.

Lorain County Age-Adjusted Heart Disease Mortality Rates by Gender



Age-Adjusted Stroke Mortality Rates by Gender



(Source for graphs: Ohio Public Health Data Warehouse, 2009-2017)

Chronic Disease: Cancer

Key Findings

From 2015 to 2017, cancers caused 22% (2,066 of 9,429 total deaths) of all Lorain County resident deaths.

Cancer Facts

- The Ohio Public Health Data Warehouse indicates that from 2015-2017, cancers caused 22% (2,066 of 9,429 total deaths) of all Lorain County resident deaths. The largest percent (29%) of 2015-2017 cancer deaths were from lung and bronchus cancers (Source: Ohio Public Health Data Warehouse, 2015-2017).

Lung Cancer

- In Lorain County, 9% of male adults were current smokers, and 59% had tried to quit smoking in the past year.
- Approximately 14% of female adults in Lorain County were current smokers, and 22% had tried to quit smoking in the past year.
- The Ohio Public Health Data Warehouse reports that lung cancer was the leading cause of male cancer deaths (n=334) and female cancer deaths (n=273) from 2015-2017 in Lorain County. (Source: Ohio Public Health Data Warehouse, 2015-2017).
- According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. Men and women who smoke are about 15-30 times more likely to develop lung cancer than nonsmokers (Source: American Cancer Society, Facts & Figures 2018).

Breast Cancer

- In 2018, 58% of Lorain County females reported having had a clinical breast examination in the past year.
- Fifty-five percent (55%) of Lorain County females over the age of 40 had a mammogram in the past year.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommend that those 40 to 44 years of age have the option to begin annual mammography, those 45 to 54 should undergo annual mammography, and those 55 years of age and older may transition to biennial mammography or continue annual mammography. Women should continue mammography as long as overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual magnetic resonance imaging (MRI) is recommended in addition to mammography, typically starting at age 30. (Source: American Cancer Society, Facts & Figures 2019).

Prostate Cancer

- More than half (51%) of Lorain County males had a prostate-specific antigen (PSA) test at some time in their life, and 29% had one in the past year.
- Fifty-eight percent (58%) of men had a digital rectal exam in their lifetime and 21% had one in the past year.
- The Ohio Public Health Data Warehouse indicate that prostate cancer deaths accounted for 9% of all male cancer deaths from 2015-2017 in Lorain County (Source: Ohio Public Health Data Warehouse, 2015-2017).

Lorain County Incidence of Cancer, 2011-2015

All Types: 8,724 cases

- Lung and Bronchus: 1,316 cases (15%)
- Breast: 1,268 (15%)
- Prostate: 1,139 cases (13%)
- Colon and Rectum: 783 cases (9%)

From 2015-2017, there were 2,066 cancer deaths in Lorain County.

(Source: Ohio Cancer Incidence, ODH Ohio Public Health Data Warehouse, Updated 1/14/19)

- No organizations presently endorse routine prostate cancer screening for men at average risk because of concerns about the high rate of overdiagnosis (detecting disease that would never have caused symptoms), along with the significant potential for serious side effects associated with prostate cancer treatment. The American Cancer Society recommends that beginning at age 50, men who are at average risk of prostate cancer and have a life expectancy of at least 10 years have a conversation with their health care provider about the benefits and limitations of PSA testing and make an informed decision about whether to be tested based on their personal values and preferences. Men at high risk of developing prostate cancer (black men or those with a close relative diagnosed with prostate cancer before the age of 65) should have this discussion beginning at age 45, and men at even higher risk (those with several close relatives diagnosed at an early age) should have this discussion beginning at age 40 *(Source: American Cancer Society, Facts & Figures 2019)*.

Colon and Rectal Cancers

- Nearly two-fifths (39%) of Lorain County adults over the age of 50 reported having been screened for colorectal cancers in the past 2 years.
- The Ohio Public Health Data Warehouse indicate that colon and rectal cancer deaths accounted for 9% of all male and female cancer deaths from 2015-2017 in Lorain County *(Source: Ohio Public Health Data Warehouse, 2015-2017)*.
- Modifiable factors that increase colon and rectum cancer risk include obesity, physical inactivity, long-term smoking, high consumption of red or processed meat, low calcium intake, moderate to heavy alcohol consumption, and very low intake of fruits and vegetables and whole-grain fiber. Hereditary and medical factors that increase risk include a personal or family history of colorectal cancer and/or polyps, certain inherited genetic conditions, a personal history of chronic inflammatory bowel disease, and type 2 diabetes. *(Source: American Cancer Society, Facts & Figures 2019)*.

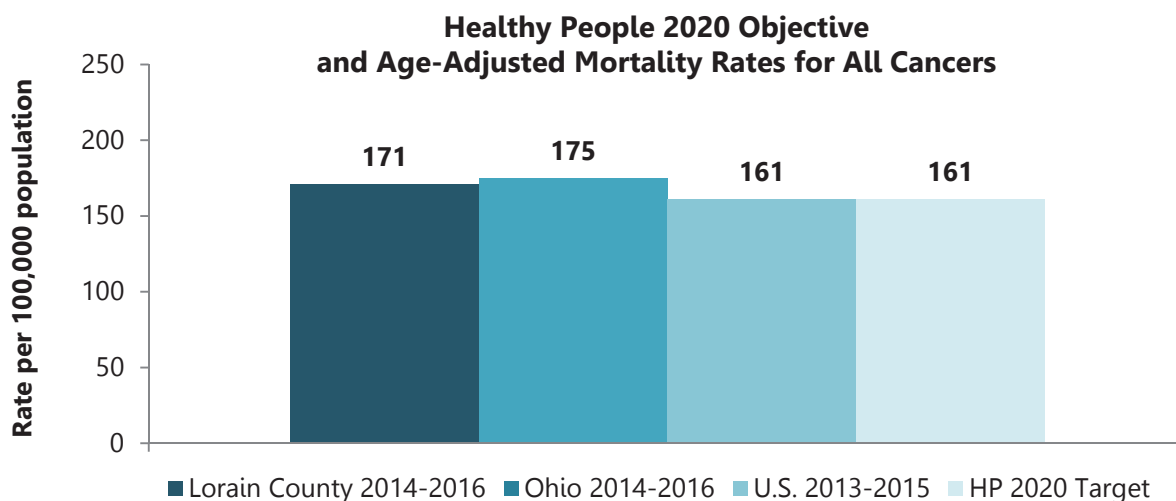
2019 Cancer Estimates

- In 2019, more than 1.7 million new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about eighteen percent of the new cancer cases expected to occur in the U.S. in 2018 will be related to overweight or obesity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 606,880 Americans are expected to die of cancer in 2019.
- 81% of lung cancer deaths in the U.S are attributed to smoking.
- In 2019, estimates predict that there will be 67,150 new cases of cancer and 25,440 cancer deaths in Ohio.
- Of the new cancer cases in Ohio, approximately 9,680 (14%) will be from lung and bronchus cancers and 3,750 (6%) will be from melanoma (skin) cancer.
- About 10,240 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to be 5,340 (8%).

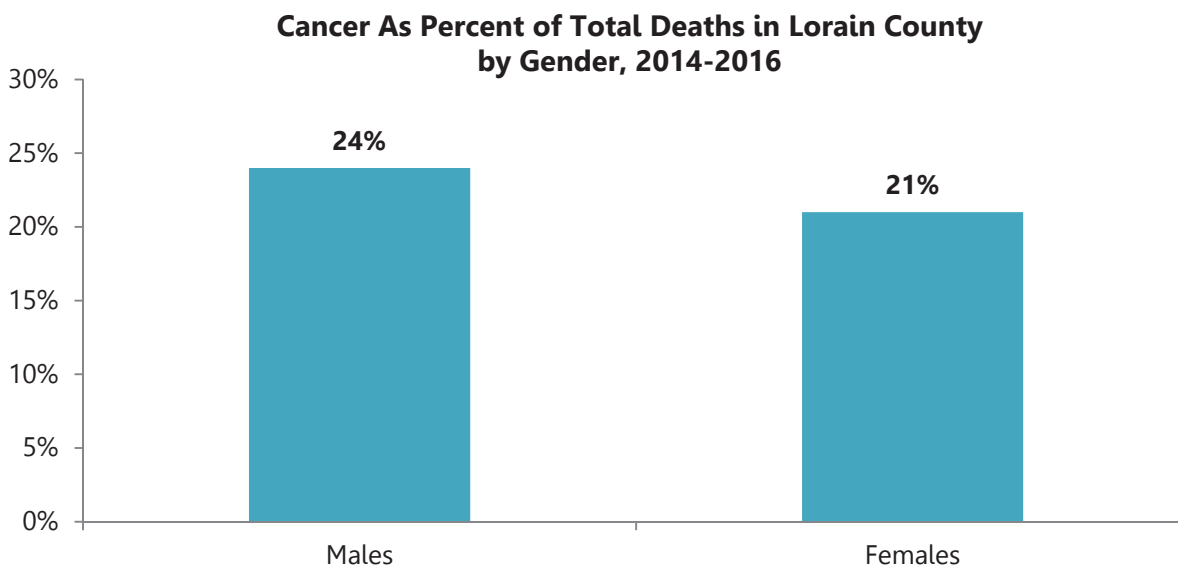
(Source: American Cancer Society, Facts and Figures 2019)

The following graph shows the Lorain County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer in comparison to the Healthy People 2020 objective, as well as cancer as a percent of total deaths in Lorain County. The graphs show:

- When age differences are accounted for, Lorain County had a lower cancer mortality rate than Ohio but a higher cancer mortality rate than the U.S. and the Healthy People 2020 target objective.
- The percentage of Lorain County males who died from all cancers is slightly higher than the percentage of Lorain County females who died from all cancers.



(Source: Ohio Public Health Data Warehouse, 2014-2016, CDC Wonder, 2013-2015, Healthy People 2020)



(Source: Ohio Public Health Data Warehouse, 2014-2016)

Lorain County Incidence of Cancer, 2011-2015

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer	Age-Adjusted Rate
Bladder	441	5%	23.0
Brain and CNS	127	1%	7.0
Breast	1,268	15%	68.6
Cancer of Cervix Uteri	72	1%	8.3
Colon and Rectum	783	9%	41.2
Esophagus	86	1%	4.4
Hodgkins Lymphoma	36	<1%	2.3
Kidney and Renal Pelvis	342	4%	18.7
Larynx	70	1%	3.6
Leukemia	191	2%	10.6
Liver and Bile Ducts	125	1%	6.2
Lung and Bronchus	1,316	15%	69.0
Melanoma of Skin	364	4%	20.2
Multiple Myeloma	89	1%	4.7
Non-Hodgkins Lymphoma	348	4%	18.6
Oral Cavity & Pharynx	203	2%	10.5
Other/Unspecified	615	7%	33.3
Ovary	83	1%	8.2
Pancreas	271	3%	14.4
Prostate	1,139	13%	122.8
Stomach	135	1%	7.1
Testis	50	1%	7.4
Thyroid	279	3%	17.5
Uterus	291	3%	27.1
Total	8,724	100%	463.7

(Source: Ohio Cancer Incidence, ODH Data Warehouse, Updated 2/8/2018)

Chronic Disease: Asthma

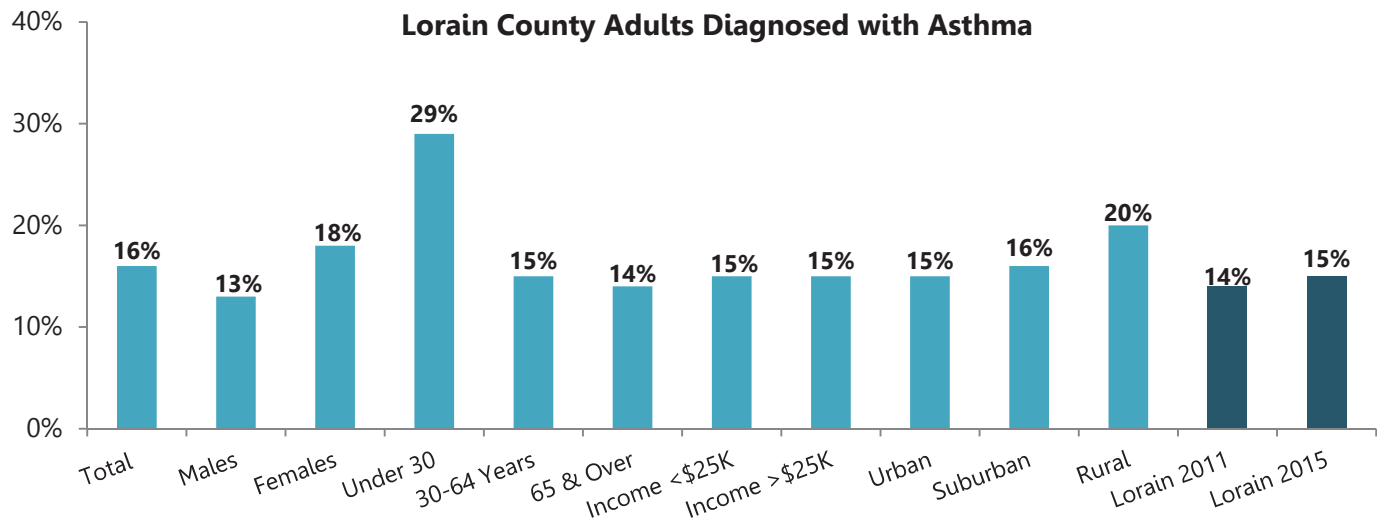
Key Findings

In 2018, 16% of Lorain County adults had been diagnosed with asthma, increasing to 29% of those under the age of 30.

Asthma and Other Respiratory Disease

- In 2018, 16% of Lorain County adults had been diagnosed with asthma, increasing to 29% of those under the age of 30.
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke; dust mites; outdoor air pollution; cockroach allergens; pets; mold; smoke from burning wood or grass; infections linked to the flu, colds, and respiratory viruses (Source: CDC, Common Asthma Triggers, 2017).
- Chronic lower respiratory disease was the fourth leading cause of death in Lorain County and the fourth leading cause of death in Ohio from 2015-2017 (Source: Ohio Public Health Data Warehouse, 2015-2017).

The following graph shows the percentage of Lorain County adults who had ever been diagnosed with asthma. An example of how to interpret the information shown on the graph includes: 16% of Lorain County adults had been diagnosed with asthma, including 18% of females and 29% of those under the age of 30.

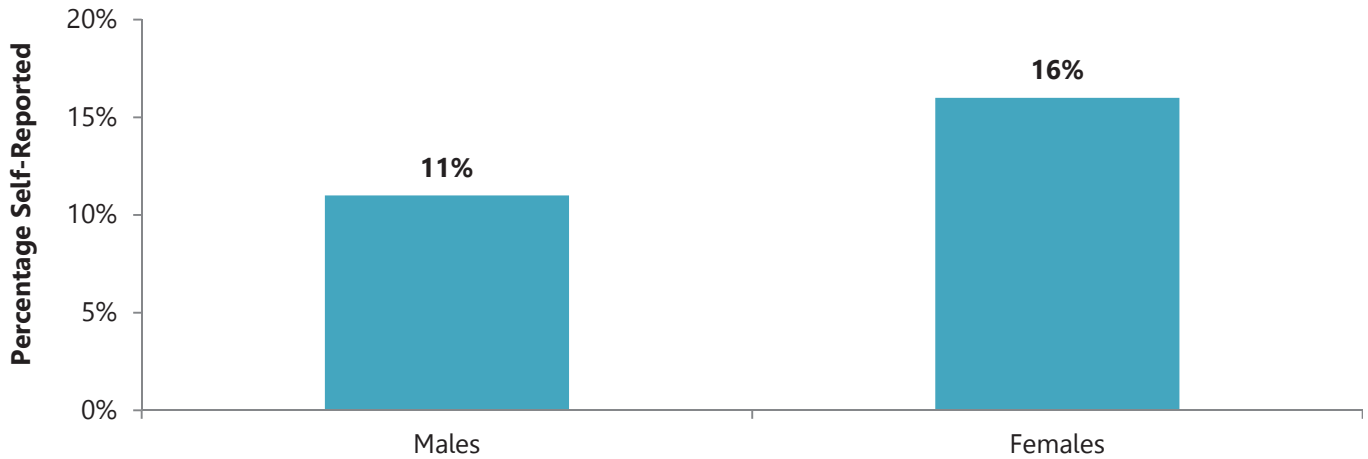


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

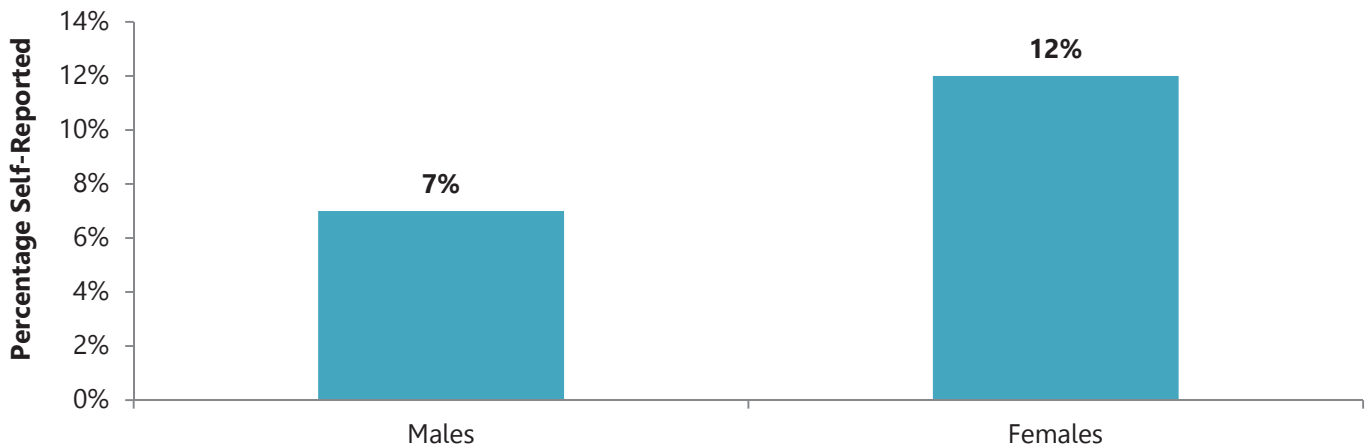
Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Had ever been told they have asthma	14%	15%	16%	14%	14%

The following graphs demonstrate the lifetime and current prevalence rates of asthma by gender for Ohio residents.

Ohio Adult Lifetime Asthma Prevalence Rates By Gender



Ohio Adult Current Asthma Prevalence Rates By Gender



(Source for graphs: 2017 BFRSS)

Asthma Facts

- The number of Americans with asthma grows every year. Currently, 26 million Americans have asthma. Of the 26 million, 18.9 million are adults.
- Almost 3,600 people die of asthma each year, nearly half of whom are age 65 or older.
- Asthma results in 439,000 hospitalizations and 1.8 million emergency room visits annually.
- Patients with asthma reported 14.2 million visits to a doctor's office and 1.3 million visits to hospital outpatient departments.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

(Source: American College of Allergy, Asthma, & Immunology, *Asthma Facts*, Updated June 13, 2018)

Chronic Disease: Arthritis

Key Findings

Thirty-six percent (36%) of Lorain County adults were ever told by a health professional that they had some form of arthritis.

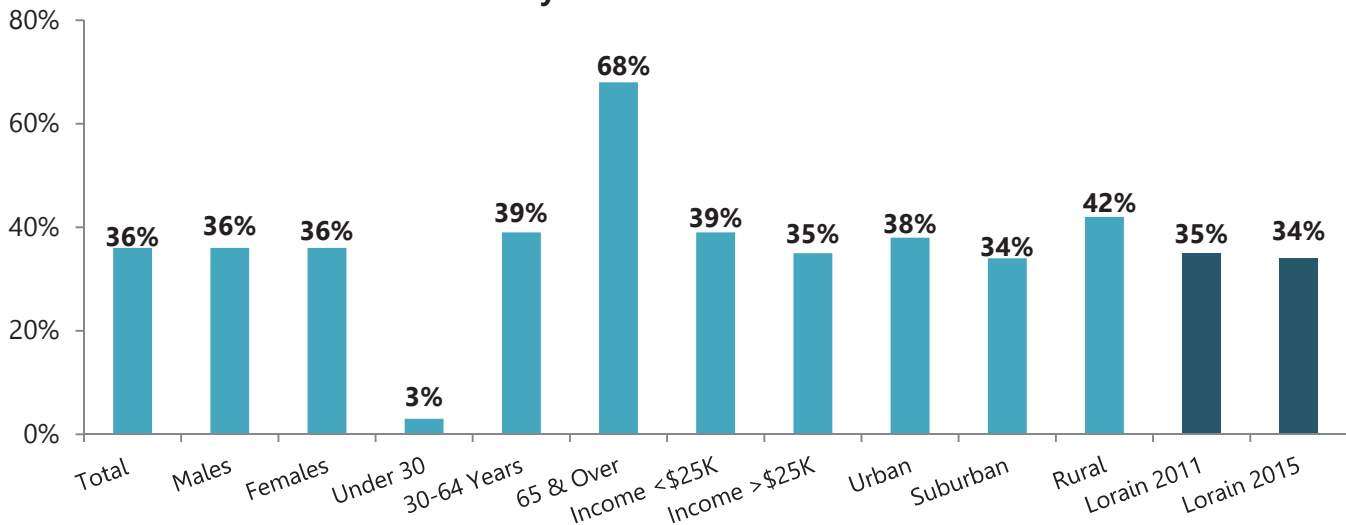
Arthritis

- Lorain County adults were ever told by a health professional that they had the following: some form of arthritis (36%), rheumatoid arthritis (4%), fibromyalgia (4%), gout (4%), and lupus (1%).
- Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of arthritis, have an occupation associated with arthritis, are overweight or obese, and/or have joint injuries or infections (Source: CDC, Arthritis Risk Factors, 2016).
- An estimated 54 million U.S. adults (about 23%) report having doctor-diagnosed arthritis. By 2040, over 78 million people will have arthritis. Arthritis is more common among women (24%) than men (18%), and it affects all racial and ethnic groups. Arthritis commonly occurs with other chronic diseases, like diabetes, heart disease, and obesity, and can make it harder for people to manage these conditions (Source: CDC, Arthritis at a Glance, March 2017).

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Ever diagnosed with some form of arthritis	35%	34%	36%	29%	25%

The following graph shows the percentage of Lorain County adults who were ever told by a health professional that they had some form of arthritis. An example of how to interpret the information shown on the graph includes: 36% of Lorain County adults had some form of arthritis, including 36% of males and 68% of those 65 and older.

Lorain County Adults With Some Form of Arthritis



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Chronic Disease: Diabetes

Key Findings

Thirteen percent (13%) of Lorain County adults had been diagnosed with diabetes in their lifetime. More than one-fifth (22%) of adults with diabetes rated their health as fair or poor.

Diabetes

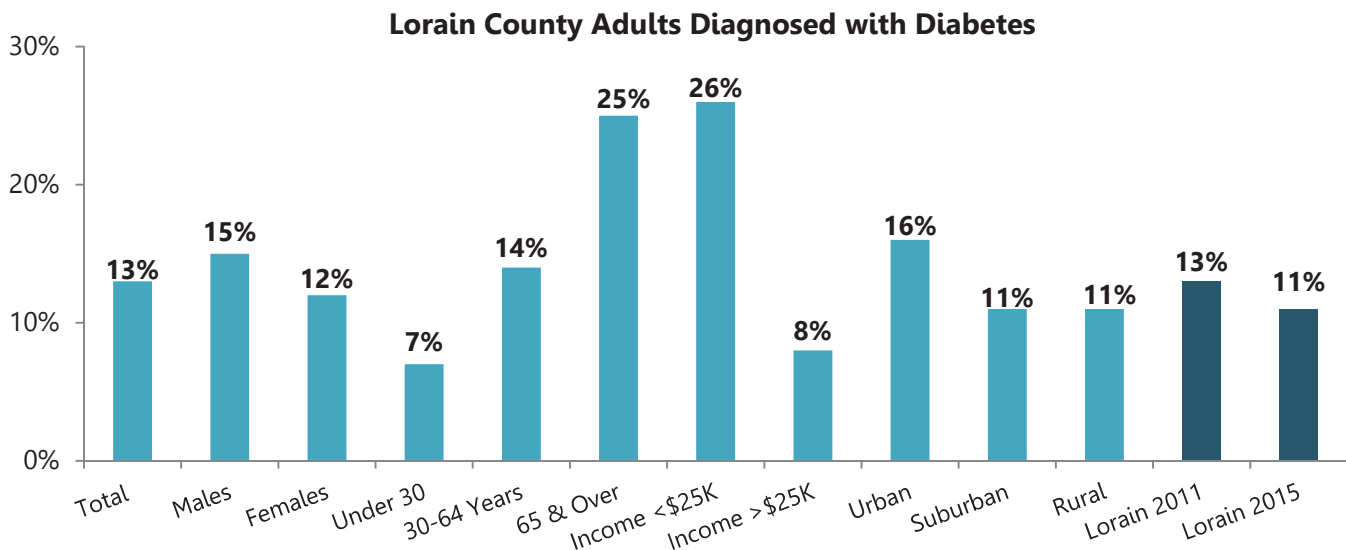
- Thirteen percent (13%) of Lorain County adults had been diagnosed with diabetes in their lifetime, increasing to 26% of those with incomes less than \$25,000 and 25% of those over the age of 65.
- Six percent (6%) of adults were diagnosed with pre-diabetes or borderline diabetes.
- One percent (1%) of adults were diagnosed with pregnancy-related diabetes.
- More than one-fifth (22%) of adults with diabetes rated their health as fair or poor.
- Lorain County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 82% had been diagnosed with high blood pressure
 - 79% were obese or overweight
 - 65% had been diagnosed with high blood cholesterol

Diabetes by the Numbers

- **30.3 million** US adults have diabetes, and 1 in 4 of them do not know they have it.
- Diabetes is the **seventh leading cause** of death in the US.
- Diabetes is the **No. 1** cause of kidney failure, lower-limb amputations, and adult-onset blindness.
- In the last **20 years**, the number of adults diagnosed with diabetes has more than **tripled** as the American population has aged and become more overweight or obese.

(Source: CDC, About Diabetes, Updated: June 1, 2017)

The following graph shows the percentage of Lorain County adults who were diagnosed with diabetes. An example of how to interpret the information shown on the graph includes: 13% of Lorain County adults were diagnosed with diabetes, including 15% of males and 26% of those 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S. 2017
Ever been told by a doctor they have diabetes (not pregnancy-related)	13%	11%	13%	11%	11%
Ever been diagnosed with pregnancy-related diabetes	2%	3%	1%	1%	1%
Ever been diagnosed with pre-diabetes or borderline diabetes	N/A	6%	6%	2%	2%

N/A- Not Available

Types of Diabetes

- Diabetes is a chronic disease that affects how your body turns food into energy. There are three main types of diabetes: type 1, type 2 and gestational diabetes (diabetes while pregnant).
- **Type 1 diabetes** is caused by an autoimmune reaction (the body attacks itself by mistake) that stops your body from making insulin. About 5% of the people who have diabetes have type 1. Symptoms of type 1 diabetes often develop quickly. It's usually diagnosed in children, teens, and young adults. If you have type 1 diabetes, you'll need to take insulin every day to survive. Currently, no one knows how to prevent type 1 diabetes.
- **Type 2 diabetes** is when the body doesn't use insulin well and is unable to keep blood sugar at normal levels. Most people with diabetes—9 in 10—have type 2 diabetes. It develops over many years and is usually diagnosed in adults (though increasingly in children, teens, and young adults). Symptoms sometimes go unnoticed. Type 2 diabetes can be prevented or delayed with healthy lifestyle changes, such as losing weight if you're overweight, healthy eating, and getting regular physical activity.
- **Gestational diabetes** develops in pregnant women who have never had diabetes. Babies born to women with gestational diabetes could be at higher risk for health complications. Gestational diabetes usually goes away after the baby is born but increases the mother's risk for type 2 diabetes later in life. The baby is more likely to become obese as a child or teen, and more likely to develop type 2 diabetes later in life.

(Source: CDC, About Diabetes, Updated: June 1, 2017)

Chronic Disease: Quality of Life

Key Findings

In 2018, 38% of Lorain County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (49%), arthritis/rheumatism (40%), chronic pain (29%), and walking problems (26%).

Impairments and Health Problems

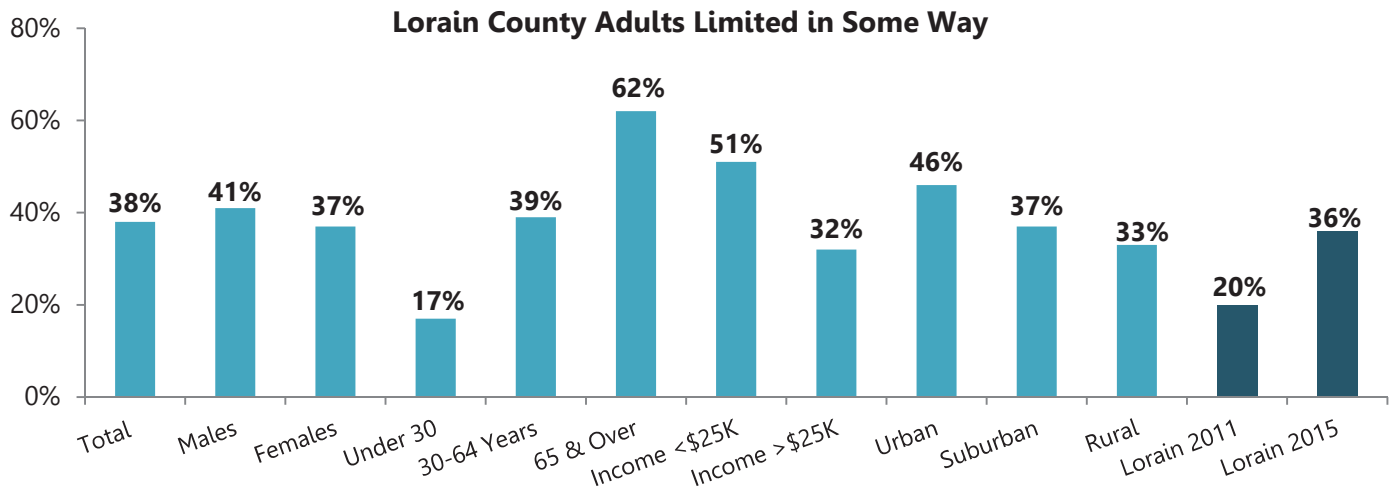
- Thirty-eight percent (38%) of adults were limited in some way due to a physical, mental, or emotional problem. The following problems or impairments were reported: back or neck problems (49%); arthritis/rheumatism (40%); chronic pain (29%); walking problems (26%); stress, depression, anxiety, or emotional problems (22%); chronic illness (18%); sleep problems (18%); lung/breathing problems (14%); fitness level (13%); eye/vision problems (11%); fractures, bone/joint injuries (9%); hearing problems (9%); mental health illness/disorder (6%); dental problems (5%); memory loss (5%); learning disability (2%); confusion (1%); developmental disability (<1%); and other impairments/problems (6%).
- Lorain County adults were responsible for providing regular care or assistance to the following: multiple children (20%); an elderly parent or loved one (12%); a friend, family member or spouse with a health problem (8%); a friend, family member or spouse with a mental health issue (5%); an adult child (4%); grandchildren (4%); someone with special needs (4%); a friend, family member or spouse with dementia (2%); and children with discipline issues (2%).
- Because of any impairment or health problem, Lorain County adults indicated they or a family member needed the help of other persons with the following needs: household chores (14%), shopping (11%), getting around for other purposes (9%), doing necessary business (5%), meal preparation (4%), dressing (3%), bathing (2%), getting around the house (2%), eating (<1%), and other (6%).
- Nearly one-fifth (18%) of adults had fallen in the past 12 months, increasing to 35% of those 65 and older.
- Lorain County adults who fell within the past six months reporting falling due to same level fall (slipping, tripping, or stumbling) (74%); unexpected fall (24%); stairs (10%); and ladders (2%).

Lorain County Geriatric (age 65+ years) Emergency Department Visits, Falls 2017-2018

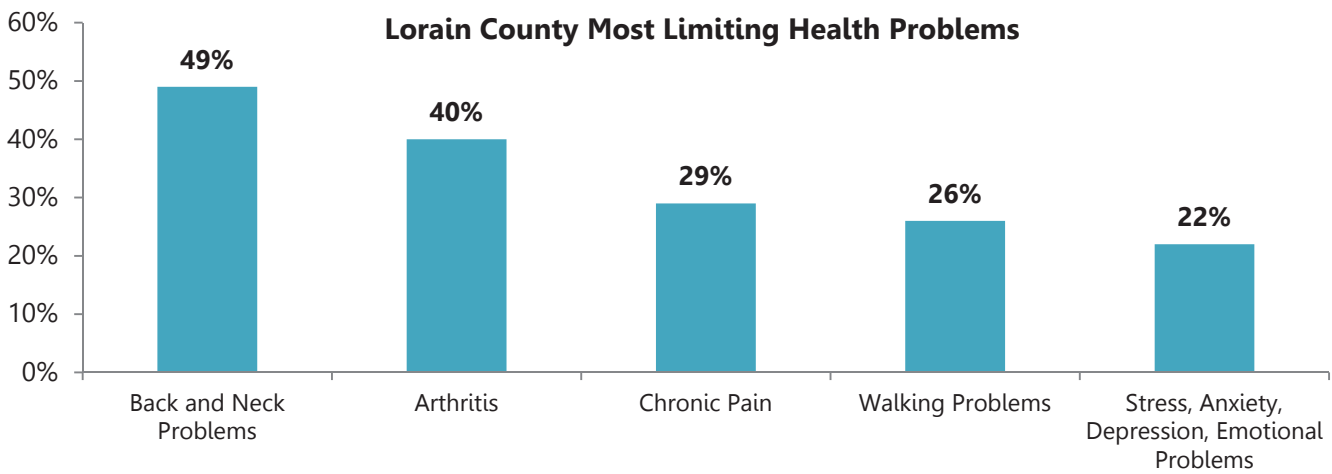
- 2017 fall rate per 10,000 ER visits (Mercy Health began reporting mid-year):
 - 2,764 fall-related visits
 - 29,985 total ER visits
 - **For every 10,000 ER visits among residents age 65+, 922 were for injuries related to a fall.**
- 2018 fall rate per 10,000 ER visits (all Lorain County emergency departments reporting):
 - 3,452 fall-related visits
 - 34,291 total ER visits
 - **For every 10,000 ER visits among residents age 65+, 1,007 were for injuries related to a fall.**
- From 2017-2018 about 1 in 10 ER visits among residents age 65+ were for injuries related to a fall.
- 2018 fall rate per 100,000 residents:
 - 3,452 fall-related visits
 - 51,341 Lorain County residents age 65+ (ACS data, US census)
 - **672 fall-related ER visits per 100,000 Lorain County residents age 65+ years***

*visits per 100,000 residents, meaning a person could've have been counted multiple times if they had more than 1 fall-related visit within the year. (Source: EpiCenter Health Reporting System, 2017-2018 injury-related ER visits among Lorain County residents 65+ years old, as compiled by Lorain County Public Health).

The following graphs show the percentage of Lorain County adults who were limited in some way and the most limiting health problems. Examples of how to interpret the information shown on the graph include: 38% of Lorain County adults were limited in some way, including 41% of males and 62% of those 65 and older.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.



**Healthy People 2020
Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)**

Objective	Lorain County 2018	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	40%	36%

Note: U.S. baseline is age-adjusted to the 2000 population standard
(Sources: Healthy People 2020 Objectives, 2018 Lorain County Health Assessment)

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2017	U.S 2017
Limited in some way because of a physical, mental, or emotional problem	20%	36%	38%	21%*	21%*

*2015 BRFSS Data

Social Conditions: Social Determinants of Health

Key Findings

In 2018, 7% of Lorain County adults were abused in the past year. Nineteen percent (19%) of Lorain County adults had four or more adverse childhood experiences (ACEs) in their lifetime, increasing to 24% of those with incomes less than \$25,000. Thirty-five percent (35%) of adults kept a firearm in or around their home.

Healthy People 2020

Healthy People 2020 developed five key determinants as a “place-based” organizing framework. These five determinants include:

- Economic stability
- Education
- Social and community context
- Health and health care
- Neighborhood and built environment



Economic Stability

- Lorain County adults received assistance for the following in the past year: Medicare (13%), food (12%), health care (12%), mental illness issues including depression (11%), dental care (7%), employment (6%), prescription assistance (8%), home repair (6%), free tax preparation (6%), utilities (5%), rent/mortgage (4%), transportation (4%), legal aid services (3%), affordable childcare (3%), credit counseling (2%), diapers (2%), drug or alcohol addiction (2%), clothing (2%), unplanned pregnancy (1%), and gambling (<1%).
- Adults experienced the following food insecurity issues during the past 12 months: had to choose between paying bills and buying food (13%), went hungry/ate less to provide more food for their family (7%), food assistance was cut (6%), loss of income led to food insecurity issues (5%), worried food would run out (5%), and were hungry but did not eat because they did not have money for food (5%).
- Nine percent (9%) of Lorain County adults experienced more than one food insecurity issue in the past year.
- Lorain County adults reported having the following housing situation at the time of the survey: they have housing (93%); they have housing today, but are worried about losing housing in the future (5%); they do not have housing [(staying with others, in a hotel, in a shelter, living outside on the street, on a bench, in a car, abandoned building, bus or train station, or in a park)] (<1%); and they did not know (3%).
- The median household income in Lorain County in 2017 was \$54,932. The U.S. Census Bureau reports median income levels of \$54,021 for Ohio and \$60,336 for the U.S. (Source: U.S. Census Bureau, 2017 American Community Survey 1-year Estimate).
- Thirteen percent (13%) of all Lorain County residents were living in poverty (Source: U.S. Census Bureau, 2017 American Community Survey 1-year Estimate).
- The unemployment rate for Lorain County civilian labor force was 5.5% as of August 2018 (Source: Bureau of Labor Statistics, November 2017).

Education

- Eighty-nine percent (89%) of Lorain County adults 25 years and over had a high school diploma or higher (Source: U.S. Census Bureau, 2017 American Community Survey 1-year Estimate).
- Twenty-four percent (24%) of Lorain County adults 25 years and over had at least a bachelor's degree (Source: U.S. Census Bureau, 2012-2016 American Community Survey 5-year Estimates).

Social and Community Context

- Lorain County adults indicated the following has motivated or motivates them to make positive changes in their health: to have more energy (55%), family/kids (50%), financial incentives (25%), social support (24%), a health care scare or fear of illness (32%), exposure to a healthy environment (22%), incentives other than financial (18%), discounted services (11%), and exposure to a negative environment (4%).
- Seven percent (7%) of Lorain County adults were abused in the past year. They were abused by the following: someone outside their home (45%), a spouse or partner (32%), a parent (6%), a child (4%), another family member living in their household (4%), and someone else (28%).
- Lorain County adults experienced the following adverse childhood experiences (ACEs):
 - Lived with someone who was a problem drinker or alcoholic (27%)
 - Their parents became separated or were divorced (23%)
 - A parent or adult in their home swore at, insulted, or put them down (22%)
 - Lived with someone who was depressed, mentally ill, or suicidal (17%)
 - A parent or adult in their home hit, beat, kicked, or physically hurt them (12%)
 - Lived with someone who used illegal stress drugs, or who abused prescription medications (10%)
 - Someone at least 5 years older than them or an adult touched them sexually (10%)
 - Their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (9%)
 - Lived with someone who served time or was sentenced to serve time in prison, jail or correctional facility (8%)
 - Their family did not look out for each other, feel close to each other, or support each other (7%)
 - Their parents were not married (7%)
 - Someone at least 5 years older than them or an adult tried to make them touch them sexually (5%)
 - They didn't have enough to eat, had to wear dirty clothing, and had no one to protect them (5%)
 - Someone at least 5 years older than them or an adult forced them to have sex (4%)
- Nineteen percent (19%) of Lorain County adults had four or more ACEs in their lifetime, increasing to 24% of those with incomes less than \$25,000.

Adverse Childhood Experiences (ACEs)

- Childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue. Much of the foundational research in this area has been referred to as adverse childhood experiences (ACEs).
- Adverse childhood experiences have been linked to
 - risky health behaviors,
 - chronic health conditions,
 - low life potential, and
 - early death
- As the number of ACEs increases, so does the risk for these outcomes.
- The wide-ranging health and social consequences of ACEs underscore the importance of preventing them before they happen. Safe, stable, and nurturing relationships and environments (SNNREs) can have a positive impact on a broad range of health problems and on the development of skills that will help children reach their full potential.

(Source: CDC, Adverse Childhood Experiences (ACEs), About Adverse Childhood Experiences, Updated 4/1/16)

- Lorain County adults experienced the following in the past 12 months: a close family member went to the hospital (40%); death of a family member or close friend (36%); had bills they could not pay (16%); moved to a new address (9%); someone in their household had their hours at work reduced (8%); someone close to them had a problem with drinking or drugs (8%); someone in their household lost their job (6%); household income was cut by 50% (4%); they or a family member were incarcerated (3%); were abused by someone physically, emotionally, sexually, or verbally (2%); became separated or divorced (2%); had someone homeless living with them (2%); someone in their household went to jail (2%); failed a drug screen (1%); were homeless (1%); their child was threatened by someone close to them (1%); were involved in a physical fight (1%); their child was hit or slapped by their spouse or partner (1%); lost a large sum of money due to gambling activities (<1%); and were hit or slapped by their spouse or partner (<1%).
- Lorain County adults would have a problem getting the following if they needed them today: someone to help pay for their medical expenses (16%), someone to help if they were sick and needed to be in bed (14%), someone to talk to about their problems (13%), someone to loan them \$50 (12%), someone to take them to a clinic or doctor's office if they needed a ride (9%), someone to accompany them to their doctor's appointments (9%), back-up childcare (7%) and someone to explain directions from their doctor (5%).

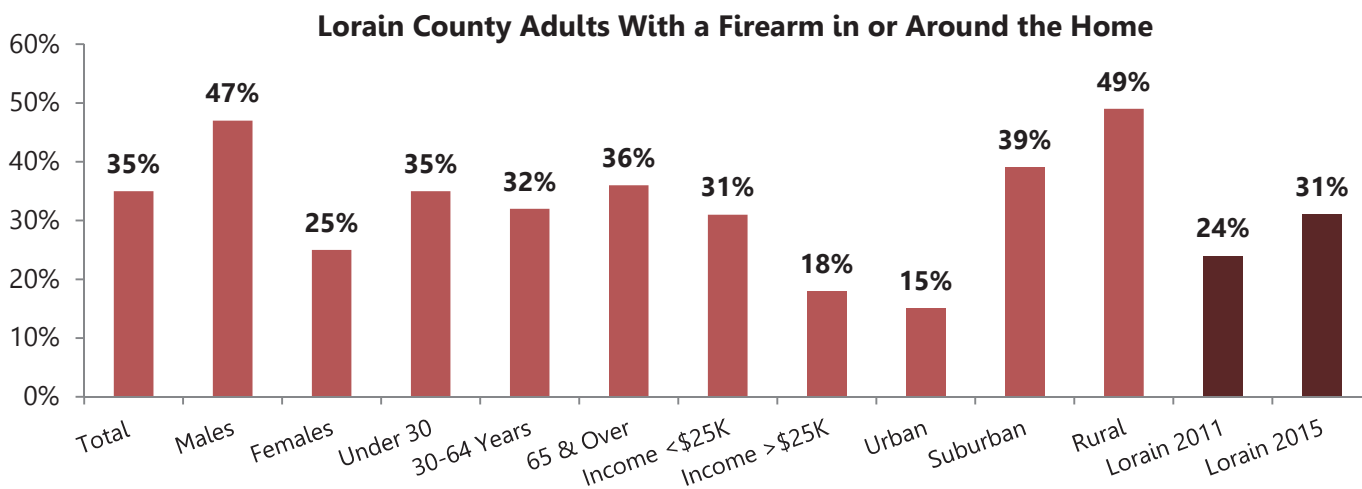
Health and Health Care

- Within the past year, when seeking health care, Lorain County adults felt their experiences were: the same as other races (51%), better than other races (12%), worse than other races (<1%), worse than some races, better than others (<1). One percent (1%) of adults reported they only encountered people of the same race, and 5% did not seek health care in the past year. Five percent (5%) of adults did not know if their experiences were worse, the same, or better than people of other races.

Neighborhood and Built Environment

- Lorain County adults considered their neighborhood to be quite safe (54%), extremely safe (21%), slightly safe (21%), and not safe at all (2%), from crime. Three percent (3%) of adults did not know.
- Eight percent (8%) of Lorain County adults reported the following transportation issues: could not afford gas (31%), no car (25%), limited public transportation available or accessible (23%), disabled (19%), did not feel safe to drive (17%), suspended/no driver's license (17%), no public transportation available or accessible (15%), no car insurance (15%), and other car issues/expenses (65%).
- Five percent (5%) of adults reported more than one transportation issue.
- Lorain County adults reported doing the following while driving: (92%); talking on hands-free cell phone (43%); eating (38%); talking on hand-held cell phone (30%); texting (16%); not wearing a seatbelt (10%); using the Internet on cell phone (10%); being under the influence of alcohol (4%); being under the influence of prescription drugs (3%); being under the influence of recreational drugs (3%); reading (2%); and other activities (such as applying makeup, shaving, etc.) (2%).
- Two-fifths (40%) of adults reported they had more than one distraction while driving.
- Lorain County adults reported they would support the following community improvement initiatives: more locally grown foods or farmer's markets (60%); neighborhood safety (56%); safe roadways (50%); local agencies partnering with grocery stores to provide healthier, low cost food items (48%); bike/walking trail accessibility or connectivity (45%); new and/or updated parks (45%); sidewalk accessibility (43%); new and/or updated recreation centers (42%); and community gardens (34%).
- More than one-third (35%) of Lorain County adults kept a firearm in or around their home. Five percent (5%) of adults reported they were unlocked and loaded.

The following graph shows the percentage of Lorain County adults who had a firearm in or around the home. Examples of how to interpret the information shown on the graph include: 35% of all Lorain County adults had a firearm in or around the home, including 47% of males and 32% of those ages 30-64.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Lorain County 2018	Ohio 2016	U.S. 2016
Firearms kept in or around their home	24%	31%	35%	N/A	N/A

N/A- Not Available

Victims of Gun Violence in America

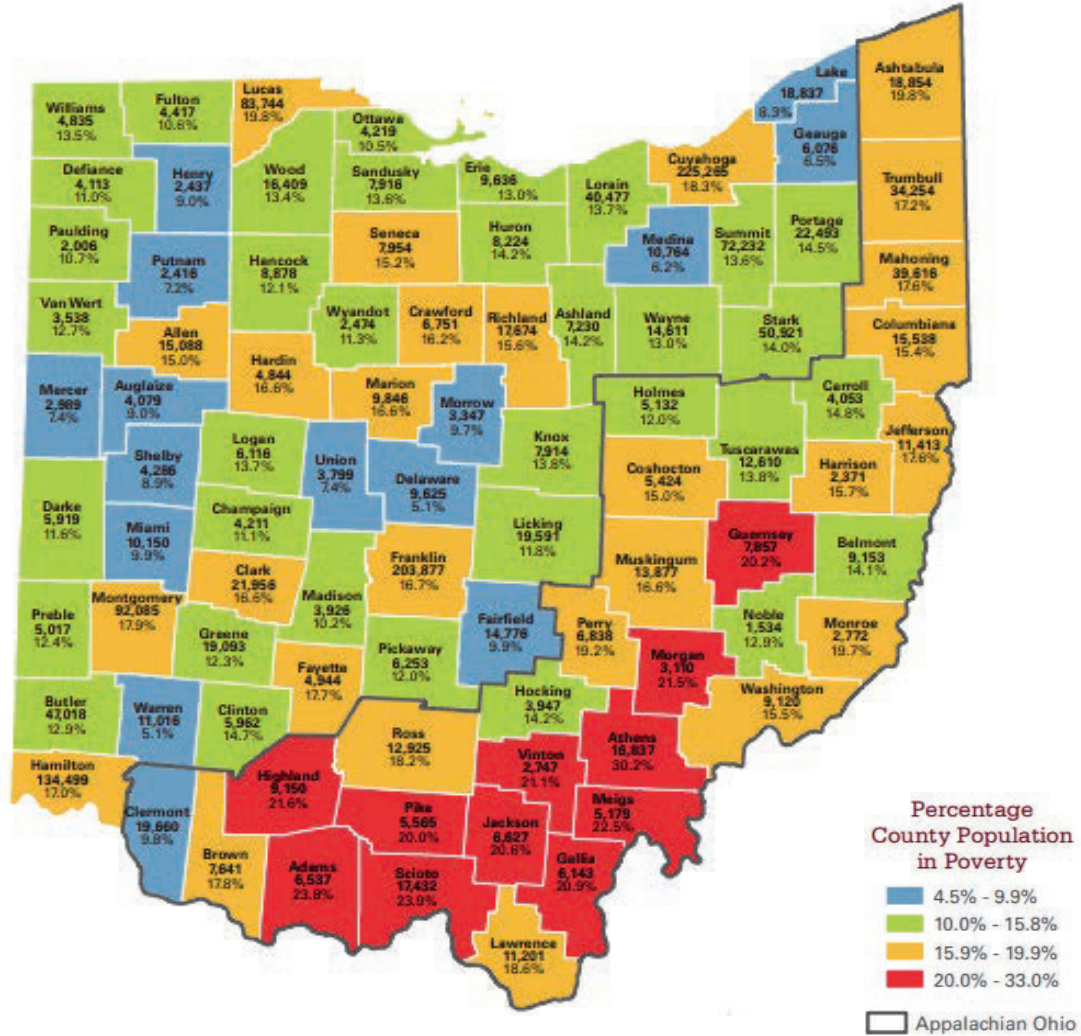
- More than 110,000 people are shot in murders, assaults, suicides & suicide attempts, accidents or by police intervention in America in an average year.
 - 35,141 people die from gun violence and 81,114 people survive gun injuries.
- Every day, an average of 318 people is shot in America. Of those 318 people, 96 people die and 222 are shot, but survive.
 - Of the 318 people who are shot every day, an average of 46 are children and teens.
 - Of the 96 people who die, 34 are murdered, 59 are suicides, 1 die accidentally and 1 with an unknown intent and 1 by legal intervention.
 - Of the 222 people who are shot but survive, 164 are from assault, 45 are shot accidentally, 10 are suicide attempts, and 3 are legal interventions.

(Source: Brady Campaign to Prevent Gun Violence, "There Are Too Many Victims of Gun Violence" Fact Sheet, February 2018)

The map below shows the variation in poverty rates across Ohio during the 2013 to 2017 period.

- The 2013 to 2017 American Community Survey 5-year estimates report that approximately 1,683,890 Ohio residents, or 14.9% of the population, were in poverty.
- From 2013 to 2017, 13.7% of Lorain County residents were in poverty.

Estimated Poverty Rates in Ohio by County (2013-2017)



(Source: 2013-2017 American Community Survey 5-year estimates, as compiled by Ohio Development Services Agency, Office of Research, Ohio Poverty Report, January 2018)

Social Conditions: Environmental Health

Key Findings

The top three environmental health issues for Lorain County adults were insects (10%), mold (9%), and rodents (7%). Nearly half (46%) of adults had a 3-day supply of nonperishable food for everyone in the household in preparation for a disaster.

Disaster Preparedness

- Lorain County households had the following disaster preparedness supplies: cell phone (86%), working smoke detector (84%), cell phone with texting (83%), working flashlight and working batteries (79%), computer/tablet (76%), 3-day supply of prescription medication for each person who takes prescribed medicines (50%), 3-day supply of nonperishable food for everyone in the household (46%), working battery-operated radio and working batteries (42%), home land-line telephone (37%), 3-day supply of water for everyone in the household (1 gallon of water per person per day) (32%), communication plan (21%), generator (15%), disaster plan (9%), and a family disaster plan (9%).

Environmental Health

- Lorain County adults thought the following threatened their health in the past year:
 - Insects (10%)
 - Mold (9%)
 - Rodents (7%)
 - Moisture issues (5%)
 - Temperature regulation (5%)
 - Air quality (5%)
 - Plumbing problems (3%)
 - Chemicals found in products (3%)
 - Agriculture chemicals (3%)
 - Sewage/waste problems (2%)
 - Radon (2%)
 - Safety hazards (1%)
 - Lice (1%)
 - Bed bugs (1%)
 - Lead paint (1%)
 - Asbestos (1%)
 - Sanitation issues (<1%)
 - Cockroaches (<1%)

Mold Prevention Tips

- Exposure to damp and moldy environments may cause a variety of health effects. Mold can cause nasal stuffiness, throat irritation, coughing or wheezing, eye irritation, or, in some cases, skin irritation.
- In your home, you can control mold growth by following these tips:
 - Keep humidity levels as low as you can, no higher than 50%, all day long.
 - Be sure your home has enough ventilation. Use exhaust fans which vent outside your home in the kitchen and bathroom. Make sure your clothes dryer vents outside your home.
 - Fix any leaks in your home's roof, walls, or plumbing so mold does not have moisture to grow.
 - Clean up and dry out your home thoroughly and quickly (within 24–48 hours) after flooding.
 - Clean bathrooms with mold-killing products.
 - Remove or replace carpets and upholstery that have been soaked and cannot be dried promptly. Consider not using carpet in rooms or areas like bathrooms or basements that may have a lot of moisture.

(Source: CDC, Facts about Mold and Dampness, Updated August 2017)

Social Conditions: Parenting

Key Findings

Sixty percent (60%) of parents discussed bullying with their 12-to-17-year-old in the past year. Eighty-eight percent (88%) of parents reported their child always rode in a car seat or booster seat when riding in a car.

Parenting

- Parents indicated that their child rode in a car seat, booster seat, or wore a seatbelt at the following frequencies:

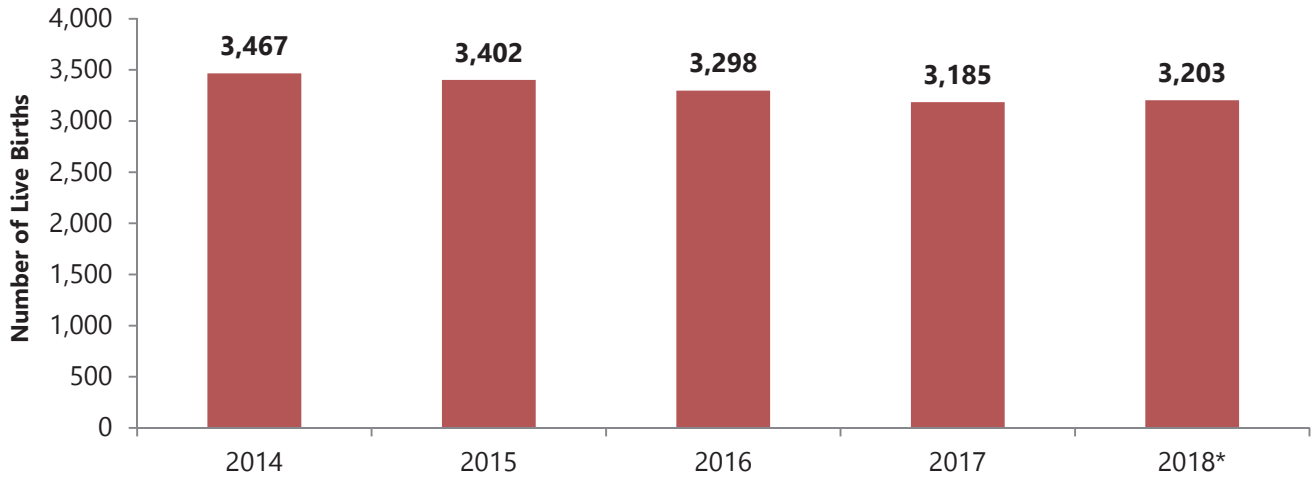
Car Seat	Booster Seat	Seat Belt with No Booster Seat
Always (55%)	Always (36%)	Always (64%)
Nearly always (0%)	Nearly always (3%)	Nearly always (4%)
Sometimes (0%)	Sometimes (0%)	Sometimes (1%)
Seldom (0%)	Seldom (0%)	Seldom (0%)
Never (1%)	Never (1%)	Never (3%)
Child is too big for car seat (44%)	Child is over 4'9" and 80 lbs. (40%) OR Child is too small for booster seat (20%)	Child is too small for seat belt with no booster seat (smaller than 4'9" and 80 lbs.) (28%)

- When asked how parents put their child to sleep as an infant, 77% said on their back, 22% said on their stomach, 18% said on their side, and 15% said in bed with them or another person.
- Parents discussed the following sexual health and other health topics with their 12-to-17 year-old in the past year:
 - Career plan/post-secondary education (67%)
 - Weight status (61%)
 - Bullying (60%)
 - Social media issues (60%)
 - Dating and relationships (57%)
 - Body image (57%)
 - Negative effects of alcohol, tobacco, illegal drugs or misusing prescription drugs (55%)
 - Abstinence and how to refuse sex (52%)
 - Volunteering (49%)
 - Depression, anxiety, suicide (49%)
 - Birth control/condoms/safer sex/pregnancy prevention (48%)
 - Refusal skills/peer pressure (41%)
 - School/legal consequences of using alcohol, tobacco, or other drugs (36%)
 - Energy drinks (22%)
- Thirteen percent (13%) of parents reported they did not discuss any of the above with their 12-to-17-year-old in the past year.

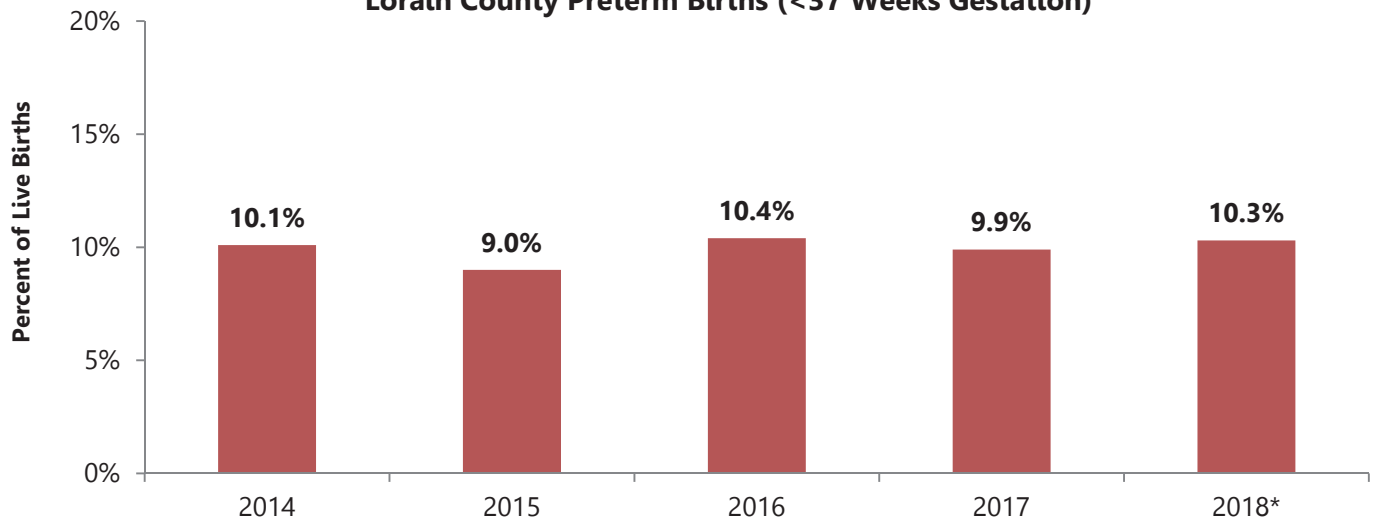
The following graphs show the number of live births in Lorain County and the percent of preterm births by year. Please note that the pregnancy outcomes data include all births to adults and adolescents.

- From 2014 to 2018, there was an average of 3,311 live births per year in Lorain County.

Lorain County Total Live Births



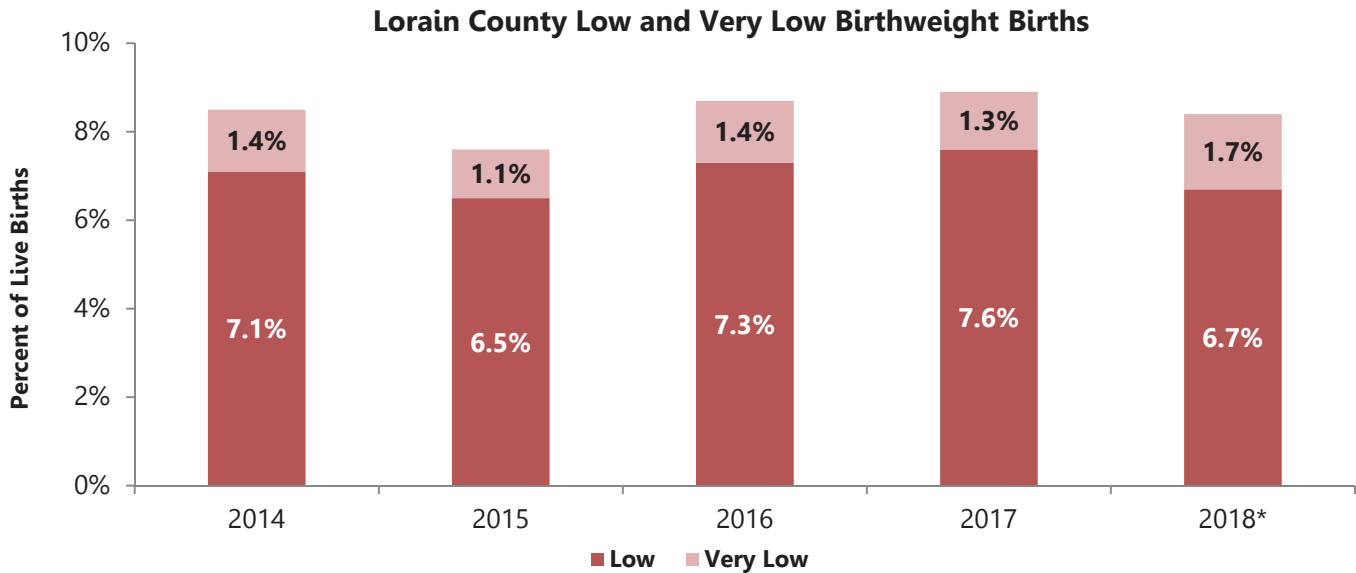
Lorain County Preterm Births (<37 Weeks Gestation)



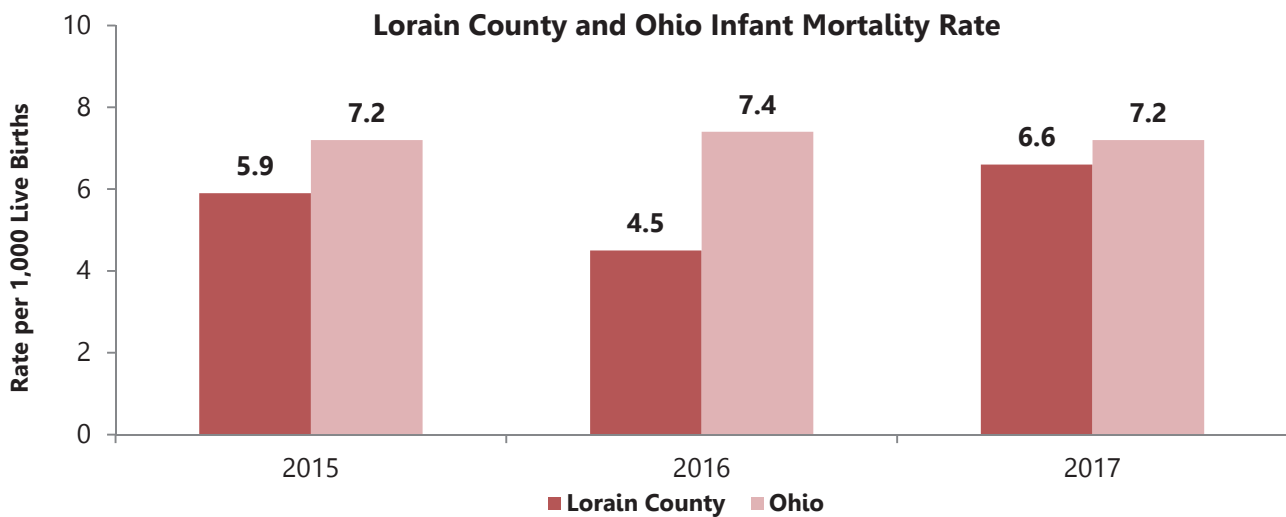
(Source for graphs: ODH, Ohio Public Health Data Warehouse Updated 2-20-19)
*Indicates preliminary data that may change

The following graphs shows the percent of live births in Lorain County that were low or very low birthweight and the infant mortality by year. Please note that the pregnancy outcomes data include all births to adults and adolescents.

- Low birth weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces, but greater than 3 pounds, 4 ounces. Very low birth weight is a term used to describe babies who are born weighing less than 3 pounds, 4 ounces.
- In 2017, approximately 21% of the Lorain County births were low or very low birthweight.

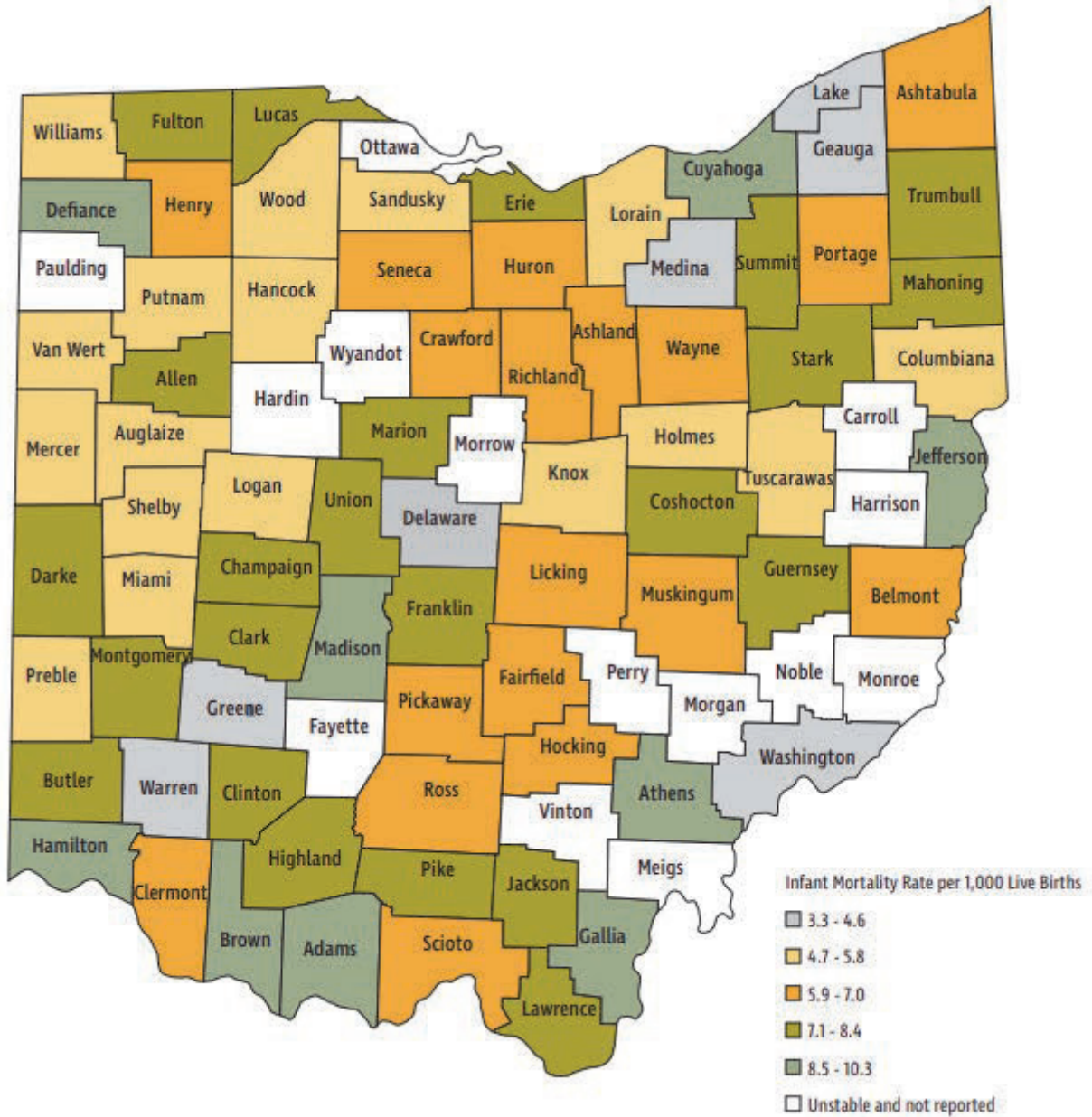


(Source: ODH, Ohio Public Health Data Warehouse Updated 10-2-18)
 *Indicates preliminary data that may change



(Source: Ohio Department of Health, Bureau of Vital Statistics, Ohio Infant Mortality Data: General Findings Reports from 2015-2017, obtained from: <https://www.odh.ohio.gov/odhprograms/cfhs/octpim/latestoimd.aspx>)

Ohio Infant Mortality Average 5-Year Rate by County, 2013 to 2017



(Source: Ohio Department of Health, Bureau of Vital Statistics, 2017 Ohio Infant Mortality Data: General Findings, obtained from: <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/infant-and-fetal-mortality/reports/2017-ohio-infant-mortality-report-final>)

Rural Health

Key Findings

In 2018, 13% of rural Lorain County adults did not have health care coverage. Forty-two percent (42%) of rural women had a mammogram in the past year. Forty-nine percent (49%) of adults keep firearms in and around their household.

General Health and Health Care

The data below compares adults living in rural areas of Lorain County with adults in Elyria City, Lorain City, and the suburban area of Lorain County.

- In 2018, 13% of rural Lorain County adults did not have health care coverage, compared to 10% of the rest of Lorain County adults.
- Over half (54%) of rural Lorain County adults rated their health as excellent or very good, compared to 49% of the rest of Lorain County adults.
- Rural adults were less likely to have been diagnosed with:
 - Diabetes (11% compared to 13% of the rest of Lorain County adults).
- Rural adults were more likely to have been diagnosed with:
 - Arthritis (58% compared to 36% of the rest of Lorain County adults).
 - Asthma (20% compared to 16% of the rest of Lorain County adults).
- Rural adults were equally as likely to have been diagnosed with:
 - High blood cholesterol (34% compared to 34% of the rest of Lorain County adults).
- Rural adults were less likely to:
 - Have used recreational marijuana or hashish in the past 6 months (4% compared to 10% of the rest of Lorain County adults).
 - Have had a period of two or more weeks in a row where they felt sad, blue, or depressed (9% compared to 13% of the rest of Lorain County adults).
 - Have consumed alcohol in the past 30 days (58% compared to 62% of the rest of Lorain County adults).
 - Have had a Pap smear in the past year (31% compared to 36% of the rest of Lorain County adults).
 - Have had a breast cancer screening or exam within the past 24 months (26% compared to 33% of the rest of Lorain County adults).
 - Have had a PSA test in the past year (26% compared to 29% of the rest of Lorain County adults).
- Rural adults were more likely to:
 - Be considered overweight or obese (82% compared to 70% of the rest of Lorain County adults).
 - Have had two or more sexual partners in the past year (13% compared to 7% of the rest of Lorain County adults).
 - Have driven in the past month when they've had perhaps too much to drink (12% compared to 8% of the rest of Lorain County adults).
 - Have their blood cholesterol checked within the past five years (88% compared to 80% of the rest of Lorain County adults).
 - Have had a clinical breast exam in the past year (63% compared to 58% of the rest of Lorain County adults).
 - Have had a mammogram in the past year (42% compared to 32% of the rest of Lorain County adults).
 - Keep firearms in or around their household (49% compared to 35% of the rest of Lorain County adults).
- Rural adults were equally as likely to:
 - Have had a digital rectal exam in the past year (21%).
 - Be considered a current smoker (12%).

Adult Comparisons	Lorain County Rural Adults 2011	Lorain County Rural Adults 2015	Lorain County Rural Adults 2018	Lorain County 2018	Ohio 2017	U.S. 2017
Rated their health as excellent or very good	50%	54%	54%	49%	49%	51%
Uninsured	7%	7%	13%	10%	9%	11%
Visited a doctor for a routine checkup (in the past 12 months)	51%	72%	72%	71%	72%	70%
Visited a dentist or a dental clinic (within the past year)	63%	59%	73%	69%	68%*	66%*
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	35%	34%	45%	38%	34%	32%
Overweight (BMI of 25.0 – 29.9)	33%	32%	37%	32%	34%	35%
Ever been told by a doctor they have diabetes (not pregnancy-related)	13%	11%	11%	13%	11%	11%
Had ever been told they have asthma	11%	5%	20%	16%	14%	14%
Current drinker (drank alcohol at least once in the past month)	61%	56%	58%	62%	54%	55%
Current smoker (smoked on some or all days)	24%	20%	12%	12%	21%	17%
Considered attempting suicide (in the past 12 months)	3%	0%	1%	4%	N/A	N/A
Two or more weeks in a row felt sad, blue or depressed	11%	16%	9%	13%	N/A	N/A

(Sources: 2011 Lorain County Health Assessment, 2018, 2018 Lorain County Health Assessment and 2017 BRFSS)

*2016 BRFSS data

Suburban Health

Key Findings

Seven percent (7%) of suburban adults did not have health care coverage. More than one-fourth (29%) of adults had high blood pressure. Thirteen percent (13%) were current smokers. Eighty-one percent (81%) considered their neighborhood to be extremely or quite safe.

General Health and Health Care

The data below compares adults living in suburban areas of Lorain County with adults in Elyria City, Lorain City, and rural areas.

- In 2018, 7% of suburban Lorain County adults did not have health care coverage, compared to 10% of the rest of Lorain County adults.
 - Fifty-four percent (54%) of suburban Lorain County adults rated their health as excellent or very good, compared to 49% of the rest of Lorain County adults.
 - Suburban adults were less likely to have been diagnosed with:
 - High blood pressure (29% compared to 34% of the rest of Lorain County adults).
 - Diabetes (11% compared to 13% of the rest of Lorain County adults).
 - Suburban adults were equally as likely to have been diagnosed with:
 - Asthma (16%).
 - Suburban adults were more likely to:
 - Rate their mental health as not good on four or more days in the previous month (37% compared to 24% of the rest of Lorain County adults).
 - Have been to the dentist in the past year (74% compared to 69% of the rest of Lorain County adults).
 - Have consumed alcohol in the past 30 days (68% compared to 62% of the rest of Lorain County adults).
 - Have had a clinical breast exam in the past year (65% compared to 58% of the rest of Lorain County adults).
 - Have had a Pap smear in the past year (44% compared to 36% of the rest of Lorain County adults).
 - Have had a PSA test in the past year (32% compared to 29% of the rest of Lorain County adults).
 - Have had a digital rectal exam in the past year (32% compared to 21% of the rest of Lorain County adults).
 - Keep firearms in or around their household (39% compared to 35% of the rest of Lorain County adults).
 - Consider their neighborhood to be extremely or quite safe (81% compared to 75% of all Lorain County adults).
 - Suburban adults were less likely to:
 - Engage in some type of physical activity or exercise for at least 30 minutes 3 or more days per week (50% compared to 54% of the rest of Lorain County adults).
 - Be uninsured (7% compared to 10% of the rest of Lorain County adults).
- Suburban adults were equally as likely to:
- Have survived a heart attack (4%).
 - Eat five or more servings of fruits and vegetables per day (3%).
 - Drive when they've had perhaps too much to drink in the past month (8%).

Adult Comparisons	Suburban Lorain County 2011	Suburban Lorain County 2015	Suburban Lorain County 2018	Lorain County 2018	Ohio 2017	U.S. 2017
Rated their health as excellent or very good	56%	62%	54%	49%	49%	51%
Uninsured	7%	3%	7%	10%	9%	11%
Visited a doctor for a routine checkup (in the past 12 months)	61%	63%	74%	71%	72%	70%
Visited a dentist or a dental clinic (within the past year)	72%	77%	74%	69%	68%*	66%*
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	26%	30%	35%	38%	34%	32%
Overweight (BMI of 25.0 – 29.9)	33%	32%	33%	32%	34%	35%
Ever been told by a doctor they have diabetes (not pregnancy-related)	9%	11%	11%	13%	11%	11%
Had ever been told they have asthma	16%	14%	16%	16%	14%	14%
Current drinker (drank alcohol at least once in the past month)	66%	71%	68%	62%	54%	55%
Current smoker (smoked on some or all days)	13%	14%	13%	12%	21%	17%
Considered attempting suicide (in the past 12 months)	3%	4%	6%	4%	N/A	N/A
Two or more weeks in a row felt sad, blue or depressed	11%	21%	13%	13%	N/A	N/A

*2016 BRFSS data

(Sources: 2011 Lorain County Health Assessment, 2015, 2018 Lorain County Health Assessment and 2017 BRFSS)

Urban Health

Key Findings

Thirteen percent (13%) of Elyria and Lorain City adults did not have health care coverage. More than one-third (34%) of adults had high blood cholesterol. Sixty-eight percent (68%) were classified as overweight or obese, and 9% were current smokers.

General Health and Health Care

The data below compares adults living in Elyria and Lorain City (urban area) with adults living in rural and suburban areas.

- In 2018, 13% of Elyria and Lorain City adults did not have health care coverage, compared to 10% of the rest of Lorain County adults.
- Thirty-six percent (36%) of Elyria and Lorain City adults rated their health as excellent or very good, compared to 49% of the rest of Lorain County adults.
- Elyria and Lorain City adults were more likely to have been diagnosed with:
 - Diabetes (16% compared to 13% of the rest of Lorain County adults).
- Elyria and Lorain City adults were equally as likely to have been diagnosed with:
 - High blood cholesterol (34%).
- Elyria and Lorain City adults were less likely to:
 - Have visited a doctor for a routine checkup in the past year (66% compared to 71% of the rest of Lorain County adults).
 - Have had a clinical breast exam in the past year (42% compared to 58% of the rest of Lorain County adults).
 - Have had a mammogram in the past year (24% compared to 41% of the rest of Lorain County adults).
 - Have had a Pap smear in the past year (21% compared to 36% of the rest of Lorain County adults).
 - Have had a breast cancer screening or exam within the past 24 months (26% compared to 33% of the rest of Lorain County adults).
 - Have had a colorectal cancer screening or exam within the past 24 months (19% compared to 24% of the rest of Lorain County adults).
 - Have been to the dentist in the past year (62% compared to 69% of the rest of Lorain County adults).
 - Keep firearms in or around their household (15% compared to 35% of the rest of Lorain County adults).
 - Consider their neighborhood to be extremely or quite safe (58% compared to 75% of all Lorain County adults).
 - Have consumed alcohol in the past 30 days (53% compared to 62% of the rest of Lorain County adults).
- Elyria and Lorain City adults were more likely to:
 - Engage in some type of physical activity or exercise for at least 30 minutes 3 or more days per week (57% compared to 54% of the rest of Lorain County adults).
 - Rate their mental health as not good on four or more days in the previous month (29% compared to 22% of the rest of Lorain County adults).
 - Have high blood pressure (44% compared to 34% of the rest of Lorain County adults).
 - Have rated their health as fair or poor (17% compared to 11% of the rest of Lorain County adults).
- Elyria and Lorain City adults were equally as likely to:
 - Have misused prescription medication in the past 6 months (8%).
 - Have had a period of two or more weeks in a row where they felt sad, blue, or depressed (13%).

Adult Comparisons*	City of Elyria 2011	City of Lorain 2011	Urban Lorain County 2015	Urban Lorain County 2018	Lorain County 2018	Ohio 2017	U.S. 2017
Rated their health as excellent or very good	48%	39%	36%	36%	49%	49%	51%
Uninsured	16%	13%	17%	13%	10%	9%	11%
Visited a doctor for a routine checkup (in the past 12 months)	52%	55%	63%	66%	71%	72%	70%
Visited a dentist or a dental clinic (within the past year)	54%	52%	60%	62%	69%	68%**	66%**
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	37%	29%	30%	40%	38%	34%	32%
Overweight (BMI of 25.0 – 29.9)	34%	39%	33%	28%	32%	34%	35%
Ever been told by a doctor they have diabetes (not pregnancy-related)	13%	14%	11%	16%	13%	11%	11%
Had ever been told they have asthma	14%	14%	18%	15%	16%	14%	14%
Current drinker (drank alcohol at least once in the past month)	60%	48%	57%	53%	62%	54%	55%
Current smoker (smoked on some or all days)	25%	24%	27%	9%	12%	21%	17%
Considered attempting suicide (in the past 12 months)	5%	4%	3%	2%	4%	N/A	N/A
Two or more weeks in a row felt sad, blue or depressed	14%	14%	19%	13%	13%	N/A	N/A

* In 2015, data from the cities of Elyria and Lorain were combined to define an urban area of Lorain County. Comparisons between 2011 and 2015 should be used with caution.

**2016 BRFSS data

(Source: 2011 Lorain County Health Assessment, 2015 Lorain County Health Assessment, 2018 Lorain County Health Assessment and 2017 BRFSS)

Youth Health: Weight Status

Key Findings

During the fall of 2018, Communities That Care of Lorain County conducted the Pride Survey in 6th, 8th, 10th and 12th grades throughout fourteen districts in the county. Seventeen percent (17%) of Lorain County 6th grade youth ate four or more servings of fruits and/or vegetables per day. More than four-fifths (81%) of Lorain County 8th grade youth participated in at least 60 minutes of physical activity on three or more days in the past week. Thirty-one percent (31%) of 10th grade youth reported they were overweight.

6th Grade Weight Status, Nutrition & Physical Activity

- In 2018, 17% of Lorain County 6th grade youth ate four or more servings of fruits and/or vegetables per day. Thirty-six percent (36%) ate one-to-three servings of fruits per day. Six percent (6%) did not eat any fruit during the past seven days.
- Three-fourths (75%) of Lorain County 6th grade youth participated in at least 60 minutes of physical activity on three or more days in the past week. Nearly half (48%) did so on five or more days in the past week, and 27% did so every day in the past week. Ten percent (10%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- On an average school day, 6th graders played video games or used a computer for something that is not school work at the following frequencies: less than 1 hour (15%), 1 hour (14%), 2 hours (20%), 3 hours (14%), 4 hours (10%), and 5 or more hours (18%). Ten percent (10%) reported they did not play video games or use a computer for something that is not school work on an average day.
- Nearly one-fourth (24%) of 6th grade youth reported they were overweight.
- Ten percent (10%) of 6th grade youth were told by a doctor they were overweight.

8th Grade Weight Status, Nutrition & Physical Activity

- In 2018, 15% of Lorain County 8th grade youth ate four or more servings of fruits and/or vegetables per day. Forty-one percent (41%) ate one-to-three servings of fruits per day. Five percent (5%) did not eat any fruit during the past seven days.
- More than three-fifths (81%) of Lorain County youth participated in at least 60 minutes of physical activity on three or more days in the past week. Fifty-six percent (56%) did so on five or more days in the past week, and 32% did so every day in the past week. Nine percent (9%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- On an average school day, 8th graders played video games or used a computer for something that is not school work at the following frequencies: less than 1 hour (10%), 1 hour (9%), 2 hours (19%), 3 hours (22%), 4 hours (13%), and 5 or more hours (20%). Seven percent (7%) reported they did not play video games or use a computer for something that is not school work on an average day.
- Twenty-eight percent (28%) of 8th grade youth reported they were overweight.
- Eleven percent (11%) of 8th grade youth were told by a doctor they were overweight.

10th Grade Weight Status, Nutrition & Physical Activity

- In 2018, 7% of Lorain County 10th grade youth ate four or more servings of fruits and/or vegetables per day. Forty-four percent (44%) ate one-to-three servings of fruits per day. Five percent (5%) did not eat any fruit during the past seven days.

- In 2018, 77% of Lorain County 10th grade youth participated in at least 60 minutes of physical activity on three or more days in the past week. Over half (53%) did so on five or more days in the past week, and 25% did so every day in the past week. Seven percent (7%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- On an average school day, 10th graders played video games or used a computer for something that is not school work at the following frequencies: less than 1 hour (6%), 1 hour (9%), 2 hours (17%), 3 hours (21%), 4 hours (17%), and 5 or more hours (25%). Five percent (5%) reported they did not play video games or use a computer for something that is not school work on an average day.
- Thirty-one percent (31%) of 10th grade youth reported they were overweight.
- Fifteen percent (15%) of 10th grade youth were told by a doctor they were overweight.

12th Grade Weight Status, Nutrition & Physical Activity

- In 2018, 7% of Lorain County 12th grade youth ate four or more servings of fruits and/or vegetables per day. Nearly one-third (32%) ate one-to-three servings of fruits per day. Nine percent (9%) did not eat any fruit during the past seven days.
- Sixty-six percent (66%) of Lorain County youth participated in at least 60 minutes of physical activity on three or more days in the past week. Thirty-eight percent (38%) of youth did so on five or more days in the past week, and 18% did so every day in the past week. Fourteen percent (14%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- On an average school day, 12th graders played video games or used a computer for something that is not school work at the following frequencies: less than 1 hour (7%), 1 hour (6%), 2 hours (18%), 3 hours (19%), 4 hours (15%), and 5 or more hours (26%). Nine percent (9%) reported they did not play video games or use a computer for something that is not school work on an average day.
- Over one-third (35%) of 12th grade youth reported they were overweight.
- Nineteen percent (19%) of 12th grade youth were told by a doctor they were overweight.

Youth Comparisons	Lorain County 2018 6 th Grade	Lorain County 2018 8 th Grade	Lorain County 2018 10 th Grade	Lorain County 2018 12 th Grade
Physically active at least 60 minutes per day on every day in past week	27%	32%	25%	18%
Physically active at least 60 minutes per day on 5 or more days in past week	48%	56%	53%	38%
Did not participate in at least 60 minutes of physical activity on at least 1 day	10%	9%	7%	14%

Youth Health: Tobacco Use

Key Findings

The 2018 Pride Survey Report indicated that 4% of Lorain County 8th grade youth and 8% of 12th grade youth had smoked cigarettes in the past month. Thirty-seven percent (37%) of 12th grade youth used an e-cigarette, vape pen, or e-liquid rig in the past 30 days.

6th Grade Youth Tobacco Use Behaviors

- The 2018 Pride Survey Report indicated that 1% of Lorain County 6th grade youth used tobacco in the past year.
- One percent (1%) of Lorain County youth were current smokers, having smoked at some time in the past 30 days.
- Three percent (3%) of Lorain County youth used an e-cigarette, vape pen, or e-liquid rig in the past 30 days.
- The average age of onset for tobacco use was 11.3 years old.
- Lorain County youth usually used tobacco in the following places: home (<1%), friend's house (<1%) and other (1%). No one reported using tobacco at school or in a car.
- Lorain County youth indicated they usually used tobacco after school (1%), on weekends (1%), and on weeknights (<1%). No one reported using tobacco before or during school.

8th Grade Youth Tobacco Use Behaviors

- The 2018 Pride Survey Report indicated that 7% of Lorain County 8th grade youth used tobacco in the past year.
- Four percent (4%) of Lorain County youth were current smokers, having smoked at some time in the past 30 days.
- Thirteen percent (13%) of Lorain County youth used an e-cigarette, vape pen, or e-liquid rig in the past 30 days.
- The average age of onset for tobacco use was 12.0 years old.
- Lorain County youth usually used tobacco in the following places: home (2%), in a car (1%), friend's house (<1%), and other (3%). No one reported using tobacco at school.
- Lorain County youth indicated they usually used tobacco on weekends (4%), after school (1%), before school (<1%), and on weeknights (<1%). No one reported using tobacco during school.

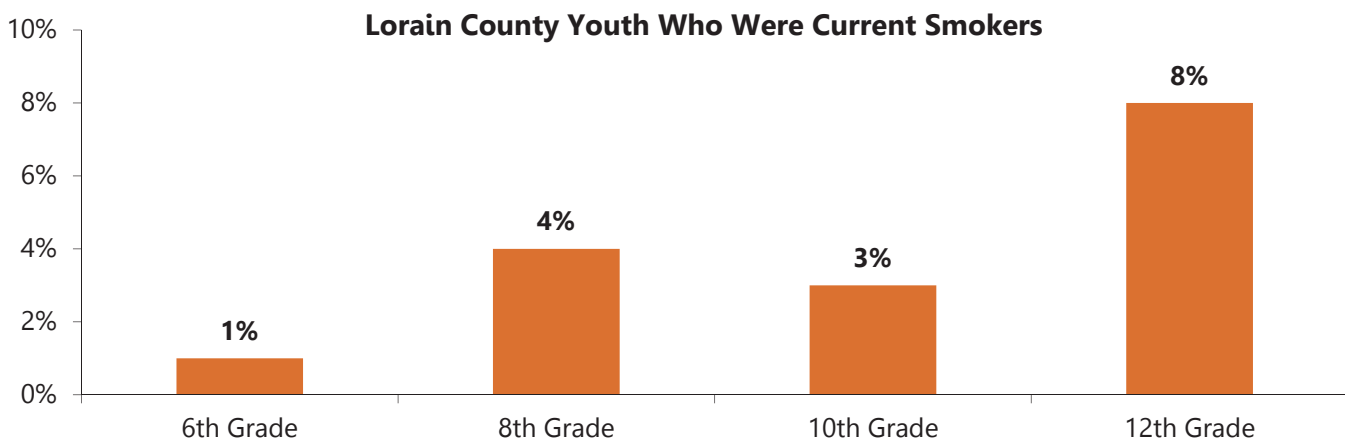
10th Grade Youth Tobacco Use Behaviors

- The 2018 Pride Survey Report indicated that 11% of Lorain County 10th grade youth used tobacco in the past year.
- Three percent (3%) of Lorain County youth were current smokers, having smoked at some time in the past 30 days.
- Twenty-three percent (23%) of Lorain County youth used an e-cigarette, vape pen, or e-liquid rig in the past 30 days.
- The average age of onset for tobacco use was 13.5 years old.
- Lorain County youth usually used tobacco in the following places: home (5%), friend's house (5%), car (2%), school (1%), and other (3%).
- Lorain County youth indicated they usually used tobacco on weekends (6%), after school (3%), before school (2%), on weeknights (2%), and during school (1%).

12th Grade Youth Tobacco Use Behaviors

- The 2018 Pride Survey Report indicated that 26% of Lorain County 12th grade youth used tobacco in the past year.
- Eight percent (8%) of Lorain County youth were current smokers, having smoked at some time in the past 30 days.
- Thirty-seven percent (37%) of Lorain County youth used an e-cigarette, vape pen, or e-liquid rig in the past 30 days.
- The average age of onset for tobacco use was 14.7 years old.
- Lorain County youth usually used tobacco in the following places: friend’s house (13%), car (12%), home (10%), school (4%), and other (8%).
- Lorain County youth indicated they usually used tobacco on weekends (15%), after school (11%), on weeknights (10%) before school (6%), and during school (4%).

The following graph shows the percentage of Lorain County youth who smoked cigarettes in the past month. Examples of how to interpret the information include: 1% of Lorain County 6th grade youth, 4% of 8th grade youth, and 8% of 12th grade youth were current smokers.

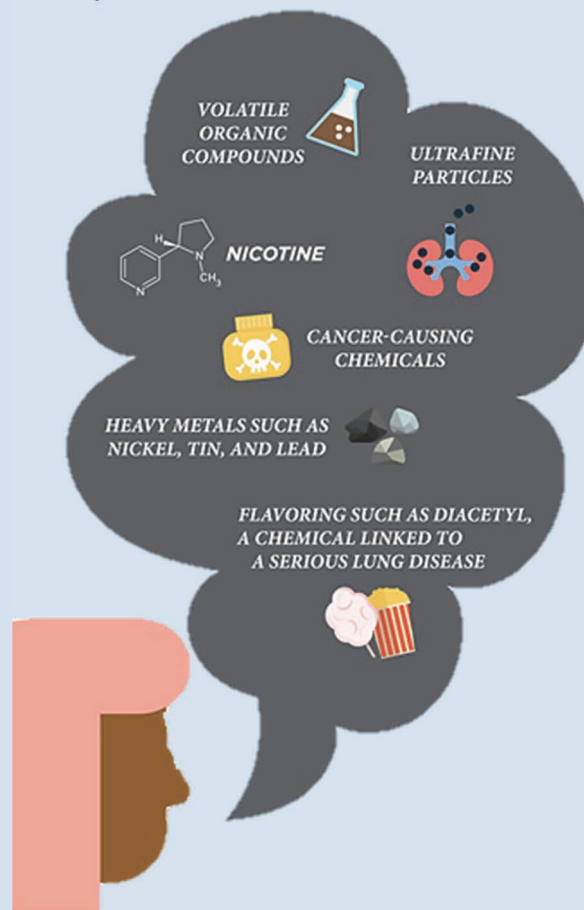


Availability of Tobacco	6 th Grade	8 th Grade	10 th Grade	12 th Grade
Very Easy	6%	8%	15%	36%
Fairly Easy	5%	9%	15%	18%
Fairly Difficult	3%	5%	7%	4%
Very Difficult	2%	3%	2%	1%
Don't Know/Can't Get	85%	75%	60%	41%

Youth Comparisons	Lorain County 2018 6 th Grade	Lorain County 2018 8 th Grade	Lorain County 2018 10 th Grade	Lorain County 2018 12 th Grade
Used tobacco in the past year	1%	7%	11%	26%
Current smokers	1%	4%	3%	8%

What's the Bottom Line on the Risks of E-cigarettes for Kids, Teens, and Young Adults?

- The use of e-cigarettes is unsafe for kids, teens, and young adults.
- Most e-cigarettes contain nicotine and other substances. Nicotine is highly addictive and can harm brain development that control attention, learning, mood, and impulse control, which continues until about age 25.
- A 2018 National Academy of Medicine report found some evidence that e-cigarette use increases the frequency and amount of cigarette smoking in the future.
- Although researchers are still investigating the long-term health effects, some of the ingredients in e-cigarette aerosols is NOT harmless "water vapor" and can be very harmful to the lungs.
- It is difficult for consumers to know what e-cigarette products contain; many e-cigarettes marketed as containing zero percent nicotine have been found to contain nicotine.
- Additionally, defective e-cigarette batteries have caused some fires and explosions, a few of which have resulted in serious injuries. Children and adults have also been poisoned by swallowing, breathing, or absorbing e-cigarette liquid through their skin or eyes



(Sources: CDC, Smoking & Tobacco Use; What's the Bottom Line on the Risks of E-cigarettes for Kids, Teens, and Young Adults? December 3, 2018)

Youth Health: Alcohol Consumption

Key Findings

Three percent (3%) of Lorain County 6th grade youth were current drinkers, having had a drink at some time in the past 30 days. The 2018 Pride Survey Report indicated that 17% of Lorain County 8th grade youth had alcohol in the past year.

6th Grade Youth Alcohol Use Behaviors

- The 2018 Pride Survey Report indicated that 8% of Lorain County youth had alcohol in the past year.
- Three percent (3%) of Lorain County youth were current drinkers, having had a drink at some time in the past 30 days.
- The average age of onset for drinking was 10.6 years old.
- Lorain County youth usually drank alcohol in the following places: home (3%), friend's house (<1%) and other (2%). No one reported using alcohol at school or in a car.
- Lorain County youth indicated they usually drank alcohol after school (1%), on weekends (1%), and on week nights (<1%). No one reported using alcohol before school or during school.
- In the past 30 days, 11% of youth had ridden in a car driven by someone who had been drinking alcohol.

8th Grade Youth Alcohol Use Behaviors

- The 2018 Pride Survey Report indicated that 17% of Lorain County youth had alcohol in the past year.
- Eight percent (8%) of Lorain County youth were current drinkers, having had a drink at some time in the past 30 days.
- The average age of onset for drinking was 11.8 years old.
- Lorain County youth usually drank alcohol in the following places: home (8%), friend's house (3%), car (<1%), and other (4%). No one reported using alcohol at school.
- Lorain County youth indicated they usually drank alcohol on weekends (4%), after school (1%), on week nights (1%), and before school (<1%). No one reported using alcohol during school.
- In the past 30 days, 12% of youth had ridden in a car driven by someone who had been drinking alcohol.

10th Grade Youth Alcohol Use Behaviors

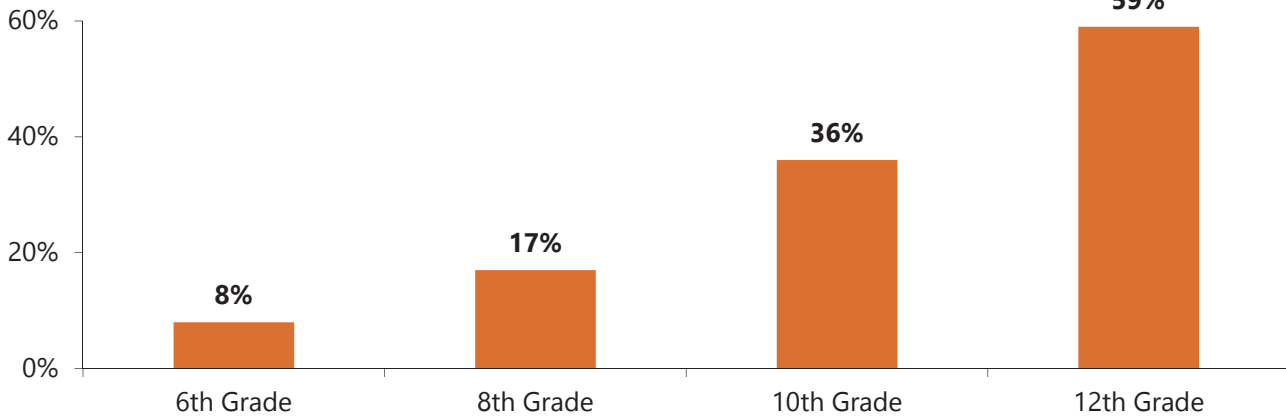
- The 2018 Pride Survey Report indicated that 36% of Lorain County youth had alcohol in the past year.
- Seventeen percent (17%) of Lorain County youth were current drinkers, having had a drink at some time in the past 30 days.
- The average age of onset for drinking was 13.8 years old.
- Lorain County youth usually drank alcohol in the following places: friend's house (16%), home (15%), school (1%), car (1%), and other (6%).
- Lorain County youth indicated they usually drank alcohol on weekends (6%), after school (3%), on week nights (2%), before school (2%), and during school (1%).
- In the past 30 days, 11% of youth had ridden in a car driven by someone who had been drinking alcohol. One percent (1%) of youth drivers had driven a car themselves after drinking alcohol.

12th Grade Youth Alcohol Use Behaviors

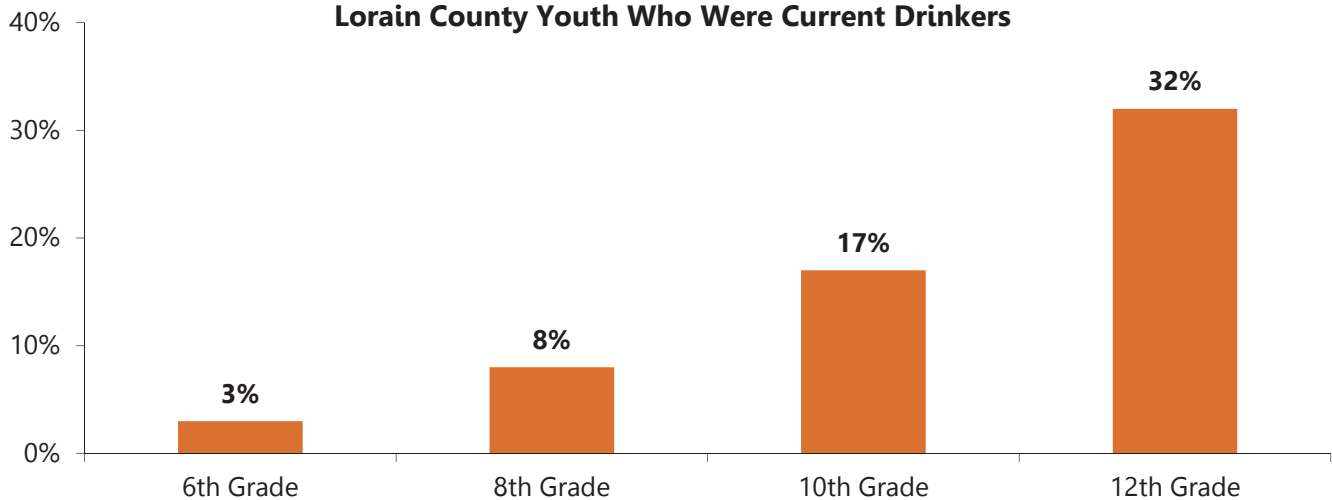
- The 2018 Pride Survey Report indicated that 59% of Lorain County youth had alcohol in the past year.
- Nearly one-third (32%) of Lorain County youth were current drinkers, having had a drink at some time in the past 30 days.
- The average age of onset for drinking was 14.8 years old.
- Lorain County youth usually drank alcohol in the following places: friend's house (35%), home (24%), car (4%), school (1%), and other (11%).
- Lorain County youth indicated they usually drank alcohol on weekends (15%), after school (11%), on week nights (10%), before school (6%), and during school (4%).
- In the past 30 days, 11% of youth had ridden in a car driven by someone who had been drinking alcohol. Five percent (5%) of youth drivers had driven a car themselves after drinking alcohol.

The following graphs show the percentage of Lorain County youth who had drunk alcohol in the past year and those who are current drinkers. Examples of how to interpret the information include: 8% of Lorain County 6th grade youth had drunk alcohol in the past year.

Lorain County Youth Who Drank Alcohol In The Past Year



Lorain County Youth Who Were Current Drinkers



Availability of Alcohol to Lorain County Youth

Availability	6 th Grade	8 th Grade	10 th Grade	12 th Grade
Very Easy	8%	12%	19%	28%
Fairly Easy	6%	13%	21%	27%
Fairly Difficult	5%	6%	9%	14%
Very Difficult	2%	3%	4%	3%
Don't Know/Can't Get	79%	66%	46%	28%

Youth Comparisons	Lorain County 2018 6 th grade	Lorain County 2018 8 th grade	Lorain County 2018 10 th grade	Lorain County 2018 12 th grade
Youth who had alcohol in the past year	8%	17%	36%	59%
Current drinker	3%	8%	17%	32%
Rode with someone who was drinking	11%	12%	11%	11%
Drank and drove (of youth drivers)	N/A	N/A	1%	5%

N/A-Not Available

Underage Drinking in the U.S.

- Excessive drinking is responsible for more than 4,300 deaths among underage youth each year, and cost the U.S. \$24 billion in economic costs in 2010.
- On average, underage drinkers consume more drinks per drinking occasion than adult drinkers.
- In 2013, there were approximately 119,000 emergency room visits by persons 12 to 21 years old for injuries and other conditions linked to alcohol.
- Youth who drink alcohol are more likely to experience:
 - School problems, such as higher absence and poor or failing grades
 - Social problems, such as fighting and lack of participation in youth activities
 - Legal problems, such as arrest for driving or physically hurting someone while drunk
 - Physical problems, such as hangovers or illnesses
 - Unwanted, unplanned, and unprotected sexual activity
 - Disruption of normal growth and sexual development
 - Physical and sexual assault
 - Alcohol-related car crashes and other unintentional injuries, such as burns, falls, and drowning
 - Higher risk for suicide and homicide
 - Memory problems
 - Abuse of other drugs
 - Changes in brain development that may have life-long effects
 - Death from alcohol poisoning
- In general, the risk of youth experiencing these problems is greater for those who binge drink than for those who do not binge drink.
- Initiation of drinking at an early age is associated with development of an alcohol use disorder later in life.

(Source: CDC, Alcohol and Public Health, updated on August 2, 2018)

Youth Health: Drug Use

Key Findings

The 2018 Pride Survey Report indicated that 4% of Lorain County 6th grade youth had used illicit drugs in the past year. Five percent (5%) of Lorain County 8th grade youth used marijuana or hashish in the past 30 days. Six percent (6%) of 12th grade youth used prescription drugs not prescribed for them in the past 30 days.

6th Grade Youth Drug Use

- The 2018 Pride Survey Report indicated that 4% of Lorain County 6th grade youth had used illicit drugs in the past year.
- One percent (1%) of Lorain County youth had used marijuana or hashish in the past 30 days.
- The average age of onset for marijuana use for the 6th grade youth was 10.0 years old.
- Lorain County youth usually smoked marijuana in the following places: friend's house (1%), home (<1%), in a car (<1%), and other (1%). No one reported using marijuana at school.
- Lorain County youth indicated they usually smoked marijuana on weekends (1%), after school (1%), week nights (<1%) and before school (<1%). No one reported using marijuana during school.
- Lorain County youth have tried the following in the past year:
 - 2% used steroids
 - 1% used inhalants
 - 1% used marijuana
 - 1% used over-the-counter medications
 - <1% used methamphetamines
 - <1% used heroin
 - <1% used cocaine
 - <1% used ecstasy/MDMA
 - <1% used hallucinogens
- One percent (1%) of Lorain County youth used prescription drugs not prescribed for them in the past 30 days.
- One percent (1%) of youth used over-the-counter drugs (to get high) in the past 30 days.

8th Grade Youth Drug Use

- The 2018 Pride Survey Report indicated that 11% of Lorain County 8th grade youth used illicit drugs in the past year.
- Five percent (5%) of Lorain County 8th grade youth used marijuana or hashish in the past 30 days.
- The average age of onset for marijuana use for the 8th grade youth was 11.7 years old.
- Lorain County youth usually smoked marijuana in the following places: friend's house (3%), home (2%), car (1%), and other (4%). No one reported using marijuana at school.
- Lorain County youth indicated they usually smoked marijuana on weekends (5%), after school (2%), before school (1%), week nights (<1%), and during school (<1%).

- Lorain County 8th grade youth have tried the following in the past year:
 - 7% used marijuana
 - 3% used inhalants
 - 1% used over-the-counter medications
 - 1% used steroids
 - 1% used ecstasy/MDMA
 - 1% used hallucinogens
 - 1% used hallucinogens
 - <1% used methamphetamines
 - <1% used cocaine
 - 0% used heroin
- Two percent (2%) of Lorain County youth used prescription drugs not prescribed for them in the past 30 days.
- One percent (1%) of youth used over-the-counter drugs (to get high) in the past 30 days.

10th Grade Youth Drug Use

- The 2018 Pride Survey Report indicated that 24% of Lorain County 10th grade youth had used illicit drugs in the past year.
- Thirteen percent (13%) of Lorain County youth used marijuana or hashish in the past 30 days.
- The average age of onset for marijuana use for 10th grade youth was 13.4 years old.
- Lorain County youth usually smoked marijuana in the following places: friend's house (13%), home (7%), car (4%), school (1%) and other (66%).
- Lorain County youth indicated they usually smoked marijuana on weekends (17%), week nights (5%), after school (5%), before school (2%), and during school (1%).
- Lorain County youth have tried the following in the past year:
 - 22% used marijuana
 - 2% used over-the-counter medications
 - 1% used hallucinogens
 - 1% used inhalants
 - 1% used steroids
 - 1% used cocaine
 - 1% used ecstasy/MDMA
 - <1% used methamphetamines
 - 0% used heroin
- Two percent (2%) of Lorain County youth used prescription drugs not prescribed for them in the past 30 days.
- One percent (1%) of youth used over-the-counter drugs (to get high) in the past 30 days.

12th Grade Youth Drug Use

- The 2018 Pride Survey Report indicated that 44% of Lorain County 12th grade youth had used illicit drugs in the past year.
- Thirty-one percent (31%) of Lorain County youth used marijuana or hashish in the past 30 days.
- The average age of onset for marijuana use for 12th grade youth was 15.4 years old.
- Lorain County youth usually smoked marijuana in the following places: friend's house (28%), home (18%), car (17%), car (5%), school (4%), and other (8%).

- Lorain County youth indicated they usually smoked marijuana on weekends (33%), week nights (17%), after school (15%), before school (8%), and during school (4%).
- Lorain County youth have tried the following in the past year:
 - 43% used marijuana
 - 6% used hallucinogens
 - 3% used over-the-counter medications
 - 3% used ecstasy/MDMA
 - 3% used cocaine
 - 2% used inhalants
 - 1% used steroids
 - 1% used methamphetamines
 - 1% used heroin
- Six percent (6%) of Lorain County youth used prescription drugs not prescribed for them in the past 30 days.
- Three percent (3%) of youth used over-the-counter drugs (to get high) in the past 30 days.

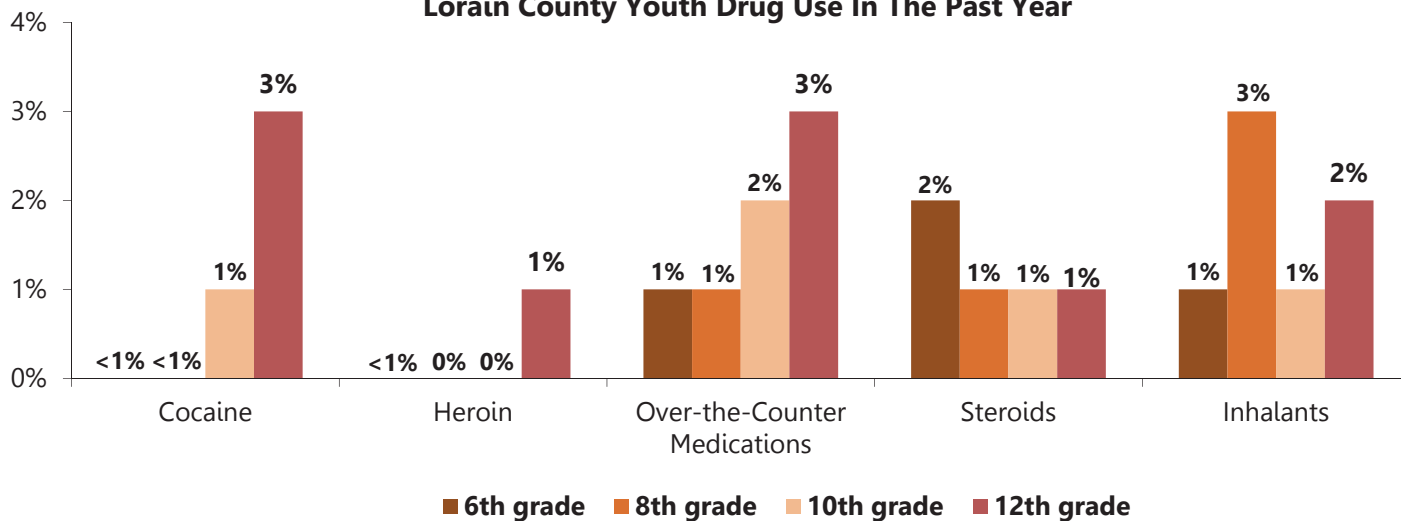
Marijuana Use and Teens

- Marijuana remains the most used illicit substance among youth. Recent public discussions about medical marijuana and the public debate over its legal status is leading to a reduced perception of harm among young people. However, using marijuana can have harmful and long-lasting effects on a teen's health and well-being. Consider these facts:
 - Research suggests that the effects on attention, memory, and learning can be long-term and even permanent in people who begin using marijuana regularly as teens.
 - Marijuana use has been linked to a range of mental health problems in teens such as depression or anxiety. Psychosis (loss of reality) has also been seen in teens at higher risk like those with a family history of marijuana use.
 - Drugs, including marijuana, affect the way teens drive, which puts them, their passengers, and other drivers on the road at risk. Drugs can alter a teen's perception, attention, balance, coordination, reaction time, and other skills they need to stay alert and safe.
 - Research shows that about 1 in 6 teens who repeatedly use marijuana can become addicted, which means they may make unsuccessful efforts to quit using marijuana or give up important activities with friends and family in favor of using marijuana.
- Various factors can contribute to teen marijuana use, from a family history of drug abuse to hanging around people who use marijuana. However, research has shown that parents do have a big influence on their teens even when it doesn't appear that way. In fact, teens are more likely to use marijuana if their parents or friends use it, and less likely to use marijuana if their parents do not approve of it.
- The bottom line: using marijuana can have harmful and long-lasting effects on a teen's health and well-being. Unlike adults, the teen brain is actively developing and often will not stop until the mid-20s. Marijuana use during this period can have a detrimental impact, affecting a teen's brain and their ability to progress and grow.

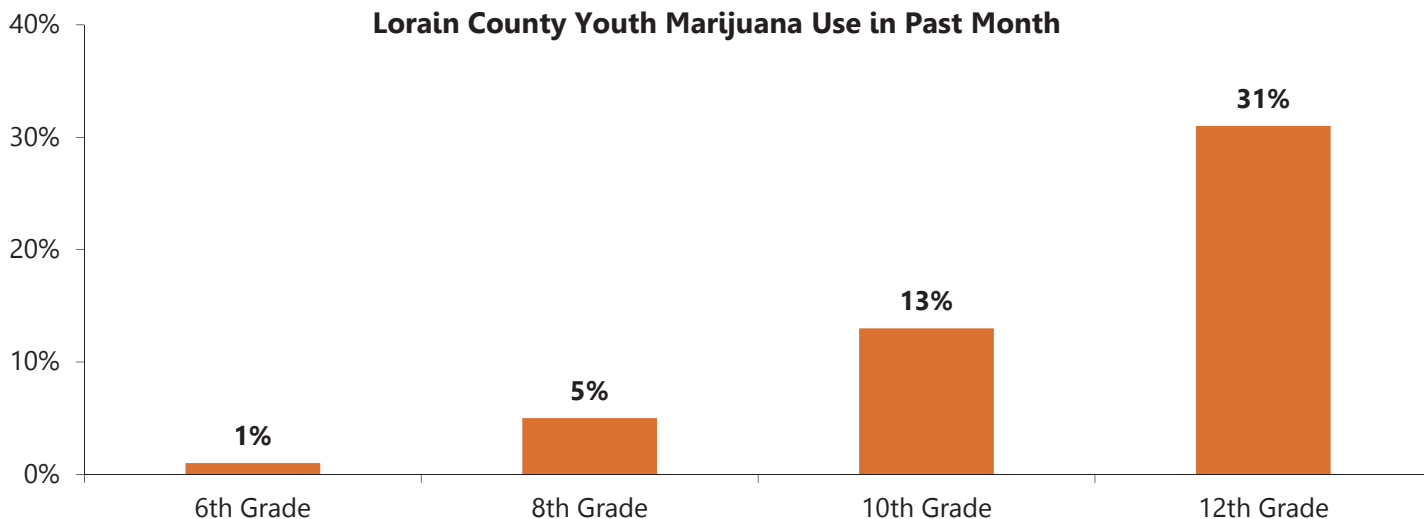
(Source: CDC, Gateway to Health Communication & Social Marketing Practice, Marijuana Use and Teens 2017)

The following graphs are data from the 2018 Pride Survey Report indicating youth drug use in the past year and marijuana use in the past 30 days. Examples of how to interpret the information include: <1% of 6th grade youth had used cocaine in the past month, and 3% of 8th grade youth had used inhalants in the past month.

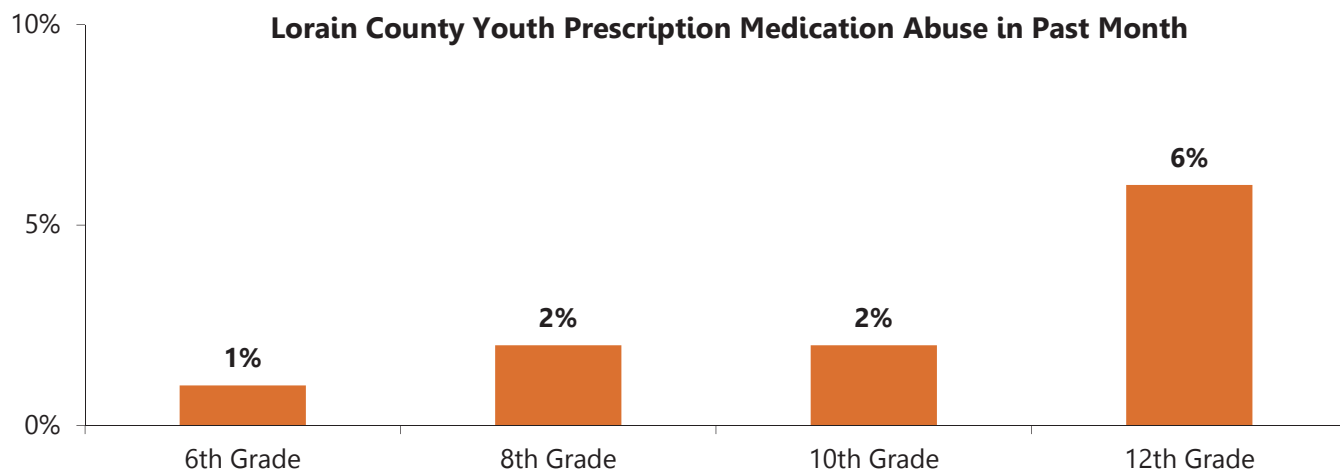
Lorain County Youth Drug Use In The Past Year



Lorain County Youth Marijuana Use in Past Month



The following graph is data from the 2018 Pride Survey Report indicating youth prescription medication abuse in the past month. Examples of how to interpret the information include: 6% of 12th grade youth had misused medications in the past month.



Youth Comparisons	Lorain County 2018 6 th grade	Lorain County 2018 8 th grade	Lorain County 2018 10 th grade	Lorain County 2018 12 th grade
Used marijuana in the past month	1%	5%	13%	31%
Used methamphetamines in the past year	<1%	<1%	<1%	1%
Used cocaine in the past year	<1%	<1%	1%	3%
Used heroin in the past year	<1%	0%	0%	1%
Used steroids in the past year	2%	1%	1%	1%
Used inhalants in the past year	1%	3%	1%	2%
Used ecstasy/MDMA in the past year	<1%	1%	1%	3%
Used prescription drugs not prescribed for them in the past month	1%	2%	2%	6%

Drug Facts: Drugged Driving

- Vehicle accidents are the leading cause of death among youth people aged 16 to 19. When teens' relative lack of driving experience is combined with the use of marijuana or other substances that affect cognitive and motor abilities, the results can be tragic.
- According to the 2018 National Survey on Drug Use and Health (NSDUH), an estimated 11.8 million people aged 16 or older drove under the influence of illicit drugs.
 - NSDUH also found young adults aged 18 to 25 drive after taking drugs or drinking at a higher percentage than adults 26 or older.
- A 2010 nationwide study of deadly crashes found that about 47% of drivers who tested positive for drugs had used a prescription drug, compared to 37% of those had used marijuana and about 10% of those who had used cocaine.
- One NHTSA study found that in 2009, 18 percent of drivers killed in a crash tested positive for at least one drug. A 2010 study showed that 11% of deadly crashes involved a drugged driver.

(Source: National Institute on Drug Abuse, *The Science of Drug Abuse & Addiction: Drug Facts: Drugged Driving*, June 2016)

Youth Health: Mental Health

Key Findings

One-fourth (25%) of Lorain County 6th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. More than one-fourth (28%) of 12th grade youth reported they had seriously considered attempting suicide in the past 12 months.

6th Grade Youth Mental Health

- In 2018, 25% of Lorain County 6th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- Nineteen percent (19%) of youth reported they had seriously considered attempting suicide in the past 12 months.
- In the past year, 12% of Lorain County youth had attempted suicide. Six percent (6%) of youth had made more than one attempt.
- Lorain County youth reported talking about their concerns to the following when dealing with feelings of depression or suicide: parents (15%), best friend/girlfriend/boyfriend (13%), school counselor/professional counselor (3%), teacher (1%), pastor/priest/minister (1%), and scout master/club advisor/youth leader/coach (1%). Fourteen percent (14%) reported they had no one to talk to.
- Almost half (49%) of Lorain County youth reported they did not have feelings of depression or suicide.
- Lorain County youth reported the following ways of dealing with anxiety, stress, or depression: talk to someone (42%), exercise/hobby/journal (29%), sleep (28%), break something/violent behavior/self-harm (9%), eat/shop/gamble (8%), use medication (3%), use illegal drugs (1%), and drink alcohol (<1%).
- The following would keep youth from seeking help if they were dealing with anxiety, stress, depression or thoughts of suicide: they can handle it themselves (17%), worried about what others might think (15%), did not know where to go (12%), no time (5%), cost (5%), their family would not support them (2%), and transportation (2%). Forty percent (40%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide.
- In 2018, 6th graders were currently concerned about fellow student(s) who may be experiencing the following: depression/anxiety/stress (37%), bullying (being a bully or being a target of bullying) (35%), thoughts of suicide (21%), aggression/violence (14%), and alcohol/drugs (11%).

8th Grade Youth Mental Health

- In 2018, 32% of Lorain County 8th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- One-fifth (20%) of youth reported they had seriously considered attempting suicide in the past 12 months.
- In the past year, 13% of Lorain County youth had attempted suicide. Six percent (6%) of youth had made more than one attempt.
- Lorain County youth reported talking about their concerns to the following when dealing with feelings of depression or suicide: best friend/girlfriend/boyfriend (18%), parents (11%), school counselor/professional counselor (4%), teacher (2%), pastor/priest/minister (1%) and scout master/club advisor/youth leader/coach (1%). Sixteen percent (16%) reported they had no one to talk to.
- Forty-six percent (46%) of Lorain County youth reported they did not have feelings of depression or suicide.

- Lorain County youth reported the following ways of dealing with anxiety, stress, or depression: talk to someone (41%), sleep (36%), exercise/hobby/journal (32%), eat/shop/gamble (11%), break something/violent behavior/self-harm (9%), use medication (3%), use illegal drugs (3%), and drink alcohol (1%).
- The following would keep youth from seeking help if they were dealing with anxiety, stress, depression or thoughts of suicide: they can handle it themselves (21%), worried about what others might think (18%), did not know where to go (10%), no time (8%), cost (4%), their family would not support them (4%), and transportation (3%). Thirty-nine percent (39%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide.
- In 2018, 8th graders were currently concerned about fellow student(s) who may be experiencing the following: depression/anxiety/stress (50%), bullying (being a bully or being a target of bullying) (31%), thoughts of suicide (29%), alcohol/drugs (19%), and aggression/violence (18%).

10th Grade Youth Mental Health

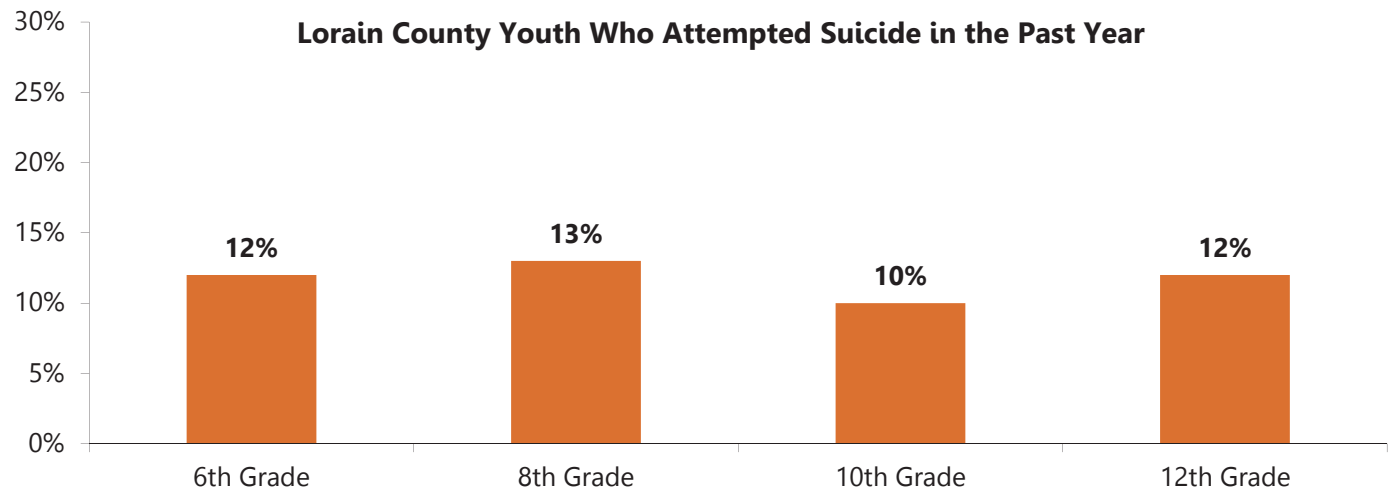
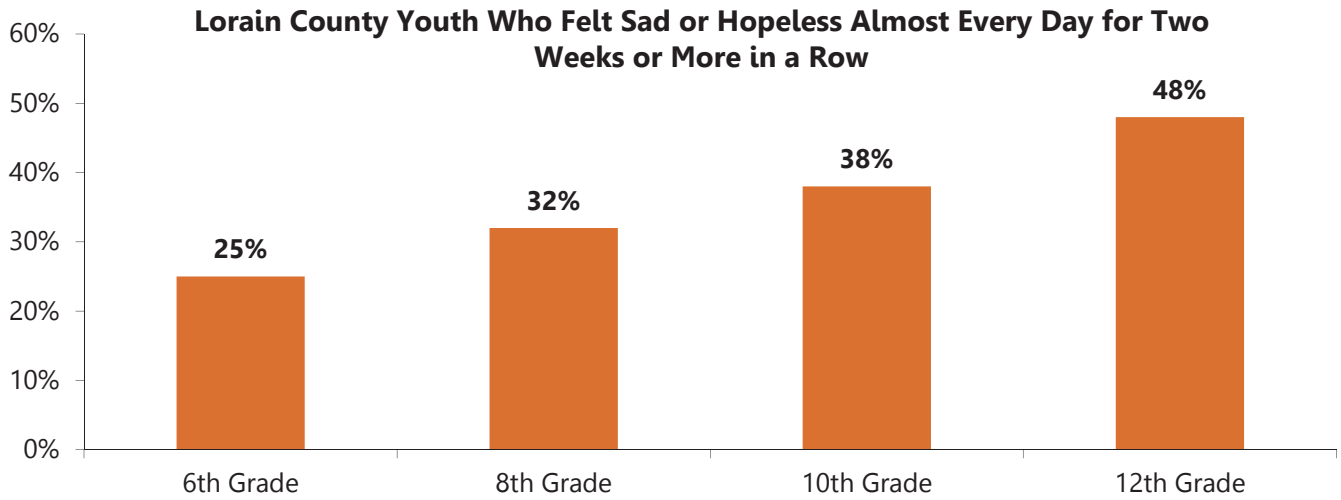
- In 2018, 38% of Lorain County 10th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- More than one-fifth (22%) of youth reported they had seriously considered attempting suicide in the past 12 months.
- In the past year, 10% of Lorain County youth had attempted suicide. Four percent (4%) of youth had made more than one attempt.
- Lorain County youth reported talking about their concerns to the following when dealing with feelings of depression or suicide: best friend/girlfriend/boyfriend (26%), parents (10%), school counselor/professional counselor (5%), teacher (1%), pastor/priest/minister (1%) and scout master/club advisor/youth leader/coach (1%). Sixteen percent (16%) reported they had no one to talk to.
- More than one-third (36%) of Lorain County youth reported they did not have feelings of depression or suicide.
- Lorain County 10th grade youth reported the following ways of dealing with anxiety, stress, or depression: sleep (42%), talk to someone (42%), exercise/hobby/journal (35%), eat/shop/gamble (13%), break something/violent behavior/self-harm (9%), use illegal drugs (5%), use medication (4%), and drink alcohol (3%).
- The following would keep youth from seeking help if they were dealing with anxiety, stress, depression or thoughts of suicide: they can handle it themselves (30%), worried about what others might think (18%), no time (13%), cost (9%), did not know where to go (9%), their family would not support them (6%), and transportation (6%). One-third (33%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide.
- In 2018, 10th graders were currently concerned about fellow student(s) who may be experiencing the following: depression/anxiety/stress (53%), alcohol/drugs (27%), thoughts of suicide (25%), and bullying (being a bully or being a target of bullying) (24%), and aggression/violence (17%).

12th Grade Youth Mental Health

- In 2018, 48% of Lorain County 12th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- More than one-fourth (28%) of youth reported they had seriously considered attempting suicide in the past 12 months.
- In the past year, 12% of Lorain County youth had attempted suicide. Five percent (5%) of youth had made more than one attempt.

- Lorain County youth reported talking about their concerns to the following when dealing with feelings of depression or suicide: best friend/girlfriend/boyfriend (32%), parents or other relative (12%), school counselor/professional counselor (5%), teacher (4%), pastor/priest/minister (1%) and scout master/club advisor/youth leader/coach (11%). More than one-fifth (21%) reported they had no one to talk to.
- One-fourth (25%) of Lorain County youth reported they did not have feelings of depression or suicide.
- Lorain County 12th grade youth reported the following ways of dealing with anxiety, stress, or depression: sleep (43%), talk to someone (41%), exercise/hobby/journal (32%), eat/shop/gamble (20%), use illegal drugs (14%), break something/violent behavior/self-harm (9%), drink alcohol (9%), and use medication (6%).
- The following would keep youth from seeking help if they were dealing with anxiety, stress, depression or thoughts of suicide: they can handle it themselves (29%), worried about what others might think (19%), no time (15%), cost (14%), did not know where to go (14%), their family would not support them (7%), and transportation (5%). Over one-quarter (26%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide.
- In 2018, 12th graders were currently concerned about fellow student(s) who may be experiencing the following: depression/anxiety/stress (55%), alcohol/drugs (32%), thoughts of suicide (29%), bullying (being a bully or being a target of bullying) (25%), and aggression/violence (16%).

The following graphs show the percentage of Lorain County youth who had felt sad or hopeless almost every day for two weeks or more in a row and attempted suicide in the past 12 months (i.e., the first graph shows that 25% of Lorain County youth in 6th grade had felt sad or hopeless for two weeks or more, 32% of 8th graders and 38% of 10th graders).



Youth Comparisons	Lorain County 2018 6 th grade	Lorain County 2018 8 th grade	Lorain County 2018 10 th grade	Lorain County 2018 12 th grade
Youth who had seriously considered attempting suicide in the past year	19%	20%	22%	28%
Youth who had attempted suicide in the past year	12%	13%	10%	12%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	25%	32%	38%	48%

Youth Depression: Signs and Symptoms

- Occasionally being sad or feeling hopeless is a part of every child’s life. However, some children feel sad or uninterested in things that they used to enjoy or feel helpless or hopeless in situations where they could do something to address the situations. When children feel persistent sadness and hopelessness, they may be diagnosed with depression.
- Examples of behaviors often seen when children are depressed include
 - Feeling sad, hopeless, or irritable a lot of the time
 - Not wanting to do or enjoy doing fun things
 - Changes in eating patterns – eating a lot more or a lot less than usual
 - Changes in sleep patterns – sleeping a lot more or a lot less than normal
 - Changes in energy – being tired and sluggish or tense and restless a lot of the time
 - Having a hard time paying attention
 - Feeling worthless, useless, or guilty
 - Self-injury and self-destructive behavior
- Extreme depression can lead a child to think about suicide or plan for suicide. For youth ages 10-24 years, suicide is the leading form of death.
- Some children may not talk about helpless and hopeless thoughts, and they may not appear sad. Depression might also cause a child to make trouble or act unmotivated, so others might not notice that the child is depressed or may incorrectly label the child as a trouble-maker or lazy.

(Source: CDC, Children’s Mental Health: Anxiety and Depression, March 15, 2018)

Youth Health: Safety & Violence Issues

Key Findings

Twenty-five percent (25%) of Lorain County 8th grade youth had threatened to hurt another student by hitting, slapping or kicking. Sixteen percent (16%) of 6th grade youth hurt another student by hitting, slapping or kicking. In 2018, 7% of 12th graders carried a knife, club or other weapon at school.

6th Grade Youth Violence-Related Behaviors & Personal Safety

- In 2018, 2% of youth had carried a handgun at school. Five percent (5%) had carried a knife, club or other weapon at school.
- The 2018 Pride Survey indicated that 1% of youth have threatened a student with a handgun, knife or club at school, and <1% of youth had hurt a student by using a handgun, knife or club at school.
- Seventeen percent (17%) of Lorain County 6th grade youth had threatened to hurt another student by hitting, slapping or kicking. Sixteen percent (16%) of youth hurt another student by hitting, slapping or kicking.
- Four percent (4%) of youth had been threatened with a handgun, knife or club by another student. One-third (33%) of youth indicated that another student had threatened to hit, slap or kick them.
- Nearly three-fourths (72%) of Lorain County 6th grade youth always wore a seatbelt when riding in a car.

8th Grade Youth Violence-Related Behaviors & Personal Safety

- In 2018, 2% of youth had carried a handgun at school. Eight percent (8%) had carried had a knife, club or other weapon at school.
- One percent (1%) of youth had threatened a student with a handgun, knife or club at school. One percent (1%) of youth hurt a student by using a handgun, knife or club at school.
- One-fourth (25%) of Lorain County 8th grade youth had threatened to hurt another student by hitting, slapping or kicking. Nineteen percent (19%) of youth hurt another student by hitting, slapping or kicking.
- Six percent (6%) of youth had been threatened with a handgun, knife or club by another student. Thirty-seven percent (37%) of youth indicated that another student had threatened to hit, slap or kick them.
- More than half (57%) of Lorain County 8th grade youth always wore a seatbelt when riding in a car.

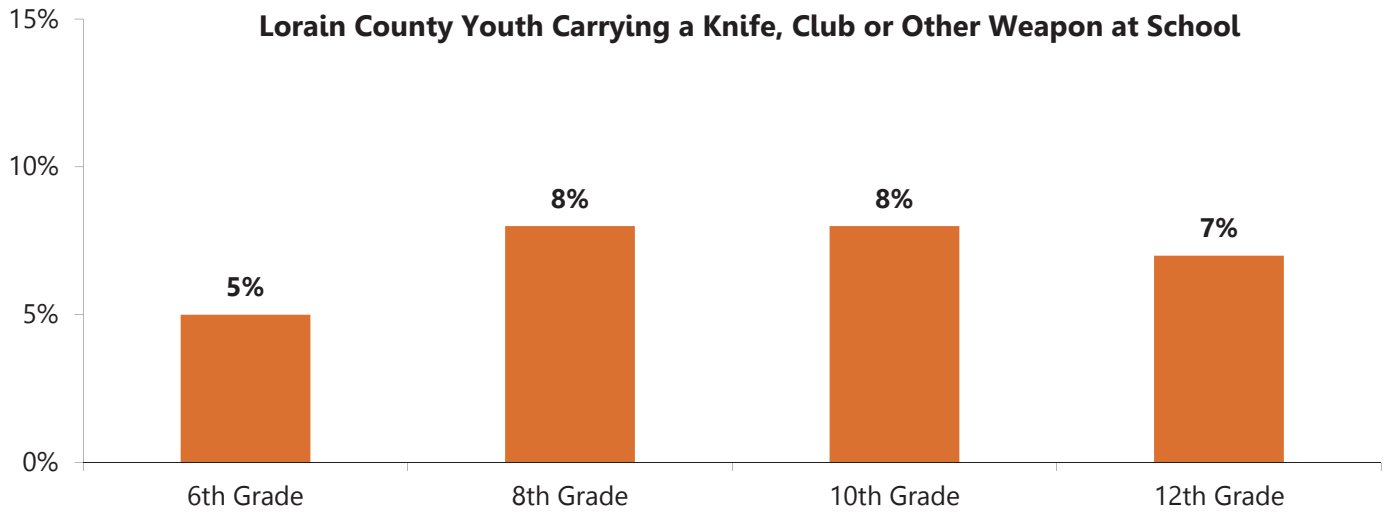
10th Grade Youth Violence-Related Behaviors & Personal Safety

- In 2018, 3% of youth had carried a handgun at school. Eight percent (8%) had carried had a knife, club or other weapon at school.
- One percent (1%) of youth had threatened a student with a handgun, knife or club at school. Less than one percent (<1%) of youth hurt a student by using a handgun, knife or club at school.
- Almost one-fourth (22%) of Lorain County youth had threatened to hurt another student by hitting, slapping or kicking. Fourteen percent (14%) of youth hurt another student by hitting, slapping or kicking.
- Five percent (5%) of youth had been threatened with a handgun, knife or club by another student. Twenty-seven percent (27%) of youth indicated that another student had threatened to hit, slap or kick them.
- Fifty-five percent (55%) of Lorain County 10th grade youth always wore a seatbelt when riding in a car and 43% always wore a seatbelt when driving a car.

12th Grade Youth Violence-Related Behaviors & Personal Safety

- In 2018, 2% of youth had carried a handgun at school. Seven percent (7%) had carried had a knife, club or other weapon at school.
- Two percent (2%) of youth had threatened a student with a handgun, knife or club at school. One percent (1%) of youth hurt a student by using a handgun, knife or club at school.
- Sixteen percent (16%) of Lorain County youth had threatened to hurt another student by hitting, slapping or kicking. Nine percent (9%) of youth hurt another student by hitting, slapping or kicking.
- Three percent (3%) of youth had been threatened with a handgun, knife or club by another student. More than one-fifth (21%) of youth indicated that another student had threatened to hit, slap or kick them.
- Sixty-three percent (63%) of Lorain County 12th grade youth always wore a seatbelt when riding in a car and 71% always wore a seatbelt when driving a car.

The following graph shows the percentage of Lorain County youth carrying a knife, club or other weapon at school. The graphs show the percentage of youth in each segment giving each answer (i.e., 5% of 6th grade carried a knife, club or other weapon at school; 8% of 8th graders and 7% of 12th graders).



Youth Comparisons	Lorain County 2018 6 th grade	Lorain County 2018 8 th grade	Lorain County 2018 10 th grade	Lorain County 2018 12 th grade
Youth who carried a knife, club or other weapon at school	5%	8%	8%	7%
Youth who had been threatened by a student at school with a handgun, knife or club	4%	6%	5%	3%
Youth who threatened to hurt another student by hitting, slapping or kicking	17%	25%	22%	16%
Youth who always wore a seatbelt when driving a car	N/A	N/A	43%	71%

N/A- Not Available

Preventing Youth Violence

- Youth violence is defined as the intentional use of physical force or power to threaten or harm others by young people ages 10-24. It is the leading cause of death for young people and results in more than 500,000 nonfatal injuries each year.
- Youth violence starts early. Many risk factors are the result of experiencing chronic stress which can alter and/or harm the brain development of children and youth such as
 - Living in impoverished neighborhoods
 - Living in dilapidated housing
 - Frequently moving
 - Experiencing food insecurity
 - Experiencing racism
 - Limited access to support and medical services
 - Living in homes with violence
 - Mental health problems
 - Substance abuse
 - And other instability
- Youth violence is an adverse childhood experience and is connected to other forms of violence, including child abuse and neglect, teen dating violence, adult intimate partner violence, sexual violence, and suicide. Different forms of violence have common risk and protective factors, and victims of one form of violence are more likely to experience other forms of violence.
- Violence increases health care costs, decreases property value, and disrupts social services. Youth violence negatively impacts perceived and actual safety, participation in community events, youth's school attendance, and viability of businesses.
- Youth homicides and nonfatal physical assault-related injuries result in more than \$21 billion annually through medical and lost productivity costs. This does not include costs associated with the criminal justice system; psychological and social consequences for victims, perpetrators and/or their families; nor the costs incurred by communities.

(Source: CDC, Violence Prevention; Preventing Youth Violence, 2018)

Youth Health: Perceptions

Key Findings

Fifty-nine percent (59%) of Lorain County 6th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Less than one-third (29%) of Lorain County 12th grade youth reported their peers would feel it was very wrong for them to smoke tobacco.

6th Grade Perceived Risk of Substance Use

- Fifty-nine percent (59%) of Lorain County 6th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day.
- In 2018, 11% of 6th grade youth thought that there was no risk for smoking one or more packs of cigarettes per day.
- More than two-fifths (44%) of youth thought there was a great risk in smoking marijuana once or twice a week.
- Fifteen percent (15%) of youth thought that there was no risk of smoking marijuana once or twice a week.
- Forty percent (40%) of Lorain County 6th grade youth thought there was a great risk for using e-cigarettes, vape pens, or e-liquid rigs.
- Eleven percent (11%) of youth thought that there was no risk for using e-cigarettes, vape pens, or e-liquid rigs.
- Sixty-six percent (66%) of Lorain County youth thought there was a great risk to using prescription drugs that were not prescribed for them.
- Ten percent (10%) of youth thought that there was no risk in misusing prescription drugs.

8th Grade Perceived Risk of Substance Use

- More than half (57%) of Lorain County 8th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day.
- Ten percent (10%) of youth thought that there was no risk for smoking one or more packs of cigarettes per day.
- Over one-third (35%) of youth thought there was a great risk in smoking marijuana once or twice a week.
- One-fifth (20%) of youth thought that there was no risk of smoking marijuana once or twice a week.
- More than one-fourth (27%) of Lorain County 8th grade youth thought there was a great risk for using e-cigarettes, vape pens, or e-liquid rigs.
- Thirteen percent (13%) of youth thought that there was no risk for using e-cigarettes, vape pens, or e-liquid rigs.
- Sixty-four percent (64%) of Lorain County youth thought there was a great risk to using prescription drugs that were not prescribed for them.
- Eleven percent (11%) of 8th grade youth thought that there was no risk in misusing prescription drugs.

10th Grade Perceived Risk of Substance Use

- More than two-thirds (67%) of Lorain County 10th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day.
- Eight percent (8%) of youth thought that there was no risk for smoking one or more packs of cigarettes per day.

- More than one-fifth (22%) of 10th grade youth thought there was a great risk in smoking marijuana once or twice a week
- Nearly one-quarter (24%) of youth thought that there was no risk of smoking marijuana once or twice a week.
- In 2018, 20% of Lorain County youth thought there was a great risk for using e-cigarettes, vape pens, or e-liquid rigs.
- Fourteen percent (14%) of youth thought that there was no risk for using e-cigarettes, vape pens, or e-liquid rigs.
- More than three-fifths (67%) of Lorain County youth thought there was a great risk to using prescription drugs that were not prescribed for them.
- Eight percent (8%) of youth thought that there was no risk in misusing prescription drugs.

12th Grade Perceived Risk of Substance Use

- Sixty-six percent (66%) of Lorain County 12th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day.
- Eight percent (8%) of youth thought that there was no risk for smoking one or more packs of cigarettes per day.
- Twelve percent (12%) of 12th grade youth thought there was a great risk in smoking marijuana once or twice a week.
- More than two-fifths (42%) of youth thought that there was no risk of smoking marijuana once or twice a week.
- In 2018, 17% of Lorain County youth thought there was a great risk for using e-cigarettes, vape pens, or e-liquid rigs.
- Fourteen percent (14%) of youth thought that there was no risk for using e-cigarettes, vape pens, or e-liquid rigs.
- More than three-fifths (64%) of Lorain County youth thought there was a great risk to using prescription drugs that were not prescribed for them.
- Eight percent (8%) of youth thought that there was no risk in misusing prescription drugs.

6th Grade Degree of Disapproval of Substance Use by Parents

- Over four-fifths (86%) of youth reported their parents would feel it was very wrong for them to smoke tobacco.
- Ninety-two percent (92%) of Lorain County youth reported their parents would feel it was very wrong for them to smoke marijuana.
- Eighty-four percent (84%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Ninety-one percent (91%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

8th Grade Degree of Disapproval of Substance Use by Parents

- Eighty percent (80%) of youth reported their parents would feel it was very wrong for them to smoke tobacco.
- Eighty-three percent (83%) of Lorain County youth reported their parents would feel it was very wrong for them to smoke marijuana.
- More than three-fourths (79%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.

- Ninety percent (90%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

10th Grade Degree of Disapproval of Substance Use by Parents

- Seventy-seven percent (77%) of youth reported their parents would feel it was very wrong for them to smoke tobacco.
- Sixty-nine percent (69%) of Lorain County youth reported their parents would feel it was very wrong for them to smoke marijuana.
- Seventy-seven percent (77%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Ninety-one percent (91%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

12th Grade Degree of Disapproval of Substance Use by Parents

- Sixty-four percent (64%) of youth reported their parents would feel it was very wrong for them to smoke tobacco.
- More than half (54%) of Lorain County youth reported their parents would feel it was very wrong for them to smoke marijuana.
- Sixty-three percent (63%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Eighty-six percent (86%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

6th Grade Degree of Disapproval of Substance Use by Peers

- Seventy percent (70%) of 6th grade youth reported their peers would feel it was very wrong for them to smoke tobacco.
- Seventy-seven percent (77%) of Lorain County youth reported their peers would feel it was very wrong for them to smoke marijuana.
- Seventy-one percent (71%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Eighty percent (80%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.

8th Grade Degree of Disapproval of Substance Use by Peers

- Almost half (49%) of Lorain County 8th grade youth reported their peers would feel it was very wrong for them to smoke tobacco.
- Fifty-two percent (52%) of Lorain County youth reported their peers would feel it was very wrong for them to smoke marijuana.
- More than half (52%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Sixty-six percent (66%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.

10th Grade Degree of Disapproval of Substance Use by Peers

- More than two-fifths (41%) of Lorain County youth reported their peers would feel it was very wrong for them to smoke tobacco.
- Nearly one-third (32%) of Lorain County 10th grade youth reported their peers would feel it was very wrong for them to smoke marijuana.
- Thirty-seven percent (37%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Sixty-one percent (61%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.

12th Grade Degree of Disapproval of Substance Use by Peers

- Less than one-third (29%) of Lorain County youth reported their peers would feel it was very wrong for them to smoke tobacco.
- Sixteen percent (16%) of Lorain County 12th grade youth reported their peers would feel it was very wrong for them to smoke marijuana.
- More than one-fourth (26%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Fifty-four percent (54%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.

6th Grade Perceived Risk of Substance Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	11%	8%	22%	59%
Use an e-cigarette, vape pen, e-liquid rig, (ex: JUUL, N2, Joytech, etc.)	11%	20%	29%	40%
Have one or two drinks of an alcoholic beverage nearly everyday	18%	25%	23%	34%
Have five or more drinks of an alcoholic beverage once or twice a week	14%	16%	31%	39%
Smoke marijuana once or twice a week	15%	14%	27%	44%
Use prescription drugs not prescribed to them	10%	7%	17%	66%

8th Grade Perceived Risk of Substance Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	10%	9%	24%	57%
Use an e-cigarette, vape pen, e-liquid rig, (ex: JUUL, N2, Joytech, etc.)	13%	29%	31%	27%
Have one or two drinks of an alcoholic beverage nearly everyday	15%	26%	26%	33%
Have five or more drinks of an alcoholic beverage once or twice a week	12%	17%	35%	36%
Smoke marijuana once or twice a week	20%	19%	26%	35%
Use prescription drugs not prescribed to them	11%	6%	19%	64%

10th Grade Perceived Risk of Substance Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	8%	6%	19%	67%
Use an e-cigarette, vape pen, e-liquid rig, (ex: JUUL, N2, Joytech, etc.)	14%	32%	34%	20%
Have one or two drinks of an alcoholic beverage nearly everyday	11%	19%	34%	36%
Have five or more drinks of an alcoholic beverage once or twice a week	10%	19%	36%	35%
Smoke marijuana once or twice a week	24%	29%	25%	22%
Use prescription drugs not prescribed to them	8%	6%	19%	67%

12th Grade Perceived Risk of Substance Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	8%	7%	19%	66%
Use an e-cigarette, vape pen, e-liquid rig, (ex: JUUL, N2, Joytech, etc.)	14%	36%	33%	17%
Have one or two drinks of an alcoholic beverage nearly everyday	12%	20%	32%	36%
Have five or more drinks of an alcoholic beverage once or twice a week	10%	28%	33%	29%
Smoke marijuana once or twice a week	42%	27%	19%	12%
Use prescription drugs not prescribed to them	8%	6%	22%	64%

6th Grade Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	2%	1%	11%	86%
Have one or two drinks of an alcoholic beverage nearly every day	2%	3%	11%	84%
Smoke marijuana	2%	1%	5%	92%
Use prescription drugs not prescribed to them	2%	1%	6%	91%

8th Grade Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	3%	3%	14%	80%
Have one or two drinks of an alcoholic beverage nearly every day	4%	4%	13%	79%
Smoke marijuana	5%	4%	8%	83%
Use prescription drugs not prescribed to them	3%	1%	6%	90%

10th Grade Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	2%	5%	16%	77%
Have one or two drinks of an alcoholic beverage nearly every day	3%	4%	16%	77%
Smoke marijuana	6%	11%	14%	69%
Use prescription drugs not prescribed to them	2%	2%	5%	91%

12th Grade Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	3%	12%	21%	64%
Have one or two drinks of an alcoholic beverage nearly every day	3%	9%	25%	63%
Smoke marijuana	10%	18%	18%	54%
Use prescription drugs not prescribed to them	2%	3%	9%	86%

6th Grade Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	5%	4%	21%	70%
Have one or two drinks of an alcoholic beverage nearly every day	5%	6%	1%	71%
Smoke marijuana	5%	4%	14%	77%
Use prescription drugs not prescribed to them	4%	4%	12%	80%

8th Grade Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	8%	15%	28%	49%
Have one or two drinks of an alcoholic beverage nearly every day	8%	13%	27%	52%
Smoke marijuana	12%	13%	23%	52%
Use prescription drugs not prescribed to them	6%	7%	21%	66%

10th Grade Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	12%	17%	30%	41%
Have one or two drinks of an alcoholic beverage nearly every day	12%	18%	33%	37%
Smoke marijuana	28%	22%	18%	32%
Use prescription drugs not prescribed to them	7%	8%	24%	61%

12th Grade Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoke tobacco	22%	23%	26%	29%
Have one or two drinks of an alcoholic beverage nearly every day	20%	23%	31%	26%
Smoke marijuana	51%	18%	15%	16%
Use prescription drugs not prescribed to them	10%	10%	26%	54%

Appendix I: Health Needs Assessment Information Sources

Source	Data Used	Website
American Association of Suicidology	<ul style="list-style-type: none"> National Suicide Statistics 	www.suicidology.org/resources/facts-statistics
American Cancer Society, Cancer Facts and Figures 2018. Atlanta: ACS, 2019	<ul style="list-style-type: none"> 2019 Cancer Facts, Figures, and Estimates 	https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2019.html
American College of Allergy, Asthma & Immunology, 2016	<ul style="list-style-type: none"> Asthma Facts 	acaai.org/news/facts-statistics/asthma
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	<ul style="list-style-type: none"> 2010 - 2017 Adult Ohio and U.S. Correlating Statistics 	www.cdc.gov/brfss/index.html
Brady Campaign to Prevent Gun Violence	<ul style="list-style-type: none"> Victims of Gun Violence in America 	www.bradycampaign.org/key-gun-violence-statistics
CDC, Alcohol and Public Health	<ul style="list-style-type: none"> Economic Costs of Excessive Alcohol Use 	www.cdc.gov/alcohol/data-stats.htm
	<ul style="list-style-type: none"> Underage Drinking in the U.S. 	www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm
CDC, Arthritis	<ul style="list-style-type: none"> Arthritis: Key Public Health Messages 	www.cdc.gov/arthritis/about/key-messages.htm
	<ul style="list-style-type: none"> Arthritis Risk Factors 	www.cdc.gov/arthritis/basics/risk-factors.htm
CDC, Asthma, 2010	<ul style="list-style-type: none"> Common Asthma Triggers 	www.cdc.gov/asthma/triggers.html
CDC, Cancer Prevention and Control	<ul style="list-style-type: none"> Prostate Cancer Awareness 	www.cdc.gov/cancer/dcpc/resources/features/prostatecancer/index.htm
CDC, Children's Mental Health	<ul style="list-style-type: none"> Anxiety and Depression; Youth Signs and Symptoms 	www.cdc.gov/childrensmentalhealth/depression.html
CDC, Diabetes	<ul style="list-style-type: none"> About Diabetes 	www.cdc.gov/diabetes/basics/diabetes.html
CDC, Gateway to Health Communication & Social Marketing Practice	<ul style="list-style-type: none"> Marijuana Use and Teens 	www.cdc.gov/healthcommunication/toolstemplates/entertainment/tips/marijuana-teens.html
CDC, Mold Prevention	<ul style="list-style-type: none"> Facts about Mold and Dampness 	www.cdc.gov/mold/dampness_facts.htm
CDC, National Center for Health Statistics	<ul style="list-style-type: none"> Men's Health Data 	www.cdc.gov/nchs/fastats/mens-health.htm
	<ul style="list-style-type: none"> Contraceptive Use 	www.cdc.gov/nchs/fastats/contraceptive.htm
CDC, Oral Health, 2017	<ul style="list-style-type: none"> Facts About Adult Oral Health 	www.cdc.gov/oralhealth/basics/adult-oral-health/index.html
CDC, Smoking and Tobacco Use, 2018	<ul style="list-style-type: none"> What's the Bottom Line on the Risks of E-cigarettes for Kids, Teens, and Young Adults? 	www.cdc.gov/tobacco/basic_information/e-cigarettes/Quick-Facts-on-the-Risks-of-E-cigarettes-for-Kids-Teens-and-Young-Adults.html
	<ul style="list-style-type: none"> Effects of Cigarette Smoking, Smoking and Other Health 	www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm

Source	Data Used	Website
CDC, Violence Prevention	<ul style="list-style-type: none"> Understanding Sexual Violence 	www.cdc.gov/violenceprevention/pdf/SV-Factsheet.pdf
	<ul style="list-style-type: none"> Adverse Childhood Experiences (ACEs) 	www.cdc.gov/violenceprevention/childabusandneglect/acestudy/ace-brfss.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fviolenceprevention%2Facestudy%2Face_brfss.html
	<ul style="list-style-type: none"> Preventing Youth Violence 	www.cdc.gov/violenceprevention/pdf/yv-factsheet508.pdf
CDC Wonder	<ul style="list-style-type: none"> Some U.S. baseline statistics 	wonder.cdc.gov/
County Health Rankings	<ul style="list-style-type: none"> USDA Food Environment Atlas 	www.countyhealthrankings.org
Healthy People 2020: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> Access to Health Services All Healthy People 2020 Target Data Points Predictors of Access to Health Care 	www.healthypeople.gov/2020/topicsobjectives2020
	<ul style="list-style-type: none"> Social Determinants of Health 	www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health
Henry Kaiser Family Foundation, The	<ul style="list-style-type: none"> Key Facts about the Uninsured Population 	www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/
Lorain County Transportation Barriers Assessment	<ul style="list-style-type: none"> Lorain County Patient Transportation Barriers 	www.loraincountyhealth.com/cms/files/File/Lorain%20County%20CHIP%20REVISED%20June%202016.pdf
Ohio Automated Rx Reporting System (OARRS), The	<ul style="list-style-type: none"> Lorain County and Ohio Opiate and Pain Reliever Doses per Patient, 2015-2017 Lorain County and Ohio Opiate and Pain Reliever Doses per Capita, 2015-2017 Ohio Automated Rx Reporting System (OARRS) 	www.ohiopmp.gov/Default.aspx
Ohio Department of Health	<ul style="list-style-type: none"> 2017 Ohio Drug Overdose Data: General Finding 	odh.ohio.gov/wps/wcm/connect/gov/5deb684e-4667-4836-862b-cb5eb59acbd3/2017_OhioDrugOverdoseReport.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HG GIK0N0JO00QO9DDDDM3000-5deb684e-4667-4836-862b-cb5eb59acbd3-moxPbu6
Ohio Department of Health, Bureau of Vital Statistics, 2016 Ohio Infant Mortality Data: General Findings	<ul style="list-style-type: none"> Infant Mortality Rates for Lorain County and Ohio 	odh.ohio.gov/wps/wcm/connect/gov/5b43b42b-0733-42cd-8a01-063f831ec53f/2017+Ohio+Infant+Mortality+Report.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HG GIK0N0JO00QO9DDDDM3000-5b43b42b-0733-42cd-8a01-063f831ec53f-mzKcbiN
Ohio Department of Health, Ohio Public Health Data Warehouse 2015-2017	<ul style="list-style-type: none"> Lorain County and Ohio Birth Statistics Lorain County and Ohio Leading Causes of Death, Mortality Statistics 	publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/Mortality

Source	Data Used	Website
Ohio Department of Health (ODH), STD Surveillance Data and Statistics	<ul style="list-style-type: none"> • Lorain County and Ohio Chlamydia and Gonorrhea Disease Rates • Lorain County Chlamydia and Gonorrhea Cases • Lorain County HIV Surveillance 	odh.ohio.gov/wps/portal/gov/odh/knownour-programs/std-surveillance/data-and-statistics/sexually-transmitted-diseases-data-and-statistics
Ohio Department of Public Safety	<ul style="list-style-type: none"> • 2017 Lorain County and Ohio Crash Facts 	ext.dps.state.oh.us/crashstatistics/CrashReports.aspx
National Alliance on Mental Illness	<ul style="list-style-type: none"> • Know the Warning Signs 	www.nami.org/Learn-More/Know-the-Warning-Signs
National Institute on Drug Abuse, The Science of Drug Abuse & Addiction	<ul style="list-style-type: none"> • Drug Facts: Drugged Driving 	www.drugabuse.gov/publications/drugfacts/drugged-driving
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> • American Community Survey 5-year estimate, 2012-2016 • Ohio and Henry County 2016 Census Demographic Information • Ohio and U.S. Health Insurance Sources • Small Area Income and Poverty Estimates • Federal Poverty Thresholds 	www.census.gov
U.S. Department of Health & Human Services	<ul style="list-style-type: none"> • Physical Activity Guidelines for Americans, 2018 	health.gov/paguidelines/second-edition/pdf/Physical_Activity_Guidelines_2nd_edition.pdf
Youth Risk Behavior Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Centers for Disease Control	<ul style="list-style-type: none"> • 2009 - 2017 U.S. Youth Correlating Statistics 	nccd.cdc.gov/youthonline/app/

Appendix II: Acronyms and Terms

ACE	A dverse C hildhood E xperiences
AHS	A ccess to H ealth S ervices, Topic of Healthy People 2020 objectives
Adult	Defined as 19 years of age and older.
Age-Adjusted	Death rate per 100,000 adjusted for the age
Mortality Rates	Distribution of the population.
Adult Binge Drinking	Consumption of five alcoholic beverages or more (for males) or four or more alcoholic beverages (for females) on one occasion.
AOCBC	A rthritis, O steoporosis, and C hronic B ack C onditions
BMI	B ody M ass I ndex is defined as the contrasting measurement/relationship of weight to height.
BRFSS	B ehavior R isk F actor S urveillance S ystem, an adult survey conducted by the CDC.
CDC	C enters for D isease C ontrol and P revention.
Current Drinker	Individual who has had at least 1 alcoholic beverage in the past 30 days
Current Smoker	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
CY	C alendar Y ear
FY	F iscal Y ear
HCNO	H ospital C ouncil of N orthwest O hio
HDS	H eart D isease and S troke, Topic of Healthy People 2020 objectives
HP 2020	H ealthy P eople 2020 , a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
Health Indicator	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
High Blood Cholesterol	240 mg/dL and above
High Blood Pressure	Systolic \geq 140 and Diastolic \geq 90
IID	I mmunizations and I nfectious D iseases, Topic of Healthy People 2020 objectives
N/A	Data is not available.
NSCH	N ational S urvey of C hildren's H ealth
ODH	O hio D epartment of H ealth
OSHP	O hio S tate H ighway P atrol
Race/Ethnicity	Census 2010: U.S. Census data consider race and Hispanic origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as "a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race." Data are presented as "Hispanic or Latino" and "Not Hispanic or Latino." Census 2010 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other. Pacific Islander. Data reported, "White alone" or "Black alone", means the respondents reported only one race.
Ohio SHA/SHIP	O hio S tate H ealth A ssessment/ S tate H ealth I mprovement P lan

Weapon	Defined in the YRBS as “a weapon such as a gun, knife, or club”
Youth	Defined as 12 through 18 years of age
YPLL/65	Years of Potential Life Lost before age 65. Indicator of premature death.
Youth Binge Drinking	Consumption of five alcoholic beverages or more on one occasion
Youth BMI Classifications	Underweight is defined as BMI-for-age \leq 5 th percentile Overweight is defined as BMI-for-age 85 th percentile to $<$ 95 th percentile. Obese is defined as \geq 95 th percentile.
YRBS	Youth Risk Behavior Survey , a youth survey conducted by the CDC

Appendix III: Methods for Weighting the 2019 Lorain County Health Needs Assessment Data

Data from sample surveys have the potential for bias if there are different rates of response for different segments of the population. In other words, some subgroups of the population may be more represented in the completed surveys than they are in the population from which those surveys are sampled. If a sample has 25% of its respondents being male and 75% being female, then the sample is biased towards the views of females (if females respond differently than males). This same phenomenon holds true for any possible characteristic that may alter how an individual responds to the survey items.

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population in order to gain an appropriate number of responses from that subgroup for appropriate data analysis when investigating them separately (this is often done for minority groups). Whether the over-sampling is done inadvertently or purposefully, the data needs to be weighted so that the proportioned characteristics of the sample accurately reflect the proportioned characteristics of the population. In the 2018 Lorain County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Lorain County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (8 different age categories), and income (7 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Lorain County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2018 Lorain County Survey and the 2017 American Community Survey Census estimates.

<u>Sex</u>	<u>2018 Lorain Survey</u>		<u>2017 Census Estimate</u>		<u>Weight</u>
	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	333	52.27630	150,419	49.25230	0.942154
Female	304	47.72370	154,986	50.74770	1.063365

In this example, it shows that there was a slightly larger portion of males in the sample compared to the actual portion in Lorain County. The weighting for males was calculated by taking the percent of males in Lorain County (based on Census information) (49.25230%) and dividing that by the percent found in the 2018 Lorain County sample (52.27630%) [$49.25230/52.27630 = \text{weighting of } 0.942154 \text{ for males}$]. The same was done for females [$50.74770/47.72370 = \text{weighting of } 1.063365 \text{ for females}$]. Thus males' responses are weighted less by a factor of 0.942154 and females' responses weighted more by a factor of 1.063365.

This same thing was done for each of the 19 specific categories as described above. For example, a respondent who was female, White, in the age category 35-44, and with a household income in the \$50-\$75k category would have an individual weighting of 1.28129 [$1.06337 \text{ (weight for females)} \times 0.89831 \text{ (weight for White)} \times 1.29804 \text{ (weight for age 45-54)} \times 1.03336 \text{ (weight for income } \$50\text{-}\$75\text{k)}$]. Thus, each individual in the 2018 Lorain County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 24.0) when calculating frequencies. For analyses done for the entire sample and analyses done based on subgroups other than age, race, sex, or income – the weightings that were calculated based on the product of the four weighting variables (age, race, sex, income) for each individual. When analyses were done comparing groups within one of the four weighting variables (e.g., smoking status by race/ethnicity), that specific variable was not used in the weighting score that was applied in the software package. In the example smoking status by race, the weighting score that was applied during analysis included only age, sex, and income. Thus a total of eight weighting scores for each individual were created and applied depending on the analysis conducted.

The weight categories were as follows:

1. **Total weight** (product of 4 weights) – for all analyses that did not separate age, race, sex, or income.
2. **Weight without sex** (product of age, race, and income weights) – used when analyzing by sex.
3. **Weight without age** (product of sex, race, and income weights) – used when analyzing by age.
4. **Weight without race** (product of age, sex, and income weights) – used when analyzing by race.
5. **Weight without income** (product of age, race, and sex weights) – used when analyzing by income.
6. **Weight without sex or age** (product of race and income weights) – used when analyzing by sex and age.
7. **Weight without sex or race** (product of age and income weights) – used when analyzing by sex and race.
8. **Weight without sex or income** (product of age and race weights) – used analyzing by sex and income.

Category	Lorain Sample	%	2017 Census Estimates*	%	Weighting Value
Sex:					
Male	333	52.27630	150,419	49.25230	0.942154
Female	304	47.72370	154,986	50.74770	1.063365
Age:					
20 to 34 years	51	8.03150	52,336	22.92924	2.85492
35 to 44 years	47	7.40157	37,847	16.58138	2.24025
45 to 54 years	93	14.64567	43,392	19.01073	1.29804
55 to 59 years	83	13.07087	22,998	10.07579	0.77086
60 to 64 years	91	14.33071	20,336	8.90953	0.62171
65 to 74 years	167	26.29921	29,482	12.91654	0.49114
75 to 84 years	83	13.07087	14,829	6.49682	0.49705
85+ years	20	3.14961	7,030	3.07996	0.97789
Race:					
White (non-Hispanic)	561	87.79343	240,861	78.86610	0.89831
Non-White	78	12.20657	64,544	21.13390	1.73135
Household Income:					
Less than \$25,000	123	20.60302	25,346	21.37208	1.03733
\$25,000 to \$34,999	59	9.88275	11,503	9.69948	0.98146
\$35,000 to \$49,999	77	12.89782	16,544	13.95012	1.08159
\$50,000 to \$74,999	112	18.76047	22,991	19.38631	1.03336
\$75,000 to \$99,999	72	12.06030	16,073	13.55296	1.12377
\$100,000 to \$149,999	89	14.90787	16,157	13.62379	0.91387
\$150,000 or more	65	10.88777	9,980	8.41527	0.77291

Note: The weighting ratios are calculated by taking the ratio of the proportion of the population of Lorain County in each subcategory by the proportion of the sample in the Lorain County survey for that same category.

*Lorain County population figures taken from the 2017 Census.

Appendix IV: Lorain County Sample Demographic Profile*

Variable	2018 Lorain County Adult Survey Sample	Lorain County Census 2017 (1-year estimate)	Ohio Census 2017
Age			
20-29	13.9%	11.2%	13.3%
30-39	16.4%	11.1%	12.5%
40-49	18.1%	13.7%	12.0%
50-59	19.4%	14.3%	13.7%
60 plus	30.0%	24.6%	23.4%
Race/Ethnicity			
White	77.2%	84.9%	81.3%
Black or African American	13.2%	8.5%	12.4%
American Indian and Alaska Native	1.4%	0.4%	0.2%
Asian	0.3%	1.1%	2.2%
Other	6.9%	0.9%	0.9%
Hispanic Origin (may be of any race)	5.7%	10.0%	3.7%
Marital Status†			
Married Couple	51.8%	49.9%	47.4%
Never been married/member of an unmarried couple	25.1%	30.8%	32.6%
Divorced/Separated	14.9%	12.9%	13.7%
Widowed	7.4%	6.3%	6.3%
Education†			
Less than High School Diploma	2.5%	9.9%	9.7%
High School Diploma	27.9%	31.4%	33.3%
Some college/ College graduate	68.8%	57.9%	56.9%
Income (Families)			
\$14,999 and less	10.0%	12.3%	6.9%
\$15,000 to \$24,999	12.9%	10.4%	6.6%
\$25,000 to \$49,999	17.9%	22.7%	21.1%
\$50,000 to \$74,999	15.8%	18.5%	19.5%
\$75,000 or more	36.3%	36.1%	45.9%

* The percents reported are the actual percent within each category who responded to the survey. The data contained within the report however are based on weighted data (weighted by age, race, sex, and income). Percents may not add to 100% due to missing data (non-responses).

† The Ohio and Lorain County Census percentages are slightly different than the percent who responded to the survey. Marital status is calculated for those individuals 15 years and older. Education is calculated for those 25 years and older.

Appendix V: Demographics and Household Information

Lorain County Population by Age Groups and Gender U.S. Census 2010

	Total	Males	Females
Lorain County	301,356	148,135	153,221
0-4 years	18,037	9,239	8,798
1-4 years	14,691	7,509	7,182
< 1 year	3,346	1,730	1,616
1-2 years	7,197	3,665	3,532
3-4 years	7,494	3,844	3,650
5-9 years	19,913	10,245	9,668
5-6 years	7,793	4,027	3,766
7-9 years	12,120	6,218	5,902
10-14 years	21,021	10,721	10,300
10-12 years	12,489	6,340	6,149
13-14 years	8,532	4,381	4,151
12-18 years	30,155	15,393	14,762
15-19 years	21,452	10,966	10,486
15-17 years	13,107	6,668	6,439
18-19 years	8,345	4,298	4,047
20-24 years	17,074	8,853	8,221
25-29 years	16,084	8,090	7,994
30-34 years	17,541	8,890	8,651
35-39 years	19,435	9,622	9,813
40-44 years	20,837	10,498	10,339
45-49 years	23,317	11,474	11,843
50-54 years	23,946	11,840	12,106
55-59 years	21,145	10,436	10,709
60-64 years	18,523	8,897	9,526
65-69 years	12,886	6,053	6,883
70-74 years	10,042	4,651	5,481
75-79 years	7,737	3,314	4,423
80-84 years	6,470	2,500	3,970
85-89 years	4,038	1,382	2,656
90-94 years	1,533	451	1,082
95-99 years	374	87	287
100-104 years	47	15	32
105-109 years	4	1	3
110 years & over	0	0	0
Total 85 years and over	5,996	1,936	4,060
Total 65 years and over	43,131	18,454	24,817
Total 19 years and over	225,035	109,104	115,971

LORAIN COUNTY PROFILE

2017 ACS 1-year estimates
(Source: U.S. Census Bureau, 2017)

General Demographic Characteristics

	Number	Percent (%)
Total Population		
2017 Total Population	307,924	100%
Largest City – Lorain		
2017 Total Population	63,840	100%
Population by Race/Ethnicity		
Total Population	307,924	100%
White	240,566	78.1%
Hispanic or Latino (of any race)	30,783	10.0%
African American	23,256	7.6%
Two or more races	8,710	2.8%
Asian	3,278	1.1%
American Indian and Alaska Native	935	0.3%
Some other race	396	0.1%
Population by Age		
Under 5 years	17,433	5.7%
5 to 17 years	51,144	16.6%
18 to 24 years	26,655	8.7%
25 to 44 years	71,857	23.4%
45 to 64 years	85,956	27.9%
65 years and more	54,879	17.8%
Median age (years)	42.2	N/A
Household by Type		
Total households	120,394	100%
Total families	80,582	66.9%
Households with children < 18 years	32,979	27.3%
Married-couple family household	59,271	49.2%
Married-couple family household with children < 18 years	20,566	17.0%
Female householder, no husband present	15,618	12.9%
Female householder, no husband present with children < 18 years	9,772	8.1%
Nonfamily household (single person)	39,812	33.1%
Nonfamily household (single person) living alone	33,680	84.6%
Nonfamily household (single person) 65 years and >	14,491	36.4%
Households with one or more people < 18 years	35,757	29.7%
Households with one or more people 60 years and >	50,445	41.9%
Average household size	2.47 people	N/A
Average family size	3.03 people	N/A

General Demographic Characteristics, Continued

Housing Occupancy		
Median value of owner-occupied units	\$143,600	N/A
Median housing units with a mortgage	\$1,243	N/A
Median housing units without a mortgage	\$452	N/A
Median value of occupied units paying rent	\$714	N/A
Median rooms per total housing unit	6.1	N/A
Total occupied housing units	120,394	N/A
No telephone service available	2,174	1.8%
Lacking complete kitchen facilities	399	0.3%
Lacking complete plumbing facilities	136	0.1%

Selected Social Characteristics

School Enrollment		
Population 3 years and over enrolled in school	73,251	100%
Nursery & preschool	4,314	5.9%
Kindergarten	3,021	4.1%
Elementary School (Grades 1-8)	30,061	41.0%
High School (Grades 9-12)	18,258	24.9%
College or Graduate School	17,597	24.1%
Educational Attainment		
Population 25 years and over	212,692	100%
< 9 th grade education	4,089	1.9%
9 th to 12 th grade, no diploma	18,671	8.8%
High school graduate (includes equivalency)	66,790	31.4%
Some college, no degree	50,780	23.9%
Associate degree	22,242	10.5%
Bachelor's degree	33,006	15.5%
Graduate or professional degree	17,114	8.0%
Percent high school graduate or higher	N/A	89.3%
Percent Bachelor's degree or higher	N/A	23.6%
Marital Status		
Population 15 years and over	252,267	N/A
Never married	N/A	30.8%
Now married, excluding separated	N/A	49.9%
Separated	N/A	1.1%
Widowed	N/A	6.3%
Widowed females	N/A	9.8%
Divorced	N/A	11.8%
Divorced females	N/A	12.8%
Veteran Status		
Civilian population 18 years and over	239,269	100%
Veterans 18 years and over	18,864	7.9%

Selected Social Characteristics, Continued

Disability Status of the Civilian Non-Institutionalized Population		
Total civilian noninstitutionalized population	300,980	100%
Civilian with a disability	44,193	14.7%
Under 18 years	68,504	22.8%
Under 18 years with a disability	3,980	1.3%
18 to 64 years	179,608	59.7%
18 to 64 years with a disability	21,056	7.0%
65 Years and over	52,868	17.6%
65 Years and over with a disability	19,157	6.4%

Selected Economic Characteristics

Employment Status		
Population 16 years and over	249,363	100%
16 years and over in labor force	147,503	59.2%
16 years and over not in labor force	101,860	40.8%
Females 16 years and over	126,902	100%
Females 16 years and over in labor force	72,469	57.1%
Population living with own children <6 years	20,457	100%
All parents in family in labor force	31,839	70.1%
Class of Worker		
Civilian employed population 16 years and over	140,479	100%
Private wage and salary workers	118,453	84.3%
Government workers	16,290	11.6%
Self-employed workers in own not incorporated business	5,663	4.0%
Unpaid family workers	73	0.1%
Occupations		
Employed civilian population 16 years and over	140,479	100%
Production, transportation, and material moving occupations	20,762	14.8%
Management, business, science, and art occupations	46,849	33.3%
Sales and office occupations	33,979	24.2%
Service occupations	27,001	19.2%
Natural resources, construction, and maintenance occupations	11,888	8.5%
Leading Industries		
Employed civilian population 16 years and over	140,479	100%
Educational, health and social services	34,538	24.6%
Manufacturing	22,889	16.3%
Trade (retail and wholesale)	21,927	15.7%
Arts, entertainment, recreation, accommodation, and food services	13,076	9.3%
Professional, scientific, management, administrative, and waste management services	12,706	9.0%
Construction	7,540	5.4%
Finance, insurance, real estate and rental and leasing	7,421	5.3%
Transportation and warehousing, and utilities	5,693	4.1%
Other services (except public administration)	5,778	4.1%
Public administration	5,452	3.9%
Information	2,432	1.7%
Agriculture, forestry, fishing and hunting, and mining	1,027	0.7%

Selected Economic Characteristics, Continued

Income in 2017		
Households	120,394	100%
< \$10,000	8,756	7.3%
\$10,000 to \$14,999	6,045	5.0%
\$15,000 to \$24,999	12,555	10.4%
\$25,000 to \$34,999	12,757	10.6%
\$35,000 to \$49,999	14,599	12.1%
\$50,000 to \$74,999	22,226	18.5%
\$75,000 to \$99,999	17,226	14.3%
\$100,000 to \$149,999	15,935	13.2%
\$150,000 to \$199,999	6,236	5.2%
\$200,000 or more	4,099	3.4%
Median household income	\$54,932	N/A
Income in 2017		
Families	80,582	100%
< \$10,000	3,787	4.7%
\$10,000 to \$14,999	2,382	3.0%
\$15,000 to \$24,999	5,168	6.4%
\$25,000 to \$34,999	6,447	8.0%
\$35,000 to \$49,999	8,808	10.9%
\$50,000 to \$74,999	16,533	20.5%
\$75,000 to \$99,999	14,710	18.3%
\$100,000 to \$149,999	13,539	16.8%
\$150,000 to \$199,999	5,588	6.9%
\$200,000 or more	3,620	4.5%
Median family income	\$70,345	N/A
Per capita income in 2017	\$28,525	N/A
Poverty Status in 2017		
Families	N/A	10.4%
Individuals	N/A	13.9%

(Source: U.S. Census Bureau, 2017)

Bureau of Economic Analysis (BEA) Per Capita Personal Income (PCPI) Figures

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2017	\$44,433	24 th of 88 counties
BEA Per Capita Personal Income 2016	\$42,949	24 th of 88 counties
BEA Per Capita Personal Income 2015	\$41,812	25 th of 88 counties
BEA Per Capita Personal Income 2014	\$40,488	25 th of 88 counties
BEA Per Capita Personal Income 2013	\$39,166	24 th of 88 counties

Source: Bureau of Economic Analysis, https://apps.bea.gov/iTable/index_regional.cfm

Note: BEA PCPI figures are greater than Census figures for comparable years due to deductions for retirement, Medicaid, Medicare payments, and the value of food stamps, among other things.

Poverty Rates 2012-2016, 5-year averages

Category	Lorain County	Ohio
Population in poverty	14.0%	15.4%
< 125% FPL (%)	18.3%	19.9%
< 150% FPL (%)	22.6%	24.3%
< 200% FPL (%)	30.1%	33.3%
Population in poverty (2001)	9.3%	10.3%

(Source: *The Ohio Poverty Report*, Ohio Development Services Agency, February 2018, <http://www.development.ohio.gov/files/research/P7005.pdf>)

Employment Statistics

Category	Lorain County	Ohio
Labor Force	151,600	5,756,900
Employed	144,400	5,519,700
Unemployed	7,200	237,200
Unemployment Rate* in November 2018	4.8	4.1
Unemployment Rate* in October 2018	4.7	4.3
Unemployment Rate* in November 2017	4.8	4.4

*Rate equals unemployment divided by labor force.

(Source: Ohio Department of Job and Family Services, November 2018, <http://ohiolmi.com/laus/OhioCivilianLaborForceEstimates.pdf>)

Estimated Poverty Status in 2016

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
Lorain County				
All ages in poverty	36,828	32,963 to 40,693	12.4%	11.1 to 13.7
Ages 0-17 in poverty	12,114	10,434 to 13,794	17.9%	15.4 to 20.4
Ages 5-17 in families in poverty	7,532	6,110 to 8,954	15.0%	12.2 to 17.8
Median household income	\$54,951	\$52,730 to \$57,172		
Ohio				
All ages in poverty	1,639,636	1,614,177 to 1,665,095	14.5%	14.3 to 14.7
Ages 0-17 in poverty	521,730	506,894 to 536,566	20.4%	19.8 to 21.0
Ages 5-17 in families in poverty	348,713	335,691 to 361,735	18.7%	18.0 to 19.4
Median household income	\$ 52,357	\$52,083 to \$52,631		
United States				
All ages in poverty	44,268,996	44,022,086 to 44,515,906	14.0%	13.9 to 14.1
Ages 0-17 in poverty	14,115,713	13,976,345 to 14,255,081	19.5%	19.3 to 19.7
Ages 5-17 in families in poverty	9,648,486	9,548,767 to 9,748,205	18.3%	18.1 to 18.5
Median household income	57,617	\$57,502 to \$57,732		

(Source: U.S. Census Bureau, 2016 Poverty and Median Income Estimates, <https://www.census.gov/data/datasets/2016/demo/saipe/2016-state-and-county.html>)

Federal Poverty Thresholds in 2017 by Size of Family and Number of Related Children Under 18 Years of Age

Size of Family Unit	No Children	One Child	Two Children	Three Children	Four Children	Five Children
1 Person <65 years	\$ 12,752					
1 Person 65 and >	\$ 11,756					
2 people Householder < 65 years	\$ 16,414	\$16,895				
2 People Householder 65 and >	\$14,816	\$16,831				
3 People	\$19,173	\$19,730	\$19,749			
4 People	\$25,283	\$25,696	\$24,858	\$24,944		
5 People	\$30,490	\$30,933	\$29,986	\$29,253	\$28,805	
6 People	\$35,069	\$35,208	\$34,482	\$33,787	\$32,753	\$32,140
7 People	\$40,351	\$40,603	\$39,734	\$39,129	\$38,001	\$36,685
8 People	\$45,129	\$45,528	\$44,708	\$43,990	\$42,972	\$41,678
9 People or >	\$54,287	\$54,550	\$53,825	\$53,216	\$52,216	\$50,840

(Source: U. S. Census Bureau, Poverty Thresholds 2017, <https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html>)

Appendix VI: County Health Rankings

	Lorain County	Ohio	U.S.
Health Outcomes			
Premature death. Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2014-2017)	7,900	8,500	6,900
Overall health. Percentage of adults reporting fair or poor health (age-adjusted) (2016)	17%	17%	16%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2016)	4.0	4.0	3.7
Mental health. Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2016)	4.0	4.3	3.8
Maternal and infant health. Percentage of live births with low birthweight (< 2500 grams) (2011-2017)	8%	9%	8%
Health Behaviors			
Tobacco. Percentage of adults who are current smokers (2016)	20%	23%	17%
Obesity. Percentage of adults that report a BMI of 30 or more (2015)	33%	32%	29%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2015-2016)	7.6	6.7	7.7
Physical inactivity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2015)	25%	25%	22%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2018)	90%	84%	84%
Drug and alcohol abuse. Percentage of adults reporting binge or heavy drinking (2016)	17%	19%	18%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2013-2017)	47%	33%	29%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2016)	405.4	520.9	497.3
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2011-2017)	25	26	25

(Source: 2019 County Health Rankings for Lorain County, Ohio, and U.S. data)

	Lorain County	Ohio	U.S.
Clinical Care			
Coverage and affordability. Percentage of population under age 65 without health insurance (2016)	6%	7%	10%
Access to health care/medical care. Ratio of population to primary care physicians (2016)	1,850:1	1,300:1	1,330:1
Access to dental care. Ratio of population to dentists (2017)	2,050:1	1,620:1	1,460:1
Access to behavioral health care. Ratio of population to mental health providers (2018)	680:1	470:1	440:1
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2016)	5,518	5,135	4,520
Mammography screening. Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2016)	45%	41%	41%
Flu vaccinations. Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination (2016)	49%	47%	45%
Social and Economic Environment			
Education. Percentage of ninth-grade cohort that graduates in four years (2017-2018)	90%	85%	85%
Education. Percentage of adults ages 25-44 years with some post-secondary education (2013-2017)	65%	65%	65%
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2017)	6.2%	5%	4%
Employment, poverty, and income. Percentage of children under age 18 in poverty (2017)	20%	20%	18%
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2013-2017)	4.4	4.8	4.9
Family and social support. Percentage of children that live in a household headed by single parent (2013-2017)	38%	36%	33%
Family and social support. Number of membership associations per 10,000 population (2016)	10	11.2	9
Violence. Number of reported violent crime offenses per 100,000 population (2014-2016)	164	293	386
Injury. Number of deaths due to injury per 100,000 population (2013-2017)	87	82	67

(Source: 2019 County Health Rankings for Lorain County, Ohio, and U.S. data)

	Lorain County	Ohio	U.S.
Physical Environment			
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2014)	11.2	11.5	8.6
Air, water, and toxic substances. Indicator of the presence of health-related drinking water violations. Yes - indicates the presence of a violation, No - indicates no violation (2017)	Yes	N/A	N/A
Housing. Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (2011-2015)	14%	15%	19%
Transportation. Percentage of the workforce that drives alone to work (2013-2017)	84%	83%	76%
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2013-2017)	36%	30%	35%

(Source: 2019 County Health Rankings for Lorain County, Ohio, and U.S. data)
N/A – Data Not Available

Appendix VII: Community Stakeholder Perceptions

Lorain County Community Event
Thursday, May 23rd, 2019

1. What surprised you the most?

- Youth data (2)
- Weight status data (2)
- Reduction of smoking in Lorain County (2)
- Percentage of adults who did not know if vaping was harmful (2)
- Use of the Internet to seek health care advice
- Mental health statistics
- How difficult it is to make widespread changes – perhaps set more realistic goals
- Percentage of adults going out of the county for doctor visits
- Increase in drinking and driving
- Cigarette use for the low-income population
- Percentage of youth contemplating suicide
- The progress in some areas but not others

2. What would you like to see covered in the report next time?

- Breakdown of data by race/ethnicity (3)
- More on senior issues – loneliness, cognitive assessments, dementia, etc. (2)
- Data on Spanish speaking adults
- Access to affordable medications/diabetic equipment
- Access to oxygen if needed and not covered by insurance
- Gender identity issues- increasing distress in the community
- Integrative health practices (massage, chiropractor, acupuncture)
- Resources – do people know what resources are available?
- Data on dementia and cognitive assessments
- Data on how many respondents have seen a mental health provider and why/why not
- Homeless population
- Transportation issues
- Reading level of survey – 8th grade is preferred
- More causation/connection between the data sets
- Demographic data broken down into education levels

3. What will you or your organization do with this data?

- Strategic planning purposes (2)
- Assist in the plan for goals/2020 priorities (2)
- Assist with alignment efforts between public health and hospital systems
- Implement health education on topics of highest concern
- Look where the community foundation of Lorain County can target grants to impact these areas
- Compare to community assessments
- Review with youth groups as part of their needs assessment
- Promote mental health benefits of fresh air/parks
- Incorporate data into diversity/inclusion projects
- Develop work groups to improve the 5 main areas/participate in community implementation strategies
- Community benefit programming
- Education for opioid/alcohol use in the community

4. Based on the community health needs assessment, what health topics do you see as the most important?

- Mental health (7)
- Substance abuse (alcohol, tobacco, drug abuse, opioids) (7)
- Infant mortality (5)
- Obesity (4)
- Youth depression (2)
- Youth vaping and perception of harm (2)
- Access to care (2)
- Suicide prevention among youth
- Bullying
- Smoking
- Chronic disease
- Physical activity
- Social determinants of health
- Low income population utilizing resources
- Breastfeeding education and support

5. In your opinion, what is the best way to communicate the information from the community health needs assessment to the rest of the public?

- Social media campaigns (5)
- Local schools and colleges (3)
- Community events and forums
- Use fact cards to distribute to the public
- Infographics
- Professionals need to create easy to read documents (1-2 pages) that highlight data and strategies and what is the desired outcome
- Local news
- Online
- Targeted approaches and willingness to share in the conversation
- Using local research to promote programs
- Through public organizations
- A blog for some members of society
- Printed work – weekly column of report divided over period of time for seniors
- Multifaceted approaches
- Businesses/HR
- Distribute information to non-profits that were not in attendance

6. What are some barriers people may face regarding the issues identified?

- Poverty/financial barriers (5)
- Transportation (5)
- Social stigma (3)
- Childcare
- Reaching students in schools with their already busy schedules/testing
- Health care access
- Homeless
- Safe housing
- Support
- Social determinants of health
- Lack of parenting
- Language barriers

7. What are some barriers people may face regarding the issues identified? (continued)

- Culture
- Fear of the medical community
- Education
- Adverse childhood experiences (ACEs)
- Racism
- Welcoming approaches
- People have to solve multiple issues, daily, and consistent healthy behaviors may not make it into daily routines

8. Are there any groups or agencies you think would be valuable resources or partners to work towards the priority health issues?

- School systems
- Policy makers
- Philanthropic community
- City council
- Economic development
- County employers
- Alzheimer's Association
- YWCA
- Lorain County Urban League
- Managed care plans

Appendix VIII: Potential Resources Available

Priorities

Lorain County is focused on the following five priority areas: chronic disease, maternal and child health, mental health, substance abuse and cancer. Additionally, collaborating partners will focus their efforts and strategies on the following cross-cutting factors that affect all priority areas: public health system, prevention, and health behaviors; and health care system and access.

The following is a list of potential resources available to meet identified community health priorities:

Priority Area	Coordinating Agencies and Team Members
Chronic Disease	<ul style="list-style-type: none"> • 2-1-1 • Amherst Exempted Village School Districts • American Diabetes Association • Avon recreational center • Avon RH, LLC (UH Avon Rehabilitation Hospital) • Boys and Girls Club of Lorain • Cleveland Clinic Avon Hospital • County-wide Step it Up Walking Challenge • Current prediabetes risk assessments • El Centro de Servicios Sociales, Inc. • Local businesses • Local farmers markets and grocery stores • Lorain County Health and Dentistry • Lorain County Metro Parks • Lorain County Public Health • Mercy Health Lorain Hospital • Second Harvest Food Bank of North Central Ohio • Specialty Hospital of Lorain • United Way of Greater Lorain County • United We Sweat Campaign • University Hospitals Elyria Medical Center • USDA, MyPlate initiative • Youth movement classes
Maternal and Child Health	<ul style="list-style-type: none"> • Current pregnancy centering models • Elyria City Health District • Help Me Grow • Lorain County Health and Dentistry • Lorain County Health Systems • Lorain County Neighborhood Alliance • Mercy Health - Resource Mothers • Ohio Guidestone • WIC services
Mental Health	<ul style="list-style-type: none"> • Ashland County mentoring program • Educational Service Center of Lorain County • Evidence-based social and emotional programs • Existing community-based trainings (QPR, Working Minds, etc.) • Existing law enforcement partnerships • Healthy Kids Achieve More Network • Local school districts • Lorain County Suicide Prevention Coalition • Lorain Public Health • Mental Health, Addiction, and Recovery Services Board of Lorain County

	<ul style="list-style-type: none"> • ODE social and emotional instruction resources • PHQ-9 screening tool • Specialty Hospital of Lorain
Priority Area	Coordinating Agencies and Team Members
Substance Abuse	<ul style="list-style-type: none"> • Current Lorain Public Health tobacco grant • Current tobacco ordinances • County tobacco cessation offerings • Communities That Care of Lorain County • Current Lorain County Community college certificate offerings • Lorain County Alcohol, Drug and Addiction Services • Lorain County Community College • Lorain County Public Health • Specialty Hospital of Lorain • University Hospitals Elyria Medical Center (Opioid Taskforce)
Cancer	<ul style="list-style-type: none"> • Lorain County Public Health • Oncology social workers • American Cancer Society representatives • Cancer specialists (knowledge of acceptable recommendations)